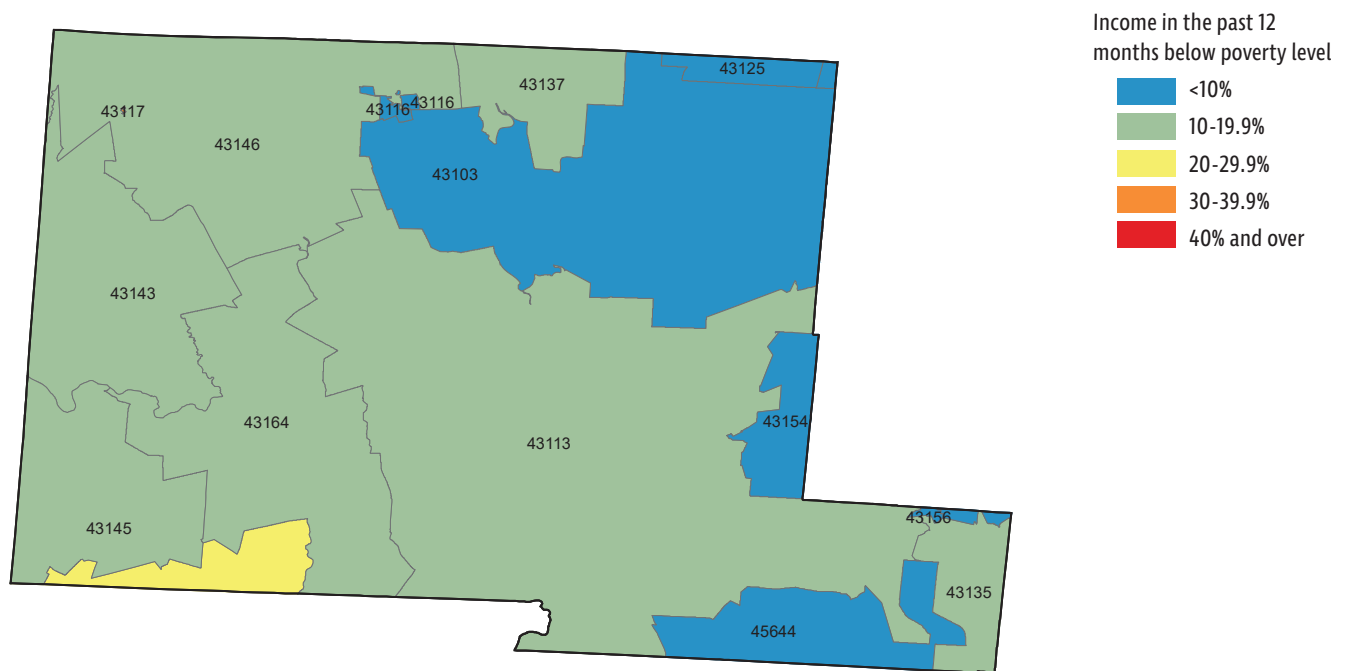


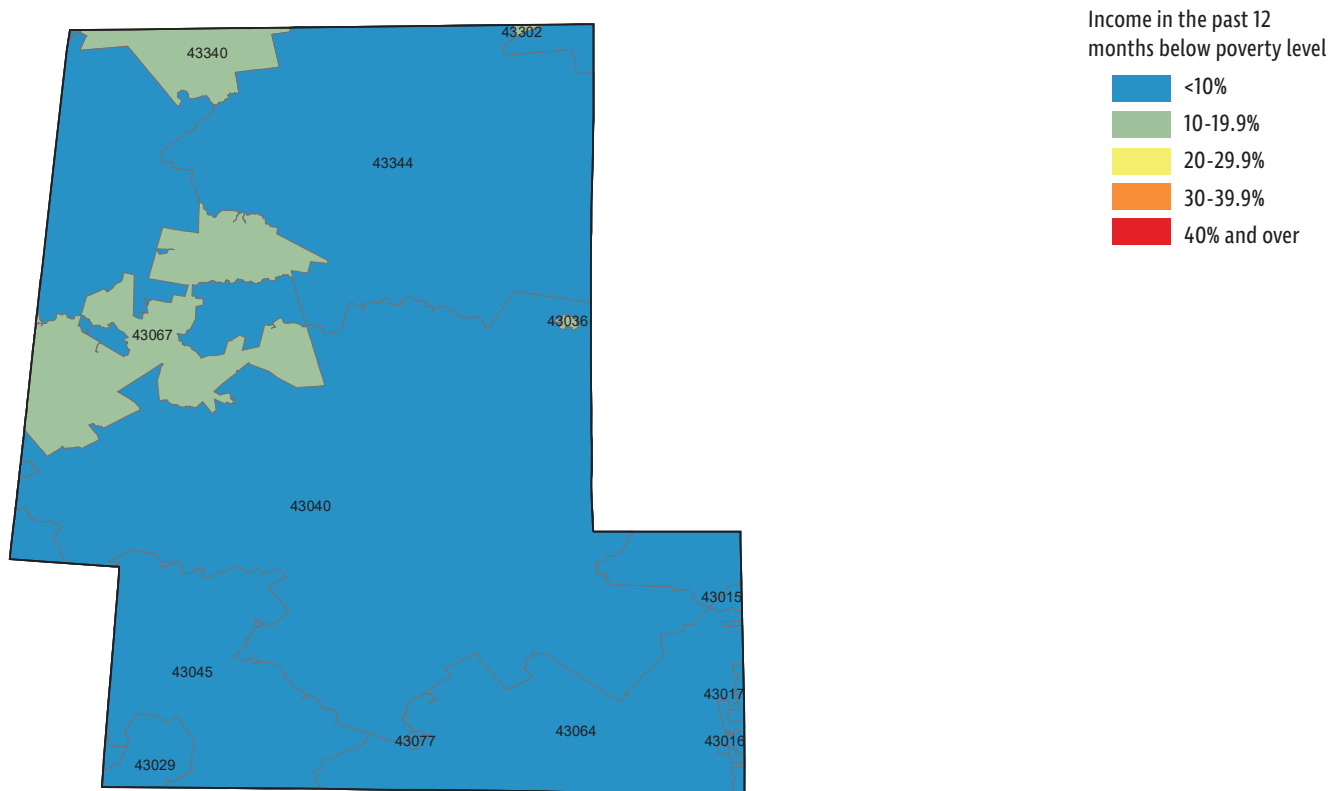


**Figure 47: Percentage of population with income in the past 12 months below poverty level by ZIP code, Pickaway County, 2013-2017**



Source: U.S. Census Bureau, 2013-2017 American Community Survey 5-Year Estimates.

**Figure 48: Percentage of population with income in the past 12 months below poverty level by ZIP code, Union County, 2013-2017**



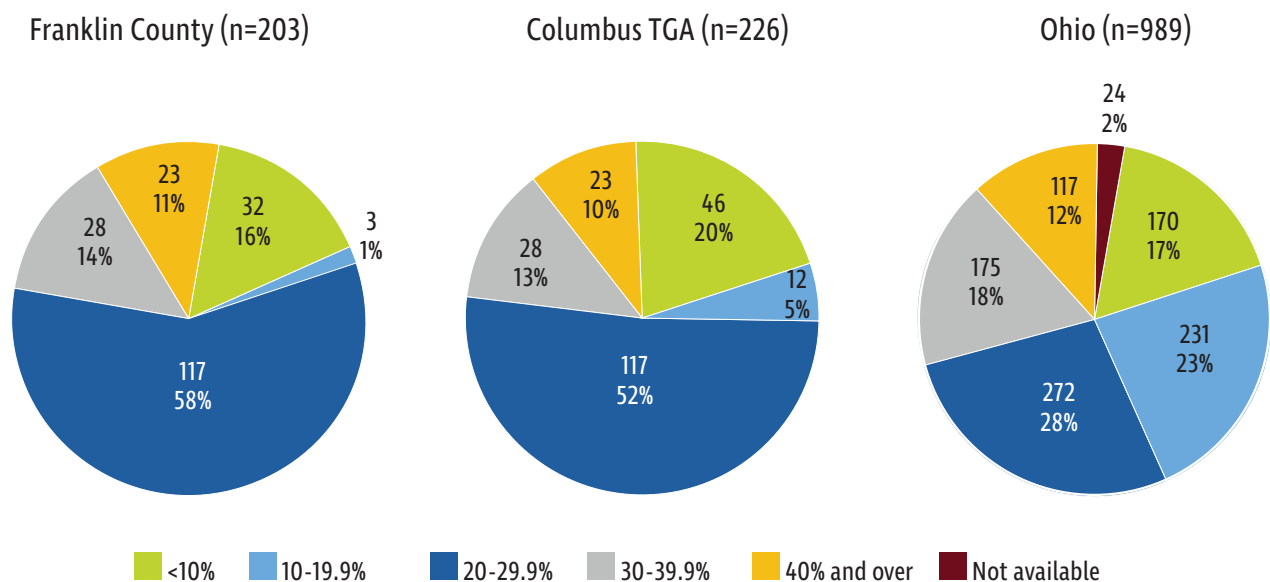
Source: U.S. Census Bureau, 2013-2017 American Community Survey 5-Year Estimates.



Figure 49 depicts the number of new diagnoses of HIV infection in Franklin County, in the Columbus TGA, and in Ohio, in 2018, by area-based poverty level. Thirty-two of the 203 new diagnoses of HIV in Franklin County in 2018 were among persons who resided in ZIP codes where less than 10% of the population had income in the past 12 months below FPL. There were three new diagnoses of HIV in Franklin County in 2018 among persons who resided in ZIP codes where 10% to 19.9% of the population had income in the past 12 months below FPL, 117 among persons residing in ZIP codes where 20% to 29.9% were below FPL, 28 among persons residing in ZIP codes where 30% to 39.9% were below FPL, and 23 among persons residing in ZIP codes where 40% or more were below FPL.

Forty-six of the 226 new diagnoses of HIV in the Columbus TGA in 2018 were among persons who resided in ZIP codes where less than 10% of the population had income in the past 12 months below FPL. There were 12 new diagnoses of HIV in the Columbus TGA in 2018 among persons who resided in ZIP codes where 10% to 19.9% of the population had income in the past 12 months below FPL, 117 among persons residing in ZIP codes where 20% to 29.9% were below FPL, 28 among persons residing in ZIP codes where 30% to 39.9% were below FPL, and 23 among persons residing in ZIP codes where 40% or more were below FPL.

**Figure 49: Number of new diagnoses of HIV infection in 2018 by area-based percentage of the population with income in the past 12 months below federal poverty level**



Source: U.S. Census Bureau, 2013-2017 American Community Survey 5-Year Estimates.



In 2018, the federal poverty level for a single person was \$12,140 and increased by \$4,320 for each member of the household. Income data is collected to determine eligibility for all clients enrolled in the Ryan White Part B program.

**Table 35: Number and percentage of Ryan White Part B clients by percentage of FPL, Franklin County, 2018**

	Percentage of Federal Poverty Level					Total
	<100%	100-138%	139-200%	201-250%	251-300%	
Franklin County Part B	750 (46%)	196 (12%)	314 (19%)	212 (13%)	175 (11%)	1,647
Columbus TGA Part B	813 (45%)	216 (12%)	351 (20%)	226 (13%)	193 (11%)	1,799

*Note: Clients enrolled in the Ryan White Part B Program may also receive services from other pay sources (e.g., other Ryan White Parts, Medicaid).*

*Source: Ryan White Application Database. Data reported through Nov. 14, 2019.*

In order to be eligible for Ryan White Part A services, individuals must be below 500% of the federal poverty level.

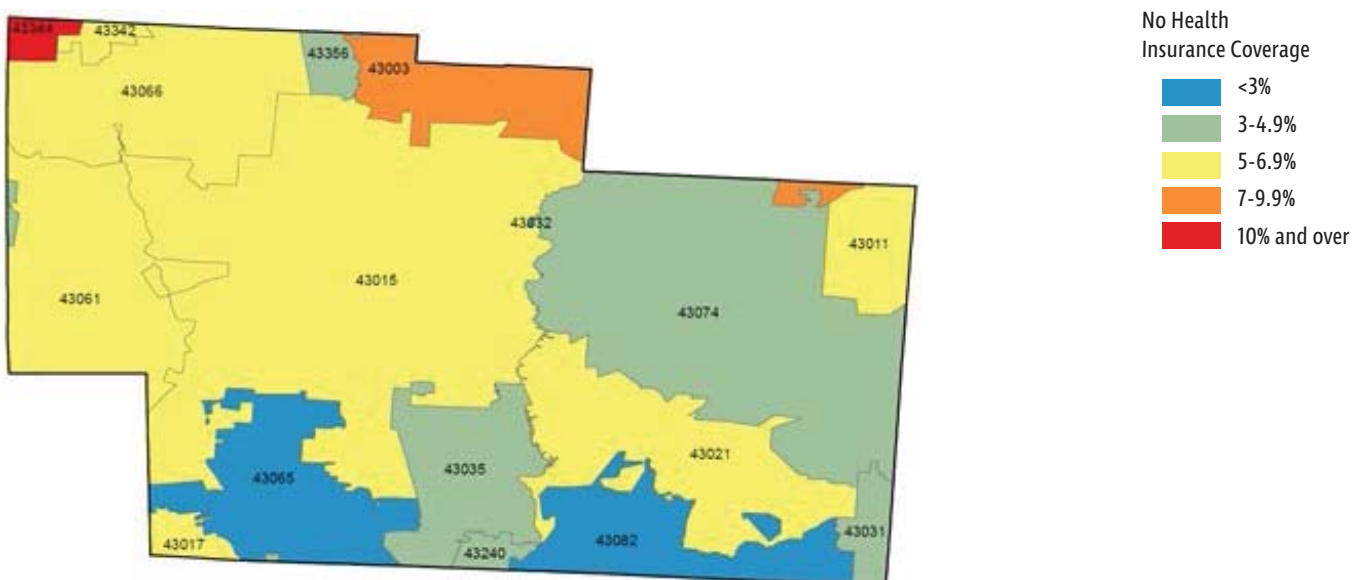
**Table 36: Number of Part A clients by percentage of FPL, 2018**

	Percentage of Federal Poverty Level				
	<100%	100-199%	200-299%	300-399%	400-499%
Franklin County Part A	51% (1,028)	29% (582)	16% (316)	4% (84)	<1% (11)
Columbus TGA Part A	52% (991)	28% (541)	15% (295)	4% (81)	<1% (11)

*Source: Ryan White Part A-Columbus. Data reported through Dec. 31, 2019.*

**Uninsured:** Nine percent of Franklin County's civilian non-institutionalized population has no health insurance, compared with 7.9% for the Columbus TGA and 7.4% for all of Ohio. The map below depicts each ZIP code in the Columbus TGA and what percentage of the population is uninsured.

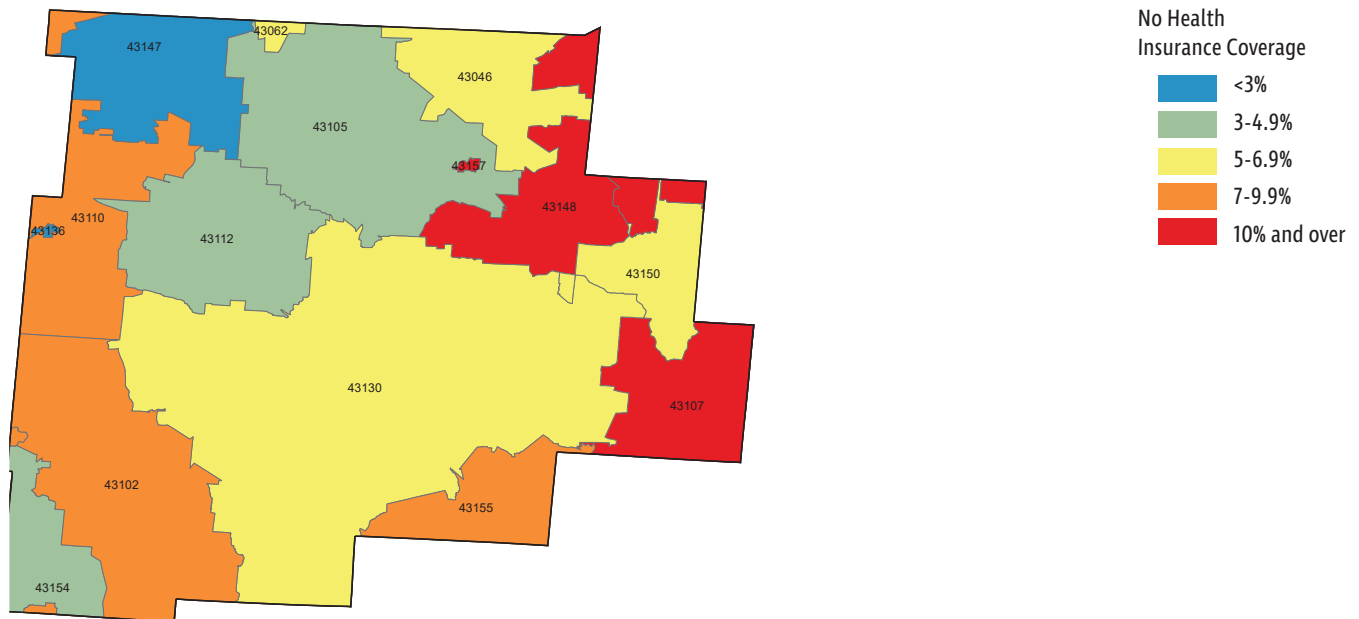
**Figure 50: Percentage of the civilian non-institutionalized population with no health insurance coverage by ZIP code, Delaware County, 2013-2017**



*Source: U.S. Census Bureau, 2013-2017 American Community Survey 5-Year Estimates.*

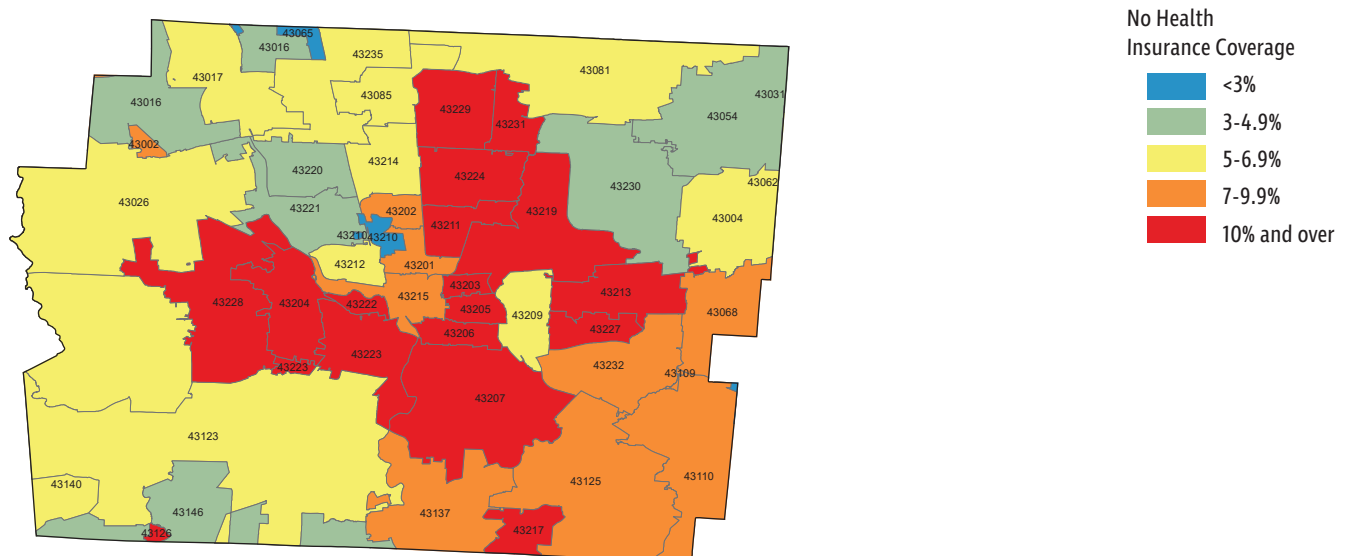


**Figure 51: Percentage of the civilian non-institutionalized population with no health insurance coverage by ZIP code, Fairfield County, 2013-2017**



Source: U.S. Census Bureau, 2013-2017 American Community Survey 5-Year Estimates.

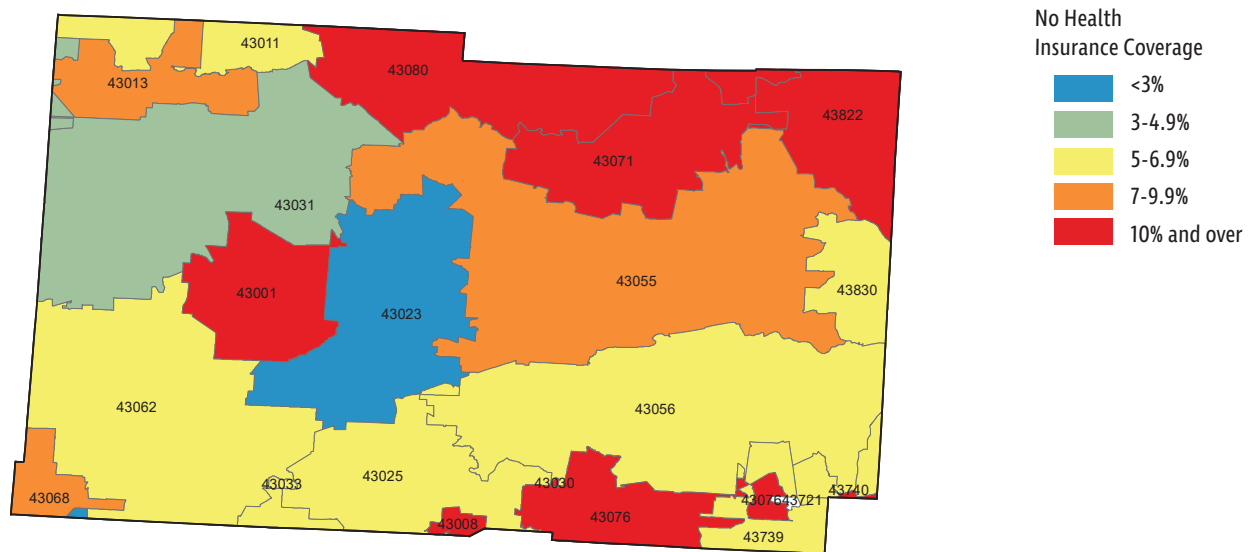
**Figure 52: Percentage of the civilian non-institutionalized population with no health insurance coverage by ZIP code, Franklin County, 2013-2017**



Source: U.S. Census Bureau, 2013-2017 American Community Survey 5-Year Estimates.

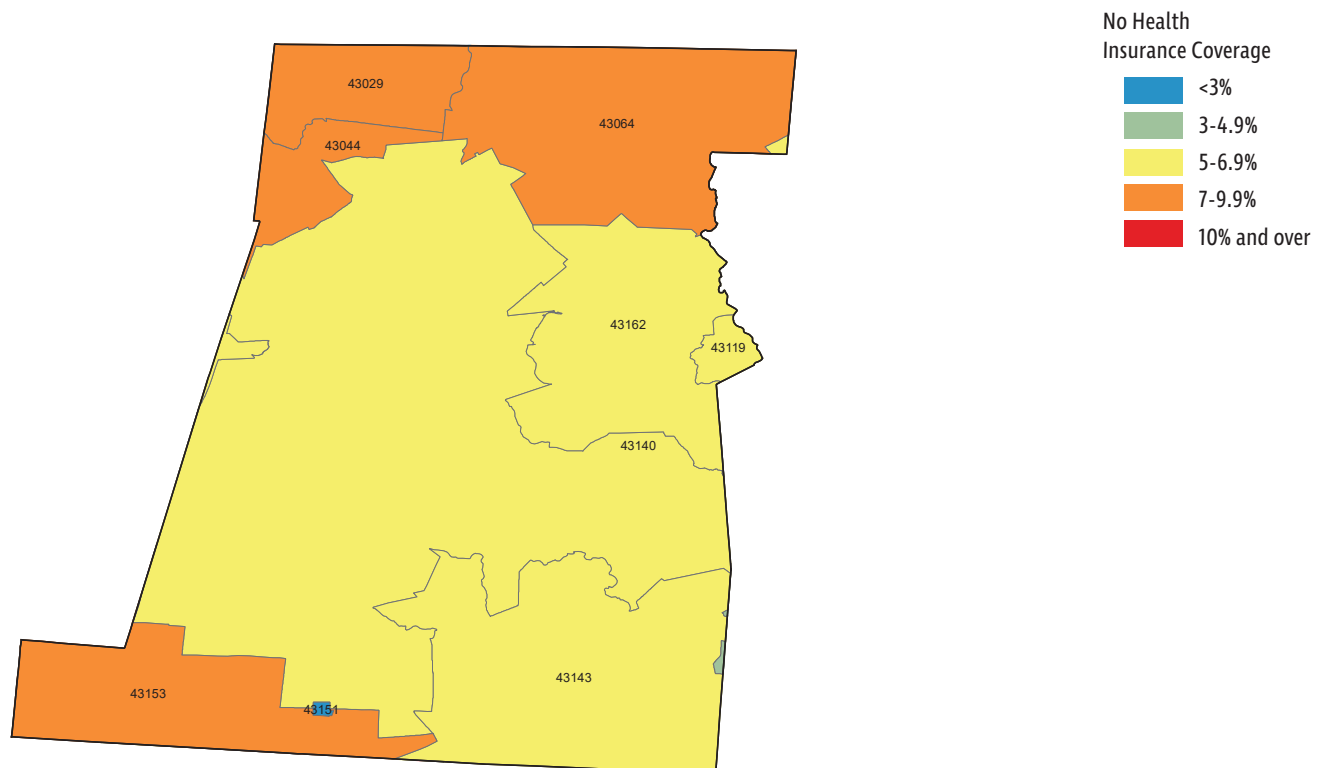


**Figure 53: Percentage of the civilian non-institutionalized population with no health insurance coverage by ZIP code, Licking County, 2013-2017**



Source: U.S. Census Bureau, 2013-2017 American Community Survey 5-Year Estimates.

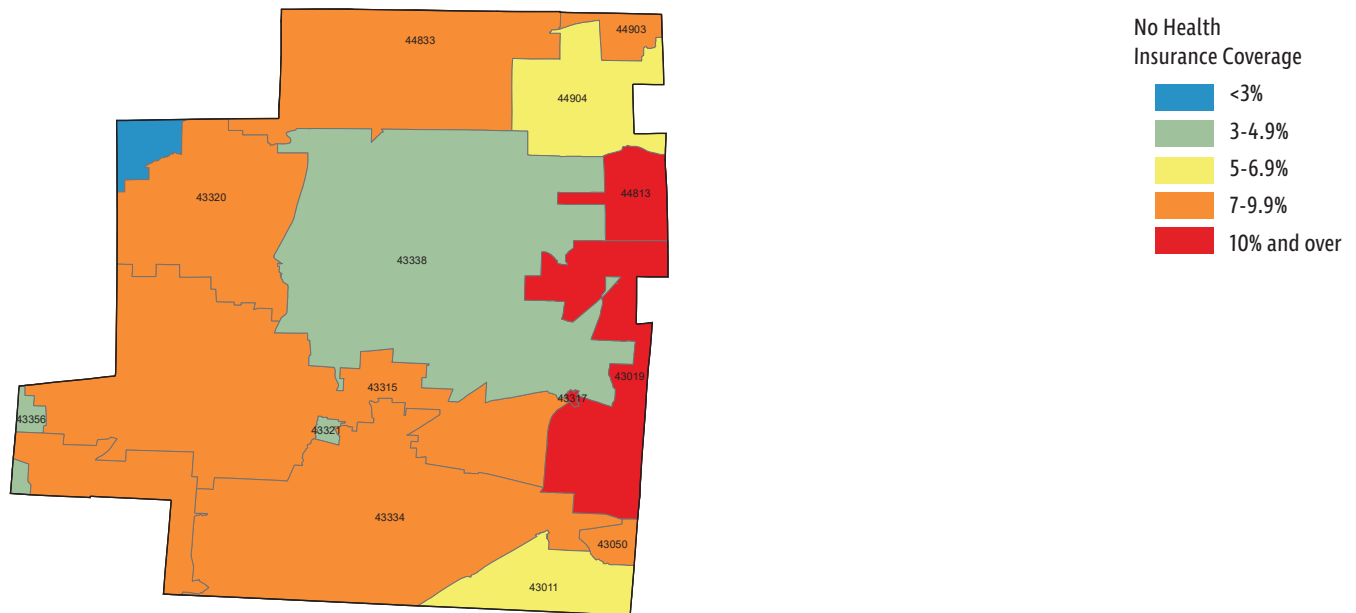
**Figure 54: Percentage of the civilian non-institutionalized population with no health insurance coverage by ZIP code, Madison County, 2013-2017**



Source: U.S. Census Bureau, 2013-2017 American Community Survey 5-Year Estimates.

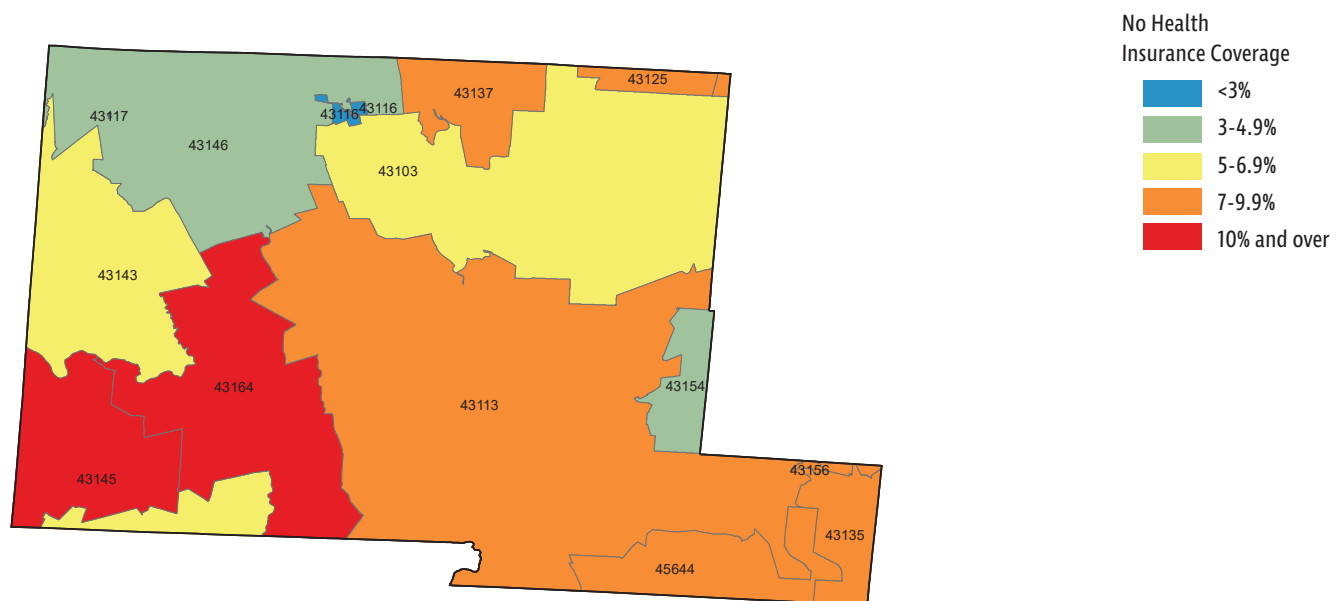


**Figure 55: Percentage of the civilian non-institutionalized population with no health insurance coverage by ZIP code, Morrow County, 2013-2017**



Source: U.S. Census Bureau, 2013-2017 American Community Survey 5-Year Estimates.

