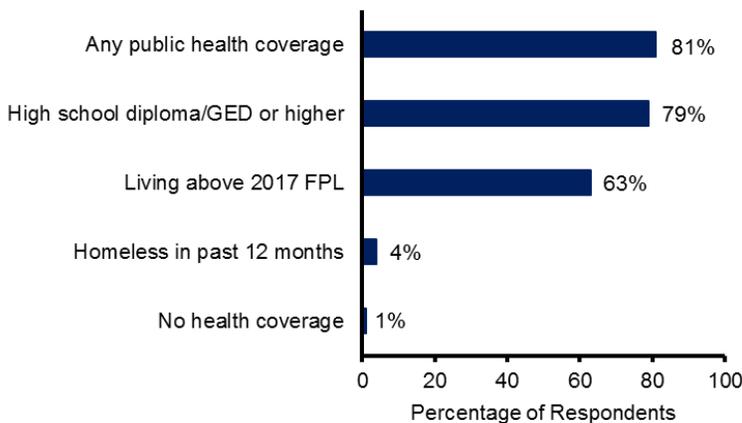The **Virginia Medical Monitoring Project (MMP)** is an ongoing, supplemental surveillance system that assesses clinical and behavioral characteristics of HIV-infected adults in the United States. Each year, in collaboration with CDC, a randomized sample of 400 participants throughout Virginia is selected for the project. Structured interviews and medical record abstractions are conducted for each respondent. This fact sheet presents interview and medical record data from 2017.

DEMOGRAPHICS

Data for one hundred sixty-six respondents were included in analyses for the 2017 data collection cycle; and of these respondents, approximately 63% were male and 34% were female. Five respondents (3%) self-identified as transgender. Most respondents were Black (63%), with smaller percentages being White (21%), Hispanic (5%), and of another race/multiple races (10%). Respondents' ages ranged from 20 to 82, with a mean of 49 years of age. More than half of respondents self-identified as heterosexual (55%), 36% reported sexual orientation as homosexual/gay/lesbian, 7% as bisexual, and 2% as 'other'. Respondents were likely to have completed high school or beyond (79%); and approximately 63% reported an annual income that was above the 2017 federal poverty level (FPL).
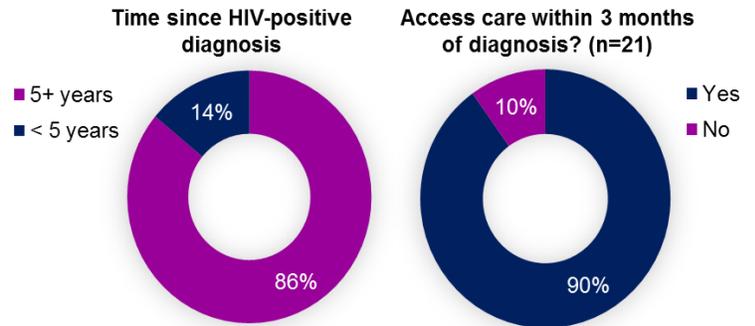
Figure 1. Selected Sociodemographic Indicators

TIME SINCE HIV DIAGNOSIS AND LINKAGE TO CARE

Fourteen percent of respondents reported being diagnosed HIV-positive less than 5 years before their MMP interview date. The majority of respondents (86%) reported being diagnosed HIV-positive five or more years before their MMP interview date. Ninety percent of the respondents diagnosed within the past five years reported accessing HIV medical care within 3 months of diagnosis.
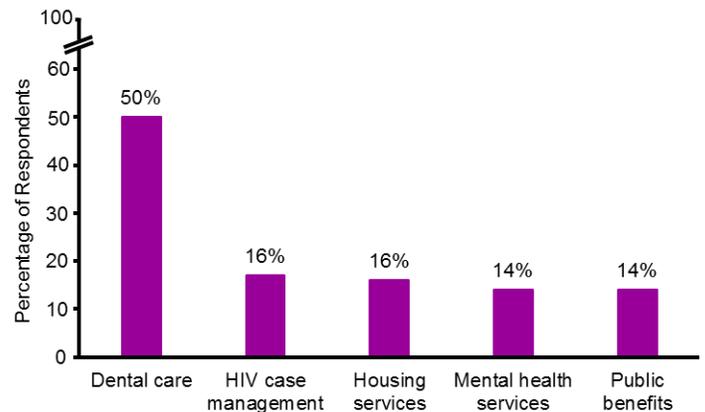
Figure 2. Linkage to Care

MET AND UNMET NEED

Respondents reported receiving a range of ancillary services during the 12 months prior to the interview. Services used most frequently included dental care (58%), the AIDS Drug Assistance Program (ADAP, 55%), HIV case management (52%), ART medication adherence support services (39%), mental health services (28%), and transportation assistance (24%). Dental care was the greatest unmet need reported by respondents. The most frequently cited barrier for dental care was service cost/lack of insurance (66%).

