



Women and HIV: Insights from Catalonia's HIV Surveillance and the European Network of Community-Based Testing Centers (COBATEST)

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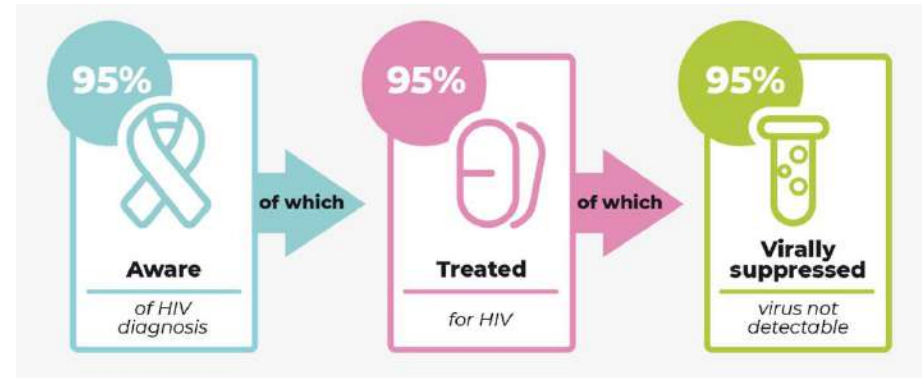
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Global HIV Targets



UNAIDS, 2014



UNAIDS, 2020



95% of people living with HIV having a good health-related quality of life

HIV on the Rise: What's Driving the Surge?

During the past decade, Europe has experienced an increase in reported sexually transmitted infections (HIV/STIs).¹



- Not all countries fully utilize available strategies to address HIV, VH, and STIs.²
- Services remain centralized and lack integrated delivery platforms.²
- Preventive services have had low coverage.^{3,4}
- Access to combination prevention services has been limited.^{3,4}
- The absence of enhanced preventive services and improved access to healthcare remains a persistent challenge.



1. Stary A. The Changing Spectrum of Sexually Transmitted Infections in Europe. *Acta Derm Venereol.* 2020 Apr 20;100(9):adv001 14. doi: 10.2340/00015555-3470. PMID: 32207537; PMCID: PMC9128896.

2. Regional action plans for ending AIDS and the epidemics of viral hepatitis and sexually transmitted infections 2022–2030. Copenhagen: WHO Regional Office for Europe; 2023. Licence: CC BY-NC-SA 3.0 IGO.

3. Action plan for the health sector response to HIV in the WHO European Region. Copenhagen: WHO Regional Office for Europe; 2017 (<https://apps.who.int/iris/handle/10665/329423>, accessed 29 November 2022).

4. Implementation of the Action Plan for Health Sector Response to Viral Hepatitis in the WHO European Region. Final progress report. Copenhagen: WHO Regional Office for Europe; 2022 (EUR/RC72/17(A); <https://apps.who.int/iris/handle/10665/360902>, accessed 29 November 2022).



Unite to end the inequalities holding back the end of AIDS

Inequalities Hinder Progress in Ending HIV



We can end AIDS but inequalities prevent this. We must #Equalize!



HIV and AIDS



Photo: UNAIDS/SP Visit



Half of all women with HIV are diagnosed late in Europe



Women accounted for one-third of the 141 000 new HIV diagnoses in the European region.

Countries in central Europe reported almost six times fewer diagnoses among women compared to men, and three times fewer diagnoses among women than men were reported in the European Union and European Economic Area (EU/EEA).



Late diagnosis: 54% of known cases among women.

Two-thirds (60%) of the HIV diagnoses among women in 2018 were in the age group 30–49 years old.

Mode of transmission: 92% of the cases heterosexual sex.



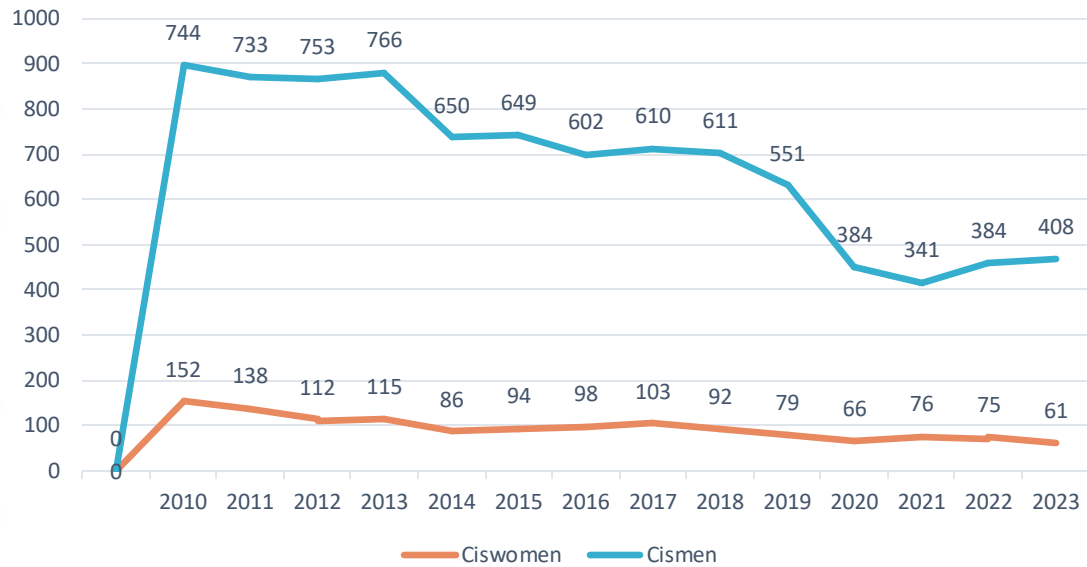
Catalonia's Epidemiological Surveillance of HIV and other STIs

Since 1995, CEEISCAT, has carried out epidemiological surveillance, monitoring, and evaluation of HIV and STIs in Catalonia, in coordination with the corresponding Subdirections, Programs, and Units of the Catalan Department of Health.

