Epidemiology of HIV Among Pediatric* Cases in Florida, through 2012

HIV/AIDS and Hepatitis Section
Division of Disease Control and Health Protection
Data as of 06/30/2013
*Infected prior to age 13

To protect, promote and improve the health of all people in Florida through integrated state, county, and community efforts.
Pediatric HIV Surveillance

- Pediatric HIV cases include those persons who were infected with HIV UNDER 13 years of age.
- Pediatric AIDS cases include those pediatric HIV cases that have developed AIDS, regardless of age of AIDS diagnosis.
- The first pediatric AIDS case was born in 1979, diagnosed in 1982 and reported in 1983.
Pediatric HIV Surveillance

Limitations:

- Due to reporting lags, the most recent calendar year data are considered to be provisional.
- HIV/AIDS Surveillance data are always being updated as newly diagnosed pediatric cases are identified, even if years later.
Acronyms

- ART = Antiretroviral Therapy
- AZT = Antiretroviral Zidovudine Therapy
- IDU = Injecting Drug Use
- NIR = No Identified Risk
These data represent an 87% decline in pediatric AIDS cases by year of diagnosis from 1992 (N=178) to 2012 (N=24). Due to reporting lags, 2012 data by year of diagnosis are provisional. Data as of 06/30/2013.
Pediatric AIDS Cases, by Age Group and Year of Diagnosis, 1990-2012, Florida

Note: As time goes on, the pediatric HIV cases are more likely to NOT develop AIDS until after age 12.
Pediatric AIDS Cases, by Age Group and Year of Diagnosis, 1990-2012, Florida

The number of perinatally infected persons aging to adolescence and adulthood before being diagnosed with AIDS is increasing gradually. This may be an indication of successful treatment and care.
Cumulative Pediatric AIDS Cases,
Reported 1983 through 2012,
by County, Florida

Statewide data:
N=1,883

Number of Cases

- 0
- 1 - 10
- 11 - 25
- 26 - 50
- over 50

Note: The first pediatric AIDS case was reported in 1983.
Data as of 06/30/2013
Cumulative Pediatric HIV (not AIDS) Cases, Reported 07/1997 through 12/2012, by County, Florida

Statewide data: N=646

Number of Cases

- 0
- 1 - 10
- 11 - 20
- over 20

Note: HIV (not AIDS) reporting began 07/1997.
Data as of 06/30/2013
## Cumulative Pediatric AIDS Cases
### Reported For Selected States, Reported through 2011*

<table>
<thead>
<tr>
<th>Reporting State</th>
<th># of Cases</th>
<th>% of Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>New York</td>
<td>2,457</td>
<td>26%</td>
</tr>
<tr>
<td><strong>Florida</strong></td>
<td><strong>1,571</strong></td>
<td><strong>17%</strong></td>
</tr>
<tr>
<td>New Jersey</td>
<td>816</td>
<td>9%</td>
</tr>
<tr>
<td>California</td>
<td>705</td>
<td>7%</td>
</tr>
<tr>
<td>Texas</td>
<td>396</td>
<td>4%</td>
</tr>
<tr>
<td>Pennsylvania</td>
<td>375</td>
<td>4%</td>
</tr>
<tr>
<td>Maryland</td>
<td>345</td>
<td>4%</td>
</tr>
<tr>
<td>Illinois</td>
<td>287</td>
<td>3%</td>
</tr>
<tr>
<td>Georgia</td>
<td>254</td>
<td>3%</td>
</tr>
<tr>
<td>Massachusetts</td>
<td>234</td>
<td>2%</td>
</tr>
<tr>
<td>Connecticut</td>
<td>187</td>
<td>2%</td>
</tr>
<tr>
<td>Virginia</td>
<td>188</td>
<td>2%</td>
</tr>
<tr>
<td>District of Columbia</td>
<td>193</td>
<td>2%</td>
</tr>
<tr>
<td><strong>Remaining States</strong></td>
<td><strong>1,513</strong></td>
<td><strong>16%</strong></td>
</tr>
<tr>
<td><strong>Total Cases</strong></td>
<td><strong>9,521</strong></td>
<td><strong>100%</strong></td>
</tr>
</tbody>
</table>

