



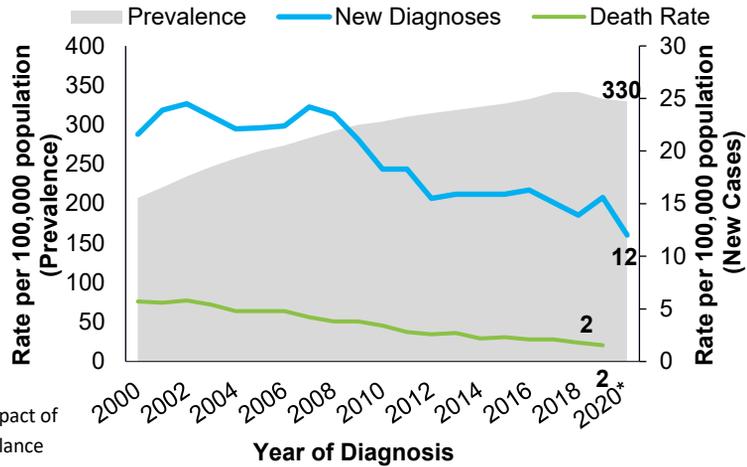
HIV in North Carolina, 2020



- As of December 31, 2020, the number of people living with HIV who reside in North Carolina (including those initially diagnosed in another state) was 34,963 (330 per 100,000 NC population).
- It is estimated that 38,900 people are living with HIV/AIDS in North Carolina, including an estimated 4,400 people who have HIV but are undiagnosed as of December 31, 2020.
- 1,079 adults/adolescents were newly diagnosed with HIV/AIDS in 2020 (rate of 12.0 cases per 100,000).

*Note: Data for 2020 are should be treated with caution due to the impact of the COVID-19 pandemic on accessing HIV testing, HIV care, and surveillance activities in North Carolina.

HIV rates in North Carolina, 2000-2020*



2020 HIV among Men:

- 874 men were newly diagnosed with HIV (rate: 20.2 per 100,000).
- 68% of men newly diagnosed with HIV reported sex with men (MSM)
- 6% of men newly diagnosed with HIV reported injecting drug use, which is similar to the past few years
- 52% were young men, ages 13 to 34
- Black/African American men continue to experience the highest rates of new HIV diagnoses (55.0 cases per 100,000).

2020 HIV among Women:

- 180 women were newly diagnosed with HIV (rate: 3.9 per 100,000).
- 51% of women newly diagnosed reported exposure through heterosexual contact, while 40% had unknown risk
- 9% reported injecting drug use, which is slightly higher than the past few years
- 51% were under the age of 40
- Black/African American women continue to experience the highest rates of new HIV diagnoses (11.2 cases per 100,000).

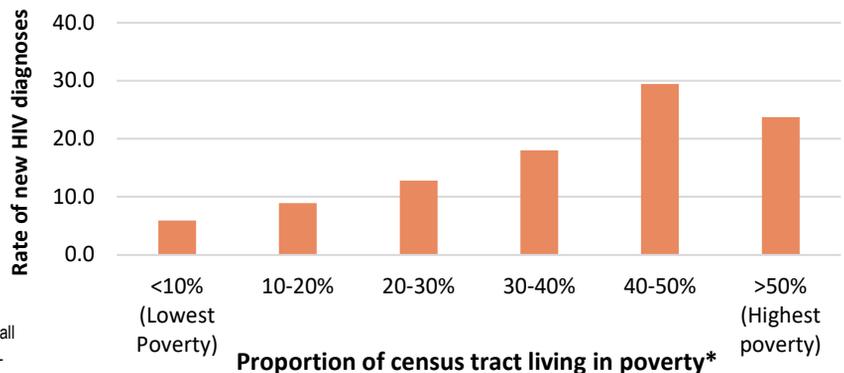
Information on transgender North Carolinians with HIV is available in our annual report

<https://epi.ncpublichealth.info/cd/stds/annualrpts.html>

HIV rates are highest among people living in the most impoverished neighborhoods.

People living in impoverished areas often have less access to resources, including health resources. This can result in less viral suppression and increased potential for transmission.

New HIV Diagnoses by Poverty Indicator, 2020



*Estimates of people living below the poverty line within a census tract and all population estimates obtained from the American Community Survey, 2015-2019 5-year estimate (<https://www.census.gov/programs-surveys/acs/>).



