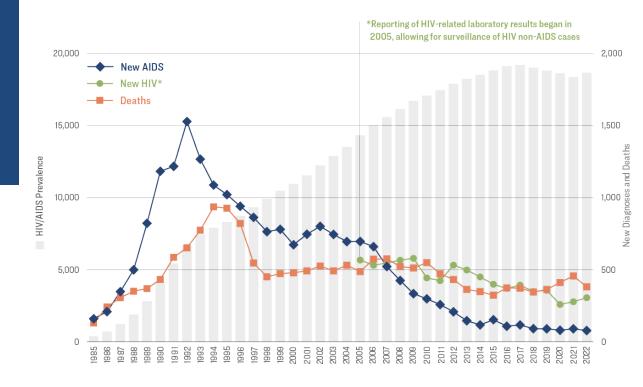
HIPC Data Update 2023

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HIV Integrated Planning Council



Epi Update

Newly Diagnosed HIV, AIDS (regardless of HIV Status), and Deaths – Philadelphia, 1985 - 2022



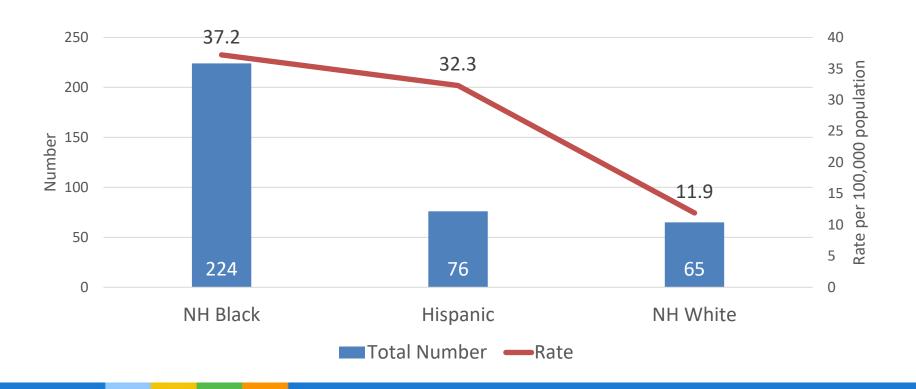
Newly Diagnosed HIV – Philadelphia, 2022

- 382 newly diagnosed cases
 - 58.6% were NH Black, 19.9% Hispanic/Latinx, 17.0% NH White
- Largest proportion of new cases among:
 - Assigned male sex at birth (75.4%)
 - 30-39 (35.3%)
 - MSM (51.0%)
- The proportion of individuals concurrently diagnosed with HIV/AIDS in 2022 was 18.6%, compared to 19.7% in 2021

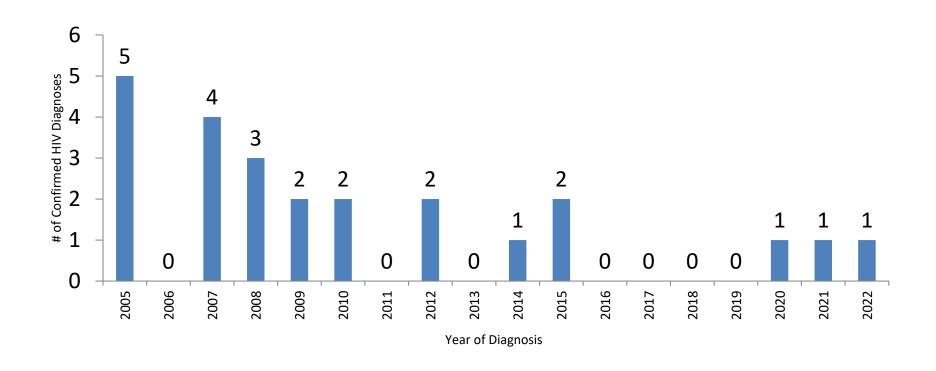


Rates were highest among MSM (1,484.4 per 100,000), followed by PWID (245.2), and at-risk heterosexuals (34.3)

New Diagnosed HIV by Race/Ethnicity – Phila, 2022



Philadelphia Perinatal HIV Transmissions, 2005-2022



HIV Diagnoses by Census Tract – Phila, 2022

*Number of cases in this census tract is inflated due to the location of the Philadelphia Department of Prisons



