

HIV Data Dissemination to Inform (FITTING Areas



Northwestern University















Northwestern University



Acknowledgements

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- Funding for the dashboard was provided by AIDS Foundation Chicago, made possible in part by a grant from the Pritzker Community Health Initiative, and the Chicago Department of Public Health.
- Northwestern Dashboard Team: Charlotte Burnett,



Agenda

- Overview of Getting to Zero Initiative Meg McElroy
- Navigating the HIV Dashboard Charlotte Burnett
- GTZ Progress measures Meg McElroy
- Current Trends in HIV Gregory Phillips II
- Using the Dashboard to Inform New Directions Nanette Benbow



Getting to zero means ...

• We can end the HIV epidemic in our state!

• We can dramatically **decrease new HIV transmissions** in our state and we can **improve the quality of life** for everyone living with HIV in Illinois so that we all can thrive.



what do we mean when we say "getting to zero"?

Ultimately, we want to see ...

- Zero new HIV transmissions
- Zero people living with HIV who are not engage in care and on treatment

By 2030, we want to reach "functional zero"

- Fewer than 100 new transmissions per year
- Epidemic can no longer sustain itself



OUR STATE GTZ PLAN INCLUDES ...

5 Guiding Principles

6 Domains

22 Goals

78 Strategies



...TO END THE HIV EPIDEMIC IN ILLINOIS





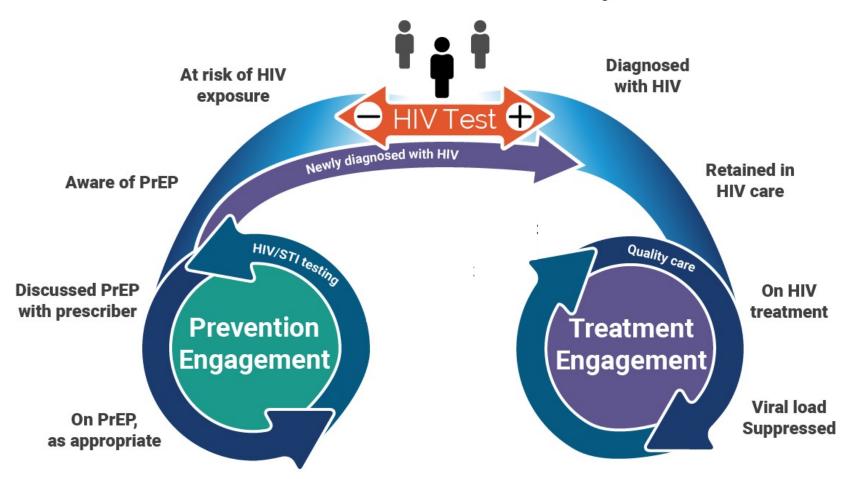
Looking Ahead

- Community Engagement- Statewide Engagement Group
- Three Focus Areas
 - Rapid Start
 - Re-Entry
 - Housing
- GTZ Community Grant Program
- Policy Work- GTZ Omnibus



GTZ Dashboard: Progress Measures

HIV Status-Neutral Service Delivery Model



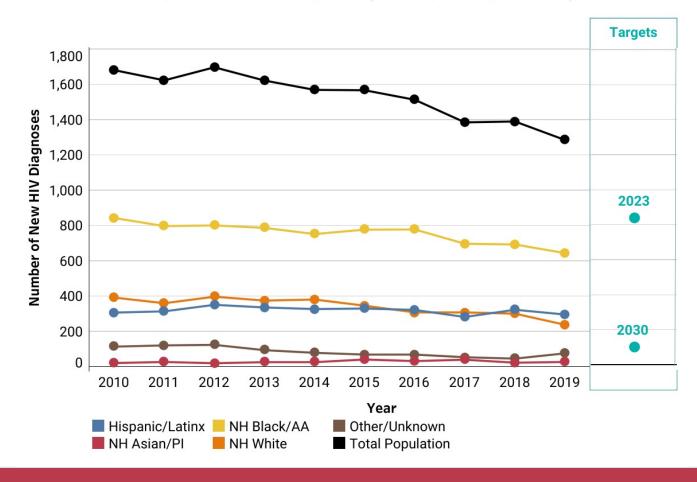


GTZ Dashboard: Progress Measures

New HIV Diagnoses by Race/Ethnicity, Illinois, 2010-2019

 Race and Ethnicity in Illinois

Progress Measure: Reduce the number of people diagnosed with HIV infection to 836 by 2023 and to 100 by 2030 (Goal 11, Strategies 26-29)



