

Chapter 1 : Managing Stress With HIV - Living Well With HIV - Everyday Health

Today, an estimated million people are living with HIV in the United States. Thanks to better treatments, people with HIV are now living longer—and with a better quality of life—than ever before. If you are living with HIV, it's important to make choices that keep you healthy and protect.

These are the stories of three people who are using their experiences being diagnosed with HIV to encourage people to get tested, share their stories, or find out what options are best for them. After being in a monogamous relationship through her high school and college years and testing negative multiple times throughout the relationship, Chelsea and her boyfriend both tested positive. Chelsea was pregnant, too. She was positive, but the baby was negative. As it turns out, her boyfriend was infected during sexual contact with another person. He then infected Chelsea. That was 10 years ago. Today Chelsea is married to an HIV-positive man she met after she was diagnosed and they have two children together—both of whom are HIV-negative. Each week, she sits with HIV-positive teens and twenty-somethings, counseling them on their options, both medical and personal, the same tough decisions she had to make. Chelsea herself is not currently taking any medications to treat her HIV. A few weeks later, Nicholas began experiencing severe flu-like symptoms, a common sign of an early HIV infection. Five months after that, he had his diagnosis: At the time of his diagnosis, Nicholas, a journalist, was living in Thailand. He has since returned to the U. Being very open about his diagnosis, Nicholas has written and produced a music video that he hopes encourages people to be tested regularly. He also hosts an online radio show that discusses, among other things, living with HIV. The next day, he called the man who infected him to tell him of his diagnosis. That was an interesting call, to say the least. Once his family knew, Josh was determined to not keep his diagnosis a secret. I thought the only way to combat stigma or prevent gossip was to tell my story first. So I started a blog. Plus, I was scared, terrified even, for my health.

Chapter 2 : Florida Living Well with HIV/AIDS | Know Your HIV Status

living well with HIV If you're HIV-positive, there are steps you can take to prevent spreading the infection to others and you can access needed care to help you manage your own health. There is a lot to consider.

There is a lot to consider: Receiving a positive test result for HIV is the beginning of multiple emotions and feelings. Knowing what care and treatment services are available and how to access them are extremely important to living well with HIV. A variety of confidential services are available in Florida to help improve your quality of life. Many of these services are available for free. New treatments and medications as well as emotional support can lead to longer, healthier lives for people with HIV. Everyone approaches HIV in a different way. Most people have a lot of questions about HIV when they learn about their diagnosis – what it means, what to do about it, how long a person can live, and where to get treatment. The agency will provide you with a case manager- someone who knows about HIV programs and services, medications, treatments and related illnesses. If you have a primary healthcare provider that you prefer to contact, ask your doctor to work closely with an HIV specialist to ensure that you receive all the benefits for which you are eligible, as well as the best care possible. Since HIV is a chronic illness, consider talking with someone who can help you through this difficult time. In addition to your healthcare provider, consider connecting with a local AIDS service organization in your area. They may be able to assist you with case management services, housing and transportation, and finding HIV support groups in your area. The Florida Department of Health strives to meet its goals of keeping HIV-positive individuals both physically and mentally healthy; preventing further transmission of HIV; and involving people living with HIV in prevention activities, leadership and advocacy. Combined with the people who are newly diagnosed, there is a great need to focus on linking HIV-positive individuals to available care and treatment. In Florida, we have a number of specific programs working to connect people to care and maintain that care over time. Studies show that individuals who start treatment right away stay healthier longer and have a lower viral load. Viral load is the term used to describe the amount of HIV in your blood. If your viral load is lower you are less likely to transmit HIV to others. It can also affect participation in HIV care and treatment programs. Stigma occurs when others are prejudiced toward or discriminate against a person or group of people because they have a certain disease. Stigma heavily impacts personal and community prevention efforts, and can certainly have an effect on whether or not someone feels comfortable enough to disclose their HIV status. It is critical to continue to practice safer sex even if you and your partner are both infected with HIV. This new strain could also potentially be resistant to other HIV drugs, making it more difficult to treat. As a result, Florida has specific laws in place that require health care providers to conduct routine prenatal screening for STDs, including HIV. Still, we continue to see infected babies. It offers a variety of resources related to testing and prevention of mother-to-child transmission and provides the necessary tools to help you make your facility proactive in the fight against HIV. [Click here to learn more.](#)

Chapter 3 : What are HIV and AIDS? | AVERT

Providing nutritional care and support for people living with HIV/AIDS is an important part of caring at all stages of the disease. This manual provides home care agents and local service providers with practical recommendations for a healthy and well balanced diet for people living with HIV/AIDS.