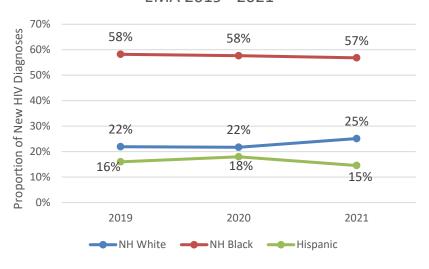
Newly Diagnosed HIV in the EMA - 2021

- 653 new HIV diagnoses across the EMA in 2021
 - Over half of these (56%) occurred in Philadelphia
- 21% were considered late HIV diagnoses (AIDS diagnosis within 3 months of an initial HIV diagnosis)
 - Of persons newly diagnosed with HIV
 - 1 in 5 (21%) were concurrent in NJ counties
 - 1 in 5 (20%) in Philadelphia
 - 1 in 4 (25%) in PA counties
- Highest proportion of late diagnoses among those whose sex at birth was male, NH Black individuals, those aged <u>></u>30, and MSM.

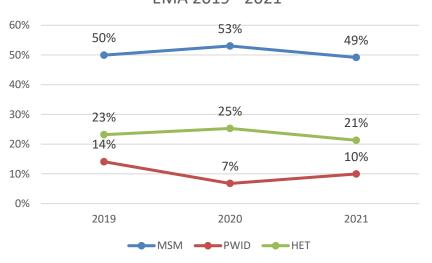
Note: 2021 is the most recently publish data for Newly Diagnosed HIV in the EMA

Newly Diagnosed HIV in the EMA - 2021

Trends in New Diagnoses by Race/Ethnicity, EMA 2019 - 2021

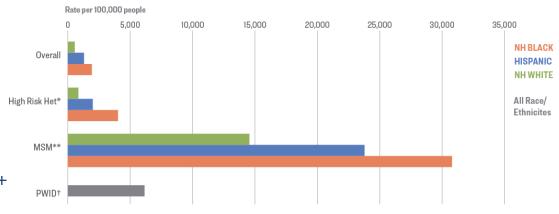


Trends in New Diagnoses by Transmission, EMA 2019 - 2021



PWDH in Philadelphia, 2022

- <u>18,658</u> PWDH living in Philadelphia
 - Overall prevalence rate of 1,163.4 per 100,000
- Largest proportion among those assigned male sex at birth (72.3%), those aged 50+ (56.2%), and MSM (39.8%)
- 63.2% NH Black, 16.5% Hispanic/Latinx, 16.3% NH White



HIV prevalence rates are highest for NH Black MSM (30,785 per 100,000), followed by Hispanic/Latinx MSM (23,778).

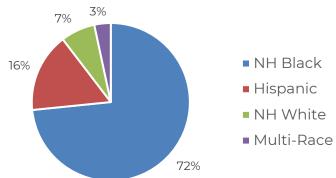
Hepatitis Coinfection in Philadelphia, 2022

- 13.8% (2,583) PWDH coinfected with Hepatitis C
 - HCV coinfection highest among PWID (36.8%), and those aged 50+ (17.5%).
- 4.5% (848) PWDH coinfected with Hepatitis B
 - HBV coinfection higher among those assigned male sex at birth (4.8%) and PWID (6.7%) or PWID/MSM (4.9%).

Transgender Individuals With HIV - Phila

- Among PWDH
 - 70.1% Cisgender Men
 - 27.4% Cisgender Women
 - 2.3% Transgender Women
 - <1% Transgender Men
 - <1% identify with additional gender identities</p>
 - 422 Transgender WWDH
 - 80.8% sexual transmission
 - 18.0% PWID
 - 24 Transgender MWDH
 - 77.3% sexual transmission





NHBS Cycle Among Transgender Women - Phila

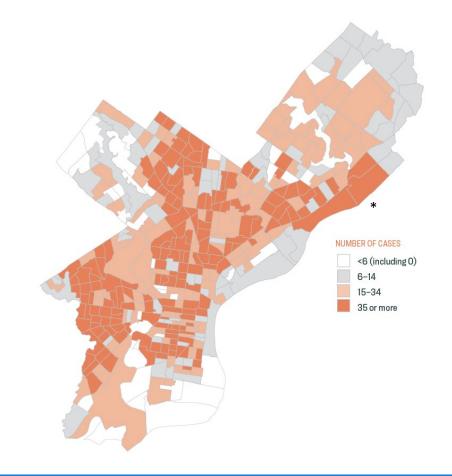
- Pilot cycle began in 2019 and was completed in February 2020
 - 220 qualitative interviews completed
 - Ages ranged from 18 to 6; average age was 35
 - 64% NH Black, 18% Hispanic/Latinx, 10% NH White
 - 47.3% self-reported HIV+

- Factors that may be related to HIV transmission include:
 - Unstable Housing (31%)
 - Living below the FPL (62%)
 - Discrimination (36%)
 - Abuse (40% verbal; 19% physical)

Addressing the root cause of transmission and barriers to treatment adherence is imperative to prevent new infections.