Decree 365/1994, December 23

Decree 391/2006, October 17

Evolution of new HIV diagnoses reported in Catalonia by gender: 2010-2023



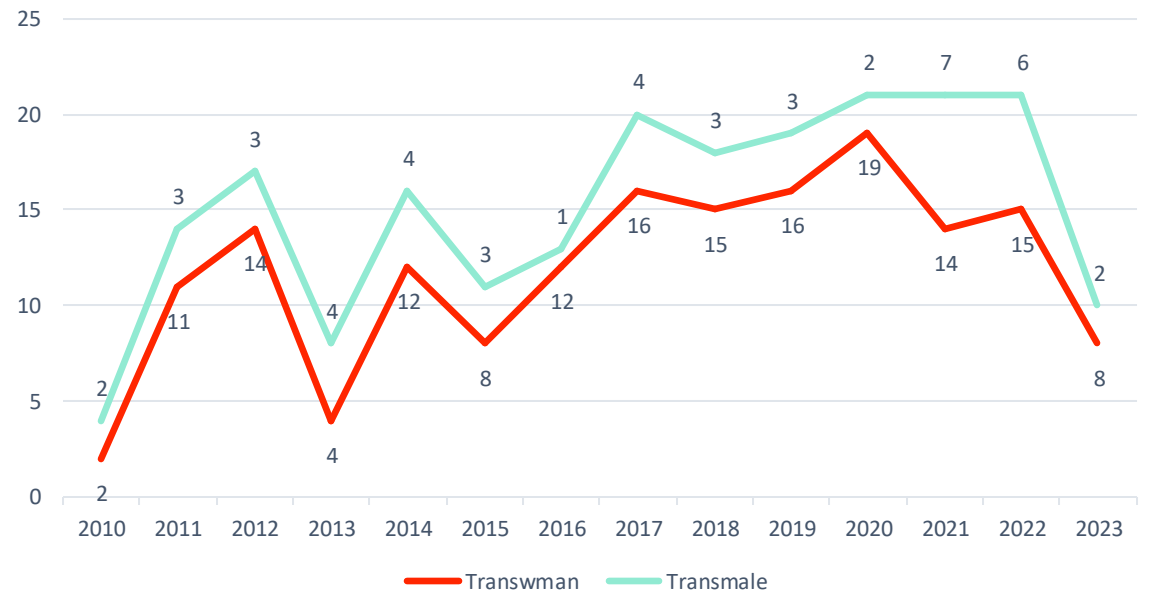
In total: 9533 new diagnosis

Female: 1347 (14%), varied 12-19% across the years

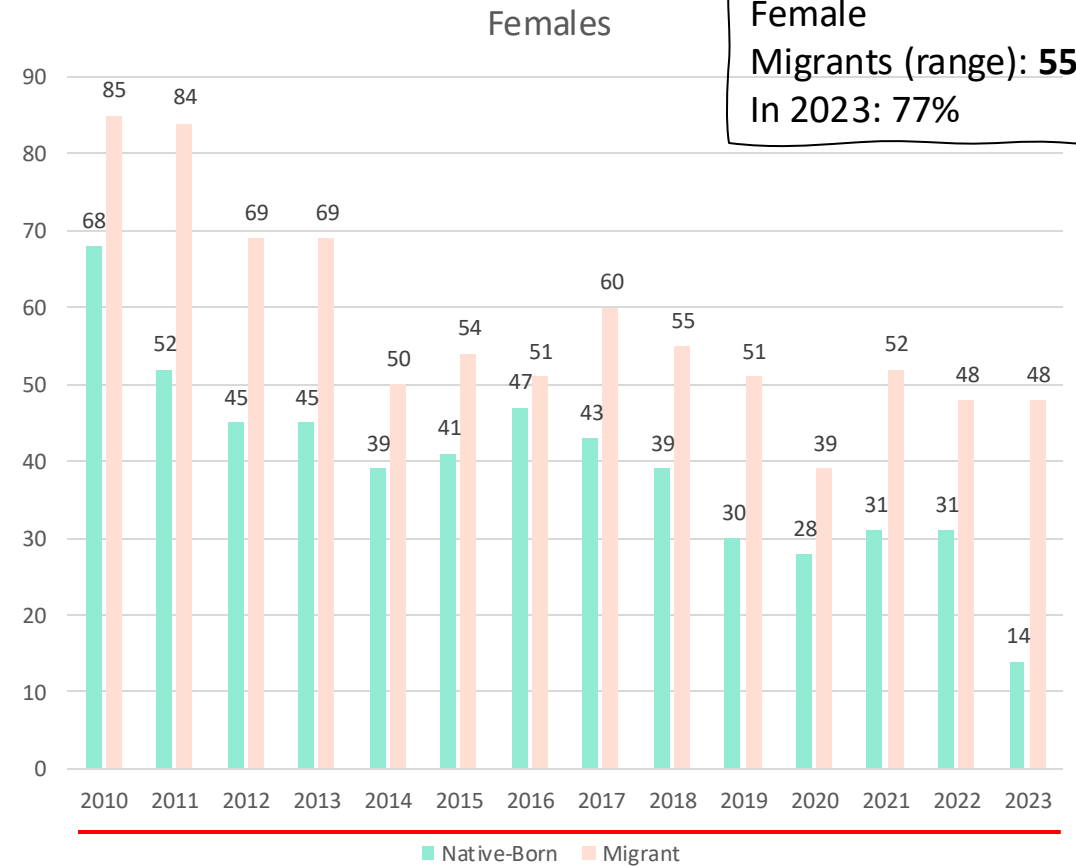
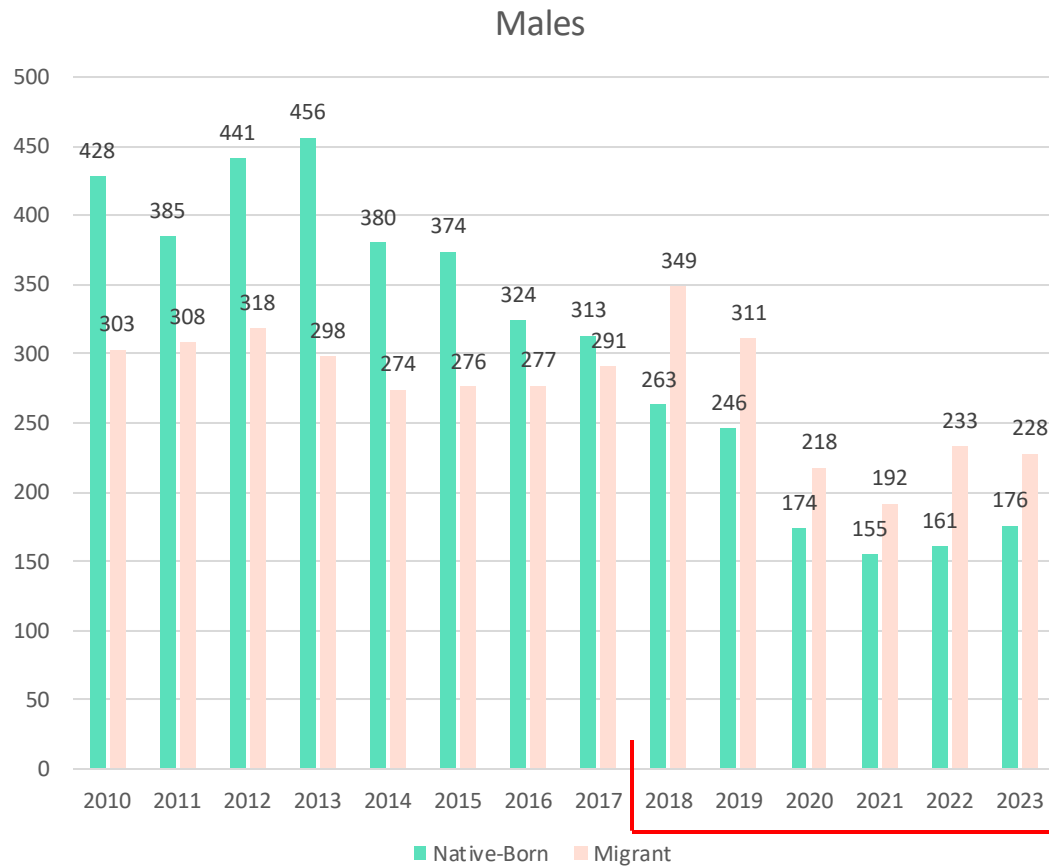
Male: 8186 (85%), varied 81-83% across the years

