

HIV/AIDS Epidemiology Partnership 2a



**Bay, Calhoun, Gulf, Holmes,
Jackson and Washington Counties**

Excluding Dept. of Corrections

Created: 01/02/14

Revision: 07/09/14

Florida Department of Health
HIV/AIDS Section
Annual data trends as of 12/31/2013
Living (Prevalence) data as of 06/30/2014



HIV and AIDS Case Data

- Ⓡ AIDS Cases became reportable in Florida in 1981.**
- Ⓡ HIV (not AIDS) became reportable in Florida on July 1, 1997.**
- Ⓡ HIV Infection reporting represents newly Adult HIV Infection Cases, regardless of AIDS status at time of report, that were previously reported.**
- Ⓡ AIDS cases and HIV infection cases by year of report are NOT mutually exclusive and CANNOT be added together.**
- Ⓡ Frozen databases of year-end data are generated at the end of each calendar year. These are the same data used for Florida CHARTS and all grant-related data where annual data are included.**
- Ⓡ HIV prevalence data are generated later in the year, usually in July, when most of the “expected” death data are complete.**

HIV and AIDS Case Data (con't)

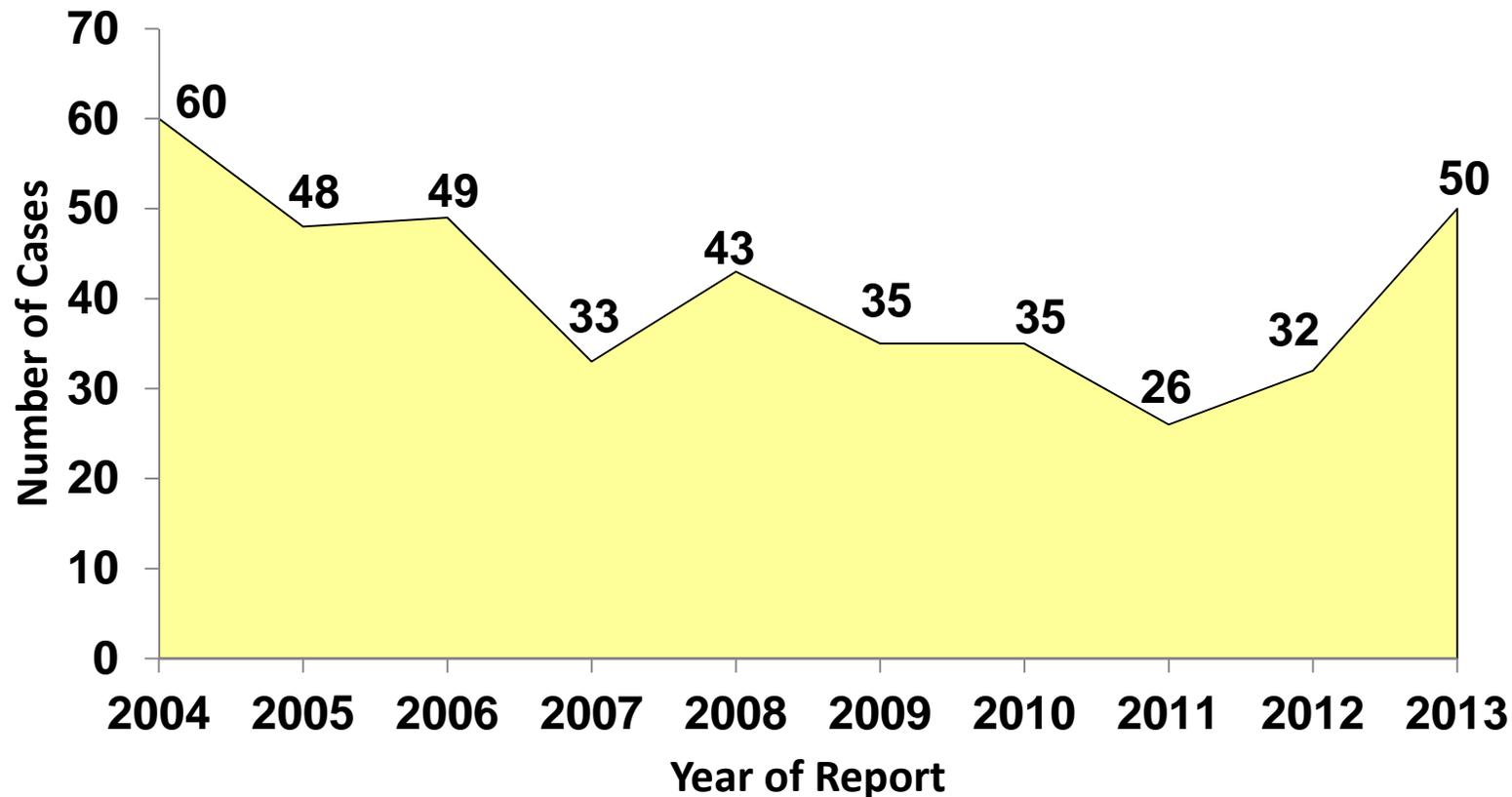
- Ⓡ **Adult cases represent ages 13 and older, pediatric cases are those under the age of 13. For data by year, the age is by age of diagnosis. For living data, the age is by current age at the end of the most recent calendar year, regardless of age at diagnosis.**
- Ⓡ **Unless otherwise noted, whites are non-Hispanic and blacks are non-Hispanic.**
- Ⓡ **Unless otherwise noted. Area and county data will exclude DOC cases.**

Snapshot of Persons Reported with HIV Disease, 2013, Partnership 2a

	HIV Infection and AIDS Cases Reported in 2013*			
	Adults (Age 13+)	Pediatrics (Age <13)	TOTAL	
	HIV Infection Cases	50	0	50
	AIDS Cases	23	0	23
	*HIV infection cases and AIDS cases by year of report are NOT mutually exclusive and CANNOT be added together.			
Total Population, 2013	Cumulative HIV/AIDS Cases Reported 1981-2013			
697,175	Adults (Age 13+)	Pediatrics (Age <13)	TOTAL	
	HIV (not AIDS) Cases**	264	1	265
	AIDS Cases	727	1	728
	Total	991	2	993
	**HIV (not AIDS) cases were NOT reportable until 07/1997			
Persons Living with HIV Disease through 2013, as of 06/30/2014:			576	



HIV Infection Cases and Rates*, by Year of Report, 2004-2013, Partnership 2a



Year	Rate
04	21.8
05	17.1
06	17.2
07	11.4
08	14.6
09	11.9
10	11.9
11	8.8
12	10.8
13	16.9

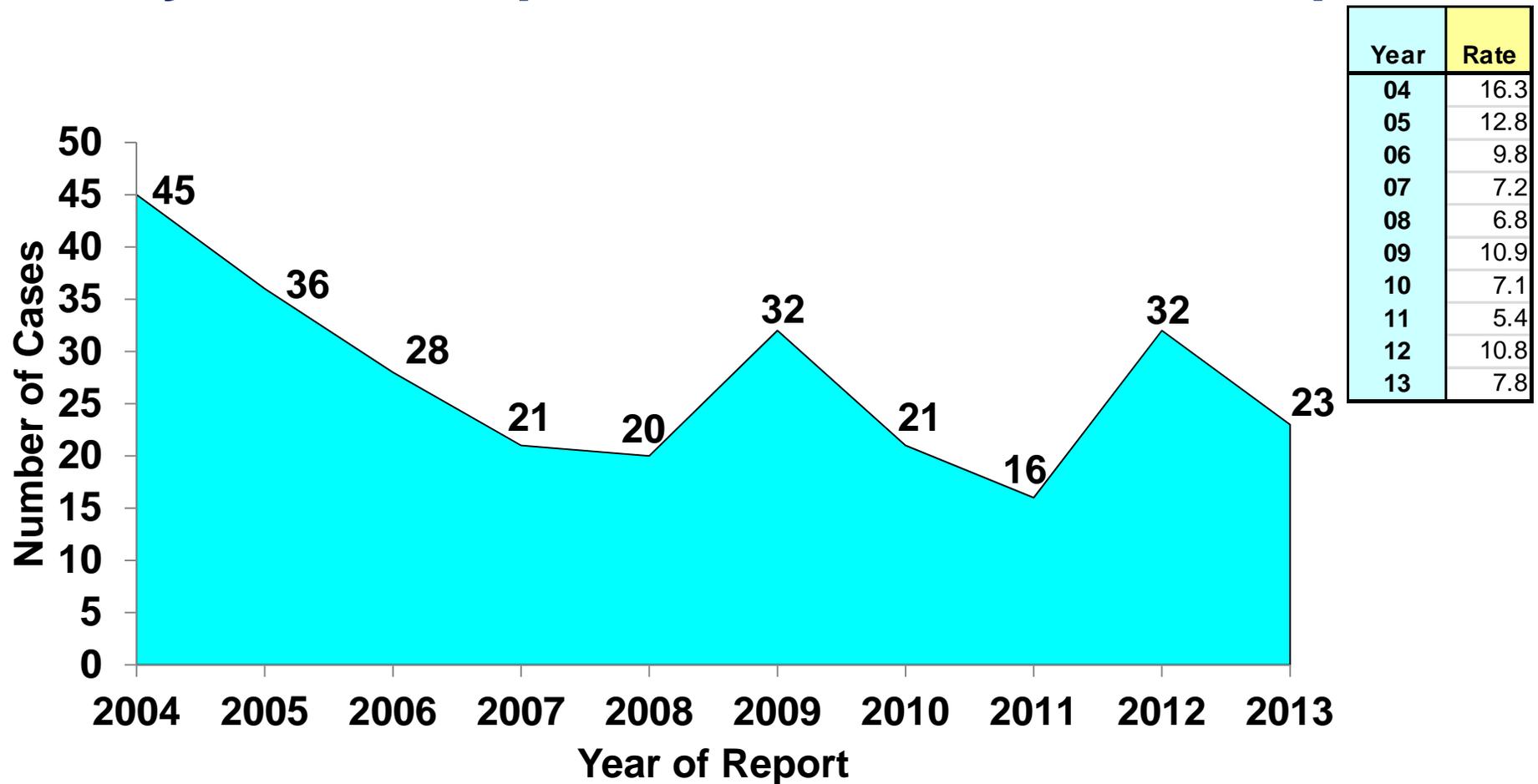
Note: Enhanced laboratory reporting (ELR) laws in 2006 and the expansion of ELR in 2007 led to an artificial peak in newly reported cases of HIV infection in 2008. This was followed by a general decline in reported cases through 2012. Another surge in the expansion of ELR in 2012 was followed by another increase in newly reported cases of HIV infection in 2013. These trends were observed across most race/sex/risk groups throughout the state.

*Source: Population estimates are provided by Florida CHARTS as of 06/03/2014. Rates are expressed as per 100,000 population.



AIDS Cases and Rates*

by Year of Report, 2004-2013, Partnership 2a

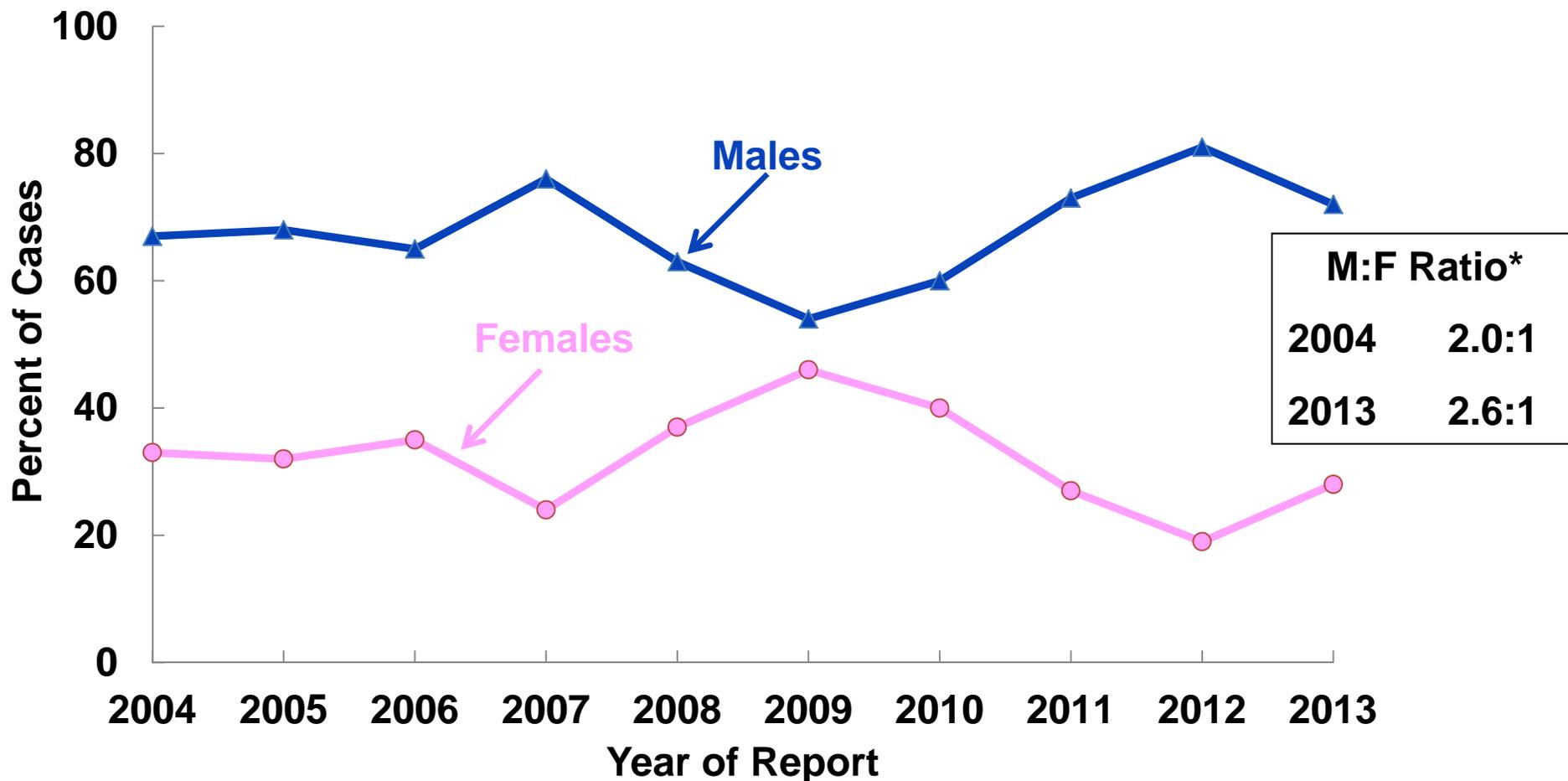


Electronic laboratory reporting delays in late 2007 decreased cases in that year. The expansion of electronic lab reporting increased the timeliness of reporting, which contributed to the artificial spike in 2009 followed by the artificial dip in 2010. Over the past ten years, the number of AIDS cases have decreased by 49%.

*Source: Population estimates are provided by Florida CHARTS as of 06/03/2014. Rates are expressed as per 100,000 population.