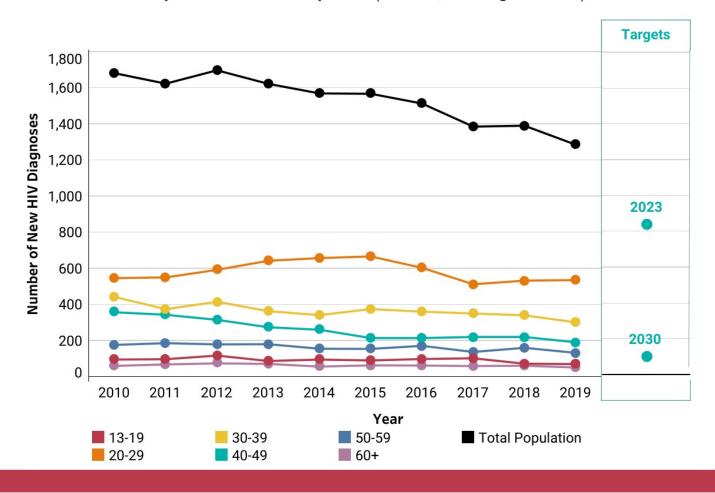


GTZ Dashboard: Progress measures

New HIV Diagnoses by Age, Illinois, 2010-2019

Age in Illinois

Progress Measure: Reduce the number of people diagnosed with HIV infection to 836 by 2023 and to 100 by 2030 (Goal 11, Strategies 26-29)





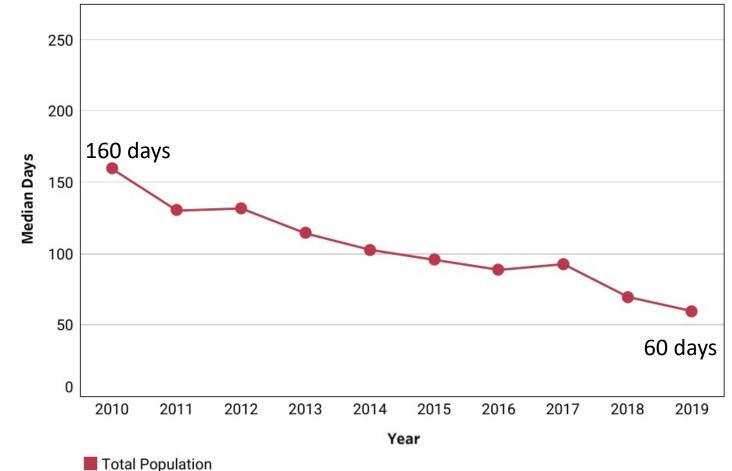
Median Days Until First Suppressed Viral Load by Race/Ethnicity

Median Days Until First Suppressed Viral Load, Chicago, 2010-2019

Navigation

- > Health Measures
 - > Care and Treatment
 - Days from Diagnoses to First Care Event
 - Indicator: First suppressed viral load

Impact of Rapid ART: Gomilla et al found that the median time from diagnosis to viral suppression decreased from 77 days in non-rapid starters to 55 days in rapid ART starters $(p = 0.03)^{1}$.



¹Gomillia CES, Backus KV, Brock JB, Melvin SC, Parham JJ, Mena LA. Rapid Antiretroviral Therapy (ART) Initiation at a Community-Based Clinic in Jackson, MS. AIDS Res Ther. 2020 Oct 8;17(1):60.

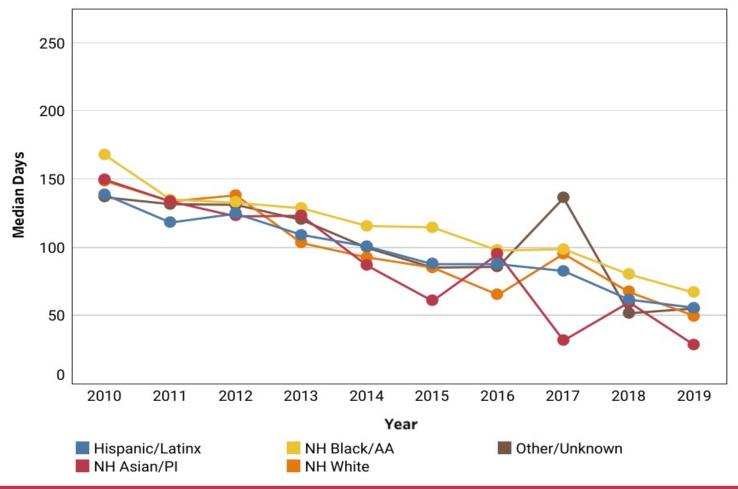


Time to Fist Care Event: Median Days from Diagnosis to Viral Suppression

Navigation

- > Health Measures
 - > Care and Treatment
 - Days from Diagnoses to First Care Event
 - Indicator: First suppressed viral load
 - Step 1 Category:
 Race/Ethnicity

