HIV/AIDS IN NEW JERSEY
2010

While the Federal government’s investment in treatment and research is helping people with HIV/AIDS live longer and more productive lives, HIV continues to spread at a staggering national rate. The latest incidence data from the Centers for Disease Control and Prevention (CDC) estimates nationally there were 48,100 new HIV infections in 2009. The graph below depicts the HIV/AIDS epidemic in New Jersey through December 31, 2010 according the NJ Department of Health and Senior Services. Note that the following HIV/AIDS statistics only represent a portion of the epidemic in the U.S.—those cases that have been both confirmed through testing and reported.

Reported AIDS Cases

<table>
<thead>
<tr>
<th>Year</th>
<th>Number Currently Living with HIV (not AIDS)</th>
<th>Number Currently Living with AIDS</th>
<th>Number Currently Living with HIV/AIDS</th>
<th>Cumulative AIDS Cases</th>
</tr>
</thead>
<tbody>
<tr>
<td>2006</td>
<td>16,293</td>
<td>17,330</td>
<td>33,623</td>
<td>17,330</td>
</tr>
<tr>
<td>2007</td>
<td>16,815</td>
<td>17,655</td>
<td>34,470</td>
<td>35,012</td>
</tr>
<tr>
<td>2009</td>
<td>16,649</td>
<td>18,363</td>
<td>35,012</td>
<td>53,420</td>
</tr>
<tr>
<td>2010</td>
<td>16,612</td>
<td>19,076</td>
<td>35,688</td>
<td>54,574</td>
</tr>
</tbody>
</table>

*2008*
Demographic Trends

The HIV/AIDS epidemic disproportionately affects those at risk from social factors such as disparity and discrimination. The following demographic numbers are from the New Jersey Department of Health and Senior Services as of December 31, 2010.

**Persons Living with HIV/AIDS by Gender, 2010**

- Male: 65%
- Female: 35%

**Persons Living with HIV/AIDS by Race/Ethnicity, 2010**

<table>
<thead>
<tr>
<th>Race/Ethnicity</th>
<th>Persons Living with HIV/AIDS</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Black</td>
<td>19,150</td>
<td>54%</td>
</tr>
<tr>
<td>Hispanic</td>
<td>8,047</td>
<td>23%</td>
</tr>
<tr>
<td>White</td>
<td>7,903</td>
<td>22%</td>
</tr>
<tr>
<td>Asian/Pacific Islander</td>
<td>350</td>
<td>1%</td>
</tr>
<tr>
<td>Other/Unknown</td>
<td>238</td>
<td>&lt;1%</td>
</tr>
</tbody>
</table>

**Counties**

**Persons Living with HIV/AIDS by Major County, 2010**

<table>
<thead>
<tr>
<th>County</th>
<th>Persons Living with HIV/AIDS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Essex County</td>
<td>9,644</td>
</tr>
<tr>
<td>Hudson County</td>
<td>4,599</td>
</tr>
<tr>
<td>Union County</td>
<td>2,628</td>
</tr>
<tr>
<td>Passaic County</td>
<td>2,546</td>
</tr>
<tr>
<td>Middlesex County</td>
<td>2,017</td>
</tr>
<tr>
<td>Monmouth County</td>
<td>1,784</td>
</tr>
<tr>
<td>Camden County</td>
<td>1,721</td>
</tr>
<tr>
<td>Bergen County</td>
<td>1,562</td>
</tr>
<tr>
<td>Mercer County</td>
<td>1,497</td>
</tr>
<tr>
<td>Dept. of Corrections</td>
<td>1,575</td>
</tr>
</tbody>
</table>