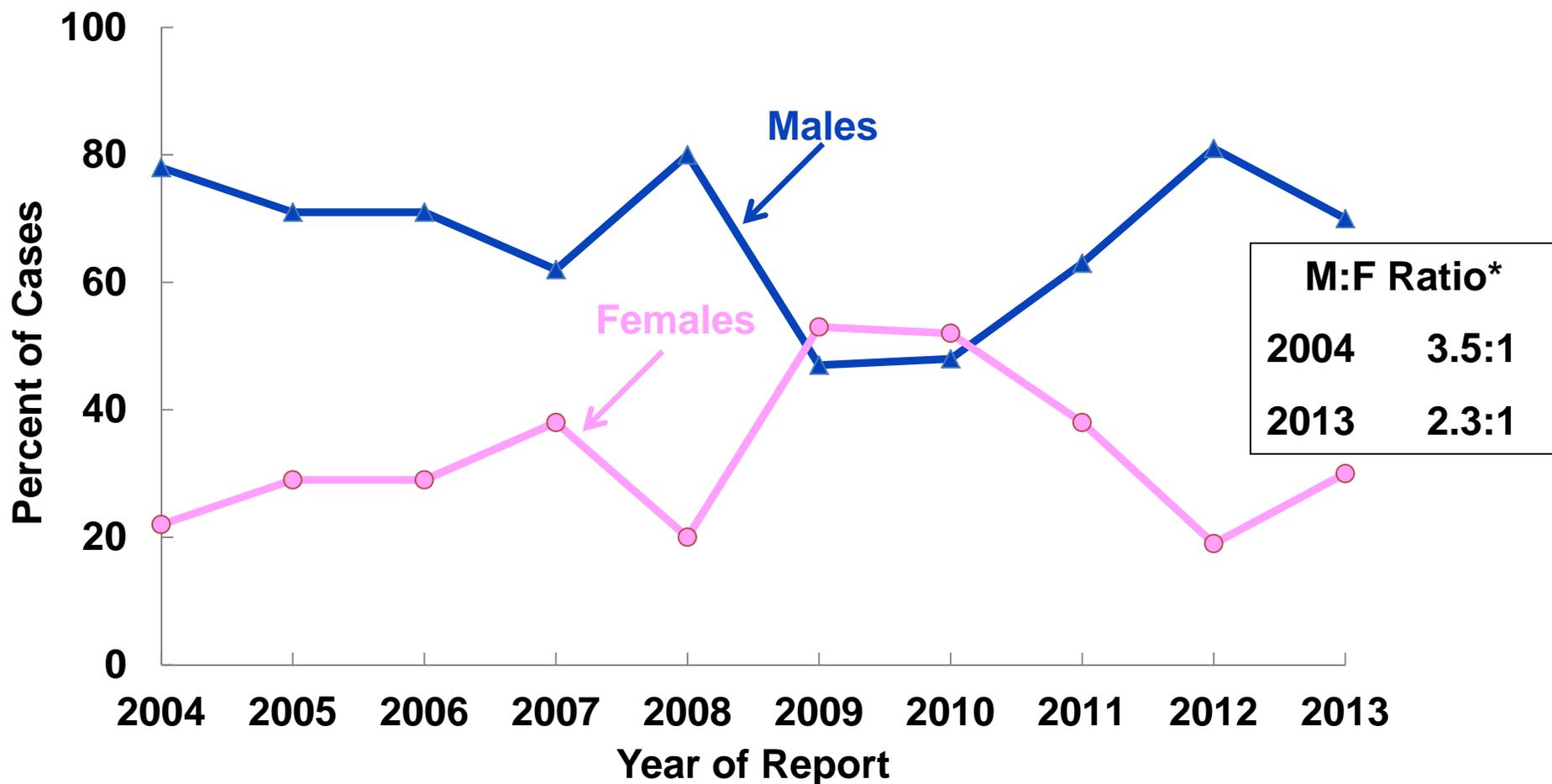
Adult HIV Infection Cases, by Sex and Year of Report, 2004-2013, Partnership 2a



Note: Recent trends in HIV transmission are best described by the HIV case data. The relative increases in male HIV Infection Cases might be attributed to proportional increases in HIV transmission among men who have sex with men (MSM), which may influence future AIDS trends. *The male-to-female ratio is the number of cases among males divided by the number of cases among females.



Adult AIDS Cases, by Sex and Year of Report, 2004-2013, Partnership 2a

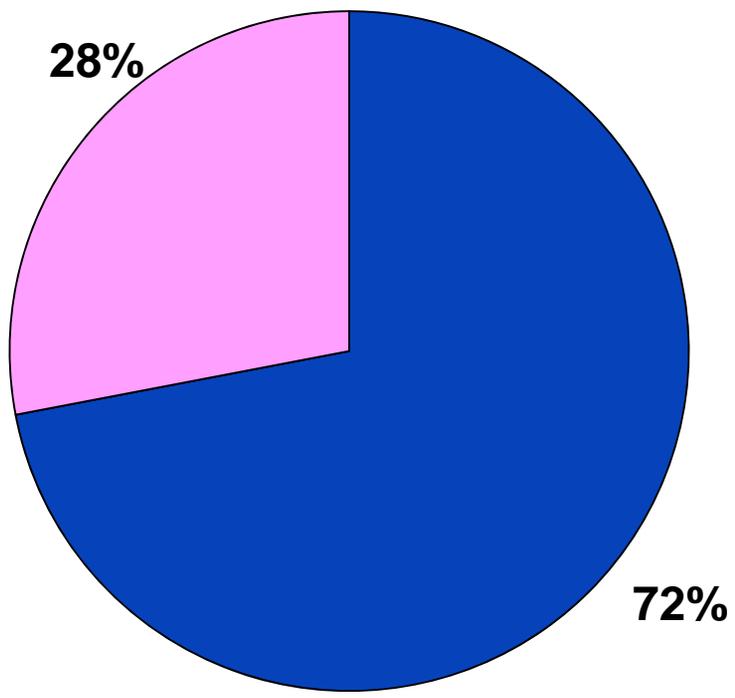


Note: AIDS cases tend to represent HIV transmission that occurred many years ago. The relative increases in male cases reflect the changing face of the AIDS epidemic over time. *The male-to-female ratio is the number of cases among males divided by the number of cases among females.

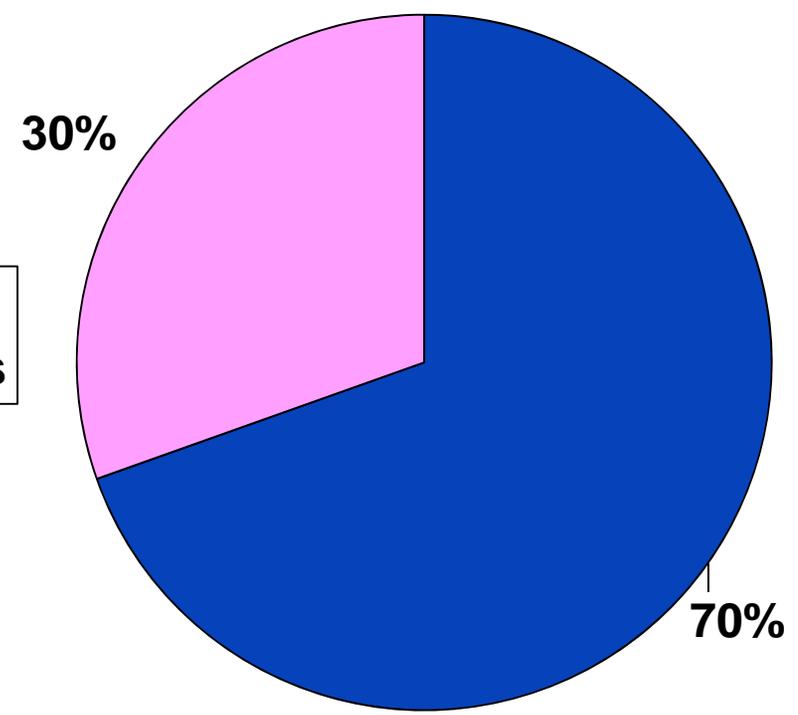


Adult AIDS and HIV Infection Cases by Sex, Reported in 2013, Partnership 2a

HIV Infection
N=50



AIDS
N=23

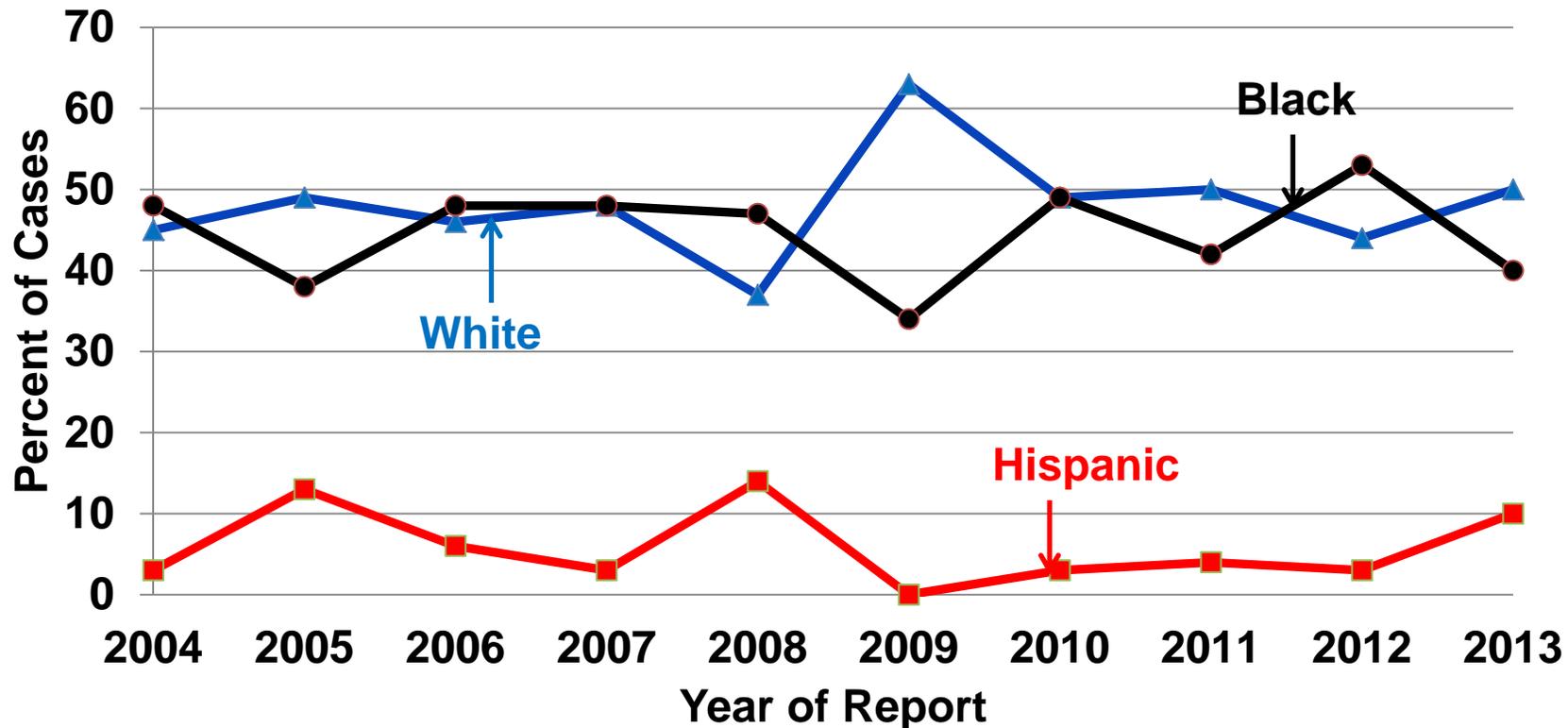


■ Males
■ Females

Note: Partnership 2a's Adult Population is: 52% Male and 48% Female.

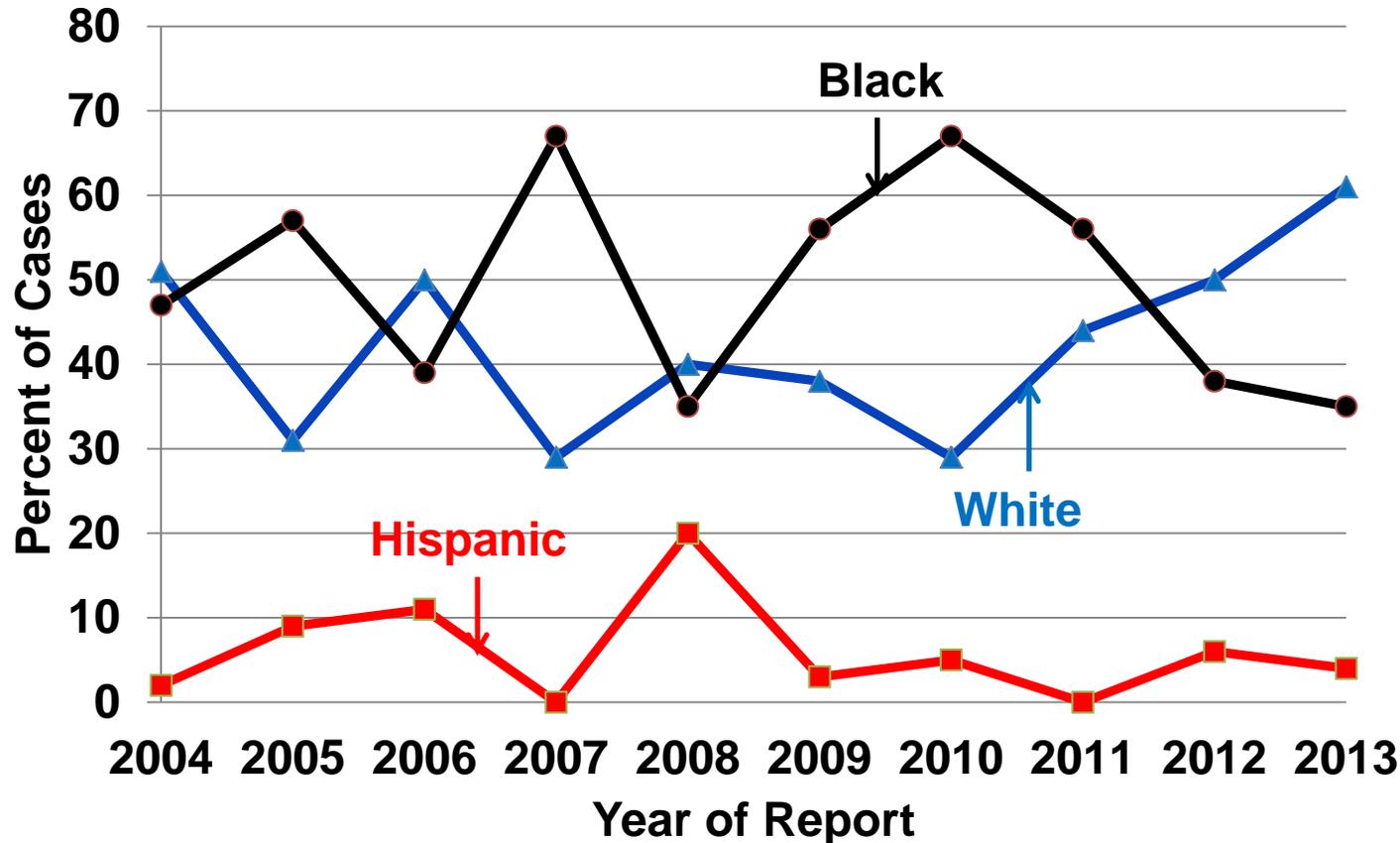


Adult HIV Infection Cases by Race/Ethnicity and Year of Report, 2004-2013, Partnership 2a



Note: HIV case reporting, implemented in mid-1997, reflects more recent trends in the epidemic with respect to the distribution of cases by race/ethnicity. Although over the past ten years, the proportion of black and white cases fluctuated over time, oftentimes crossing paths, the percentage of adult HIV cases among blacks decreased by 8 percentage points. In contrast, from 2004 to 2013, the proportion of HIV Infection cases among Hispanics and whites increased by 7 and 5 percentage points, respectively. Other races represent less than 4% of the cases and are not included.

