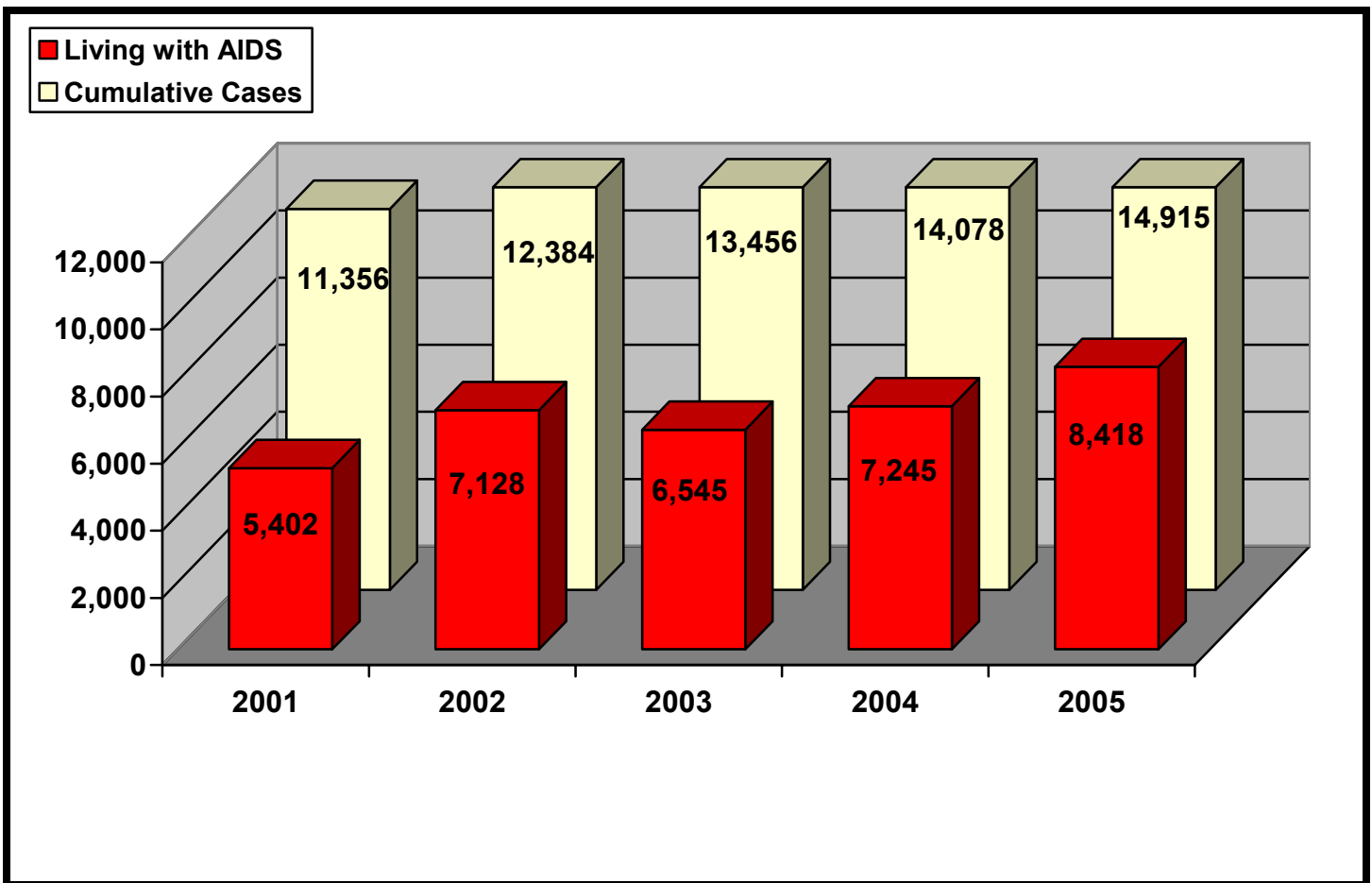


HIV/AIDS IN NORTH CAROLINA

While the federal government's investment in treatment and research is helping people with HIV/AIDS live longer and more productive lives, HIV continues to spread at a staggering national rate of over 40,000 new infections per year. The following data represent the total reported AIDS cases in North Carolina through year-end 2005:

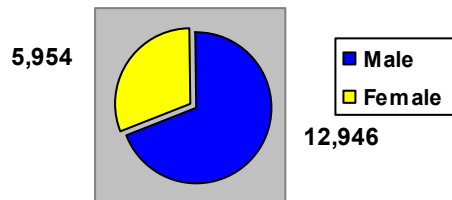
Total Reported AIDS Cases



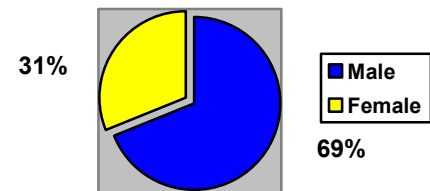
Demographic Trends

It is the position of AIDS Action that the current HIV/AIDS statistics represent only a portion of the epidemic in the U.S. The data below only captures the HIV/AIDS cases that were confirmed through testing and reporting; thus, it does not reflect the demography and size of the HIV positive population that has not yet been tested or reported.

