

13-11

STATEMENT OF POLICY

Opposing Stigma and Discrimination against Persons with Communicable Diseases

Policy

The National Association of County and City Health Officials (NACCHO) encourages local, state, and federal governments to demonstrate political will and leadership in opposing stigmatizing and punitive measures against persons with communicable diseases, including HIV/AIDS, sexually transmitted infections, all forms of viral hepatitis, and tuberculosis.

Local health departments should adopt and support approaches to reduce stigma and discrimination against individuals living with communicable diseases. The National HIV/AIDS Strategy (NHAS), released by the White House in 2010, recommends actions to reduce stigma and discrimination experienced by people living with HIV. NACCHO urges local health departments to use the National HIV/AIDS Strategy to steer efforts to reduce stigma and discrimination against persons living with all communicable diseases. Actions recommended by the National HIV/AIDS Strategy that NACCHO supports include the following:

- *Engage communities to affirm support for people living with HIV:* Faith communities, businesses, schools, community-based organizations, social gathering sites, and all types of media outlets should take responsibility for affirming nonjudgmental support for people living with HIV and high-risk communities.
- *Promote public leadership of people living with HIV:* Governments and other institutions should work with people living with HIV/AIDS coalitions, HIV services organizations, and other institutions to actively promote public leadership by people living with HIV.

Additionally, the National HIV/AIDS Strategy recommends that state legislatures review HIV-specific criminal statutes to ensure that they are consistent with current knowledge of HIV transmission and support public health approaches to preventing and treating HIV. Local health departments are encouraged to provide information to assist in this process.

NACCHO recognizes the above elements of the National HIV/AIDS Strategy to be applicable to the reduction of stigma and discrimination experienced by persons with all communicable diseases and recommends that local health departments incorporate these actions into their work.

Justification

In the United States, approximately 1.1 million people are living with HIV infection and nearly 20 million new sexually transmitted infections occur each year.^{1,2} Roughly 207,000 (18.1%) people infected with HIV are



unaware of their status; under-reporting due to a lack of testing is substantial for sexually transmitted infections, especially chlamydia and gonorrhea.^{1,2} Unknown status and under-reporting present significant challenges to the prevention and control of communicable diseases.^{3,4}

Testing and treatment of communicable diseases are critical components of disease prevention and control.^{5,6} However, stigma and discrimination of infected individuals are barriers to care and have been widely documented to affect testing, access to care, and treatment.^{7,8,9} Key guidance documents, including the National HIV/AIDS Strategy and the Centers for Disease Control and Prevention's *2010 STD Treatment Guidelines*, recognize stigma and discrimination as barriers to care and highlight the need to reduce stigma and discrimination to properly address the prevention and control of communicable diseases. Stigma and discrimination can be strong disincentives for individuals to learn their health status, access medical care, and disclose their status to sex partners, family, friends, and medical providers. Additionally, such discrimination can lead to loss of employment and housing, estrangement from family and society, and increased risk of violence.^{5,10}

Disease-specific laws and policies that result in criminal prosecution fuel stigma and discrimination against persons living with communicable diseases. Thirty-four U.S. states and territories have adopted criminal statutes on HIV transmission and some states have also adopted criminalizing laws specific to persons infected with other sexually transmitted infections.^{11,12} Many of these laws were developed when less was known about the transmission of HIV and other communicable diseases and do not reflect current science. Furthermore, disease-specific laws have not been found to influence the behavior of infected persons, therefore such laws cannot be tied to reducing transmission.¹³

Discrimination against people living with communicable diseases has been widely documented and is a continuing problem.¹⁴ Federal agencies have recognized the need to reduce stigma and associated disparities in order to promote and increase screening, testing, treatment, and prevention efforts.⁵ Ending the stigma and discrimination faced by people living with communicable diseases is an important step to improving individual health and protecting the public's health.

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Record of Action

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