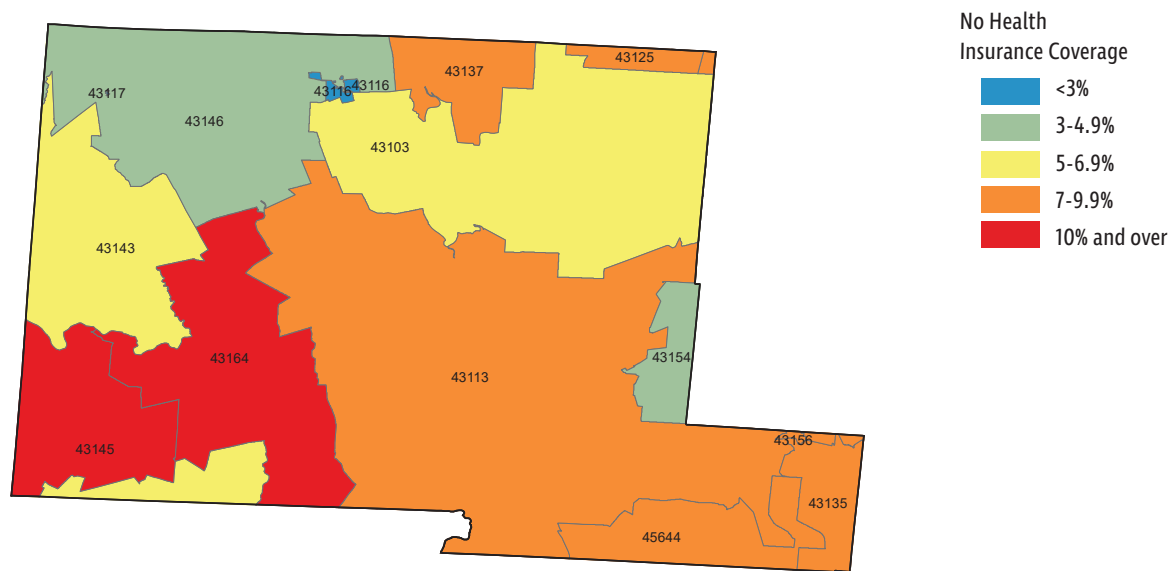
**Figure 56: Percentage of the civilian non-institutionalized population with no health insurance coverage by ZIP code, Pickaway County, 2013-2017**



Source: U.S. Census Bureau, 2013-2017 American Community Survey 5-Year Estimates.



**Figure 57: Percentage of the civilian non-institutionalized population with no health insurance coverage by ZIP code, Union County, 2013-2017**



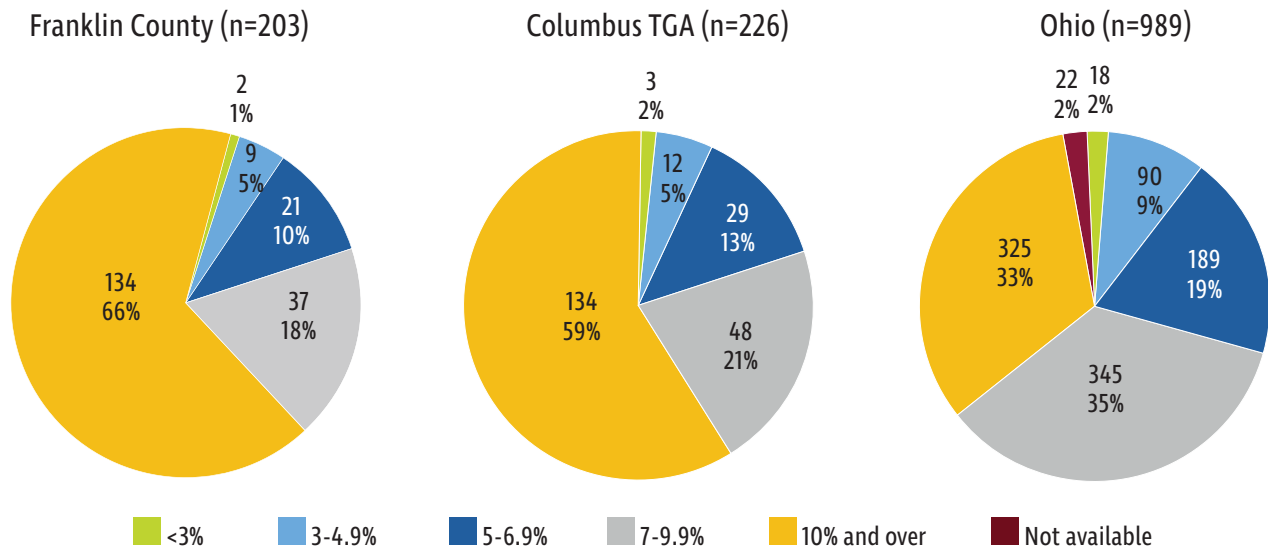
Source: U.S. Census Bureau, 2013-2017 American Community Survey 5-Year Estimates.

Figure 58 depicts the number of new diagnoses of HIV infection in Franklin County, in the Columbus TGA, and in Ohio, in 2018, by area-based percentage uninsured. Two of the 203 new diagnoses of HIV in Franklin County in 2018 were among persons who resided in ZIP codes where less than 3% of the civilian non-institutionalized population had no health insurance. There were nine new diagnoses of HIV in Franklin County in 2018 among persons who resided in ZIP codes where 3% to 4.9% of the civilian non-institutionalized population had no health insurance, 21 among persons residing in ZIP codes where 5% to 6.9% had no health insurance, 37 among persons residing in ZIP codes where 7% to 9.9% had no health insurance, and 134 among persons residing in ZIP codes where 10% or more had no health insurance.

Three of the 226 new diagnoses of HIV in the Columbus TGA in 2018 were among persons who resided in ZIP codes where less than 3% of the civilian non-institutionalized population had no health insurance. There were 12 new diagnoses of HIV in Franklin County in 2018 among persons who resided in ZIP codes where 3% to 4.9% of the civilian non-institutionalized population had no health insurance, 29 among persons residing in ZIP codes where 5% to 6.9% had no health insurance, 48 among persons residing in ZIP codes where 7% to 9.9% had no health insurance, and 134 among persons residing in ZIP codes where 10% or more had no health insurance.



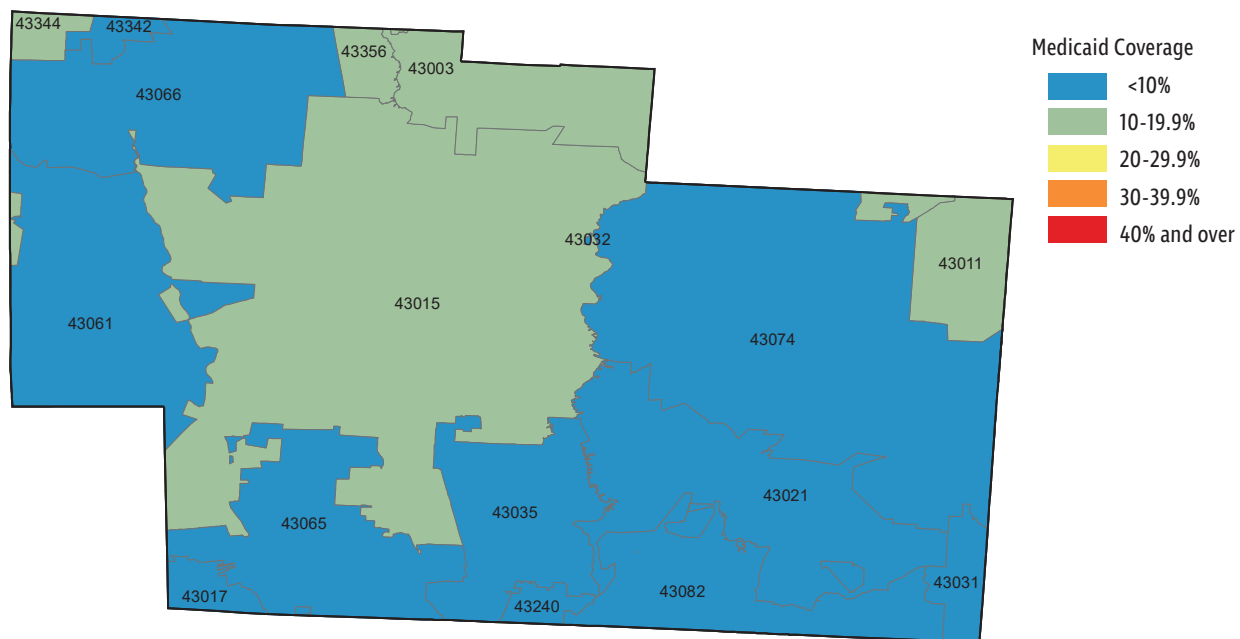
**Figure 58: Number of new diagnoses of HIV infection in 2018 by area-based percentage of the civilian non-institutionalized population with no health insurance**



Source: U.S. Census Bureau, 2013-2017 American Community Survey 5-Year Estimates.

**Medicaid coverage:** Of Franklin County's population, 19.8% has Medicaid coverage (alone or in combination), compared with 17.8% for the Columbus TGA and 19.7% for all of Ohio. The map below depicts each ZIP code in the Columbus TGA and what percentage of the population has Medicaid coverage.

**Figure 59: Percentage of population with Medicaid coverage (alone or in combination) by ZIP code, Delaware County, 2013-2017**

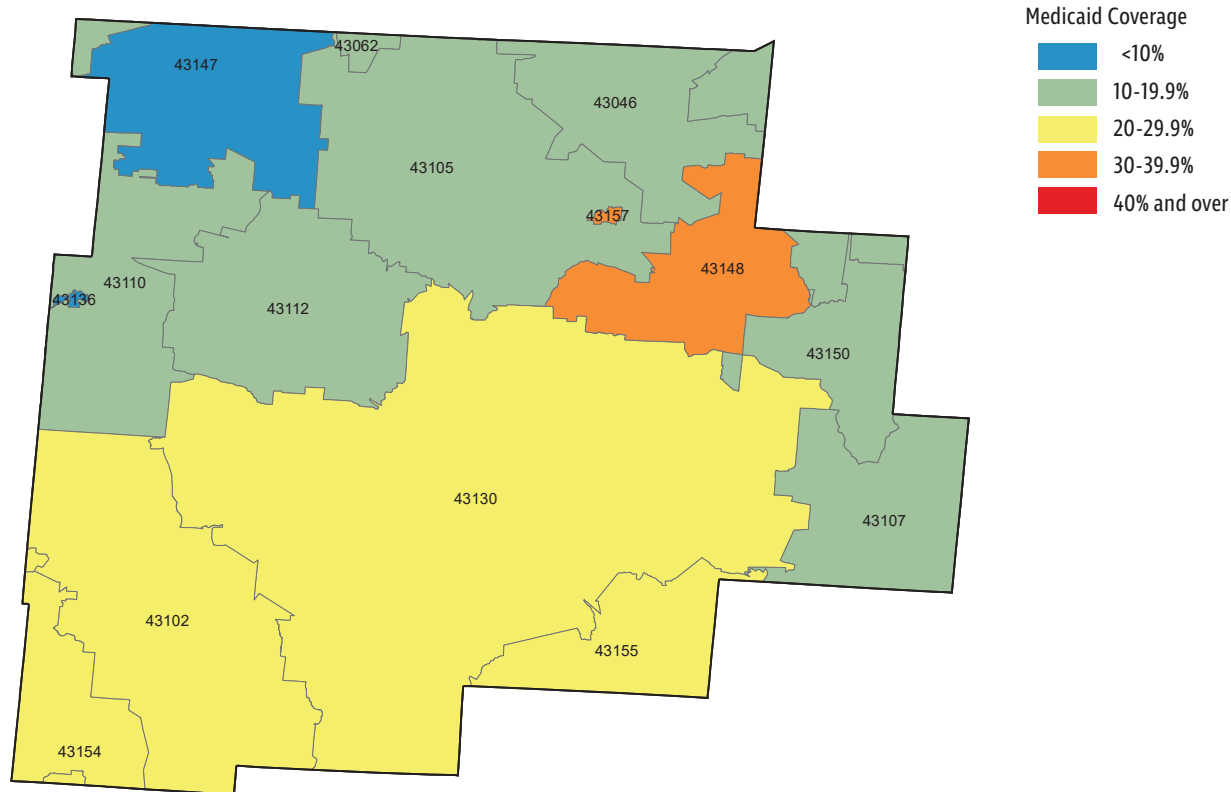


Source: U.S. Census Bureau, 2013-2017 American Community Survey 5-Year Estimates.



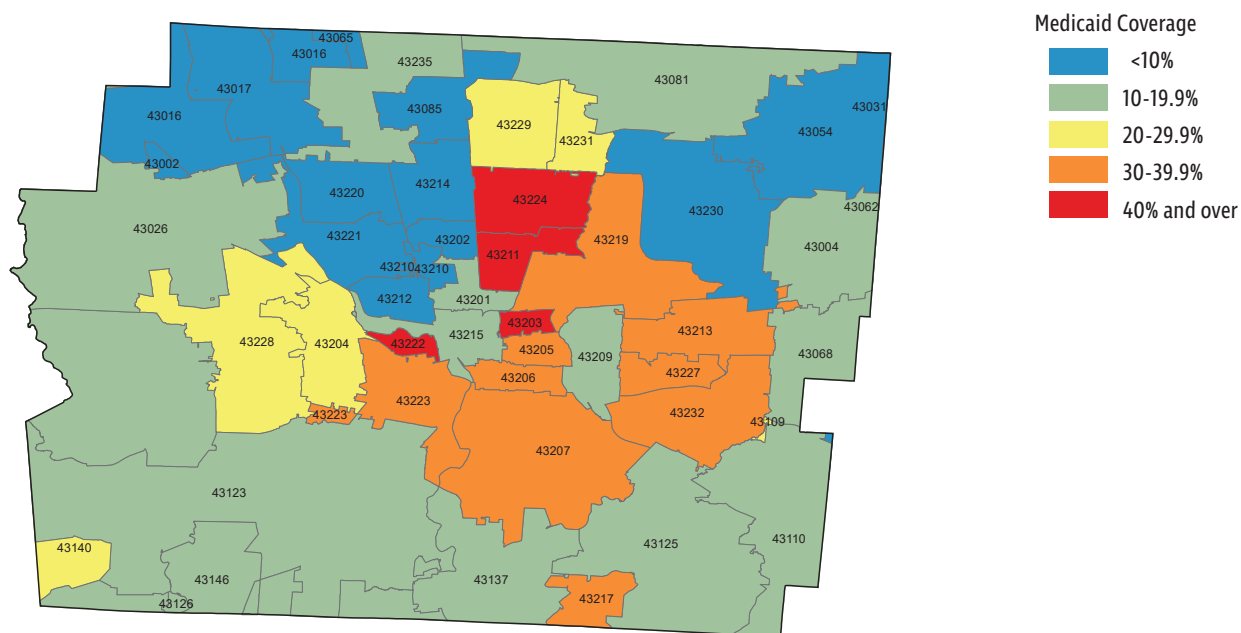


**Figure 60: Percentage of population with Medicaid coverage (alone or in combination) by ZIP code, Fairfield County, 2013-2017**



Source: U.S. Census Bureau, 2013-2017 American Community Survey 5-Year Estimates.

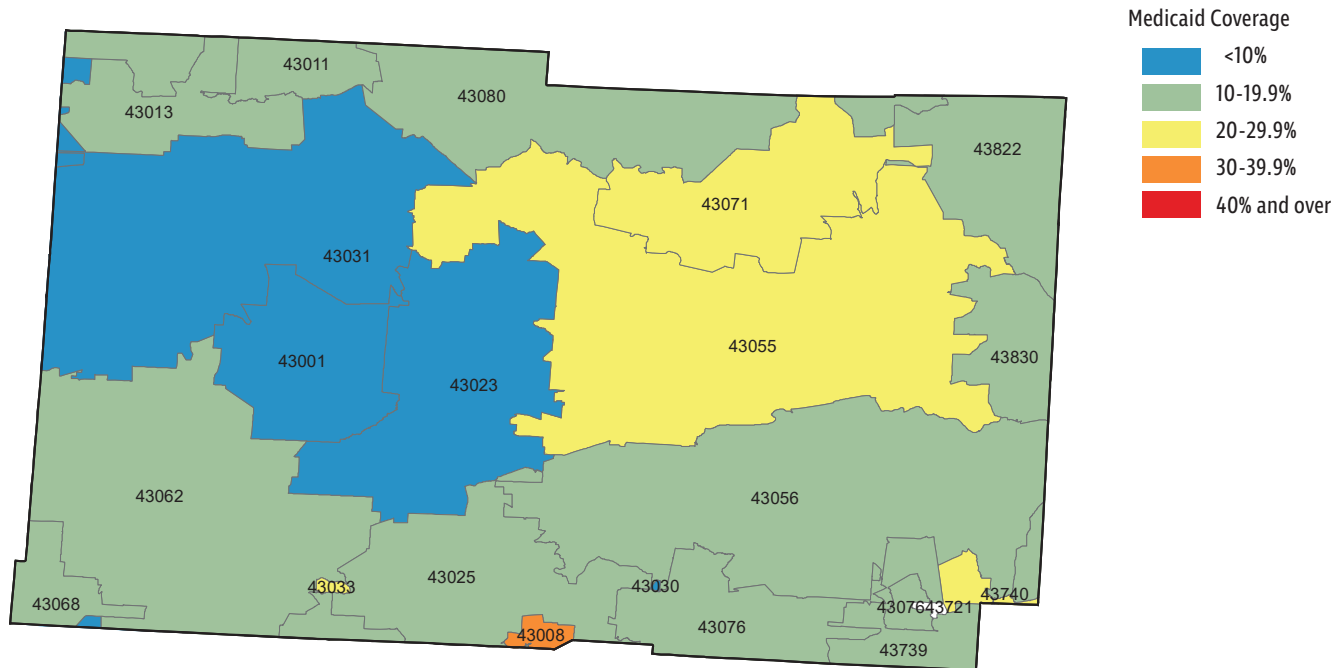
**Figure 61: Percentage of population with Medicaid coverage (alone or in combination) by ZIP code, Franklin County, 2013-2017**



Source: U.S. Census Bureau, 2013-2017 American Community Survey 5-Year Estimates.

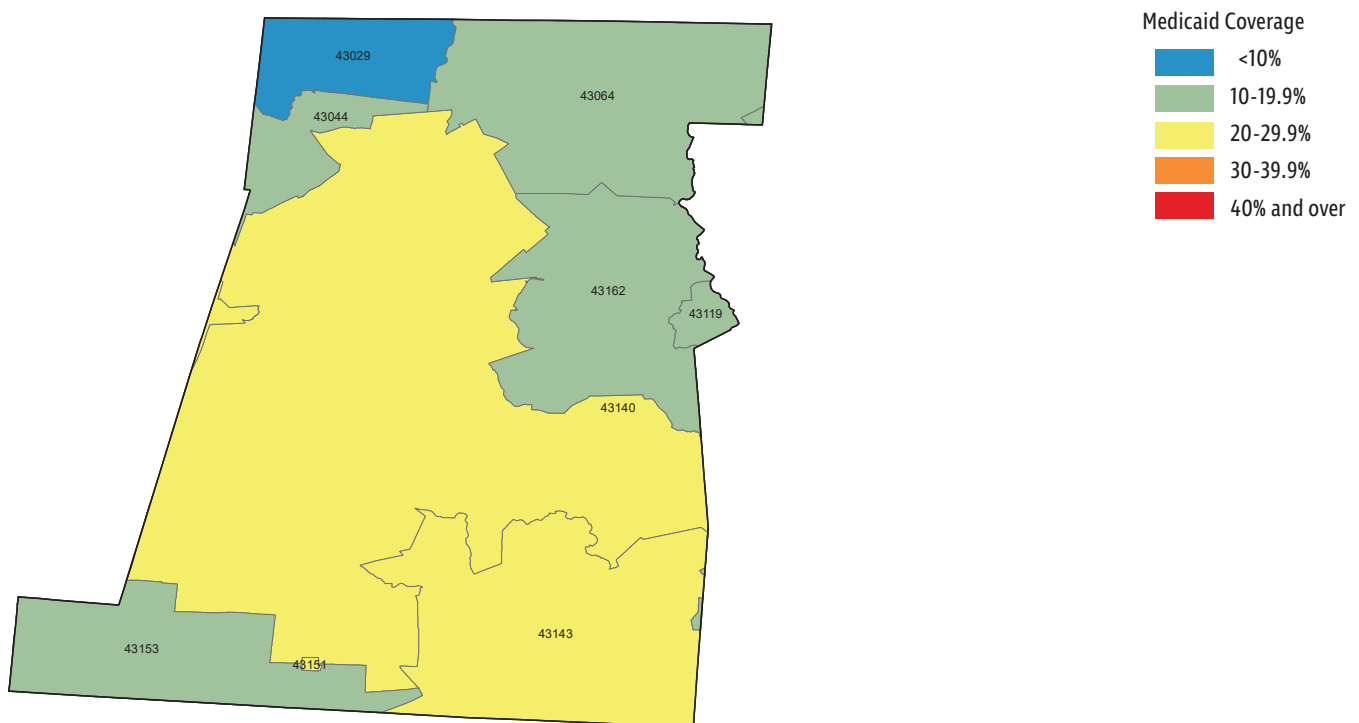


**Figure 62: Percentage of population with Medicaid coverage (alone or in combination) by ZIP code, Licking County, 2013-2017**



Source: U.S. Census Bureau, 2013-2017 American Community Survey 5-Year Estimates.

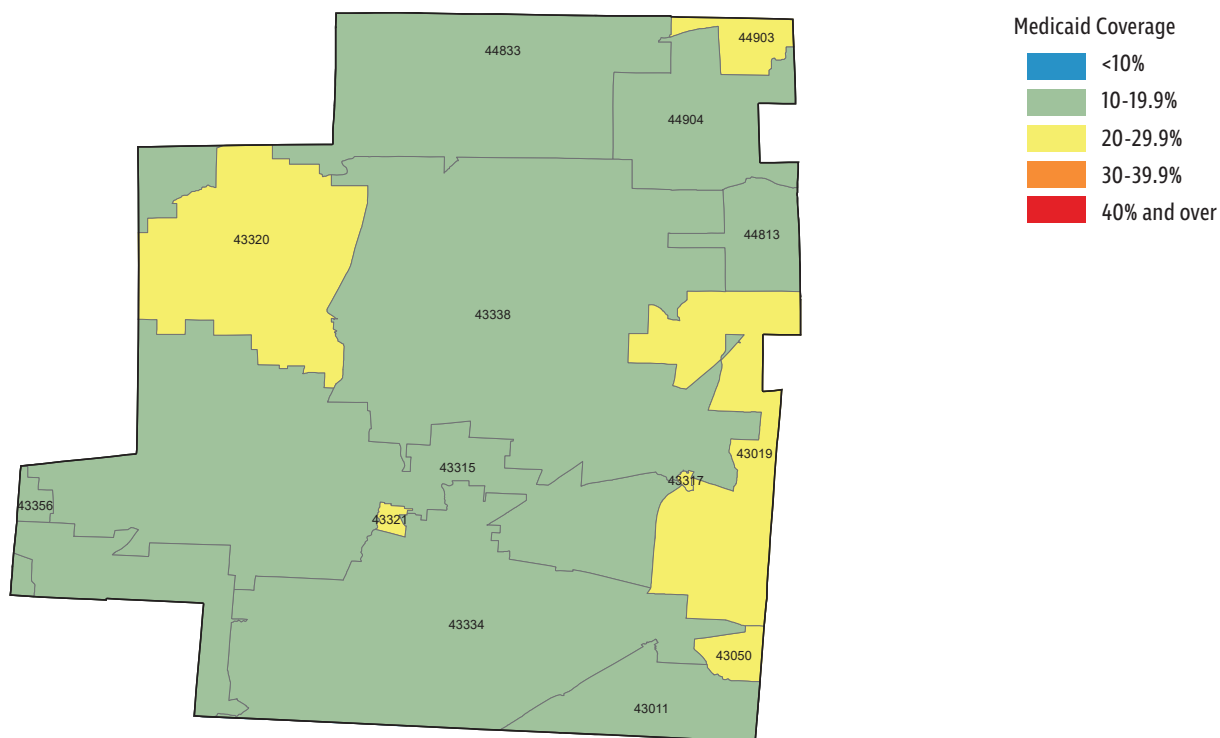
**Figure 63: Percentage of population with Medicaid coverage (alone or in combination) by ZIP code, Madison County, 2013-2017**



Source: U.S. Census Bureau, 2013-2017 American Community Survey 5-Year Estimates.

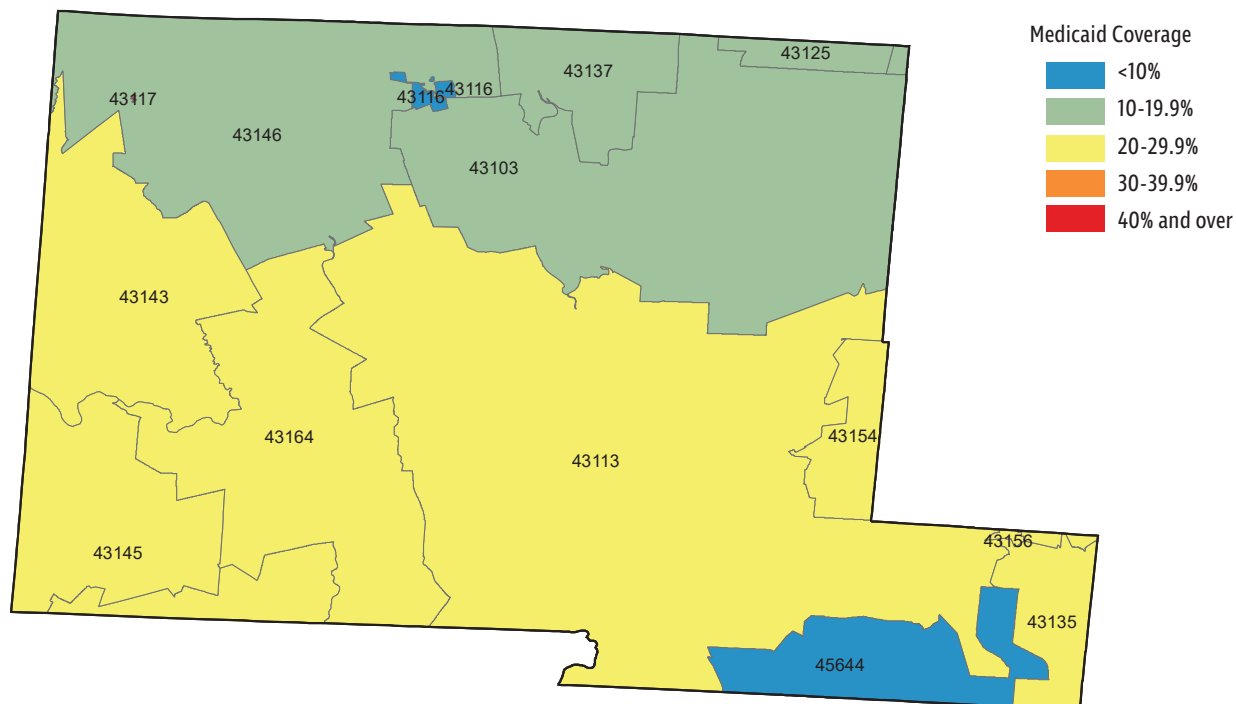


**Figure 64: Percentage of population with Medicaid coverage (alone or in combination) by ZIP code, Morrow County, 2013-2017**



Source: U.S. Census Bureau, 2013-2017 American Community Survey 5-Year Estimates.

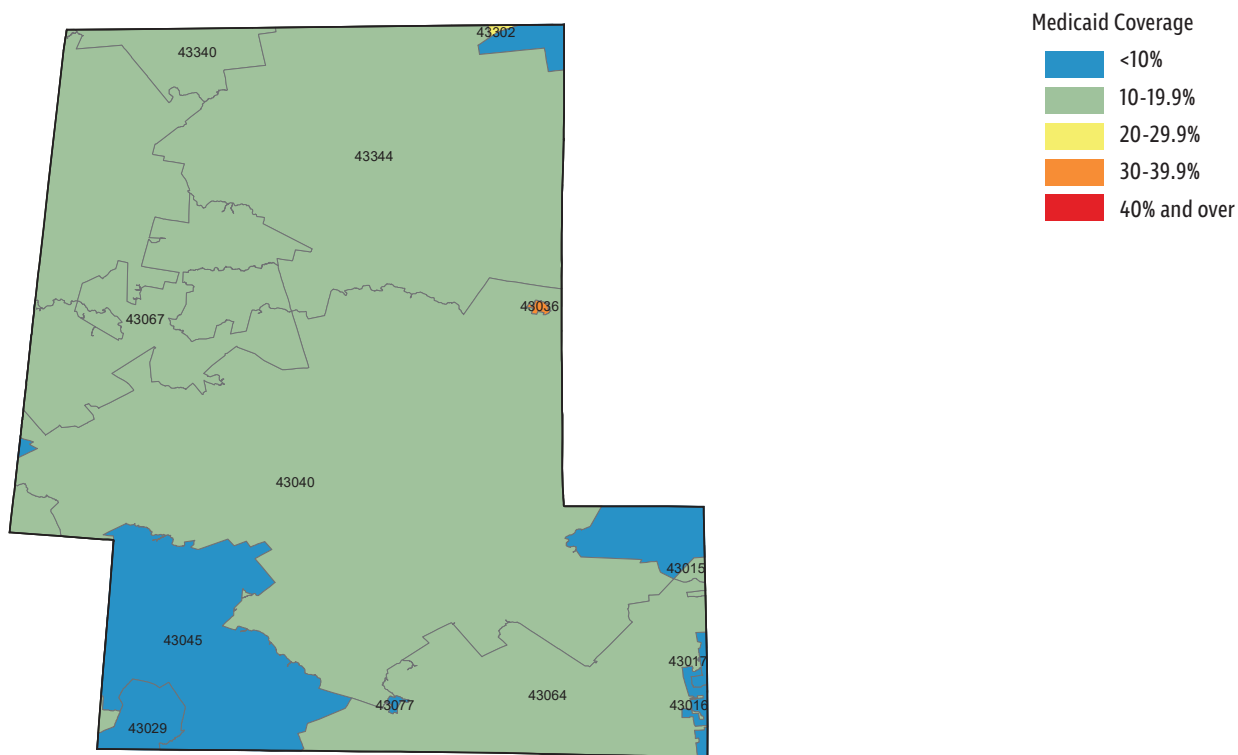
**Figure 65: Percentage of population with Medicaid coverage (alone or in combination) by ZIP code, Pickaway County, 2013-2017**



Source: U.S. Census Bureau, 2013-2017 American Community Survey 5-Year Estimates.