*Remainder of Area includes the remaining states

Source: Cumulative Data from CDC, HIV Surveillance Report, 2011, Vol. 23, Table 20
Pediatric* HIV Infection Cases and State Population**
in Children <13 years of age, by Race/Ethnicity, Reported* through 2012, Florida

Note: Non-Hispanic blacks are disproportionately affected by HIV disease compared with those of other race/ethnicities. This same trend is seen in adult HIV infection cases but is more pronounced in those diagnosed with HIV Disease under 13 years of age.

*The first pediatric AIDS case was reported in 1983.
**Source: Population estimates are provided by Florida CHARTS as of 05/03/2013.
Cumulative Pediatric (<13 yr.)
HIV Infection Cases by Mode of Exposure

**United States***
(AIDS cases reported through 2011)
(N=9,521)

- Perinatally Acquired: 91%
- Other Pediatric Risk**: 9%

**Florida**
(reported through 2012)
(N=2,529)

- Perinatally Acquired: 95%
- Other Pediatric Risk**: 5%

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**Other Pediatric Risk includes receipt of blood products or unknown risk.
Cumulative Pediatric HIV Infection Cases, by “Expanded” Modes of Exposure, Reported through 2012, Florida

N=2,410

- 21%: Mom-Injection Drug User
- 11%: Mom-Sex w/ Injection Drug User
- 2%: Mom-sex w/ Male Sex with Male
- 35%: Mom-sex w/ person w/ HIV/AIDS
- 1%: Mom-Blood Recipient
- <1%: Mom-sex w/ blood recipient
- 25%: Mom-HIV/AIDS, Risk Unknown
- 2%: Ped-Hemophilia*
- 1%: Ped-Transfus/Transplant*
- 1%: Ped-Confirmed Other*
- 1%: Ped-No Identified Risk*

*Note: 5% (exploded pieces) are NOT perinatal transmission cases
### Prevalence of AIDS-Defining Conditions*
Most Commonly Reported
Among Pediatric Cases, Reported through 2012, Florida

<table>
<thead>
<tr>
<th>AIDS Defining Condition</th>
<th># Cases</th>
<th>% Cases</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pneumocystis pneumonia</td>
<td>490</td>
<td>26%</td>
</tr>
<tr>
<td>Bacterial infections</td>
<td>432</td>
<td>23%</td>
</tr>
<tr>
<td>Candidiasis, esophageal</td>
<td>408</td>
<td>22%</td>
</tr>
<tr>
<td>Wasting syndrome</td>
<td>372</td>
<td>20%</td>
</tr>
<tr>
<td>Lymphoid interstitial pneumonia</td>
<td>301</td>
<td>16%</td>
</tr>
<tr>
<td>HIV encephalopathy</td>
<td>258</td>
<td>14%</td>
</tr>
<tr>
<td>Cytomegalovirus disease</td>
<td>145</td>
<td>8%</td>
</tr>
<tr>
<td>Herpes simplex</td>
<td>117</td>
<td>6%</td>
</tr>
<tr>
<td>Candidiasis, bronchi or lungs</td>
<td>84</td>
<td>4%</td>
</tr>
<tr>
<td>Cryptosporidiosis</td>
<td>81</td>
<td>4%</td>
</tr>
<tr>
<td>No Disease (Immune suppressed only)**</td>
<td>246</td>
<td>13%</td>
</tr>
<tr>
<td><strong>Total Cases</strong></td>
<td><strong>1,883</strong></td>
<td></td>
</tr>
</tbody>
</table>