Adult AIDS Cases by Race/Ethnicity and Year of Report, 2004-2013, Partnership 2a

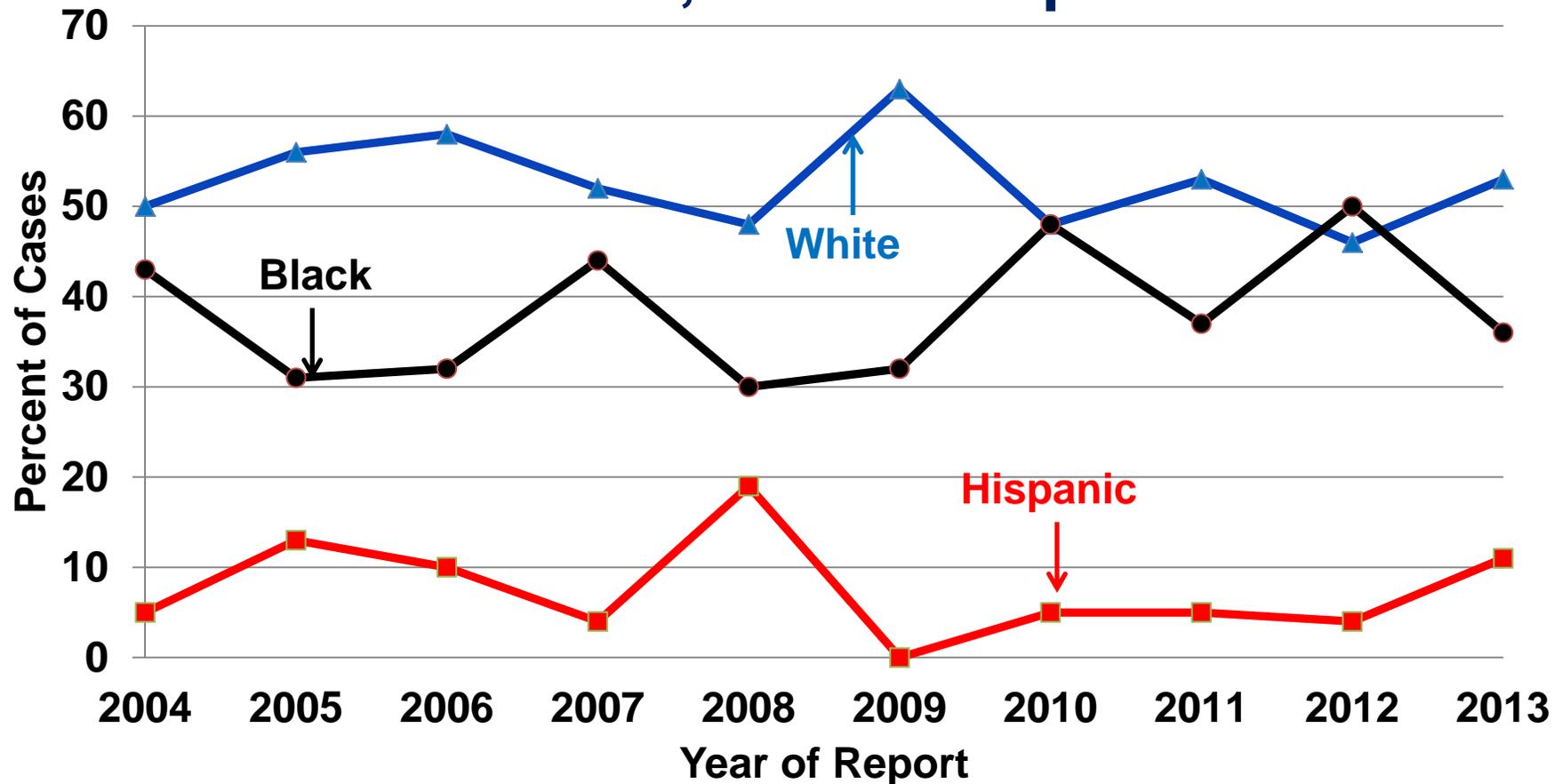


- Factors Affecting Disparities**
- Late diagnosis of HIV.
 - Access to/ acceptance of care.
 - Delayed prevention messages.
 - Stigma.
 - Non-HIV STD's in the community.
 - Prevalence of injection drug use.
 - Complex matrix of factors related to socioeconomic status

Note: In 2013, blacks accounted for 35% of adult AIDS cases, but only 14% of the population. Although the proportion of black and white cases fluctuated over time, oftentimes crossing paths, the percentage of adult AIDS cases among blacks decreased by 12 percentage points. Whereas cases among whites and Hispanics increased by 10 and 2 percentage points respectively over the past ten years. Other races represent less than 6% of the cases and are not included.



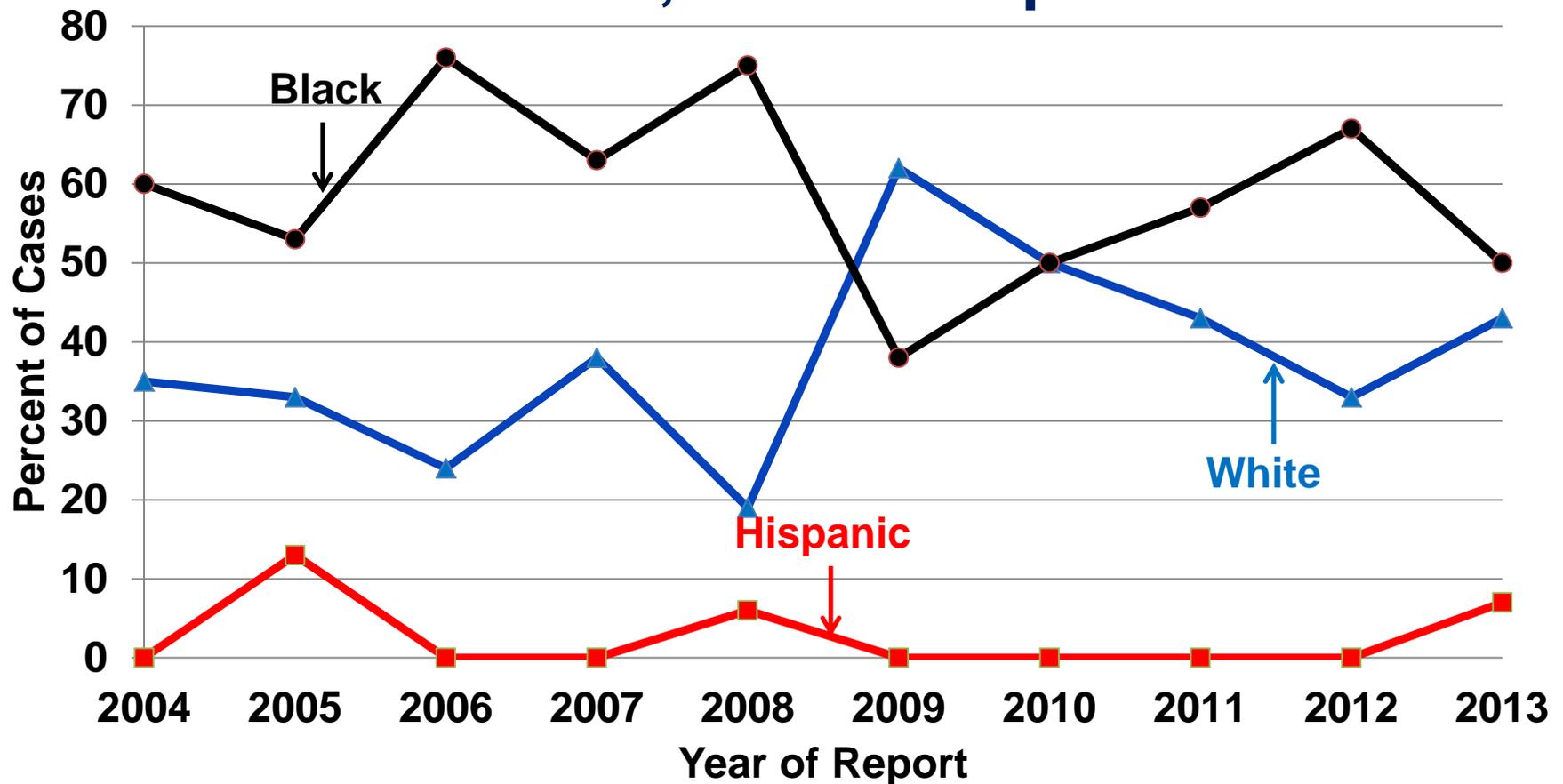
Adult Male HIV Infection Cases by Race/Ethnicity and Year of Report, 2004-2013, Partnership 2a



Note: The proportion of male HIV Infection cases among whites, blacks and Hispanics has shifted up and down between 2004 and 2013. For the past ten years, white men averaged more than 50% of the cases, representing the majority of male HIV Infection cases for most of the years. Other races represent less than 5% of the cases and are not included.

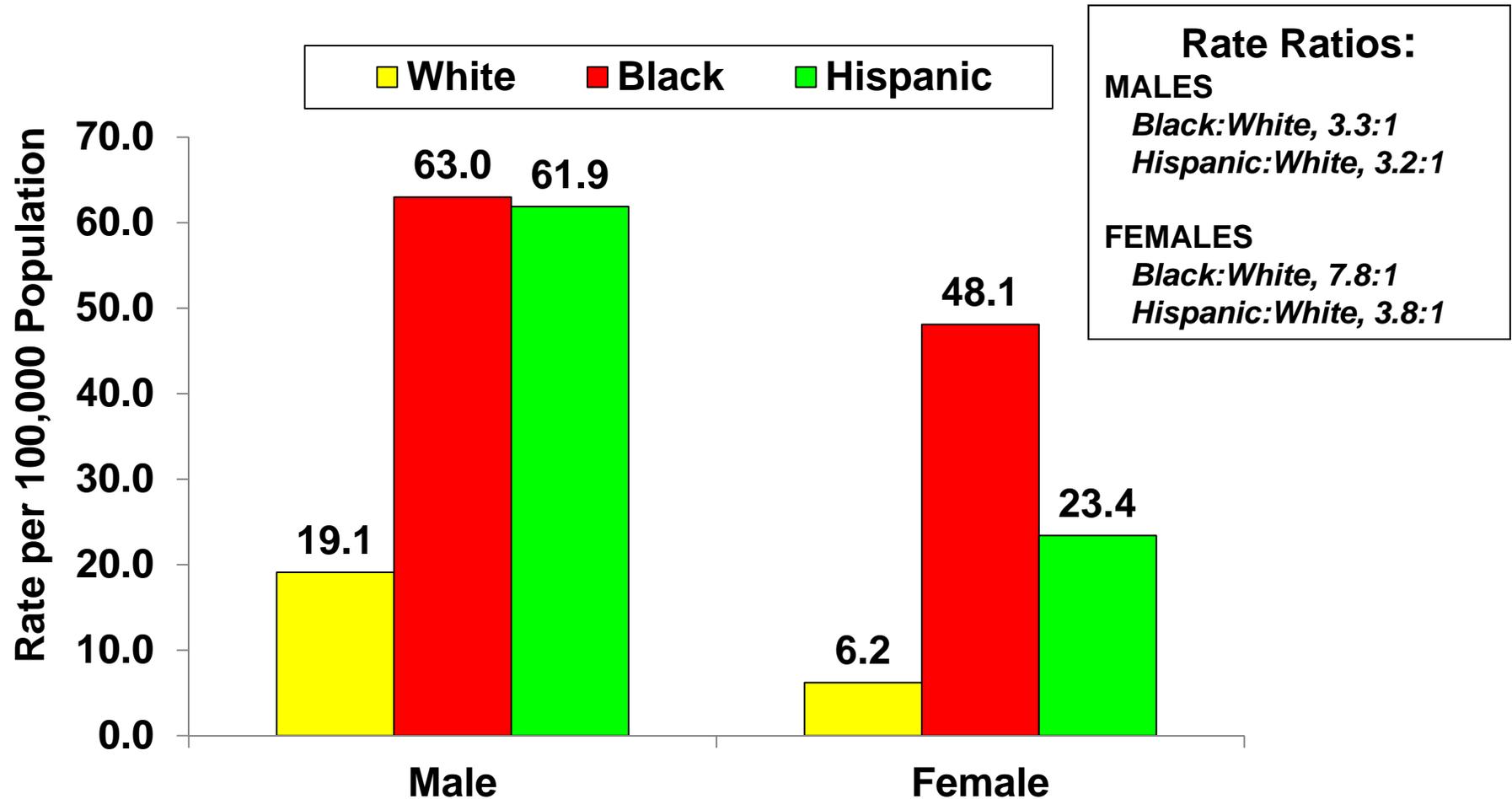


Adult Female HIV Infection Cases by Race/Ethnicity and Year of Report, 2004-2013, Partnership 2a



Note: HIV case disparities are more evident among women than men. For the past ten years, black women represented 50% or more of the cases for most years. From 2004 to 2013, the proportion of HIV infection cases among black females decreased by 10 percentage points, whereas cases among white females increased by 8 percentage points, while cases among Hispanics remained relatively leveled. Other races represent less than 5% of the cases and are not included.

Adult HIV Infection Case Rates* by Sex and Race/Ethnicity, Reported in 2013, Partnership 2a

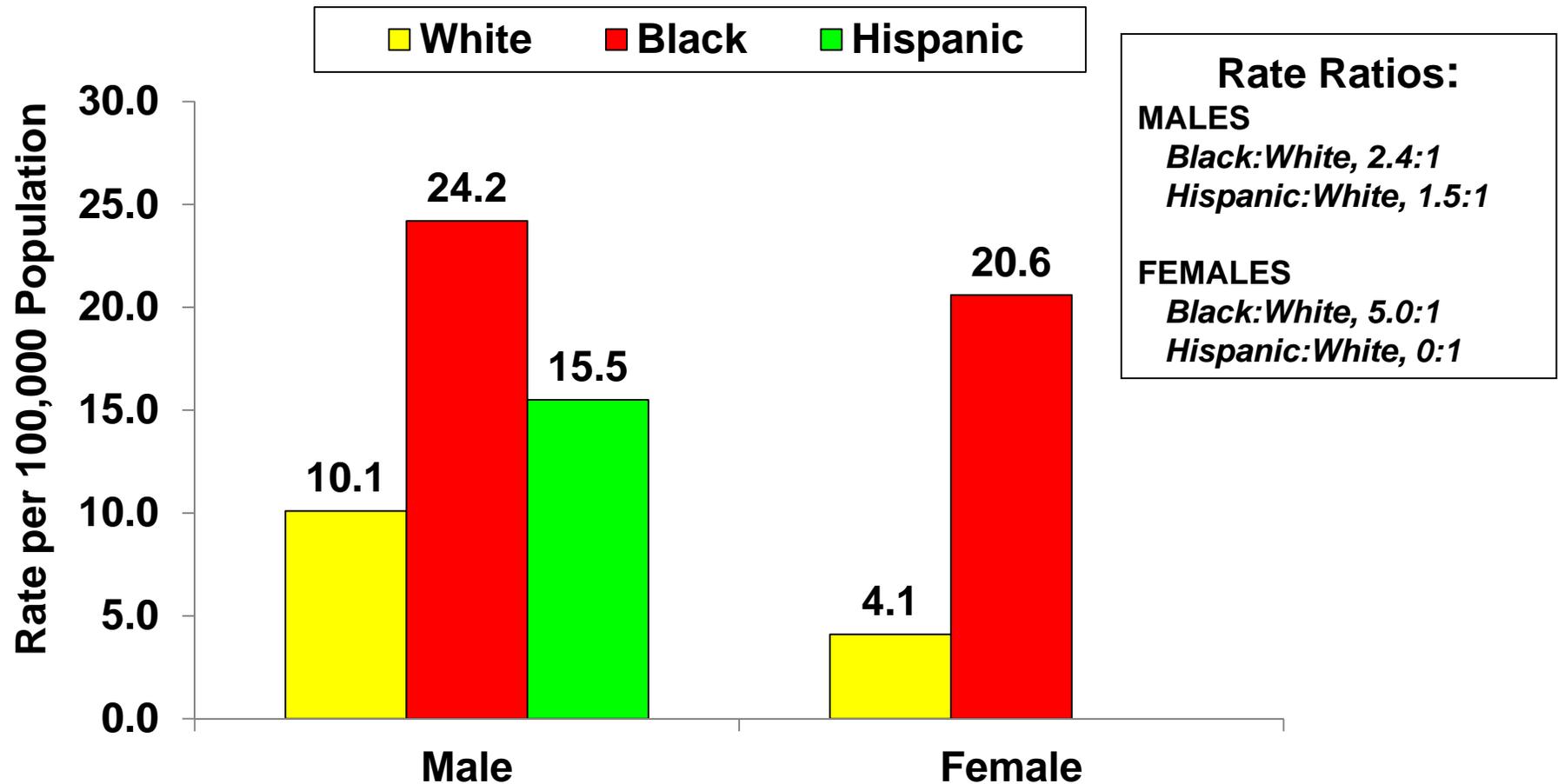


Note: Among black males, the HIV infection case rate is 3 times higher than the rate among white males. Among black females, the HIV case rate is nearly 8 times higher than the rate among white females. The HIV case rate is higher among Hispanic males and females compared to their white counterparts.