Living with HIV since And that makes me unstoppable. I talk to my doctor. I talk to my pharmacists. There are lots of ways to protect ourselves. In this relationship, HIV ends with me. Angie â€” Loganville, GA. I know that staying in care and on treatment helps me to be the best mother, wife, and HIV prevention educator I can be. I tell other HIV-positive women: All the fear that you have can be overcome. Every day I wash down my pills with a prayer. Ashley â€” Atlanta, GA. I found it difficult to take medication every day. Fortunately, with the help of my doctor at the VA, taking my medicine is just another part of my morning routine. I brush my teeth, wash my face, and take my meds. By sticking to my medication, doctor visits, and support groups, I stay healthy and happy. Cedric â€” Bryant, AR. So take that, HIV. The first meds I was prescribed gave me some bad side effects. But I worked with my doctors to find a new one that was better for me. Now I feel great and my viral count is undetectable. That list of things you wanted to accomplish before you were diagnosed? Chris â€” Minneapolis, MN. But, I was wrong about both. Instead of rejecting me, my grandmother immediately began to learn about the disease. She helped me see that, with HIV meds, I could live a long, healthy life. Now that I understand what it takes to live well with HIV, I take care of myself so I can spend time with the people who matter most. Christopher â€” Washington, DC. My mother passed away from the disease, but until getting tested at a community health fair, I had no idea, that I too, was living with HIV. Within a few months of my diagnosis, I got on treatment to control my viral load. Today, I enjoy friends, family and living life to the fullest. Christopher 1, HIV 0. Eddie â€” Miami, FL. When I first started treatment, I had to take 30 pills a day. Now, I just take 3 pills a day with few side effects. Initially, I started treatment to protect my partner from getting HIV. Now, I know that being healthy, taking my medication, exercising, and eating well are the reasons I have a full and productive life today. Elizabeth â€” Boston, MA. From time to time, I stopped treatment. Each time, my health would suffer. With the help of a great doctor, I came to understand that consistent medication and care were essential to living well with HIV. Being in care lets me be here for my kids, my grandkids, my furry best friend, and hopefully one day, my great-grandkids. Jada â€” New Orleans, LA. It takes a lot more than three little letters to stop me. But now I know the value of medical care and treatment. I live my life to the max and I want other transgirls living with HIV to know that it only gets better! Jamie â€” Atlanta, GA. But life does not end with an HIV diagnosis. I formed a strong, honest relationship with my medical provider and together we created a plan to keep me healthy. Now, I want to encourage other transwomen living with HIV to take care of themselves by taking their medication, and taking time to do what makes them happy. There is light at the end of the tunnel, and you can live a full and amazing life as long as you stay in care and prioritize your health. Jennifer â€” Asheville, NC. This is not the end. As a transgender woman, it was hard to find a doctor who understood my needs; but, I kept looking and finally found someone. Now, 17 years later, I take just one pill a dayâ€”with very few side effects. I also run my own organization called TransHealth Coordinators that helps healthcare providers learn how to care for the unique needs of transgender people. Staying healthy leaves me with plenty of energy to pursue my other passions, too, like painting, gardening, and operating a mountain guest house. Katrina â€” Decatur, GA. That was all it took after starting meds until my HIV was undetectable. Treatment gave me back my life. There are many things I still want to accomplish and you are not going to stop me. There was a period of time where I did not take medicine, but I decided to get back on treatment and seek medical care. I am motivated now to stay healthy because there are so many things I still want to accomplish. I have a whole life to look forward to and an opportunity to be a role model for other young people. Malina â€” Bronx, NY. Have I passed it on to my infant son? Will I live to raise him? Can I have more children? But with time, the right doctor, the right medicine, and a strong support group, I discovered that I could live a full life. Quoc â€” Nashville, TN. I hit rock bottom. I knew then that I had to take control of my life and get into treatment. After getting clean, I

