# Our community, our promise.

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### Ending the HIV Epidemic Hamilton County State of HIV Report 2023

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PREVENT, PROMOTE, PROTECT.

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# Ending the HIV Epidemic (EHE): Working to **Decrease HIV in Hamilton County.**

Dear colleagues, partners, and friends,

Cases of the human immunodeficiency virus (HIV) in Hamilton County have decreased over the past five years - from 189 in 2018, to 93 in 2022. We should all be proud of this great achievement. We thank our community partners, Hamilton County Public Health (HCPH) staff, and caring citizens who work so diligently in the HIV field. This progress could not be accomplished without you.

Despite the reduction in cases, HIV is still a public health issue of concern. In 2019, Hamilton County was one of 48 counties in the country selected to be part of a federal program to address HIV. The grant, called Ending the HIV Epidemic (EHE) is a federally funded program with the goal of reducing new HIV infections by 90 percent by year 2030. Other counties in Ohio, such as Cuyahoga and Franklin, are also participating in this grant. We have a wonderful opportunity through this program to expand our mission to address HIV.

The EHE program consists of four pillars: diagnose, treat, prevent, and respond. These four pillars create a framework to not only prevent new infections, but also to ensure those living with HIV have access to medications and treatment. These medications reduce the amount of virus in a person's body so they may live a long and prosperous life even with a HIV diagnosis.

We recognize that many individuals face barriers when it comes to accessing prevention tools or medication for HIV. To our friends and family facing these barriers, we hear you, and we are working to make HIV care more accessible and equitable.

We are excited to share our State of HIV report. We encourage you to look through the data and see the work that has been done and work that needs to continue. We are confident that with continued community partnership we can accomplish our goals.



Sincerely,

Greg Kesterman Health Commissioner Hamilton County Public Health

#### **Our EHE Mission**

**Reduce new HIV infections by** 90% by 2030.

### Four Pillars of EHE

**Diagnose:** expand testing to find new

infections.

**Treat:** get folks with HIV on medications to become virally suppressed.

**Prevent:** engage with the community to

expand proven interventions.

**Respond:** identify potential HIV outbreaks/clusters

### **OUR EHE GOALS**

of friends and family living with HIV will know their status.

of friends and family living with HIV will be in treatment.

or fewer new HIV 2030.

cases per year by

For more information about Ending the HIV Epidemic or Hamilton County Public Health, please visit the following websites:

www.HCPH.org

www. CDC.Gov/EndHIV/

## **Executive Summary**

### **Goal for EHE**

Reduce new HIV cases to 18 or fewer total cases per year by 2030.

### Demographics

18 to 34-year-olds, Black individuals, and males made up the highest percentage of new HIV cases for 2022. The percentage of Black individuals diagnosed with HIV has been increasing.

### **Viral Suppression**

In 2020, 62 percent of people living with HIV (PLWH) who had a viral load test were virally suppressed. This is lower than the national rate, which is 65 percent virally suppressed.

### **New HIV Infections**

New HIV infections have been decreasing. In 2022, Hamilton County saw the lowest number of new HIV infections in the last five years.

### **HIV Appointments**

In 2020, 90 percent of new HIV cases went to at least one HIV appointment. These appointments are mainly scheduled at one of the major hospital systems in Hamilton County.

### **Preventing new Cases**

HIV testing, Pre-Exposure Prophylaxis (PrEP), and syringe exchanges are all part of reducing new HIV infections in our community.

### **Key Recommendations**

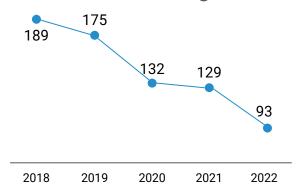
- Expand HIV testing in the community to find cases as early as possible.
- Increase the percentage of viral suppression for those living with HIV so the virus is not passed to others.
- Reduce the barriers that cause people living with HIV to fall out of medical care.
- Get more folks on PrEP and address racial and economic inequities with prescribing PrEP.
- Create better collaboration between health departments (state, county, and city) and HIV providers from the area hospital systems.
- Continue to inform community stakeholders and policy makers about the importance and benefits of HIV programs.

# **718** People Contracted HIV During the Past Five Years in Hamilton County

### HIV is still affecting our community. In 2022, there were 93 new cases. \*

The good news: this was the lowest number of new cases in the last five years. **New HIV** cases are <u>down 28 percent</u> from the prior year.

#### Hamilton County HIV Cases have been decreasing



#### **HIV Infection Rates**\*\*

Hamilton County had a higher rate of new infections compared to other counties in Ohio.



Hamilton, Franklin, and Cuyahoga are the three counties in Ohio selected for the EHE program. Rates are per 100,000 population.