*Source: Population estimates are provided by Florida CHARTS as of 06/03/2014.



Adult AIDS Case Rates* by Sex and Race/Ethnicity, Reported in 2013, Partnership 2a



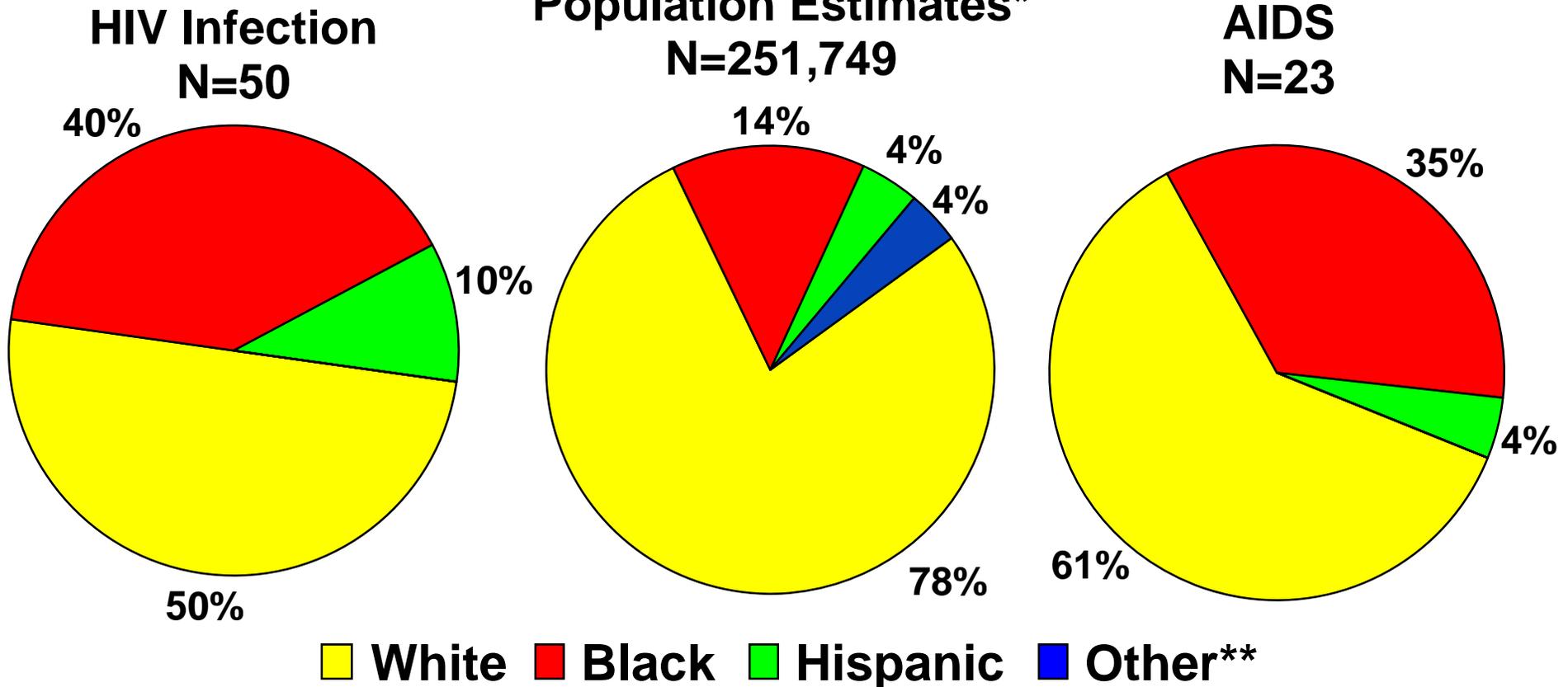
Note: Among black males, the AIDS case rate is 2 times higher than the rate among white males. Similarly, among black females, the AIDS case rate is 5 times higher than the rate among white females. Hispanic males have an AIDS case rate that is nearly 2 times higher than the rate among white males.

*Source: 2013 Partnership 2a Population estimates are provided by Florida CHARTS as of 06/03/2014



Adult HIV and AIDS Cases Reported in 2013 and Population Data, by Race/Ethnicity, Partnership 2a

2013 Partnership 2a
Population Estimates*
N=251,749



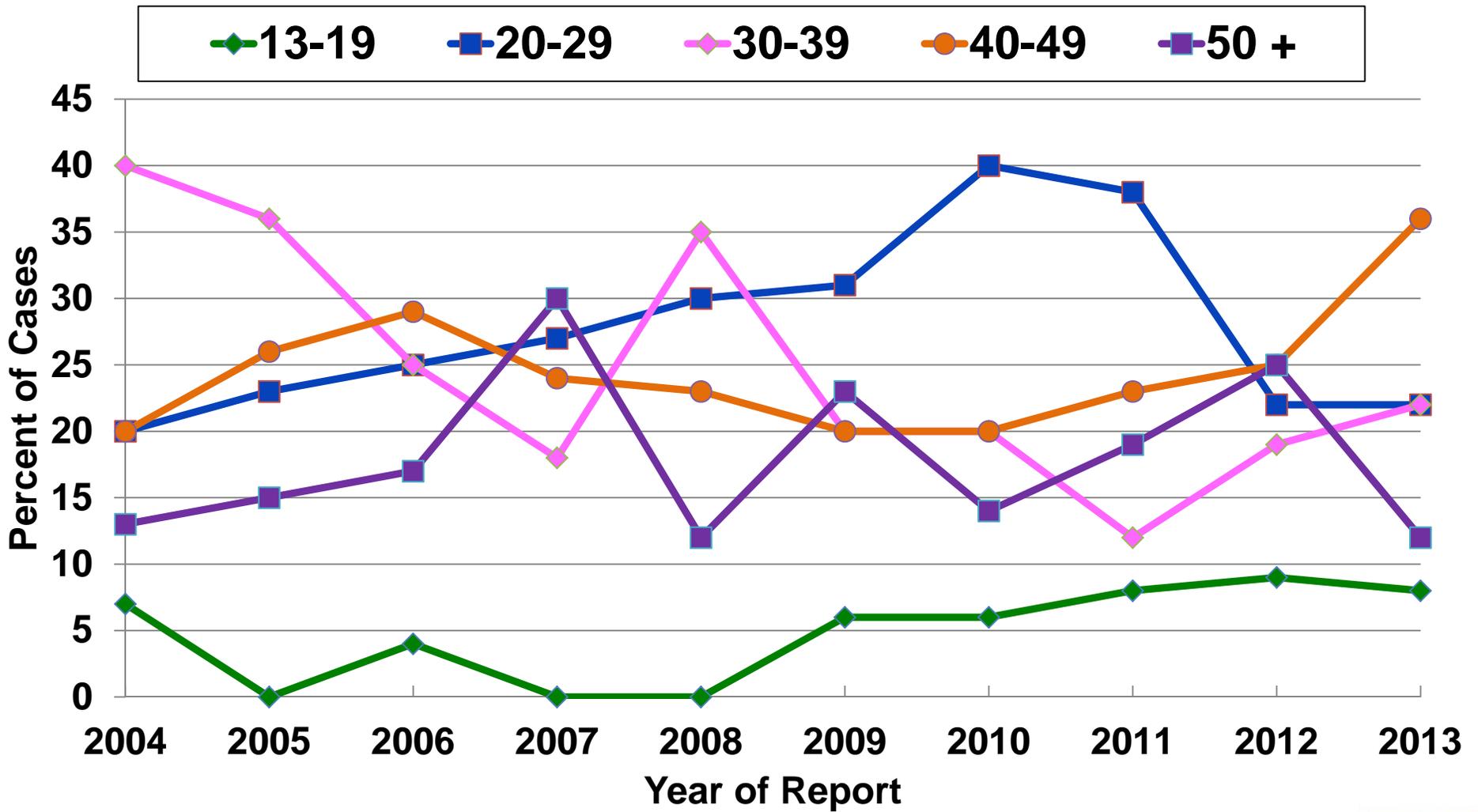
Note: In this snapshot for 2013, blacks are over-represented among the HIV and AIDS Cases, accounting for 40% of adult HIV cases and 35% of adult AIDS cases, but only 14% of the adult population. A group is disproportionately impacted to the extent that the percentage of cases exceeds the percentage of the population.

*Source: Population estimates are provided by Florida CHARTS as of 06/03/2014.

**Other includes Asian/Pacific Islanders, Native Alaskans/American Indians and mixed races.



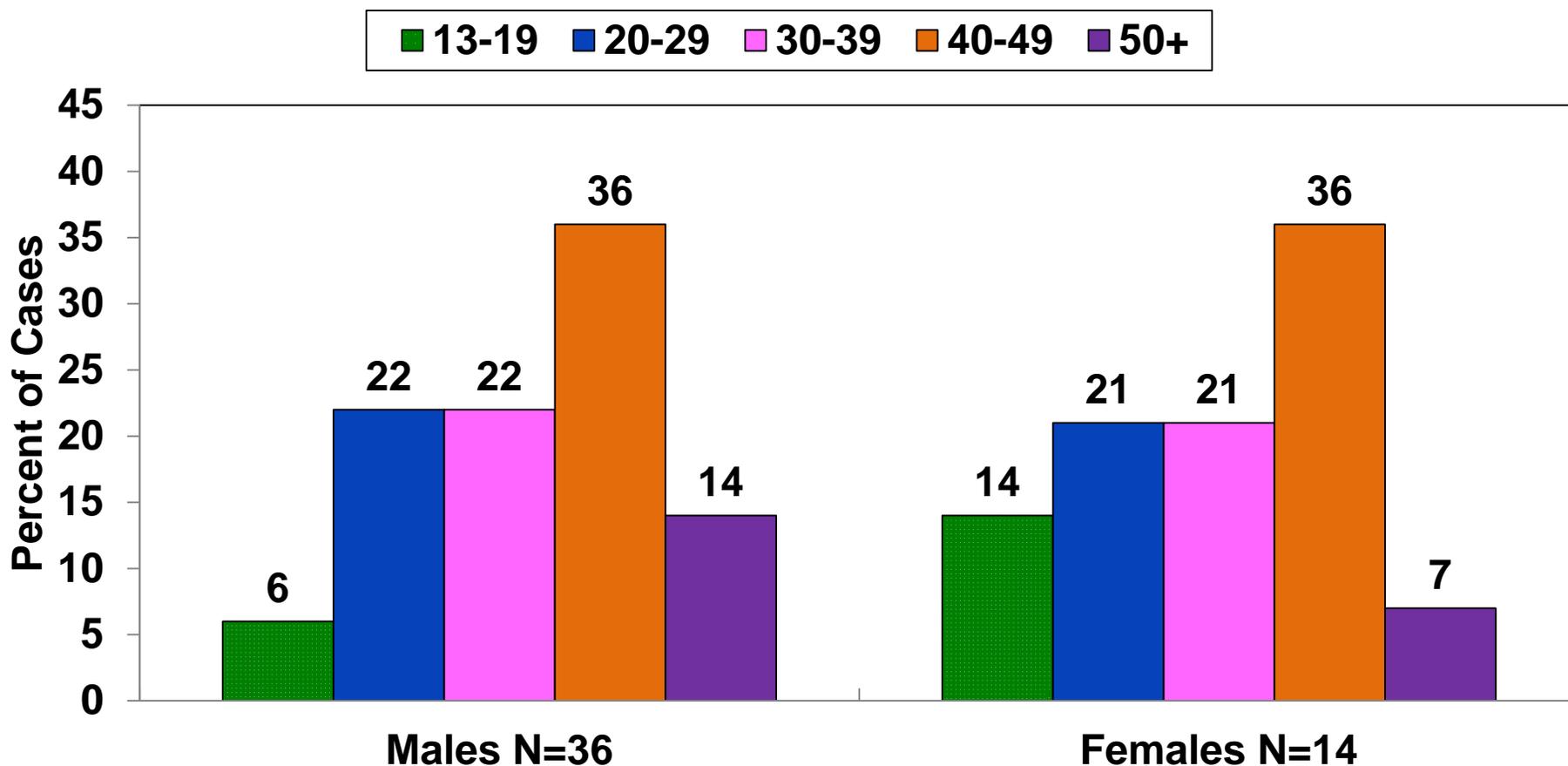
Adult HIV Infection Cases, by Age Group at Diagnosis, and Year of Report, 2004–2013, Partnership 2a



Note: From 2004 to 2013, adult HIV infection cases among those aged 40-49 increased by 16 percentage points.