PWDH by Census Tract – Phila, 2022

*Number of cases in this census tract is inflated due to the location of the Philadelphia Department of Prisons



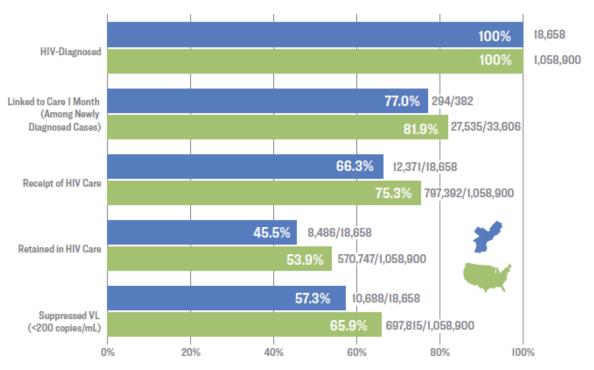
PWDH in the EMA, 2021

- There were 27,421 PWDH across the EMA
 - Philadelphia County (67.5%)
 - Delaware County (7.8%)
 - Camden County (6.6%)
 - Bucks County (4.8%)
 - Montgomery County (4.7%)
- Largest proportion among those assigned male sex at birth (70.6%), those aged 50+ (56.9%), and MSM (39.3%)
- 57.4% NH Black, 16.3% Hispanic/Latinx, 21.6% NH White

HIV Care Continuum

HIV Care Continuum, Phila 2022

- Linkage 81.4% (2021) 77.0%
- Receipt of Care 64.2% (2021) \$\ightharpoonup\$ 66.3%
- Retention 43.7% (2021) \$\imp\$ 45.5%
- Viral Suppression
 55.7% (2021) 57.3%



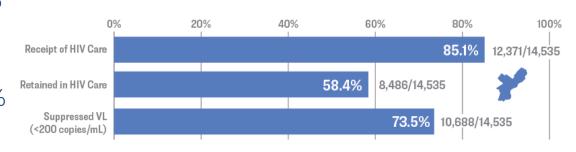
Note: National data presented reflects 2021.

Modified HIV Care Continuum, Phila 2022

Among PWDH with evidence of care in the past 5 years (recent care):

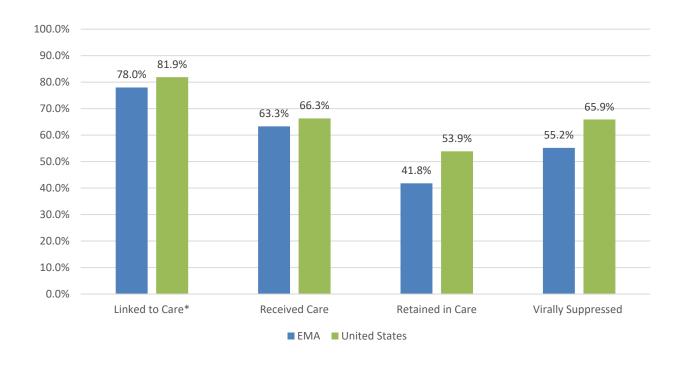
• Receipt of Care 80.8% (2021) \$\infty\$85.1%

• Retention 55.0% (2021) \$\ightharpoonup 58.4%



Viral Suppression
 70.1% (2021) 73.5%

Philadelphia EMA HIV Care Continuum, 2021



^{*}Among Newly Diagnosed Cases; All other continuum measures are based on PWDH

Note: 2021 is the most recently publish data for Newly Diagnosed HIV in the EMA

Ending the HIV Epidemic

Ending the HIV Epidemic

| Ending | the | HIV | Epidemic



75%
reduction in new
HIV infections
in 5 years
and at least
90%
reduction
in 10 years.



www.hiv.gov

Figure 1: Ending the HIV Epidemic in Philadelphia

Federal Goals:



By 2025, 97% of people living with HIV will know their HIV status.