**Figure 66: Percentage of population with Medicaid coverage (alone or in combination) by ZIP code, Union County, 2013-2017**



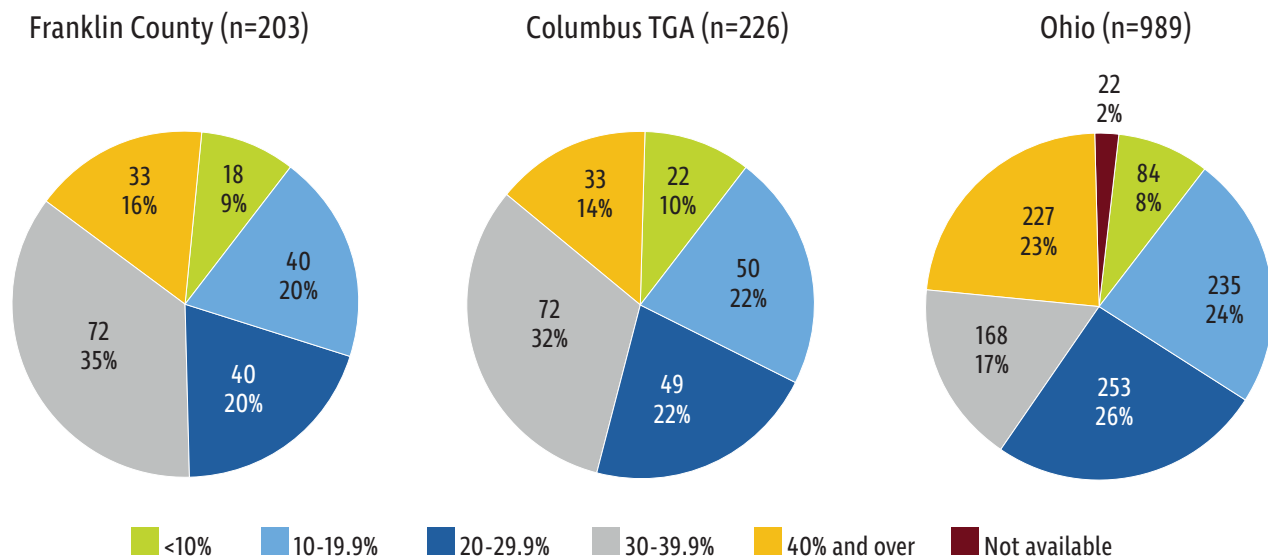
Source: U.S. Census Bureau, 2013-2017 American Community Survey 5-Year Estimates.

Figure 67 depicts the number of new diagnoses of HIV infection in Franklin County, in the Columbus TGA, and in Ohio, in 2018, by area-based percentage of Medicaid coverage. Eighteen of the 203 new diagnoses of HIV in Franklin County in 2018 were among persons who resided in ZIP codes where less than 10% of the population had Medicaid coverage. There were 40 new diagnoses of HIV in Franklin County in 2018 among persons who resided in ZIP codes where 10% to 19.9% of the population had Medicaid coverage, 40 among persons residing in ZIP codes where 20% to 29.9% had Medicaid coverage, 72 among persons residing in ZIP codes where 30% to 39.9% had Medicaid coverage, and 33 among persons residing in ZIP codes where 40% or more had Medicaid coverage.

Twenty-two of the 203 new diagnoses of HIV in the Columbus TGA in 2018 were among persons who resided in ZIP codes where less than 10% of the population had Medicaid coverage. There were 50 new diagnoses of HIV in the Columbus TGA in 2018 among persons who resided in ZIP codes where 10% to 19.9% of the population had Medicaid coverage, 49 among persons residing in ZIP codes where 20% to 29.9% had Medicaid coverage, 72 among persons residing in ZIP codes where 30% to 39.9% had Medicaid coverage, and 33 among persons residing in ZIP codes where 40% or more had Medicaid coverage.



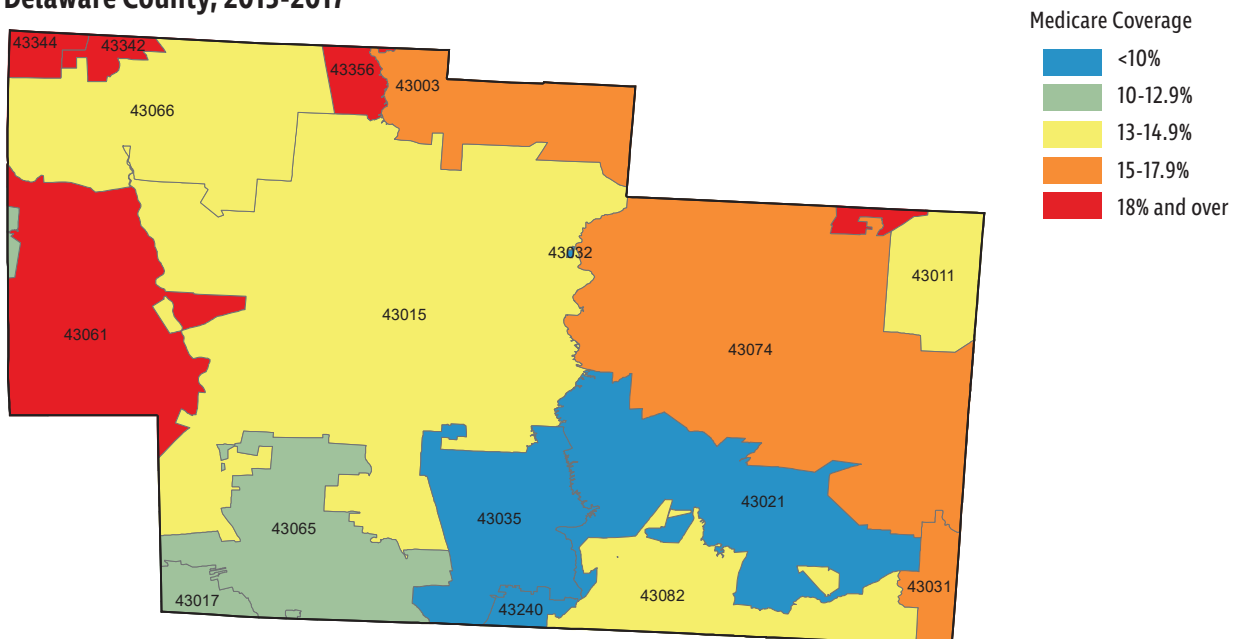
**Figure 67: Number of new diagnoses of HIV infection in 2018 by area-based percentage of population with Medicaid coverage**



Source: U.S. Census Bureau, 2013-2017 American Community Survey 5-Year Estimates.

**Medicare coverage:** Of Franklin County's population, 12.5% has Medicaid coverage (alone or in combination), compared with 13.6% for the Columbus TGA and 17.8% for all of Ohio. The map below depicts each ZIP code in the Columbus TGA and what percentage of the population has Medicare coverage.

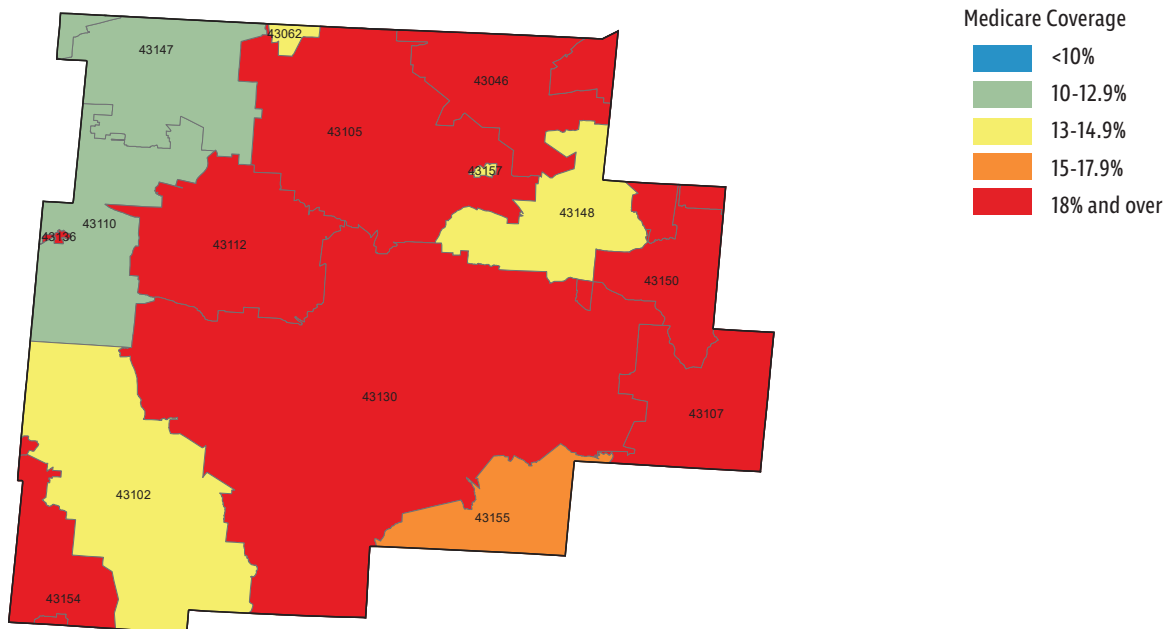
**Figure 68: Percentage of population with Medicare coverage (alone or in combination) by ZIP code, Delaware County, 2013-2017**



Source: U.S. Census Bureau, 2013-2017 American Community Survey 5-Year Estimates.

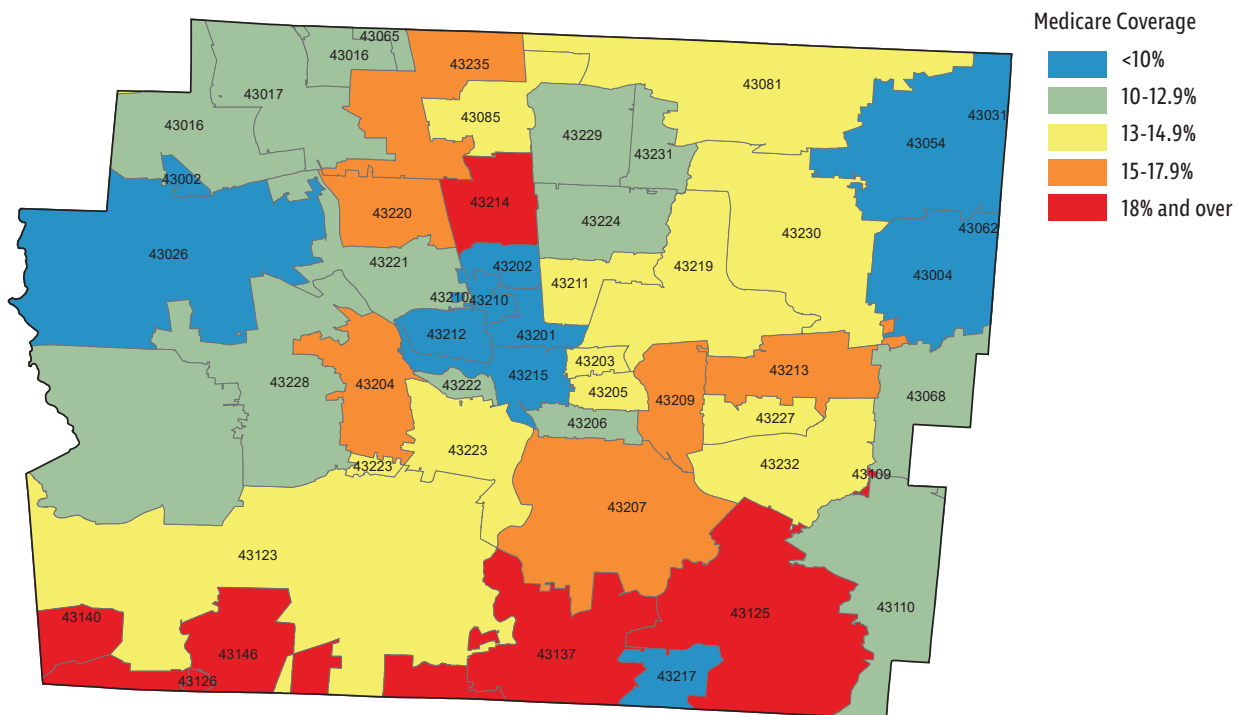


**Figure 69: Percentage of population with Medicare coverage (alone or in combination) by ZIP code, Fairfield County, 2013-2017**



Source: U.S. Census Bureau, 2013-2017 American Community Survey 5-Year Estimates.

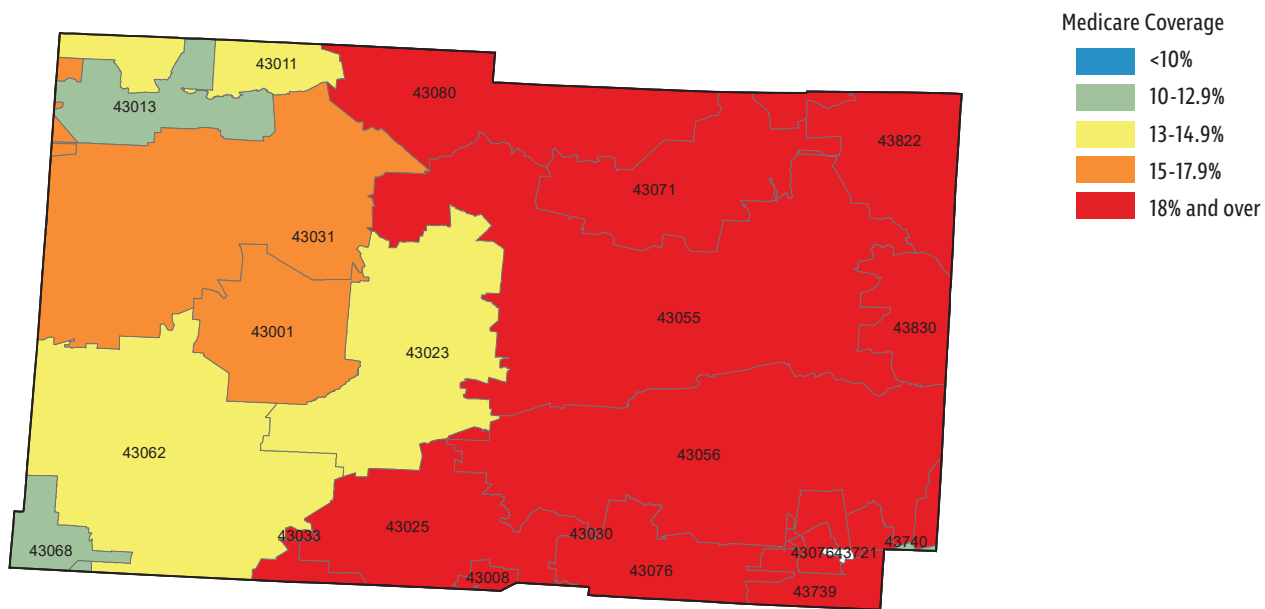
**Figure 70: Percentage of population with Medicare coverage (alone or in combination) by ZIP code, Franklin County, 2013-2017**



Source: U.S. Census Bureau, 2013-2017 American Community Survey 5-Year Estimates.

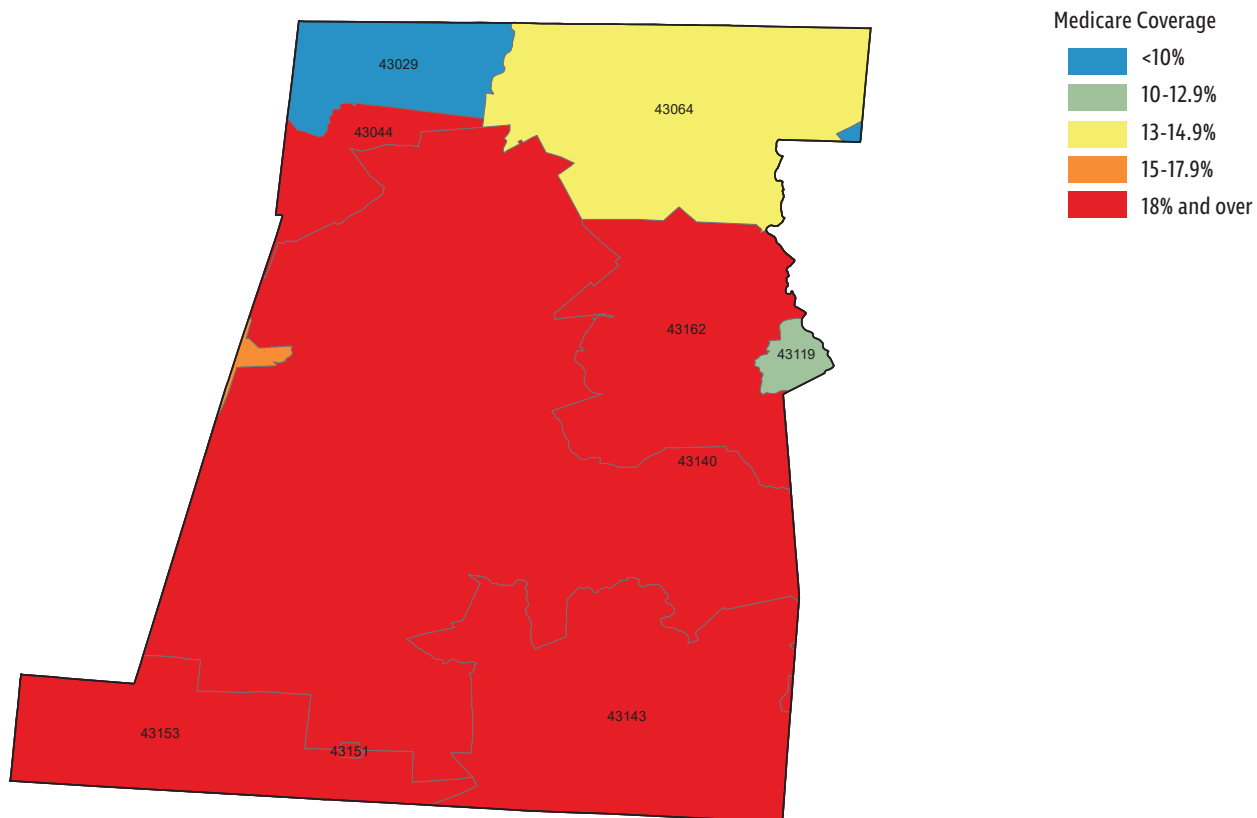


**Figure 71: Percentage of population with Medicare coverage (alone or in combination) by ZIP code, Licking County, 2013-2017**



Source: U.S. Census Bureau, 2013-2017 American Community Survey 5-Year Estimates.

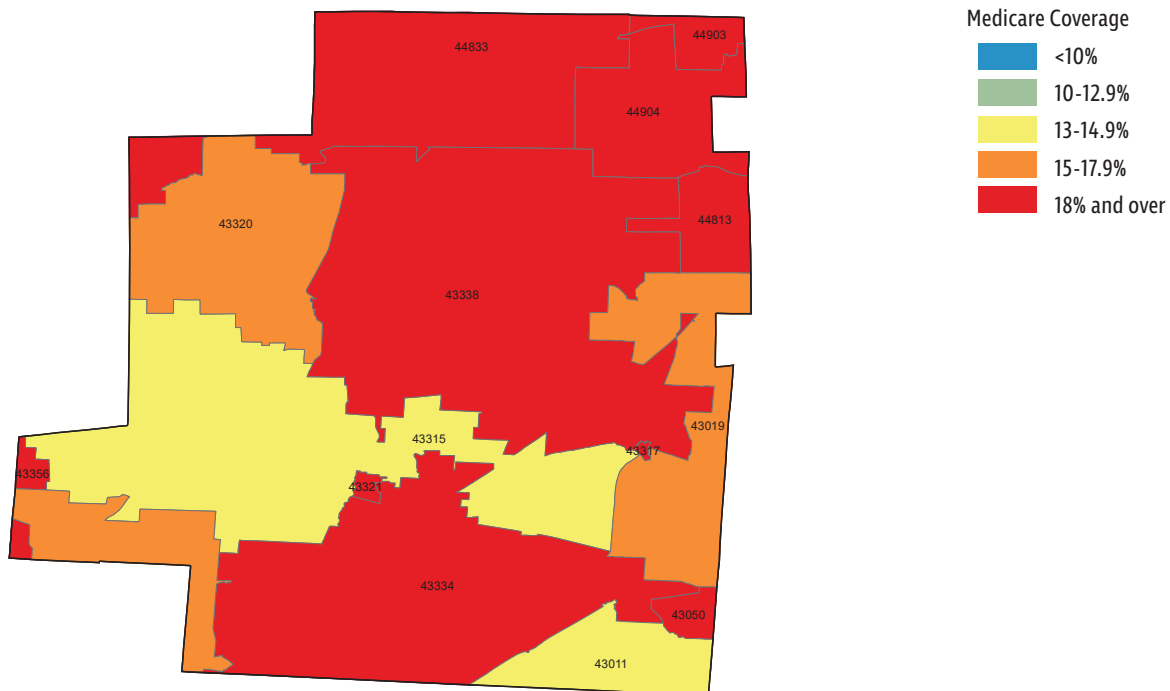
**Figure 72: Percentage of population with Medicare coverage (alone or in combination) by ZIP code, Madison County, 2013-2017**



Source: U.S. Census Bureau, 2013-2017 American Community Survey 5-Year Estimates.

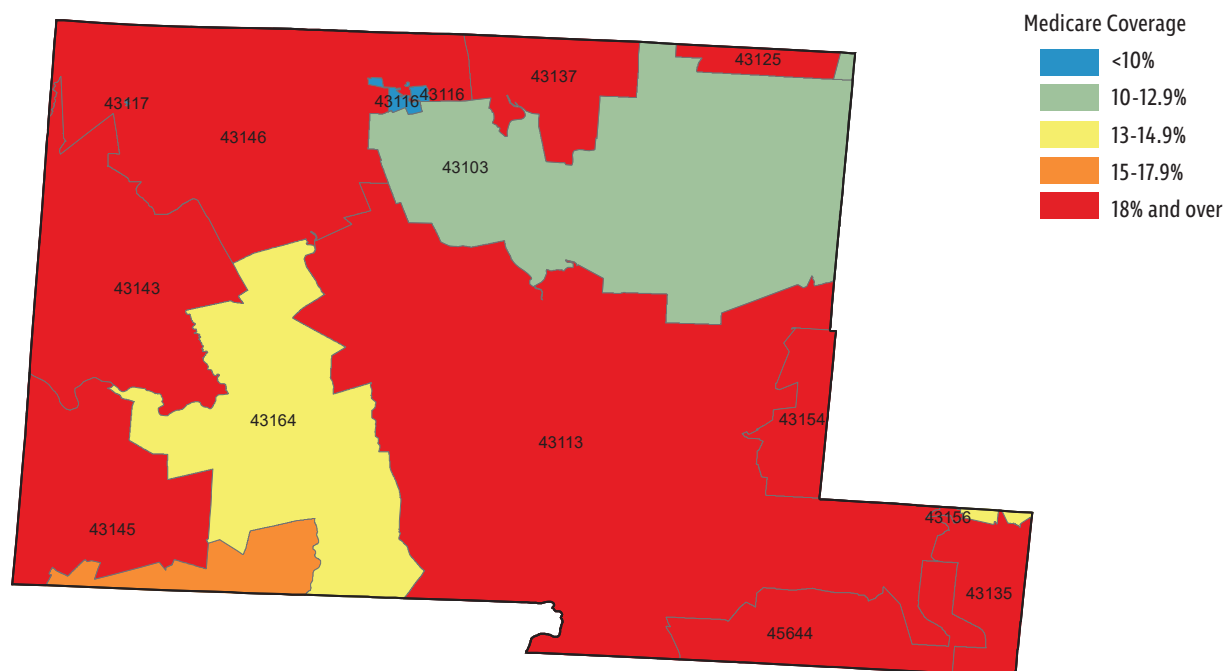


**Figure 73: Percentage of population with Medicare coverage (alone or in combination) by ZIP code, Morrow County, 2013-2017**



Source: U.S. Census Bureau, 2013-2017 American Community Survey 5-Year Estimates.

**Figure 74: Percentage of population with Medicare coverage (alone or in combination) by ZIP code, Pickaway County, 2013-2017**

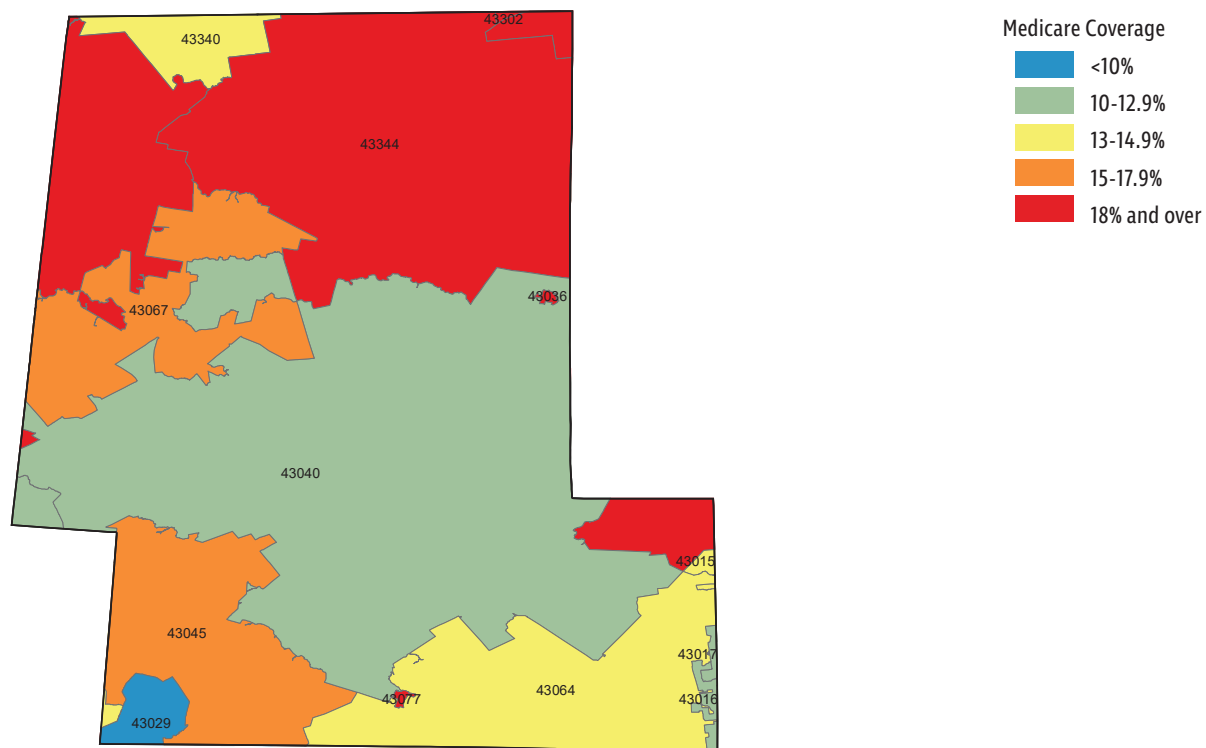


Source: U.S. Census Bureau, 2013-2017 American Community Survey 5-Year Estimates.





**Figure 75: Percentage of population with Medicare coverage (alone or in combination) by ZIP code, Union County, 2013-2017**



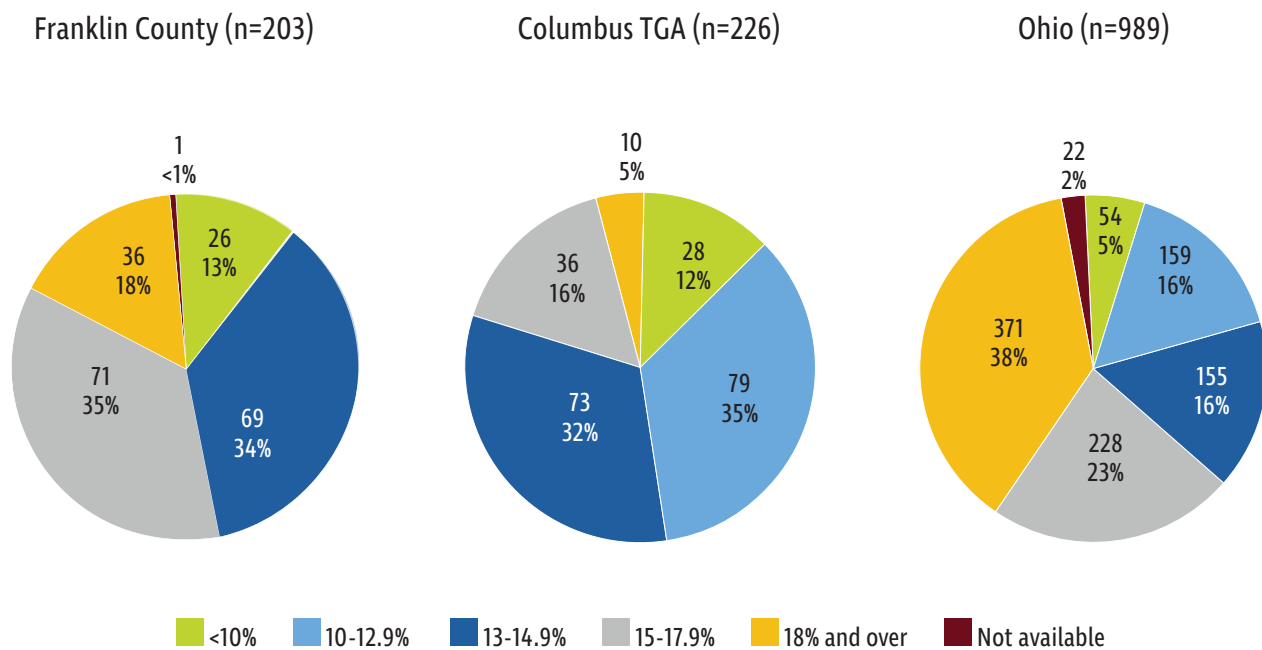
Source: U.S. Census Bureau, 2013-2017 American Community Survey 5-Year Estimates.



Figure 76 depicts the number of new diagnoses of HIV infection in Franklin County, in the Columbus TGA, and in Ohio in 2018, by area-based percentage of Medicare coverage. Twenty-six of the 203 new diagnoses of HIV in Franklin County in 2018 were among persons who resided in ZIP codes where less than 10% of the population had Medicare coverage. There were 69 new diagnoses of HIV in Franklin County in 2018 among persons who resided in ZIP codes where 10% to 12.9% of the population had Medicare coverage, 71 among persons residing in ZIP codes where 13% to 14.9% had Medicare coverage, 36 among persons residing in ZIP codes where 15% to 17.9% had Medicare coverage, and one among persons residing in ZIP codes where 18% or more had Medicare coverage.