Adult HIV Infection Cases, by Sex and Age Group at Diagnosis, Reported in 2013, Partnership 2a

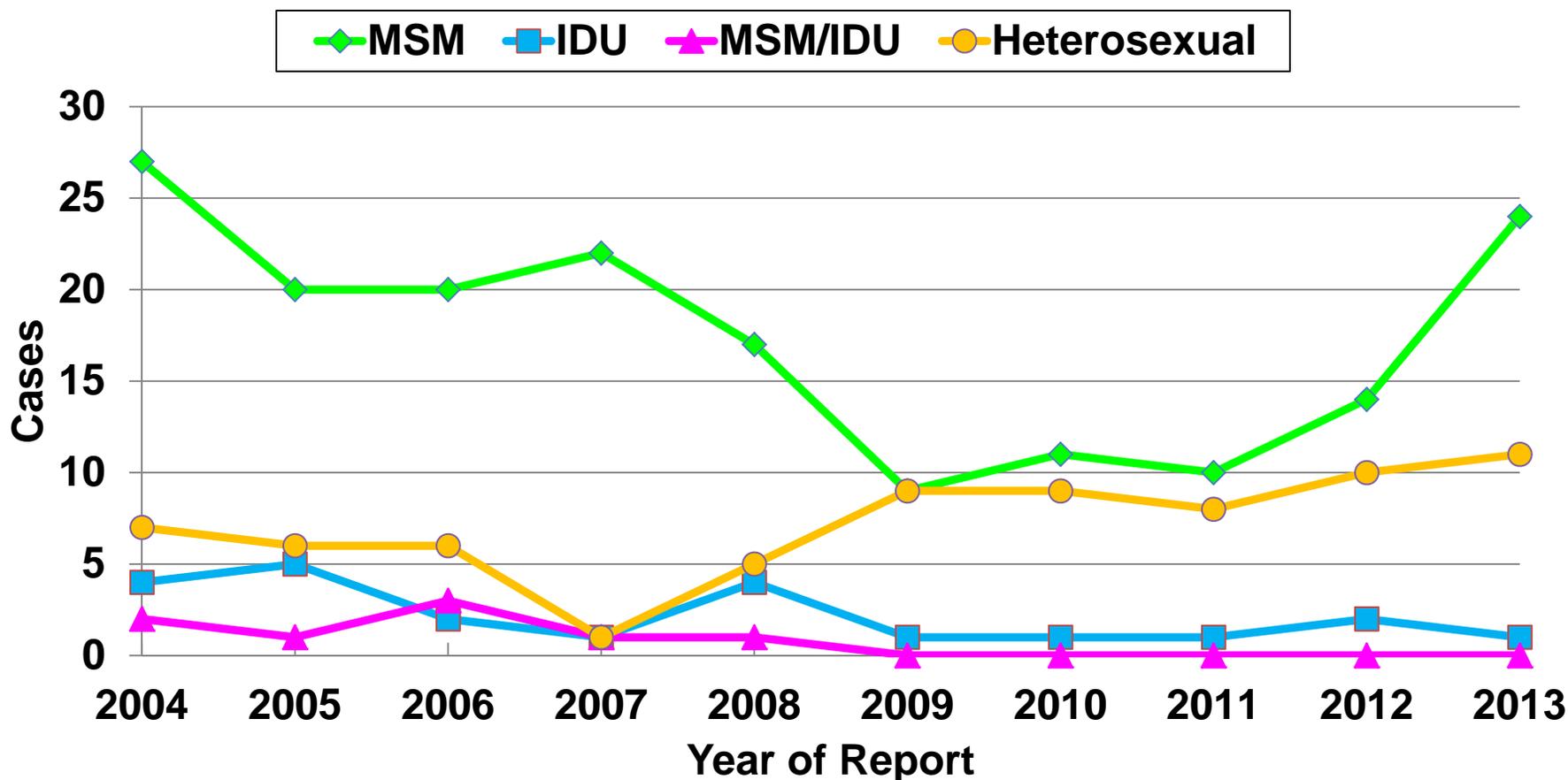


Note: HIV infection cases tend to reflect more recent transmission than AIDS cases, and thus present a more current picture of the epidemic. With regard to the age group with the highest percent of HIV infection cases, recent estimates show that among males, 36% of HIV infection cases occur among those aged 40-49, similarly among females, 36% of HIV infection cases occur among those aged 40-49.

Definitions of Mode of Exposure Categories

- ◆ **MSM** = Men who have sex with men
- ◆ **IDU** = Injection Drug User
- ◆ **MSM/IDU** = Men who have sex with men & Injection Drug User
- ◆ **Heterosexual** = Heterosexual contact with person with HIV/AIDS or known HIV risk
- ◆ **OTHER** = includes hemophilia, transfusion, perinatal, other pediatric risks and other confirmed risks.
- ◆ **NIR** = Cases reported with No Identified Risk
- ◆ **Redistribution of NIRs** = This illustrates the effect of statistically assigning (redistributing) the NIRs to recognized exposure (risk) categories by applying the proportions of historically reclassified NIRs to the unresolved NIRs.

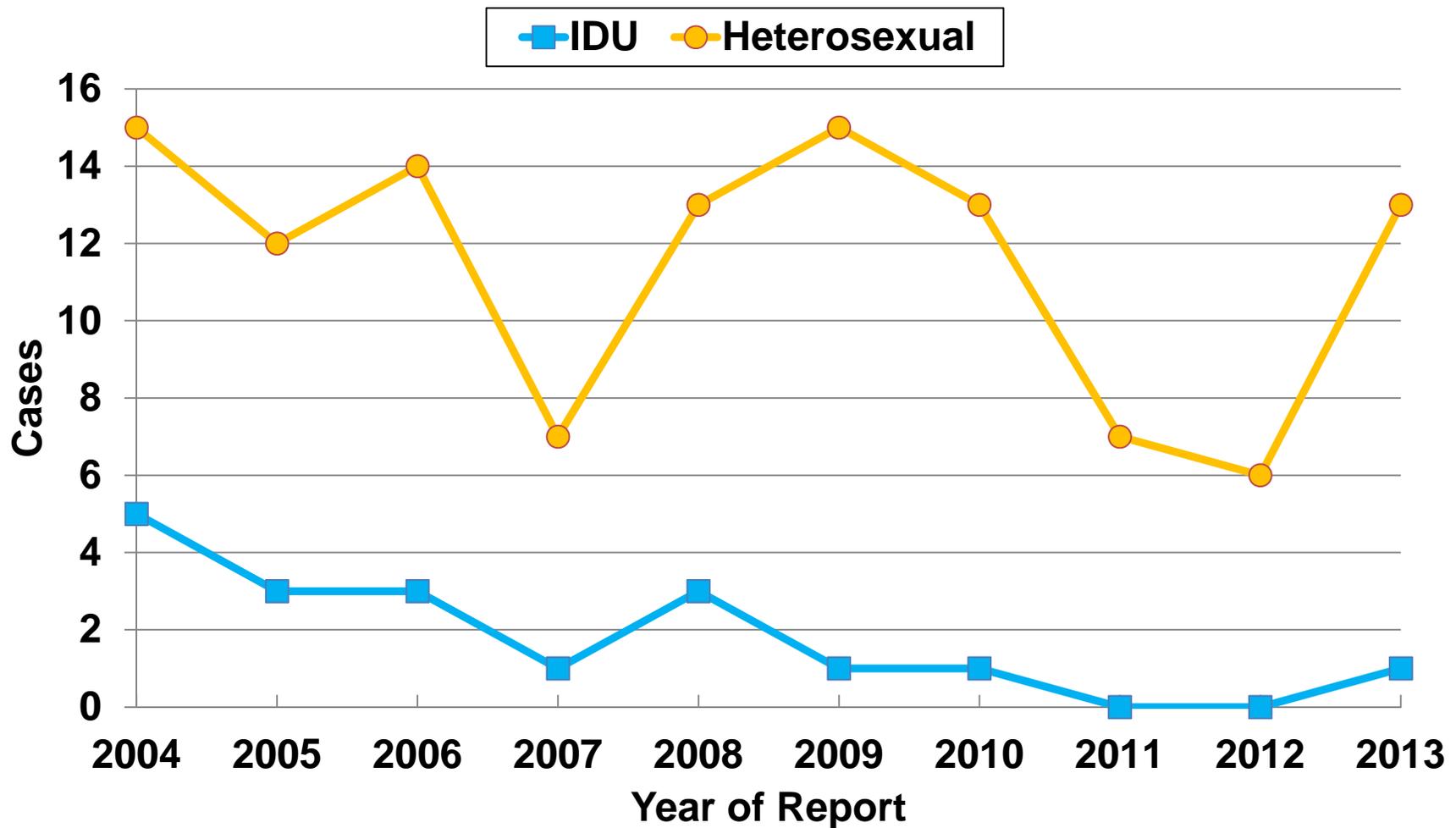
Adult Male HIV Infection Cases, by Mode of Exposure and Year of Report, 2004–2013, Partnership 2a



Note: NIRs redistributed. Among male HIV cases in Partnership 2a, men who have sex with men (MSM) remains as the primary mode of exposure for most years.



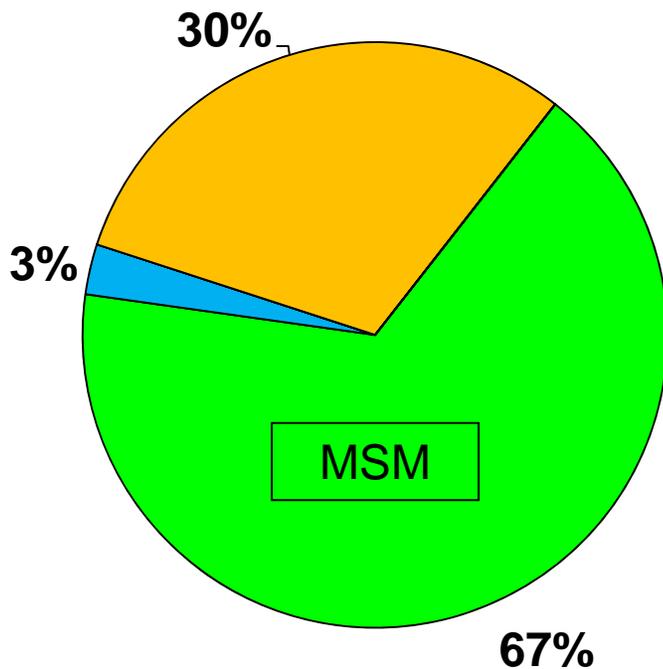
Adult Female HIV Infection Cases by Exposure Category and Year of Report, 2004-2013, Partnership 2a



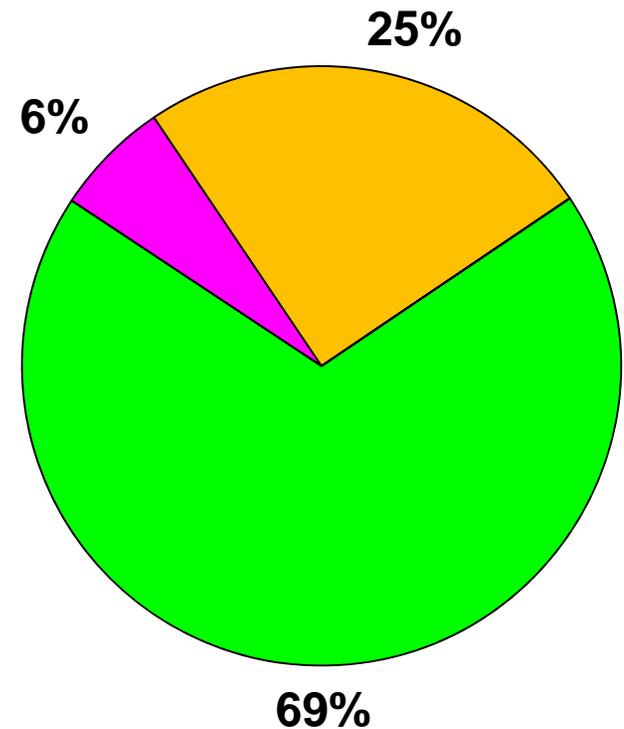
Note: NIRs redistributed. The heterosexual risk continues to be the dominant mode of exposure among females.

Adult Male HIV Infection and AIDS Cases, by Mode of Exposure, Reported in 2013, Partnership 2a

HIV Infection
N=36



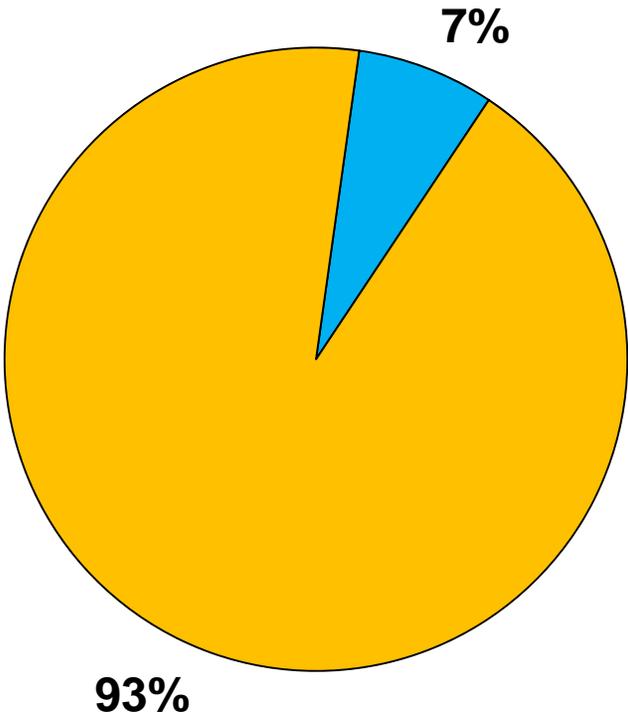
AIDS
N=16



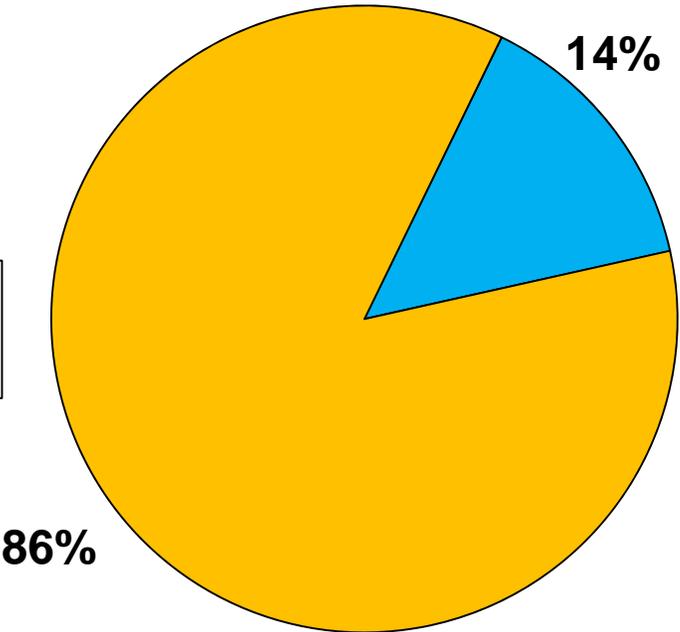
Note: NIRs redistributed. Among the male HIV infection and AIDS cases reported in 2013, men who have sex with men (MSM) was the most common risk factor (67% for HIV and 69% for AIDS), followed by cases with a heterosexual risk (30% for HIV and 25% for AIDS).