Note: Of the 2,529 HIV/AIDS pediatric cases, 1,883 (74%) have developed AIDS.
*Data are NOT mutually exclusive, many cases have more than one disease.
**Immune suppressed: CD4 count <200ul or CD4 percent <14%.**
Perinatal Acquired HIV Infected Cases
Persons Living with Perinatally Acquired HIV Infection, Year-end 2009—46 States and 5 U.S. Dependent Areas

N = 9,809

No. of persons living
- < 100
- 100 – 199
- 200 – 299
- ≥ 300

American Samoa 0
Guam 1
Northern Mariana Islands 0
Puerto Rico 277
U.S. Virgin Islands 9

Note: Data include persons with a diagnosis of HIV infection regardless of stage of disease at diagnosis. All displayed data have been statistically adjusted to account for reporting delays, but not for incomplete reporting.

Note. All displayed data have been statistically adjusted to account for reporting delays, but not for incomplete reporting.
Perinatally Acquired HIV Infections in Children Born During 2010—46 States and 5 U.S. Dependent Areas

N = 57

Note. Data include persons with a diagnosis of HIV infection regardless of stage of disease at diagnosis. All displayed data have been statistically adjusted to account for reporting delays, but not for incomplete reporting.
Perinatally Acquired HIV Infected Cases, Born in Florida, by Year of Birth, 1979-2012

N=1,197

Note: These data represent a 94% decline in HIV-perinatally infected births from 1993 (N=109) to 2012 (N=7). These data include ALL perinatally acquired HIV Infection cases BORN in Florida. 2012 data are provisional. None of the babies born since 2010 have developed AIDS.
Data as of 06/30/2013
Note: The majority of the perinatally acquired HIV Infection cases born in Florida are black. They represent greater than 70% of the cases for most years. Data for other/mixed race/ethnicity groups (N=11) for the same time period is not shown.
Perinatally Acquired HIV Infection Cases Born in Florida, by Mother’s Mode of Exposure and Year of Birth, 1979-2012

Note: Since 1992 a steady decline was observed for all risks, although heterosexual contact remains the primary mode of exposure among mothers infected with HIV.
Perinatally Acquired HIV Infection Cases
Born in Florida, by Mother’s Mode of Exposure and Year of Birth, 1979-2012

Born 1979-1993
N =625
- Heterosexual contact: 58%
- Injection drug use: 15%
- Transfusion: 0%
- Mother’s risk not specified: 27%

N=1,197
- Heterosexual contact: 67%
- Injection drug use: 15%
- Transfusion: 1%
- Mother’s risk not specified: 15%

Born 1994-2012
N =572
- Heterosexual contact: 17%
- Injection drug use: 1%
- Transfusion: 1%
- Mother’s risk not specified: 67%

Note: Among children who were infected perinatally with HIV/AIDS, the distribution of their mothers’ exposure categories has changed over time. For both time periods, heterosexual contact was the highest risk, with 58% of the cases born between 1979-1993, increasing to 67% of cases born between 1994-2012.

Perinatally Acquired HIV Infection Cases
N=1,197

- White: 81%
- Black: 9%
- Hispanic: 1%
- Other: 9%

Population Estimates
N= 2,851,616

- White: 29%
- Black: 44%
- Hispanic: 21%
- Other: 6%

Note: Perinatally acquired HIV infection cases among non-Hispanic blacks are disproportionately affected compared with those of other race/ethnicities.

*Source: Population estimates are provided by FloridaCHARTS as of 5/17/2013.
One half (50%, N=188) of the 377 perinatal HIV (not AIDS) cases born through 2012 were diagnosed less than the first 6 months of life. Over two-thirds (67%, N=253) of these perinatal HIV cases were diagnosed under the age of two. Furthermore, less than 1% (N=2) were diagnosed with a perinatal risk after the age of 12.
Nearly three-fifths (58%) (N=477) of the perinatal AIDS cases born through 2012 (N=820), were diagnosed with AIDS prior to the age of two. The number of AIDS cases diagnosed after age two decreases by age. * 12% (N=102) of the cumulative AIDS cases were not diagnosed with AIDS until after the age of twelve (which is up from 5% in 2003).
The peak of PCP in children with perinatally acquired AIDS is four months of age. The age at diagnosis for the other AIDS-defining conditions is much more evenly distributed during the first two years of life.
Note: These data represent a 100% decline in perinatally acquired AIDS cases from 1992 (N=95) to 2012 (N=0).