Twenty-eight of the 226 new diagnoses of HIV in the Columbus TGA in 2018 were among persons who resided in ZIP codes where less than 10% of the population had Medicare coverage. There were 79 new diagnoses of HIV in the Columbus TGA in 2018 among persons who resided in ZIP codes where 10% to 12.9% of the population had Medicare coverage, 73 among persons residing in ZIP codes where 13% to 14.9% had Medicare coverage, 36 among persons residing in ZIP codes where 15% to 17.9% had Medicare coverage, and 10 among persons residing in ZIP codes where 18% or more had Medicare coverage.

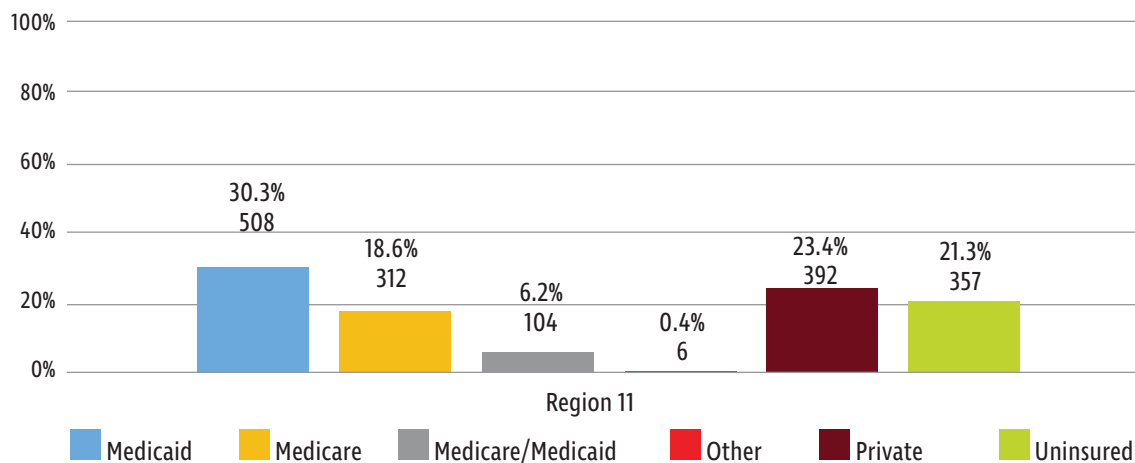
**Figure 76: Number of new diagnoses of HIV infection in 2018 by area-based percentage of population with Medicare coverage**



Source: U.S. Census Bureau, 2013-2017 American Community Survey 5-Year Estimates.



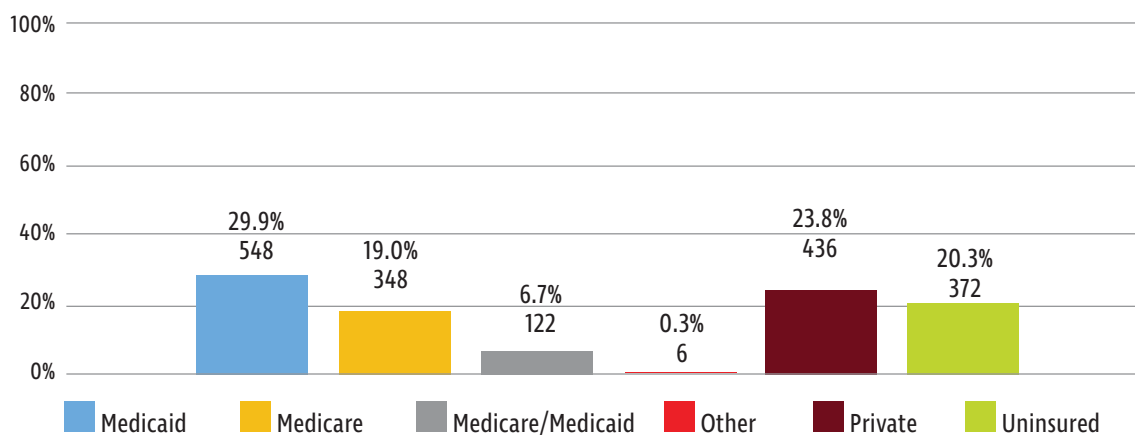
**Figure 77: Percentage of Part B clients by health insurance coverage, Franklin County, 2018**



Note: Clients enrolled in the Ryan White Part B Program may also receive services from other pay sources (e.g., other Ryan White Parts, Medicaid).

Source: Ryan White Application Database. Data reported through Nov. 14, 2019

**Figure 78: Percentage of Part B clients by health insurance coverage, Columbus TGA, 2018**



**Table 37: Number of Part A clients by health insurance coverage, 2018**

Type of Insurance	Percentage of Clients, Franklin County	Percentage of Clients, Columbus TGA
Medicaid	40.59% (779)	39.96% (808)
Medicare	12.51% (240)	13.06% (264)
Private (employer)	12.51% (240)	12.76% (258)
Private (individual)	7.30% (140)	7.27% (147)
Other	11.52% (221)	11.52% (233)
No Insurance	14.28% (274)	14.09% (285)
Unknown	1.30% (25)	1.34% (27)

Note: Thirty-six percent of insurance status is missing.

Source: Ryan White Part A-Cleveland. Data reported through Nov. 30, 2019.

**Transportation:** In Franklin County, there were 496,337 occupied housing units. Of these, 8% had no vehicle available. In the Columbus TGA, there were 750,221 occupied housing units. Of these, 7% had no vehicle available.



There were 17,701 workers 16 years of age and over with no vehicle available for transportation to work. Twenty-eight percent of these workers used public transportation (excluding taxicabs) to commute to work.

**Housing status:** In 2018, 81% of Ryan White Part B clients in both Franklin County and the Columbus TGA had stable housing. In both Franklin County and the Columbus TGA, 13% had temporary housing, and 6% were homeless. Overall, in Columbus and Franklin County, according to the Community Shelter Board as of January 2019, there were 1,447 persons in a shelter, 382 unsheltered persons, and 78 persons in transitional housing.

**Table 38: Percentage of Ryan White Part B clients by selected characteristics and housing status, Columbus TGA, 2018**

Client Demographics, N=1,797	Percentage and Number of Total Clients, 2018		
	Stable Housing	Temporary Housing	Homeless
<b>Gender</b>			
Male	77% (1,117)	81% (185)	79% (92)
Female	21% (311)	15% (35)	18% (21)
Transgender	2% (24)	3% (7)	3% (4)
Unknown	<1% (1)	-	-
<b>Race</b>			
Black or African American	44% (638)	59% (135)	54% (63)
More than one race	1% (20)	2% (4)	3% (4)
Other	1% (19)	2% (4)	-
White	47% (678)	34% (78)	40% (47)
Hispanic/Latinx	7% (98)	3% (6)	3% (3)
<b>Federal Poverty Level</b>			
<100	42% (616)	67% (153)	75% (88)
100-138	13% (189)	8% (19)	8% (210)
139-200	19% (277)	15% (34)	11% (13)
201-250	13% (189)	7% (15)	3% (3)
251-300	12% (174)	3% (6)	3% (3)
>300	<1% (8)	-	-
<b>Age</b>			
0-12 Years	-	<1% (1)	-
13-24 Years	2% (30)	5% (11)	3% (4)
25-44 Years	41% (595)	51% (116)	62% (72)
45-64 Years	50% (730)	40% (91)	33% (39)
>=65 Years	7% (98)	4% (8)	2% (2)
<b>Viral Suppression</b>			
Yes	85% (1,229)	71% (162)	70% (82)
No	8% (120)	18% (40)	22% (26)
Missing	7% (104)	11% (25)	8% (9)
<b>Total % of Clients</b>	<b>81% (1,453)</b>	<b>13% (227)</b>	<b>6% (117)</b>

*Note: Clients enrolled in the Ryan White Part C Program may also receive services from other pay sources (e.g., other Ryan White Parts, Medicaid).*

*Source: Ryan White Application Database. Data reported through Nov. 14, 2019.*

In 2018, 83% of Part A clients in both Franklin County and the Columbus TGA had stable/permanent housing. In both Franklin County and the Columbus TGA, 11% had temporary housing and 5% had unstable housing. However, more than 50% of housing status is missing.



## TREAT: Treat people with HIV rapidly and effectively to reach sustained viral suppression

### Prevalence: Persons Living With Diagnosed HIV Infection

As of Dec. 31, 2018, there were 5,247 persons living with diagnosed HIV infection in Franklin County. Of these, 55% were living with an HIV (not AIDS) diagnosis, and 45% were living with a stage 3 (AIDS) diagnosis. The rate of persons living with diagnosed HIV infection in Franklin County in 2018 was 400.4. Twenty-four persons living with diagnosed HIV infection are currently incarcerated in a state or federal correctional facility in Franklin County as of Dec. 31, 2018. However, these 24 cases are not reflected in the total number of persons living with diagnosed HIV infection in Franklin County. Rather, these 24 cases are assigned 'No County,' and included in the total number for Ohio. There are 32 persons living with diagnosed HIV incarcerated in a jail in Franklin County as of Dec. 31, 2018, and these cases are reflected in the total for Franklin County.

As of Dec. 31, 2018, there were 5,871 persons living with diagnosed HIV infection in the Columbus TGA. Of these, 54% were living with an HIV (not AIDS) diagnosis, and 46% were living with a stage 3 (AIDS) diagnosis. The rate of persons living with diagnosed HIV infection in the Columbus TGA in 2018 was 287.5. There are 292 persons living with diagnosed HIV infection currently incarcerated in a state or federal correctional facility in the Columbus TGA as of Dec. 31, 2018. However, these 292 cases are not reflected in the total number of persons living with diagnosed HIV infection in the Columbus TGA. Rather, these 292 cases are assigned 'No County,' and included in the total number for Ohio. There are 37 persons living with diagnosed HIV incarcerated in a jail in the Columbus TGA as of Dec. 31, 2018, and these cases are reflected in the total for the Columbus TGA.

**Sex at birth:** Males accounted for 80% of persons living with diagnosed HIV infection in Franklin County and the Columbus TGA at the end of 2018, while females accounted for 20%. The rate of males living with diagnosed HIV infection was more than four times higher in 2018 than that of females in both Franklin County and the Columbus TGA.

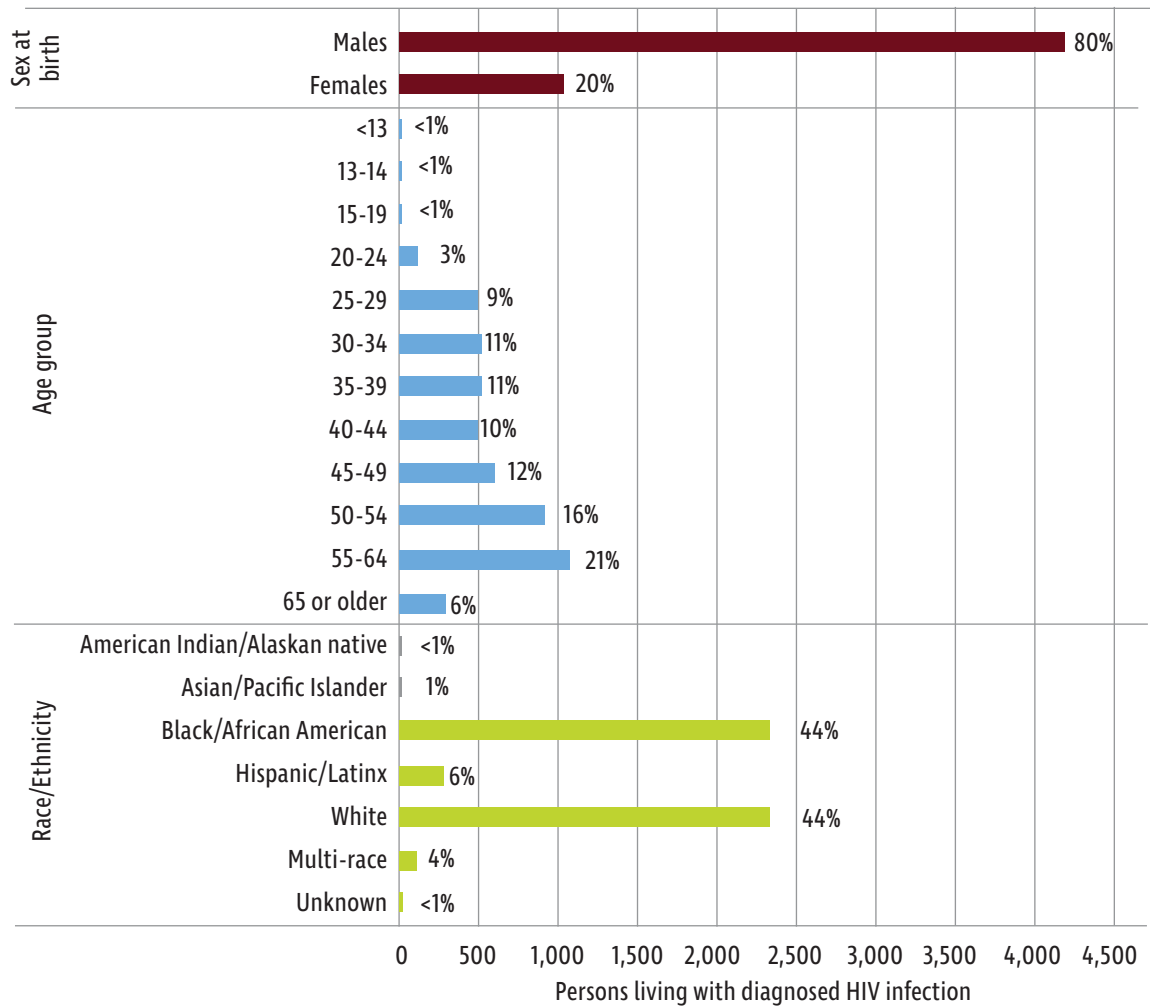
**Current age:** At the end of 2018, 55% of all persons living with diagnosed HIV infection in Franklin County, and 57% in the Columbus TGA, were 45 years of age and older. In Franklin County, rates of persons living with diagnosed HIV infection were highest among persons aged 50 to 54, 45 to 49, and 55 to 64, (1,082.7, 821.1, and 746.8, respectively). These age group-specific rates will continue to rise as persons age and live longer as a result of treatment adherence and related retention in care intervention successes.

**Race/ethnicity:** Blacks/African Americans and whites each make up 44% of persons living with diagnosed HIV infection in Franklin County. However, the rate for Blacks/African Americans (771.0) was nearly three times as high as that for whites (283.5). Blacks/African Americans make up 41% of persons living with diagnosed HIV infection in the Columbus TGA, while whites make up 47%.



However, the rate for Blacks/African Americans (727.0) was nearly four times as high as that for whites (189.7).

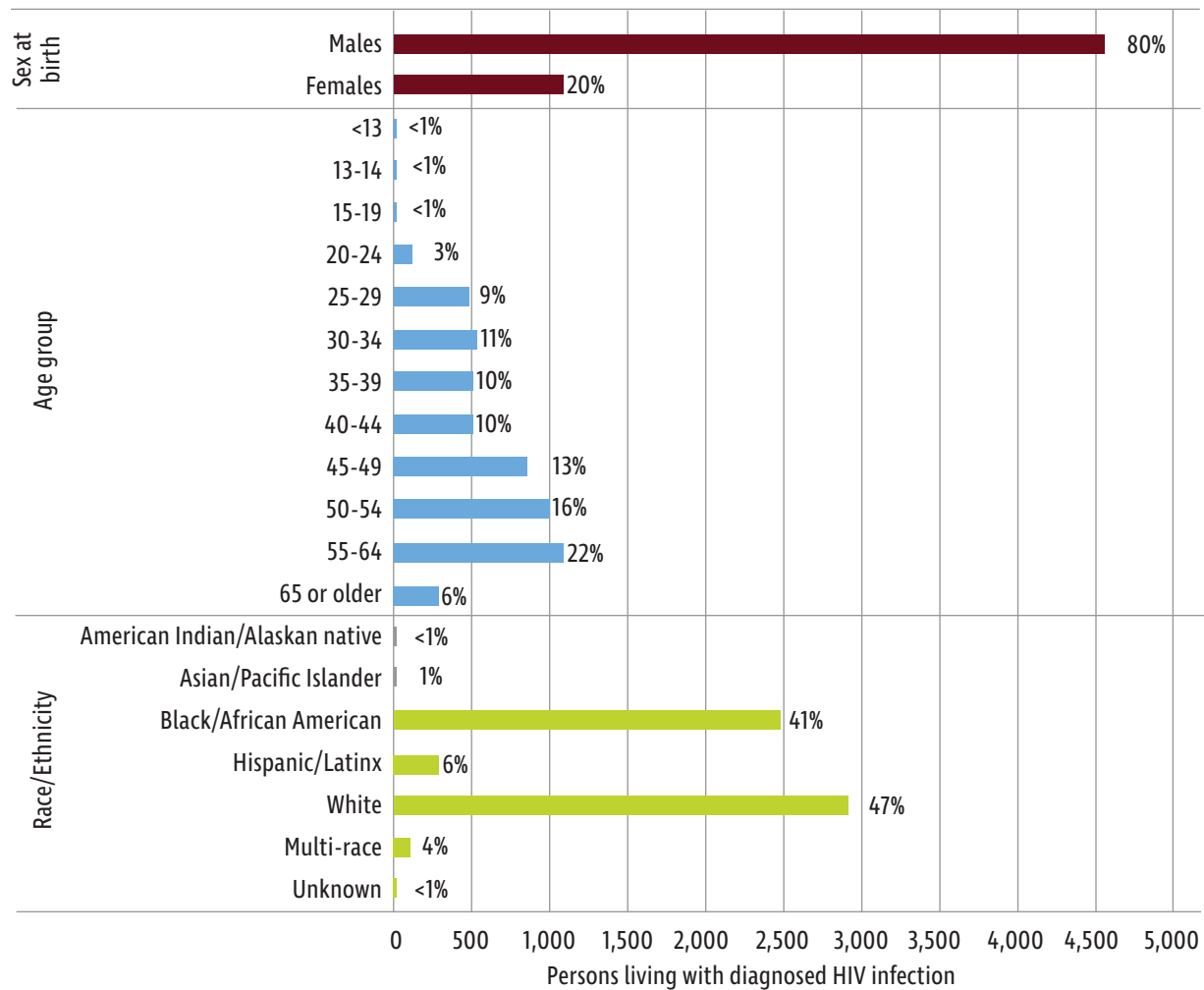
**Figure 79: Persons living with diagnosed HIV infection, Franklin County, 2018**



Source: Ohio Department of Health, HIV Surveillance Program. Data reported through June 30, 2019.



**Figure 80: Persons living with diagnosed HIV infection, Columbus TGA, 2018**



Source: Ohio Department of Health, HIV Surveillance Program. Data reported through June 30, 2019.



**Special Populations:** In Franklin County, Black/African American MSM accounted for 19% of the total number of persons living with diagnosed HIV in Franklin County in 2018. Here, the term MSM is defined as persons who were assigned male at birth, and who have a transmission category of 'male-to-male sexual contact' or 'male-to-male sexual contact/IDU.'

**Table 39: Black/African American MSM living with diagnosed HIV infection, Franklin County, 2018**

Age at end of year	Living with diagnosed HIV infection in 2018	
	No.	%
15-19	9	1%
20-24	62	6%
25-29	192	19%
30-34	205	20%
35-39	135	13%
40-44	93	9%
45-49	68	7%
50-54	99	10%
55-64	130	13%
65 or older	22	2%
<b>Total</b>	<b>1,015</b>	

*Note: Includes HIV transmission categories male-to-male sexual contact and male-to-male sexual contact/injection drug use.*

*Source: Ohio Department of Health, HIV Surveillance Program. Data reported through June 30, 2019.*

In the Columbus TGA, Black/African American MSM accounted for 18% of the total number of persons living with diagnosed HIV in the Columbus TGA in 2018. Here, the term MSM is defined as persons who were assigned male at birth, and who have a transmission category of 'male-to-male sexual contact' or 'male-to-male sexual contact/IDU.'

**Table 40: Black/African American MSM living with diagnosed HIV infection, Columbus TGA, 2018**

Age at end of year	Living with diagnosed HIV infection in 2018	
	No.	%
15-19	9	1%
20-24	66	6%
25-29	201	19%
30-34	212	20%
35-39	137	13%
40-44	99	9%
45-49	73	7%
50-54	104	10%
55-64	133	13%
65 or older	22	2%
<b>Total</b>	<b>1,056</b>	

*Note: Includes HIV transmission categories male-to-male sexual contact and male-to-male sexual contact/injection drug use.*

*Source: Ohio Department of Health, HIV Surveillance Program. Data reported through June 30, 2019.*





In Franklin County, persons aged 13 to 24 years made up 3% of the total number of persons living with diagnosed HIV infection in 2018.

**Table 41: Persons aged 13-24 living with HIV infection, Franklin County, 2018**

	Living with diagnosed HIV infection in 2018	
Characteristic	No.	%
<b>Sex at Birth</b>		
Males	138	83%
Females	28	17%
<b>Race / Ethnicity<sup>a</sup></b>		
American Indian/Alaska native	1	1%
Asian/Pacific Islander	5	3%
Black/African American	111	67%
Hispanic/Latinx	15	9%
White	29	17%
Multi-race	5	3%
<b>Transmission Category<sup>b</sup></b>		
<b>Male adult or adolescent</b>		
Male-to-male sexual contact	105	80%
Injection drug use (IDU)	5	4%
Male-to-male sexual contact and IDU	1	1%
Heterosexual contact	20	15%
Other/unknown	-	<1%
Subtotal	131	100%
<b>Female adult or adolescent</b>		
Injection drug use	1	5%
Heterosexual contact	21	95%
Other/unknown	-	-
Subtotal	22	100%
<b>Child (&lt;13 yrs. at diagnosis)</b>		
Perinatal	11	85%
Other/unknown	2	15%
Subtotal	13	100%
<b>Total</b>	<b>166</b>	

Notes:

Dash (-) indicates no cases were reported for the given category.

<sup>a</sup> Hispanics/Latinx may be of any race. Persons with a race of American Indian/Alaska native, Asian/Pacific Islander, Black/African American, white, or multi-race are not Hispanic. Asian/Pacific Islander includes native Hawaiians.

<sup>b</sup> Transmission categories are mutually exclusive, hierarchical risk categories determined by the CDC and system-calculated using sex at birth and risk factor history to determine mode of transmission. A person with multiple risks is only represented in the highest category based on the CDC hierarchical algorithm. Thus, transgender women are included in the male-to-male sexual contact transmission category if assigned male at birth and risk factor history indicates sex with males. Please note this is for the categorization of HIV transmission categories only and not to describe sexual orientation.

Source: Ohio Department of Health, HIV Surveillance Program. Data reported through June 30, 2019.



In Columbus TGA, persons aged 13 to 24 years made up 3% of the total number of persons living with diagnosed HIV infection in 2018.

**Table 42: Persons aged 13-24 living with HIV infection, Columbus TGA, 2018**

	Living with diagnosed HIV infection in 2018	
Characteristic	No.	%
<b>Sex at Birth</b>		
Males	157	80%
Females	39	20%
<b>Race/Ethnicity<sup>a</sup></b>		
American Indian/Alaska native	1	1%
Asian/Pacific Islander	7	4%
Black/African American	122	62%
Hispanic/Latinx	18	9%
White	40	20%
Multi-race	8	4%
<b>Transmission Category<sup>b</sup></b>		
<b>Male adult or adolescent</b>		
Male-to-male sexual contact	115	78%
Injection drug use (IDU)	8	5%
Male-to-male sexual contact and IDU	1	1%
Heterosexual contact	24	16%
Other/unknown	-	<1%
Subtotal	148	100%
<b>Female adult or adolescent</b>		
Injection drug use	1	4%
Heterosexual contact	25	93%
Other/unknown	1	4%
Subtotal	27	100%
<b>Child (&lt;13 yrs. at diagnosis)</b>		
Perinatal	19	90%
Other/unknown	2	10%
Subtotal	21	100%
<b>Total</b>	<b>196</b>	

Notes:

Dash (-) indicates no cases were reported for the given category.

<sup>a</sup> Hispanics/Latinx may be of any race. Persons with a race of American Indian/Alaska native, Asian/Pacific Islander, Black/African American, white, or multi-race are not Hispanic. Asian/Pacific Islander includes native Hawaiians.

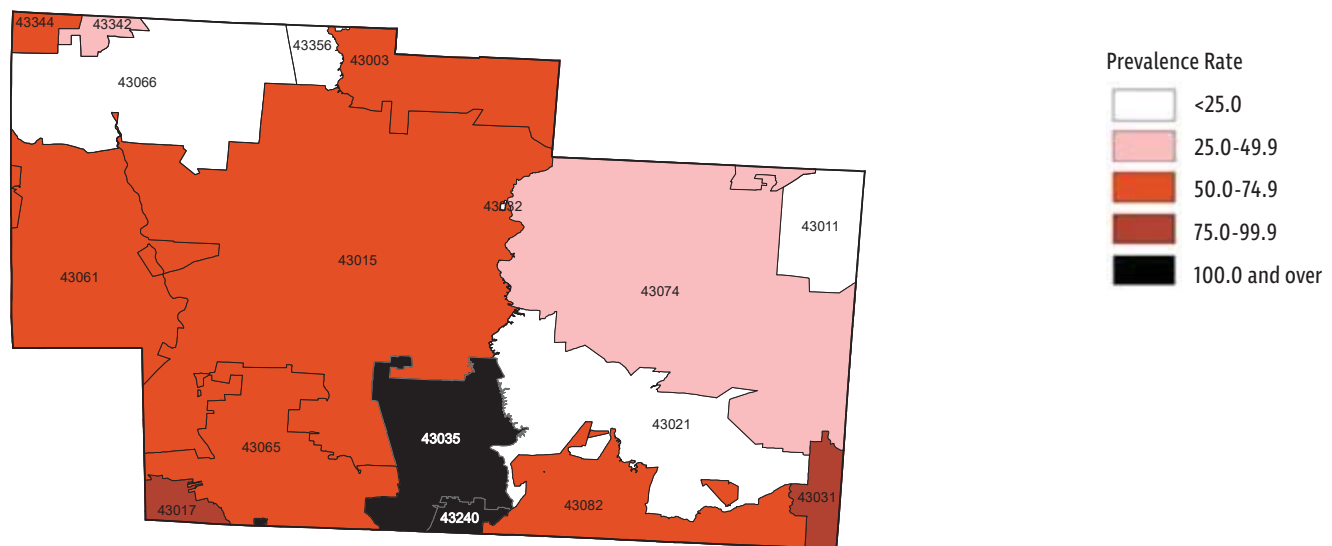
<sup>b</sup> Transmission categories are mutually exclusive, hierarchical risk categories determined by the CDC and system-calculated using sex at birth and risk factor history to determine mode of transmission. A person with multiple risks is only represented in the highest category based on the CDC hierarchical algorithm. Thus, transgender women are included in the male-to-male sexual contact transmission category if assigned male at birth and risk factor history indicates sex with males. Please note this is for the categorization of HIV transmission categories only and not to describe sexual orientation.

Source: Ohio Department of Health, HIV Surveillance Program. Data reported through June 30, 2019.



**ZIP code:** The ZIP codes with the highest rates of persons living with diagnosed HIV infection in Franklin County at the end of 2018 are: 43205, 43215, 43203, and 43206.

**Figure 81: Reported persons living with diagnosed HIV infection by ZIP code, Delaware County, 2018**



**Notes:**

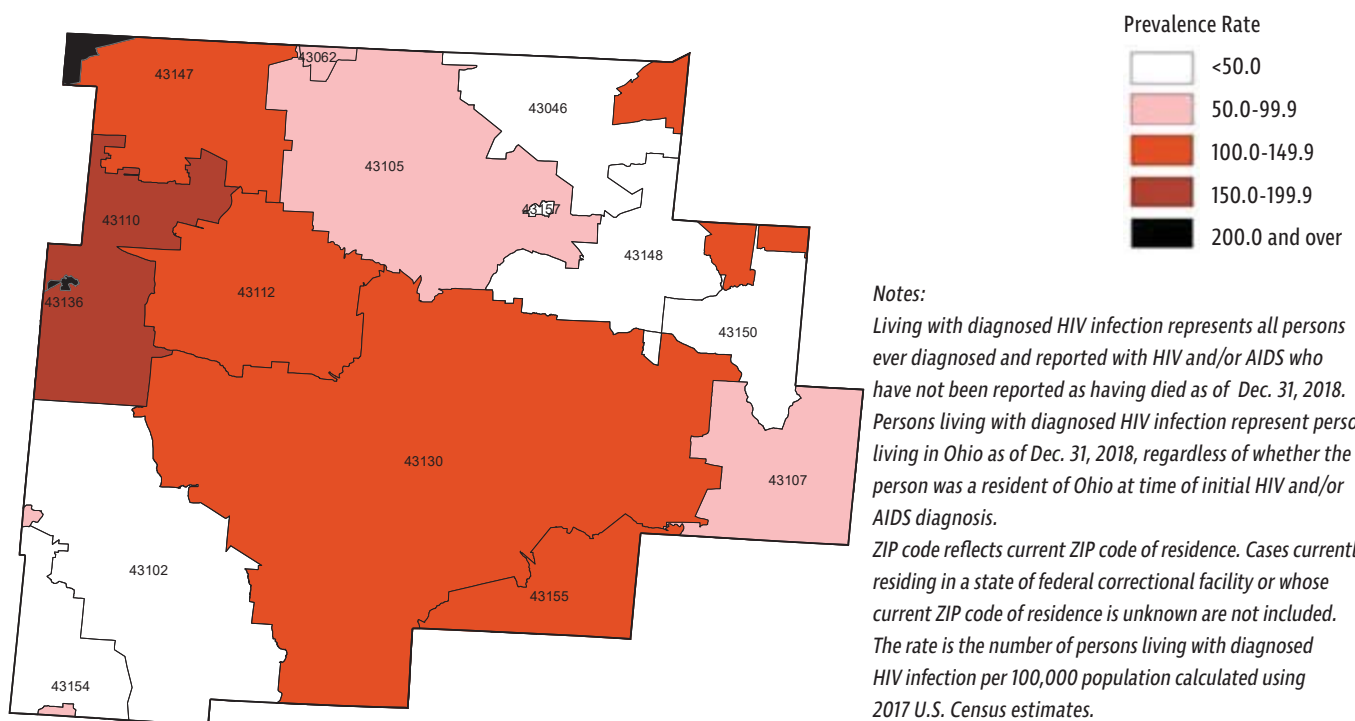
Living with diagnosed HIV infection represents all persons ever diagnosed and reported with HIV and/or AIDS who have not been reported as having died as of Dec. 31, 2018. Persons living with diagnosed HIV infection represent persons living in Ohio as of Dec. 31, 2018, regardless of whether the person was a resident of Ohio at time of initial HIV and/or AIDS diagnosis.

