



Racial Disparities in HIV Care Retention Persist

A study of South Carolina HIV data emphasizes the need for equitable access to care to help end the U.S. epidemic.

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Significant racial disparities persist when it comes to [retention](#) in care among people living with HIV, [according to a study](#) examining South Carolina data published this month in AIDS and Behavior.

Modern [antiretroviral treatment](#) for [HIV](#) is highly effective, generally well tolerated and more convenient than ever—regimens are available as a daily pill or once-monthly injection—so treatment success often comes down to consistent use. [Adherence](#) means taking the correct dose of medications exactly as prescribed by a health care provider or recommended by a pharmacist.

To keep [viral load](#) suppressed, the concentration of antiretrovirals in the body must be kept at a high enough level. If the level of medication falls too low, the virus can resume replication, which can lead to disease progression. People who maintain an undetectable viral load can usually avoid immune system damage and reduce the likelihood of HIV-related complications. What's more, they do not transmit the virus via sex (a fact referred to as [Undetectable = Untransmittable](#), or U=U).

“Retention in care,” the study authors wrote, “is a critical step in the HIV care continuum, essential for improving health outcomes among people with HIV...and reducing HIV transmission.”

Yet only about half of individuals living with HIV in the United States are retained in care, and only 57% are virally suppressed, according [to HIV.gov](#).

Racial inequities are a major cause of low retention in care, according to the study findings. For the study, researchers analyzed electronic health records to observe the social and structural factors that contribute to [racial inequities](#) in South Carolina.

Researchers used data from 17,591 people living with HIV across 46 counties in South Carolina. Of those included in the study, 72.2% were men, and almost 76% identified as non-Hispanic Black.

Retention in care was calculated by measuring the proportion of people living with HIV in within a county who had been in consistent care for one calendar year. A Black-to-white ratio (BWR) was also calculated.

Between 2013 to 2020, the BWR varied from year to year, with the ratio exceeding 1 in some years and falling below 1 in others. Racial disparities were more prevalent in the southern and middle regions of the state compared with other regions. When using the Gini index, which measures income or wealth inequality, however, northwest North Carolina had higher disparities.

What's more, counties with exacerbated racial disparities in care retention were more likely to have less social interaction in Black individuals, less collective efficacy, stronger family unity, fewer primary care providers and fewer income inequalities.

The study highlights the need for equitable [access to care](#) to stop the spread of HIV.

Methods to address these racial disparities “could include strengthening health care infrastructure in underserved areas and promoting community-level support systems,” study authors wrote. “In addition, partnering with community leaders, advocacy groups, and PWH [people with HIV] themselves will enhance the relevance and sustainability of these interventions, ultimately leading to better [retention in care].”

To read more, go to POZ's Health Basics on [HIV Medication Adherence](#). It offers the following tips for improving adherence:

1. Make it a habit. Keep your antiretrovirals near something you use every day, like your coffeepot or toothbrush.
2. Beware of schedule changes. Some people have more trouble remembering to take their meds on days off from work or school, during vacations or at other times when their schedule is different from usual.
3. Set up reminders. Some AIDS service organizations and pharmacies will call or text to remind you to take your medications. Online reminder services can also send you messages at specified times.
4. Set an alarm. Program your watch or phone to alert you at the times of day when you need to take medications.
5. Meds on the go. If you need to take your medications while away from home, consider a portable pocket-sized pill case—some even have built-in timers.
6. Travel smart. Keep your meds in carry-on luggage and bring extra doses in case of flight delays,

cancellations or other unexpected events.

7. Plan ahead. Make sure to regularly refill your prescriptions so you don't run out of your medications.