#### People Living with HIV\*\*

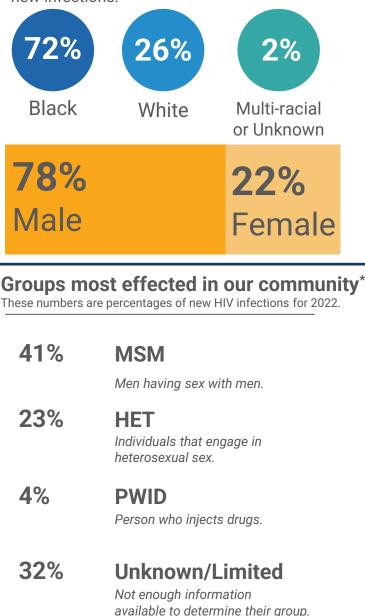


#### Hamilton County Data for 2022

People of every age, race, and gender are vulnerable to acquiring HIV, however, certain demographics make up a disproportionate percentage of cases.<sup>1</sup>

#### Younger adults made up a higher number. 18-34 year olds were 60 percent of new cases.

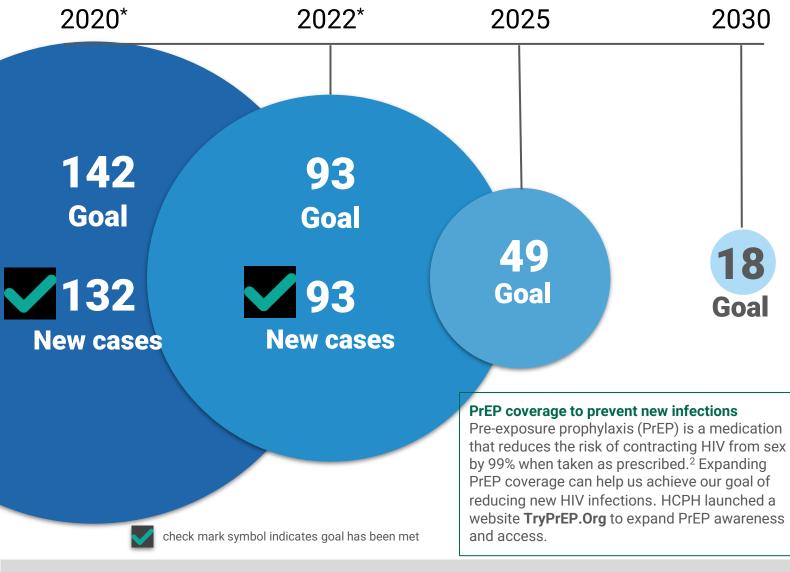
Black, male, and men that have sex with other men (MSM) made up the highest percentage of new infections.



<sup>\*\*</sup> Ohio Department of Health (ODH), HIV Surveillance

# **Our Goal for New Cases Per Year**

To reach our goal of **18 or fewer** infections per year by **2030**, we need to average a **19 percent decrease** each year. We have seen an overall reduction in HIV cases over the past five years and meeting our 2030 goal can be achieved with continued partnerships and improvements.



### How we meet our goals

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#### **Provider Collaborative**

Expand testing in healthcare and emergency department settings. Start people living with HIV on medications as soon as possible and keep them in care.



#### PrEP, Condoms & Prevention

Get more individuals on PrEP. Expand testing in the community. Reduce stigmas and misconceptions about condom usage. Increase education about ways to reduce getting HIV.



#### **Informed Community**

Engage with stakeholders, community partners, and neighbors to hear their voices and create a collaborative partnership to address HIV.

#### Syringe exchange

Continue our syringe exchange program by working with stakeholders, government, and community partners to ensure the future of the program.

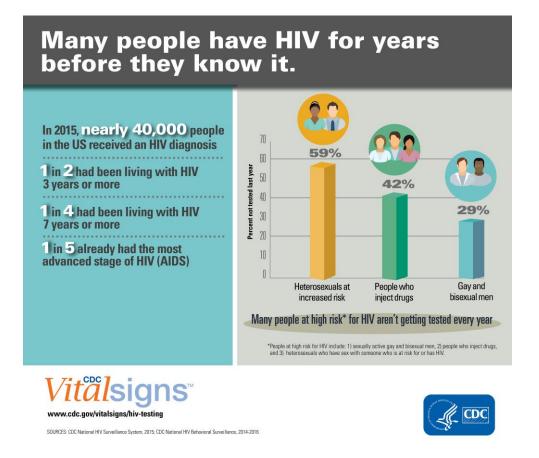
# **Opportunities for More Testing**

### Who should get tested?

Everyone should get tested at least once in their lifetime.<sup>3</sup> HIV may not progress into serious illness for several years, so a person may have HIV and not know it.<sup>3</sup> Stigma, embarassment, and lack of testing access can contribute to a person not getting tested.<sup>4</sup>

### **Finding New Infections**

National data tells us that **13 percent of the** total new HIV cases are unaware of their infection.<sup>5</sup> This underscores the importance of expanding testing and finding every case as early as possible.