ZIP code reflects current ZIP code of residence. Cases currently residing in a state of federal correctional facility or whose current ZIP code of residence is unknown are not included.

The rate is the number of persons living with diagnosed HIV infection per 100,000 population calculated using 2017 U.S. Census estimates.

Source: Ohio Department of Health, HIV Surveillance Program. Data reported through June 30, 2019.

**Figure 82: Reported persons living with diagnosed HIV infection by ZIP code, Fairfield County, 2018**



**Notes:**

Living with diagnosed HIV infection represents all persons ever diagnosed and reported with HIV and/or AIDS who have not been reported as having died as of Dec. 31, 2018. Persons living with diagnosed HIV infection represent persons living in Ohio as of Dec. 31, 2018, regardless of whether the person was a resident of Ohio at time of initial HIV and/or AIDS diagnosis.

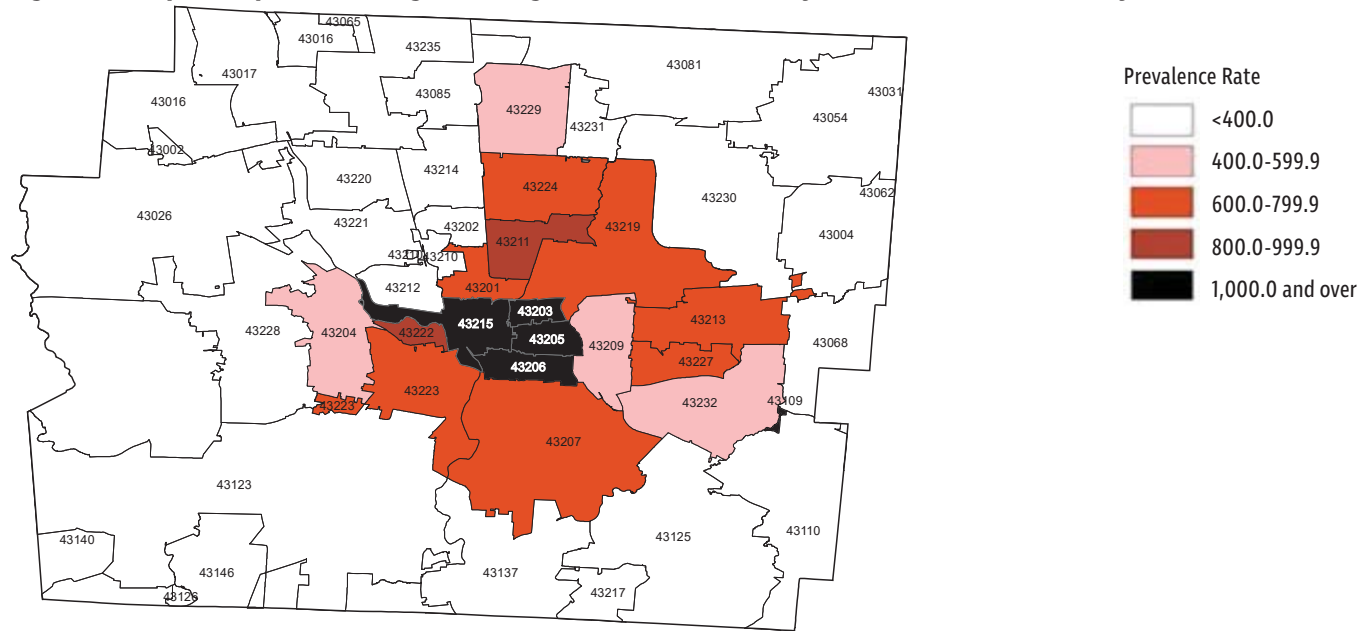
ZIP code reflects current ZIP code of residence. Cases currently residing in a state of federal correctional facility or whose current ZIP code of residence is unknown are not included.

The rate is the number of persons living with diagnosed HIV infection per 100,000 population calculated using 2017 U.S. Census estimates.

Source: Ohio Department of Health, HIV Surveillance Program. Data reported through June 30, 2019.



**Figure 83: Reported persons living with diagnosed HIV infection by ZIP code, Franklin County, 2018**



**Notes:**

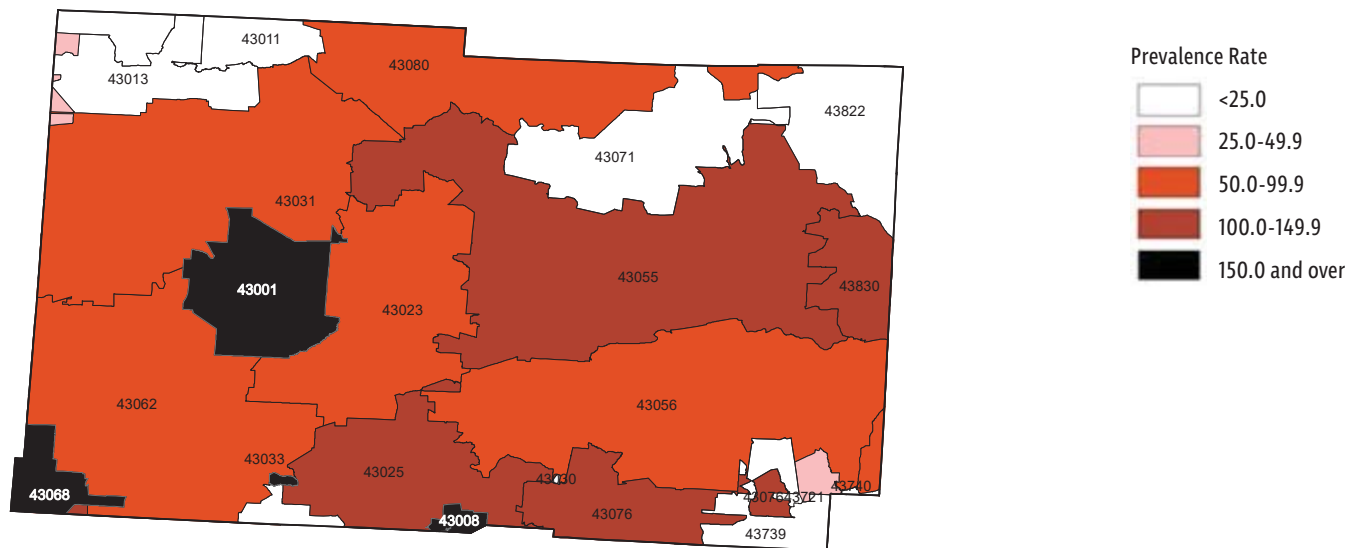
Living with diagnosed HIV infection represents all persons ever diagnosed and reported with HIV and/or AIDS who have not been reported as having died as of Dec. 31, 2018. Persons living with diagnosed HIV infection represent persons living in Ohio as of Dec. 31, 2018, regardless of whether the person was a resident of Ohio at time of initial HIV and/or AIDS diagnosis.

ZIP code reflects current ZIP code of residence. Cases currently residing in a state of federal correctional facility or whose current ZIP code of residence is unknown are not included.

The rate is the number of persons living with diagnosed HIV infection per 100,000 population calculated using 2017 U.S. Census estimates.

Source: Ohio Department of Health, HIV Surveillance Program. Data reported through June 30, 2019.

**Figure 84: Reported persons living with diagnosed HIV infection by ZIP code, Licking County, 2018**



**Notes:**

Living with diagnosed HIV infection represents all persons ever diagnosed and reported with HIV and/or AIDS who have not been reported as having died as of Dec. 31, 2018. Persons living with diagnosed HIV infection represent persons living in Ohio as of Dec. 31, 2018, regardless of whether the person was a resident of Ohio at time of initial HIV and/or AIDS diagnosis.

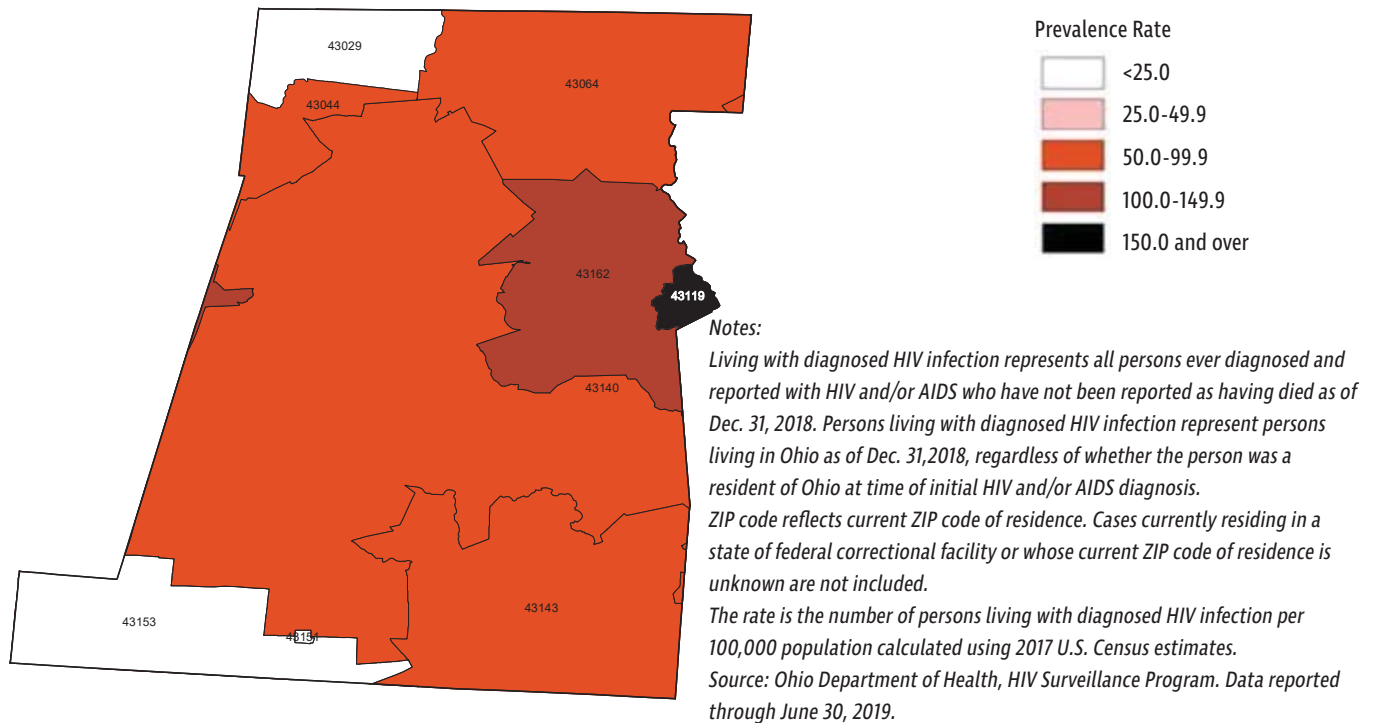
ZIP code reflects current ZIP code of residence. Cases currently residing in a state of federal correctional facility or whose current ZIP code of residence is unknown are not included.

The rate is the number of persons living with diagnosed HIV infection per 100,000 population calculated using 2017 U.S. Census estimates.

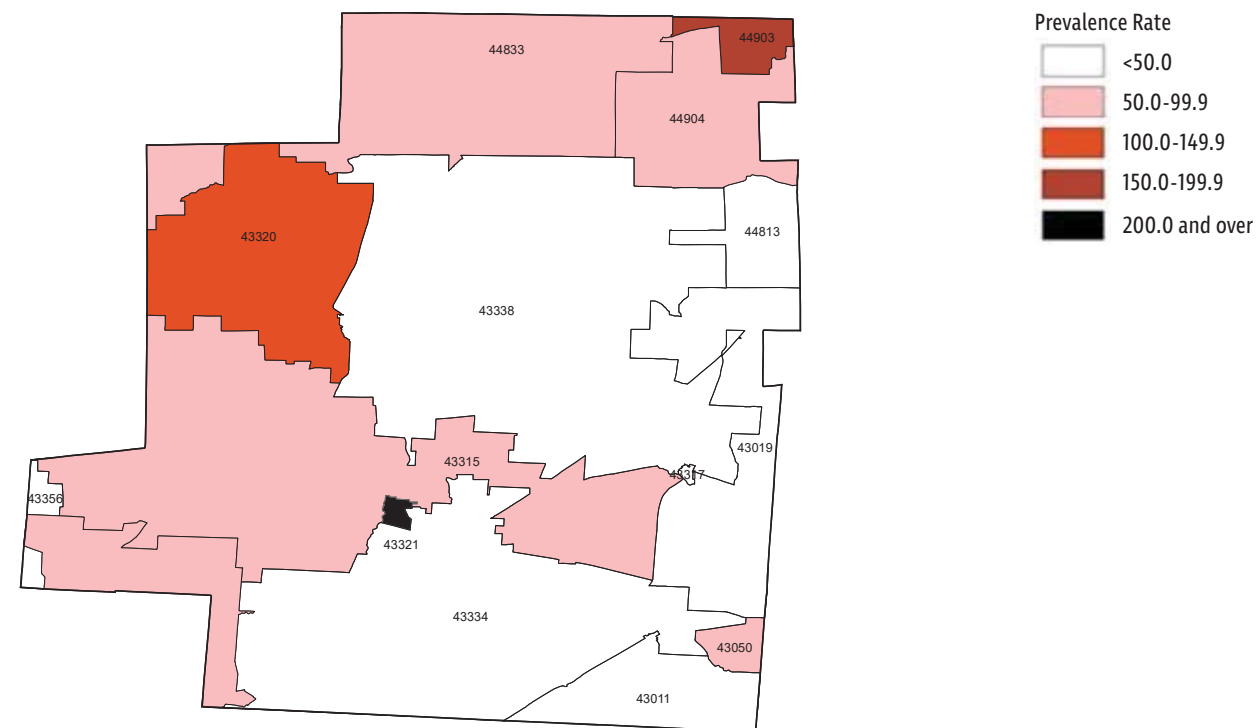
Source: Ohio Department of Health, HIV Surveillance Program. Data reported through June 30, 2019.



**Figure 85: Reported persons living with diagnosed HIV infection by ZIP code, Madison County, 2018**



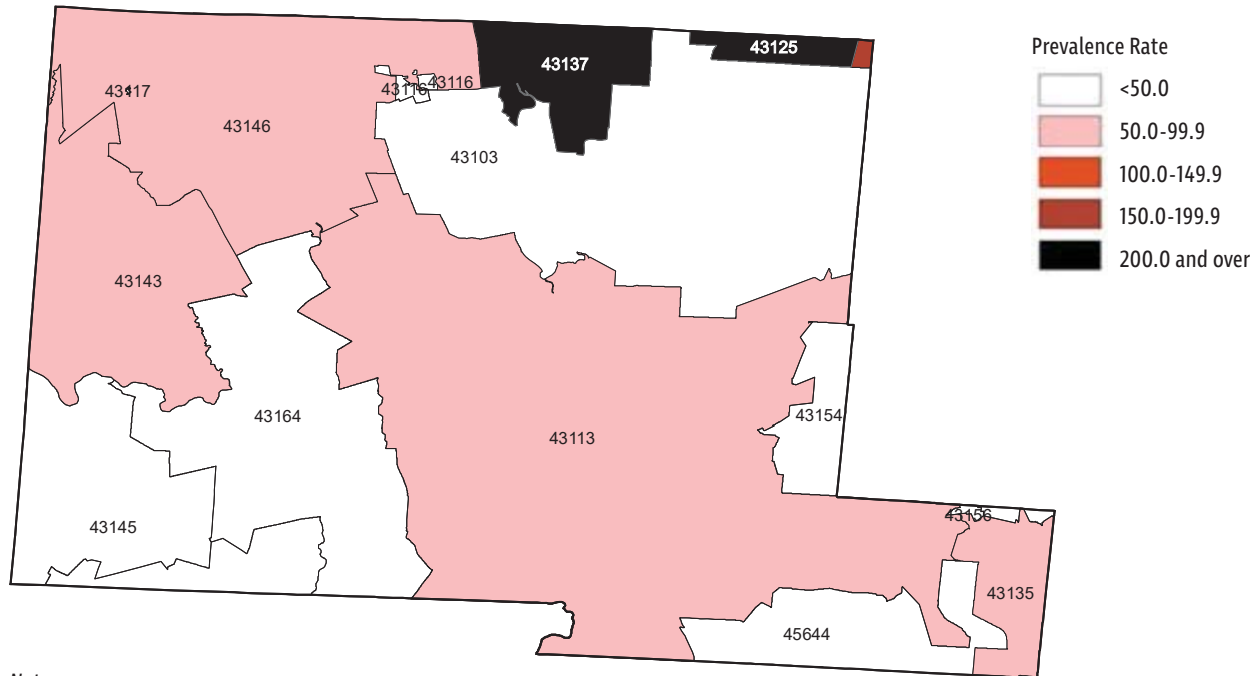
**Figure 86: Reported persons living with diagnosed HIV infection by ZIP code, Morrow County, 2018**



**Notes:**  
Living with diagnosed HIV infection represents all persons ever diagnosed and reported with HIV and/or AIDS who have not been reported as having died as of Dec. 31, 2018. Persons living with diagnosed HIV infection represent persons living in Ohio as of Dec. 31, 2018, regardless of whether the person was a resident of Ohio at time of initial HIV and/or AIDS diagnosis. ZIP code reflects current ZIP code of residence. Cases currently residing in a state of federal correctional facility or whose current ZIP code of residence is unknown are not included. The rate is the number of persons living with diagnosed HIV infection per 100,000 population calculated using 2017 U.S. Census estimates. Source: Ohio Department of Health, HIV Surveillance Program. Data reported through June 30, 2019.



**Figure 87: Reported persons living with diagnosed HIV infection by ZIP code, Pickaway County, 2018**



**Notes:**

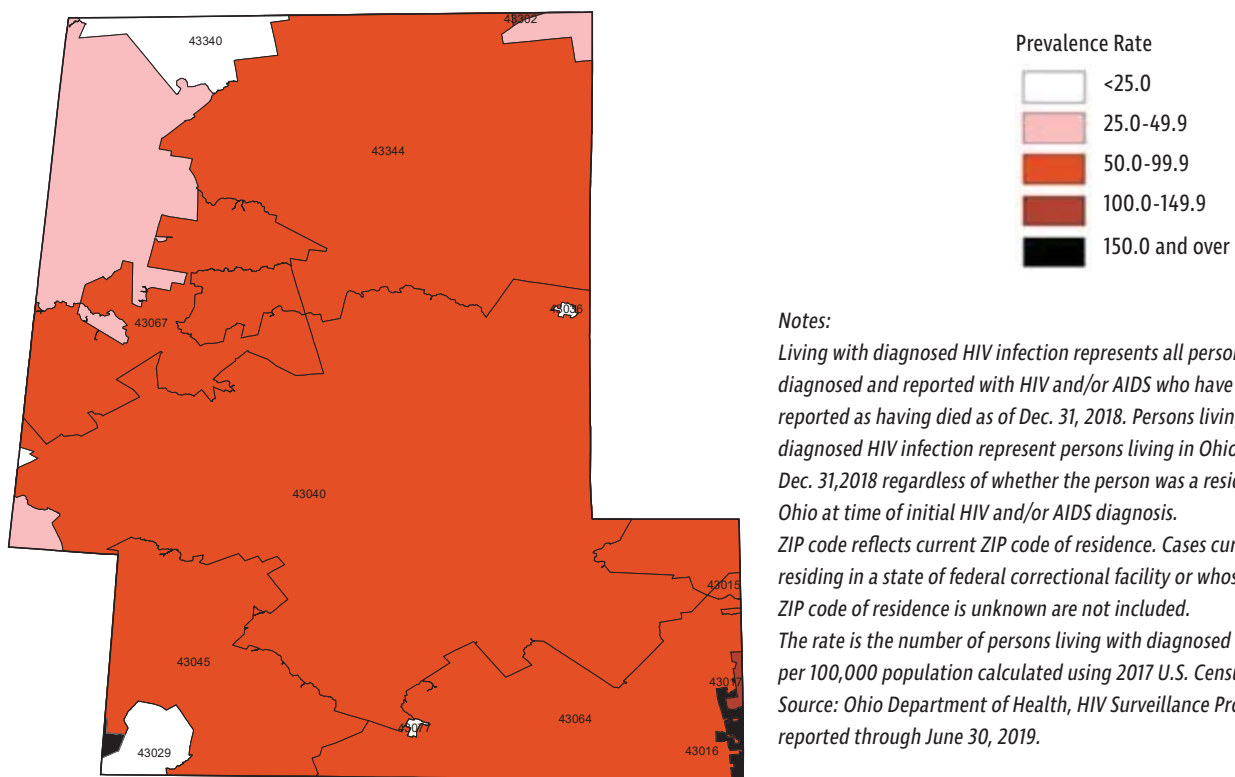
Living with diagnosed HIV infection represents all persons ever diagnosed and reported with HIV and/or AIDS who have not been reported as having died as of Dec. 31, 2018. Persons living with diagnosed HIV infection represent persons living in Ohio as of Dec. 31, 2018, regardless of whether the person was a resident of Ohio at time of initial HIV and/or AIDS diagnosis.

ZIP code reflects current ZIP code of residence. Cases currently residing in a state of federal correctional facility or whose current ZIP code of residence is unknown are not included.

The rate is the number of persons living with diagnosed HIV infection per 100,000 population calculated using 2017 U.S. Census estimates.

Source: Ohio Department of Health, HIV Surveillance Program. Data reported through June 30, 2019.

**Figure 88: Reported persons living with diagnosed HIV infection by ZIP code, Union County, 2018**



**Notes:**

Living with diagnosed HIV infection represents all persons ever diagnosed and reported with HIV and/or AIDS who have not been reported as having died as of Dec. 31, 2018. Persons living with diagnosed HIV infection represent persons living in Ohio as of Dec. 31, 2018 regardless of whether the person was a resident of Ohio at time of initial HIV and/or AIDS diagnosis.

ZIP code reflects current ZIP code of residence. Cases currently residing in a state of federal correctional facility or whose current ZIP code of residence is unknown are not included.

The rate is the number of persons living with diagnosed HIV infection per 100,000 population calculated using 2017 U.S. Census estimates.

Source: Ohio Department of Health, HIV Surveillance Program. Data reported through June 30, 2019.



**Table 43: Reported persons living with diagnosed HIV infection by current disease status and selected characteristics, Franklin County, 2018**

Characteristic	Living with diagnosed HIV infection in 2018			Current Disease Status			
	Rate <sup>a</sup>	No.	%	HIV (not AIDS)		AIDS	
				No.	%	No.	%
<b>Sex at birth</b>							
Males	654.6	4,190	80%	2,287	80%	1,903	80%
Females	157.7	1,057	20%	586	20%	471	20%
<b>Age at end of year</b>							
<13	5.3	12	<1%	7	<1%	5	<1%
13-14	*	4	<1%	3	<1%	1	<1%
15-19	28.8	24	<1%	18	1%	6	<1%
20-24	151.4	138	3%	117	4%	21	1%
25-29	387.7	492	9%	373	13%	119	5%
30-34	528.4	598	11%	393	14%	205	9%
35-39	586.5	559	11%	328	11%	231	10%
40-44	649.8	520	10%	283	10%	237	10%
45-49	821.1	655	12%	325	11%	330	14%
50-54	1,082.7	819	16%	379	13%	440	19%
55-64	746.8	1,112	21%	500	17%	612	26%
65 or older	199.5	314	6%	147	5%	167	7%
<b>Race/Ethnicity <sup>b</sup></b>							
American Indian/Alaska native	202.0	5	<1%	4	<1%	1	<1%
Asian/Pacific Islander	56.6	42	1%	29	1%	13	1%
Black/African American	771.0	2,314	44%	1,260	44%	1,054	44%
Hispanic/Latinx	421.0	315	6%	168	6%	147	6%
White	283.5	2,324	44%	1,293	45%	1,031	43%
Multi-race	585.5	227	4%	99	3%	128	5%
Unknown	*	20	<1%	20	1%	-	-
<b>Race/Ethnicity <sup>b</sup> and sex at birth</b>							
American Indian/Alaska native males	*	4	<1%	4	<1%	-	-
American Indian/Alaska native females	*	1	<1%	-	-	1	<1%
Asian/Pacific Islander males	87.6	32	1%	21	1%	11	<1%
Asian/Pacific Islander females	26.5	10	<1%	8	<1%	2	<1%
Black/African American males	1,109.3	1,586	30%	854	30%	732	31%
Black/African American females	463.3	728	14%	406	14%	322	14%
Hispanic/Latino males	663.4	259	5%	141	5%	118	5%
Hispanic/Latina females	156.5	56	1%	27	1%	29	1%
White males	525.3	2,108	40%	1,174	41%	934	39%
White females	51.6	216	4%	119	4%	97	4%
Multi-race males	965.5	184	4%	76	3%	108	5%
Multi-race females	218.1	43	1%	23	1%	20	1%
Unknown	*	20	<1%	20	1%	-	-
<b>Total</b>	<b>400.4</b>	<b>5,247</b>		<b>2,873</b>		<b>2,374</b>	

**Notes:**

Living with diagnosed HIV infection represents all persons ever diagnosed and reported with HIV and/or AIDS who have not been reported as having died as of Dec. 31, 2018.

Persons living with diagnosed HIV infection represent persons living in Ohio as of Dec. 31, 2018, regardless of whether the person was a resident of Ohio at time of initial HIV and/or AIDS diagnosis.

Asterisk (\*) indicates rate not calculated for case count <5 due to unstable rates. Dash (-) indicates no cases were reported for the given category.

<sup>a</sup> The rate is the number of persons living with diagnosed HIV infection per 100,000 population calculated using U.S. Census estimates for that year.

<sup>b</sup> Hispanics/Latinx may be of any race. Persons with a race of American Indian/Alaska native, Asian/Pacific Islander, Black/African American, white, or multi-race are not Hispanic. Asian/Pacific Islander includes native Hawaiians.

Source: Ohio Department of Health, HIV Surveillance Program. Data reported through June 30, 2019.



**Table 44: Reported persons living with diagnosed HIV infection by current disease status and selected characteristics, Columbus TGA, 2018**

Characteristic	Living with diagnosed HIV infection in 2018			Current Disease Status			
	Rate <sup>a</sup>	No.	%	HIV (not AIDS)		AIDS	
				No.	%	No.	%
<b>Sex at birth</b>							
Males	465.6	4,680	80%	2,542	79%	2,138	80%
Females	114.9	1,191	20%	657	21%	534	20%
<b>Age at end of year</b>							
<13	4.3	15	<1%	10	<1%	5	<1%
13-14	9.5	5	<1%	3	<1%	2	<1%
15-19	21.7	29	<1%	21	1%	8	<1%
20-24	121.3	162	3%	139	4%	23	1%
25-29	317.0	531	9%	404	13%	127	5%
30-34	395.4	622	11%	411	13%	211	8%
35-39	419.2	609	10%	362	11%	247	9%
40-44	446.5	577	10%	304	10%	273	10%
45-49	565.5	755	13%	374	12%	381	14%
50-54	742.4	940	16%	439	14%	501	19%
55-64	516.5	1,265	22%	563	18%	702	26%
65 or older	134.6	361	6%	169	5%	192	7%
<b>Race/Ethnicity<sup>b</sup></b>							
American Indian/Alaska native	150.7	6	<1%	5	<1%	1	<1%
Asian/Pacific Islander	49.7	49	1%	35	1%	14	1%
Black/African American	727.0	2,427	41%	1,323	41%	1,104	41%
Hispanic/Latinx	369.1	335	6%	179	6%	156	6%
White	189.7	2,775	47%	1,520	48%	1,255	47%
Multi-race	489.8	257	4%	115	4%	142	5%
Unknown	*	22	<1%	22	1%	-	-
<b>Race/Ethnicity<sup>b</sup> and sex at birth</b>							
American Indian/Alaska native males	252.5	5	<1%	5	<1%	-	-
American Indian/Alaska native females	*	1	<1%	-	-	1	<1%
Asian/Pacific Islander males	74.4	36	1%	25	1%	11	<1%
Asian/Pacific Islander females	25.9	13	<1%	10	<1%	3	<1%
Black/African American males	1,024.2	1,659	28%	896	28%	763	29%
Black/African American females	446.9	768	13%	427	13%	341	13%
Hispanic/Latino males	573.7	271	5%	147	5%	124	5%
Hispanic/Latina females	147.0	64	1%	32	1%	32	1%
White males	344.8	2,482	42%	1,360	43%	1,122	42%
White females	39.5	293	5%	160	5%	133	5%
Multi-race males	809.5	209	4%	91	3%	118	4%
Multi-race females	180.1	48	1%	24	1%	24	1%
Unknown	*	22	<1%	22	1%	-	-
<b>Total</b>	<b>287.5</b>	<b>5,871</b>		<b>3,199</b>		<b>2,672</b>	

**Notes:**

Living with diagnosed HIV infection represents all persons ever diagnosed and reported with HIV and/or AIDS who have not been reported as having died as of Dec. 31, 2018. Persons living with diagnosed HIV infection represent persons living in Ohio as of Dec. 31, 2018, regardless of whether the person was a resident of Ohio at time of initial HIV and/or AIDS diagnosis.

Asterisk (\*) indicates rate not calculated for case count <5 due to unstable rates. Dash (-) indicates no cases were reported for the given category.

<sup>a</sup> The rate is the number of persons living with diagnosed HIV infection per 100,000 population calculated using U.S. Census estimates for that year.

<sup>b</sup> Hispanics/Latinx may be of any race. Persons with a race of American Indian/Alaska native, Asian/Pacific Islander, Black/African American, white, or multi-race are not Hispanic. Asian/Pacific Islander includes native Hawaiians.

Source: Ohio Department of Health, HIV Surveillance Program. Data reported through June 30, 2019.





**Table 45: Reported persons living with diagnosed HIV infection by current disease status and transmission category, Franklin County, 2018**

Transmission Category <sup>a</sup>	Living with diagnosed HIV infection in 2018		Current Disease Status			
	No.	%	HIV (not AIDS)		AIDS	
	No.	%	No.	%	No.	%
<b>Male adult or adolescent</b>						
Male-to-male sexual contact	3,007	72%	1,677	74%	1,330	70%
Injection drug use (IDU)	101	2%	40	2%	61	3%
Male-to-male sexual contact and IDU	169	4%	84	4%	85	4%
Heterosexual contact	227	5%	76	3%	151	8%
Other/unknown	667	16%	397	17%	270	14%
Subtotal	4,171	100%	2,274	100%	1,897	100%
<b>Female adult or adolescent</b>						
Injection drug use	97	9%	41	7%	56	12%
Heterosexual contact	838	81%	458	80%	380	83%
Other/unknown	101	10%	77	13%	24	5%
Subtotal	1,036	100%	576	100%	460	100%
<b>Child (&lt;13 yrs. at diagnosis)</b>						
Perinatal	37	93%	21	91%	16	94%
Other/unknown	3	8%	2	9%	1	6%
Subtotal	40	100%	23	100%	17	100%
<b>Total</b>	<b>5,247</b>		<b>2,873</b>		<b>2,374</b>	

**Notes:**

Living with diagnosed HIV infection represents all persons ever diagnosed and reported with HIV and/or AIDS who have not been reported as having died as of Dec. 31, 2018. Persons living with diagnosed HIV infection represent persons living in Ohio as of Dec. 31, 2018, regardless of whether the person was a resident of Ohio at time of initial HIV and/or AIDS diagnosis.