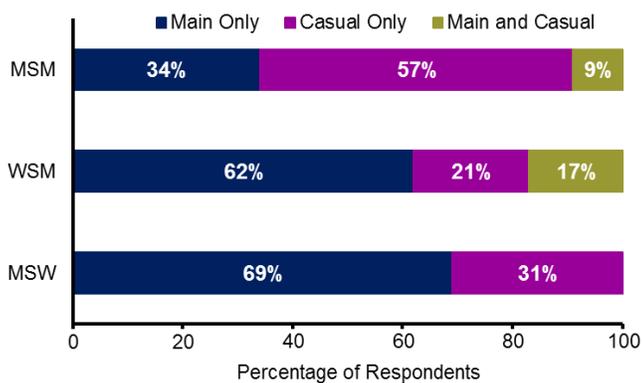### Figure 3. Top Five Unmet Services Needs

ANTIRETROVIRAL TREATMENT AND ADHERENCE

Most respondents (98%) reported currently taking antiretroviral therapy (ART) medications. Fifty-nine percent of those on ART said that they never skipped a dose in the past 30 days. The most commonly-cited reason for the last missed dose was forgetting to take medication (36%). The majority of respondents (89%) reported never or rarely being troubled by side effects in the past 30 days.

SEXUAL BEHAVIORS

Fifty-seven percent of all respondents reported having sex in the last 12 months (57% of males, 55% of females, and 80% of transgender participants). Among male respondents, 43% reported having sex with other men (MSM), and 14% reported having sex with women only (MSW). Among female respondents, 53% reported having sex with men (WSM). Median and range of number of partners reported by MSM were greater than what were found with MSW and WSM (MSM: median = 2, range = 1-80; MSW: median = 1, range = 1-5; WSM: median = 1, range = 1-50). Sixty-five percent of MSM reported engaging in unprotected sex in the past 12 months, compared to 38% of MSW and 38% of WSM.
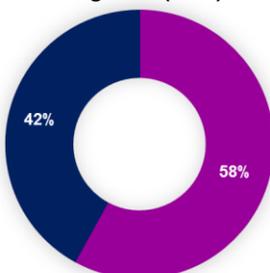
Figure 4. Sex Partner Type among Sexually Active
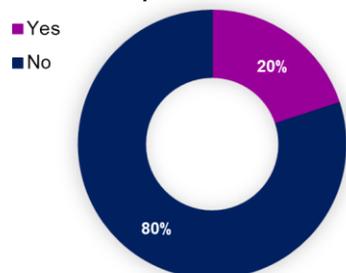

SUBSTANCE USE

The percentage of current daily smokers for MMP respondents was above the state average for all daily smokers in Virginia (25% vs. 17%)[§]. Forty-nine percent of MMP respondents reported alcohol use in the past 30 days. In addition, 19% of MMP respondents reported binge level drinking on days that they drink (22% of males and 13% of females), as compared to 17% of all adult Virginians[§]. Among sexually active respondents who reported drinking alcohol in the past 30 days, 58% reported drinking alcohol before or during sex in the past 12 months. Twenty percent of MMP respondents reported using non-injection drugs during the past year. For those reporting non-injection drug use, marijuana was the most frequently reported drug used (85%). Less than 3% of respondents reported injection drug use (IDU) in the past 12 months.

Figure 5. Substance use among MMP participants

Any alcohol use before or during sex? (n=71)

Any non-injection drug use in the past 12 months?

PREVENTION ACTIVITIES

Forty-three percent of respondents reported receiving free condoms in the past 12 months. Fifty-one percent of respondents reported having an HIV or STD prevention conversation in the past 12 months; these conversations occurred with a doctor, nurse, or other health care provider (89%), a counselor (57%), or in an organized session or small group (23%).
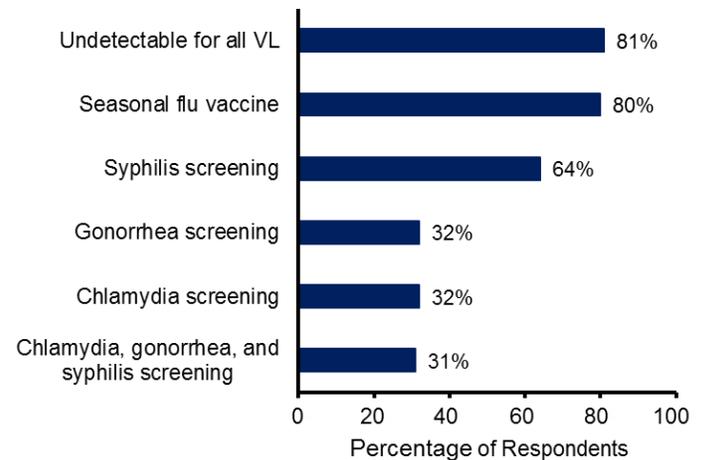
DEPRESSION AND ANXIETY SYMPTOMS

Twenty percent of MMP respondents met the criteria threshold for moderate to severe depression symptoms at the time of the interview, according to their responses to the Patient Health Questionnaire 8 (PHQ-8). Twenty-four percent of respondents met the criteria threshold for presence of anxiety symptoms, according to their responses to the Generalized Anxiety Disorder Scale (GAD-2).

LABORATORY RESULTS AND PREVENTIVE THERAPY

Eighty-one percent of respondents had an undetectable viral load (VL) for all viral load tests in their medical record for the past twelve months. Eighty percent received the seasonal flu vaccine. Among sexually active respondents, 64% received syphilis screening, 32% received gonorrhea screening, 32% received chlamydia screening, and 31% received screening for all three infections in the past 12 months.

Figure 6. Reported laboratory results and preventive therapy

REFERENCES

§ Pickens CM, Pierannunzi C, Garvin W, Town M. Surveillance for Certain Health Behaviors and Conditions Among States and Selected Local Areas — Behavioral Risk Factor Surveillance System, United States, 2015. MMWR Surveill Summ 2018; 67(No. SS-9):1–90.