Median Days Until First Suppressed Viral Load by Race/Ethnicity, Chicago, 2010-2019



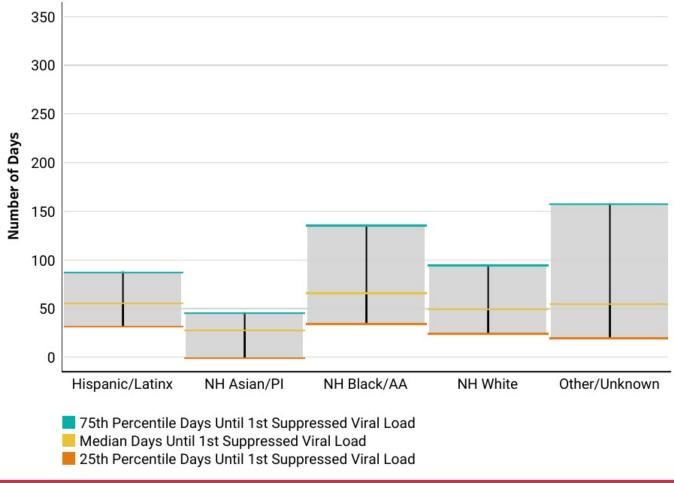


Distribution of Days from Dx to First Suppressed Viral Load

Navigation

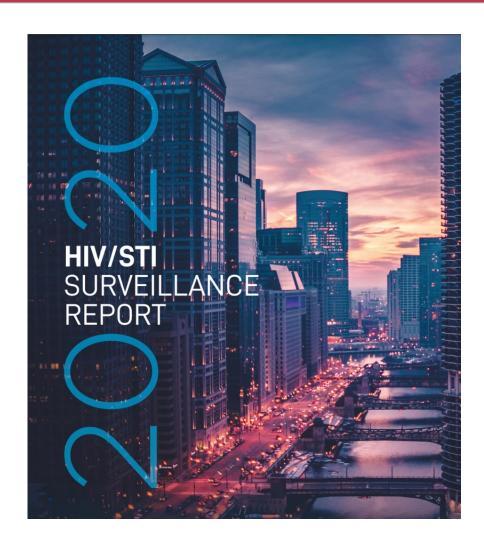
- > Health Measures
 - Care and Treatment
 - Days from Diagnoses to First Care Event
 - Indicator: First suppressed viral load
 - View Graph Type: Box Plot Distribution
 - Step 1 Category: Race/Ethnicity

Distribution of Days Until First Suppressed Viral Load by Race/Ethnicity, Chicago, 2019





