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Study examines links between spending on social services and AIDS deaths in U.S.

Published on February 4, 2016 at 1:49 PM

Despite considerable advances in the prevention and treatment of HIV/AIDS over the past 30 years, HIV infection rates have remained stagnant in the United States for the past decade. A study by researchers at the Yale Global Health Leadership Institute (GHLI) examines links between spending on social services and public health and AIDS deaths in the United States. The study was published online in the journal *AIDS*.

The researchers reviewed data between 2000 and 2009 from all 50 states regarding HIV/AIDS case rates and AIDS deaths. They found that states with higher spending on social services and public health -- such as education and income support -- per person living in poverty (according to the federal poverty threshold) had significantly lower HIV/AIDS case rates and fewer AIDS deaths.

"Our findings highlight the potentially critical importance of spending on social services as an element of HIV prevention and treatment to reduce HIV/AIDS diagnoses and AIDS deaths," said Kristina Talbert-Slagle, lead study author and senior scientific officer at Yale GHLI. "It is interesting to see how much HIV, a virus, is affected by social determinants. We know heart disease and diabetes can be influenced, but we don't often recognize how much rates of infectious disease can be influenced by social factors."

Previous research has demonstrated that insufficient income, limited transportation, inadequate housing, and food insecurity can limit access to and ongoing engagement in the care and treatment of people living with HIV and AIDS, as well as their adherence to medical routines. The Yale GHLI study is the first to establish a significant association between state-level social services investments and clinical health outcomes for people at risk of HIV infection or for those living with HIV/AIDS.

This work defines an element, often missing from health policy discussions, in improving outcomes for this important population and underscores the importance of social factors in affecting health outcomes both for people at risk of becoming infected with HIV and for those living with HIV or AIDS, said the researchers.

"HIV and AIDS still affect a significant percentage of our population. We need to do something different to reach those people who are not being treated and to generally prevent new infections. Perhaps analyzing where money is being spent is the start for new ways to address HIV," says Talbert-Slagle.

Source:
Yale University
