Overview

HIV remains a major public health crisis in the United States.

More than 20 million students are enrolled in colleges and universities across America. On every campus, college administrators, campus health care providers, and student leaders can implement HIV policies and programs that confront the crisis and promote awareness, prevention, treatment, and care.

Colleges and universities vary in size, population, demographics, and resource allocation – so this guide does not embrace a one-size-fits-all approach. Instead, it provides actionable advice for implementing policies and procedures that improve student sexual health.
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What are the Current Realities of HIV in the U.S.?

First, the good news. HIV prevention, treatment, and care have seen major advances. The yearly HIV infection rates in the U.S. is on the decline.¹ The majority of persons living with HIV are aware of their status, and each year more Americans living with HIV are receiving the necessary treatment and care.²

Yet despite this positive outlook, youth aged 14 to 24 continue to be at a high risk for acquiring HIV.³ In 2015, 8,807 14-to-24-year-olds were diagnosed with HIV in the U.S., with 80% (7,084) of those diagnoses occurring in persons aged 20 to 24. But perhaps the biggest issue is that 51% of young people living with HIV did not know their status.⁴

Until recently, few thought college and university students were especially vulnerable to HIV. But the reality is that young adults under 25 are significantly less likely than their older adult counterparts to accurately assess their chances of acquiring HIV. This inaccurate risk perception leads to low rates of HIV testing, a general lack of awareness of HIV status, and a decreased likelihood of seeking HIV-related care.⁵
Why are College and University Students at Higher Risk for Acquiring HIV?

Inadequate sexual health education is a key barrier to increasing HIV awareness and preventing transmission among youth in the United States.

According to the CDC, “The percentage of schools in which students are required to receive instruction on HIV prevention decreased from 64% in 2000 to 41% in 2014.”⁶ Research shows that a lack of accurate sexual health education and perceived risk of HIV transmission among youth can lead to high-risk sexual behaviors.⁷

Complicating the picture is that many students experience a newfound sense of independence and invincibility at college or university that can distort their perceptions of what sexual behaviors are considered high-risk. Researchers have found that college and university students perceive their own HIV risk to be low⁸ because of an illusion of immortality⁹ – typically expressed as, “It won’t happen to me.”

Widespread misperception of risk is among the greatest barriers to advancing HIV prevention, treatment, and care among college and university students because it can lead to ill-informed risk-taking and subsequent HIV transmission.
Why are College and University Students at Higher Risk for Acquiring HIV?

As a Group, College Students are:

More likely to

- Engage in high-risk sexual behaviors e.g., condomless sex without the use of HIV prevention medications like PrEP
- Have multiple sex partners
- Experiment with drugs or alcohol which can impair judgement and lower inhibition

Less likely to

- Get tested for HIV only 24.5% of college students reported being tested for HIV
- Discuss HIV and HIV testing with their partners
Opportunities for Colleges and Universities to Intervene

The following recommendations highlight the many ways that colleges and universities can intervene and promote HIV awareness on their campuses.

Develop and Implement HIV-Inclusive Policies

Clearly articulate the rationale for implementing HIV-inclusive policies at your college or university.

Implementing HIV-inclusive policies is an essential intervention step. Having these policies helps to signal campus priorities. They provide a helpful framework for decision-makers, community members, and other important stakeholders with a helpful frame of reference to better understand (and ultimately support) HIV interventions.

For example, Central College in Pella, Iowa, provides the following policy statement:

All college policies relating to HIV and AIDS foster the same goals:

- To provide education, information and counseling concerning the causes, effects, transmissibility and treatment of HIV and AIDS;
- To safeguard the personal rights of individuals with HIV and AIDS;
- To promote a safe environment for all members of the college community;
- To comply with the requirements of applicable federal and state laws relating to HIV.
Emphasize the Importance of Maintaining Confidentiality and Privacy.

Confidentiality is crucial for people living with HIV. People living with HIV (PLWH) are often subjected to discrimination and mistreatment because of their HIV status. Colleges and universities, if informed of any person living with HIV in their network, should handle this information with the utmost sensitivity and disclose it only when absolutely necessary.