Expanding on Annual Surveillance Report

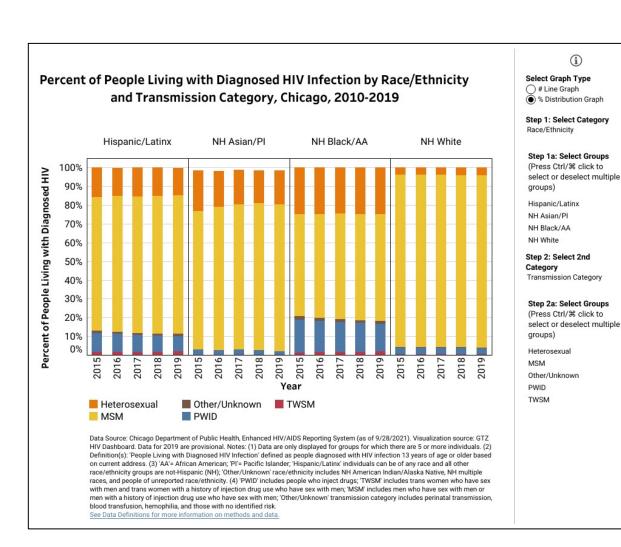


Diagnosed/Reported Cases, 2019 ¥

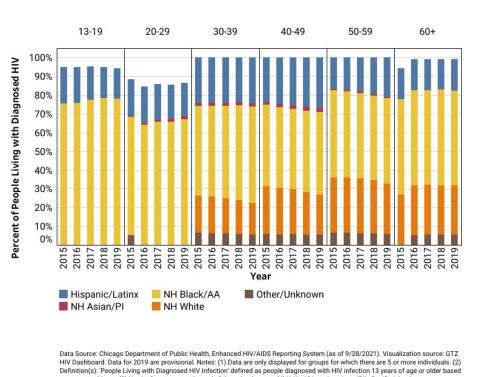
Demographic Characteristics	HIV Infection§		AIDS		Gonorrhea		Chlamydia		Syphilis€		HIV Prevalence, 2019	
Race/ Ethnicity	No.	Rate*	No.	Rate*	No.	Rate*	No.	Rate*	No.	Rate*	No.	Rate*
Black, non-Hispanic	365	40.8	160	17.9	8,169	912.4	15,683	1,751.7	358	40.0	9,751	1,089.1
White, non-Hispanic	85	10.0	41	4.8	2,334	273.3	3,854	451.3	203	23.8	4,162	487.4
Hispanic	151	19.8	58	7.6	1,721	225.3	5,655	740.2	155	20.3	4,227	553.2
Asian/PI, non-Hispanic	9	6.1	5	3.4	191	128.5	563	378.7	13	8.7	258	173.6
AI/AN, non-Hispanic	<5	-	<5	-	21	705.2	45	1,511.1	<5	-	17	570.9
Other, non-Hispanic	21	30.9	15	22.0	212	311.6	569	836.3	<5	-	976	1,434.5
Unknown	19		<5		1,667		5,781		80		65	
Sex^												
Male	550	42.1	232	17.8	9,564	732.3	13,503	1,033.9	726	55.6	15,931	1,219.8
Female	102	7.3	49	3.5	4,724	339.2	18,598	1,335.3	88	6.3	3,525	253.1
Unknown	- 5		676		27		49		0		্	
Chicagos	652	24.2	281	10.4	14,315	530.4	32,150	1,191.3	814	30.2	19,456	720.9



Crosstab Ability!



Percent of People Living with Diagnosed HIV Infection by Age and



Race/Ethnicity, Chicago, 2010-2019

Select Graph Type

Line Graph

% Distribution Graph

Step 1: Select Category

Step 1a: Select Groups

(Press Ctrl/業 click to select or deselect multiple groups)

13-19

20-29 30-39

40-49

50-59

Step 2: Select 2nd Category

Race/Ethnicity

Step 2a: Select Groups

(Press Ctrl/# click to select or deselect multiple groups)

Hispanic/Latinx

NH Asian/PI

NH Black/AA

NH White

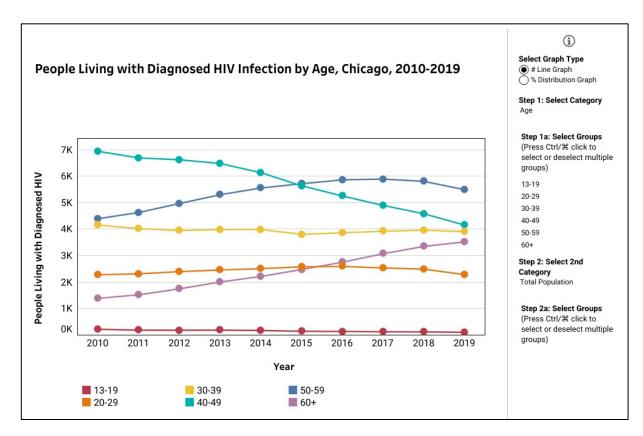
Other/Unknown

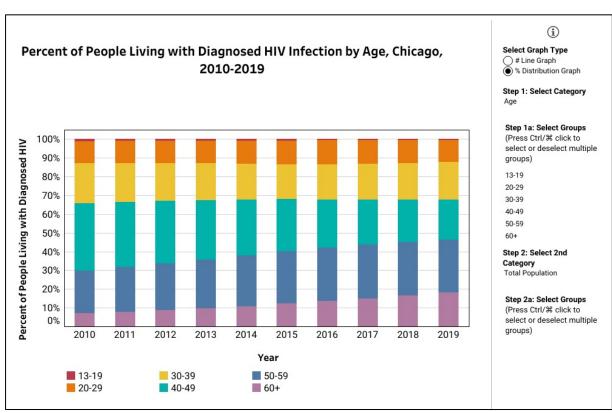
on current address. (3) 'Age' refers to age at the end of the calendar year. (4) 'AA'= African American; 'PI'= Pacific Islander; 'Hispanic/Latinx' individuals can be of any race and all other race/ethnicity groups are not-Hispanic (NH); 'Other/Unknown' race/ethnicity includes NH American Indian/Alaska Native, NH multiple races, and people of unreported race/ethnicity.