Adult Female HIV Infection and AIDS Cases, by Mode of Exposure, Reported in 2013, Partnership 2a

HIV Infection
N=14



AIDS
N=7



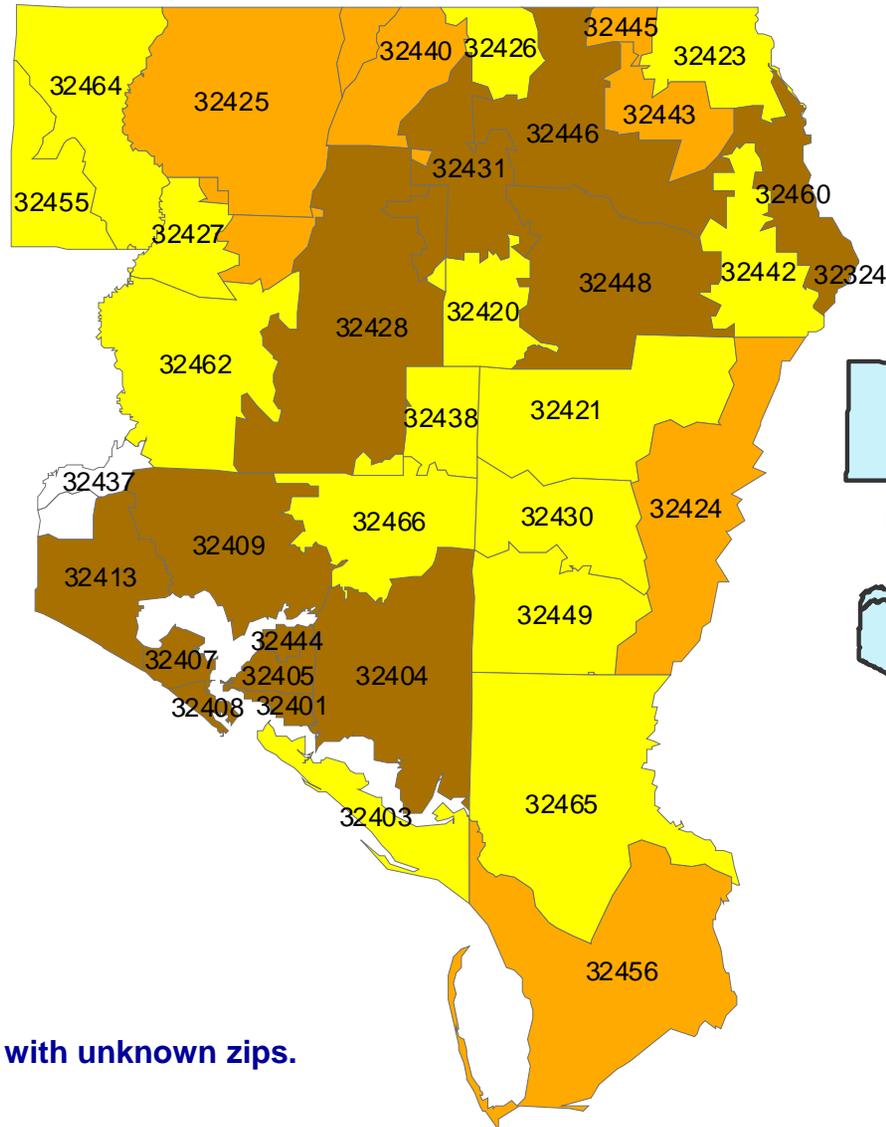
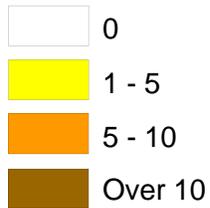
Note: NIRs redistributed. Among the female HIV infection and AIDS cases reported for 2013, heterosexual contact was the highest risk (93% for HIV and 86% for AIDS).



Cases Living with HIV Disease

Adults Living with HIV Disease By Zip Code, Reported through 2013, Partnership 2a

Total Adult Living HIV/AIDS Cases



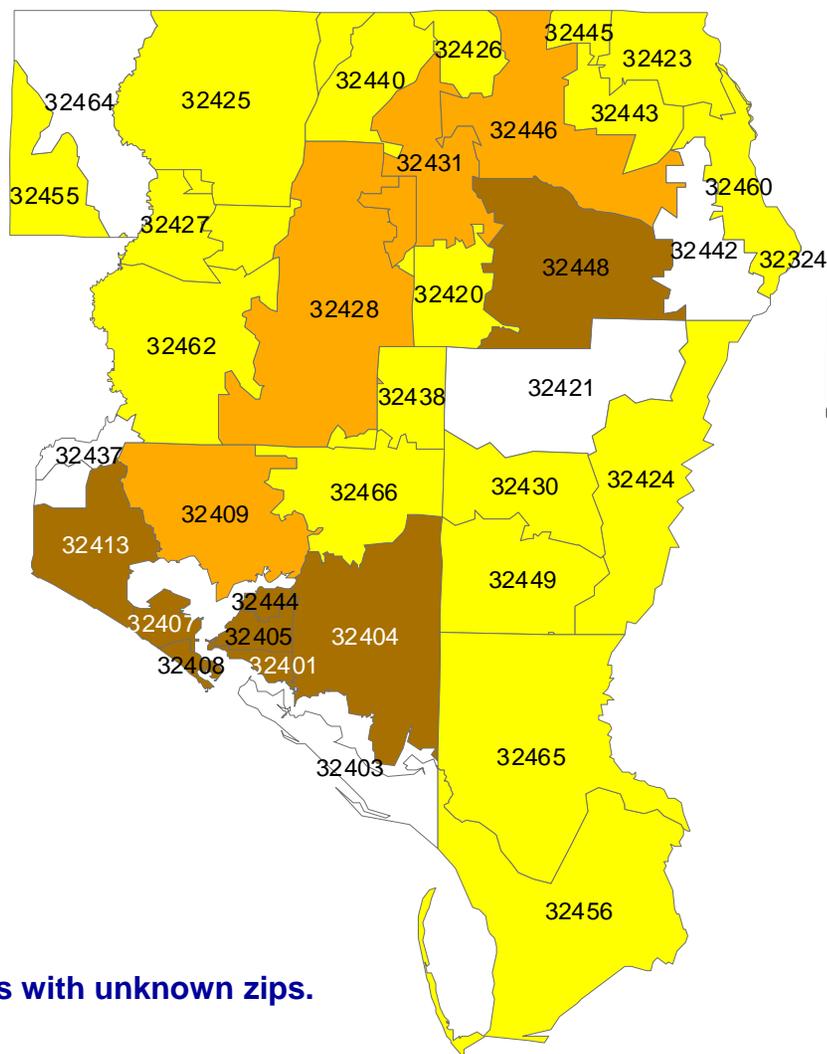
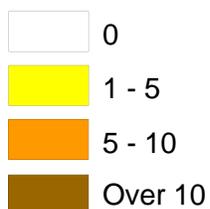
N= 589

NIRs are not redistributed.
Excludes DOC, homeless, and cases with unknown zips.
Data as of 04/07/2014



Men who have Sex with Men (MSM)* Living with HIV Disease By Zip Code, Reported through 2013, Partnership 2a

Presumed Living MSM HIV/AIDS Cases



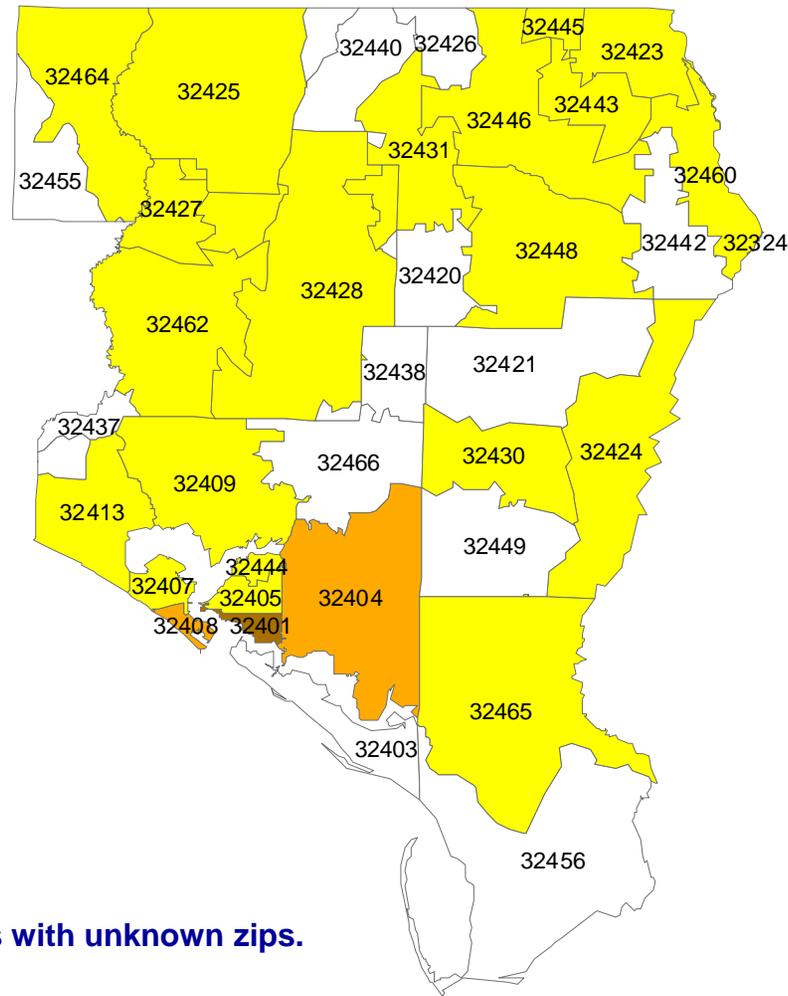
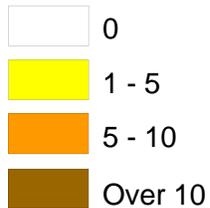
N=273

NIRs are not redistributed.
Excludes DOC, homeless, and cases with unknown zips.
*Includes MSM/IDU cases.
Data as of 04/07/2014



Injection Drug Users (IDUs)* Living with HIV Disease By Zip Code, Reported through 2013, Partnership 2a

**Presumed Living
IDU HIV/AIDS Cases**

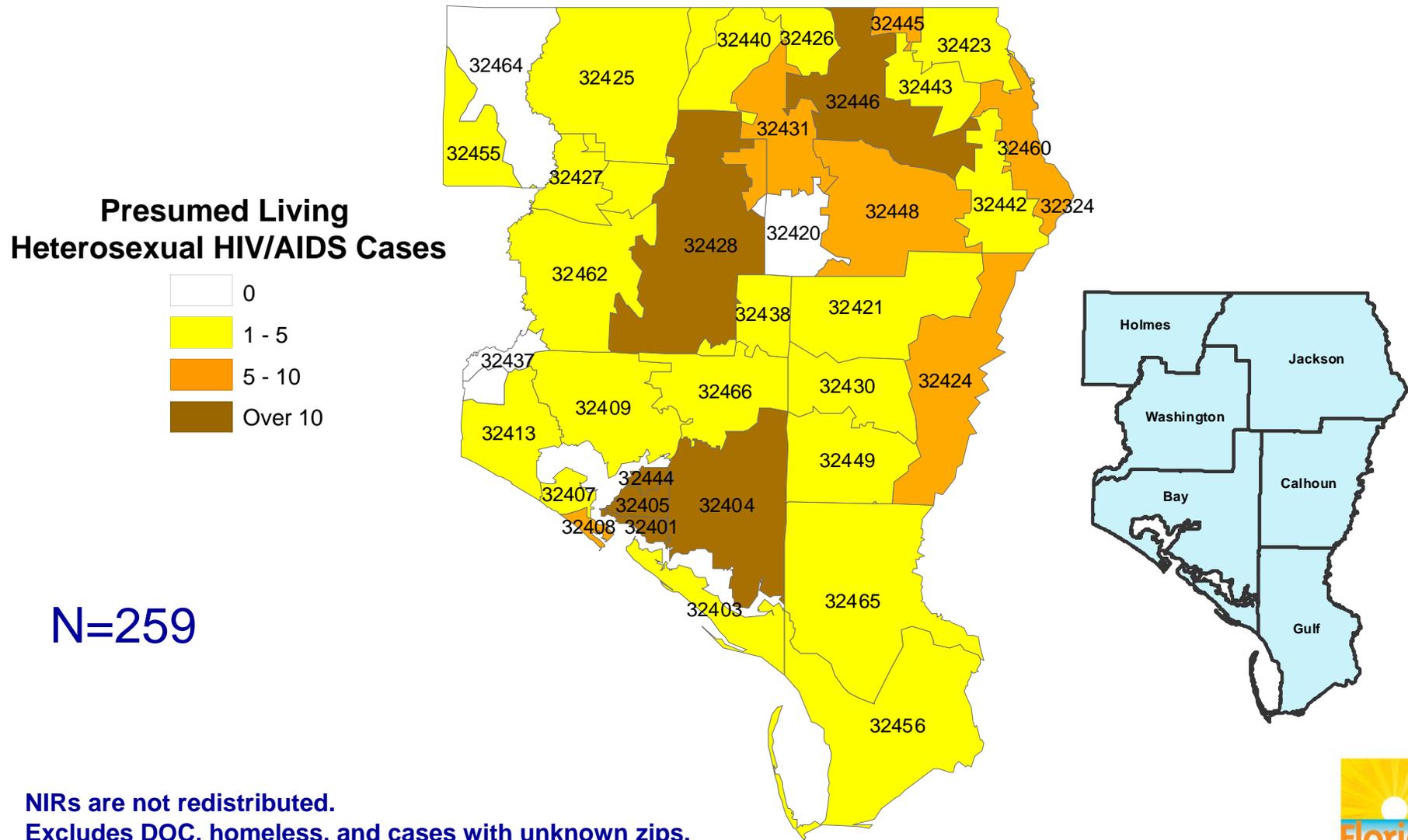


N=78

**NIRs are not redistributed.
Excludes DOC, homeless, and cases with unknown zips.
*Includes MSM/IDU cases.
Data as of 04/07/2014**



Adult Heterosexuals Living with HIV Disease By Zip Code, Reported through 2013, Partnership 2a



NIRs are not redistributed.
Excludes DOC, homeless, and cases with unknown zips.
Data as of 04/07/2014

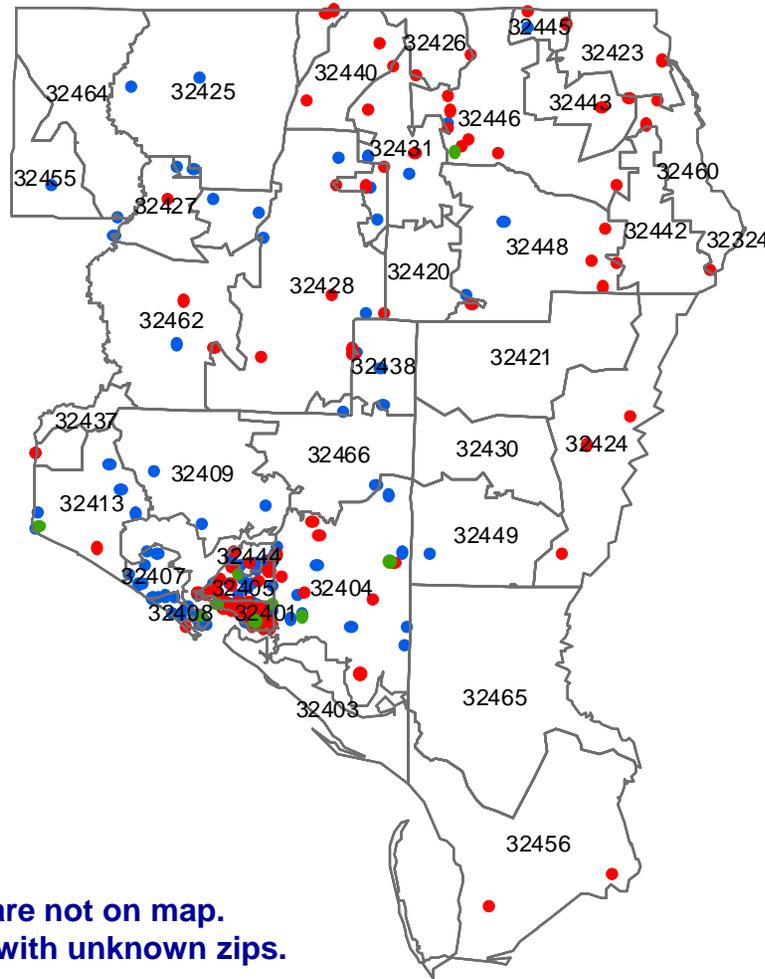


Adults Living with HIV Disease By Zip Code and Race/Ethnicity, Reported through 2013, Partnership 2a

1 Dot = 3 cases
Dots are randomly
placed within zip codes.

- Hispanic
- Black, not-Hispanic
- White, not-Hispanic

N=577



Total includes all races, some which are not on map.
Excludes DOC, homeless, and cases with unknown zips.
Data as of 04/07/2014