Clearly Articulate a Policy of Non-Discrimination Protecting PLWH Throughout All Areas of Your College or University.

Discrimination on the basis of HIV status is pervasive, so it’s important to ensure all campus institutions and resources are HIV-inclusive. Clear language supporting inclusivity is important to include in the non-discrimination policies of student housing and student health centers.

At a minimum, general non-discrimination policies should:

- Require admissions processes to be “HIV serostatus-blind” (so that one’s HIV status is kept confidential) to prevent discrimination against applicants living with HIV
- Implement housing policies that prevent unnecessary differential treatment of students living with HIV
- Provide housing resources to students living with HIV and the option for private rooms to immunodeficient students so they can preserve their health
- Ensure student health centers do not discriminate against students living with HIV and provide equal and fair access to care and services
- Equip student health centers to provide prevention, treatment, and care services related to HIV
Develop HIV-Inclusive Educational Programming and Initiatives

Incorporate HIV information about sexual health and sexually transmitted infections (STIs) into student orientation, family orientation, and welcome week activities.

Information about HIV and sexual health should be disseminated to students as soon as possible. Orientation and welcome week are times where students at most colleges and universities are a captive audience. Additionally, these events occur early in the academic year, making them ideal for HIV-inclusive sexual health education to be delivered directly to students.

Parents, guardians, and other family members should receive sexual health information separate from their children so that they, too, can be informed—but in a way that does not undermine students’ privacy or their ability to engage the topic further.

Student Orientation/Welcome Week Programming

For many incoming students, welcome week is when college becomes “real.” Students at residential colleges feel independent for the first time in their lives. There are often large parties held on and off campus during this time, and many students begin to have sex on campus during this week.

At the same time, they’re often attending new student orientation. This is often the first time that students are a captive audience on your campus. These welcome week sessions are an ideal time to introduce steps students can take to maintain sexual health, especially around HIV and STI’s.

To increase the likelihood of student attendance at sexual-health-focused events, these activities can be incorporated into residence hall meetings (e.g., floor meetings) or other events and programming that students attend during this time of the year.
Use peer educators to deliver sexual health and HIV education.

College age youth often are uncomfortable talking about sexual health and details of safe sex practices. Combat this discomfort by employing peer educators to deliver HIV and other sexual-health-related education. Some institutions utilize student organizations and/or volunteers, while other institutions hire and train student employees to do this work.

The Sexperteam at the University of Michigan describes itself as “a group of U-M students that educates campus communities about sexual health and relationships. Our interactive style shows that consensual sexual activity can be healthy, positive and fun!”

Promote a Healthy, Welcoming Environment for Students Living with HIV

Establish Support Groups for Students Living with HIV.

Being HIV-positive while attending college has unique challenges that can make it an anxiety inducing experience. Peer support groups help build a sense of community among students living with HIV, and provide students a space to come together and discuss shared and contrasting experiences. Most of all, they are a place where students can ask questions about living with HIV that they may not otherwise ask.

Peer support groups provide your institution with another opportunity to make sure students living with HIV are receiving the care and services they need. If you have a student mental health center or LGBTQ resource center, these may be appropriate entities to run or facilitate this sort of program.
Provide Mental Health Services for Students Living with HIV.

Providing HIV-inclusive mental health care for students can help them achieve better health and educational outcomes in a number of areas. Counselors trained to meet the mental health needs of PLWH may be available at your mental health center, or one off-campus. It is crucial that universities and colleges have – at minimum – an online resource that directs students living with HIV to mental health care. This online resource must make clear if care is offered in a safe and affirming place.

Ensure Availability and Accessibility of Culturally Appropriate Prevention and Treatment Services.

All students should have access to a health care center that provides:

- Health care professionals who are comfortable, compassionate, and confident in their discussion and treatment of various sexual health issues
- Confidential, free, or low-cost HIV/STI testing
- Free or low-cost services to obtain and maintain preventive HIV medications such as Pre-Exposure Prophylaxis (PrEP) and Post-Exposure Prophylaxis (PEP)
- Free or low-cost services to obtain and maintain antiretroviral therapy

The 360 Wellness Center at the University of California, San Francisco, provides a useful model that may be of reference in development of your own program.
Leverage the Role of LGBTQ Community Resource Centers

As acceptance of LGBTQ people increases in many parts of the United States, there is a growing number of student services offices for LGBTQ students. While HIV is not exclusive to the LGBTQ community, this community is disproportionately impacted by the epidemic. LGBTQ resource centers can serve as consultants to ensure that HIV-related initiatives are inclusive of LGBTQ student experiences.

