Reaching People with HIV (PWH) in Rural United States (U.S.)

In the U.S. and its territories, rurality spans from Alaska to Guam and the US Virgin Islands.

Overall, rural residents are more likely to:
- Live in poverty
- Lack health insurance
- Have higher mortality rates

Rural residents are less likely to have been HIV tested and more likely to have progressed disease when diagnosed.

For PWH in rural communities:
- 46% retained in care
- 50% virally suppressed

Barriers to accessing HIV care in rural communities:
- Great distance to services and limited transportation
- Limited HIV providers and support services
- Cost of care
- Stigma and discrimination
- Confidentiality concerns
- Limited access to substance use treatment and harm reduction services

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Addressing barriers to HIV care in rural communities 6,7,8

1. Telehealth can be key for delivering HIV care in rural communities. It connects PWH to providers by removing travel and stigma-related delays in care.

2. Transportation & Travel
   - Utilize community planning groups to assess the need for transportation services.
   - Tap into existing resources like social service agencies, faith groups, and local government funding support.
   - Connect client to a Ryan White HIV/AIDS Program-funded clinic (https://findhivcare.hrsa.gov/).

3. Stigma & Denial
   - Integrate HIV care into primary care for all clients.
   - Make the clinic welcoming without use of HIV-specific identifiers.
   - Use a confidential form of communication agreed upon by the client.
   - Use client support programs to ease clients' feelings of anxiety and isolation.

4. AETC Program Free Clinical Training & Resources
   - national, regional and local training and technical assistance
   - real-time clinician-clinician consultation
   - self-directed curricula, apps, and more

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