See Data Definitions for more information on methods and data.



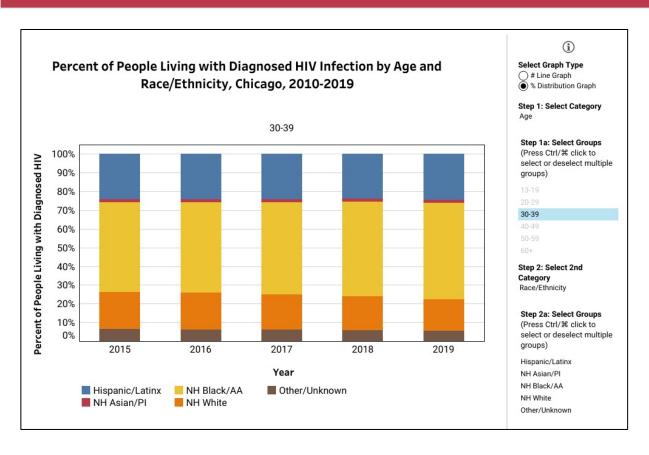
Line Graph vs. Bar Graph

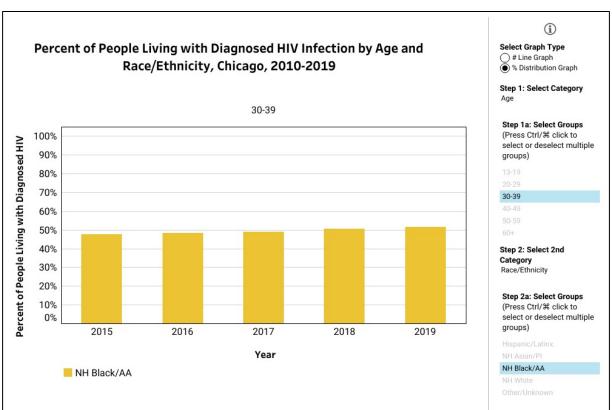






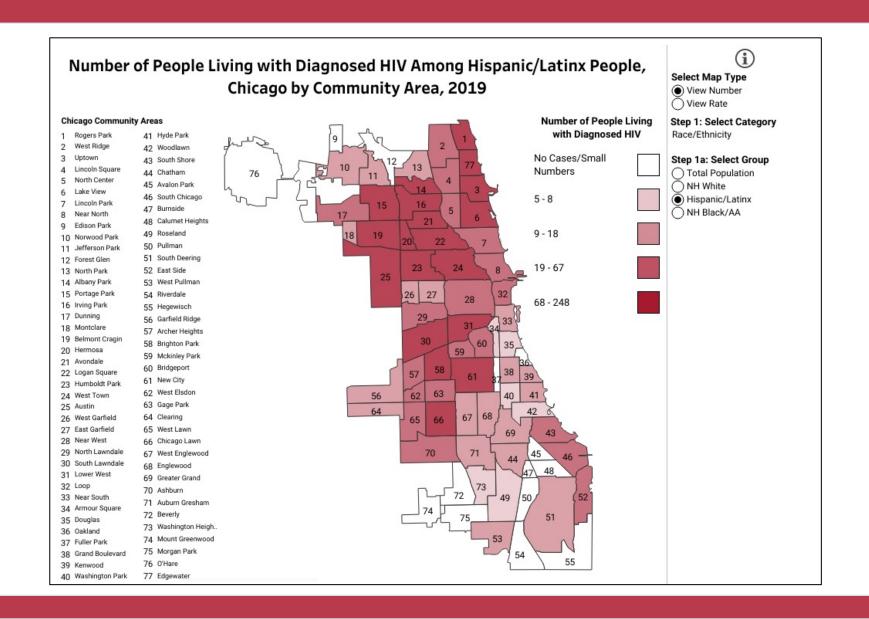
Limiting Data Displayed





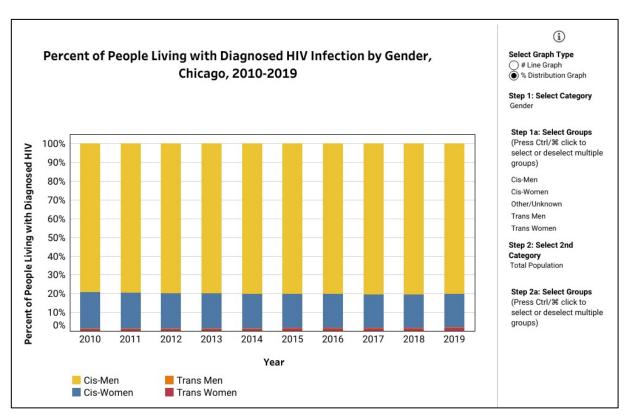


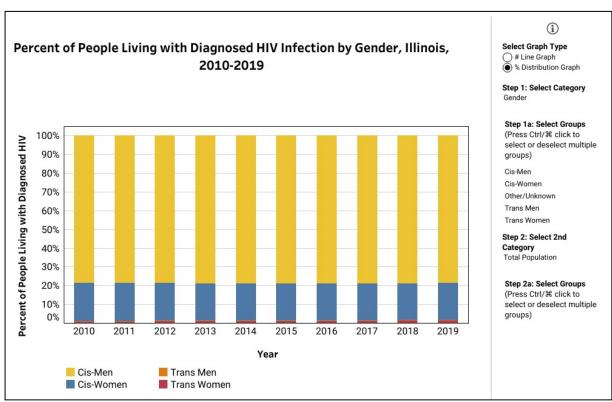
Community Area Breakdown





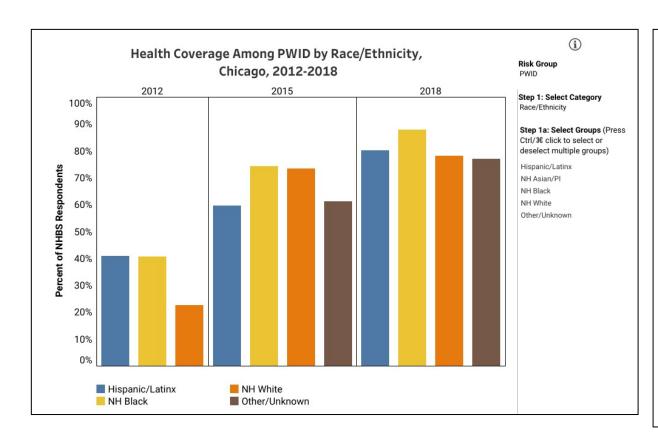
Chicago vs. Illinois

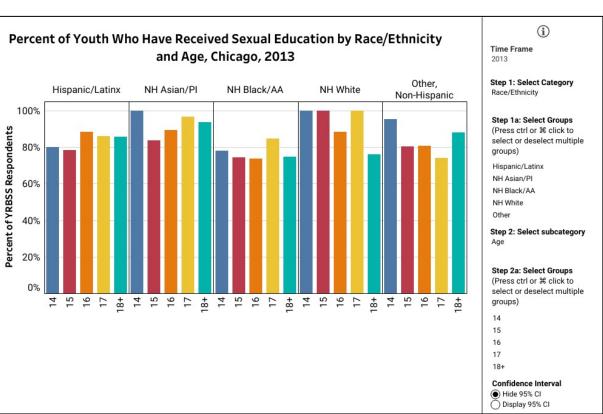






Social Determinants of Health







Priority Population Fact Sheets

PRIORITY POPULATIONS

Certain populations are disproportionately impacted by the HIV epidemic on a national level and also reflected in the data for Illinois and Chicago. These populations, also referred to as priority populations, are as follows: Black MSM, Hispanic/Latinx MSM, Young Black MSM, Young Hispanic/Latinx MSM, People Over the Age of 50, Cisgender Black Women, Transgender Women of Color, and Chicago EMA (extended metro area). Gay, bisexual, same gender loving, and other men who have sex with men (MSM), for instance, have been and remain among the most impacted.

With dismantling racism as a guiding principle of Getting to Zero Illinois, we want to make sure we are closely monitoring the data coming from and responding to the needs of these priority populations. We also consider the intersection of race and gender, the needs of the aging population, and the impact on transgender women. Lastly GTZ-IL is an initiative for the entire state of Illinois. Because half of those living with HIV in Illinois are living in the Chicago and surrounding metro area, we also monitor and present data on this population.