Ensure LGBTQ voices are represented in sexual health education and programming.

Sexual health education often centers the experiences of heterosexual and/or cisgender students, and can inadvertently omit the specific needs and concerns of LGBTQ students. Ensuring there is LGBTQ representation in the design and delivery of HIV-related education can make the education more wide-reaching and effective. Better representation can be as simple as using “Tom and Marcus” in a sexual health scenario in addition to “Tom and Alisha.” It could also mean including information about same-sex sexual practices in sexual health education programming.

Integrate HIV education into other LGBTQ-specific programming.

On campus, LGBTQ community resources centers serve as the central hub for programming related to sexual orientation and gender identity. To better reach LGBTQ students, consider integrating sexual health education into existing LGBTQ programs and events. LGBTQ resource fairs, for example, could include a Sexual Health Education table staffed with educators providing information and support.

Provide a safe and affirming physical space.

Sometimes LGBTQ students feel uncomfortable or unsafe navigating college campuses. As such, the physical location should be considered when choosing where to hold programming for LGBTQ students.
Seek Opportunities for Collaboration Across the College and Community

Although this list of potential partners and collaborators is long, it is not exhaustive. It should aid in brainstorming partnership ideas and discussions with colleagues at your institution.

These groups should be included in task forces or consulted for their expertise during the development of policies and programs meant to create a more HIV-inclusive campus environment.

**People of Color Organizations:**
Following the lead of and partnering with people of color organizations like National Minority AIDS Council, and Latino Commission on AIDS can help ensure that your campus’ sexual health education supports culturally competent and inclusive programming and initiatives for your student population.

**Mental Health Centers:**
Mental healthcare is not a requirement for PLWH. However, some students, especially those recently diagnosed, may benefit from it. PLWH have higher-than-average rates of mental health issues and are often underdiagnosed and undertreated, illustrating the importance of making mental health care available.

**Student Health Centers:**
Student health centers are important collaborators due to their clinical expertise and role in offering HIV testing, prevention, treatment, and/or care. They should be involved in any effort to create a more HIV-inclusive campus, especially when developing programs that address sexual health. There may be opportunities to collaborate to hold confidential HIV testing times, or have providers come to a different location to test students outside of the clinic.

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**Campus and Community Links:**

**Historically Black Colleges and Universities (HBCUs)**
HBCUs have a critical role to play in HIV education, prevention, treatment, and care, both on their campuses and within the larger Black community.

HBCUs enroll more than 25% of the Black collegiate population. They also are predominantly located in the Southern United States – a geographic region that has higher-than-average HIV prevalence compared to the rest of the country. Taken together, these facts suggest that HIV is often more densely concentrated in the cities and towns where many HBCU students live, study, and work.

Despite making up just 12% of the U.S. population, Black Americans accounted for 45% of new HIV diagnoses in 2015. Of these new diagnoses, gay, bisexual, and other young black men who have sex with men comprised 38%.

For HBCUs, addressing HIV and AIDS is a public health imperative. Follow [www.hrc.org](http://www.hrc.org) for additional resources for combating HIV and AIDS on college campuses.
Greek Life:
Fraternities and sororities can also be effective channels to promote sexual health.¹⁵ These meetings are an ideal time to deliver peer-led sexual health education in a trust-based, comfortable space. The leaders of these organizations may also have creative ideas for implementing this programming with their peers. Consider including them in programming design phases.

LGBTQ Student Organizations:
Partner with LGBTQ student organizations to effectively deliver key sexual health messages. Sexual health education has historically marginalized or excluded LGBTQ student experiences, despite the higher prevalence of HIV compared to the rest of the student population. Work with student groups to identify issues and topics that are of specific importance to their community, then build programming that addresses those issues. Pay specific attention to trans students, who are especially vulnerable to HIV.