Dash (-) indicates no cases were reported for the given category.

<sup>a</sup> Transmission categories are mutually exclusive, hierarchical risk categories determined by the CDC and system-calculated using sex at birth and risk factor history to determine mode of transmission. A person with multiple risks is only represented in the highest category based on the CDC hierarchical algorithm. Thus, transgender women are included in the male-to-male sexual contact transmission category if assigned male at birth and risk factor history indicates sex with males. Please note this is for the categorization of HIV transmission categories only and not to describe sexual orientation.

Source: Ohio Department of Health, HIV Surveillance Program. Data reported through June 30, 2019.



**Table 46: Reported persons living with diagnosed HIV infection by current disease status and transmission category, Columbus TGA, 2018**

Transmission Category <sup>a</sup>	Living with diagnosed HIV infection in 2018		Current Disease Status			
	No.	%	HIV (not AIDS)		AIDS	
			No.	%	No.	%
<b>Male adult or adolescent</b>						
Male-to-male sexual contact	3,335	72%	1,845	73%	1,490	70%
Injection drug use (IDU)	111	2%	42	2%	69	3%
Male-to-male sexual contact and IDU	195	4%	95	4%	100	5%
Heterosexual contact	256	5%	87	3%	169	8%
Other/unknown	758	16%	457	18%	301	14%
Subtotal	4,655	100%	2,526	100%	2,129	100%
<b>Female adult or adolescent</b>						
Injection drug use	109	9%	46	7%	63	12%
Heterosexual contact	931	80%	500	78%	431	83%
Other/unknown	119	10%	93	15%	26	5%
Subtotal	1,159	100%	639	100%	520	100%
<b>Child (&lt;13 yrs. at diagnosis)</b>						
Perinatal	52	91%	31	91%	21	91%
Other/unknown	5	9%	3	9%	2	9%
Subtotal	57	100%	34	100%	23	100%
<b>Total</b>	<b>5,871</b>		<b>3,199</b>		<b>2,672</b>	

**Notes:**

Living with diagnosed HIV infection represents all persons ever diagnosed and reported with HIV and/or AIDS who have not been reported as having died as of Dec. 31, 2018. Persons living with diagnosed HIV infection represent persons living in Ohio as of Dec. 31, 2018, regardless of whether the person was a resident of Ohio at time of initial HIV and/or AIDS diagnosis.

Dash (-) indicates no cases were reported for the given category.

<sup>a</sup> Transmission categories are mutually exclusive, hierarchical risk categories determined by the CDC and system-calculated using sex at birth and risk factor history to determine mode of transmission. A person with multiple risks is only represented in the highest category based on the CDC hierarchical algorithm. Thus, transgender women are included in the male-to-male sexual contact transmission category if assigned male at birth and risk factor history indicates sex with males. Please note this is for the categorization of HIV transmission categories only and not to describe sexual orientation.

Source: Ohio Department of Health, HIV Surveillance Program. Data reported through June 30, 2019.



**Table 47: Reported persons living with diagnosed HIV infection by current disease status and exposure category, Franklin County, 2018**

Exposure Category <sup>a</sup>	Living with diagnosed HIV infection in 2018		Current Disease Status			
	No.	%	HIV (not AIDS)		AIDS	
			No.	%	No.	%
Male-to-male sexual contact only	2,877	55%	1,618	56%	1,259	53%
Injection drug use (IDU) only	98	2%	38	1%	60	3%
Heterosexual contact only	1,066	20%	535	19%	531	22%
Male-to-male sexual contact and IDU	140	3%	68	2%	72	3%
IDU and heterosexual contact	100	2%	43	1%	57	2%
Male-to-male sexual contact and heterosexual contact	130	2%	59	2%	71	3%
Male-to-male sexual contact and IDU and heterosexual contact	29	1%	16	1%	13	1%
Perinatal exposure	39	1%	22	1%	17	1%
Other/unknown	768	15%	474	16%	294	12%
<b>Total</b>	<b>5,247</b>		<b>2,873</b>		<b>2,374</b>	

**Notes:**

Living with diagnosed HIV infection represents all persons ever diagnosed and reported with HIV and/or AIDS who have not been reported as having died as of Dec. 31, 2018. Persons living with diagnosed HIV infection represent persons living in Ohio as of Dec. 31, 2018, regardless of whether the person was a resident of Ohio at time of initial HIV and/or AIDS diagnosis.

Dash (-) indicates no cases were reported for the given category.

<sup>a</sup> Exposure categories are mutually exclusive risk categories. All possible combinations of risks are represented among exposure categories. A person with multiple risks is represented in the exposure category identifying all the reported ways in which that person may have been exposed to HIV.

Source: Ohio Department of Health, HIV Surveillance Program. Data reported through June 30, 2019.

**Table 48: Reported persons living with diagnosed HIV infection by current disease status and exposure category, Columbus TGA, 2018**

Exposure Category <sup>a</sup>	Living with diagnosed HIV infection in 2018		Current Disease Status			
	No.	%	HIV (not AIDS)		AIDS	
			No.	%	No.	%
Male-to-male sexual contact only	3,189	54%	1,777	56%	1,412	53%
Injection drug use (IDU) only	108	2%	40	1%	68	3%
Heterosexual contact only	1,188	20%	588	18%	600	22%
Male-to-male sexual contact and IDU	160	3%	75	2%	85	3%
IDU and heterosexual contact	112	2%	48	2%	64	2%
Male-to-male sexual contact and heterosexual contact	146	2%	68	2%	78	3%
Male-to-male sexual contact and IDU and heterosexual contact	35	1%	20	1%	15	1%
Perinatal exposure	55	1%	33	1%	22	1%
Other/unknown	878	15%	550	17%	328	12%
<b>Total</b>	<b>5,871</b>		<b>3,199</b>		<b>2,672</b>	

**Notes:**

Living with diagnosed HIV infection represents all persons ever diagnosed and reported with HIV and/or AIDS who have not been reported as having died as of Dec. 31, 2018. Persons living with diagnosed HIV infection represent persons living in Ohio as of Dec. 31, 2018, regardless of whether the person was a resident of Ohio at time of initial HIV and/or AIDS diagnosis.

Dash (-) indicates no cases were reported for the given category.

<sup>a</sup> Exposure categories are mutually exclusive risk categories. All possible combinations of risks are represented among exposure categories. A person with multiple risks is represented in the exposure category identifying all the reported ways in which that person may have been exposed to HIV.

Source: Ohio Department of Health, HIV Surveillance Program. Data reported through June 30, 2019.



**Table 49: Reported persons living with HIV infection by race/ethnicity and transmission category, Franklin County, 2018**

	American Indian/ Alaska native		Asian/ Pacific Islander		Black/ African American		Hispanic/ Latinx <sup>a</sup>		White		Multi-race		Unknown	
Transmission Category <sup>b</sup>	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
<b>Male adult or adolescent</b>														
Male-to-male sexual contact	4	100%	17	57%	970	62%	173	68%	1,711	81%	131	71%	1	6%
Injection drug use (IDU)	-	-	-	-	57	4%	5	2%	34	2%	5	3%	-	-
Male-to-male sexual contact and IDU	-	-	1	3%	45	3%	11	4%	96	5%	16	9%	-	-
Heterosexual contact	-	-	1	3%	152	10%	23	9%	42	2%	9	5%	-	-
Other/unknown	-	-	11	37%	350	22%	43	17%	224	11%	23	13%	16	94%
Subtotal	4	100%	30	100%	1,574	100%	255	100%	2,107	100%	184	100%	17	100%
<b>Female adult or adolescent</b>														
Injection drug use	-	-	-	-	50	7%	3	5%	40	19%	4	10%	-	-
Heterosexual contact	1	100%	3	38%	599	84%	51	93%	152	71%	32	76%	-	-
Other/unknown	-	-	5	63%	64	9%	1	2%	22	10%	6	14%	3	100%
Subtotal	1	100%	8	100%	713	100%	55	100%	214	100%	42	100%	3	100%
<b>Child (&lt;13 yrs. at diagnosis)</b>														
Perinatal	-	-	4	100%	24	89%	5	100%	3	100%	1	100%	-	-
Other/unknown	-	-	-	-	3	11%	-	-	-	-	-	-	-	-
Subtotal	-	-	4	100%	27	100%	5	100%	3	100%	1	100%	-	-
<b>Total</b>	<b>5</b>		<b>42</b>		<b>2,314</b>		<b>315</b>		<b>2,324</b>		<b>227</b>		<b>20</b>	

**Notes:**

Dash (-) indicates no cases were reported for the given category.

<sup>a</sup> Hispanics/Latinx may be of any race. Persons with a race of American Indian/Alaska native, Asian/Pacific Islander, Black/African American, white, or multi-race are not Hispanic. Asian/Pacific Islander includes native Hawaiians.

<sup>b</sup> Transmission categories are mutually exclusive, hierarchical risk categories determined by the CDC and system-calculated using sex at birth and risk factor history to determine mode of transmission. A person with multiple risks is only represented in the highest category based on the CDC hierarchical algorithm. Thus, transgender women are included in the male-to-male sexual contact transmission category if assigned male at birth and risk factor history indicates sex with males. Please note this is for the categorization of HIV transmission categories only and not to describe sexual orientation.

Source: Ohio Department of Health, HIV Surveillance Program. Data reported through June 30, 2019.



**Table 50: Reported persons living with HIV infection by race/ethnicity and transmission category, Columbus TGA, 2018**

	American Indian/ Alaska native		Asian/ Pacific Islander		Black/ African American		Hispanic/ Latinx <sup>a</sup>		White		Multi-race		Unknown	
Transmission Category <sup>b</sup>	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
<b>Male adult or adolescent</b>														
Male-to-male sexual contact	5	100%	18	53%	1,008	61%	181	68%	1,974	80%	148	71%	1	6%
Injection drug use (IDU)	-	-	-	-	59	4%	6	2%	41	2%	5	2%	-	-
Male-to-male sexual contact and IDU	-	-	2	6%	48	3%	11	4%	117	5%	17	8%	-	-
Heterosexual contact	-	-	2	6%	160	10%	23	9%	60	2%	11	5%	-	-
Other/unknown	-	-	12	35%	371	23%	46	17%	286	12%	26	13%	17	94%
Subtotal	5	100%	34	100%	1,646	100%	267	100%	2,478	100%	207	100%	18	100%
<b>Female adult or adolescent</b>														
Injection drug use	-	-	-	-	51	7%	4	7%	49	17%	5	11%	-	-
Heterosexual contact	1	100%	5	45%	633	85%	55	92%	202	70%	35	74%	-	-
Other/unknown	-	-	6	55%	64	9%	1	2%	37	13%	7	15%	4	100%
Subtotal	1	100%	11	100%	748	100%	60	100%	288	100%	47	100%	4	100%
<b>Child (&lt;13 yrs. at diagnosis)</b>														
Perinatal	-	-	4	100%	30	91%	8	100%	7	78%	3	100%	-	-
Other/unknown	-	-	-	-	3	9%	-	-	2	22%	-	-	-	-
Subtotal	-	-	4	100%	33	100%	8	100%	9	100%	3	100%	-	-
<b>Total</b>	<b>6</b>		<b>49</b>		<b>2,427</b>		<b>335</b>		<b>2,775</b>		<b>257</b>		<b>22</b>	

**Notes:**

Dash (-) indicates no cases were reported for the given category.

<sup>a</sup> Hispanics/Latinx may be of any race. Persons with a race of American Indian/Alaska native, Asian/Pacific Islander, Black/African American, white, or multi-race are not Hispanic. Asian/Pacific Islander includes native Hawaiians.

<sup>b</sup> Transmission categories are mutually exclusive, hierarchical risk categories determined by the CDC and system-calculated using sex at birth and risk factor history to determine mode of transmission. A person with multiple risks is only represented in the highest category based on the CDC hierarchical algorithm. Thus, transgender women are included in the male-to-male sexual contact transmission category if assigned male at birth and risk factor history indicates sex with males. Please note this is for the categorization of HIV transmission categories only and not to describe sexual orientation.

Source: Ohio Department of Health, HIV Surveillance Program. Data reported through June 30, 2019.

**Part A clients:** In 2018, in both the Columbus TGA and Franklin County, 71% of Ryan White Part A clients served were male. Fifty-one percent of Part A clients in the Columbus TGA and 53% in Franklin County were Black/African American. In both the Columbus TGA and Franklin County, 52% had male-to-male sexual contact as a risk factor, while 31% had heterosexual contact as a risk factor. In 2018, 48% of Part A clients utilized outpatient ambulatory healthcare, 32% utilized medical case management, and 13% utilized non-medical case management.



## Ohio AIDS Drug Assistance Program (ADAP) utilization

The Ohio AIDS Drug Assistance Program helps people living with HIV and AIDS have access to medications needed to stay healthy. In 2018, the Ohio ADAP program enrolled 1,687 people living with HIV in Columbus TGA. Of those clients, 47% were virally suppressed at their most recent lab test date (i.e., viral load <200 copies/mL). The Ryan White Part B program uses the following definitions to calculate viral suppression.

**Numerator:** Viral load  $\leq$ 200 copies/mL.

**Denominator:** Number of clients who had at least one HIV medical visit during the measurement period. HIV medical visit is defined as having a CVS medication dispense, a payment by ADAP for a medical appointment (indicated by various service codes), or a case management funded medical care service (indicated by various service codes).

**Table 51: Ohio AIDS Drug Assistance Program utilization by race/ethnicity, Franklin County, 2018**

Ohio ADAP Clients Enrolled from Jan. 1, 2018 to Dec. 31, 2018

Race/Ethnicity	% (N)	Virally Suppressed, %
Black	49% (757)	43% (329)
White	42% (648)	47% (302)
Hispanic	6% (99)	72% (72)
Other	3% (44)	55% (24)
<b>Total</b>	<b>1,548</b>	<b>47% (727)</b>

Notes:

Viral suppression includes missing/incomplete data. Of those with a viral load reported (n=790), 92% were virally suppressed.

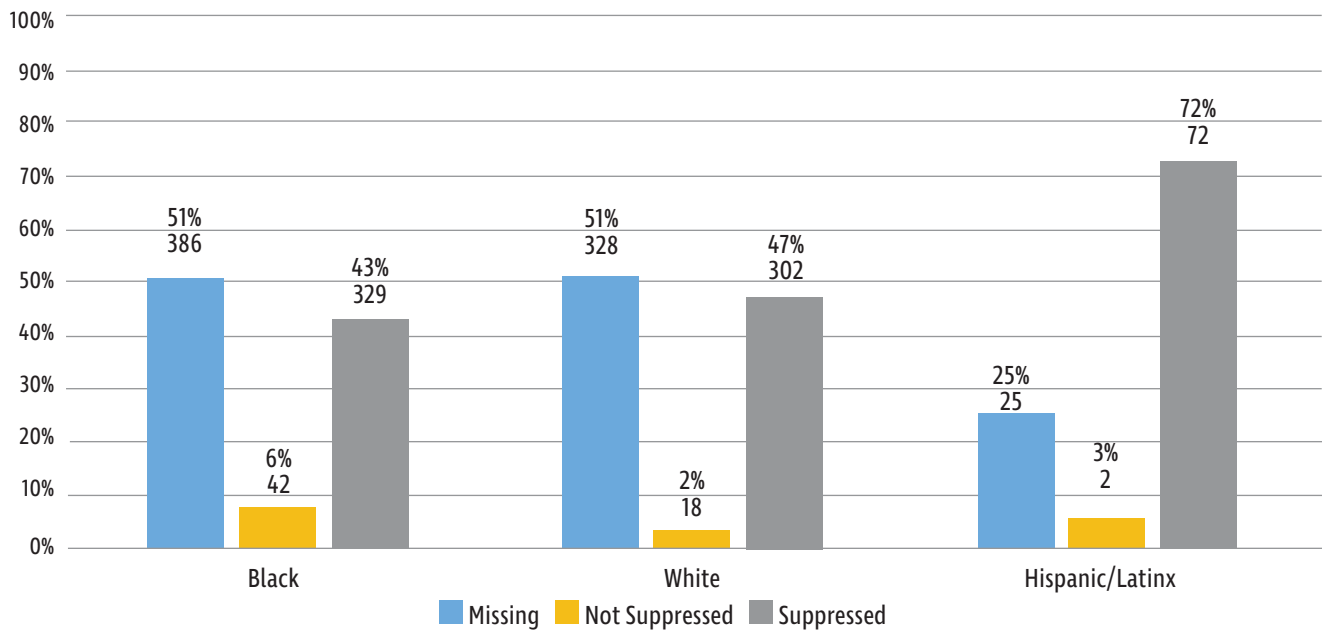
Clients enrolled in the Ryan White Part B Program may also receive services from other pay sources (e.g., other Ryan White Parts, Medicaid).

Source: Ryan White Application Database. Data reported through Nov. 14, 2019.

Among Black/African American clients enrolled in the Ohio ADAP program in 2018, 43% were virally suppressed. Among white clients enrolled in the Ohio ADAP program in 2018, 47% were virally suppressed. Among Hispanic/Latinx clients enrolled in the Ohio ADAP program in 2018, 72% were virally suppressed.



**Figure 89: Viral suppression among clients enrolled in Ohio AIDS Drug Assistance Program by race/ethnicity, Franklin County, 2018**



Note: Clients enrolled in the Ryan White Part B Program may also receive services from other pay sources (e.g., other Ryan White Parts, Medicaid).

Source: Ryan White Application Database. Data reported through Nov. 14, 2019.

**Table 52: Ohio AIDS Drug Assistance Program utilization by race/ethnicity, Columbus TGA, 2018**

Ohio ADAP Clients Enrolled from Jan. 1, 2018 to Dec. 31, 2018

Race/Ethnicity	% (N)	Virally Suppressed, %
Black	49% (775)	43% (336)
White	42% (760)	47% (358)
Hispanic	6% (102)	72% (74)
Other	3% (50)	50% (25)
Total	1,687	47% (793)

**Notes:**

Viral suppression includes missing/incomplete data. Of those with a viral load reported (n=863), 92% were virally suppressed.

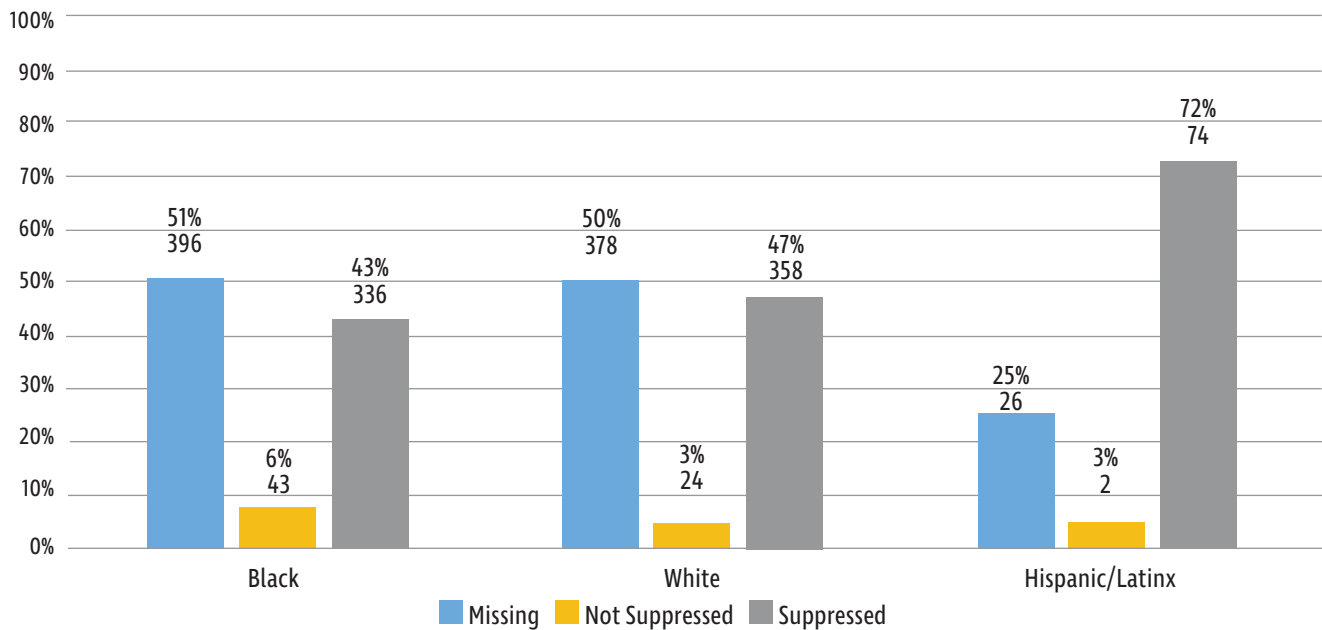
Clients enrolled in the Ryan White Part B Program may also receive services from other pay sources (e.g., other Ryan White Parts, Medicaid).

Source: Ryan White Application Database. Data reported through Nov. 14, 2019.

Among Black/African American clients enrolled in the Ohio ADAP program in the Columbus TGA in 2018, 43% were virally suppressed. Among white clients enrolled in the Ohio ADAP program in 2018, 47% were virally suppressed. Among Hispanic/Latinx clients enrolled in the Ohio ADAP program in 2018, 72% were virally suppressed.



**Figure 90: Viral suppression among clients enrolled in Ohio AIDS Drug Assistance Program by race/ethnicity, Columbus, TGA, 2018**



*Note: Clients enrolled in the Ryan White Part B Program may also receive services from other pay sources (e.g., other Ryan White Parts, Medicaid).*

*Source: Ryan White Application Database. Data reported through Nov. 14, 2019.*

## Community Linkage Coordination

In 2018, there were 76 clients enrolled in the Ryan White Community Linkage Coordination (CLC) program in Franklin County prior to their release from incarceration in a state prison. Clients are referred to a Ryan White-funded case management agency, have an appointment scheduled with a medical provider, and are given a 30-day supply of HIV medications upon release. There were 72 clients referred to Equitas Health Columbus and four clients referred to Southeast Inc. Of the clients referred to Equitas Health Columbus, 81% were virally suppressed, and of the clients referred to Southeast Inc., 75% were virally suppressed. Additionally, the Ohio Department of Medicaid Pre-Release Enrollment Program allows low-income justice-involved individuals to receive Medicaid services immediately upon release from state prison. It is possible that some or all of the people who declined enrollment in the CLC program are eligible for and enrolled in Medicaid.





## Linkage to Care and Continuum of Care

To calculate a care continuum and other related measurements for persons in Franklin County and the Columbus TGA diagnosed with HIV infection, HIV Surveillance data are used, including information on CD4s and Viral Load (VL) lab results. CDC uses reported CD4s and VL lab results as a proxy measure to assess whether or not a person with HIV was in care. The following data presented on the Franklin County and Columbus TGA HIV Continuum of Care are based on calculations made using CDC definitions, are population-based, and are based on the information reported to HIV Surveillance, which includes data from the Ohio Disease Reporting System and the Ryan White Application Database.

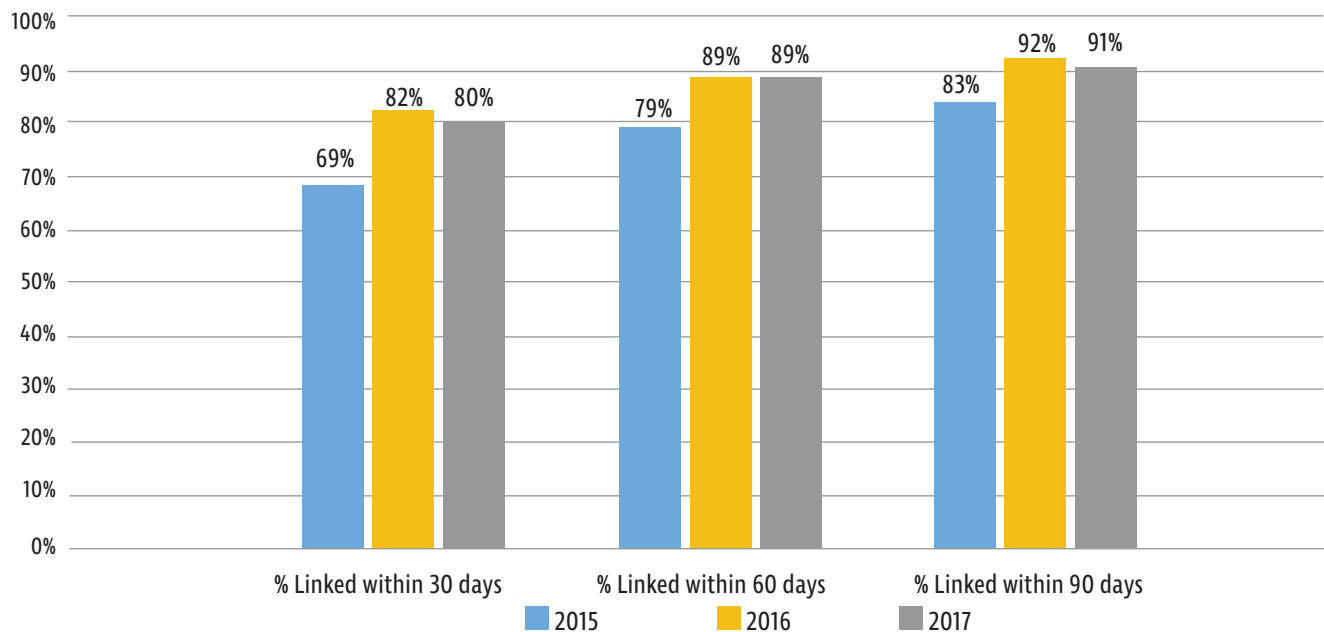
### Linkage to Care

**Numerator:** The number of people in the denominator who had at least one CD4 and/or VL within 30, 60, and 90 days of the date of HIV diagnosis.

**Denominator:** The number of new diagnoses of HIV infection in Franklin County and the Columbus TGA among persons aged 13 and older in each year. For example, the denominator for 2017 is the number of new diagnoses of HIV infection in Franklin County in 2017 among persons aged 13 and older (i.e., adults/adolescents).

The objective is for 85% of new diagnoses of HIV to be linked to care within 30 days of HIV diagnosis. Eighty percent of adults/adolescents diagnosed with HIV infection in Franklin County in 2017 were linked to care within 30 days. The percentage of persons diagnosed with HIV who were linked to care within 30 days has increased from 69% in 2015 to 80% in 2017.

**Figure 91: Linkage to care, Franklin County, 2015-2017**

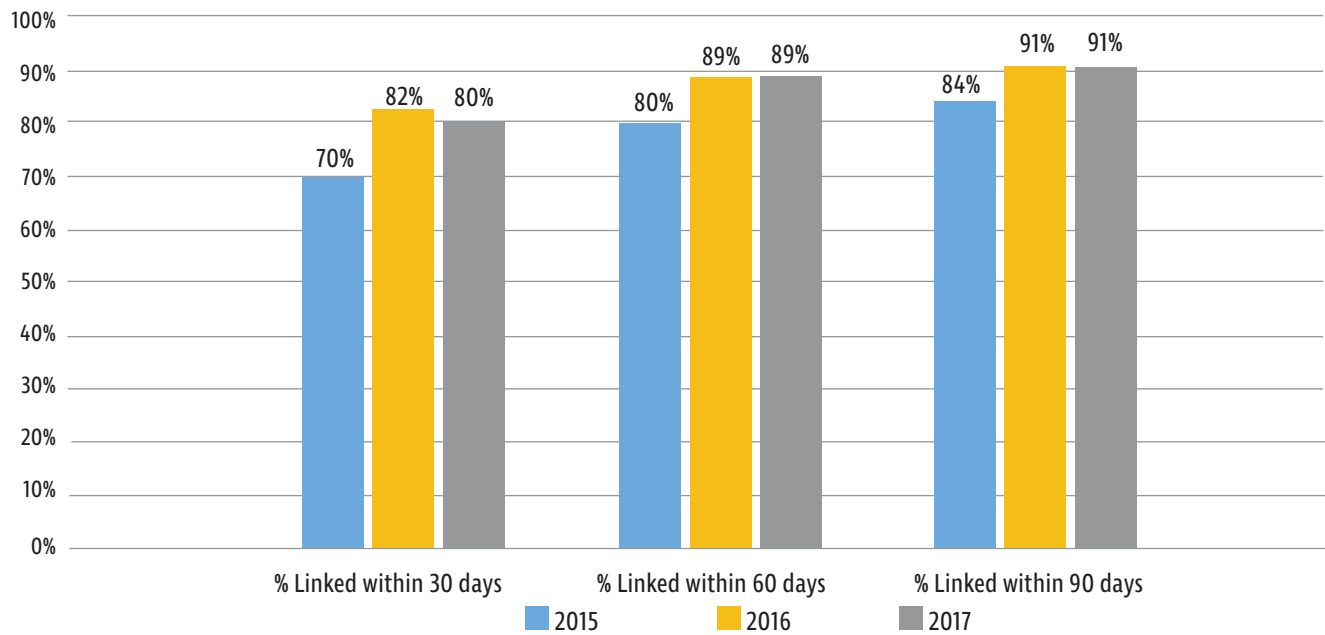


Source: Ohio Department of Health, HIV Surveillance Program. Data reported as of April 25, 2019.



Eighty percent of adults/adolescents diagnosed with HIV infection in the Columbus TGA in 2017 were linked to care within 30 days of diagnosis.

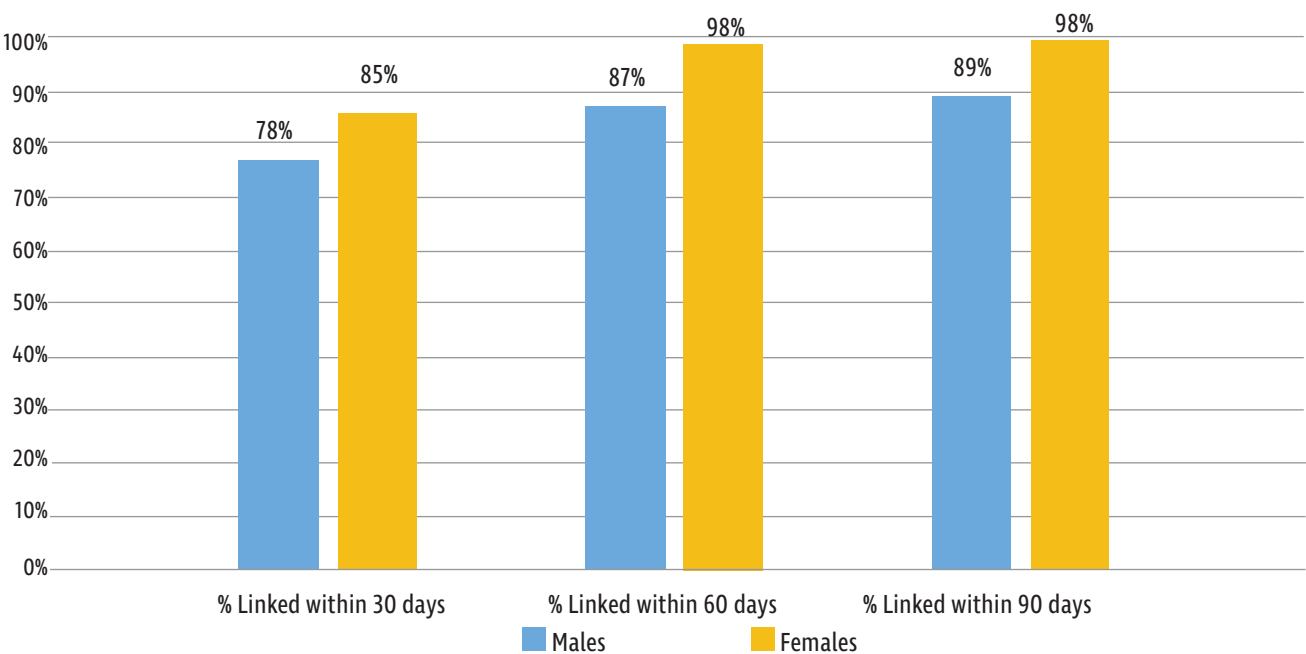
**Figure 92: Linkage to care, Columbus TGA, 2015-2017**



Source: Ohio Department of Health, HIV Surveillance Program. Data reported as of April 25, 2019.