<u>Chicago</u>

- Black MSM
- ✓ Young Black MSM
- People Aged 50+
- Hispanic/Latinx MSM
- Young Hispanic MSM
- Transgender Women of Color
- Cisgender Black Women

<u>Illinois</u>

- Black MSM
- ✓ Young Black MSM
- People Aged 50+
- ☑ Hispanic/Latinx MSM
- ✓ Young Hispanic MSM
- Transgender Women of Color
- Cisgender Black Women
- Chicago Eligible Metropolitan
 Area (EMA)



Hispanic/Latinx MSM in Chicago

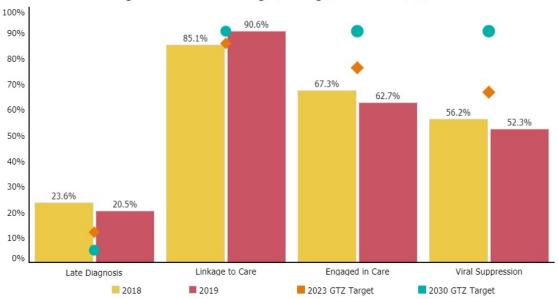
Progress towards GTZ Targets

- > 2023 and 2030 targets
- Updated annually
- > Text to explain graphs

Progress to GTZ Targets for Hispanic/Latinx MSM

Although there has been promising movement towards GTZ targets between 2018 and 2019, Latinx MSM in Chicago have yet to reach most GTZ targets set for 2023 and 2013. The percentage of late diagnoses decreased from 24% to 20%, but more work is needed to achieve the target of 12% in 2023 and 5% in 2030. Proportion of Latinx MSM living with HIV who were linked to care increased from 85% to 91% in 2019, exceeding the 90% 2023 GTZ target and slightly below the 95% 2030 GTZ target. Greater focus is needed on achieving targets for engagement and viral suppression. The proportion of Latinx MSM living with HIV who were engaged in care (63% in 2019) and who achieved viral suppression (52% in 2019) decreased between 2018 and 2019. These proportions remain well below the 80% 2023 and 95% 203 GTZ targets for engagement in care, and 70% 2023 and 95% 2030 GTZ targets for viral suppression.

Progress Towards GTZ Target, Chicago, 2018-2019², ⁴, ⁶, ⁷



Data Source: Chicago Department of Public Health (CDPH), Enhanced HTV/ALIDS Reporting System (as of 9/28/20). Visualization Source: GTZ HIV Dashboard. Notes: (a) Data are only displayed for groups for which there are 5 or more individuals. (b) 'Age' refers to age at time of diagnosss.' 'New HIV Diagnoses' defined as the number of persons 13 years of age or older newly diagnosed with HIV infection; 2' Late HIV Diagnosed with stage 3 HIV (AIDS) within 12 months of HIV diagnosis; 3' People Living with Diagnosed HIV defined as people diagnosed with HIV infection with stage 3 HIV (AIDS) within 12 months of HIV diagnosis; 3' People Living with Diagnosed HIV defined as people newly diagnosed with HIV infection with a CD4, VL or genotype lab results at the defiagnoses; 5' Sustained Linkage' defined as people newly diagnosed with HIV infection with 2 CD4, VL or genotype lab results at least 90 days apart and within a year after their date of diagnoses; 5' Wiral suggested with the VIV with a viral load less than 200 copies/mit at X days after their date of diagnosed with HIV with a viral load less than 200 copies/mit at X days after their date of diagnosed with HIV with a viral load less than 200 copies/mit at X days after their date of diagnosed with HIV with a viral load less than 200 copies/mit at X days after their date of diagnosed with HIV with a viral load less than 200 copies/mit at X days after their date of diagnosed with HIV with a viral load less than 200 copies/mit at X days after their date of diagnosed with HIV with a viral load less than 200 copies/mit at X days after their date of diagnosed with HIV with a viral load less than 200 copies/mit at X days after their date of diagnosed with HIV with a viral load less than 200 copies/mit at X days after their date of diagnosed with HIV with a viral load or genotype lab results at least 90 days apart and within the calendar vear; 8 Retained in Care' defined as PLWDH with 2 CD4, viral load, or genotype lab results at least 90 days apart and within the calendar v