2012 data are provisional. Data as of 06/30/2013.
Florida has 819 living Perinatally Acquired HIV Infection cases born 1979 through 2012, with the majority (57%) of these cases born in South Florida: Miami-Dade (N=233), Broward (N=134) and Palm Beach (N=100). Data as of 06/30/2013
Current Age* Distribution of Living Perinatally Acquired HIV Infection Cases by Disease Status, Born in Florida, 1979 through 2012 (N=819)

*Current age of living (not known dead) HIV/AIDS perinatal cases born through 2012.

Data as of 06/30/2013
# Perinatally Acquired HIV Infection Cases, by Selected Regions of Birth

## Born in Florida 2005 through 2012

<table>
<thead>
<tr>
<th>Region of Birth</th>
<th>Born 2005-2012</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td># of cases</td>
</tr>
<tr>
<td>Area 01*</td>
<td>2</td>
</tr>
<tr>
<td>Area 03*</td>
<td>1</td>
</tr>
<tr>
<td>Area 08 (Lee Only)</td>
<td>3</td>
</tr>
<tr>
<td>Area 08 (not Lee)*</td>
<td>0</td>
</tr>
<tr>
<td>Area 15*</td>
<td>5</td>
</tr>
<tr>
<td>Broward County</td>
<td>17</td>
</tr>
<tr>
<td>Duval County</td>
<td>9</td>
</tr>
<tr>
<td>Hillsborough/Pinellas Counties</td>
<td>5</td>
</tr>
<tr>
<td>Miami-Dade County</td>
<td>18</td>
</tr>
<tr>
<td>Orange County</td>
<td>11</td>
</tr>
<tr>
<td>Palm Beach County</td>
<td>7</td>
</tr>
<tr>
<td>Polk</td>
<td>2</td>
</tr>
<tr>
<td>Remainder of state</td>
<td>6</td>
</tr>
<tr>
<td><strong>TOTAL CASES</strong></td>
<td>86</td>
</tr>
</tbody>
</table>

*Area 1 = Escambia, Okaloosa, Santa Rosa & Walton Counties;  
Area 3 = Alachua, Bradford, Columbia, Dixie, Gilchrist, Hamilton, Lafayette, Levy, Putnam, Suwannee, & Union Counties;  
Area 8 (not Lee) = Charlotte, Collier, DeSoto, Glades, Hendry & Sarasota Counties.  
Area 15 = St. Lucie, Indian River, Martin, and Okeechobee Counties.

*A total of 5 perinatal cases reported in Florida were born outside of the US and **NOT** included in these data.*
Perinatally Acquired HIV Infection Cases
Born in Florida, 2005-2012,
by Disease Status and Age Group (N=86)

HIV (not AIDS) Cases (N=78)

AIDS Cases (N=8)

Note: Between 2005 and 2012 there were a total of 86 perinatally acquired HIV infection cases born in Florida. Of those cases 83% (n=65) were diagnosed with HIV within the first year of life. Likewise, 9% (n=8) of the perinatally infected cases born in Florida have been diagnosed and reported with AIDS. Among the eight perinatal AIDS cases, 75% (n=6) developed AIDS within the first year of life.
Time of Maternal HIV Testing Among Perinatally Acquired HIV Infection Cases Born in Florida, 2005-2012 (N=86)