**Sex at birth:** Seventy-eight percent of adult/adolescent males and 85% of adult/adolescent females diagnosed with HIV in Franklin County in 2017 were linked to care within 30 days of diagnosis.

**Figure 93: Linkage to care by sex at birth, Franklin County, 2017**

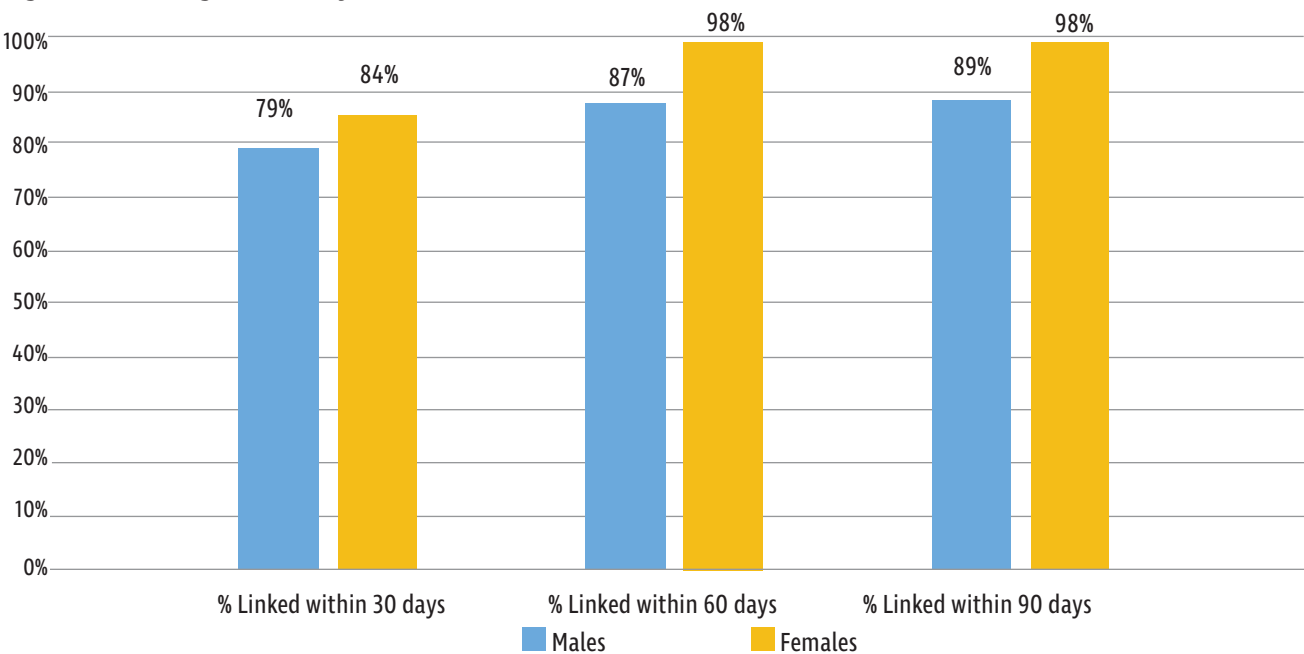


Source: Ohio Department of Health, HIV Surveillance Program. Data reported as of April 25, 2019.



Seventy-nine percent of adult/adolescent males and 84% of adult/adolescent females diagnosed with HIV in the Columbus TGA in 2017 were linked to care within 30 days of diagnosis.

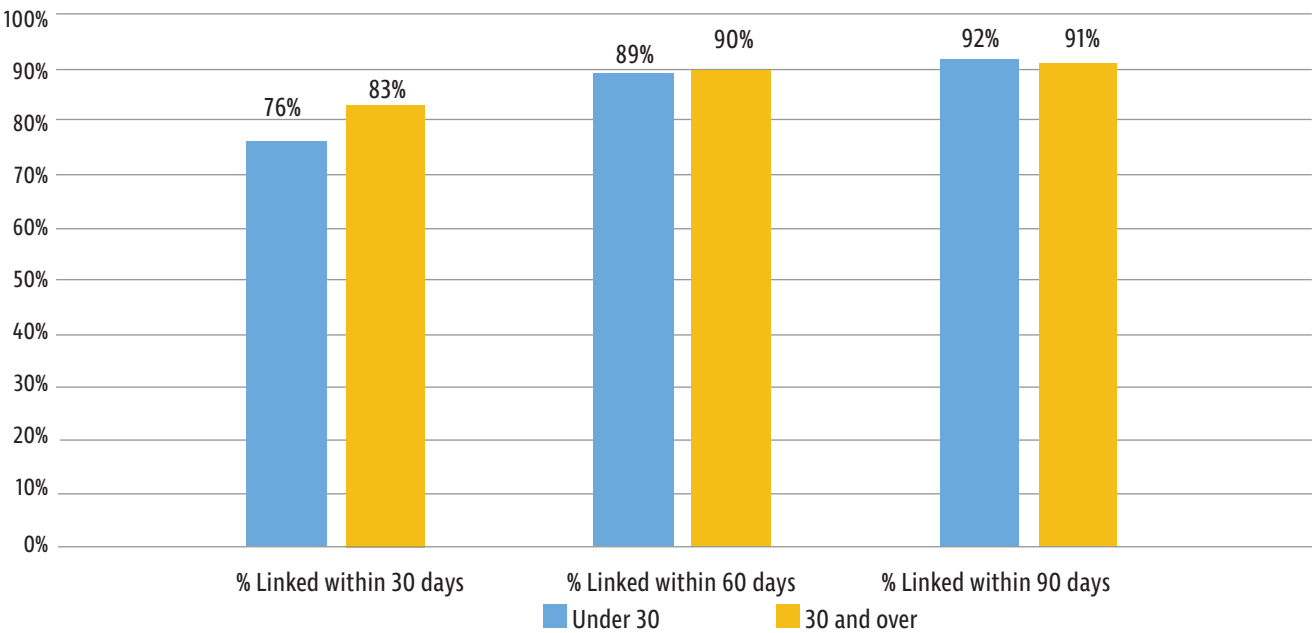
**Figure 94: Linkage to care by sex at birth, Columbus TGA, 2017**



Source: Ohio Department of Health, HIV Surveillance Program. Data reported as of April 25, 2019.

**Age at diagnosis:** Seventy-six percent of persons aged 13 to 29 years and 83% of persons aged 30 and older were linked to care within 30 days of being diagnosed with HIV in Franklin County in 2017.

**Figure 95: Linkage to care by age at diagnosis, Franklin County, 2017**

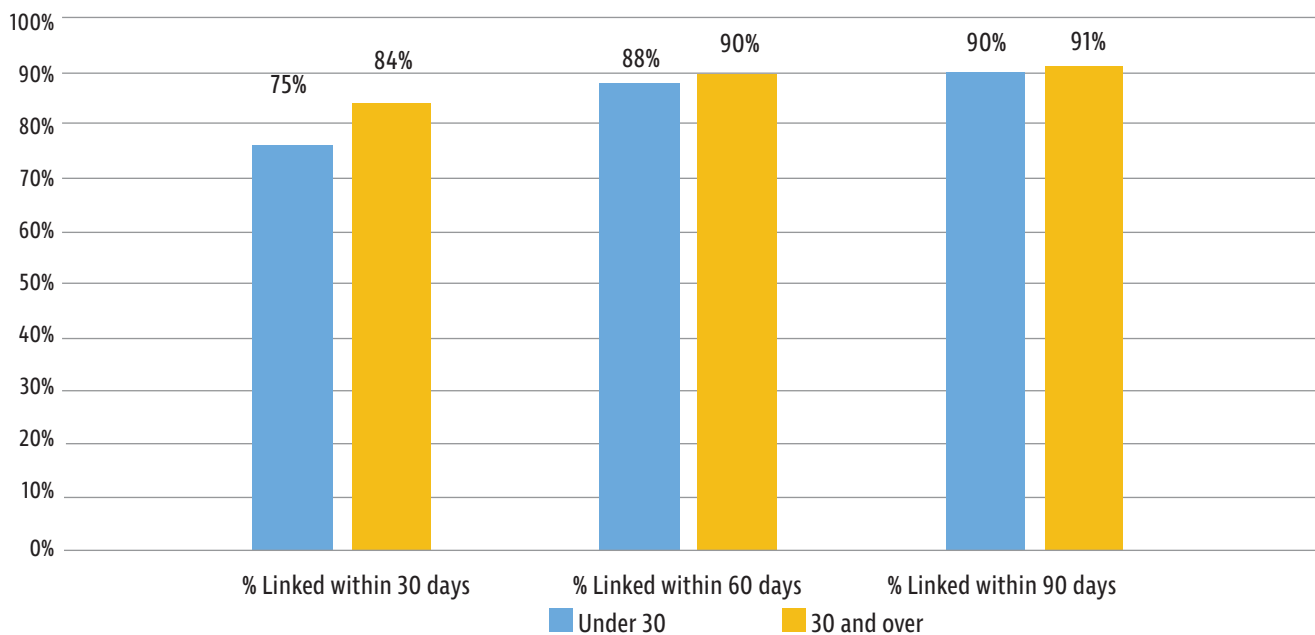


Source: Ohio Department of Health, HIV Surveillance Program. Data reported as of April 25, 2019.



Seventy-five percent of persons aged 13 to 29 years and 84% of persons aged 30 and older diagnosed with HIV in the Columbus TGA in 2017 were linked to care within 30 days of diagnosis.

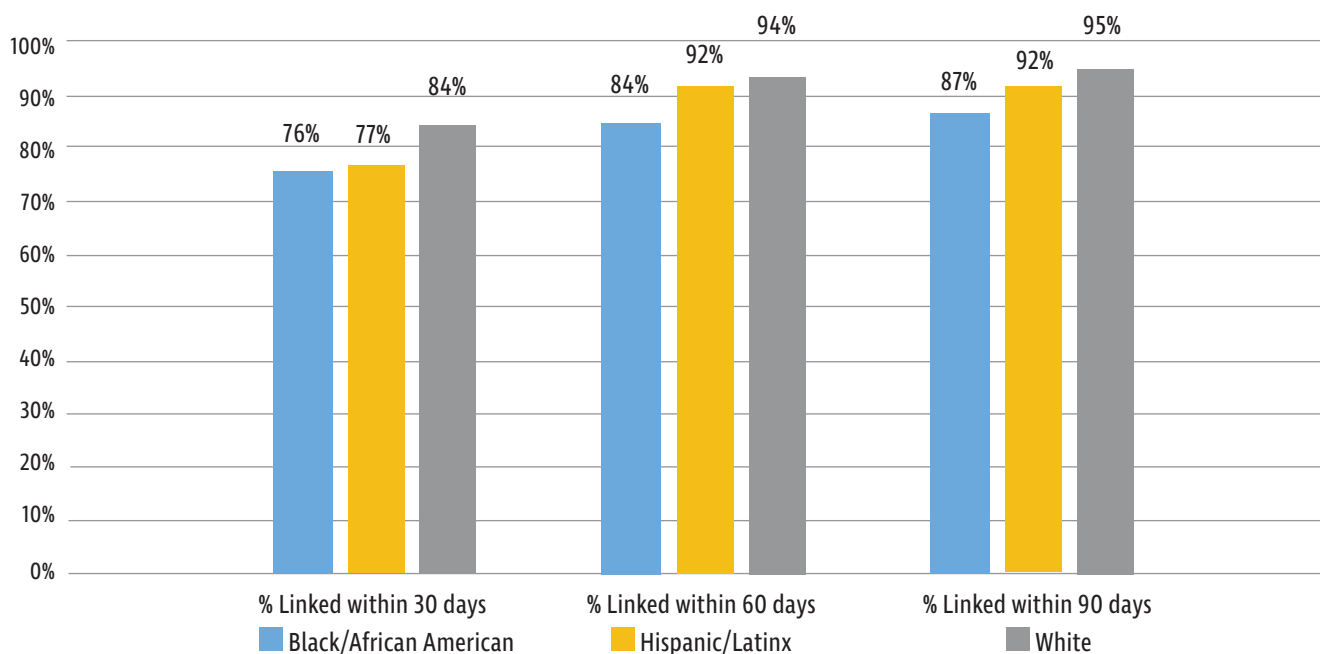
**Figure 96: Linkage to care by age at diagnosis, Columbus TGA, 2017**



Source: Ohio Department of Health, HIV Surveillance Program. Data reported as of April 25, 2019.

**Race/ethnicity:** Seventy-six percent of Blacks/African Americans, 77% of Hispanics/Latinx, and 84% of whites diagnosed with HIV in Franklin County in 2017 were linked to care within 30 days of diagnosis.

**Figure 97: Linkage to care by selected race/ethnicity, Franklin County, 2017**

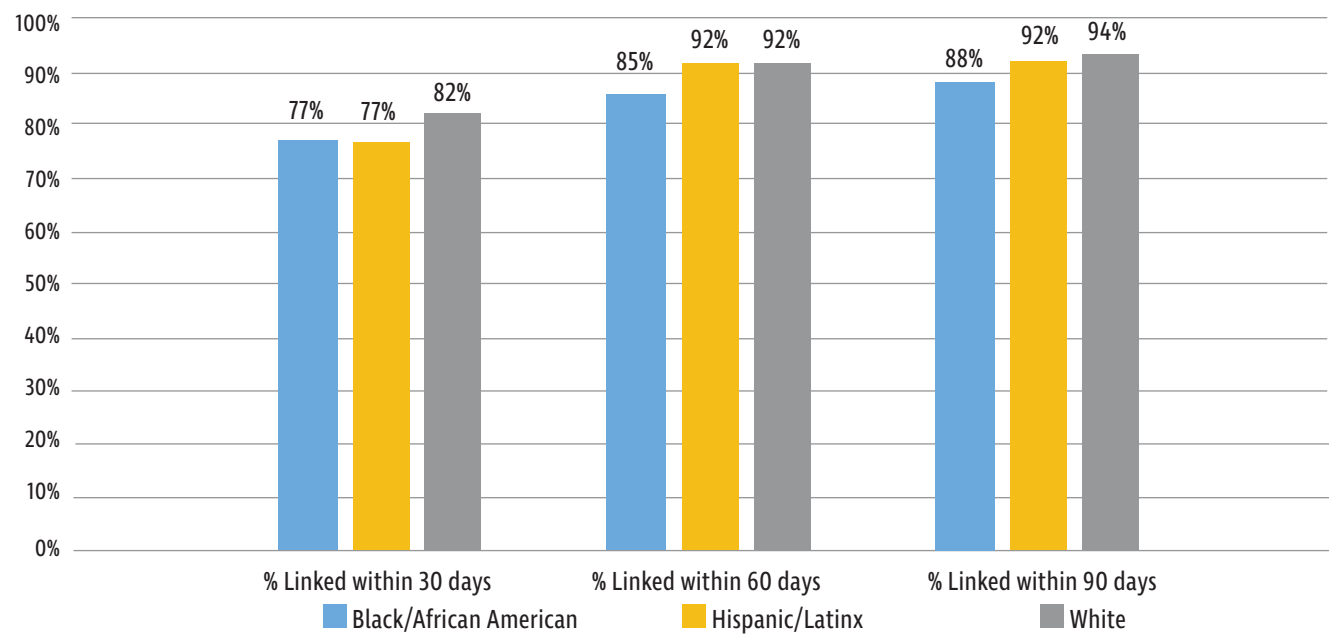


Source: Ohio Department of Health, HIV Surveillance Program. Data reported as of April 25, 2019.



Seventy-seven percent of Blacks/African Americans, 77% of Hispanics/Latinx, and 82% of whites diagnosed with HIV in the Columbus TGA in 2017 were linked to care within 30 days of diagnosis.

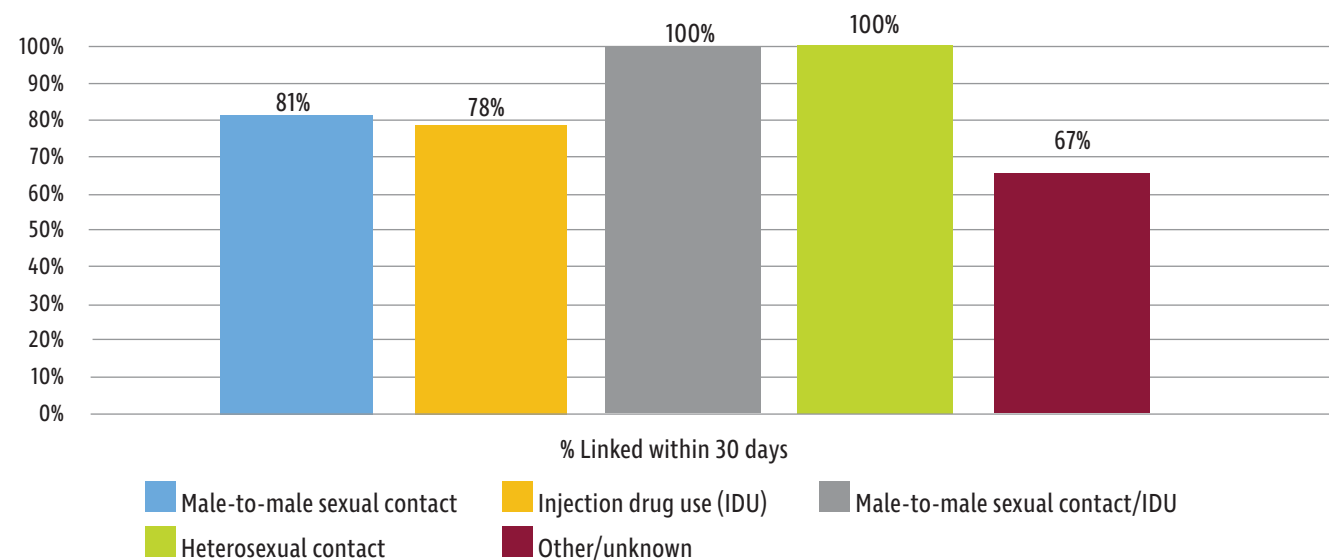
**Figure 98: Linkage to care by selected race/ethnicity, Columbus TGA 2017**



Source: Ohio Department of Health, HIV Surveillance Program. Data reported as of April 25, 2019.

**Transmission category:** Eighty-one percent of males with a transmission category of male-to-male sexual contact and 78% of males with a transmission category of IDU were linked to care within 30 days. One hundred percent of males with a transmission category of male-to-male sexual contact/IDU were linked to care within 30 days of diagnosis. One hundred percent of heterosexual males diagnosed with HIV in Franklin County in 2017 were linked to care within 30 days of diagnosis.

**Figure 99: Linkage to care by transmission category, males, Franklin County, 2017**

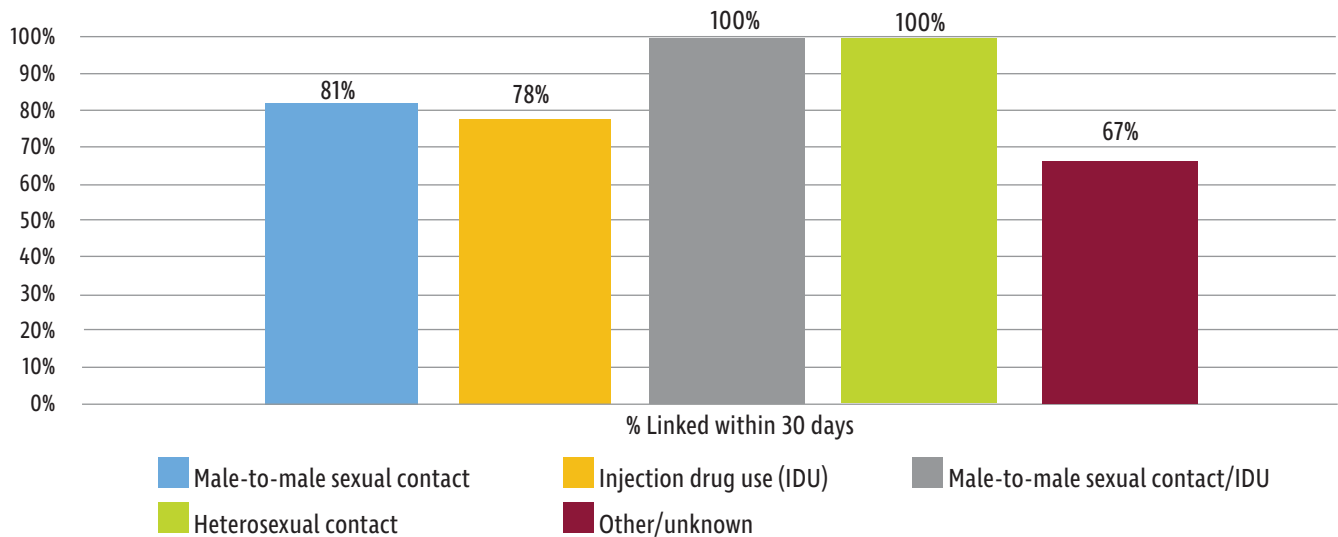


Source: Ohio Department of Health, HIV Surveillance Program. Data reported as of April 25, 2019.



Eighty-one percent of males with a transmission category of male-to-male sexual contact and 78% of males with a transmission category of IDU were linked to care within 30 days. One hundred percent of males with a transmission category of male-to-male sexual contact/IDU were linked to care within 30 days of diagnosis. One hundred percent of heterosexual males diagnosed with HIV in the Columbus TGA in 2017 were linked to care within 30 days of diagnosis.

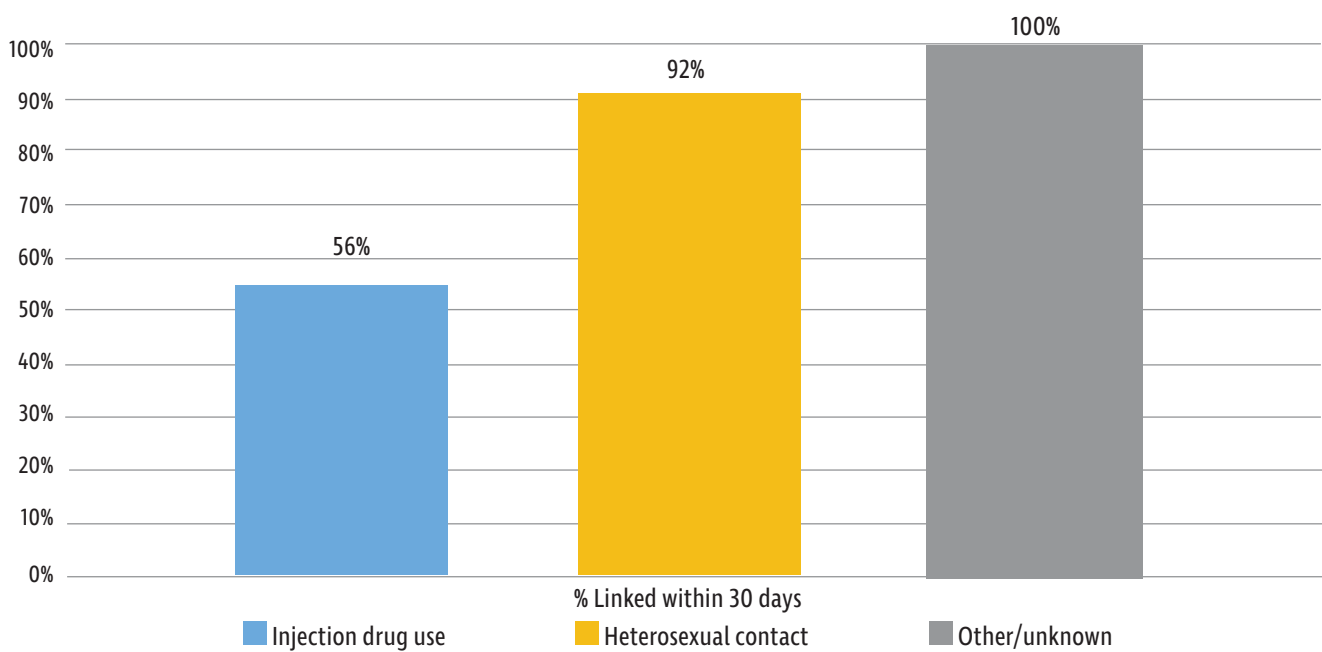
**Figure 100: Linkage to care by transmission category, males, Columbus TGA, 2017**



Source: Ohio Department of Health, HIV Surveillance Program. Data reported as of April 25, 2019.

Fifty-six percent of females with a transmission category of IDU and 92% of heterosexual females diagnosed with HIV in Franklin County in 2017 were linked to care within 30 days of diagnosis.

**Figure 101: Linkage to care by transmission category, females, Franklin County, 2017**

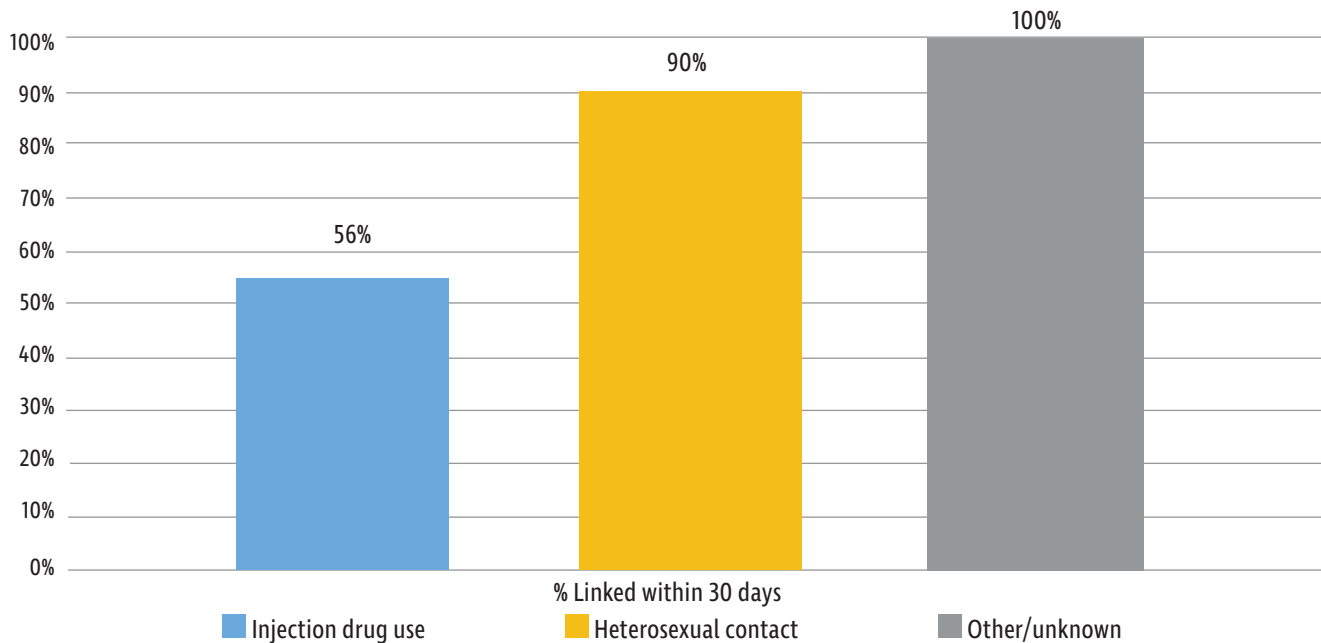


Source: Ohio Department of Health, HIV Surveillance Program. Data reported as of April 25, 2019.



Fifty-six percent of females with a transmission category of IDU and 90% of heterosexual females diagnosed with HIV in the Columbus TGA in 2017 were linked to care within 30 days of diagnosis.

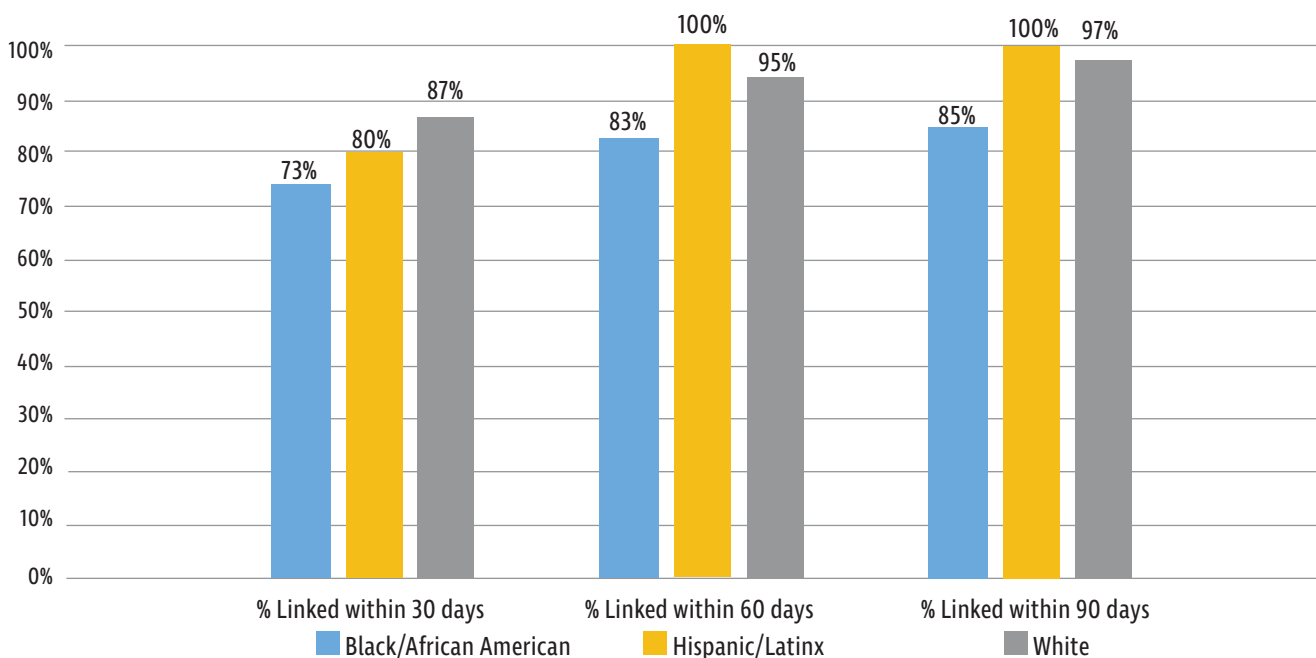
**Figure 102: Linkage to care by transmission category, females, Columbus TGA, 2017**



Source: Ohio Department of Health, HIV Surveillance Program. Data reported as of April 25, 2019.