Last Updated: July 29, 2011
FISCAL YEAR 2010 FUNDING FOR HIV/AIDS IN NEW JERSEY

At-a-Glance

<table>
<thead>
<tr>
<th>Program</th>
<th>Department</th>
<th>Agency</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>HIV Prevention</td>
<td>Health &amp; Human Services</td>
<td>Centers for Disease Control &amp; Prev.</td>
<td>$22,455,047</td>
</tr>
<tr>
<td>Ryan White - Part A</td>
<td>Health &amp; Human Services</td>
<td>Health Resources &amp; Services Admin</td>
<td>$27,519,363</td>
</tr>
<tr>
<td>Ryan White - Part B</td>
<td>Health &amp; Human Services</td>
<td>Health Resources &amp; Services Admin</td>
<td>$45,062,969</td>
</tr>
<tr>
<td>Base</td>
<td></td>
<td></td>
<td>$12,392,196</td>
</tr>
<tr>
<td>ADAP</td>
<td></td>
<td></td>
<td>$32,258,048</td>
</tr>
<tr>
<td>Ryan White - Part C</td>
<td>Health &amp; Human Services</td>
<td>Health Resources &amp; Services Admin</td>
<td>$5,789,964</td>
</tr>
<tr>
<td>Ryan White - Part D</td>
<td>Health &amp; Human Services</td>
<td>Health Resources &amp; Services Admin</td>
<td>$2,298,550</td>
</tr>
<tr>
<td>AETC</td>
<td>Health &amp; Human Services</td>
<td>Health Resources &amp; Services Admin</td>
<td>$810,000 (national)</td>
</tr>
<tr>
<td>Ryan White - Dental</td>
<td>Health &amp; Human Services</td>
<td>Health Resources &amp; Services Admin</td>
<td>$576,895</td>
</tr>
<tr>
<td>Ryan White - SPNS</td>
<td>Health &amp; Human Services</td>
<td>Health Resources &amp; Services Admin</td>
<td>$428,696</td>
</tr>
<tr>
<td>HOPWA</td>
<td>Housing &amp; Urban Dev.</td>
<td>Office of HIV/AIDS Housing</td>
<td>$15,658,279</td>
</tr>
</tbody>
</table>

Prevention
The Centers for Disease Control and Prevention provided New Jersey with $22,455,047 for HIV prevention programs in 2010. These funds were allocated to state and local health departments and community-based organizations to finance counseling, testing programs, health education/risk reduction activities, and surveillance/monitoring programs.

Ryan White CARE Act
The Ryan White Comprehensive AIDS Resources Emergency (CARE) Act, enacted in 1990 and reauthorized in 1996, 2000, 2006, and 2009 is the centerpiece of the federal government’s efforts to improve the quality and availability of care for medically underserved individuals and families affected by HIV/AIDS. The CARE Act, administered by the HIV/AIDS Bureau of the Health Resources and Services Administration, provides funding to states, territories, and other public and private nonprofit entities to develop, organize, coordinate, and operate more effective and cost-efficient systems for the delivery of essential health care and support services to people living with HIV/AIDS and their families.
• **Part A – Eligible Metropolitan Areas (EMAs) and Transitional Grant Areas (TGAs):** Part A provides funding to Eligible Metropolitan Areas (EMAs) and Transitional Grant Areas (TGAs), areas that are disproportionately affected by the HIV epidemic. To be considered EMAs, metropolitan areas must have more than 2,000 cumulative AIDS cases over the last five years and a population of 50,000 or more. Cities are considered TGAs if they have at least 1,000, but not more than 1,999, cumulative AIDS cases in the last five years, and a population of 50,000 or more.

In FY 2010, New Jersey received $27,519,363 in Part A funding. Of that, 14,416,548 went to its EMAs (Newark) and $13,102,815 went to its TGAs (Bergen-Passaic, Jersey City, Middlesex-Somerset-Hunterdon, Vineland-Millville-Bridgeton).

• **Part B – States and Territories:** Part B helps state health departments improve the quality, availability, and organization of HIV health care and support services. In addition to base grant, Part B funds support the AIDS Drug Assistance Program (ADAP) which provides medications to individuals with low income, the Minority AIDS Initiative (MAI), and Supplemental Grants for Emerging Communities (EC), cities reporting between 500 and 1,999 cumulative AIDS cases in the past five years.

In FY 2010, the state received $45,062,969 in CARE Act Part B funds.