TOTAL LIVING HIV/AIDS CASES BY GENDER, 2005



PERCENTAGE OF TOTAL LIVING HIV/AIDS CASES BY GENDER, 2005



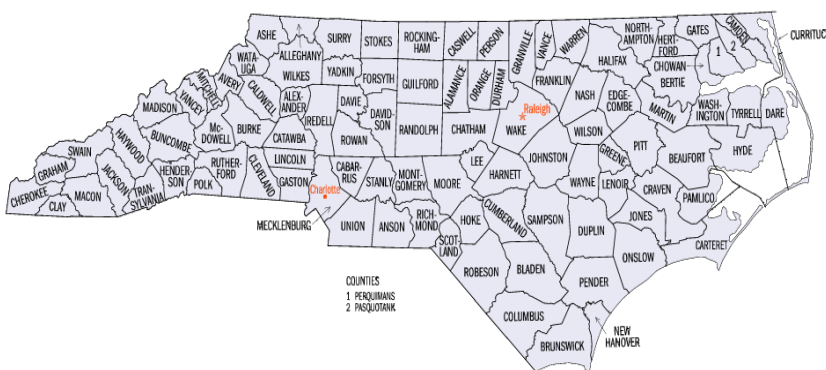
TOTAL LIVING HIV/AIDS CASES BY RACE / ETHNICITY, 2005

White, Not Hispanic	4,703
Black, Not Hispanic	13,206
Hispanic	708
Asian/Pacific Islander	86
American Indian/Alaskan Native	179

PERCENTAGE OF TOTAL LIVING CASES BY RACE / ETHNICITY, 2005ⁱⁱ

White, Not Hispanic	25%
Black, Not Hispanic	70%
Hispanic	4%
Asian/Pacific Islander	<1 %
American Indian/Alaskan Native	1 %

NORTH CAROLINA COUNTIES, 2005ⁱⁱⁱ



TOTAL REPORTED AIDS CASES BY MAJOR COUNTIES, 2005^{iv}

Mecklenburg County	2,091
Wake County	1,605
Guilford County	1,059
Durham County	917
Forsyth County	735
Cumberland County	619
Pitt County	409
New Hanover County	405

FISCAL YEAR 2005 FUNDING FOR HIV/AIDS IN NORTH CAROLINA

At-A-Glance

	Department	Agency	Amount
HIV Prevention	Health & Human Services	Centers for Disease Control & Prev.	\$4,723,876
Ryan White - Title I	Health & Human Services	Health Resources & Services Admin	\$0
Ryan White - Title II	Health & Human Services	Health Resources & Services Admin	\$23,219,438
Ryan White - Title III	Health & Human Services	Health Resources & Services Admin	\$2,428,645
Ryan White - Title IV	Health & Human Services	Health Resources & Services Admin	\$1,992,142
Ryan White - AETC	Health & Human Services	Health Resources & Services Admin	\$2,153,962
Ryan White - Dental	Health & Human Services	Health Resources & Services Admin	\$21,296
Ryan White - MAI	Health & Human Services	Health Resources & Services Admin	\$3,660,638
Ryan White - SPNS	Health & Human Services	Health Resources & Services Admin	\$ 1,274,607
HOPWA	Housing & Urban Dev.	Office of HIV/AIDS Housing	\$4,102,276

Prevention

The Centers for Disease Control and Prevention provided North Carolina with \$4,723,876 for HIV prevention programs. These funds were allocated to state and local health departments and community-based organizations to finance counseling and testing programs, public information and health education/risk reduction activities, and monitoring/surveillance programs.^v

Ryan White CARE Act

The Ryan White Comprehensive AIDS Resources Emergency (CARE) Act, enacted in 1990 and reauthorized in 1996, 2000, and 2006 is the centerpiece of the federal government's efforts to improve the quality and availability of care for medically underserved individuals and families affected by HIV/AIDS. The CARE Act, administered by the HIV/AIDS Bureau of the Health Resources and Services Administration, provides funding to states, territories, and other public and private nonprofit entities to develop, organize, coordinate, and operate more effective and cost-efficient systems for the delivery of essential health care and support services to people living with HIV/AIDS and their families.