worked with my doctor to find the best treatment for my HIV. Reggie â€” Atlanta, GA. So when my doctor told me to start and stay in treatment, I listened. Now my treatment regimen is part of my life. That means I take my pills, I keep my medical appointments, I stay connected to support groups and I keep up with the latest education. Treatment works for me, and now I show other veterans who are HIV-positive how it can work for them. Sharmain â€” Memphis, TN. Born with HIV in But you will never, ever get the best of me. I do everything in my power to take good care of my health and keep from passing the virus on to my baby. The best chance of my son being born without HIV is for me to take my medicine every day. Sharon â€” Bangor, ME. You gave me my voice. I started taking HIV meds 2 weeks after I was diagnosed. Since then, my doctor and I have become a great team. My viral load is undetectable and I feel good. Now, as an HIV educator and public speaker, I encourage others to get in care and on treatment as soon as possible. Vernial â€” Washington, DC. But after getting clean in rehab, I found hope and have been on HIV treatment ever since. Whitney â€” Baton Rouge, LA. I am strong, and I am here to stay! They introduced me to the perfect clinic where I have one doctor who specializes in HIV and one who specializes in caring for transgender women and men. Everybody is very friendly â€” from the front desk to the doctors â€” and they make me feel safe and comfortable. My message to other transwomen living with HIV is to find friends and providers who will support and uplift you, take your meds, maintain a healthy lifestyle, and keep doing the things you love. Yuri â€” Miami, FL. Not in this lifetime. I even have a cell phone app that reminds me to take my HIV meds.

Living well with HIV/AIDS A manual on nutritional care and support for people living with HIV/AIDS FAO Food and Agriculture Organization of the United Nation.

It also would have not been useful. Life expectancy immediately following the identification of the virus in was often months after diagnosis. But while people with HIV are living longer, they are also living with unique challenges regarding how to age well. New evidence suggests that there are indeed several simple but vital strategies that can help increase the likelihood of successful aging. As a nurse and a scientist, I study effective self-management strategies and have seen what a difference they make to adults aging with HIV. First, a reminder of the scope of HIV. There are an estimated 36 million people living with HIV worldwide. Despite the virus having been identified only in 1981, more than 35 million people have died of HIV or AIDS, making it one of the most destructive pandemics in history. That means people living with HIV are aging. Worldwide, about 10 percent are 50 or older, a number expected to rise, provided the medications continue to be made available. Yet, despite all of this hard-earned progress, many scientists believe we are still decades away from a true HIV cure. While this important work continues, over 36 million people infected with HIV will continue to age and will seek out accessible strategies that enable them to live their lives to the fullest extent. So is it actually harder for people living with HIV to age well? Research shows that it is. Increased likelihood of living with more than one adverse health condition at once multimorbidity, including hepatitis C, hypertension, cognitive dysfunction and frailty. Stigma both from HIV infection and from aging. Negative stereotypes of aging, including viewing older people as needy, senile and less useful than younger people, persist and can be added to the negative stereotypes and overt discrimination of HIV infection. Stigmas can lead to increased symptoms and decreased quality of life. We can all help reduce these negative stereotypes by learning the facts about HIV and aging, respecting this population, and fostering hope and empowerment among aging adults with HIV. Increased burden of symptoms, such as fatigue, pain and depression, perhaps worse in HIV-positive women. This negatively influences everything from daily functioning to employment to quality of life. Live well There is no magic bullet for aging well, no matter your health status. However, there is new evidence that suggests that three promising, nonpharmacological strategies can help adults with HIV. Increasing the amount, intensity and frequency of physical activity. In HIV-positive adults, physical activity can improve cardiovascular health, can reduce distressing symptoms such as fatigue, and may improve cognitive functioning. In the general population, it reduces all types of chronic health conditions, including hypertension, diabetes and depression, but its effect on these conditions in aging adults with HIV has not yet been tested in a large clinical trial. Yet, we also know that most HIV-positive adults do not engage in regular, intense physical activity. Eating a nutritious, balanced diet can reduce chronic health conditions and may reduce symptom burden, but there has been less research on this since HIV became a chronic disease. Positive social interactions can improve HIV treatment adherence and aspects of quality of life and can reduce symptom burden. My research team also reported that volunteerism, activism and being involved in a spiritual community can also be sources of helpful social interactions. Volunteerism can be good for your health. Several investigators, including my team, are studying new ways to help this aging population. Over the past three years, my research team conducted a clinical trial with HIV-positive adults to see if a group-based intervention improved exercise and healthy eating. In November, at the American Heart Association Scientific Sessions, we reported that our behavioral intervention reduced carbohydrate intake, specifically the consumption of sugar-sweetened beverages. However, we failed to improve physical activity in aging adults with HIV. Recently, others have reported that their interventions also did not increase physical activity, and suggest that a new, personalized approach to initiating and maintaining physical activity in this population is needed. Breakthroughs in this area can lead to new treatment strategies to help not only HIV-positive adults age well, but also others who are living with complex chronic conditions. So while we focus on curing HIV, we must also recognize that a cure is likely several decades away. In the meantime, millions of people struggle to age well with HIV. Our HIV-positive brothers and sisters have shown incredible resiliency over the past 36 years. Together, we

undoubtedly will find innovative and personalized strategies to overcome these struggles.