• **Part C – Early Intervention Services:** Part C supports competitive grants to provide medical treatment and medical support services for people living with HIV including HIV testing, early intervention services, risk reduction counseling, case management, outreach, oral health, nutrition, and mental health services. Part C supports Early Intervention Services (EIS) grants that provide services for HIV positive individuals with low income who are uninsured or underinsured as well as grants for planning and capacity building to help rural or underserved communities develop high-quality HIV primary care. In FY 2010, the state received $5,789,964 in Part C funds.

• **Part D – Capacity Building and Women, Infants, Children, Youth and Their Families:** Part D focuses on the operation and development of primary care systems and social services for women and youth, who represent a growing share of the epidemic. In FY 2010, New Jersey received $2,298,550 in Part D funds.

• **Other CARE Act Funding Programs:**

  **AIDS Education and Training Centers (AETC) Program:** AETCs provide training, consultation, and information to HIV health care providers through a network of 1 international center; 5 national centers (the AETC National
Resource Center, the National HIV/AIDS Clinicians’ Consultation Center, the National Evaluation AETC, the AETC National Center for HIV Care in Minority Communities, and the AETC National Multicultural Center); 11 regional centers, each of which serves between two and ten states and/or territories; and over 130 local performance sites across all 50 states, the District of Columbia, and the U.S. territories. Funding is allocated to each of the 17 national and regional centers, which then distribute resources to local performance sites in each state. Note that international, national, and local AETC programs may receive funding from HRSA through non-Ryan White grants.

Total Statewide AETC Fundingix: $810,000

AETCsx

National:
AETC National Resource Center
François-Xavier Bagnoud Center
School of Nursing, University of Medicine and Dentistry of New Jersey
65 Bergen Street, 8th floor
Newark, NJ, 07101
Email: info@aidsetc.org
Web Site: www.aidsetc.org

Regional:
New York/New Jersey AIDS Education and Training Center
Columbia University, Department of Psychiatry
HIV Center
100 Haven Avenue #31G
New York, NY, 10032
Email: nynjaetc@columbia.edu
Phone: 212-304-5530
Fax: 212-304-5555
Web Site: www.nynjaetc.org
Serves: NJ, NY

Local:
François-Xavier Bagnoud Center
University of Medicine and Dentistry
65 Bergen Street, 8th Floor
Newark, NJ, 07101
Voorhees, NJ, 08043
ID Care
105 Raidar Boulevard, Suite 101
Hillsborough, NJ, 08844

Garden State Infectious Disease Association
709 Haddonfield-Berlin Road
Voorhees, NJ, 08043
ID Care
105 Raidar Boulevard, Suite 101
Hillsborough, NJ, 08844

Raritan Bay Medical Center
530 New Brunswick Avenue
Perth Amboy, NJ, 08861

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**Dental Program**: The Ryan White Care Act Dental program provides funding to the Community Based Dental Program, which aims to increase HIV-positive individuals’ access to oral health care services while providing education and clinical training for dental care providers. The Dental program also provides funding for a Dental Reimbursement Program which reimburses dental schools, postdoctoral dental education programs, and dental hygiene programs for oral health care of individuals living with HIV.

In FY 2010, the total funding allocated to the state’s dental program was $576,895. Of that, $186,947 went to the Dental Reimbursement Program and $389,948 went to the Community Based Dental Program.\(^{xi}\)

**Grant Recipients in FY 2010:**

<table>
<thead>
<tr>
<th>Dental Reimbursement</th>
</tr>
</thead>
<tbody>
<tr>
<td>Center for Dentistry at HUMC</td>
</tr>
<tr>
<td>UMDNJ—New Jersey Dental School</td>
</tr>
<tr>
<td>St. Joseph Hospital and Medical Center</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Community Based Dental Program</th>
</tr>
</thead>
<tbody>
<tr>
<td>University of Medicine and Dentistry of New Jersey</td>
</tr>
</tbody>
</table>

**Special Projects of National Significance (SPNS)**: SPNS is the research and development aspect of the Ryan White CARE Act. SPNS is responsible for assessing the effectiveness of certain care models, providing support for innovative models of HIV/AIDS service delivery and for assisting the replication of effective models across the nation.

