Offering HIV Tests to Women Can Help Find Those Diagnosed But Not in Care

A CDC testing program also revealed many disparities in linkage to care for the virus.

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Centers for Disease Control and Prevention (CDC)–funded HIV tests have helped find women who previously have been diagnosed with the virus but who are not in related medical care. A recent CDC analysis of HIV testing data regarding women has also revealed various disparities in access to care and rates of new diagnoses among females.

Publishing their findings in the Morbidity and Mortality Weekly Report, CDC researchers analyzed data on the 3 million HIV tests the agency funded in 2015 through 61 state and local health departments and 123 community-based organizations. Specifically, they looked at the 4,749 women who tested positive that year (48 percent of all tests were provided to women) through this effort.

A total of 2,951 (62 percent) of the women who tested positive had been diagnosed with the virus previously, while the remainder received a new diagnosis.

After adjusting the data for various factors, the researchers found that, compared with women in their 20s, those between the age of 13 and 19 were 59 percent less likely to receive a new diagnosis. Compared with women in their 20s, those in their 30s were 1.69-fold more likely to receive a new diagnosis, while those in their 40s and those 50 and older were a respective 2.58-fold and 2.53-fold more likely to receive a new diagnosis.

Fifty-eight percent of the new HIV diagnoses were among Black women, who were 31 percent more likely to receive a new HIV diagnosis than their white counterparts.

Compared with tests conducted in the South, those conducted in the Northeast, Midwest, West, and the pairing of Puerto Rico and the U.S. Virgin Islands were a respective 1.65-fold, 1.24-fold, 1.59-fold and 2.26-fold more likely to yield new diagnoses.

Compared with tests conducted in jurisdictions in which a relatively high rate of the population was living with HIV, those conducted in medium and medium-low to low prevalence jurisdictions were a respective 14 percent and 62 percent less likely to yield new HIV diagnoses.

Tests conducted in health care facilities were 49 percent less likely to yield new diagnoses than those conducted in non–health care facilities.

Among the 1,798 women newly diagnosed with HIV in 2015, 1,104 (61 percent) were linked to HIV-related medical care within 90 days of diagnosis and 1,096 (61 percent) were interviewed for partner-notification services. Seventy-two percent of the women in the Northeast were linked to care within 90 days, compared with 79 percent of those in Puerto Rico and the U.S. Virgin Islands and 59 percent in the South. Compared with those women who tested newly positive in the South, those in the Northeast and in the two island territories were a respective 1.21-fold and 1.57-fold more likely to be promptly linked to care.

Among the 2,951 women who tested positive and had previously been diagnosed with HIV, 2,554 (87 percent) were not in medical care for the virus at the time of their test. Among those women not in care, 1,474 (58 percent) were linked to care within 90 days. Fifty-seven percent of Black women who were diagnosed previously and not in care were linked to care within 90 days of their test, compared with 65 percent of white women, making Black women 9 percent less likely to be linked promptly compared with their white counterparts. Regionally, the proportion that was promptly linked to care was 53 percent in the South, 78 percent in the Northeast and 86 percent in the West, making those in the Northeast and West a respective 1.46-fold and 1.57-fold more likely to be promptly linked to care compared with those in the South. Sixty-eight percent of the women who were tested in non–health care facilities were promptly linked to care, compared with 55 percent of those in health care facilities, making those in the latter category 20 percent less likely to be promptly linked to care compared with those tested in non–health care facilities.

To read the report, click here.

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