Transmen: 47 (0.4%)

Transwomen: 166 (1.7%)

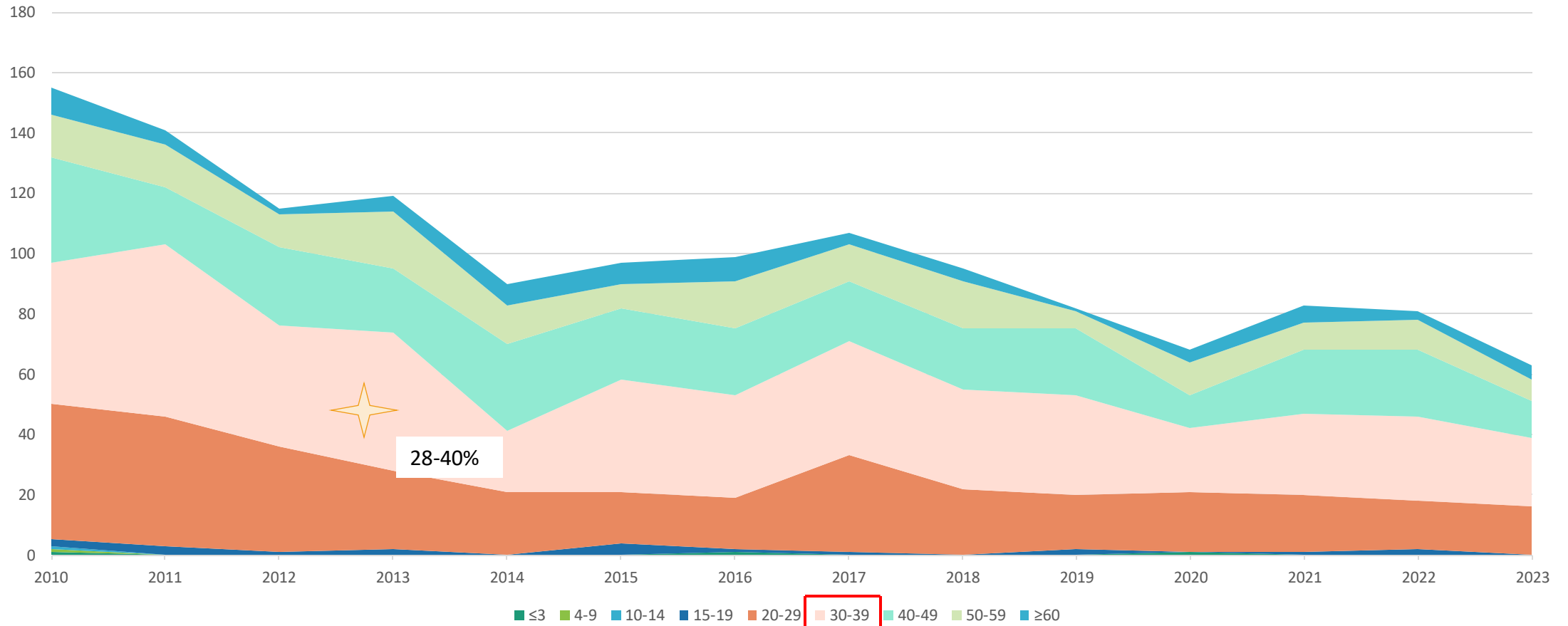


Evolution of new HIV diagnoses reported in Catalonia: native-born Spaniard vs. migrant by gender, 2010-2023



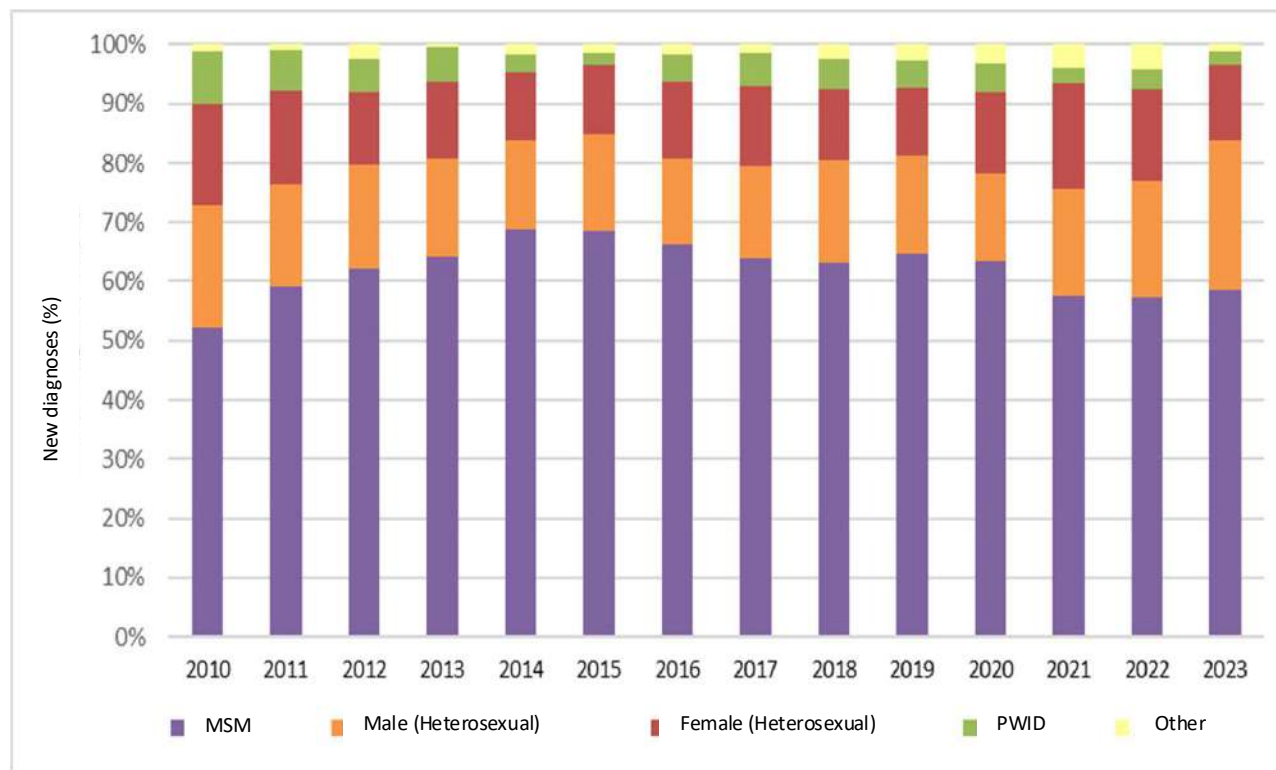
Female Migrants (range): 55-65%
In 2023: 77%

