As of December 31, 2016, there were 23,137 persons, or about one in 353 Virginia residents, who were living with HIV. A greater number of people are now living longer with HIV due to advances in medical treatment and care. From 2007 to 2016, the number of persons living with HIV (PLWH) in Virginia increased by about 32%. As of December 31, 2016, approximately 46% of the HIV-positive population had an AIDS-defining condition. From 2007 to 2016, the overall percentage of AIDS cases slightly decreased from 49% of all living cases in 2007 to 47% in 2016.

By Gender
By the end of 2016, there were 17,715 males and 6,131 females in Virginia who were living with HIV, with males representing 74% of the total HIV-positive population. Men were living with HIV at a rate of 414 per 100,000, and women at a rate of 148 per 100,000. In Virginia, men were almost three times more likely to be living with HIV than women.

By Current Age
As HIV medical treatment continues to improve, persons are living longer with HIV. By December 31, 2016, over 33% of persons living with HIV were among the 55 and older age group. Age distribution rates were highest among the 45-54 age group at 603 per 100,000, followed by the 35-44 age group at 345 per 100,000.

By Race/Ethnicity
Consistent with the epidemic, 59% of all persons living with HIV as of December 31, 2016 were Black, non-Hispanic, followed by White, non-Hispanics, at 29%. Approximately 9% of living cases were Hispanic/Latino. Black, non-Hispanic persons were almost seven times more likely to be living with HIV at the end of 2016 than White, non-Hispanic persons. Hispanic/Latino persons were almost two times more likely to be living with HIV than White, non-Hispanic persons.

As of 2016, 74% of all women and 53% of all men living with HIV were Black, non-Hispanic. Sixteen percent of all women and 33% of all men were White, non-Hispanic, and 7% of all women and 9% of all men were Hispanic/Latino. Black, non-Hispanic males had the highest rate of persons living with HIV, at 1,180 cases per 100,000 population. Black and Hispanic/Latino males were approximately five and two times more likely to be living with HIV than White males, respectively. Black females were almost 15 times more likely to be living with HIV than White females, and Hispanic/Latina females were approximately three times more likely than White females to be living with HIV.
By Transmission Risk
At the end of 2016, 47% of all living cases were attributed to male-to-male sexual contact (MSM). Heterosexual contact represented 19% of the living cases, and nearly 8% of cases were attributed to injection drug use (IDU). Approximately 21% of PLWH did not report or identify risk (NRR/NIR) for transmission. Other transmission risks (nearly 2%) included pediatric cases and blood recipients. Among women, heterosexual contact was the most common transmission risk (50%). Of all PLWH at the end of 2016, Black, non-Hispanic MSM were the largest transmission risk group living with HIV (23%), followed by White, non-Hispanic MSM (18%) and Black heterosexual women (9%).

By Region
The Commonwealth of Virginia is divided into five health regions: Central, Eastern, Northern, Northwest, and Southwest. As of December 31, 2016, the rate of persons living with HIV was highest in the Eastern region at 399 cases per 100,000, followed by the Central region at 397 cases per 100,000 and the Northern region at 269 cases per 100,000. The Northwest and Southwest regions represented 148 and 146 cases per 100,000, respectively.

As evidenced by the map above, the Eastern, Central, and Northern regions have higher rates of persons living with HIV with rates by locality as high as 1,230 cases per 100,000 population in those regions. Lower rates occurred primarily in the Northwest and Southwest regions of the state, where the lowest rate by locality was only 37 cases per 100,000 population.

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HIV CARE CONTINUUM

The HIV Care Continuum (HCC) is a framework for assessing health outcomes among persons living in Virginia with diagnosed HIV infection. Figure 6 shows definitions for the HCC.

Figure 7: HIV Care Continuum by Health Region in Virginia, 2016

Central Region

As of December 31, 2016, 5,514 persons were living with HIV in the Central region (consists of Richmond City and areas bordering Richmond, including the cities of Petersburg and Emporia). Sixty-five percent of PLWH in the Central region had evidence of HIV care, 55% were retained in HIV care, and 58% were virally suppressed. Among the 218 persons newly diagnosed in the Central region, 66% were linked to HIV care within 30 days (Figure 7).

Eastern Region

As of December 31, 2016, 7,158 persons were living with HIV in the Eastern region (consists of the cities of Norfolk, Hampton, Newport News, Virginia Beach, Williamsburg, and surrounding areas). Sixty-six percent of PLWH in the Eastern region had evidence of HIV care, 55% were retained in HIV care, and 58% were virally suppressed. Among the 317 persons newly diagnosed in the Eastern region, 66% were linked to HIV care within 30 days.

Northern Region

As of December 31, 2016, 6,449 persons were living with HIV in the Northern region (consists of the cities of Alexandria, Fairfax, Falls Church, Manassas, Manassas Park, and the counties of Arlington, Fairfax, Loudoun, and Prince William). Fifty-three percent of PLWH in the Northern region had evidence of HIV care, 37% were retained in HIV care, and 45% were virally suppressed. Among the 256 persons newly diagnosed in the Northern region, 71% were linked to HIV care within 30 days.

Northwest Region

As of December 31, 2016, 1,892 persons were living with HIV in the Northwest region (consists of the cities of Charlottesville, Winchester, Fredericksburg, and surrounding areas). Seventy-three percent of PLWH in the Northwest region had evidence of HIV care, 59% were retained in HIV care, and 62% were virally suppressed. Among the 64 persons newly diagnosed in the Northwest region, 72% were linked to HIV care within 30 days.

Southwest Region

As of December 31, 2016, 1,914 persons were living with HIV in the Southwest region (consists of the cities of Roanoke, Danville, Lynchburg, Martinsville, and surrounding areas). Seventy-four percent of PLWH in the Southwest region had evidence of HIV care, 62% were retained in HIV care, and 64% were virally suppressed. Among the 63 persons newly diagnosed in the Southwest region, 57% were linked to HIV care within 30 days.

As shown in the second column in Figure 7, the Northwest health region had the highest linkage rate in 2016 with 72% of newly diagnosed persons who were linked to care within 30 days, followed by the Northern region at 71%. Overall, the Northwest and Southwest regions had better evidence of care, retention, and viral suppression rates than other health regions in Virginia, as seen in the third, fourth and fifth columns in Figure 7.