**Total SPNS Funding**\(^{xii}\):

$428,696

**Housing Opportunities for Persons with AIDS**
The Housing Opportunities for Persons with AIDS program (HOPWA) provides housing assistance and related supportive services for HIV positive persons with low income and their families. Funding is provided in the form of formula grants, which are awarded to eligible states and cities on behalf of their metropolitan areas, and competitive grants, which are awarded to model projects or programs.

The Department of Housing and Urban Development (HUD) provided the state a total of $15,658,279 for HOPWA funding in FY 2010.\(^{xiii}\)

<table>
<thead>
<tr>
<th>HOPWA Funding Type</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Formula</td>
<td>$14,361,213</td>
</tr>
<tr>
<td>Competitive</td>
<td>$1,297,066</td>
</tr>
</tbody>
</table>
State Issues

Syringe Exchange – In 2009, the nationwide ban on a state’s use of federal funds for Syringe Exchange Programs (SEPs) was removed through appropriations legislation and signed by President Barack Obama. Numerous studies have indicated that SEPs offer vital care and services to intravenous drug users and reduce risk behavior. Yet, despite long held support from the CDC, NIH, and the majority of the medical and scientific community, syringe exchange programs remain politically targeted.\textsuperscript{xiv} There are currently exchange programs operating in Atlantic City, Camden, Jersey City, Newark, and Paterson.\textsuperscript{ xv}

Policy and Law

Criminalization of HIV, which is often dependent on known status, creates barriers to testing along with discouraging disclosure and fostering stigma. New Jersey has one HIV-specific statute that allows for criminal prosecution and HIV has been applied in prosecution under non-HIV specific criminal statutes. Recently, only one publicized prosecution has been made, however in the past HIV has been used for egregious convictions such as a twenty-five year sentence for an HIV-positive inmate who bit a corrections officer. Transmission of HIV through biting is only a hypothetical and unlikely possibility.\textsuperscript{xvi}

AIDS United Partners and Grantees

AIDS United promotes collaborative local planning and provides strategic grants and technical support to more than 400 direct service organizations annually through our Community Partnerships, Public Policy Committee, and targeted initiatives such as AmeriCorps, Access to Care (A2C), GENERATIONS/Women’s Initiative, Southern REACH, Puerto Rico grantmaking, and the Syringe Access Fund.

- Camden Area Health Education Center, Inc. (Camden AHEC), Camden (Syringe Access)
- New Jersey AIDS Partnership, Morristown (Community Partnerships)
- Paterson Counseling Center, Inc., Paterson (Syringe Access)
- South Jersey Against AIDS, Inc. (DBA South Jersey AIDS Alliance), Atlantic City (Syringe Access)

State AIDS Director

AIDS Director
Larry Ganges, MD, MPH
Assistant Commissioner
Division of HIV/AIDS Services
New Jersey Dept. of Health and Senior Services
P.O. Box 363
Trenton, New Jersey 08625
Phone: 609-984-5874
About Us
The mission of AIDS United is to end the AIDS epidemic in the United States. We will achieve this goal through national, regional and local policy/advocacy, strategic grantmaking, and organizational capacity building. With partners throughout the country, we will work to ensure that people living with and affected by HIV/AIDS have access to the prevention and care services they need and deserve. AIDS United combines private-sector fundraising, philanthropy, coalition building, public policy expertise, and advocacy — as well as a network of passionate local and state partners — to most effectively and efficiently respond to the epidemic in the communities most impacted by it.

AIDS United
Jimmy Schneidewind
1424 K St. NW, Suite 200
Washington, DC 20005
Phone: (202) 408-4848
Fax: (202) 408-1818
www.aidsunited.org

1 New Jersey HIV/AIDS Report (December 31, 2010), (December 31, 2009), (December 31, 2007), (December 31, 2006), Division of HIV, STD and TB Services, Public Health Services Branch, New Jersey Department of Health and Senior Services, available from: http://www.state.nj.us/health/aids/aidsqtr.shtml; oral communication with New Jersey Department of Health and Human Services.
4 DHAP HIV Prevention Funding Allocations by State and Dependent Area (Fiscal Year 2010), Centers for Disease Control & Prevention, available from: http://www.cdc.gov/hiv/topics/funding/state-awards/index.htm.