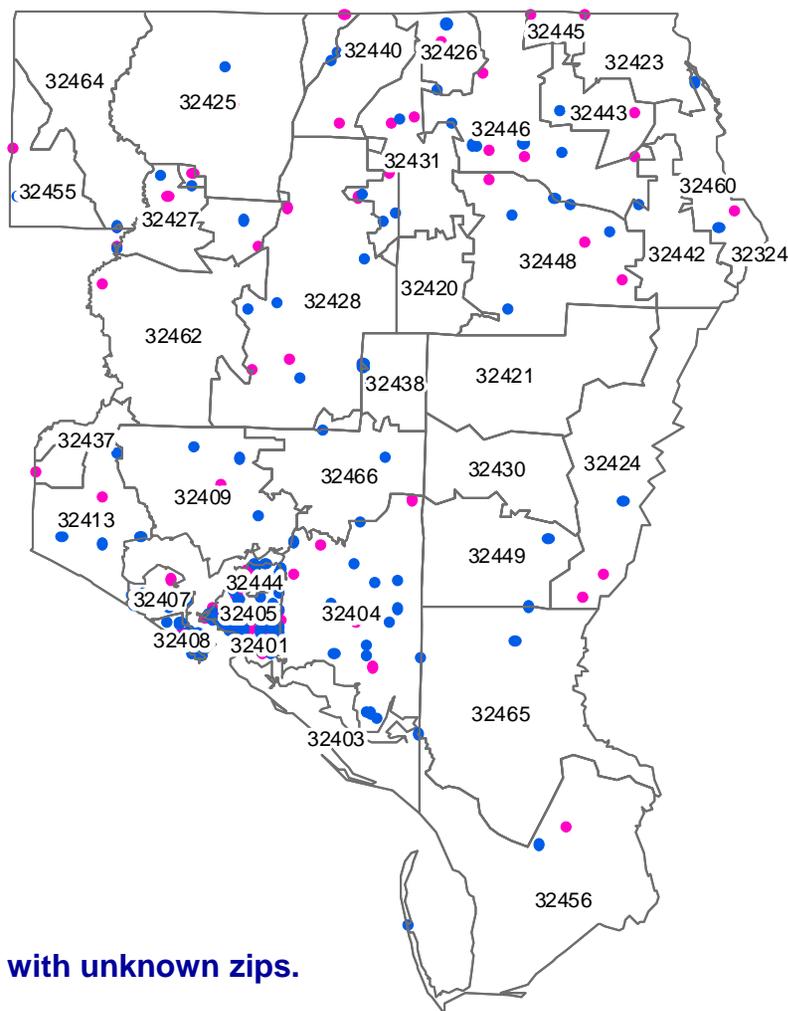


Adults Living with HIV Disease By Zip Code and Sex, Reported through 2013, Partnership 2a

1 Dot = 3 cases
Dots are randomly
placed within zip codes.

- Male
- Female

N=589



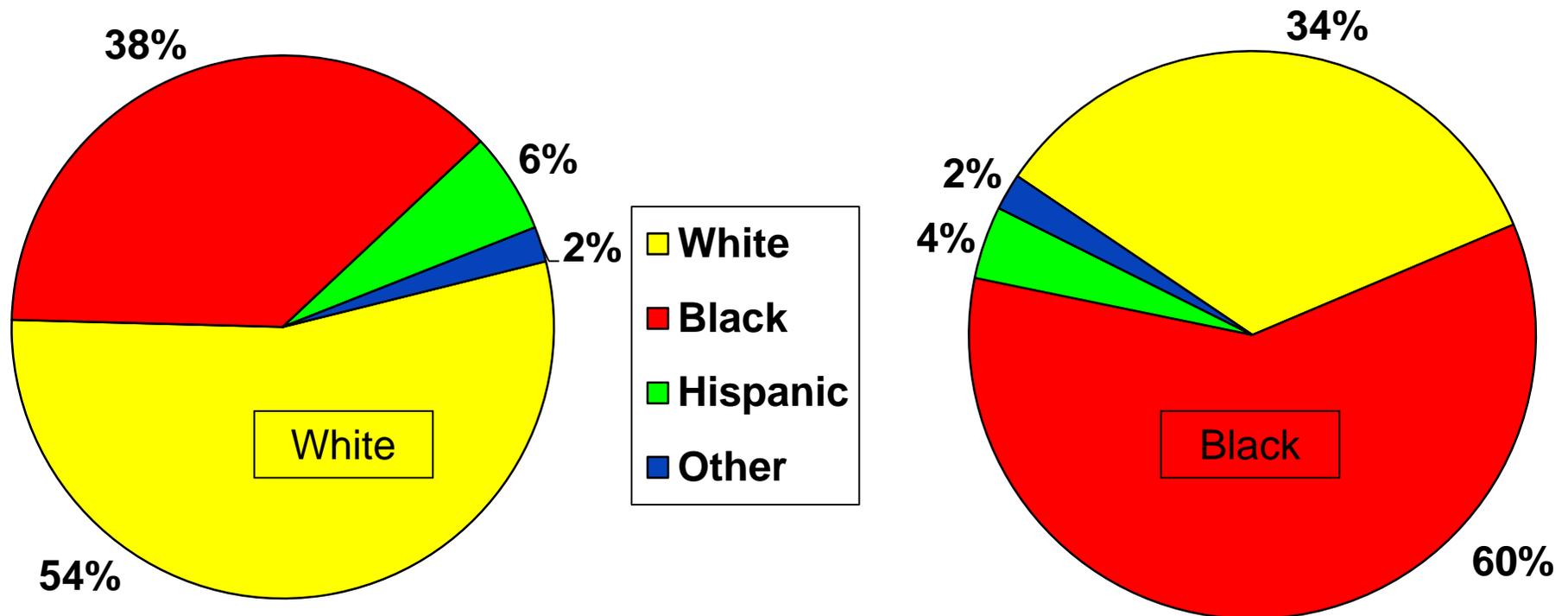
Excludes DOC, homeless, and cases with unknown zips.
Data as of 04/07/2014



Adults Living with HIV Disease, by Sex and Race/Ethnicity Reported through 2013, Partnership 2a

**Males
N=383**

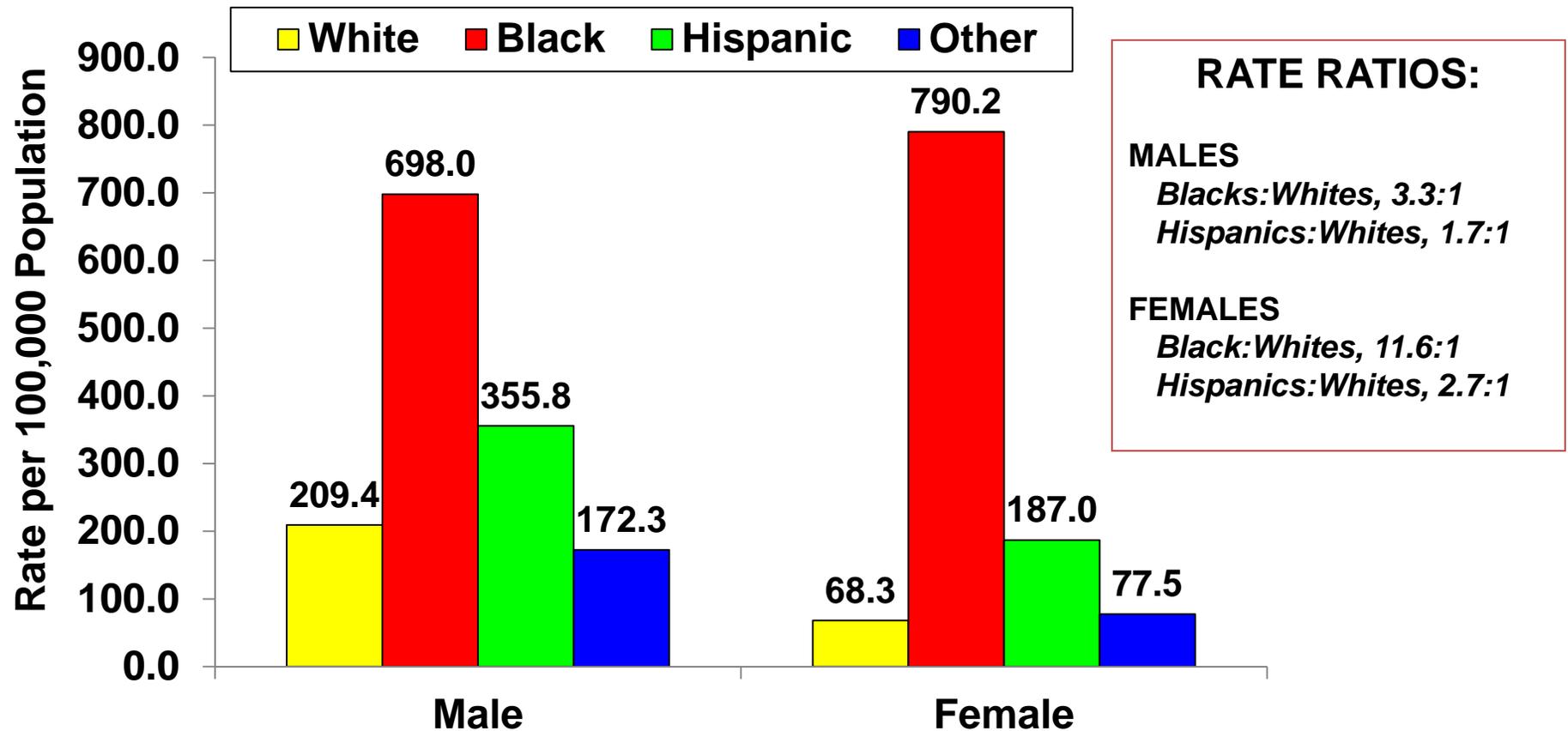
**Females
N=193**



Note: Among adult males living with HIV disease, whites represent the race most affected (54%). Among adult females, blacks represent the race most affected (60%).
*Other includes Asian/Pacific Islanders, Native Alaskans/American Indians and Multi-racial individuals.



Case Rates* of Adults Living with HIV Disease, by Sex and Race/Ethnicity, Reported through 2013, Partnership 2a



Note: Among black males living with HIV disease reported through 2013, the case rate is 3 times higher than the rate among white males. Among black females living with HIV disease, the case rate is nearly 12 times higher than the rate among white females. Hispanic male and female rates are higher than the rates among their white counterparts. Data excludes Department of Corrections cases.

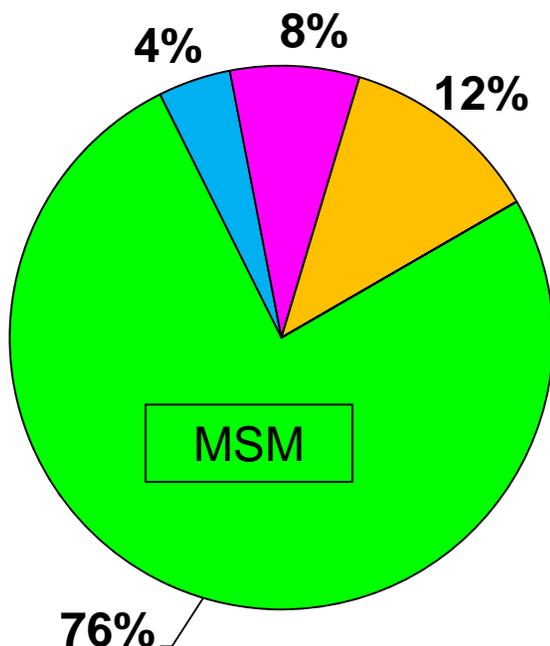
*Source: Population estimates are provided by Florida CHARTS

**Other includes Asian/Pacific Islanders, Native Alaskans/American Indians and Multi-racial individuals.

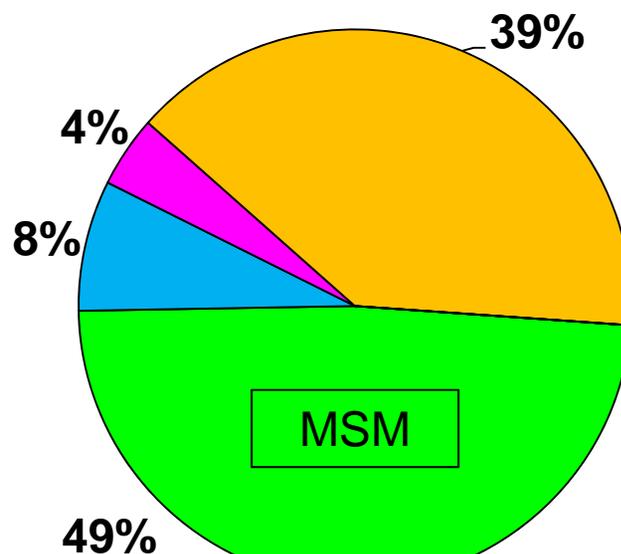


Adult Males Living with HIV Disease by Race/Ethnicity and Mode of Exposure Reported through 2013, Partnership 2a

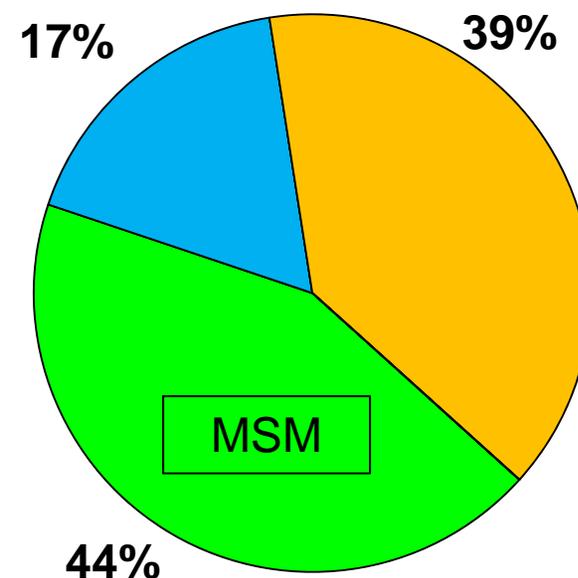
White, Non-Hispanic
N=208



Black, Non Hispanic
N=144



Hispanic
N=23

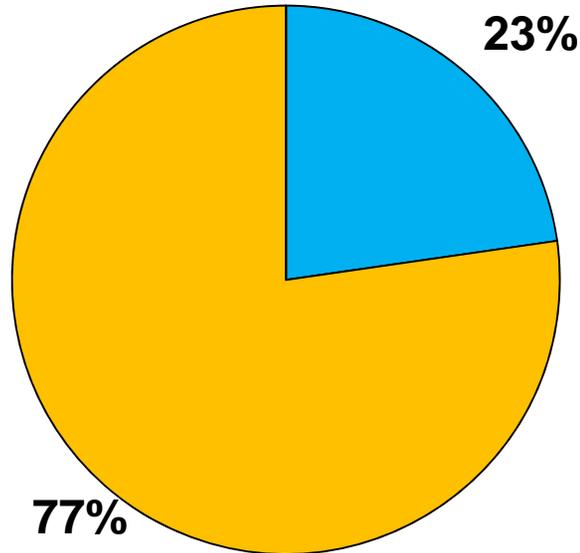


■ MSM ■ IDU ■ MSM/IDU ■ Heterosexual ■ Other

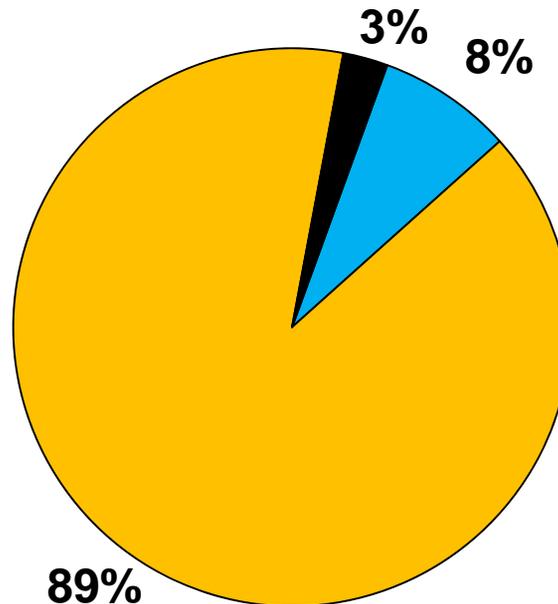
Note: NIRs redistributed. Among males living with HIV disease, the distribution of risk among blacks differs from that among whites and Hispanics. MSM represents the highest risk for all races. White males have the smallest proportion of heterosexual contact cases.