Evolution of new HIV diagnoses reported in Catalonia by age-group among females: 2010-2023



Evolution of new HIV diagnoses reported in Catalonia: 2010-2023

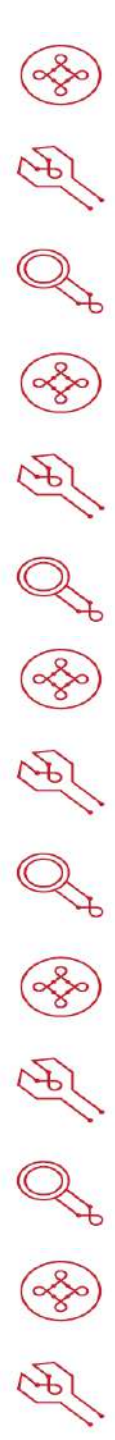
Mode of Transmission



Heterosexual transmission affects both men and women almost equally

MOT: aprox. 90% sexual intercourse.

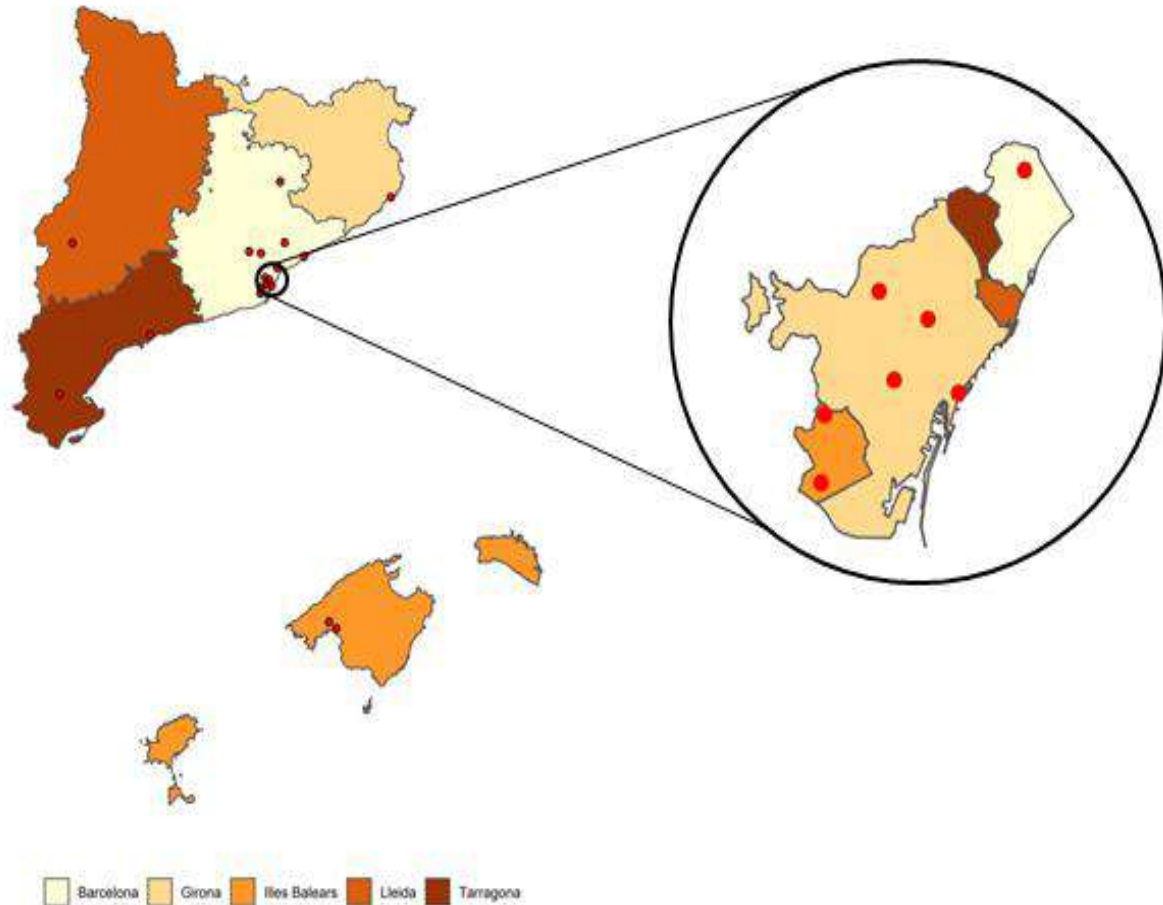
Note: In total 9748 HIV diagnosis



PISCIS: a population-based cohort of people living with HIV in Catalonia and Balearic Islands

PISCIS, a prospective and multicenter study, includes HIV patients under clinical follow-up who are over 16 years old and had their first visit at one of the participating hospitals starting from January 1, 1998.