- **Title I – Eligible Metropolitan Areas (EMAs):** Title I provides funding to eligible metropolitan areas disproportionately affected by the HIV epidemic. North Carolina qualified for \$0 in Title I funding.
 - EMAs: None
- **Title II – States:** Title II helps state health departments improve the quality, availability, and organization of HIV health care and support services. This title also contains the AIDS Drug Assistance Program (ADAP), which provides medications to individuals with low income and supplemental grants for emerging communities, which are defined as cities reporting between 500 and 1,999 AIDS cases in the past five years. North Carolina received \$23,219,438 in CARE Act Title II funds, which includes \$15,288,088 for ADAP and \$833,388 for emerging communities.^{vi}
 - Emerging Communities: Charlotte-Gastonia-Rock Hill, Raleigh-Durham-Chapel Hill, and Greensboro-Winston Salem-High Point^{vii}
- **Title III – Early Intervention Services and Planning:** Title III supports competitive grants to provide medical treatment and medical support services for people living with HIV including HIV testing, early intervention services, risk reduction counseling, case management, outreach, oral health, nutrition, and

mental health services. Title III supports Early Intervention Services (EIS) grants that provide services for HIV positive individuals with low income who are uninsured or underinsured as well as grants for planning and capacity building to help rural or underserved communities develop high-quality HIV primary care. North Carolina received \$2,428,645 in Title III funds.

- **Title IV – Women, Infants, Children, and Youth:** Title IV focuses on the operation and development of primary care systems and social services for women and youth, two groups that represent a growing share of the epidemic. North Carolina received \$1,992,142 in Title IV funds.^{viii}
- **Other CARE Act Funding Programs:**

AIDS Education and Training Centers (AETC) Program

AETCs provide training, consultation, and information to HIV health care providers through a network of 11 regional centers, each of which serves between two and ten states and/or territories; four national centers (the AETC National Resource Center, the National HIV/AIDS Clinicians’ Consultation Center, the National Evaluation AETC, and the National Minority AETC); and over 130 local performance sites across all 50 states, the District of Columbia, and the U.S. territories.

Funding is allocated to each of the 15 national and regional centers, which then distribute resources to local performance sites in each state.

Total Southeast AETC Regional Funding: \$2,153,962^{ix}

Regional Center

Local Performance Site(s)

Southeast AETC
 Department of Family and Preventive Medicine
 Emory University School of Medicine
 735 Gatewood Road, N.E.
 Atlanta, GA 30322-4950
 Ira K. Schwartz, MD, Director and Associate Professor
 Phone: 404-727-2929
 Fax: 404-727-4562
 Email: seatec@emory.edu
 Website: <http://www.seatec.emory.edu>^x

Duke University, Health Inequalities Programs
 Durham, NC
 Rural HIV Training Project
 Salemburg, NC

Located in: Georgia

Serves: Alabama, Georgia, Kentucky, North Carolina, South Carolina, Tennessee

Dental Program

The Ryan White Care Act Dental program provides funding to both a community-based dental program, to increase access to oral health care services for HIV-positive individuals while providing education and clinical training for dental care providers as well as a reimbursement program which reimburses dental schools, postdoctoral dental education programs, and dental hygiene programs for oral health care of individuals living with HIV.

Total Dental Funding: \$21,296^{xi}

Community-based Dental Program	\$0
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Dental Reimbursement Program	\$21,296
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Dental Reimbursement Recipient:	University of North Carolina School of Dentistry Chapel Hill, NC ^{xii}
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Minority AIDS Initiative (MAI)

The Minority AIDS Initiative (MAI) was created by the United States Department of Health and Human Services (HHS) and the Congressional Black Caucus (CBC) in 1998 in response to the HIV/AIDS health crisis facing racial and ethnic minorities in the United States. The program funding is channeled through several federal HIV/AIDS programs and across all titles of the Ryan White CARE Act. MAI funds target programs to enhance effective HIV/AIDS efforts that directly benefit racial and ethnic minority communities. The Minority AIDS Initiative is part of HHS' larger initiative to eliminate racial and ethnic health disparities by the year 2010.

Total MAI Funding: \$3,660,638

Special Projects of National Significance (SPNS)

SPNS is the research and development aspect of the Ryan White CARE Act. SPNS is responsible for assessing the effectiveness of certain care models, providing support for innovative models of HIV/AIDS service delivery and for assisting the replication of effective models across the nation.

Total SPNS Funding: \$ 1,274,607^{xiii}

Housing Opportunities for Persons with AIDS

The Housing Opportunities for Persons with AIDS Program (HOPWA) provides housing assistance and related supportive services for HIV positive persons with low income and their families. HOPWA funds are awarded as "formula grants" to states and metropolitan areas. Grants are also awarded to specific projects on a competitive basis through three grant programs: Special Projects of National Significance (SPNS), projects that address permanent housing and service challenges for persons with HIV/AIDS and their families, and technical assistance projects.

