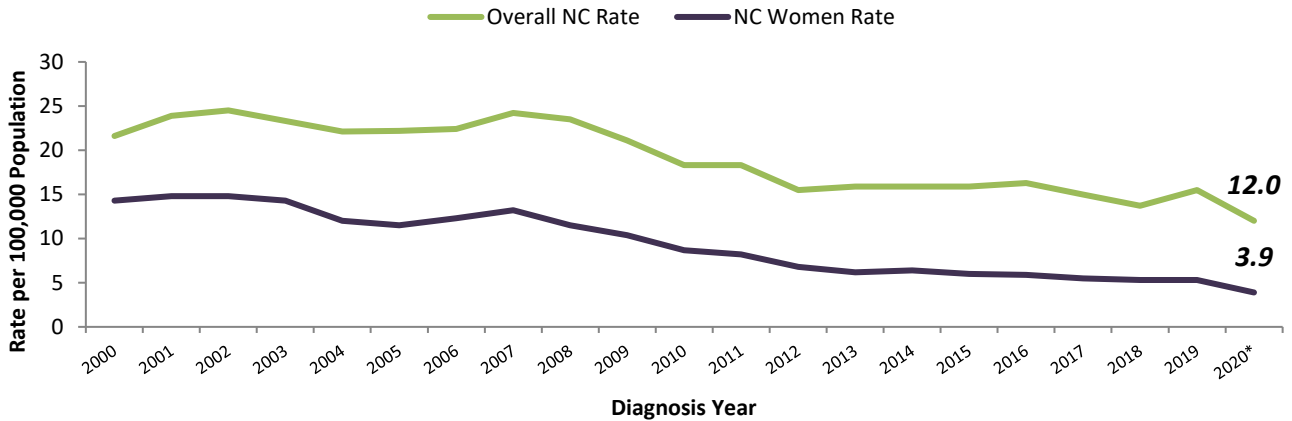




# HIV and Women in North Carolina, 2020



## HIV diagnoses among women have remained stable over the past few years

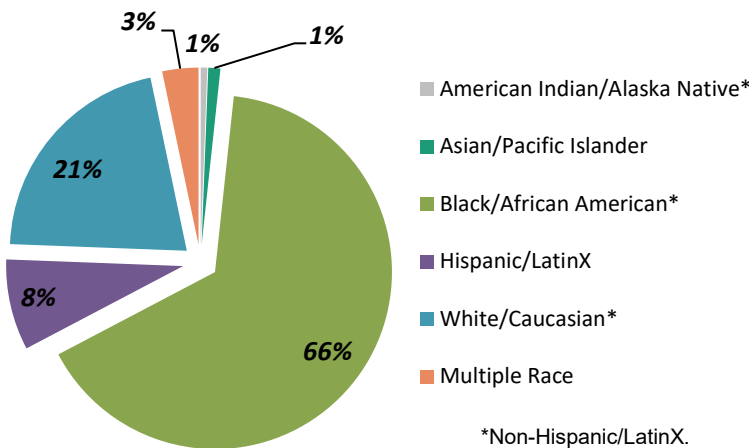


\*Note: 2020 data should be treated with caution due to reduced availability of testing caused by the COVID-19 pandemic. Data is italicized for this reason.

### In 2020, among women newly diagnosed with HIV:

- Women accounted for 27% (9,478, rate: 174.0 per 100,000 population) of the 34,963 people diagnosed and living with HIV infection in North Carolina.
- Women were 17% (180) of the 1,079 people newly diagnosed with HIV (rate: 3.9 per 100,000).
- 85% reported only heterosexual contact; 15% reported exposure through injecting drug use.
- 49% were over the age of 40.
- 39 (22%) had late-stage HIV (diagnosed with Stage 3 [AIDS] within six months of their HIV diagnosis). The rate of women diagnosed with late-stage HIV has remained stable over the past few years, at 1.0 per 100,000 women in North Carolina. The majority of these delayed diagnoses were among women of color (31; 79%).