Chapter 5 : HIV/AIDS | Living Well

For most people who have reliable access to modern treatment and health care, managing HIV is not just about survival; it's about living well.

What does it mean to be HIV-positive? There is currently no cure for HIV. It is a serious, infectious disease that can lead to death if untreated. But the good news is that with treatment, you can expect to live as long as any other woman in Australia. It may help you to know there are women all over Australia living well with HIV, enjoying healthy lives and achieving their goals relating to work, study, sport, and travel. If you are diagnosed early, start treatment and take your medication correctly, you can stay healthy and prevent the virus from developing into AIDS and other life-threatening AIDS-related conditions. HIV is manageable when you are linked into medical care and are involved in the discussions with your doctor about antiretroviral therapy ART. Take the time to read the HIV basics. For a list of specialists by state and suburb, [click here](#). Women living in regional or rural towns may find it difficult to access HIV expertise in their area, or have concerns about confidentiality. Although most HIV clinical experts are located in inner Melbourne, these specialists can provide support for your local regional or rural doctor to manage your health issues. It is important that you think about past sexual partners who you think might have been exposed to HIV so that they can be contacted and offered testing. Think about partners in the period between your last negative HIV test and this positive test result. Contacting previous partners can be a difficult thing to do and support is available. There are specialist health workers who can do this on your behalf without involving you or disclosing your identity. Talk with your doctor about this. It is also important that you feel supported through this challenging time. Many women feel a strong need to speak to another positive woman and Positive Women Victoria can help arrange this, as well as provide you with information relevant to your situation. This is life-changing news but you have options to protect your health, and Positive Women Victoria is here to support you through the journey. Find an HIV care provider, even if you do not feel sick. Prepare for your first appointment. Do some research and make a list of questions before you go. Find a support system. You can find support among trusted friends, family or members of your community. Begin thinking about who you want to tell. At this time, it is important to disclose your HIV status to your healthcare providers and sexual partners. However, do start thinking about lifestyle changes that you can make that will help you stay healthy in the long term. Things like smoking, excessive alcohol consumption and recreational drug use can further weaken your immune system. Positive Women can provide you with information about programs that can help you quit using these substances.

Chapter 6 : Living Well | Women with HIV

He was an AIDS physician at the University of California-San Francisco from to Kate Lorig, RN, theinnatdunvilla.com, is on the faculty of Stanford University School of Medicine and is a director of the Stanford University School of Medicine's Patient Education Research Center.

During this process, the body is able to function close to normally, and you may not even know that you have been infected with HIV. In many people with HIV, after months or years the course of infection is different in everyone the immune system finally fails and the body can no longer fight outside infections. With the immune system completely destroyed, the body is vulnerable to every infection that comes along, and even the common cold can become deadly. People with AIDS can catch deadly illnesses from almost anything, even their pets. They also become very susceptible to certain kinds of cancer that are rarely seen in people with healthy immune systems. How does HIV spread? HIV lives in the blood and tissues of people who have been infected, so when these certain fluids and tissues come in contact with another person, the virus can spread. The most common way to catch HIV is through sex, since both semen and vaginal fluids contain high amounts of the virus. The most common way that HIV is transmitted is by having sex vaginal, anal, or oral with an infected individual. Another common way of transmitting the virus is by sharing a needle or other injection equipment with a person who is infected with the HIV virus. HIV has no symptoms in the early stages of infection, so if you have been exposed, you can spread it to your partners without even knowing it. This is why it is so important to get tested for infections at least every year if you are sexually active, and ideally whenever you have sex with a new partner. The CDC estimates that currently 1. Even an open and honest sexual partner could pass this deadly infection to you without ever knowing it. AIDS was first recognized in Since then, it has killed nearly , people in the United States. What are the symptoms of HIV? The only way to know if you have contracted the virus is to be tested for HIV. The symptoms of HIV infection, if you have any at all, are very similar to other common diseases, including the flu. The following may be warning signs of advanced HIV infection: There is a strong connection between developing one STI and then catching others. That means that there is extra fluid in the area and sometimes tiny sores that are too small to be visible. This serves to make the genitals ripe for infection. The extra fluid and disruptions in the membranes make it easier to both give the infection to someone else, or to be infected yourself with another STI, including HIV. How is HIV Diagnosed? There are several different kinds of tests. Some are faster but might be less accurate, and some will take longer but give you a definite answer. If you are sexually active, talk to your doctor about what test is right for you, or visit a clinic for free or inexpensive testing. When should testing be done? About 25 days after being exposed to HIV, if the virus was transmitted to you, your body will start producing antibodies to fight the infection. At that point, there is enough virus and enough antibodies in your blood to detect during a blood test. Because the virus multiplies at different rates in every person, though, you will need to be tested again after 6 months to make sure that the initial test was accurate. What about a positive test result? The sooner you can start taking anti-viral medications, the better the spread of the disease in your body can be contained. People with HIV can live long and normal lives, as long as they are careful about their treatment and proactive about their health. If you are facing a positive diagnosis of HIV, you are not alone. Our counselors are always available to meet with you and help you manage the storm of emotions that you are feeling. Our hour hotline is also available. We are here for you.