Adult Females Living with HIV Disease by Race/Ethnicity and Mode of Exposure Reported through 2013, Partnership 2a

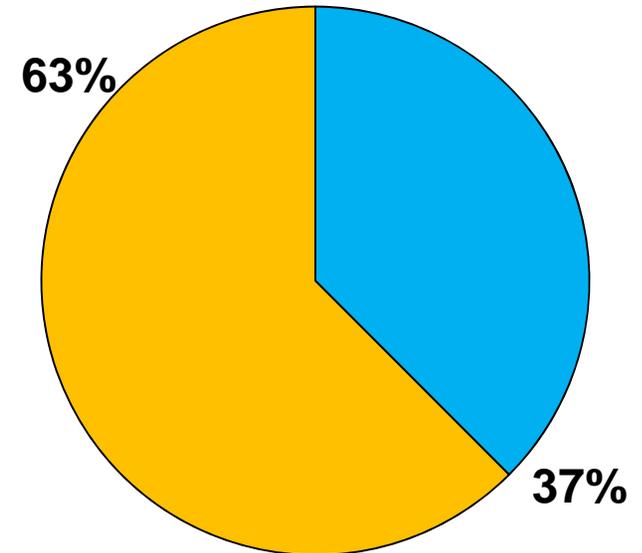
White, Non Hispanic
N=66



Black, Non Hispanic
N=115



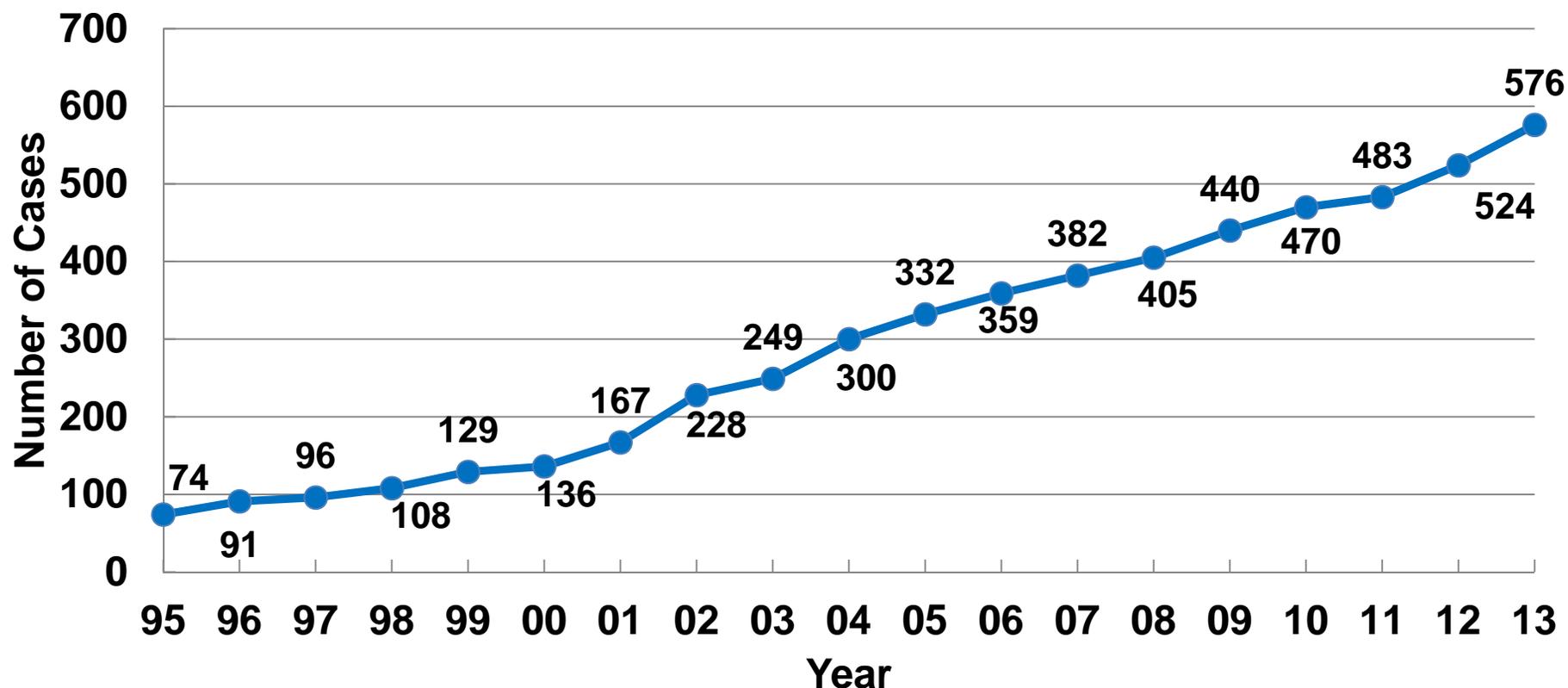
Hispanic
N=8



■ IDU ■ Heterosexual ■ Other

Note: NIRs redistributed. Among females living with HIV disease, the distribution of risk among Hispanics differs from that among blacks and whites. Heterosexual contact is the majority risk for all races. However, Hispanics have the highest proportion of IDU cases.

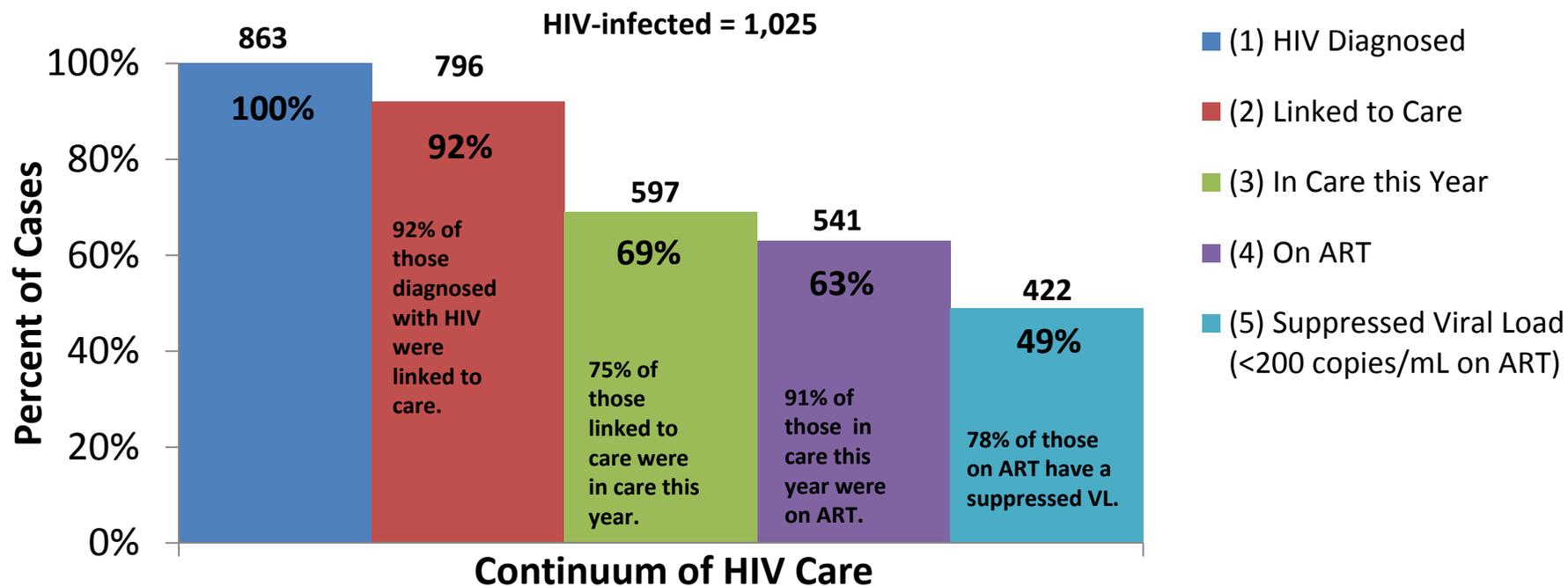
Annual Prevalence of Adults Living with HIV Disease, 1995-2013, Partnership 2a



Note: As a result of declining deaths, annual HIV/AIDS diagnoses have exceeded deaths since 1995, and the number of persons reported with HIV/AIDS that are presumed to be alive has been increasing. Since 1995, the number of persons reported living with HIV/AIDS has increased over 670%. In 2013, the prevalence increased by 10% from the previous year.



Number and Percentage of HIV-Infected Persons Engaged in Selected Stages of The Continuum of HIV Care — Partnership 2a, 2013



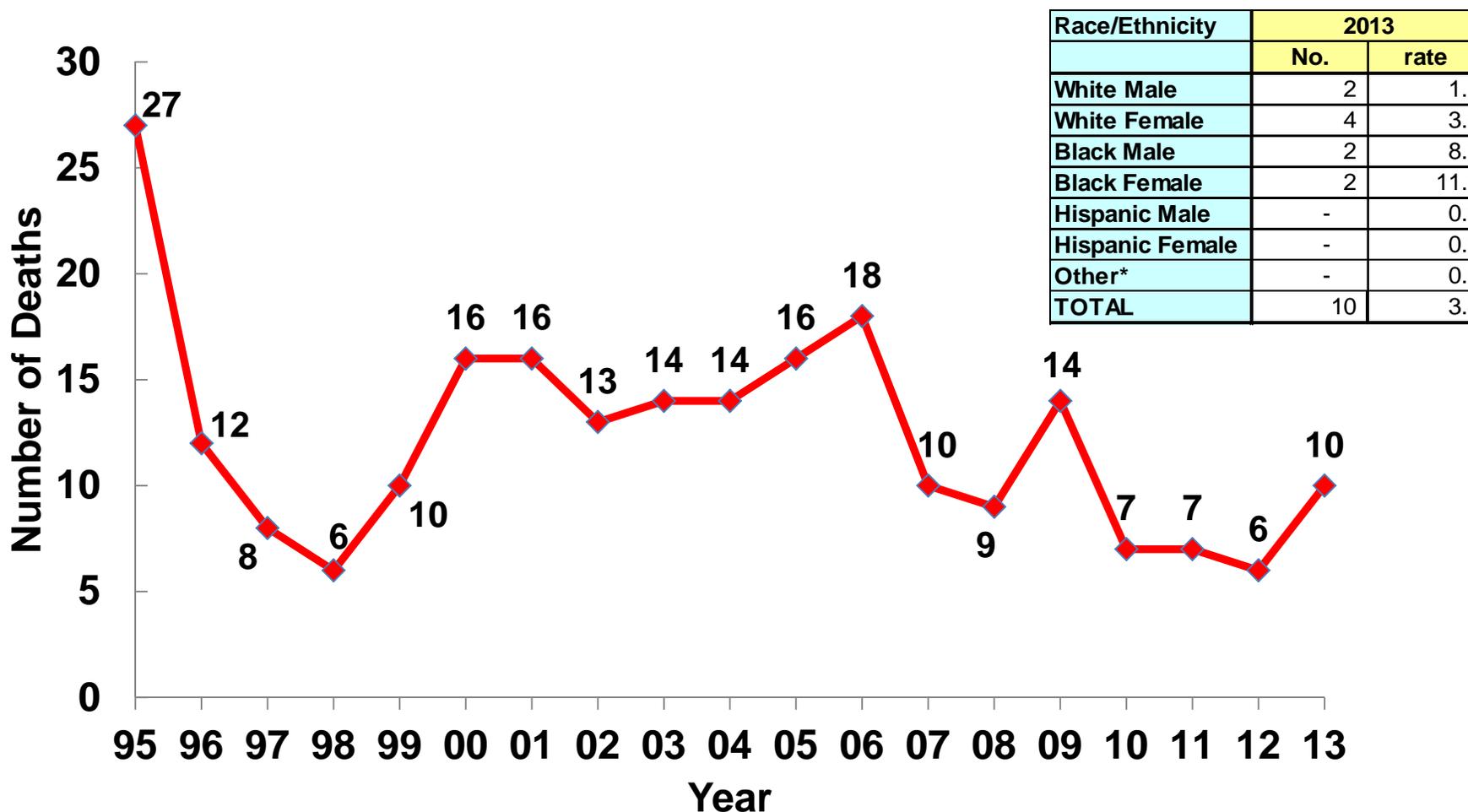
- (1) Number of cases known to be alive and living in Florida through 2013, regardless where diagnosed, as of 06/30/2014 (used for unmet need calculations).
- (2) Ever in Care = 86% of those cases were linked to care, based on persons living with HIV disease in Florida (regardless of where diagnosed) who ever had a CD4 or Viral load (VL) test in the electronic HIV/AIDS Reporting System (eHARS). (2010 National estimates are 79%*).
- (3) 55% of cases were in care this year, based on HRSA unmet need definition, for persons living with HIV in Florida (regardless of where diagnosed) and having at least 1 HIV-related care service involving either a VL or CD4 test or a refill of HIV-related RX. (2010 National estimates for in care are 56%*).
- (4) Estimated 90.6% of In care and on ART this year in Florida per 2011 MMP data (2010 National estimates are 80%*).
- (5) Estimated 78.0% on ART & the viral load is <200 this year in Florida per 2011 MMP data (2010 National estimates are 70%*).

*Continuum of HIV care among Ryan White HIV/AIDS Program clients, U.S., 2010 (<http://hab.hrsa.gov/data/reports/continuumofcare/index.html>)

For additional information please refer to the Florida Continuum of Care slide set accessible at <http://www.floridahealth.gov/diseases-and-conditions/aids/surveillance/index.html>



Resident Deaths due to HIV Disease by Year of Death, 1995-2013, Partnership 2a



Source: Florida Department of Health, Bureau of Vital Statistics, Death Certificates (as of 05/16/2014).
Population data are provided by Florida CHARTS.

* Other includes Asian/Pacific Islanders, Native Alaskans/American Indians and mixed races.



Some Useful Links

- ⌘ CDC HIV/AIDS Surveillance Reports
(State and Metro Data):
<http://www.cdc.gov/hiv/stats/hasrlink.htm>

- ⌘ MMWR (Special Articles on Diseases, Including HIV/AIDS):
<http://www.cdc.gov/mmwr/>

- ⌘ U.S. Census Data (Available by State, County):
<http://www.census.gov>

- ⌘ Partnership 2a, Dept. of Health, HIV/AIDS & Hepatitis Section
Website (Slide sets, Facts Sheets, Monthly Surveillance
Report, Counseling & Testing Data, etc.):
<http://www.floridahealth.gov/diseases-and-conditions/aids/surveillance/index.html>



“The reason for collecting, analyzing and disseminating information on a disease is to control that disease. Collection and analysis should not be allowed to consume resources if action does not follow.”

--Foege WH et al. Int. J of Epidemiology 1976; 5:29-37



Partnership 2 Surveillance Contact

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Leroy Jackson, HIV/AIDS Program Coordinator

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<http://www.cdc.gov/hiv/topics/surveillance/resources/reports/index.htm>