### More than two-thirds of women newly diagnosed with HIV are Black/African American women



### There was no documented perinatal transmission of HIV in 2020 in NC

- 111 (62%) new diagnoses of HIV among women occurred in women of child-bearing age (15 to 44 years).
- In 2020, there were ZERO reported cases of transmission of HIV from mother to baby at birth (perinatal transmission) in North Carolina.
- Perinatal transmission has decreased since 2007, when new HIV testing statutes were implemented.



\*Note: 2020 data should be treated with caution due to reduced availability of testing caused by the COVID-19 pandemic. Data is italicized for this reason.

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Created by the HIV/STD/Hepatitis Surveillance Unit  
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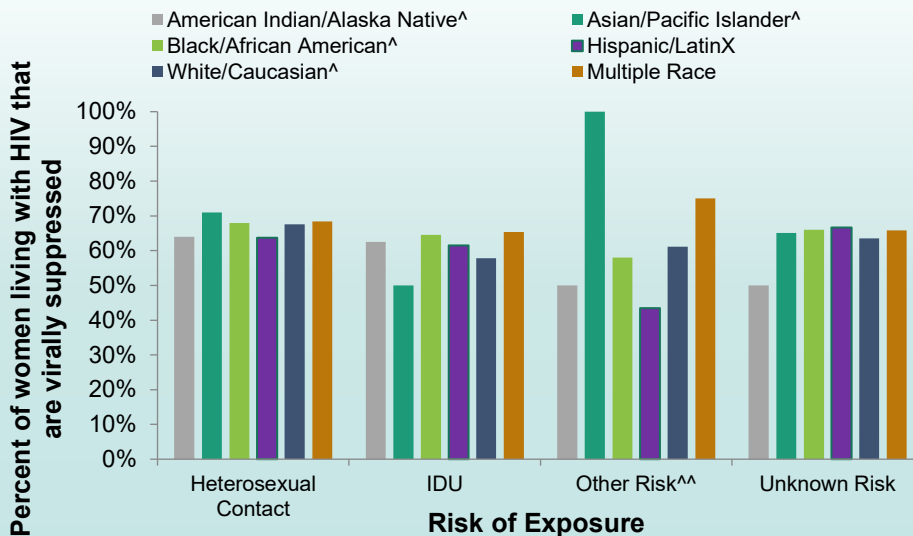
# HIV and Women in North Carolina, 2020



## What is North Carolina doing to decrease HIV?

- North Carolina developed an HIV Ending the Epidemic (ETE) Plan. All funded agencies and health departments are encouraged to utilize the plan as a blueprint. Visit [https://epi.dph.ncdhhs.gov/cd/hiv/docs/NC-Ending-HIV-Brochure\(English\)-Web.pdf](https://epi.dph.ncdhhs.gov/cd/hiv/docs/NC-Ending-HIV-Brochure(English)-Web.pdf) to see the state's ETE Plan.
- North Carolina provides funds for HIV testing, linkage to care, and evidence-based risk reduction programs. These activities are oriented toward support for the communities most affected by HIV.
- 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 among Women by Race/Ethnicity and HIV Exposure, 2020\*



- Being virally suppressed (viral load < 200 copies/mL) prevents sexual transmission of HIV to others.
- 66% of women 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.
- Latina residents of NC have lower viral suppression than other race/ethnicity groups.

\*Note: 2020 data should be treated with caution due to reduced availability of testing caused by the COVID-19 pandemic.  
 ^Non-Hispanic/LatinX.  
 ^^Other risks include exposure to blood products (adult hemophilia or transfusions), pediatric exposure, needle sticks, and health

## What CLINICIANS can do

All pregnant women should be tested for HIV and syphilis at their first prenatal visit and during the third trimester in order to prevent mother-to-child transmission. A third syphilis test should be done at delivery. Women with no prenatal care should be tested at delivery for both HIV and syphilis

(<https://www.cdc.gov/nchhstp/pregnancy/screening/clinician-timeline.html>).

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.

## 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).