Chapter 7 : Living well with HIV/AIDS

Living With HIV/AIDS. Having a positive attitude and taking steps to stay healthy can make an impact on your life with HIV. Discover the things you can do every day to live well.

Despite all we know about HIV , there remains a lot of stigma surrounding it. The fact is that anyone can contract HIV – even the most rich and famous people in the world. Ashe contracted HIV from a blood transfusion after having heart surgery in He came public with his condition after rumors were started by the press. Ashe died of related complications in at the age of Before his death, Eazy-E released a statement of redemption and last wishes: Like the others before me, I would like to turn my own problem into something good that will reach out to all my homeboys and their kin. Magic Johnson Magic Johnson is a hero on several levels. Johnson made his announcement in – a time when the public believed a great number of misconceptions about HIV. While still involved in sports as a commentator, he also started the Magic Johnson Foundation, an educational organization whose aim is to prevent the spread of HIV. Greg Louganis Aside from being known as an Olympic diving champion in the s, Louganis is also one of the most famous faces of HIV awareness. He was diagnosed with HIV in and has since used his passion of diving as a force to keep him going. The diving was much more of a positive thing to focus on. I would just pull the covers over my head. But as long as I had something on the calendar, I showed up. The Los Angeles Times reported the announcement he made shortly before his death: His melodic voice and musical talents, as well as his fight against HIV, continue to inspire people today. Chuck Panozzo This founding member and bassist of the band Styx has advocated activism on two counts: Chuck Panozzo announced in that he was diagnosed with HIV. He also wrote a memoir detailing his experiences. I have a band that is willing to make sure that I stay healthy. Though Sheen has been HIV-positive since , he decided to publicize his condition to raise awareness. Adding to the controversy is his admission that he continued to have relations with women knowing that he was HIV-positive at the time. Pedro Zamora Pedro Zamora made a significant impact during his short life.

Chapter 8 : WHO | Living well with HIV/AIDS

Living Well with HIV Clinical Services, formerly known as Positive Services, was established in , with the incorporation of the Western Australian AIDS Council. The program was established at a time when there was considerable community discrimination towards people who had been diagnosed HIV positive.