Note: One half (50%, n=42) of the 86 HIV-infected mothers who gave birth in Florida between 2005 and 2012 knew they were infected before delivery. It is important for HIV-infected pregnant women to know their HIV infection status in order to make informed decisions about antiretroviral therapy to reduce perinatal transmission of HIV to their infants. The Public Health Service recommends that all pregnant women be offered HIV counseling and voluntary HIV tests.
Women Giving Birth to Perinatally Acquired HIV Positive Babies in Florida by Mother’s Knowledge of HIV Status at Delivery by Year of Birth, 2005-2012

Note: The proportion of pregnant women giving birth to a child diagnosed with HIV and who knew their HIV status prior to delivery varies from year to year, ranging from 50% to 90% or higher.
Possible Missed Opportunities that Could Have Prevented Perinatal Transmission of HIV Among HIV Positive Babies Born in Florida, 2005-2012

<table>
<thead>
<tr>
<th>Missed Opportunities</th>
<th>Number</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mom's HIV Status NOT Known Before Birth</td>
<td>19</td>
<td>22%</td>
</tr>
<tr>
<td>Inadequate Prenatal Care*</td>
<td>60</td>
<td>70%</td>
</tr>
<tr>
<td>No Prenatal Antiretroviral Therapy</td>
<td>50</td>
<td>58%</td>
</tr>
<tr>
<td>No Antiretroviral Therapy at Delivery</td>
<td>37</td>
<td>43%</td>
</tr>
<tr>
<td>Non-Caesarean Birth</td>
<td>34</td>
<td>40%</td>
</tr>
<tr>
<td>No Neonatal Antiretroviral Therapy</td>
<td>19</td>
<td>22%</td>
</tr>
<tr>
<td>Breast Fed</td>
<td>7</td>
<td>8%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Other Contributing Factors**</th>
<th>Number</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mom was a substance abuser during pregnancy</td>
<td>26</td>
<td>30%</td>
</tr>
<tr>
<td>Mom acquired an STD during pregnancy</td>
<td>30</td>
<td>35%</td>
</tr>
</tbody>
</table>

*Inadequate prenatal care indicates prenatal care after the 4th month and less than 5 visits

**The same child can be in multiple categories
Perinatally Acquired HIV Infection Cases in Children Whose Mom’s HIV status was Known Prior to Delivery Born in Florida, 2005-2012, by Receipt of Adequate Prenatal Care and Any Prenatal Antiretroviral Therapy (ART) (N=57)

Adequate Prenatal Care
Began by 4th month with 5+ visits
- Yes: 68%
- No: 32%

Any Prenatal ART
AZT and/or antiretrovirals
- Yes: 39%
- No: 61%
Perinatally Acquired HIV Infection Cases in Children Whose Mom’s HIV status was Known Prior to Delivery Born in Florida, 2005-2012, by Receipt of Antiretroviral Therapy (ART) During Delivery and Elective Caesarean Delivery (N=57)

**ART During Labor**
- AZT and/or antiretrovirals
  - Yes: 79%
  - No: 21%

**Elective Caesarean Delivery**
- Yes: 37%
- No: 63%
Perinatally Acquired HIV Infection Cases in Children Born in Florida, 2005-2012, by Maternal Drug Abuse and History of a Sexually Transmitted Disease (STD) (N=86)

Maternal Drug Abuse

- Yes: 34%
- No: 66%

History of an STD During Pregnancy

- Yes: 38%
- No: 62%

Note: A total of 9 (11%) of the mothers had BOTH abused drugs and had an STD during pregnancy.
Perinatally Acquired HIV Infection Cases in Children Born in Florida, 2005-2012, by Receipt of Neonatal Antiretroviral Therapy (ART) and Exposure to Breastfeeding (N=86)

Received *any* Neonatal ART

- Yes 78%
- No 22%

Breastfed

- Yes 8%
- No/Unkn 92%
Perinatally Acquired HIV Infection Cases Born in Selected South Florida Counties, 2005-2012, by Mother’s Exposure Category (N=42)

