



SPECIAL CONSIDERATIONS IN ART INITIATION

Epidemiology

- Global: Women comprise 50% of HIV-infected population
- US: Women comprise ~19% new HIV diagnoses
 - HIV diagnoses decreasing among women
- Women from minority populations disproportionately affected
 - 61% African American
 - 19% Caucasian
 - 16% Latina/Hispanic
- Acquisition of HIV via injection drug use similar between men and women
- Route of transmission differs by race
 - 64% African American women acquire HIV via heterosexual contact vs 16% Caucasian women

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UNAIDS Data 2017. http://www.unaids.org/sites/default/files/media_asset/20170720_Data_book_2017_en.pdf
CDC. HIV Among Women. <https://www.cdc.gov/hiv/group/gender/women/index.html>
CDC. HIV Surveillance Report. 2017.

Barriers to HIV Testing Often Delay or Prevent Access to Care for Women

Psychological	Social/Economic	Physical
<ul style="list-style-type: none"> Fear of disclosure Low familiarity with testing Stigma Denial Cultural mistrust 	<ul style="list-style-type: none"> Access to care Poverty Racism Sexism Lack of discretion at testing facility Lack of insurance 	<ul style="list-style-type: none"> Risk of intimate partner violence

There are common barriers among women as well as group-specific cultural and ethnic barriers.

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McDougall GJ, Jr., et al. *HIV/AIDS* 2016;2016(S1):S9-S13; Messer LC, et al. *AIDS Patient Care STDs*. 2013;27(7):398-407; Gruskin L, et al. *J Urban Health*. 2002;79(4):512-524.

In the United States, women comprise approximately 19% of new HIV diagnoses.¹ Although new HIV diagnosis is declining among women in general, women of color remain disproportionately affected by HIV. Two thirds (61%) of the women with HIV in the United States are African American vs 12%-13% of the general population; 19% are Caucasian; and 16% are Latino or Hispanic. The route of transmission also differs by race/ethnicity, with 64% of African American women acquiring HIV via heterosexual contact vs only 16% of Caucasian women with HIV.

Other disparities among women are apparent. For instance, African American and Hispanic/ Latina women have significantly lower rates of virologic suppression than white women,^{2,3} and African American women who are infected with HIV are more likely to use injecting drugs, be of younger age than Caucasian and Hispanic women, have higher CD4 counts at diagnosis, and have more uncertain health insurance. African American women are also less likely to be diagnosed. Approximately 30% present with AIDS at the time of their HIV diagnosis, or progress to AIDS within the first year of diagnosis.⁴ However, Centers for Disease Control and Prevention (CDC) data suggest that HIV diagnosis rates are decreasing among black women and that prevention measures targeting women are reducing HIV diagnostic disparities.

Barriers to HIV testing among African American and other populations of women include lack of access to health care services, internalized stigma and fear about a reactive HIV test result, and concerns about privacy and confidentiality.

Barriers to HIV Testing: Immigrant Women

Study in Washington DC showed that few East African women seek HIV testing due to the barriers below:

Assumptions	Emotions	Potential Reactions
<ul style="list-style-type: none"> Implies I have engaged in 'bad behavior' Implies I am HIV positive 	<ul style="list-style-type: none"> Fear of HIV diagnosis and what it might mean for me Worry about others' gossip and negative judgments Worry that HIV information is not confidential Discomfort with invasive questions 	<ul style="list-style-type: none"> Getting an HIV test can: <ul style="list-style-type: none"> Signal distrust, disrespect, infidelity Lead to argument with family members

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De Jesus M, et al. *Sex Trans Inf*. 2015;91(8):569-575.

Many women face the risk of intimate partner violence in the event of an HIV diagnosis. Specific barriers have been identified among immigrant women. For instance, a study in Washington, DC, that assessed barriers among women immigrating from East Africa, showed that many women do not wish to be tested for HIV because of assumptions that others might have about them, regardless of the result. Emotions associated with the fear of diagnosis, discomfort about the presumed judgment of others or about potentially invasive questions, as well as the potential reactions of family and friends, all posed barriers to testing among this subpopulation. Effective strategies to facilitate testing among women, including African American women, include improving access to health care, increasing women's knowledge about HIV and available treatment, including HIV testing alongside testing for sexually transmitted infection, and building social norms and problem-based coping skills among this population.^{5,6}

1. CDC. HIV Among Women. <https://www.cdc.gov/hiv/group/gender/women/index.html>
2. Getter A, Sutton MY, Armon C, et al. Trends of racial and ethnic disparities in virologic suppression among women in the HIV Outpatient Study, USA, 2010-2015. *PloS One*. 2018;13(1):e0189973.
3. Nwangwu-lke N, Frazier EL, Crepaz N, Tie Y, Sutton MY. Racial and ethnic differences in viral suppression among HIV-positive women in care. *JAIDS*. 2018;79(2):e56-e68.
4. Hubbard McCree D, Sutton M, Bradley E, Harris N. Changes in the disparity of HIV diagnosis rates among black women—United States, 2010–2014. *MMWR*. 2017;66(4):104-106.
5. Foster PP, Dalmida SG, McDougall GJ, Jr. HIV knowledge, perceived risk and gender as modulators of salivary HIV rapid testing in African Americans. *HIV/AIDS Res Treat*. 2017;2017(Sep1):S31-s37.
6. Gwadz M, Cleland CM, Kutnick A, et al. Factors associated with recent HIV testing among heterosexuals at high risk for HIV infection in New York City. *Front Public Health*. 2016;4:76