



HIV Prevention and Mental Health Disparities

Guest Editor:

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Message from the Guest Editor

As we approach the fourth decade of the global HIV epidemic, treatment methods such as anti-retroviral therapies and pre-exposure prophylaxis have shaped the ways in which health providers and public health systems approach care and prevention. Yet even with such power biomedical resources, scholars, physicians, epidemiologists, nurses, social workers, and social scientist working to eradicate HIV must include actions that address the intractable intersection of oppressions that threaten the effectiveness of emergent prevention and intervention platforms. Barriers to effective care and treatment must address mental health and well-being, in combination with physical health. Accordingly, our knowledge base must look beyond basic science and issues of scalability to the social and lived environments that account for the disparate rates of disease burden across diverse groups. These include an increased likelihood of homelessness, exposure to violence, substance abuse, and criminal justice system involvement.





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Message from the Editor-in-Chief

Addressing the environmental and public health challenges requires engagement and collaboration among clinicians and public health researchers. Scientific discoveries and advances in this research field play a critical role in providing a rational basis for informed decision-making toward control and prevention of human diseases, especially the illnesses that are induced from environmental exposure to health hazards.

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