- Miami-Dade (N=18)
  - Mom-IDU Risk: 6%
  - Mom-Sex Risk: 83%
  - Mom-Other Risk/Unknown: 11%

- Broward (N=17)
  - Mom-IDU Risk: 6%
  - Mom-Sex Risk: 94%
  - Mom-Other Risk/Unknown: 6%

- Palm Beach (N=7)
  - Mom-IDU Risk: 29%
  - Mom-Sex Risk: 42%
  - Mom-Other Risk/Unknown: 29%

Note: A total of 42 (49% of the state total) perinatally acquired HIV Infection cases born in Florida 2005-2012 were born in Miami-Dade, Broward and Palm Beach counties. There is some variation in the Mother’s exposure category by county.
Perinatally Acquired HIV Infection Cases Born in Selected South Florida Counties, 2005-2012, by Age at First Diagnosis (N=42)

Miami-Dade (N=18)
- <1 year: 83%
- 1 year: 11%
- 2+ years: 6%

Broward (N=17)
- <1 year: 88%
- 1 year: 0%
- 2+ years: 12%

Palm Beach (N=7)
- <1 year: 100%
- 1 year: 0%
- 2+ years: 0%

Note: Eighty-eight percent (37 of 42) of the perinatally acquired HIV Infection cases born in South Florida were diagnosed within the first year of life. As noted earlier, an early diagnosis of perinatally acquired HIV infection allows the opportunity of early treatment, thus possibly prolonging the onset of AIDS.
Perinatally Acquired HIV Infection Cases
Born in Selected South Florida Counties, 2005-2012, by Race/Ethnicity (N=42)

Miami-Dade (N=18)
- 83% Black
- 17% Other/Unknown

Broward (N=17)
- 88% Black
- 6% Hispanic
- 6% Other/Unknown

Palm Beach (N=7)
- 57% Black
- 29% Other/Unknown
- 14% Hispanic

Note: Pediatric AIDS in Florida disproportionately affects non-Hispanic blacks. In South Florida, 81%, (34 of 42) of the pediatric HIV/AIDS cases were among blacks.
A total of 511 babies were known to be born to HIV-Infected mothers in Florida in 2012, of which 7 (1.4%) were known to be HIV-infected. (Data as of 08/29/2013)

2012 data are incomplete due to reporting lags.

Note: Perinatal Exposure became reportable 11/20/2006, 2007 is the first complete year.
STEPS TO PERINATAL SUCCESS

- Get Prenatal Care
- Get an HIV Test
- If HIV+, Maintain Medication Adherence
- Keep All Prenatal Appointments
- Follow Up for Mom And Baby
- Ensure Baby Gets 6-weeks of AZT
STEPS TO PERINATAL SUCCESS, CONTINUED

1. Counsel Against Breast Feeding
2. Link to Birth Control if that Is the Client’s Choice
3. Ensure that Baby Receives HIV testing By 4 months
Perinatal Programs

• Perinatal Prevention is focused on:
  – Prevention Services for women of child bearing age.
  – Ensuring services for HIV-infected pregnant women and their newborns
  – Education and technical assistance for clinicians who treat pregnant women.
Perinatal Programs for Women

- The Targeted Outreach for Pregnant Women Act (TOPWA) program.
- Collaboration with state agencies and organizations to ensure that perinatal HIV issues are addressed.
- Perinatal social marketing campaign on Face Book and Twitter
- The Perinatal HIV Program” is located on the HIV/AIDS and Hepatitis Program internet site
- A Perinatal website through USF that is widely used
- Provide 6-weeks of free AZT for newborns of families with no medical coverage
The Baby RxPress Program provides a voucher that can be exchanged at Walgreens for the six-weeks of AZT that is prescribed for all HIV-exposed newborns.

Vouchers can be obtained from a local HIV perinatal nurse or the HIV/AIDS and Hepatitis Program Prevention Section.
AETC staff work to:

• Educate medical professionals who provide care for HIV-infected pregnant women and their babies.