### **Increasing Access to Testing: At-Home Tests**



A primary EHE goal is to make HIV testing readily available for everyone. A person can even get tested conveniently and privately with a free at-home testing kit. HCPH created a QR code that, when scanned, will give you the option to order a free at-home test that can be mailed to you.



#### Scan the QR Code

Scan this QR code to order a free at-home HIV test kit.

# **Connecting Patients to HIV Care**

- 1. Inform: HCPH and partner agencies strive to locate all newly diagnosed HIV cases and inform them of their positive status. However, not all cases are able to be located.
- 2. Schedule: HCPH and partner organizations work directly with newly diganosed HIV patients and help guide them into HIV care. This is done by scheduling appointments, providing emotional support, and assisting with transportation.

### 2020 Data

# **90%** attended first appointment

Our region is successful in getting the majority of new HIV cases to their first appointment.

**Limited provider availability:** Not every doctor can treat an HIV infection. HIV appointments are most typically scheduled with infectious disease providers at one of the several hospital systems in our region.

In 2020, 90 percent of newly diagnosed individuals attended their first appointment. \*\*

Over the past five years **an average of 90 percent of new HIV cases attended their first HIV appointment.** 

#### Barriers to Care 7

Barriers that a patient may face that limit their ability to stay in care or be virally suppressed may include:

**Financial Burdens:** Lack of transportation, housing insecurity, problems with insurance.

Stigma: Fear, embarrassment, denial.

**Health Related:** Mental health issues, substance abuse, co-morbidities, mistrust of healthcare.

3. Prescribe: Individuals with HIV who start on antiretroviral therapies (ART) as soon as possible have better long-term health results.<sup>6</sup>

**4. Keep in Care:** HIV is a lifelong health condition that requires adherance to medication and consistent follow-up with HIV doctors. This may be a burden on individuals that leads to falling out of care.<sup>6</sup> Each year, HCPH attempts to locate and reconnect those who have fallen out of care.

# 62% are virally suppressed

We have work to do to keep people engaged in HIV care.

Unfortunately, only 62 percent of people living with HIV (PLWH) in Hamilton County that had a viral load test performed were virally suppressed. \*\*

Increasing the percentage of PLWH who are virally suppressed is a critical component to keeping people healthy and reducing new HIV infections. <sup>8</sup>

Viral suppression can be achieved through consistent adherance to prescribed ART. When an individual with HIV is virally suppressed it is virtually impossible for them to transmit the virus to someone else through sex.<sup>8</sup>

### 2020 Viral Suppression Data\*\* 62% 62% 65% Hamilton County State of United Ohio States 9

# **Racial Inequalites, Poverty, & Stigma**

#### Perspective from a local HIV doctor

"Imagine having only one grocery store in the entire city you can go to, and it is only open when you work your shifts. So without easy transportation and no real way to get time off, what do you do? That's the reality for most people when it comes to accessing HIV care, let alone the entire medical system.

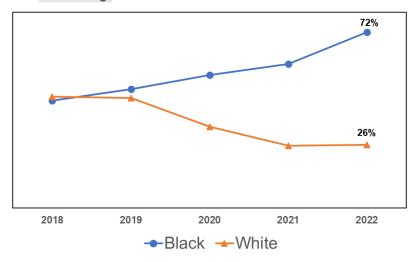
I [provide] treatment to both CEOs and individuals who are homeless, but HIV is stigmatized and frankly a criminalized health issue. No one thinks you are a bad person or unclean if you have breast cancer. But having HIV could happen to anyone who is just trying to live their life. The stigma perpetuates into the community. And because a significant portion of individuals who are contracting STIs (sexually transmitted infections) live near the poverty level, it means we cannot get them the medical care they deserve because of money.

Combine that stigma, with poverty, and with the well deserved lack of trust from black individuals towards the medical community and we are facing a system designed to limit access to care."

- Dr. Carl Fichtenbaum, HIV provider, Professor of Clinical Care at UC.

% of HIV Cases in the Black Community\* Overall HIV numbers have been decreasing in

Hamilton County. However, the percentage of Black individuals newly diagnosed with HIV have been increasing.



