



Alabama HIV/AIDS Data – 2012 Summary

- At the end of 2012, nearly 12,000 Alabama residents were known to be living with HIV and 41% of those had progressed to AIDS. The CDC estimates 18% of persons infected with HIV are unaware of their status. Applying this prevalence estimate suggests 14,426 Alabama residents may be infected with HIV.
- The majority of new HIV cases occur among young adults ages 20 to 29 years.
- 661 newly diagnosed HIV infections were reported among Alabama residents in 2012. This number is an underestimate as it does not account for individuals unaware of their status.
- There are persons living with HIV in every county in Alabama. The number continues to increase each year. In 2012, more HIV cases were diagnosed in Jefferson County than any other county. However, the rate of HIV diagnoses was greatest in Montgomery County.
- African Americans continue to be disproportionately affected by HIV in Alabama. Comprising 26% of the population, 68% of newly diagnosed HIV infections occurred in African Americans during 2012. African American males were 6.5 times as likely to be diagnosed with HIV as White males while the rate of HIV in African American females was 12.5 times that of White females.
- While male-to-male sexual activity continues to be the predominant mode of exposure for HIV infection, heterosexual contact is the second most common mode of exposure.
- Sixty-six percent of newly diagnosed HIV infections were linked to care in 2012. However, Alabama's estimated unmet need is 51% as 5,996 of the 11,815 persons living with HIV as of December 31, 2012 did not access care during 2012.

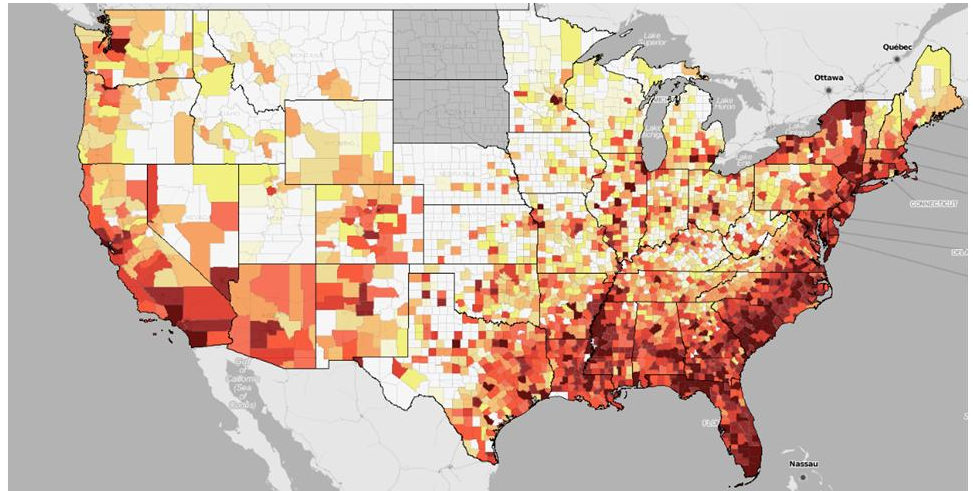
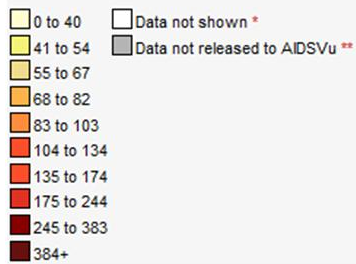


About MAO

- Medical AIDS Outreach of Alabama, founded in 1987, provides community prevention education, quality services and compassionate care to those infected and/or affected by HIV/AIDS.
- We take a holistic approach to treatment, with the goal of eliminating barriers in order to link and retain individuals in a continuum of care.
- Our services include: social services, medical treatment, medication assistance, pharmaceutical consultations, mental health counseling, patient education, HIV testing, food bank services, and Spanish-English interpretation and translation services for the hearing impaired.
- Through a grant from AIDS United, we began forming a telemedicine network in 2011 with three urban hub locations in Montgomery, Tuscaloosa (Whatley Health Services), and Huntsville (AIDS Action Coalition). These hub sites were then linked via telemedicine to rural clinics in Selma, Sipsy, Greensboro, Florence, and Dothan. Our Dothan clinic now serves as a hub for our expansion funded by the CDC through the Alabama Department of Public Health.
- We currently provide medical treatment, patient education, mental health counseling, and pharmaceutical consultations via telemedicine to our rural clinics from urban hub locations.
- Our goal for 2014 is to expand our telemedicine services to include case management and interpretation services. We are also in the process of expanding our telemedicine network to cover a wider geographic area. This year, we plan to open a new telemedicine clinic in Hayneville to serve Lowndes County. The next phase of our expansion will focus on underserved counties in western Alabama, primarily Perry and Wilcox.
- Today we have four hub sites providing telemedicine services to six rural clinics.
- Since the project's inception, we have linked more than 200 individuals to care with telemedicine. Of those 200, more than 90% have been retained in care.*
- Using AIDSVu mapping services, MAO has identified rural locations with the greatest need for HIV care. Currently, MAO serves 26 counties covering a third of the state's geography and nearly half of Alabama's HIV positive population. Our approach to targeting geographic locations and using telemedicine to bring care to underserved rural clients was recognized by the White House in the National HIV/AIDS Strategy, published in December 2013.
- In 2013, MAO enrolled in a study with the University of Alabama at Birmingham to explore the use of telemedicine as a means to improve depression and adherence in HIV positive women in the rural south. This study involves the use of Wisepill devices, which track medication adherence by transmitting a signal each time the patient opens the device to take medication.



2010 Rate of adults/adolescents living with an HIV diagnosis per 100,000 population



*HIV diagnosis per 100,000 population

