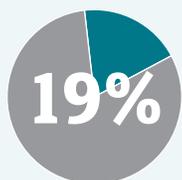
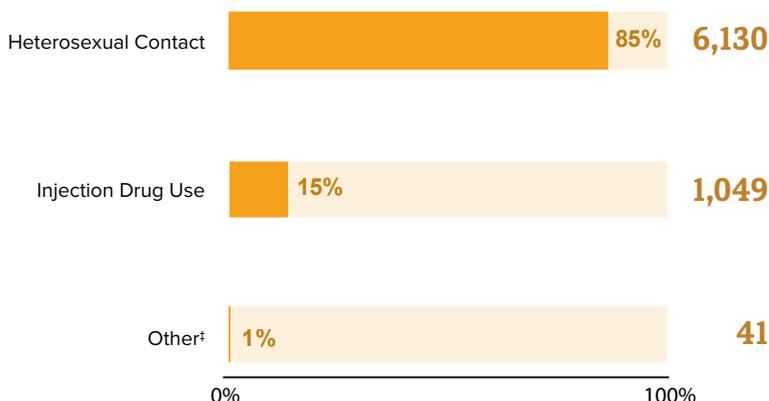


HIV and Women



Of the **37,832 NEW HIV DIAGNOSES** in the US and dependent areas* in 2018, 19% were among women.†

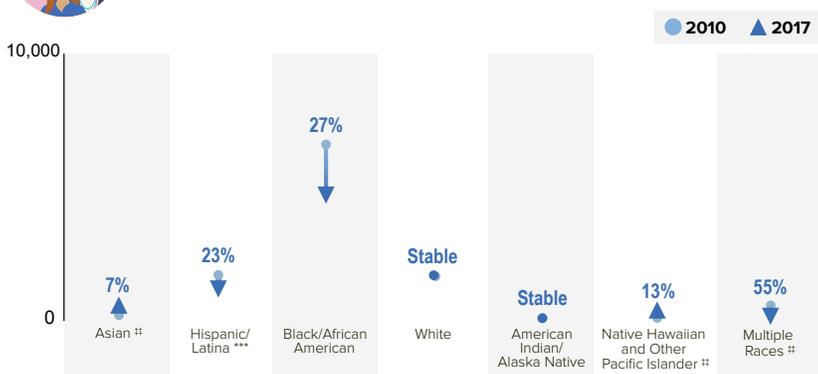
Most of the new HIV diagnoses among women were attributed to heterosexual contact.



HIV diagnoses declined 23% among women overall from 2010 to 2017. ** Although trends varied for different groups of women, HIV diagnoses declined for groups most affected by HIV, including black/African American†† women and women aged 25 to 34.



Trends by Race and Ethnicity



Trends by Age



* American Samoa, Guam, the Northern Mariana Islands, Puerto Rico, the Republic of Palau, and the US Virgin Islands.
 † Adult and adolescent women aged 13 and older.
 ‡ Includes hemophilia, blood transfusion, perinatal exposure, and risk factors not reported or not identified.
 ** In 50 states and the District of Columbia.
 †† *Black* refers to people having origins in any of the black racial groups of Africa. *African American* is a term often used for Americans of African descent with ancestry in North America.
 †† Changes in subpopulations with fewer HIV diagnoses can lead to a large percentage increase or decrease.
 *** Hispanic women/Latinas can be of any race.



Women who don't know they have HIV cannot get the care and treatment they need to stay healthy.



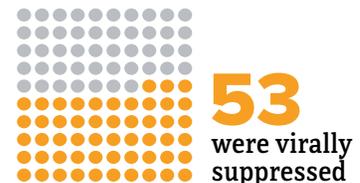
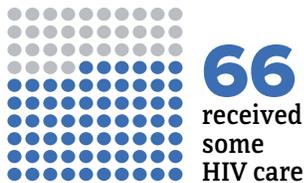
At the end of 2016, an estimated **1.1 MILLION PEOPLE** had HIV.** Of those, 258,000 were women.

8 in 9
women knew they had the virus.



It is important for women to know their HIV status so they can take medicine to treat HIV if they have the virus. Taking HIV medicine every day can make the viral load undetectable. Women who get and keep an undetectable viral load (or stay virally suppressed) have effectively no risk of transmitting HIV to HIV-negative sex partners.

When compared to people overall with HIV, women have about the same viral suppression rates. But more work is needed to increase these rates. In 2016, for **every 100 women with HIV:****



For comparison, for every **100 people overall** with HIV, **64 received some HIV care**, **49 were retained in care**, and **53 were virally suppressed**.

There are several challenges that place women at higher risk for HIV.

Other Sexually Transmitted Diseases (STDs)



Having another STD, such as gonorrhea and syphilis, can increase the chance of getting or transmitting HIV.

Unaware of Partner's Risk Factors



Some women don't know their male partner's risk factors for HIV (such as injection drug use or having sex with men) and may not use protection (like condoms or medicine to prevent HIV).

Risk of Exposure



Because receptive sex is riskier than insertive sex, women have a higher risk of getting HIV during vaginal or anal sex than their sex partner.

History of Sexual Abuse



Women who have been sexually abused are more likely to engage in risky behaviors like exchanging sex for drugs or having multiple sex partners.

How is CDC making a difference for women?



Collecting and analyzing data and monitoring HIV trends.



Supporting community organizations that increase access to HIV testing and care.



Conducting prevention research and providing guidance to those working in HIV prevention.



Promoting testing, prevention, and treatment through the *Let's Stop HIV Together* campaign.



Supporting health departments and community-based organizations by funding HIV prevention work and providing technical assistance.



Strengthening successful HIV prevention programs and supporting new efforts funded through the *Ending the HIV Epidemic* initiative.

For more information about HIV surveillance data and how it is used, read the "Technical Notes" in the HIV surveillance reports at www.cdc.gov/hiv/library/reports/hiv-surveillance.html.

For more information visit www.cdc.gov/hiv