Pillar 1 Diagnose

75% ↓

infections in 5 years.



By 2025, 91% of PLWH, who are in HIV care, will be virally suppressed.

Pillar 2
Treat

4

By 2025, 50% of people with a PrEP indication will be prescribed PrEP, and 100% of people seeking PEP will be prescribed treatment.

Pillar 3
Prevent

90% (in new HIV infections in 10 years.



Identify and investigate active HIV transmission clusters and respond to HIV outbreaks.

Pillar 4 Respond

Ensure that the HIV workforce is appropriately trained, supported, and capable of meeting the goals of the Philadelphia EHE plan.

Workforce Development

Number and Percent PWH Needed to Reach the 2025 Goal to End the HIV Epidemic in Philadelphia*

HIV Care Continuum Measure	Number in 2018 (baseline)	Number by 2025	Change Needed to Achieve 2025 EHE Goals	
Unaware	2,019	505	1,514	
Diagnosed, not in care	2,395	599	1,796	
In care not virally suppressed	1,710	428	1,282	
Virally suppressed	10,961	15,554	1 4,593	

At the end of the 5-year EHE initiative, 97% of PWH will be diagnosed with HIV, 97% retained in HIV medical care, and 91% will be virally suppressed.

*Assumes no change in current HIV prevention efforts other than increases in HIV testing and is based primarily on treatment as prevention activities.

Source: PDPH/DHH 2023

Progress Toward EHE Goals Philadelphia

GOAL:	2017	2018	2019	2020	2021	2022	Progress	2025 Target	2030 Target
Reduce new HIV infections by 75% in five years and by 90% in ten years	470	440	440	310*	290*		IMPROVING	(118)	(47)
Increase knowledge of status to 95% by 2025	88.6%	88.4%	88.5%	88.5%	89.8%		IMPROVING	(95.0%)	
Decrease confirmed HIV diagnoses to 25% by 2025 and 8% by 2030	509	435	446	332	365	382	STABLE	(127)	(41)
Increase linkage to care to 95% by 2025	86.3%	86.1%	81.3%	82.5%	81.4%	77.0%	NOTIMPROVED	(95.0%)	
Increase viral suppression to 95% by 2025**	72.3%	70.1%	72.3%	67.3%	70.1%	73.5%	IMPROVING	(95.0%)	
Decrease stigma among PWDH by 50%, Median ^{†‡}		32.9	31.0	31.7	28.4		IMPROVING	(18.8)	
Decrease homelessness among PWDH by 50%	9.9%	13.6%	8.1%	6.7%	13.5%		NOTIMPROVED	(4.9%)	
Increase PrEP coverage to 50%§			37.2%	35.5%	41.2%	50.8%	IMPROVING	(50.0%)	

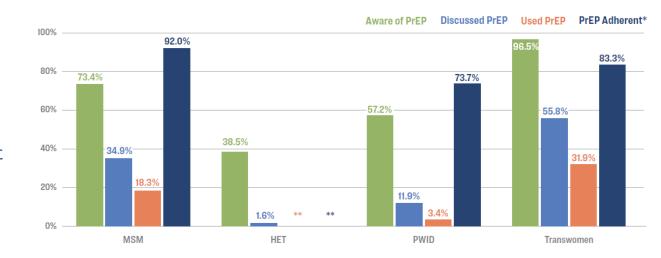
PrEP

PrEP Indication by Transmission Category and Race/Ethnicity, Phila 2022

	Negative At Risk		PrEP Indication			% Negative At Risk Population with a PrEP Indication			
	MSM	PWID	Heterosexual	MSM	PWID	Heterosexual	MSM	PWID	Heterosexua
NH Black	4,777	7,574	108,703	3,180	390	1,510	66.6%	5.1%	1.4%
Hispanic	2,104	4,370	47,727	1,020	310	340	48.5%	7.1%	0.7%
NH White	5,475	10,753	54,652	620	830	130	11.3%	7.7%	0.2%
TOTAL**	12,897	23,300	230,106	5,080	1,610	2,060	39.4%	6.9%	0.9%

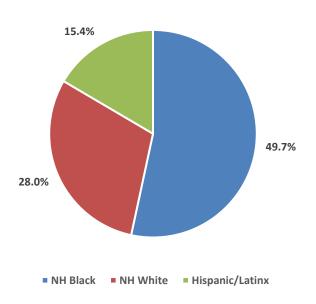
PrEP Continuum

- PrEP awareness, discussions about PrEP, and PrEP usage were highest among transwomen, while PrEP adherence was highest among MSM.
- At-risk heterosexuals & PWID reported the lowest levels of awareness, discussions about, and usage of PrEP.
- Less than half of all MSM, PWID, & heterosexuals discussed PrEP with their provider in the last year.