The COHORT



31,364 Persons who live with HIV

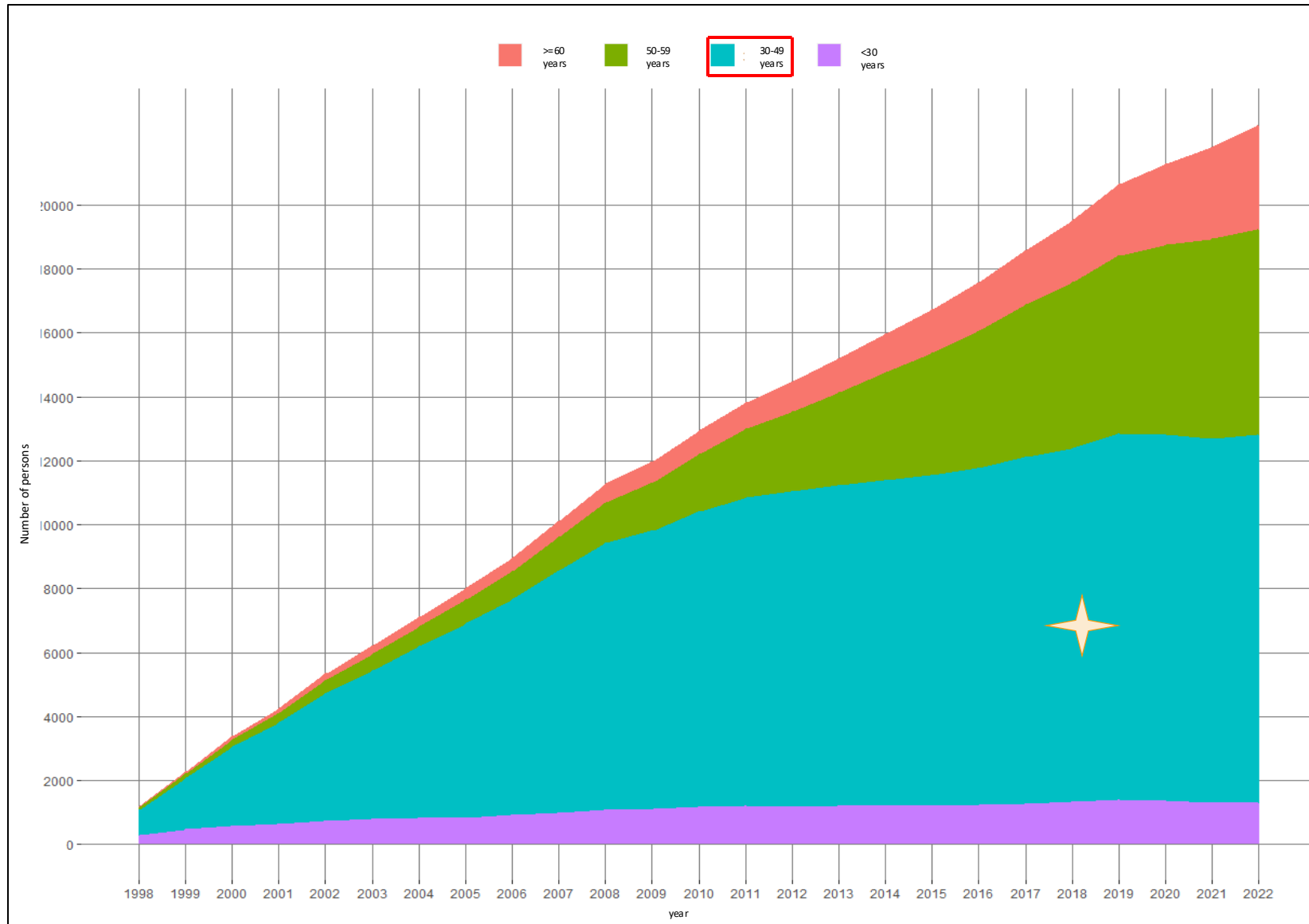


21 participating hospitals



Laboratory data, treatment, clinical, and epidemiological data since 1998

Number of persons by age-group and year



Gender distribution:

Pre 2015

Male – 79.6% (18169n)

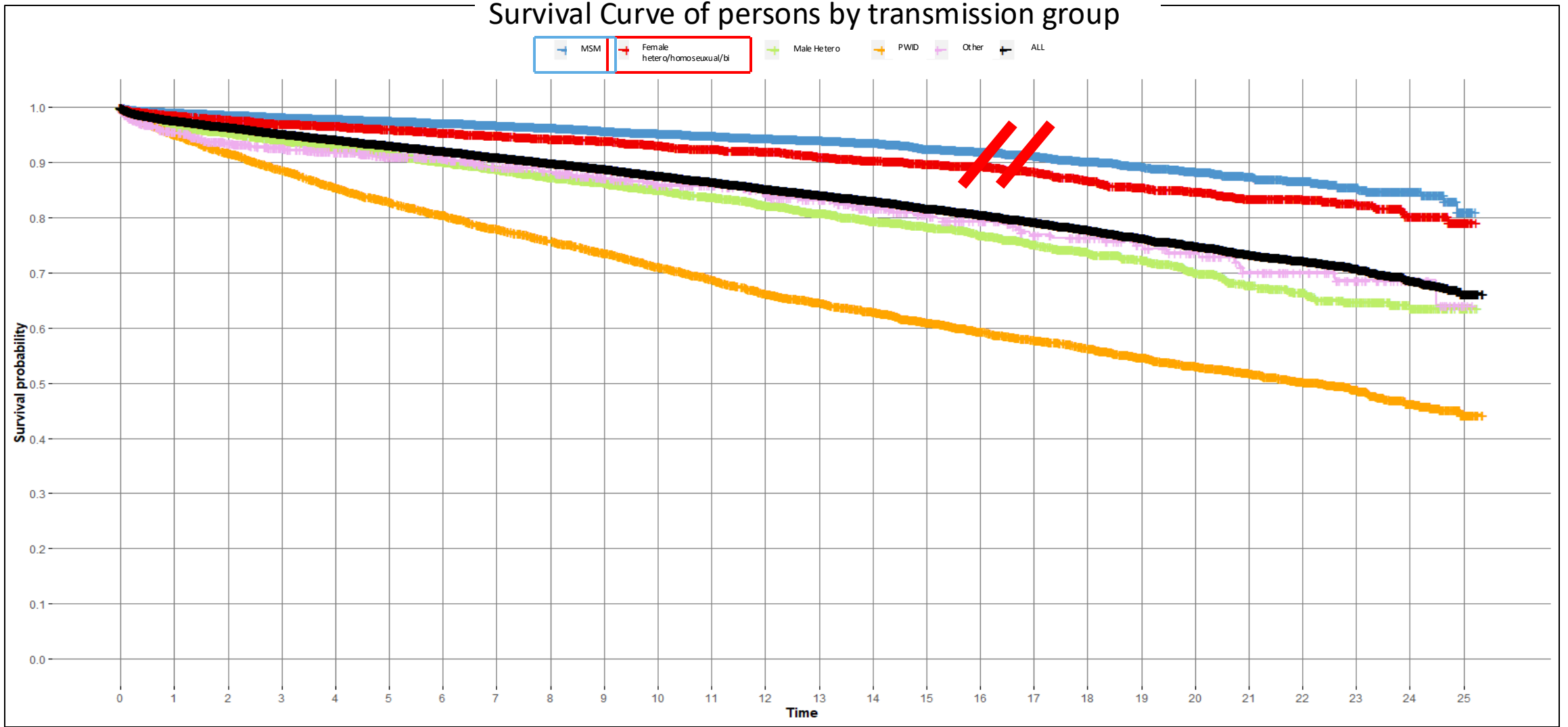
Female – 20.4% (4647n)

After 2015

Male – **87.3 % (3443n)** ↑

Female – **12.7% (503n)** ↓

Survival Curve of persons by transmission group



Descriptive Analysis by Migrant Status, Transmission Group, and Gender Across Two-Year Periods: 1998–2014 and 2015–2022

Year period: 1998-2014

		Male	Female
Key-population	Not a Migrant	65.56%	65.91%
	Migrant	34.44%	34.09%
Group of Transmission	Sexual Intercourse	70.62%	66.65%
	PWID	20.29%	21.63%
	Other	9.09%	11.73%



Year period: 2015-2022

		Male	Female
Key-population	Not a Migrant	48.85%	40.95%
	Migrant	51.15%	↑ 59.05%
Group of Transmission	Sexual Intercourse	↓ 85.77%	78.93%
	PWID	4.04%	4.77%
	Other	10.20%	↑ 16.30%