The Department of Housing and Urban Development (HUD) provided North Carolina with a total of \$4,102,276 in HOPWA funding. North Carolina received \$2,912,000 in formula grants^{xiv} and \$4,102,276 in competitive grants under the HOPWA program.^{xv}

HOPWA Grant Type	Funding Amount
Formula	\$2,912,000
Competitive	\$4,102,276

Serostatus Reporting

States require that cases of AIDS be reported to local and state health departments, and since 2004, all states require that cases of HIV infection be reported as well. **The data below include the number of persons reported with HIV infection who do not have an AIDS diagnosis.** As of 2007, all states will use name-based reporting. In name-based reporting, the individual who tests positive is identified by name. The CDC only accepts name-based data for its surveillance reports.

- North Carolina began name-based reporting of HIV infections in 1990.^{xvi}

- Total number of adults living with HIV infection through December 2005: 11,064
- Total number of children \leq 12 years old living with HIV infection through December 2005: 67^{xvii}

State AIDS Director

Evelyn Foust CPM, MPH

Director

HIV/STD Prevention and Care Branch

Division of Public Health

North Carolina Department of Health & Human Services

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E-mail: evelyn.foust@ncmail.net^{xviii}

ⁱ 2001-2005 data: Centers for Disease Control & Prevention Division of HIV/AIDS Prevention. *HIV/AIDS surveillance report* Volumes 13-17. <http://www.cdc.gov/hiv/stats/hasrlink.htm>, Retrieved January 2007.

ⁱⁱ North Carolina Department of Health and Human Services. HIV/STD Quarterly Surveillance Report. <http://www.epi.state.nc.us/epi/hiv/pdf/vol05no4.pdf>. Retrieved January 12, 2007.

ⁱⁱⁱ US Census Bureau. *North Carolina County Selection Map*. http://quickfacts.census.gov/qfd/maps/north_carolina_map.html. Retrieved January 16, 2007.

^{iv} North Carolina Department of Health and Human Services. HIV/STD Quarterly Surveillance Report. <http://www.epi.state.nc.us/epi/hiv/pdf/vol05no4.pdf>. Retrieved January 12, 2007.

^v National Alliance of State and Territorial AIDS Directors. *CDC HIV Prevention Funding for State and Local Health Departments*. http://www.nastad.org/Docs/Public/Publications/2007131_CDC%20Prevention%20Historical%20Funding.xls. (Retrieved February 7, 2007).

^{vi} Health Resources and Services Administration. *State Profiles: The Ryan White CARE Act 2006 Edition*. <http://hab.hrsa.gov>. Retrieved January 2007.

^{vii} Health Resources and Services Administration. *HHS Awards Almost \$1.7 Billion for HIV/AIDS Care*. March 2, 2005. <http://www.hhs.gov/news/press/2005pres/20050302.html>

^{viii} Health Resources and Services Administration. *State Profiles: The Ryan White CARE Act 2006 Edition*. <http://hab.hrsa.gov>. Retrieved January 2007.

^{ix} Frank, Linda. National Association of AIDS Education and Training Centers. Special data report per AIDS Action request, Received February 8, 2007.

^x AETC National Resource Center. *AETC AIDS Education & Training Centers Directory 2005 Edition*. <http://www.aidsetc.org/pdf/about/AETC-2005-Directory.pdf>. (Retrieved October 31, 2006).

^{xi} Health Resources and Services Administration. *State Profiles: The Ryan White CARE Act 2006 Edition*. <http://hab.hrsa.gov>. Retrieved January 2007.

^{xii} Health Resources and Services Administration. Program: *Dental Reimbursement Grant Recipients 2005*. <http://hab.hrsa.gov/programs/dentallist.htm>. Retrieved January 22, 2007.

^{xiii} Health Resources and Services Administration. *State Profiles: The Ryan White CARE Act 2006 Edition*. <http://hab.hrsa.gov>. Retrieved January 2007.

^{xiv} Department of Housing and Urban Development. *FY 2005 HOPWA Formula Allocations*. <http://www.hud.gov/offices/cpd/aidshousing/programs/formula/grants/fy05/2005.pdf>. Retrieved January 22, 2007

^{xv} Department of Housing and Urban Development. *FY 2005 HOPWA Competitive Awards*. <http://www.hud.gov/offices/cpd/aidshousing/programs/competitive/grants/fy05/>. Retrieved January 22, 2007.

^{xvi} North Carolina Department of Health. Special data report per AIDS Action request, Received November 6, 2006.

^{xvii} Centers for Disease Control & Prevention Division of HIV/AIDS Prevention. *HIV/AIDS surveillance report* Volume 17. <http://www.cdc.gov/hiv/stats/hasrlink.htm>, Retrieved January 2007.

^{xviii} National Alliance of State and Territorial AIDS Directors. http://www.nastad.org/About/res_state_Directory.aspx. Retrieved October 31, 2006.