Food Everyday Solutions are created by Everyday Health on behalf of our partners. More Information Content in this special section was created or selected by the Everyday Health editorial team and is funded by an advertising sponsor. The sponsor does not edit or influence the content but may suggest the general topic area. Learn how to keep stress in check and protect your health by better organizing your life and controlling your emotions. Stress is all about perception, says Glenn J. Stress can mean different things to different people – a situation that causes significant stress for one person may cause little or even no stress for someone else. Treisman says that there is no direct correlation between stress and worsening HIV, research has shown that stress can weaken the immune system, making it less able to fight off infections. Stress also increases the risk of depression , says Treisman, a risk that is already greater in people with HIV. Stress and depression can trigger poor HIV self-care. Not adhering to your medication regimen can have serious consequences, allowing the virus to become resistant to the medications and more difficult to control. Someone with HIV who is experiencing severe stress needs to learn how to manage stress rather than attempt to avoid it. Try these tips to help manage stress associated with HIV: Identify what is stressful for you. Some people find that specific aspects of living with HIV, such as needing to take medication every day, fuel stress, says Treisman. Make a list of the factors that are causing you stress, then work on gaining control over them so that they become easier to manage. When people are under extreme stress, every task can seem overwhelming. But organizing your life can put stressors in perspective. Learn to identify the most important tasks each day to help you accomplish your top priorities. Keeping problems in perspective can help keep emotional responses appropriate to the problem at hand. For help, ask your doctor to refer you to a qualified counselor or mental health professional. Use community resources that provide HIV help. These resources can offer HIV education and answer your questions about what the virus means to you. Get depression under control. If you are diagnosed with depression, treating it properly will help make your stressors seem more manageable, says Treisman. Medication, therapy, and a healthy lifestyle can all help you manage depression. Lean on loved ones. Ask for help when you feel overwhelmed. Find a friend, relative, or HIV support group member to help you get and stay organized or to offer support when life seems difficult. Knowing that someone else cares can help put stress in perspective. Set a daily goal of good health. Having HIV is even more reason to live a healthy life. Eating a nutritious diet, getting regular exercise, making time to get enough sleep each night, and taking good care of your mind and body will go a long way toward managing stress.

Chapter 9 : Living with HIV personal stories and experiences | AVERT

Aging with HIV People living with HIV are living long, healthy livesâ€”but aging and having HIV for a long time are tied to health complications. Employment and Health Most people living with HIV can continue working at their current jobs or look for a new one.

We know that where we live, work, learn, and play greatly impacts our health. Especially important among these, and too often overlooked, is the impact of where we live. Housing is tied to health in powerful and inextricable ways. Think about the steps you take each morning to care for yourself, or each evening when you go to sleep. Would you still take the time to go through your routines, if there was nothing routine about them? Would you set up relationships with health providers if you might not live in the same community next monthâ€”or even next week? I faced homelessness twice and they were the most stressful experiences in my life. Lack of access to stable housing can feel like an insurmountable barrier to achieving good health and well-beingâ€”even more so when one is dealing with a chronic illness or other health challenges. Safiya pictured middle with teammates Billy Kirkpatrick left and George Mugoya right. The Interdisciplinary Research Leaders program supports teams of researchers and community leaders to use the power of action oriented researchâ€”that is research that is designed and done directly with the community, in order to drive change to create healthier, more equitable communities. In addition, being unstably housed contributes to high-risk behaviors. We need to change this paradigm and begin to put housing at the core of health. As my teammate Dr. But if you do have stable housing, you will also have the ability to care for yourself, access health care services, and also reduce the transmission of the disease. Statewide we are evaluating community and policy advocacy programs and interviewing elected officials to gain a better understanding of the policy environment. As a result, there are fewer slots available for affordable housing, with waiting lists of up to two years in some cases. While our research project is ongoing, we would like to share some preliminary lessons from our work to help inform the efforts of others who are striving to build healthier communities for all. Play Video Housing Instability Disrupts Consistent Care Moving from place to place often entails losing the connection to health services that are critical for treating a chronic disease. It is not unusual for case managers to get a new phone number for a client at the beginning of the week, and then not be able to reach them at the same number by the end of the week. In a rural setting, when people are asked or forced to move, the distance can be substantial. For example in an urban setting you might have to move from one apartment to another within the same neighborhood. Yet in a rural community, losing housing often entails moving to another communityâ€”one that does not have your social support system or the same health services. They face unfounded fears from their friends, family, and community members, who may not be educated on how HIV is transmitted and ask them to do things like use plastic utensils or a different bathroom. These actions are isolating, and stem from a lack of understanding of the disease. The stigma can be worse in rural areas, where there are fewer people living with HIV and thus less familiarity with the disease. It finds its way into policy decisions, as well. We need an educated populace. In Alabama, the rate of homelessness for people living with HIV is just 3 percent. Sometimes people feel unsafe; other times they are imminently homelessâ€”meaning that they could soon be asked to leave the home of a friend or family member. Pursuing a Culture of Health means building communities where everyone has the opportunity to live a healthier life. This means access to stable housing, successful case management, and an educated populace who advocate for policies to support these goals. As marks 50 years since the passage of the Fair Housing Act, I invite you to share your thoughts. What else should researchers, leaders and communities consider when it comes to the intersection of housing and health?