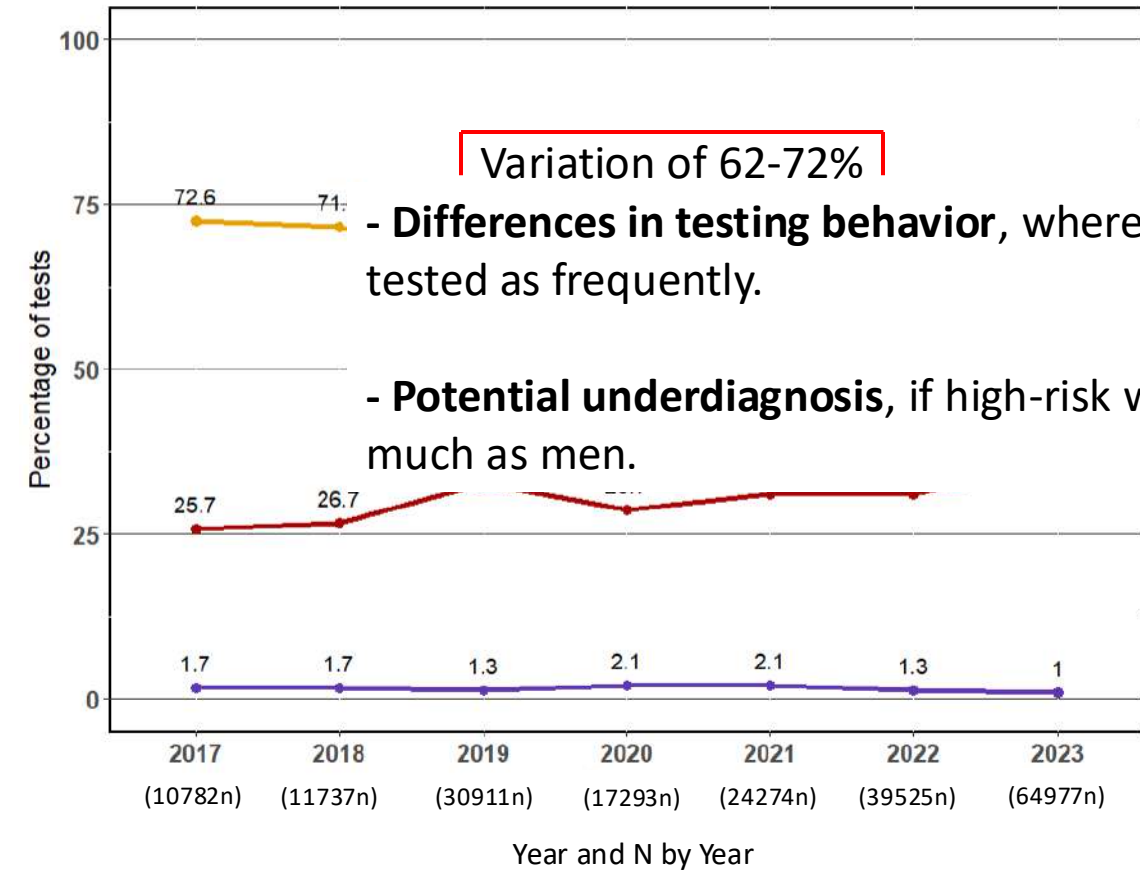
COBATEST Network

The COBATEST Network links organisations across Europe and Central Asia who offer community-based voluntary counselling and STI/HIV testing (CBVCT) services and promotes testing, early diagnosis and linkage to care in at-risk populations since 2014.

HIV testing (%) and reactive test results (%) by gender: Standardized data from 90 member centers from 16 European and 1 Central Asian Country, 2017 to 2023

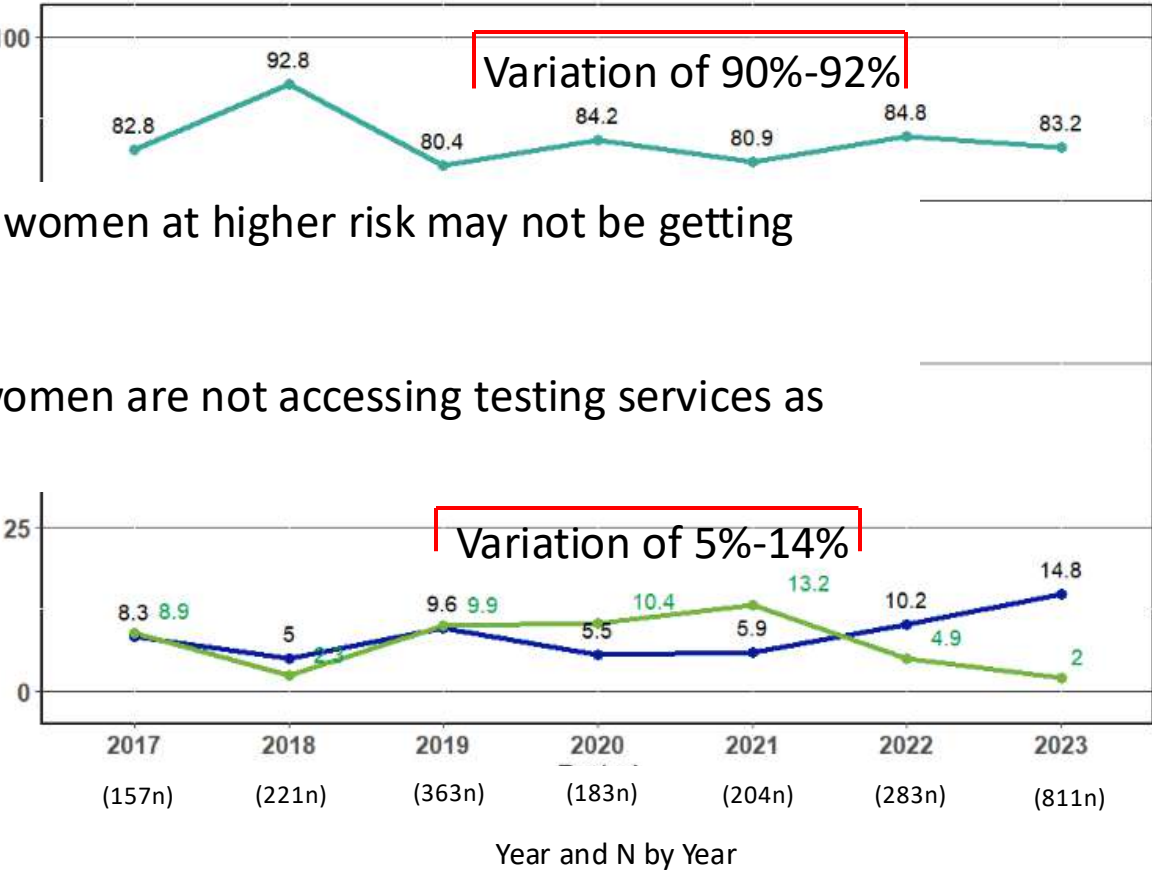
Total Tests:
199,499

HIV testing by gender and year
gender Males Females Transgender



Total R: 2222n
(1.1%)

