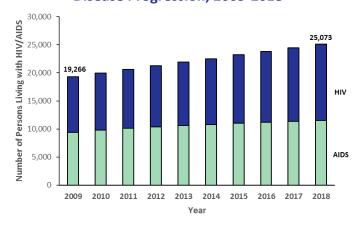


Persons Living with HIV

AS of December 31, 2018, there were 25,073 Figure 2: Age Distribution for Persons Living with HIV persons, or about one in 340 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 2009 to 2018, the number of persons living with HIV (PLWH) in Virginia increased by about 30%. As of December 31, 2018 approximately 46% of the HIVpositive population had an AIDS-defining condition.

Figure 1: Persons Living with HIV in Virginia by Disease Progression, 2009-2018



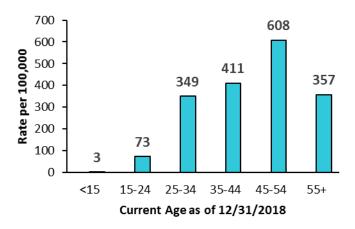
By Gender

By the end of 2018, there were 18,726 males and 6,347 females in Virginia who were living with HIV, with males representing 75% of the total HIVpositive population. Males were living with HIV at a rate of 447 per 100,000, and females at a rate of 147 per 100,000. In Virginia, males were about 3 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, 2018, 35% 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 608 per 100,000, followed by the 35-44 age group at 411 per 100,000.

in Virginia as of December 31, 2018

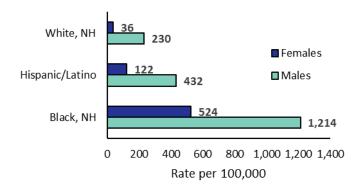


By Race/Ethnicity

Consistent with the epidemic, most (58%) persons living with HIV in Virginia as of December 31, 2018 were Black, non-Hispanic, followed by White, non-Hispanic at 28%. Approximately 9% of 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 2018 than White, non-Hispanic persons. Hispanic/Latino persons were approximately 2 times more likely to be living with non-Hispanic HIV White, as persons.

As of 2018, 73% of all women and 53% of all men living with HIV were Black, non-Hispanic. Fifteen percent of all women and 32% of all men were White, non-Hispanic, and 8% of all women and 10% of all men were Hispanic/Latino. Black, non-Hispanic males had the highest rate of persons living with HIV, at 1,214 cases per 100,000 population. Black and Hispanic/Latino males were approximately 5 and 2 times more likely to be living with HIV than White males, respectively. Black females were over 14 times more likely to be living with HIV than White females, and Hispanic/Latino females approximately 3 times more likely than White females to be living with HIV.

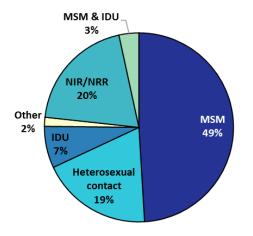
Figure 3: Persons Living with HIV in Virginia by Race/Ethnicity and Gender as of December 31, 2018



By Transmission Risk

At the end of 2018, 49% of all living cases of HIV were attributed to male-to-male sexual contact (MSM). Heterosexual contact represented 19% of the living cases, 7% of cases were attributed to injection drug use (IDU), and 3% were attributed to both IDU and MSM. Approximately 20% of PLWH had no reported risk (NRR) or no identified risk (NIR) for transmission. Other transmission risks included pediatric cases (1%) and blood recipients (<1%). Among women, heterosexual contact was the most common transmission risk (51%). Of all PLWH at the end of 2018, Black, non-Hispanic MSM were the largest transmission risk group living with HIV (24%), followed by White, non-Hispanic MSM (18%) and Black female heterosexuals (9%).

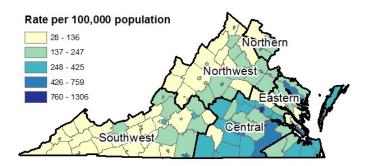
Figure 4: Persons Living with HIV in Virginia by Transmission Risk as of December 31, 2018



By Region

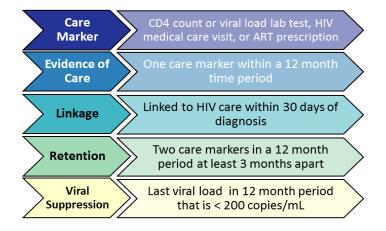
The Commonwealth of Virginia is divided into five health regions: Central, Eastern, Northern, Northwest, and Southwest. As of December 31, 2018, the rate of persons living with HIV was highest in the Eastern region with 411 cases per 100,000, followed by the Central region at 405 cases per 100,000 and the Northern region at 278 cases per 100,000. The Northwest and Southwest regions represented 161 and 159 cases per 100,000, respectively.

Figure 5: Persons Living with HIV by Locality in Virginia as of December 31, 2018



As evidenced by the map above, the Eastern and Central regions have higher rates of persons living with HIV with rates by locality as high as 1,305 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 28 cases per 100,000 population.

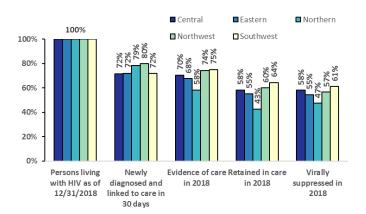
Figure 6: HIV Care Continuum Definitions



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, 2018, 5,883 persons were living with HIV in the Central region (consists of Richmond City and areas bordering Richmond, including the cities of Petersburg and Emporia). Seventy percent of PLWH in the Central region had evidence of HIV care, 58% were retained in HIV care, and 58% were virally suppressed. Among the 226 persons newly diagnosed in the Central region, 72% were linked to HIV care within 30 days (Figure 7).

Eastern Region

As of December 31, 2018, 7,629 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-eight percent of PLWH in the Eastern region had evidence of HIV care, 55% were retained in HIV care, and 55% were virally suppressed. Among the 253 persons newly diagnosed in the Eastern region, 72% were linked to HIV care within 30 days.

Northern Region

As of December 31, 2018, 7,006 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-eight percent of PLWH in the Northern region had evidence of HIV care, 43% were retained in HIV care, and 47% were virally suppressed. Among the 238 persons newly diagnosed in the Northern region, 79% were linked to HIV care within 30 days.

Northwest Region

As of December 31, 2018, 2,164 persons were living with HIV in the Northwest region (consists of the cities of Charlottesville, Winchester, Fredericksburg, and surrounding areas). Seventy-four percent of PLWH in the Northwest region had evidence of HIV care, 60% were retained in HIV care, and 57% were virally suppressed. Among the 84 persons newly diagnosed in the Northwest region, 80% were linked to HIV care within 30 days.

Southwest Region

As of December 31, 2018, 2,134 persons were living with HIV in the Southwest region (consists of the cities of Roanoke, Danville, Lynchburg, Martinsville, and surrounding areas). Seventy-five percent of PLWH in the Southwest region had evidence of HIV care, 64% were retained in HIV care, and 61% were virally suppressed. Among the 78 persons newly diagnosed in the Southwest region, 72% were linked to HIV care within 30 days.

In 2018, as shown in the second column in Figure 7, the Northwest health region had the highest linkage rate at 80% for newly diagnosed persons linked to care within 30 days, followed by the Northern region at 79%. Overall, the Northwest and Southwest regions had better evidence of care, retention, and viral suppression rates than the other health regions in Virginia, and the Northern region had the lowest, as seen in the third, fourth and fifth columns in Figure 7.