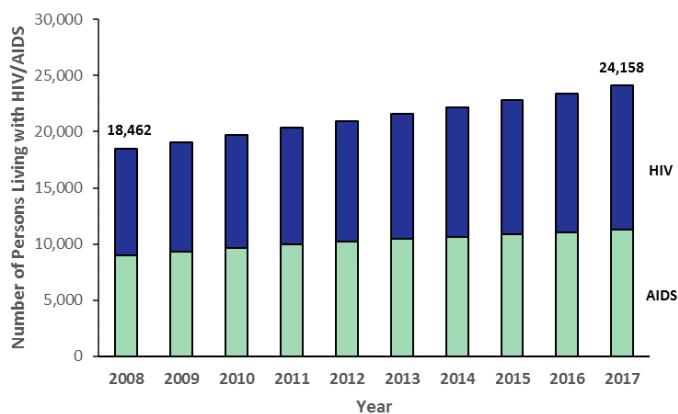




Persons Living with HIV

As of December 31, 2017, there were 24,158 persons, or about one in 351 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 2008 to 2017, the number of persons living with HIV (PLWH) in Virginia increased by about 31%. As of December 31, 2017 approximately 47% of the HIV-positive population had an AIDS-defining condition.

Figure 1: Persons Living with HIV in Virginia by Disease Progression, 2008-2017



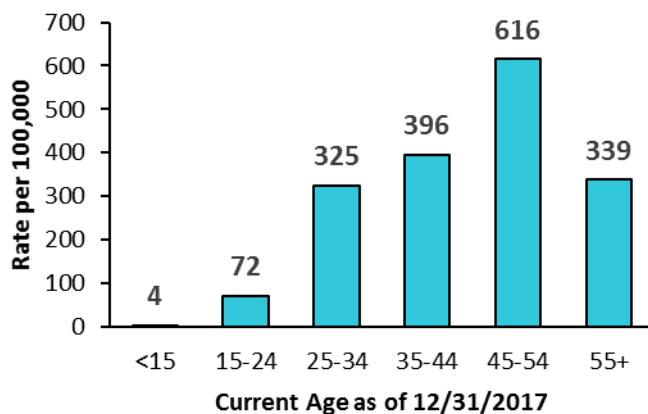
By Gender

By the end of 2017, there were 17,949 males and 6,209 females in Virginia who were living with HIV, with males representing 74% of the total HIV-positive population. Males were living with HIV at a rate of 431 per 100,000, and females at a rate of 144 per 100,000. In Virginia, males were about three times more likely to be living with HIV than females.

By Current Age

As HIV medical treatment continues to improve, persons are living longer with HIV. By December 31, 2017, 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 616 per 100,000, followed by the 35-44 age group at 396 per 100,000.

Figure 2: Age Distribution for Persons Living with HIV in Virginia as of December 31, 2017

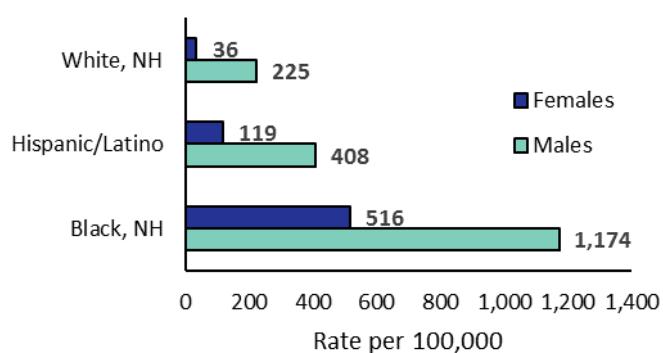


By Race/Ethnicity

Consistent with the epidemic, 58% of all persons living with HIV in Virginia as of December 31, 2017 were Black, non-Hispanic, followed by White, non-Hispanic at 29%. Approximately 9% of living people living with HIV were Hispanic/Latino. Black, non-Hispanic persons were over 6 times more likely to be living with HIV at the end of 2017 than White, non-Hispanic persons. Hispanic/Latino persons were approximately two times more likely to be living with HIV as White, non-Hispanic persons.

As of 2017, 73% 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 1,174 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 over fourteen times more likely to be living with HIV than White females, and Hispanic/Latino females were approximately three times more likely than White females to be living with HIV.

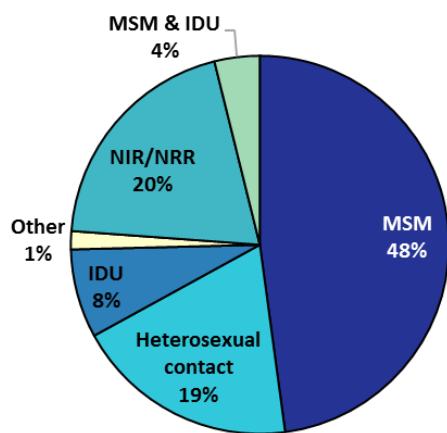
Figure 3: Persons Living with HIV in Virginia by Race/Ethnicity and Gender as of December 31, 2017



By Transmission Risk

At the end of 2017, 48% of all living cases of HIV were attributed to male-to-male sexual contact (MSM). Heterosexual contact represented 19% of the living cases, and 8% of cases were attributed to injection drug use (IDU). Approximately 20% of PLWH had no reported risk (NRR) or no identified risk (NIR) for transmission. Other transmission risks (over 1%) included pediatric cases and blood recipients. Among women, heterosexual contact was the most common transmission risk (51%). Of all PLWH at the end of 2017, Black, non-Hispanic MSM were the largest transmission risk group living with HIV (23%), followed by White, non-Hispanic MSM (18%) and Black female heterosexuals (9%).