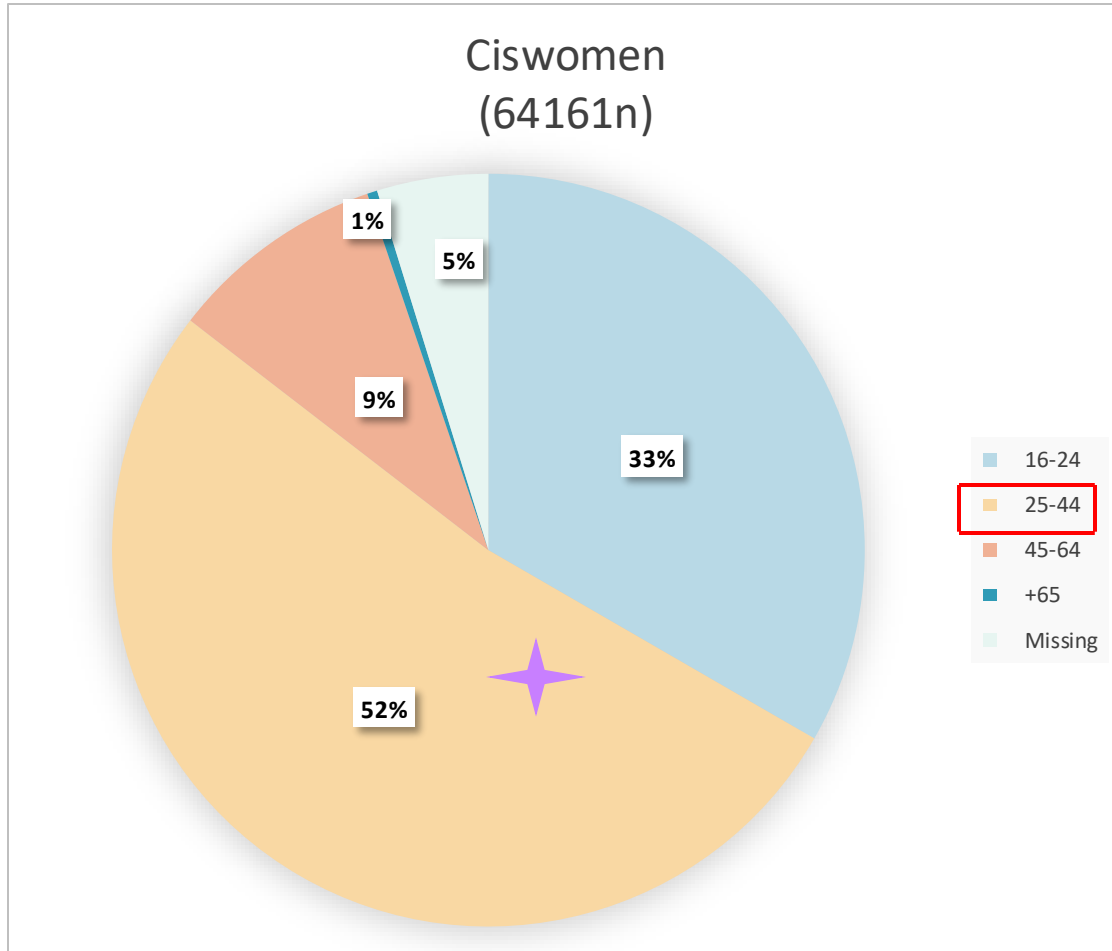
HIV Reactive tests by gender and year
gender Males Females Transgender



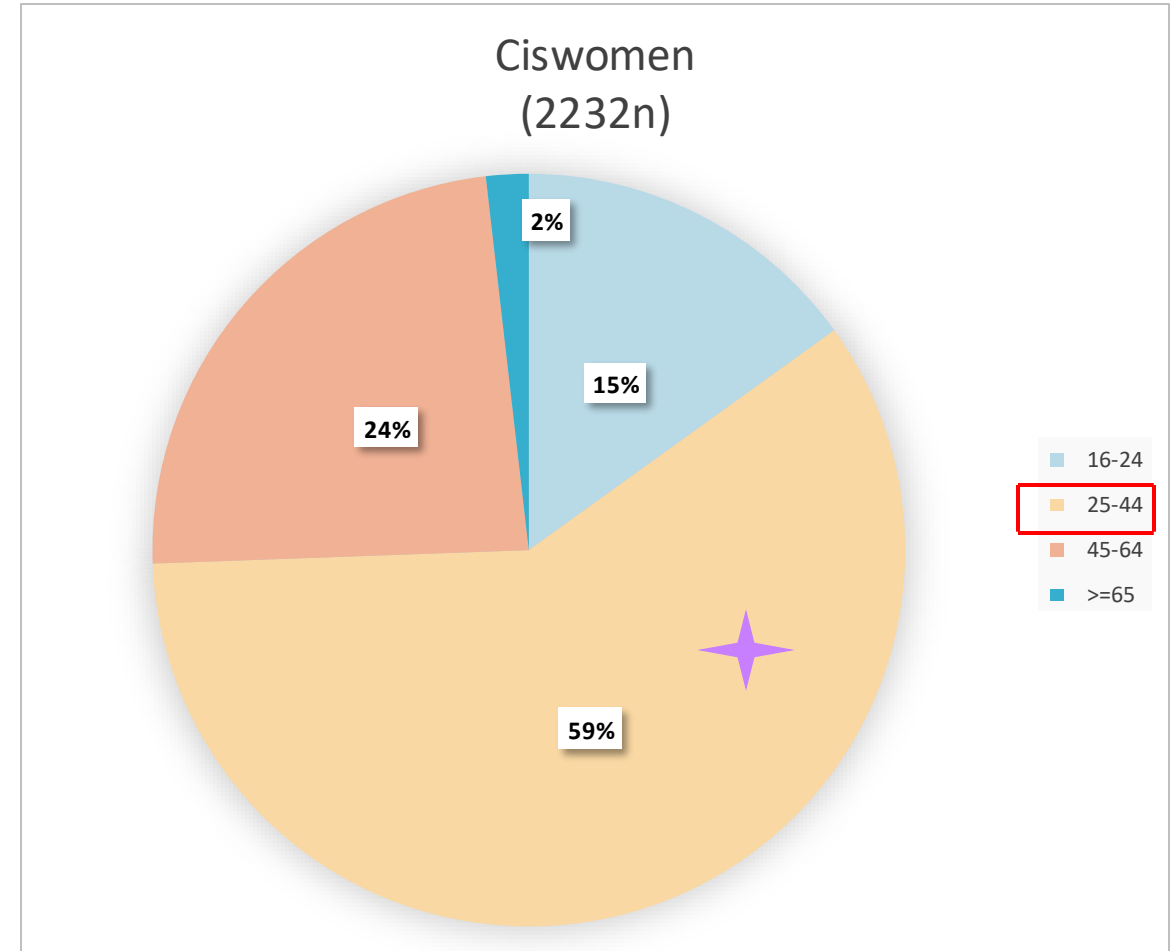
Note: Only disaggregated data

HIV testing and reactive test results among females by age-group: COBATEST, 20017-2023

