

# **HIV AIDS COMPETENCY PRACTICE EXAM (SAMPLE)**

**STUDY GUIDE**



**SAMPLE STUDY GUIDE  
WITH LIMITED QUESTIONS**

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THE FULL VERSION STUDY GUIDE**

<https://hivaidscompetency.examzify.com>



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# Introduction

Preparing for a certification exam can feel overwhelming, but with the right tools, it becomes an opportunity to build confidence, sharpen your skills, and move one step closer to your goals. At Examzify, we believe that effective exam preparation isn't just about memorization, it's about understanding the material, identifying knowledge gaps, and building the test-taking strategies that lead to success.

This guide was designed to help you do exactly that.

Whether you're preparing for a licensing exam, professional certification, or entry-level qualification, this book offers structured practice to reinforce key concepts. You'll find a wide range of multiple-choice questions, each followed by clear explanations to help you understand not just the right answer, but why it's correct.

The content in this guide is based on real-world exam objectives and aligned with the types of questions and topics commonly found on official tests. It's ideal for learners who want to:

- Practice answering questions under realistic conditions,
- Improve accuracy and speed,
- Review explanations to strengthen weak areas, and
- Approach the exam with greater confidence.

We recommend using this book not as a stand-alone study tool, but alongside other resources like flashcards, textbooks, or hands-on training. For best results, we recommend working through each question, reflecting on the explanation provided, and revisiting the topics that challenge you most.

Remember: successful test preparation isn't about getting every question right the first time, it's about learning from your mistakes and improving over time. Stay focused, trust the process, and know that every page you turn brings you closer to success.

Let's begin.

# How to Use This Guide

This guide is designed to help you study more effectively and approach your exam with confidence. Whether you're reviewing for the first time or doing a final refresh, here's how to get the most out of your Examzify study guide:

## 1. Start with a Diagnostic Review

Skim through the questions to get a sense of what you know and what you need to focus on. Your goal is to identify knowledge gaps early.

## 2. Study in Short, Focused Sessions

Break your study time into manageable blocks (e.g. 30 – 45 minutes). Review a handful of questions, reflect on the explanations.

## 3. Learn from the Explanations

After answering a question, always read the explanation, even if you got it right. It reinforces key points, corrects misunderstandings, and teaches subtle distinctions between similar answers.

## 4. Track Your Progress

Use bookmarks or notes (if reading digitally) to mark difficult questions. Revisit these regularly and track improvements over time.

## 5. Simulate the Real Exam

Once you're comfortable, try taking a full set of questions without pausing. Set a timer and simulate test-day conditions to build confidence and time management skills.

## 6. Repeat and Review

Don't just study once, repetition builds retention. Re-attempt questions after a few days and revisit explanations to reinforce learning. Pair this guide with other Examzify tools like flashcards, and digital practice tests to strengthen your preparation across formats.

There's no single right way to study, but consistent, thoughtful effort always wins. Use this guide flexibly, adapt the tips above to fit your pace and learning style. You've got this!

## Questions

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- 1. By how much can lifestyle changes and antiretroviral medications reduce the transmission of HIV?**
  - A. 50%
  - B. 70%
  - C. 90%
  - D. 100%
  
- 2. What is a key feature of a successful HIV educational campaign?**
  - A. Creating generic messages for a wide audience
  - B. Using technical jargon to convey information
  - C. Tailoring messages to the specific needs and concerns of targeted populations
  - D. Focusing solely on medical interventions
  
- 3. What role do peer support groups play in HIV treatment?**
  - A. They hinder medication adherence
  - B. They provide emotional support and shared experiences
  - C. They solely focus on medical advice
  - D. They discourage social engagement
  
- 4. Which ethnic group has the highest rate of new cases of HIV?**
  - A. White MSM
  - B. Black/African American MSM
  - C. Hispanic MSM
  - D. Asian MSM
  
- 5. What does PrEP stand for in HIV prevention?**
  - A. Post-exposure Prevention
  - B. Prevention of Repeated Exposure
  - C. Pre-exposure Prophylaxis
  - D. Proactive Risk Evaluation Program

