HIV in North Carolina  
Reported HIV Case Data, 2015

Overall, the newly diagnosed HIV infection rate has remained stable over the past few years

In 2015:

- 29,935 people were diagnosed with HIV and alive in North Carolina.
- 1,345 people were newly diagnosed with HIV in North Carolina.
- An estimated 36,800 people are living with HIV/AIDS in North Carolina. Of this number, an estimated 3,400 are undiagnosed and unaware that they are infected.

New HIV diagnoses occur in different groups among men and women

2015 HIV in Men:

- 85% were men who report sex with men (MSM)
- 50% were young men (aged 13 to 29)
- 20% were diagnosed with AIDS within 6 months of their HIV diagnosis

2015 HIV in Women:

- 95% were exposed through heterosexual contact
- 50% were women over the age of 40
- 28% were diagnosed with AIDS within 6 months of their HIV diagnosis

Almost two-thirds of all new HIV diagnoses are among Black/African Americans

The increasing rates of HIV among Hispanic/Latinos and Black/African Americans can be attributed to socioeconomic issues, such as poverty, lack of information, misinformation and stigma about HIV, inadequate healthcare access, and institutional racism. HIV rates are also highest in low-income areas (CDC 2015), and Black/African Americans and Hispanic/Latinos are more likely to live in these areas.

Data Source:
enhanced HIV/AIDS Reporting System (eHARS) (data as of June 27, 2016) and Medical Monitoring Project (MMP) weighted data (data as of August 4, 2016).

Want More Information?

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What is North Carolina doing to decrease HIV?

- Public health works to control HIV by testing (to diagnose new cases) and linking patients to care (HIV treatment improves health outcomes and can prevent transmission of the virus to others).
- North Carolina provides funds for HIV testing. Over 207,000 HIV tests were conducted at the North Carolina State Laboratory of Public Health (SLPH) in 2015, including rapid tests performed by state funded agencies. Of those, 956 (0.5%) individuals were newly positive.
- North Carolina funds evidence-based risk reduction programs. Over 1,400 HIV positives or high-risk negative people participated in 11 different programs.
- State bridge counselors actively look for HIV-positive people who have fallen out-of-care and offer assistance in addressing barriers to remaining engaged in HIV medical care.
- Nationally, clinicians are helping people at high risk of acquiring HIV by offering Pre-Exposure Prophylaxis (PrEP); see the side bar for North Carolina links.

What CLINICIANS can do

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

If you are a care provider, educate yourself about PrEP (resources in sidebar). Also ensure that you receive regular cultural competency training in order to better meet the changing needs of your patient population (resources in sidebar).

Viral Suppression of those in HIV care

In HIV care settings, 84% of patients were estimated to be virally suppressed in 2014.*

In 2014, 72% of all patients were virally suppressed for 12 months.**

What YOU can do

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

For help, see the AIDS Drug Assistance Program (ADAP) resources in the side bar.