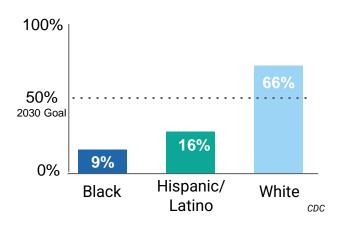
# 1 in 2

#### Black men who have sex with men will contract HIV in their lifetime <sup>10</sup>

"When a Black, gay, young person comes into the office to be tested it is like they have already assumed they will be positive. It's like hope isn't possible. We see him look defeated before even taking a test." – Caracole Case Worker

#### **Racial Disparity in Prescribing PrEP**<sup>11</sup>

Over the past few years, pre-exposure prophylaxis (PrEP) usage has steadily increased. However, in 2020, PrEP coverage in the United States was only 25 percent of those who are recommended to be prescribed. The EHE goal is to increase that number to 50 percent by 2030. National data shows a **disparity in PrEP prescriptions among racial groups**, with Black demographics having the lowest rates of PrEP usage. Our goal is to expand PrEP usage in order to prevent new HIV infections.



\* Ohio Disease Reporting System (ODRS)

# **Syringe Exchanges: Part of our Local Solution**

# Facts about Syringe Service Programs (SSPs) preventing HIV:

- People who inject drugs (PWID) are at an elevated risk for acquiring HIV. <sup>12</sup>
- PWIDs may not be engaged in the traditional healthcare system. SSPs provide a venue to reach this group and provide HIV testing outside the traditional healthcare setting. <sup>13</sup>
- SSPs reduce syringe sharing amongst PWIDs, which in turn reduces their risk for HIV infection. <sup>13</sup>

#### Stigma-Free Access For Everyone (SAFE) Services:

With the help of neighborhood support, Hamilton County Public Health operates five SSP sites called SAFE Services.

In 2023, over 530,000 syringes were collected by HCPH Staff. 988,000 were distributed to clients at an elevated risk for HIV. 324 HIV tests were performed.\*\*\*

## A community wide response to addressing injection drug use

"Through our comprehensive approach encompassing education, testing, harm and stigma reduction, and enhanced access to care, our Coalition has ushered in a transformative shift in how we address the needs of individuals who inject drugs. Today, we stand united in our commitment to eradicating the barriers that hinder progress, ensuring that every person has an equal opportunity to reclaim their lives and find hope in a brighter tomorrow."

- Meagan Guthrie, Director of Hamilton County Office of Addiction Response

# What happens at the SAFE Services locations?

Staff collect and distribute syringes to clients who participate in the program. All collected syringes are properly disposed of.

Resources, referrals, and peer support are available to all clients.

Common resources requested by clients include housing, substance use treatment, and insurance needs.

Free point-of-care HIV and Hepatitis C testing is available on-site to all clients.

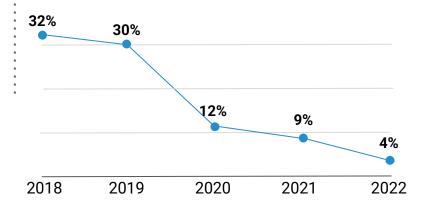
#### **PWID Data:**

**2018**: PWIDs made up **32 percent** of all new HIV infections in Hamilton County.

**2022:** PWIDs accounted for only **four percent** of new infections.\*

# Percent of of PWID HIV Infections in Hamilton County \*

The line graph shows the percentage of new HIV infections in Hamilton County of individuals that reported injection drug use.



# **Concluding Remarks**

Our goal of reducing HIV by 90 percent is possible with community help. HIV has a storied and traumatic history. It also has a history of folks banding together, finding solutions, and achieving big goals. We can honor the more than 700,000 individuals who have died from HIV/AIDS in the United States<sup>14</sup> by working on this issue together. We must continue to look at data, best practices, and vetted scientific evidence so we can follow the four pillars of EHE to **diagnose**, **treat**, **prevent**, and **respond** to HIV in our community.

#### Let's Erode the Stigma

"I'm so elated to disseminate this report to the community. I'm inspired because we can finally see the light at the end of the tunnel. Let's continue to erode the stigma surrounding HIV. With PrEP and TASP (treatment as prevention) we can realistically end this epidemic. Get tested. Take PrEP. Get and stay in care. Together we'll have an HIV free generation!"

> -Jaasiel Chapman HCPH HIV/STI Program Coordinator

#### 2023 State of HIV report

Report produced by Hamilton County Public Health

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#### Free HIV test kits are available

The at-home HIV test kits are packaged in a nondescript envelope and delivered by USPS within 10 business days of placing an order.



Scan the QR code to order an at home kit or schedule a confidential HIV or HepC test at Caracole's office in Northside, Cincinnati.







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# **Data Notes**

HIV data may be subject to change as cases get added or removed.

A portion of data for this report were provided by the Ohio Department of Health. The Department specifically disclaims responsibility for analyses, interpretations or conclusions.

The Ohio Disease Reporting System (ODRS) was used for data collection for parts of this report. Data input error in ODRS can occur which may provide limitations or inaccuracies in data.

COVID-19 may have impacted data collection. Because of this, data interpretations should be viewed with caution.