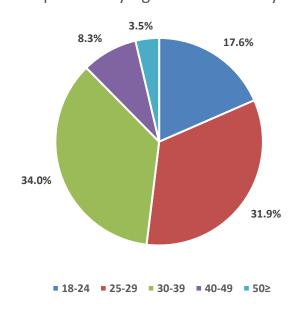


Prelim NHBS 2023 (MSM) – PrEP Status

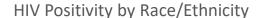
Prep Status by Race/Ethnicity

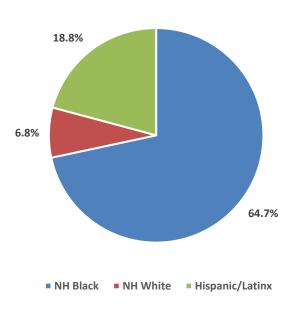


Prep Status by Age - MSM 2023 Cycle

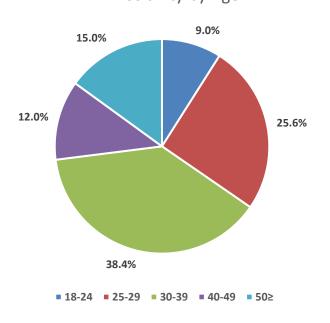


Prelim NHBS 2023 (MSM) – HIV Positivity





HIV Positivity by Age

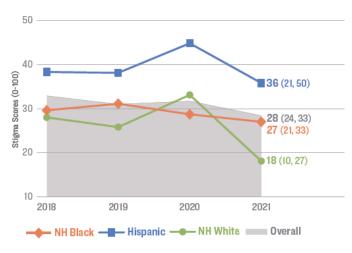


Health Equity

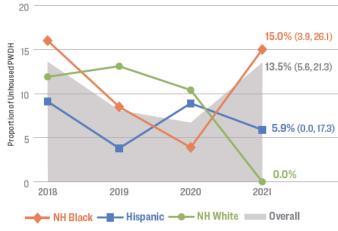
Stigma and Housing - MMP

- The Medical Monitoring Project (MMP) collects HIVrelated stigma & housing data among PWDH
- Overall, stigma highest among Hispanic/Latinx PWDH
- Increasing proportion of homelessness among NH Black PWDH

Trends of Stigma scores in PWDH by Race/Ethnicity, 2018-2021



Trends in proportion of Unhoused PWDH by Race/ Ethnicity, 2018-2021



Engagement in HIV Care

Data to Care Program

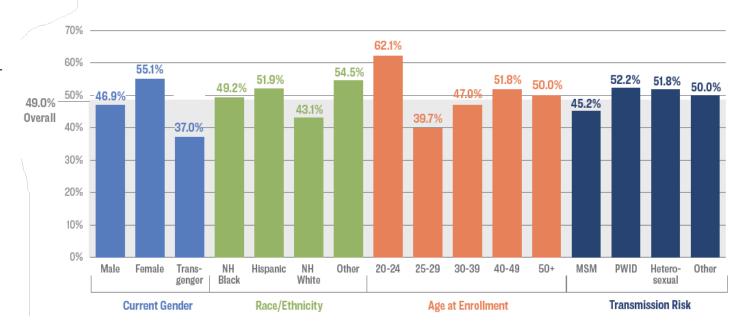
- Monthly data exchange between each participating facility and PDPH to determine potential out of care patients (OOC)
- Monthly case conferences to discuss individual clients and determine eligibility
- Eligible patients are referred to our Field Service Specialists who can help address barriers and reengage in HIV care

Data to Care Outcomes

Lowest rates of relinkage among:

- Transgender individuals
- Individuals aged 25-29 years old
- NH White individuals
- MSM (45.2%)