- 6. What does the CDC recommend regarding written consent for HIV testing?**
- A. Always requires written consent
  - B. Not recommended for separate consent
  - C. Verbal consent is enough
  - D. Consent is not needed at all
- 7. During which stage of HIV infection do individuals often appear healthy?**
- A. Acute HIV infection
  - B. Chronic HIV infection
  - C. AIDS stage
  - D. Primary HIV infection
- 8. Which of the following is true about individuals living with HIV?**
- A. They cannot live a standard lifespan
  - B. They cannot infect others if on treatment
  - C. They can lead healthy lives with proper care
  - D. They must avoid all social interactions
- 9. What is a potential effect of untreated HIV infection?**
- A. Improved immune function
  - B. Higher risk of opportunistic infections
  - C. Slower aging process
  - D. Increased energy levels
- 10. What statement about HIV and AIDS coursework is accurate?**
- A. It teaches only historical facts
  - B. It provides no new information
  - C. It offers valuable insights on prevention and treatment
  - D. It focuses solely on stigma and discrimination



## **Answers**

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1. C
2. C
3. B
4. B
5. C
6. B
7. B
8. C
9. B
10. C

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## **Explanations**

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**1. By how much can lifestyle changes and antiretroviral medications reduce the transmission of HIV?**

- A. 50%
- B. 70%
- C. 90%**
- D. 100%

*Antiretroviral medications, when taken consistently, can effectively reduce the viral load in an individual with HIV to undetectable levels. This is crucial because individuals who maintain an undetectable viral load cannot transmit HIV to sexual partners, a fact encapsulated in the phrase "Undetectable = Untransmittable" (U=U). Moreover, lifestyle changes such as consistent condom use, reducing the number of sexual partners, and engaging in regular healthcare follow-ups can further mitigate the risk by enhancing overall health and reducing risk behaviors. Research indicates that the combination of these approaches—maintaining adherence to antiretroviral therapy and implementing proactive lifestyle changes—can lead to a reduction in HIV transmission rates of around 90% or more. This significant reduction illustrates the effectiveness of a comprehensive strategy that includes medical and behavioral interventions in managing HIV transmission risk. In the context of the other choices, while some levels of lifestyle changes and medication adherence can lead to reductions in transmission risks, they fall short of the nearly complete effectiveness reached through optimal adherence to treatment and healthy lifestyle adaptations. Hence, stating that transmission can be reduced by 90% reflects the most realistic and evidence-based understanding of the impact that effective treatment and preventive measures have on HIV transmission.*

**2. What is a key feature of a successful HIV educational campaign?**

- A. Creating generic messages for a wide audience
- B. Using technical jargon to convey information
- C. Tailoring messages to the specific needs and concerns of targeted populations**
- D. Focusing solely on medical interventions

*A key feature of a successful HIV educational campaign is tailoring messages to the specific needs and concerns of targeted populations. This approach recognizes that different groups may have unique experiences, cultural contexts, and understandings related to HIV. By customizing messages, the campaign can address specific myths, stigma, behaviors, and barriers to care that different populations face. This enhances engagement and ensures that individuals can relate to and understand the information being presented. When messages resonate on a personal level, they are more likely to lead to increased awareness, behavioral changes, and ultimately, a reduction in HIV transmission rates. In contrast, creating generic messages may fail to connect with individuals, leading to misunderstanding and disengagement. Using technical jargon can alienate those who are not familiar with medical terminology, reducing the effectiveness of the communication. Lastly, focusing solely on medical interventions may overlook the social, emotional, and cultural aspects of living with and preventing HIV, which are crucial for a comprehensive understanding of the issue.*

### 3. What role do peer support groups play in HIV treatment?

- A. They hinder medication adherence
- B. They provide emotional support and shared experiences**
- C. They solely focus on medical advice
- D. They discourage social engagement

Peer support groups play a crucial role in HIV treatment by providing emotional support and shared experiences. Individuals living with HIV often face unique challenges, including stigma, discrimination, and feelings of isolation. In peer support groups, participants can connect with others who understand their situation, share personal experiences, and offer encouragement. This sense of community can significantly enhance an individual's mental and emotional well-being, which is an essential aspect of managing a chronic condition like HIV. Support groups can help individuals feel less alone, reduce feelings of anxiety and depression, and improve overall quality of life. The shared knowledge and experiences between peers can also motivate and empower individuals to adhere to their treatment regimens. While addressing medical concerns is important, the primary benefit of these groups lies in the emotional and social support they provide, promoting resilience and adherence to treatment in a way that purely medical advice cannot achieve on its own.

