

It is wonderful that, for so many, HIV has become a chronic illness. In this age of medical advances, we see our community members who are living with HIV living longer and healthier lives. What an amazing achievement, brought about by the heart, soul and dedication of so many advocates, public champions and scientists.

And yet, there is still so much to be done to get to zero.

There continues to be 50,000 new HIV infections each year in the US. New infections disproportionately affect minorities, and, especially in the South, women. Southern states now have the highest rates of new HIV diagnoses (50% of the overall infections), the largest percentage of people living with the disease and the most people dying from it. Only 4 in 10 people living with HIV (PLWH) in the US received HIV medical care and only 3 in 10 PLWH achieved viral suppression.

What more and more researchers are recognizing is that social circumstances largely drive the epidemic. Things like food insecurity, lack of stable housing and unemployment may put people at risk for becoming infected in the first place and then work against individuals engaging and maintaining care once infected. In fact, last week, *AIDS* published a recent study by Talbert-Slagle, et al: *State variation in HIV/AIDS health outcomes: the effect of spending on social services and public health*. This study showed that states with higher spending on social services and public health per person living in poverty had significantly lower HIV and AIDS case rates and fewer AIDS deaths, in both one- and five-years post-expenditure.

For those of us working in the field, these results are not surprising.

Food and nutrition services continue to be a critical intervention that serves as the gateway to care for people living with HIV and supports them through treatment. Research shows that people with access to food and nutrition services are more likely to be diagnosed, and connected to and retained in medical care, and virally suppressed. Receipt of food and nutrition services has been demonstrated, in a statistically significant way, to increase adherence. For 30 years, God's Love has been helping people who are diagnosed with HIV live better lives by providing individually-tailored nutritious meals. Last year alone, we supported our clients living with HIV/AIDS with 285,000 home delivered meals.

But, policy still needs to catch up to research and experience.

There is tremendous variation in how states provide food and nutrition assistance. Nationwide, PLWH remain food insecure, even after receiving some nutrition assistance, and many agencies have had to reduce services or institute waiting lists. Comprehensive coverage of FNS for PLWH is still a dream.

The AIDS.gov theme for this year's World AIDS Day is "The time to act is now." And it is. Policymakers need to "act now" to address the structural drivers of the epidemic. Click [HERE](#) to find out how.

Regardless of what the future brings, God's Love will continue to be there for our clients living with HIV, helping them stay as healthy as they can. World AIDS Day is significant for our history, mission and community, and I know that you join us in celebrating the members of the God's Love community who are living with HIV/AIDS and in observing a moment of silence for those who are no longer with us.