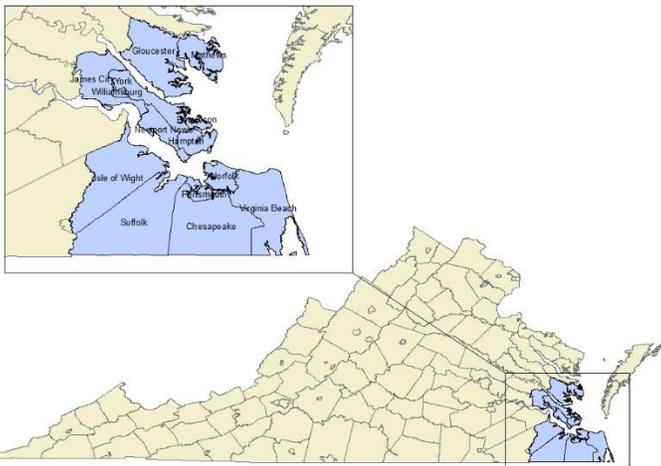


**National HIV Behavioral Surveillance (NHBS)** is the Centers for Disease Control and Prevention’s (CDC) surveillance project that collects behavioral data and conducts anonymous HIV testing among persons at increased risk for acquiring HIV<sup>1</sup>. NHBS collects data in 22 urban areas with high prevalence of HIV, each of which rotate data collection between three key populations: men who have sex with men (MSM), persons who inject drugs (PWID), and heterosexual persons at increased risk of HIV infection (HET). Virginia conducts NHBS activities in the Norfolk-Newport News-Virginia Beach Metropolitan Statistical Area (Norfolk MSA)— Figure 1. NHBS participants answer sociodemographic, behavioral, and health-related questions during a face-to-face interview and, for those who agree to HIV testing, receive an HIV test. This fact sheet presents data for PWID in Virginia who completed the 2018 NHBS interview.

Figure 1. Norfolk-Newport News-Virginia Beach Metropolitan Statistical Area (Norfolk MSA)



**SAMPLE RECRUITMENT AND ELIGIBTY**

In 2018, NHBS participants were recruited through a process called respondent driven sampling, in which participants recruit other people they know to participate. All interviews were conducted at one of two field sites (Norfolk or Newport News) from July–December 2018. Individuals were eligible to complete the NHBS survey and receive HIV testing if they lived in the Norfolk MSA, were aged 18 years or older, had not previously participated in NHBS during the current survey cycle, reported injection drug use in the past 12 months, and could provide informed consent and complete the survey<sup>2</sup>. Virginia NHBS screened 751 persons for participation, of which 542 were eligible and completed the survey (72%) — Figure 2. The remainder of this fact sheet will focus on the 542 PWID participants who completed the survey.

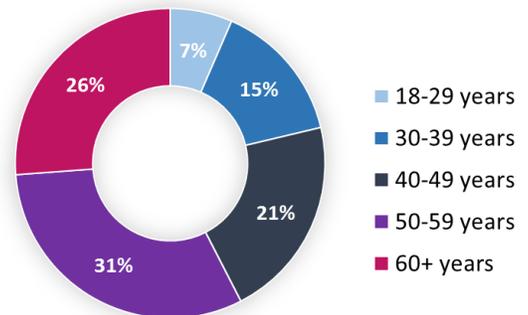
Figure 2. NHBS Eligibility, Norfolk MSA, 2018



**SOCIODEMOGRAPHIC CHARACTERISTICS**

Among the 542 participants, the majority lived in either Norfolk (40%) or Newport News (35%). Sixty-seven percent of participants were male, 33% were female, and less than 1 percent were transgender. The majority of participants were black (68%); 24% were white, 3% were Hispanic, and 5% reported some other race. Participants ranged in age from 20 to 83 years, and the median age was 51 years. Persons aged 50 to 59 years represented 31% of the sample — Figure 3. Nearly half of participants had completed high school or received a GED (46%) and an additional 31% reported less than a high school education. At the time of the NHBS survey, 30% of participants reported being unable to work for health reasons, 29% reported being unemployed, and 26% reported being employed (13% full time, 13% part time). Forty-eight percent of participants reported homelessness in the past 12 months and 27% of participants who have ever been incarcerated reported incarceration at some point in the past 12 months.

Figure 3. Age Among PWID Sample, Norfolk MSA, 2018



**HEALTH INSURANCE COVERAGE AND HEALTH CARE UTILIZATION**

Forty-eight percent of participants reported that they did not have health insurance at the time of the survey. Among the 52% of participants who reported having insurance, 56% had Medicaid, 35% had Medicare, 12% had Veterans Administration, 10% had private insurance, 8% had some other government plan, 3% had TRICARE/CHAMPUS, and less than 1% reported other insurance. The majority of participants (90%) reported having a usual place where they can go when sick or in need of health-related advice: a hospital emergency room (46%), clinic or health center (29%), doctor’s office or HMO (20%), or some other location (4%). Most participants (79%) reported visiting a health care provider in the 12 months before the NHBS interview.