• Assist hospitals in implementing rapid HIV testing in labor & delivery units.

• Maintain a comprehensive website with CDC guidelines, forms, and resources for clinicians.

Source: http://www.usfcenter.org/Perinatal/
8 programs (3 also have jail components).

Conducts outreach to high-risk pregnant women and actively links them with services.

Offers on-site pregnancy and HIV testing.

Assists mothers with obtaining family planning services if they choose to delay the birth of a subsequent baby.

For more information on TOPWA please see this webpage:
http://www.preventhivflorida.org/Women_Children/TOPWA.htm
HIV-Infected Newborns 2007-2012

Updated 8/27/2013
HIV-Exposed/Infected Babies

2012

Exposed/Not Infected: **511**
Infected: **7**

Updated 8/27/2013
Note: Overall, Florida’s percentage of childbearing women tested perinatally for HIV is among the highest in the U.S., which has probably contributed to the continued decline in pediatric HIV/AIDS cases. However, Florida’s HIV testing for pregnant women have decreased 3.5 percentage points from 2008 to 2011. Source: Florida Pregnancy Risk Assessment Monitoring System (PRAMS). *2011 data is the most recent available.

http://www.doh.state.fl.us/disease_ctrl/epi/Chronic_Disease/PRAMS/Data_Books.htm

Note: Overall, Florida’s percentage of childbearing women tested perinatally for HIV is among the highest in the U.S., which has probably contributed to the continued decline in pediatric HIV/AIDS cases. However, Florida’s HIV testing for pregnant women have decreased 3.8 percentage points from 2008 to 2011.

Source: Florida Pregnancy Risk Assessment Monitoring System (PRAMS). (*2011 data is most recent available.)

http://www.doh.state.fl.us/disease_ctrl/epi/Chronic_Disease/PRAMS/Data_Books.htm
HIV Seroprevalence Among Childbearing Women by Survey Cycle and Mother’s Race, 1988-1995, Florida

*Number Positive/Number Tested x 1,000.
Survey Cycles are October through March, except for the last cycle which was 10/95-12/95. This survey ended in 1995.
Cases of HIV Disease Among Women of Childbearing Age (Ages 15-44), by Age of Diagnosis, and Year of Diagnosis, 2003–2012, Florida

Decreases in newly diagnosis HIV/AIDS cases among women ages 15-44 have been observed by all age groups.
Cases of HIV Disease Among Women of Childbearing Age (Ages 15-44), by Mode of Exposure, and Year of Diagnosis, 2003–2012, Florida

Note: NIRs redistributed.
Cases of HIV Disease Among Women of Childbearing Age (Ages 15-44), by Race/Ethnicity, and Year of Diagnosis, 2003–2012, Florida

Note: Although the majority of HIV cases among women are black, the number of black female HIV cases has decreased 63% from 2003 to 2012. Likewise, the number of HIV cases decreased by 52% among white females and 58% among Hispanic females, over this same time period.

*Other races represent less than 1% of the cases and are not included. Data as of 06/30/2013
Annual Prevalence of HIV Disease Among Women of Childbearing Age (Ages 15-44), by Race/Ethnicity, Reported 1995-2012, Florida
For Florida HIV/AIDS Surveillance Data
Contact: (850) 245-4444

Lorene Maddox, MPH  Ext. 2613
Tracina Bush, BSW   Ext. 2612
Madgene Moise, MPH    Ext. 2373

Visit Florida’s internet site for:
Monthly Surveillance Reports
Slide Sets and Fact Sheets
Annual Reports and Epi Profiles
http://www.doh.state.fl.us/disease_ctrl/aids/trends/trends.html

Visit CDC’s HIV/AIDS internet site for:
Surveillance Reports, fact sheets and slide sets
http://www.cdc.gov/hiv/topics/surveillance/resources/reports/index.htm