### 4. Which ethnic group has the highest rate of new cases of HIV?

- A. White MSM
- B. Black/African American MSM**
- C. Hispanic MSM
- D. Asian MSM

The highest rate of new cases of HIV is observed in Black/African American MSM (men who have sex with men). This demographic is significantly affected due to a combination of socio-economic factors, healthcare access disparities, stigma, and the prevalence of HIV within their communities. Historical barriers to healthcare and cultural challenges contribute to less awareness and lower rates of testing and treatment compared to other ethnic groups. The data reflecting these trends indicate that Black/African American MSM are disproportionately represented in HIV statistics, underscoring the urgent need for targeted prevention strategies, education, and access to medical resources tailored to their specific needs. By focusing on this vulnerable group, public health initiatives can work to reduce transmission rates and improve health outcomes.

### 5. What does PrEP stand for in HIV prevention?

- A. Post-exposure Prevention
- B. Prevention of Repeated Exposure
- C. Pre-exposure Prophylaxis**
- D. Proactive Risk Evaluation Program

PrEP stands for Pre-exposure Prophylaxis, which is a critical strategy in HIV prevention. It refers to the use of antiretroviral medications by people who do not have HIV, but who are at high risk of being exposed to the virus, to reduce their chances of becoming infected. When taken consistently, PrEP has been shown to be highly effective in decreasing the likelihood of contracting HIV. This method empowers individuals to take proactive steps in safeguarding their health, highlighting the importance of prevention strategies in the fight against HIV. Understanding the significance of PrEP is essential for healthcare providers, as it allows them to offer informed options for increasing safety among at-risk populations.

**6. What does the CDC recommend regarding written consent for HIV testing?**

- A. Always requires written consent
- B. Not recommended for separate consent**
- C. Verbal consent is enough
- D. Consent is not needed at all

*The recommendation from the CDC regarding written consent for HIV testing reflects a focus on improving access to testing while ensuring individuals' rights and privacy are upheld. The current guidelines do not advocate for the necessity of a separate written consent form for HIV testing. Instead, it supports the integration of HIV testing into healthcare services, where consent for testing can be incorporated into the routine consent process for medical care. This approach aims to reduce barriers to testing, allowing more individuals to get tested for HIV without the hindrance of requiring explicit written consent each time. The CDC emphasizes the importance of informed consent, which can be verbal or included as part of the general consent for care, rather than mandating a separate signed document. In addition to this recommendation, public health efforts are also geared towards normalizing HIV testing as a routine part of healthcare, similar to other preventive health measures, which further supports the stance that separate consent is not necessary.*

**7. During which stage of HIV infection do individuals often appear healthy?**

- A. Acute HIV infection
- B. Chronic HIV infection**
- C. AIDS stage
- D. Primary HIV infection

*During chronic HIV infection, individuals often appear healthy. This phase follows the acute HIV infection stage and can last several years, during which the virus is still active within the body but typically does not cause noticeable symptoms. The immune system may still function relatively well during this time, allowing individuals to feel generally healthy despite the ongoing replication of the virus. In this stage, routine medical check-ups may not reveal any significant health issues, and many people may remain asymptomatic, contributing to the challenge of diagnosing and managing the disease during this time. The absence of symptoms can lead to a false sense of security for those infected, making regular testing and monitoring essential to catch any progression of the disease. In contrast, the acute phase is marked by flu-like symptoms, while AIDS is characterized by severe immunodeficiency and opportunistic infections.*

## 8. Which of the following is true about individuals living with HIV?

- A. They cannot live a standard lifespan
- B. They cannot infect others if on treatment
- C. They can lead healthy lives with proper care**
- D. They must avoid all social interactions