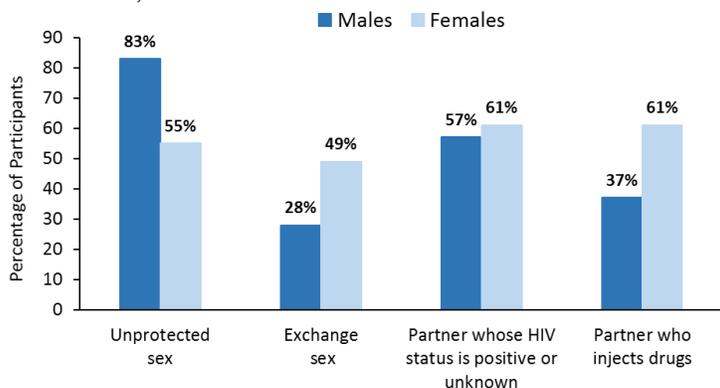
### SUBSTANCE USE

Seventy-six percent of participants reported having had at least one alcoholic drink in the past 30 days. Of those with recent alcohol use (within the past 30 days), 50% of participants reported binge drinking ( $\geq 4$  drinks for females and  $\geq 5$  drinks for males in about 2 hours). Eighty percent of participants reported non-injection drug use in the 12 months before their interview, with heroin being reported most frequently. Heroin was also the most frequently reported injection drug (95%).

### SEXUAL BEHAVIORS

Among participants who reported being sexually active in the past 12 months, the median number of sexual partners reported by both males and females was 2. Among males, 42% reported only main partnerships, 37% reported main and casual partnerships, and 21% reported only casual partnerships. Among females, 44% reported main and casual partnerships, 40% reported only main partnerships, and 16% reported only casual partnerships. More male participants reported having unprotected sex compared to female participants (83% and 55%, respectively); however, fewer male participants reported exchanging sex for drugs or money in the past 12 months than female participants (28% and 49%, respectively) – Figure 4. Sex with a partner whose HIV status is positive or unknown was reported by 57% of males and 61% of females, while 37% of males and 61% of females reported having sex with a partner who injects drugs in the past 12 months.

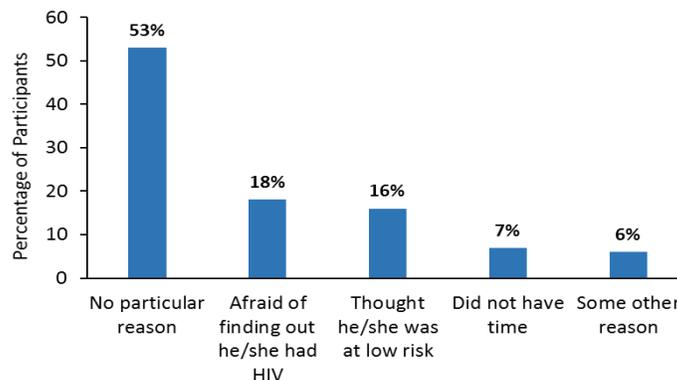
Figure 4. Sex Behaviors Among PWID During the Past 12 Months, Norfolk MSA, 2018



### HIV/STI TESTING

Eighty-eight percent of participants reported having ever had an HIV test in their lifetime. Among participants ever tested, 39% reported recent HIV testing (in the past 12 months). Twenty-three percent of participants reported gonorrhea, chlamydia, and/or syphilis testing in the past 12 months. For participants with recent HIV testing, the most frequently reported location for testing was a hospital (22%); 16% reported testing at a public health clinic or community health center and 14% reported testing at a private doctor's office. For participants who have never tested positive for HIV and did not report recent HIV testing, the majority reported "no particular reason" for not testing (53%) – Figure 5.

Figure 5. Reason for Not Receiving HIV Test Among PWID During the Past 12 Months, Norfolk MSA, 2018



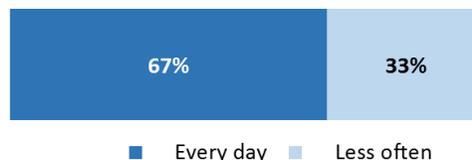
### HIV PREVALENCE

Among the participants who have been tested for HIV, 2% reported testing positive for HIV. Sixty-three percent of these participants were told where to get HIV care within 30 days of their first positive HIV test and all visited a health care provider for their HIV infection. Among participants who saw a provider, 88% reported currently taking antiretroviral medication at the time of the interview and 88% reported that their most recent viral load test was undetectable.

### HIV PREVENTION

Fifty percent of participants reported receiving free condoms in the past 12 months; the most frequently reported location for receiving free condoms was a "doctor's office, health center, clinic, or hospital" (33%). Twenty-eight percent of participants had a one-on-one conversation or group session with an outreach worker about HIV prevention. Among participants who have never tested positive for HIV, 36% had heard of pre-exposure prophylaxis (PrEP) before the interview; 10% of these participants reported discussing taking PrEP with a health care provider and 2% reported taking PrEP in the past 12 months. The majority of participants who took PrEP reported taking it every day – Figure 6.

Figure 6. Frequency of Pre-Exposure Prophylaxis (PrEP) Use Among PWID During the Past 12 Months, Norfolk MSA, 2018



### REFERENCES

- Centers for Disease Control and Prevention (CDC). National HIV Behavioral Surveillance (NHBS). <https://www.cdc.gov/hiv/statistics/systems/nhbs/index.html>
- Centers for Disease Control and Prevention. National HIV Behavioral Surveillance System Round 5: Model Surveillance Protocol. December 15, 2017. Available from: [www.cdc.gov/hiv/statistics/systems/nhbs/operations.html](http://www.cdc.gov/hiv/statistics/systems/nhbs/operations.html)