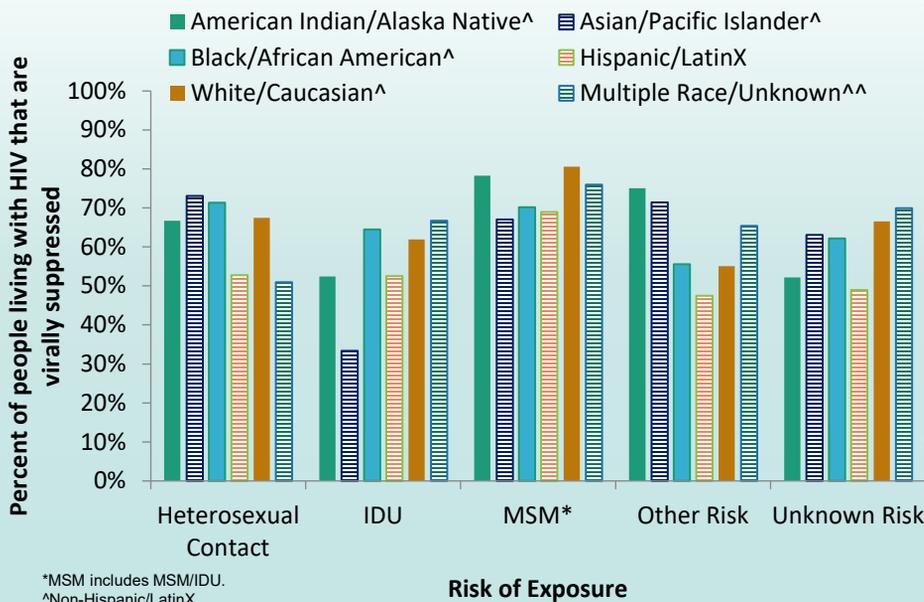
HIV in North Carolina, 2020



What is North Carolina doing to decrease HIV?

- North Carolina developed an Ending the Epidemic (ETE) Plan. All funded agencies and health departments are encouraged to utilize the plan as a blue print. Visit [https://epi.dph.ncdhhs.gov/cd/stds/docs/NC-Ending-HIV-Brochure\(English\)-Web.pdf](https://epi.dph.ncdhhs.gov/cd/stds/docs/NC-Ending-HIV-Brochure(English)-Web.pdf) to see the state's ETE Plan.
- North Carolina staff are working closely with funded agencies to address barriers to care and viral suppression, especially for historically marginalized populations.
- North Carolina provides funds for HIV testing, linkage to care, and evidence-based risk reduction programs. These activities prioritize support for the communities most affected by HIV, such as young men of color.
- Local health departments and other providers are starting to offer Pre-Exposure Prophylaxis (PrEP) for HIV. For more information about PrEP, visit <https://www.med.unc.edu/ncaidstraining/prep/PrEP-for-consumers> or <https://pleaseprepme.org/>.

Viral Suppression by Race/Ethnicity and HIV Exposure, 2020



- Being virally suppressed (VL<200 copies/mL) prevents transmission of HIV to others.
- 66% of people diagnosed and living with HIV in NC were virally suppressed in 2020.
- Barriers to care and achieving viral suppression include lack of transportation, lack of family support, social stigma, and the complexity of accessing health insurance.
- Hispanic/LatinX residents of NC have lower viral suppression than other race/ethnicity groups.

What CLINICIANS can do

If you are a care provider, educate yourself about PrEP (<https://www.med.unc.edu/ncaidstraining/prep/PrEP-for-consumers> or <https://pleaseprepme.org>). Ensure that you receive regular cultural competency training in order to better meet the needs of your patient population.

If your patient is sexually active and HIV positive, talk with your patient about their sexual health. Patients with ongoing STI risk behaviors should be tested regularly for syphilis and other STIs, like gonorrhea and chlamydia. STI prevention is HIV prevention!

What YOU can do

If you have HIV, seek treatment: you deserve a long and happy life!

For treatment help, visit the North Carolina HIV Medication Assistance Program (HMAP) website:

<https://epi.publichealth.nc.gov/cd/hiv/hmap.html>

Data Sources: enhanced HIV/AIDS Reporting System (eHARS) (data as of June 28, 2021) and North Carolina Engagement in Care Database for HIV Outreach (NC ECHO) (data as of July 2021).