*Individuals living with HIV can indeed lead healthy lives with proper care. Advances in medical treatment, particularly antiretroviral therapy (ART), allow individuals to manage their condition effectively. With consistent adherence to ART, many people with HIV achieve viral suppression, where the amount of HIV in their blood is undetectable. This not only improves their own health significantly—reducing the risk of progression to AIDS—but also enables them to live longer, healthier lives comparable to their HIV-negative peers. Proper care includes regular medical check-ups, maintaining a healthy lifestyle, and adhering to treatment regimens, all of which contribute to an individual's overall well-being. This understanding is crucial in promoting positivity and reducing stigma around living with HIV. In contrast, the other options provide incomplete or misleading information about HIV. While individuals with HIV may face challenges, the assertion that they cannot live a standard lifespan is outdated and not reflective of current realities due to effective treatment. Additionally, while treatment significantly reduces the risk of transmission, stating that individuals cannot infect others if on treatment ignores the complexities involved in transmission dynamics, including the need for continued adherence to therapy. Lastly, suggesting that individuals must avoid all social interactions perpetuates stigma and lacks recognition of the importance of social support and community for*

## 9. What is a potential effect of untreated HIV infection?

- A. Improved immune function
- B. Higher risk of opportunistic infections**
- C. Slower aging process
- D. Increased energy levels

*Untreated HIV infection can lead to a higher risk of opportunistic infections due to the virus's impact on the immune system. HIV primarily attacks CD4+ T cells, which play a crucial role in the body's ability to ward off infections. Over time, as the virus progressively weakens the immune system, individuals become increasingly susceptible to infections that typically would not cause significant illness in someone with a healthy immune system. These infections are referred to as opportunistic infections because they take advantage of the weakened state of the immune system. For example, common opportunistic infections include pneumocystis pneumonia, tuberculosis, and certain types of cancers, such as Kaposi's sarcoma. The progression of HIV to AIDS is characterized by the development of these infections, highlighting the importance of early diagnosis and treatment to maintain immune function and prevent such complications. The other choices do not accurately reflect the consequences of untreated HIV. Improved immune function, a slower aging process, and increased energy levels are not associated with untreated infection; in fact, the opposite is true, as untreated HIV leads to immune decline, potentially accelerated aging, and decreased energy over time.*

**10. What statement about HIV and AIDS coursework is accurate?**

- A. It teaches only historical facts
- B. It provides no new information
- C. It offers valuable insights on prevention and treatment**
- D. It focuses solely on stigma and discrimination

*The statement that HIV and AIDS coursework offers valuable insights on prevention and treatment is accurate because courses in this field are designed to provide comprehensive knowledge on how to effectively prevent the transmission of HIV, understand its progression to AIDS, and explore the latest treatment options available to individuals living with the virus. This includes the significance of antiretroviral therapy, ongoing research, and strategies to improve quality of life for those infected. Additionally, these courses often include discussions on the importance of regular testing, the impact of treatment adherence, and the role of healthcare providers in supporting patients. The focus on prevention and treatment is crucial for equipping students with the tools necessary to address the public health challenges associated with HIV and AIDS, thereby contributing to overall community health. The other options do not represent a comprehensive view of the coursework. While historical facts can be a part of the curriculum, they are not the sole focus, and assertions that the coursework provides no new information or concentrates solely on stigma and discrimination fail to capture the breadth and importance of the material covered in these programs. Understanding prevention and treatment is essential for combating HIV/AIDS effectively.*



## Next Steps

Congratulations on reaching the final section of this guide. You've taken a meaningful step toward passing your certification exam and advancing your career.

As you continue preparing, remember that consistent practice, review, and self-reflection are key to success. Make time to revisit difficult topics, simulate exam conditions, and track your progress along the way.

If you need help, have suggestions, or want to share feedback, we'd love to hear from you. Reach out to our team at [hello@examzify.com](mailto:hello@examzify.com).

Or visit your dedicated course page for more study tools and resources:

<https://hivaidcompetency.examzify.com>

We wish you the very best on your exam journey. You've got this!

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