Re-Linked to HIV Care Within 90 Days of Enrollment in Data to Care



Barriers to Engagement in HIV Care

Barriers

Barrier Domain	N	% of Barriers Reported		
Provider/Structural Barrier	147	53.6%		
Patient Rights/Education	99	36.1%		
Supportive Services/SES	70	25.5%		
Behavioral Health	21	7.7%		
Total Barriers Reported*	274			

Resources Provided

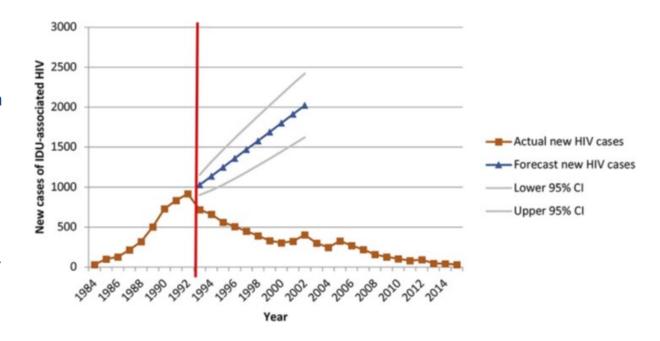
Resource Type	N	% of Resources Provided
Child Care	1	0.4%
Drug and Alcohol Treatment	3	1.1%
Emergency Food/Pantry	8	3.0%
Governmental Services	2	0.7%
Health Insurance	3	1.1%
Housing Services	6	2.2%
Legal Services	2	0.7%
Medical Case Management	220	81.8%
Mental Health Services	1	0.4%
Other	20	7.4%
Self Help/Support Groups	1	0.4%
Utility Support	2	0.7%
Total Resources Provided	269	100.0%

- Data collected through D2C and Field Services indicates that 53.6% of barriers faced by PWDH are provider/structural barriers.
- MCM most often provided resource, followed by emergency food/pantry services.

HIV Outbreak Response

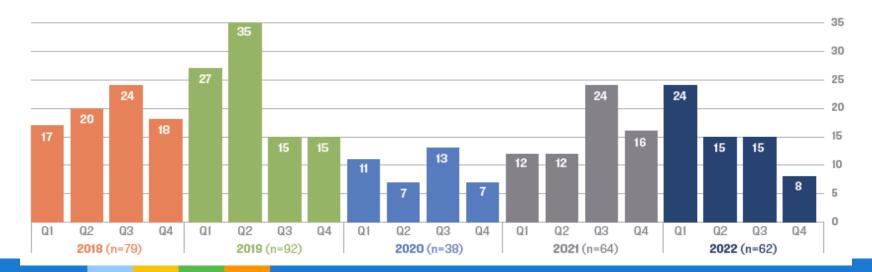
Outbreak of HIV Among PWID – Philadelphia

- Syringe Services
 Programs (SSPs) began legally operating in Philadelphia in 1992 as a public health tool to address HIV.
- HIV cases peaked in 1992 at 819 new diagnoses, but have decreased continuously until 2016.

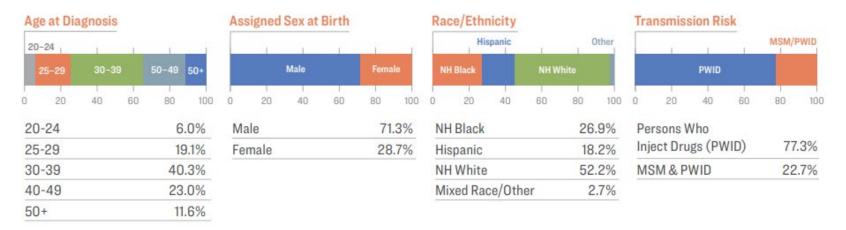


Outbreak of HIV Among PWID - Philadelphia

- In 2018, cases rose to 71 diagnoses from 33 in 2016, representing a 115% increase in new HIV among PWID.
- An outbreak was declared and there has been an active response since that time.
 - During 2022, there were 62 new HIV diagnoses among PWID.



Outbreak of HIV Among PWID – Philadelphia



- There have been 335 new HIV diagnoses among PWID since 2018.
- Among outbreak cases, the majority were aged 30 and older (74.9%), assigned male sex at birth (71.3%), and NH White (52.2%).
- During 2022, a greater proportion of diagnoses were among NH Black & Hispanic/Latinx PWID compared to 2021.

Contact Information

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