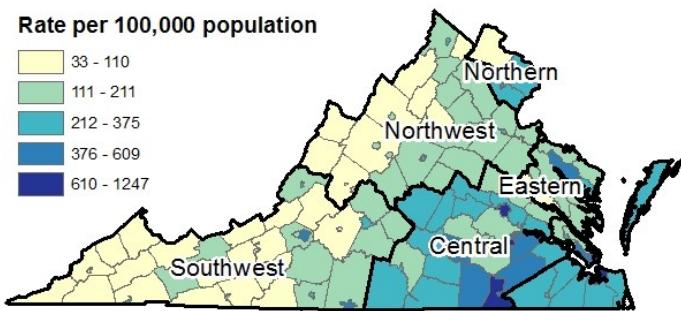
Figure 4: Persons Living with HIV in Virginia by Transmission Risk as of December 31, 2017



By Region

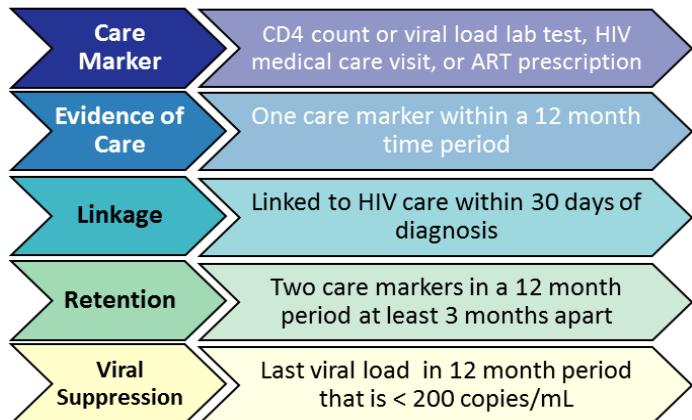
The Commonwealth of Virginia is divided into five health regions: Central, Eastern, Northern, Northwest, and Southwest. As of December 31, 2017, the rate of persons living with HIV was highest in the Eastern region with 403 cases per 100,000, followed by the Central region at 400 cases per 100,000 and the Northern region at 267 cases per 100,000. The Southwest and Northwest regions represented 152 cases per 100,000, each.

Figure 5: Persons Living with HIV by Locality in Virginia as of December 31, 2017



As evidenced by the map above, the Central, Eastern, and Northern regions have higher rates of persons living with HIV with rates by locality as high as 1,247 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 33 cases per 100,000 population.

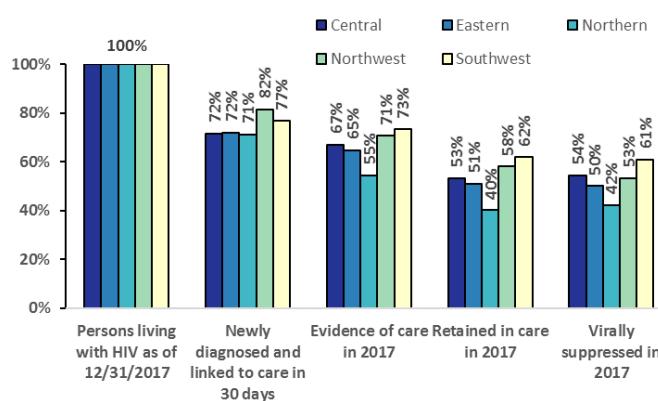
Figure 6: HIV Care Continuum Definitions



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, 2017



Central Region

As of December 31, 2017, 5,765 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-seven percent of PLWH in the Central region had evidence of HIV care, 53% were retained in HIV care, and 54% were virally suppressed. Among the 212 persons newly diagnosed in the Central region, 72% were linked to HIV care within 30 days (Figure 7).

Eastern Region

As of December 31, 2017, 7,471 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-five percent of PLWH in the Eastern region had evidence of HIV care, 51% were retained in HIV care, and 50% were virally suppressed. Among the 311 persons newly diagnosed in the Eastern region, 72% were linked to HIV care within 30 days.

Northern Region

As of December 31, 2017, 6,671 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-five percent of PLWH in the Northern region had evidence of HIV care, 40% were retained in HIV care, and 42% were virally suppressed. Among the 222 persons newly diagnosed in the Northern region, 71% were linked to HIV care within 30 days.

Northwest Region

As of December 31, 2017, 2,026 persons were living with HIV in the Northwest region (consists of the cities of Charlottesville, Winchester, Fredericksburg, and surrounding areas). Seventy-one percent of PLWH in the Northwest region had evidence of HIV care, 58% were retained in HIV care, and 53% were virally suppressed. Among the 65 persons newly diagnosed in the Northwest region, 82% were linked to HIV care within 30 days.

Southwest Region

As of December 31, 2017, 2,049 persons were living with HIV in the Southwest region (consists of the cities of Roanoke, Danville, Lynchburg, Martinsville, and surrounding areas). Seventy-three percent of PLWH in the Southwest region had evidence of HIV care, 62% were retained in HIV care, and 61% were virally suppressed. Among the 73 persons newly diagnosed in the Southwest region, 77% were linked to HIV care within 30 days.

In 2017, as shown in the second column in Figure 7, the Northwest health region had the highest linkage rate of 82% for newly diagnosed persons linked to care within 30 days, followed by the Southwest region at 77%. Overall, the Northwest and Southwest regions had better evidence of care, retention, and viral suppression rates than the other health regions in Virginia, as seen in the third, fourth and fifth columns in Figure 7.