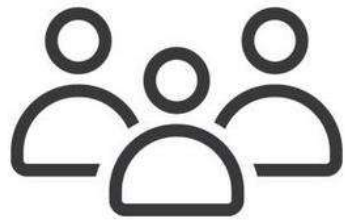
HIV - Tests Done (%)



HIV - Reactive (%)



Prevalence Ratio of HIV Reactive Test Results Among Females by age-group and key-population groups: COBATEST, 2017-2023



Age group (25-44)

PR: 2.56 (CI=1.72-3.82)
P-value < 0.001

Referent category:
16-24



Sex Workers

PR: 0.56
(CI=0.37-0.84)
P-value = 0.006

Lack of community-testing centres working with Sex Workers



PWID

PR: 3.66
(CI=1.78-7.97)
P-value = 0.001

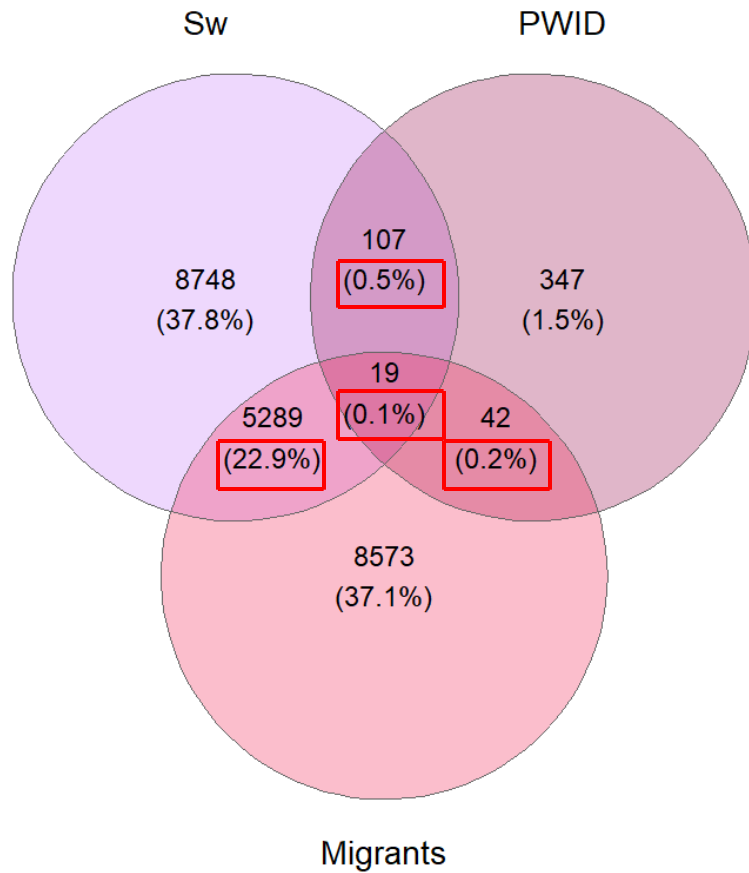


Migrants

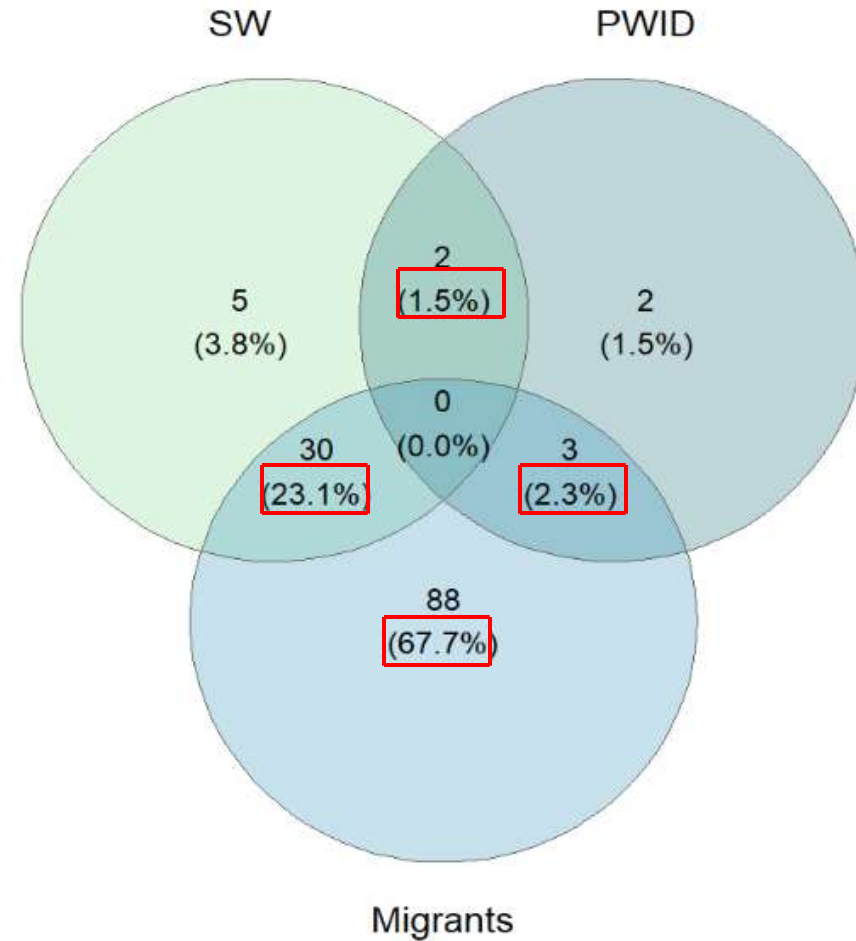
PR: 4.59
(CI=3.39-6.2)
P-value < 0.001

Intersectionalities: Females tested for HIV (COBATEST, 2017-2023)

HIV - Tests Done (N,%)



HIV - Reactive (N,%)





KEY POINTS

- **Gender and HIV interact, shaping transmission and risk patterns.**
- **Need for a gender-informed comprehensive approach to HIV that considers barriers and factors affecting women's testing and treatment.**
- **Inequalities hinder progress in ending HIV and lack of gender approach is one of the main reasons.**



International HIV/AIDS Alliance: Good Practice Guide to Gender Transformative HIV Programming, 2018



Acknowledgements:

- COBATEST members
- CEEISCAT team

Thank you!