Health Professional Schools:
Seek to engage faculty and staff from your institution’s health professional schools (e.g., medicine, public health, nursing, social work, etc.), in developing strategies for research-based sexual health education or initiatives.

Residential Life/Housing:
Staff members in residence halls and student affairs, and can help outline and test program structures for delivery in residences.

Community Organizations:
There may be opportunities to partner with local businesses and community-based organizations, like AIDS services (ASOs), to support your work.¹⁶
5 TOP-LINE TAKEAWAYS

There is no one-size-fits-all approach to HIV prevention, treatment, and care on your college or university campus – but there are ways colleges and universities can intervene to positively impact the health outcome of their students.

These five takeaways can help you in developing your strategy.

1. Evaluate your institution’s current student sexual health programs, practices, and policies.

2. Make inclusive sexual health education a top priority on campus to address the inequality that LGBTQ students face.

3. Ensure that campus health care providers receive up-to-date training on the latest recommendations from the CDC and other accredited public health organizations regarding HIV prevention, treatment, and care guidelines.

4. Partner with and support student-led initiatives to promote HIV awareness and sexual health education, particularly those led by LGBTQ and POC student organizations.

5. Partner with and support community initiatives that promote HIV awareness and sexual health education.
References


2. According to the National HIV/AIDS Strategy for the United States 2016 Progress Report, 87% of persons living with HIV are aware of their status, three in four persons diagnosed with HIV are linked to care within 1 month, 57% are staying in care and 55% are virally suppressed. https://files.hiv.gov/s3fs-public/nhas-2016-progress-report.pdf


5. The CDC reports that among youth diagnosed with HIV in 2014, 68% were linked to care within 1 month. This is the lowest rate of any age group. Additionally, among those youth who were diagnosed with HIV in 2012 and earlier, 55% were retained in HIV care and 44% had a suppressed viral load. Again, the lowest rate of viral suppression for any age group. https://www.cdc.gov/hiv/group/age/youth/index.html


Glossary

**AIDS** The stage of HIV where the immune system is severely compromised and some illnesses may cause major problems.

**Antiretroviral Drugs/Antiretroviral Therapy (ART)** Drugs, typically pills, that are prescribed preventively or as treatment for HIV.

**Cisgender** A term used to describe a person whose gender identity aligns with those typically associated with the sex assigned to them at birth.

**Historically Black College or University (HBCU)** Colleges and universities that were established to primarily serve African-American students at the time when many predominantly white colleges and universities banned them from enrollment.

**HIV** A virus that attacks the body’s immune system, which is crucial to fighting off infections and diseases. The virus, if untreated, can cause someone to develop AIDS.

**LGBTQ** An acronym for “lesbian, gay, bisexual, transgender, and queer.”

**PEP (Post-Exposure Prophylaxis)** An HIV prevention strategy that involves taking HIV medications immediately after a single high-risk event, such as condomless sex without the use of PrEP.

**PrEP (Pre-Exposure Prophylaxis)** An HIV prevention strategy that currently involves taking a once-daily pill to reduce the likelihood of acquiring HIV.

**Sex-Positive** An attitude that regards sexuality as a positive thing, and encourages mutual consent along with safe sex, sexual exploration and pleasure.

**STI (Sexually Transmitted Infection)** An infection that can be passed on through oral, anal, or vaginal sex via bodily fluids or, in some cases, skin-to-skin genital contact.

**Transgender** An umbrella term for people whose gender identity and/or expression is different from cultural expectations based on the sex they were assigned at birth. This can include trans women or trans men, as well as individuals with other gender identities, including non-binary or genderqueer. Being transgender does not imply any specific sexual orientation; transgender people may identify as straight, gay, lesbian, bisexual, etc.

**Undetectable** People in this group know their HIV-positive status. They see a medical provider regularly and take their HIV medications as prescribed. Consequently, the amount of HIV in their blood is lower than the threshold detectable by available tests, commonly referred to as being “undetectable.” According to the Center for Disease Control and Prevention (CDC), “people who take [antiretroviral therapy] daily as prescribed and achieve and maintain an undetectable viral load have effectively no risk of sexually transmitting the virus to an HIV-negative partner.”
Resources from the CDC

- HIV Risk Reduction Tool (CDC)
  https://wwwn.cdc.gov/hivrisk/
- AIDS Prevention (CDC)
  https://www.cdc.gov/hiv/basics/prevention.html
- HIV Funding and Budget (CDC)
  https://www.cdc.gov/hiv/funding/index.html

Additional Resources

- Explore: HIV and AIDS (HRC)
  http://www.hrc.org/explore/topic/hiv-aids
- Stop The Virus (Gilead)
  https://www.helpstopthevirus.com/
- Basic Facts About HIV/AIDS (amfAR)
- AIDSResource (NIH)
  https://aids.nim.nih.gov/
- Young People and HIV (amfAR)
- The Basics of HIV Prevention (NIH)
- The Complete HIV/AIDS Resource (The Body)
  http://www.thebody.com/
- HIV/AIDS (CDC)
  https://www.cdc.gov/hiv/
- We> AID$ (Greater than AIDS)
  https://www.greaterthan.org/
- How HIV impacts LGBTQ People (HRC)
- HIV 101 and Facts (The Damien Center)
  http://www.damien.org/hiv-101-faqs
- Program and Grants Management (HRSA)
  https://hab.hrsa.gov/program-grants-management
- Protect – For You and Those You Love (Greater Than AIDS)
  https://www.greaterthan.org/protect/
- Addressing Stigma: A Blueprint for Improving HIV/STD Prevention and Care Outcomes for Black and Latino Gay Men (NASTAD)
- HBCU Initiative (The National Black HIV/AIDS Awareness Day)
  https://nationalblackaidsday.org/hbcu-initiative/
- HIV Among African American Gay and Bisexual Men (CDC)
  https://www.cdc.gov/hiv/group/msm/bmsm.html
- Program Evaluation (National Minority AIDS Council)
- Recommendations for HIV prevention with adults and adolescents with HIV in the United States (CDC)
  https://stacks.cdc.gov/view/cdc/44064
- HIV and AIDS Tools (Measure Evaluation)
  https://www.measureevaluation.org/resources/tools/hiv-aids
  https://www.measureevaluation.org/resources/publications/ms-04-10
HIV/AIDS Policy Examples

PrEP Resources
Is PrEP Right for Me? (HRC)
http://www.hrc.org/resources/is-prep-right-for-me

PrEP (CDC)
https://www.cdc.gov/hiv/basics/prep.html

PrEP (HIV.gov)

Paying for PrEP (GILEAD)
https://start.truvada.com/paying-for-truvada

Paying for PrEP (CDC)

Personal Prevention
HIV Risk Reduction Tool (CDC)
https://www.cdc.gov/hivrisk/

HIV Prevention Basics (CDC)
https://www.cdc.gov/hiv/basics/prevention.html

Protect Against HIV (Greater than AIDS)
https://www.greaterthan.org/protect/

HIV Prevention (Rhode Island Dept. of Health)
http://www.health.ri.gov/diseases/hivaids/about/prevention/

HIV Prevention (NIH)
https://www.niaid.nih.gov/diseases-conditions/hiv-prevention

Administrative Resources
HIV Program Resources (CDC)
https://www.cdc.gov/hiv/programresources/index.html

HIV Funding for Projects (CDC)
https://www.cdc.gov/hiv/funding/index.html

Program and Grants Management (HRSA)
https://hab.hrsa.gov/program-grants-management

Testing and Pharmacy
A Practical Guide to Getting Tested (amfAR)

HIV Testing Basics (CDC)
https://www.cdc.gov/hiv/basics/testing.html

HIV Testing (AVERT)
https://www.avert.org/hiv-testing

Where Can I Get Tested? (HIV.gov)
https://www.hiv.gov/hiv-basics/hiv-testing/learn-about-hiv-testing/where-to-get-tested
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To learn more about the HRC Foundation’s efforts in HIV and AIDS, visit:

hrc.org/explore/topic/hiv-aids

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