**Special populations:** Seventy-three percent of Black/African American MSM, 80% of Hispanic/Latinx MSM, and 87% of white MSM diagnosed with HIV in Franklin County in 2017 were linked to care within 30 days of diagnosis. Here, the term MSM is defined as persons who were assigned male at birth, and who have a transmission category of 'male-to-male sexual contact' or 'male-to-male sexual contact/IDU.'

**Figure 103: Linkage to care among MSM by race/ethnicity, Franklin County, 2017**

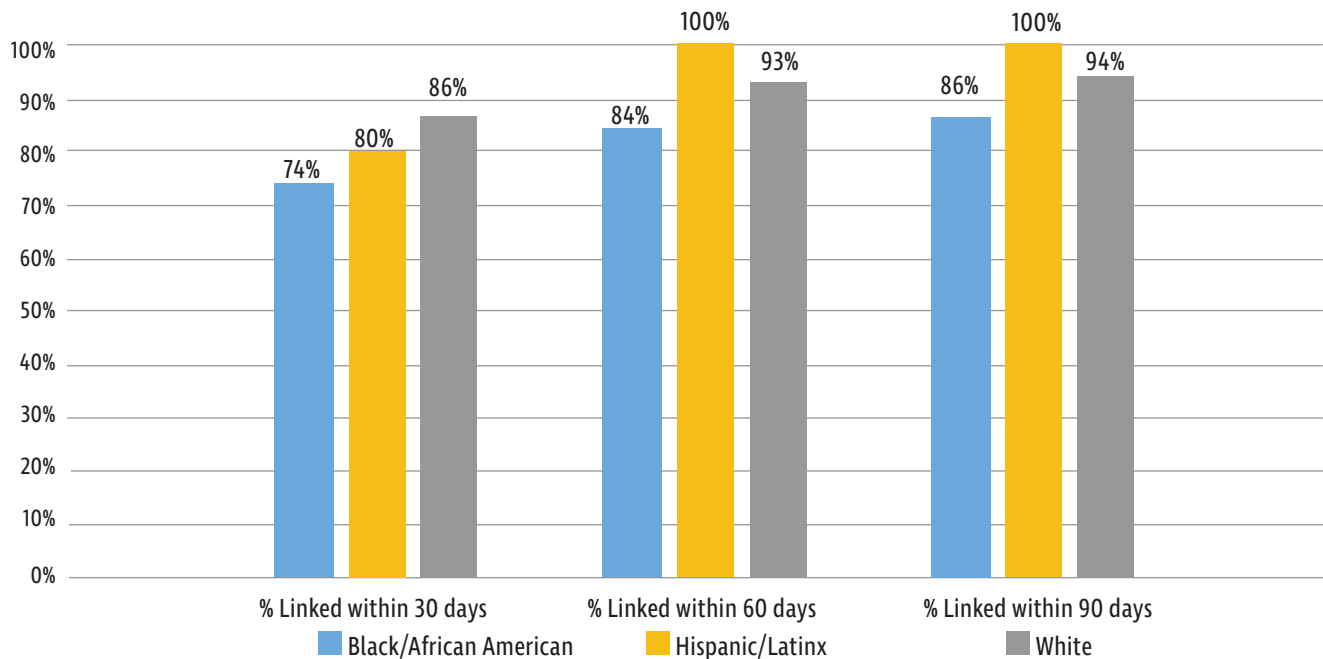


Source: Ohio Department of Health, HIV Surveillance Program. Data reported as of April 25, 2019.



Seventy-four percent of Black/African American MSM, 80% of Hispanic/Latinx MSM, and 86% of white MSM diagnosed with HIV in the Columbus TGA in 2017 were linked to care within 30 days of diagnosis. Here, the term MSM is defined as persons who were assigned male at birth, and who have a transmission category of 'male-to-male sexual contact' or 'male-to-male sexual contact/IDU.'

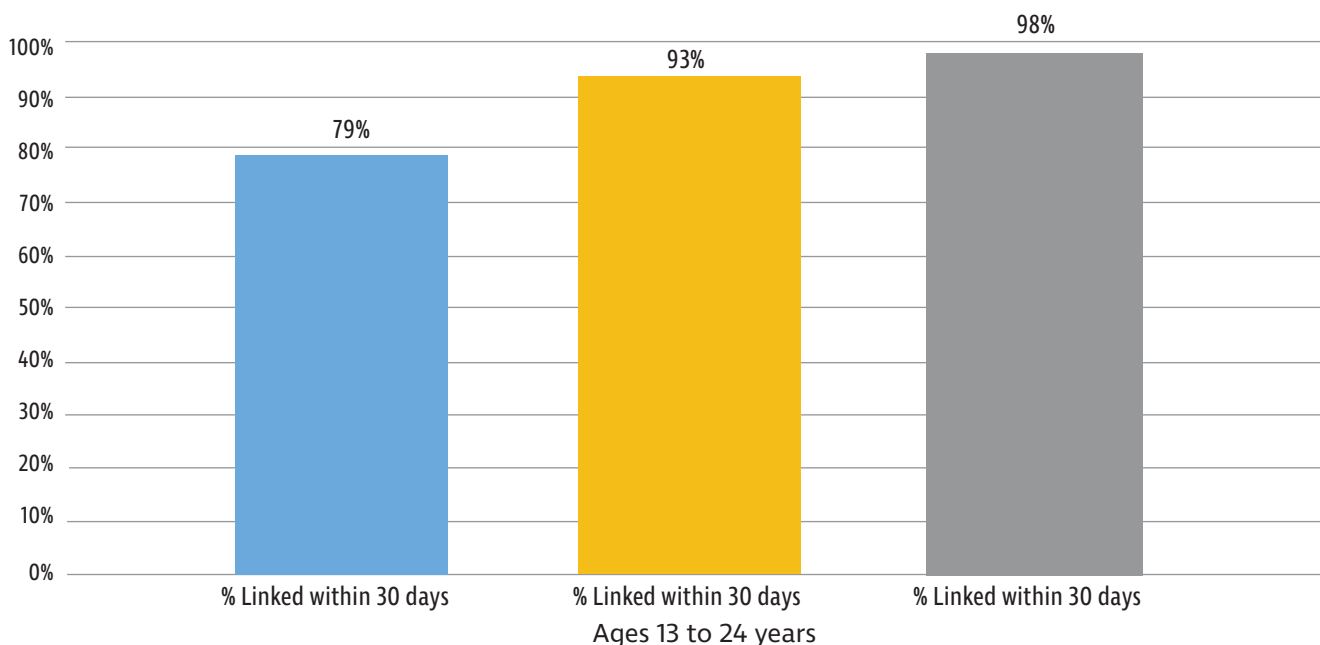
**Figure 104: Linkage to care among MSM by race/ethnicity, Columbus TGA, 2017**



Source: Ohio Department of Health, HIV Surveillance Program. Data reported as of April 25, 2019.

Seventy-nine percent of youth aged 13 to 24 years diagnosed with HIV in Franklin County in 2017 were linked to care within 30 days of diagnosis.

**Figure 105: Linkage to care among youth, Franklin County, 2017**



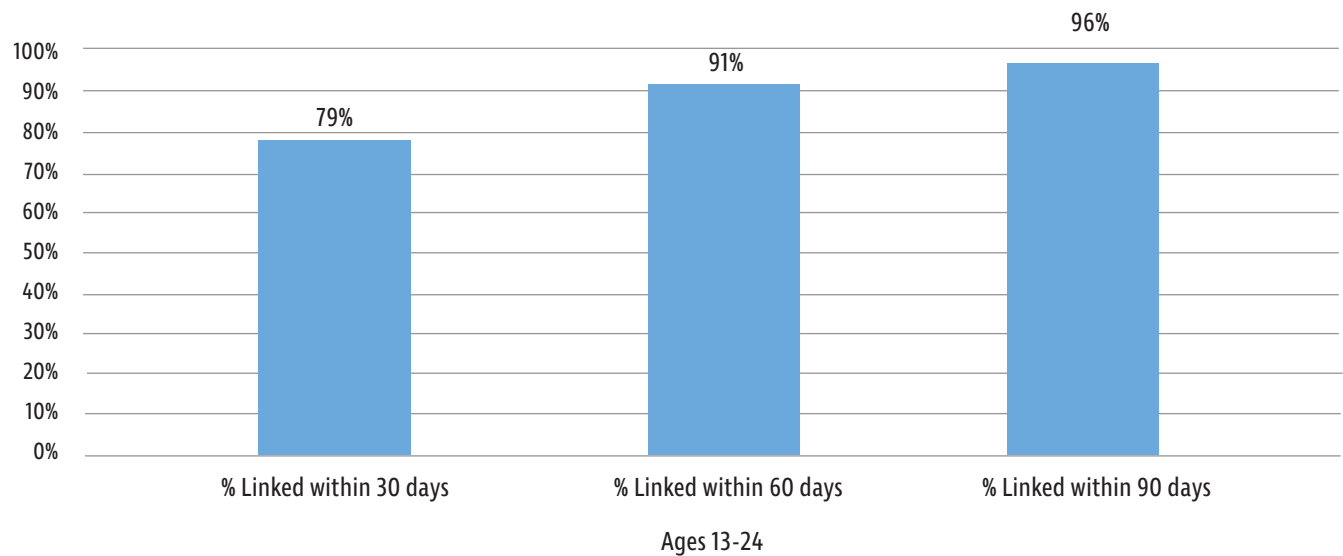
Source: Ohio Department of Health, HIV Surveillance Program. Data reported as of April 25, 2019.





Seventy-nine percent of youth aged 13 to 24 years diagnosed with HIV in Columbus TGA in 2017 were linked to care within 30 days of diagnosis.

**Figure 106: Linkage to care among youth, Columbus TGA, 2017**



Source: Ohio Department of Health, HIV Surveillance Program. Data reported as of April 25, 2019.

**Continuum of Care**

The measures for Receipt of Care, Retained in Care, and Virally Suppressed are calculated using the same denominator, but each measure uses a different numerator.

**Receipt of Care Numerator:** The number of persons in the denominator who had at least one CD4 and/or VL lab test through the end of the following year (e.g., living with HIV as of Dec. 31, 2017, and having a CD4 and/or VL lab test in 2018).

**Retained in Care Numerator:** The number of persons in the denominator who had at least two CD4 and/or VL lab tests at least three months apart through the end of the following year (e.g., living with HIV as of Dec. 31, 2017, and having at least two CD4/VL tests three months apart in 2018).

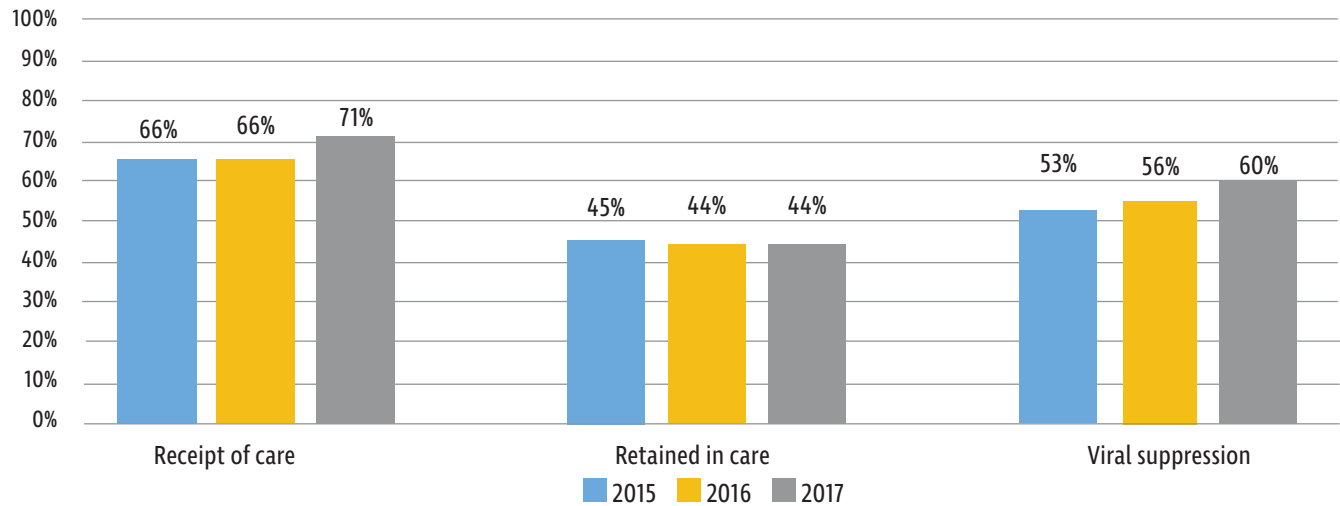
**Virally Suppressed Numerator:** The number of persons in the denominator whose most recent VL lab test in the following year was  $\leq 200$  copies/mL (e.g., living with HIV as of Dec. 31, 2017, and the most recent VL lab test in 2018 was  $\leq 200$  copies/mL).

**Denominator:** The number of adults/adolescents living with HIV infection through the end of each year, and still living in Franklin County at the end of the next year (e.g., living with HIV as of Dec. 31, 2017, and still living in Franklin County as of Dec. 31, 2018). Each of these measures uses the same denominator and thus the percentage for viral suppression may be higher than the percentage for retained in care (i.e., a person may be counted in the numerator for viral suppression because their most recent VL test was  $\leq 200$ , but not counted in the numerator for retained in care because they did not have at least two tests three months apart).



Of the persons living with diagnosed HIV in Franklin County at the end of 2017, 71% were in receipt of care, 44% were retained in care, and 60% were virally suppressed. However, of persons who were in receipt of care, 84% were virally suppressed. Twenty-nine percent of the persons living with HIV infection in Franklin County at the end of 2017, and still living in Franklin County at the end of 2018, did not have a CD4 or VL in 2017. These persons are considered to be 'out of care,' or to have an 'unmet need.'

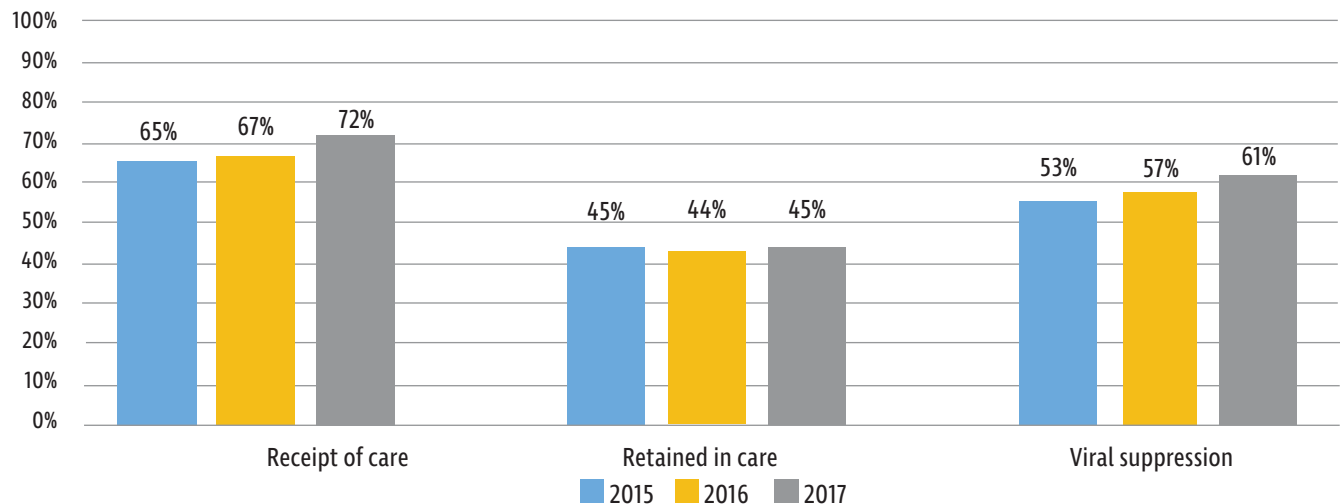
**Figure 107: Continuum of care among persons living with diagnosed HIV infection, Franklin County, 2015-2017**



Source: Ohio Department of Health, HIV Surveillance Program. Data reported as of April 25, 2019.

Of the persons living with diagnosed HIV in the Columbus TGA at the end of 2017, 72% were in receipt of care, 45% were retained in care, and 61% were virally suppressed. However, of persons who were in receipt of care, 85% were virally suppressed. Twenty-eight percent of the persons living with HIV infection in the Columbus TGA at the end of 2017, and still living in the Columbus TGA at the end of 2018, did not have a CD4 or VL in 2017. These persons are considered to be 'out of care,' or, have an 'unmet need.'

**Figure 108: Continuum of care among persons living with diagnosed HIV infection, Columbus TGA, 2015-2017**

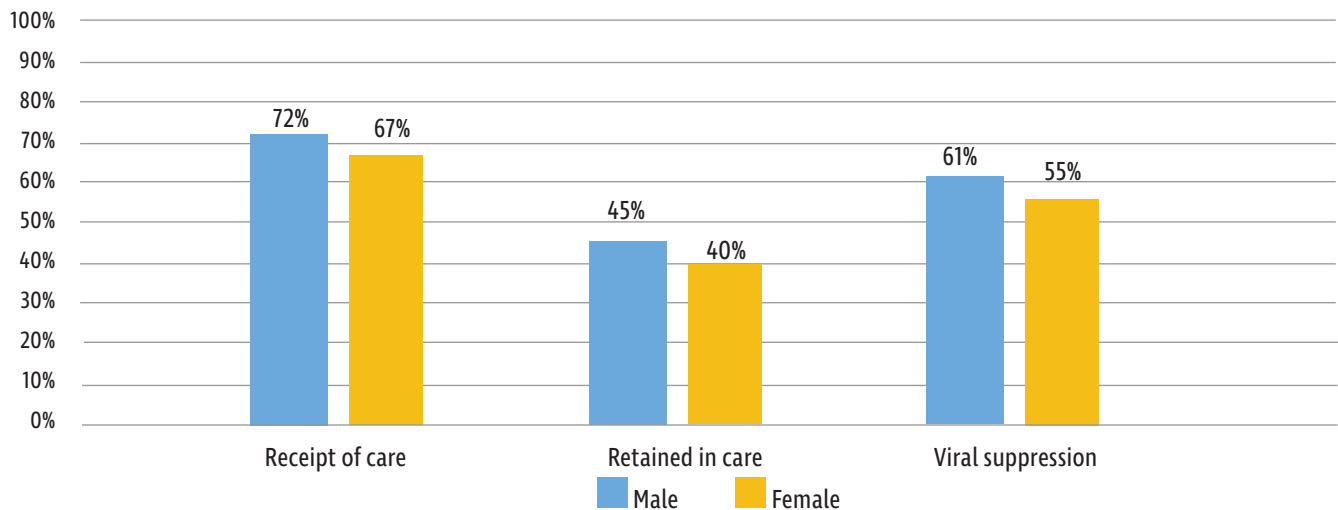


Source: Ohio Department of Health, HIV Surveillance Program. Data reported as of April 25, 2019.



**Sex at birth:** Of males living with diagnosed HIV in Franklin County at the end of 2017, 72% were in receipt of care, 45% were retained in care, and 61% were virally suppressed. Of females living with diagnosed HIV in Franklin County at the end of 2017, 67% were in receipt of care, 40% were retained in care, and 55% were virally suppressed.

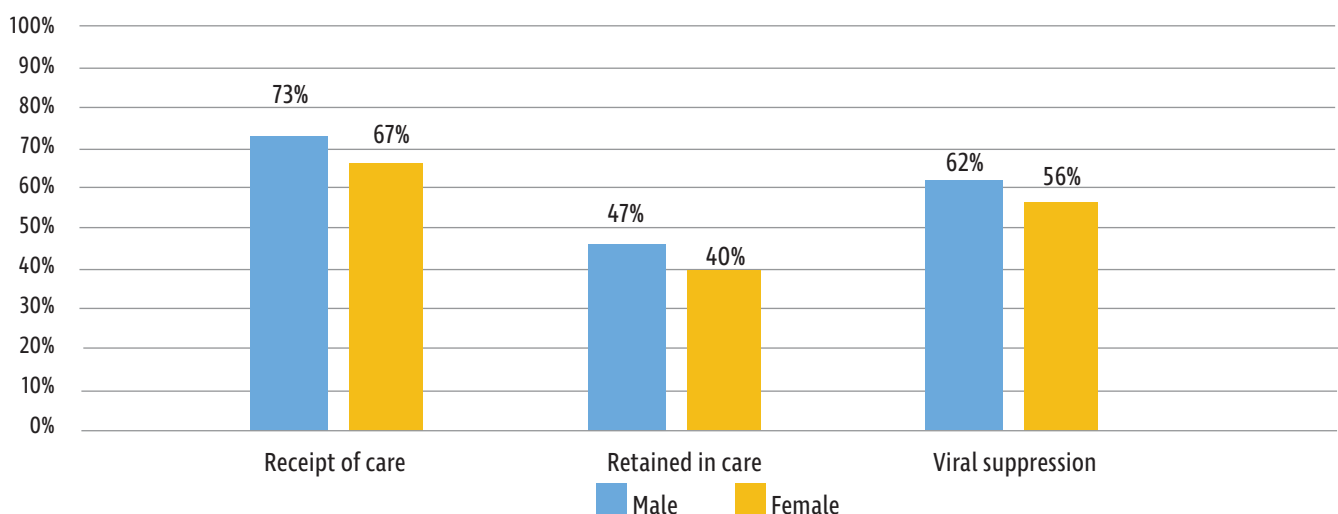
**Figure 109: Continuum of care among persons living with diagnosed HIV infection by sex at birth, Franklin County, 2017**



Source: Ohio Department of Health, HIV Surveillance Program. Data reported as of April 25, 2019.

Of males living with diagnosed HIV in the Columbus TGA at the end of 2017, 73% were in receipt of care, 47% were retained in care, and 62% were virally suppressed. Of females living with diagnosed HIV in the Columbus TGA at the end of 2017, 67% were in receipt of care, 40% were retained in care, and 56% were virally suppressed.

**Figure 110: Continuum of care among persons living with diagnosed HIV infection by sex at birth, Columbus TGA, 2017**

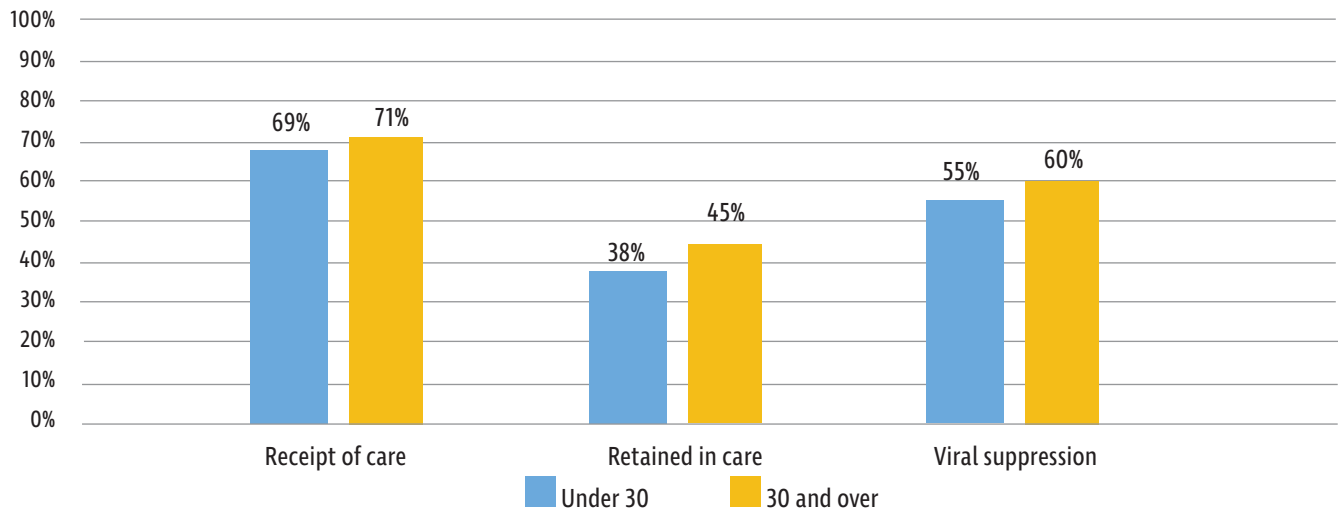


Source: Ohio Department of Health, HIV Surveillance Program. Data reported as of April 25, 2019.



**Current age:** Of persons aged 13 to 29 years living with diagnosed HIV in Franklin County at the end of 2017, 69% were in receipt of care, 38% were retained in care, and 55% were virally suppressed. Of persons aged 30 years and older living with diagnosed HIV in Franklin County at the end of 2017, 71% were in receipt of care, 45% were retained in care, and 60% were virally suppressed.

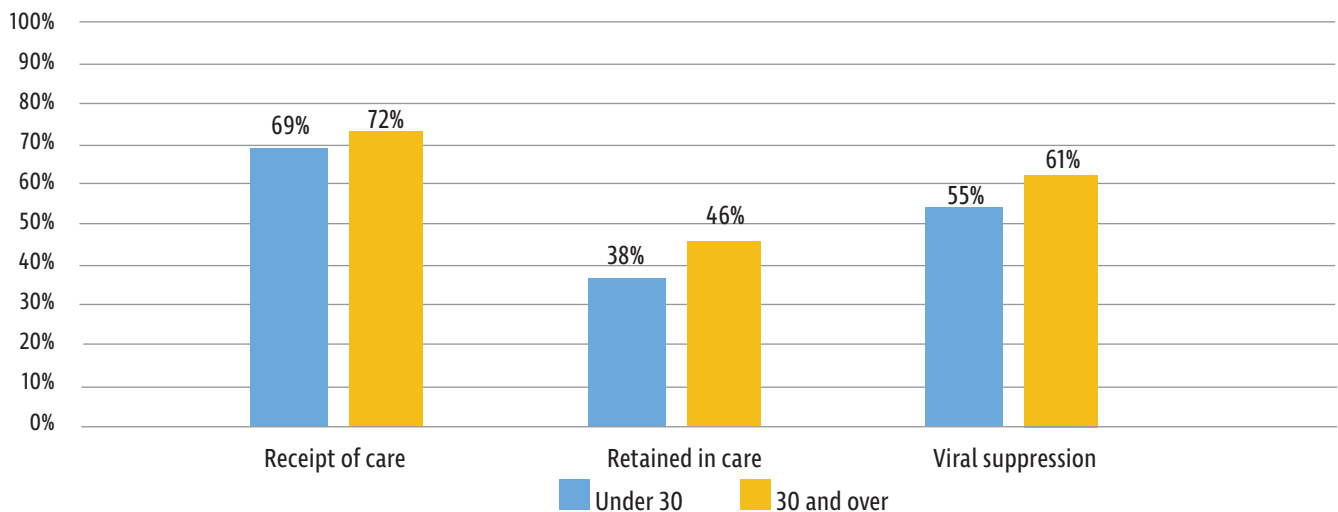
**Figure 111: Continuum of care among persons living with diagnosed HIV infection by current age, Franklin County, 2017**



Source: Ohio Department of Health, HIV Surveillance Program. Data reported as of April 25, 2019.

Of persons aged 13 to 29 years living with diagnosed HIV in the Columbus TGA at the end of 2017, 69% were in receipt of care, 38% were retained in care, and 55% were virally suppressed. Of persons aged 30 years and older living with diagnosed HIV in the Columbus TGA at the end of 2017, 72% were in receipt of care, 46% were retained in care, and 61% were virally suppressed.

**Figure 112: Continuum of care among persons living with diagnosed HIV infection by current age, Columbus TGA, 2017**

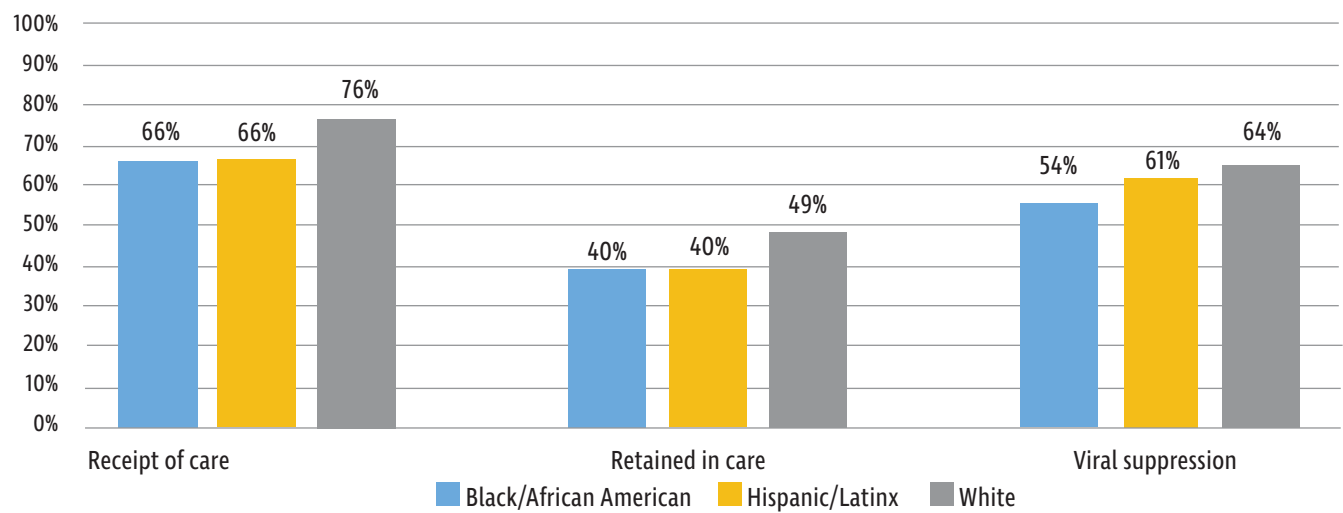


Source: Ohio Department of Health, HIV Surveillance Program. Data reported as of April 25, 2019.



**Race/ethnicity:** Of Blacks/African Americans living with diagnosed HIV in Franklin County at the end of 2017, 66% were in receipt of care, 40% were retained in care, and 54% were virally suppressed. Of Hispanics/Latinx living with diagnosed HIV in Franklin County at the end of 2017, 66% were in receipt of care, 40% were retained in care, and 61% were virally suppressed. Of whites living with diagnosed HIV in Franklin County at the end of 2017, 76% were in receipt of care, 49% were retained in care, and 64% were virally suppressed.

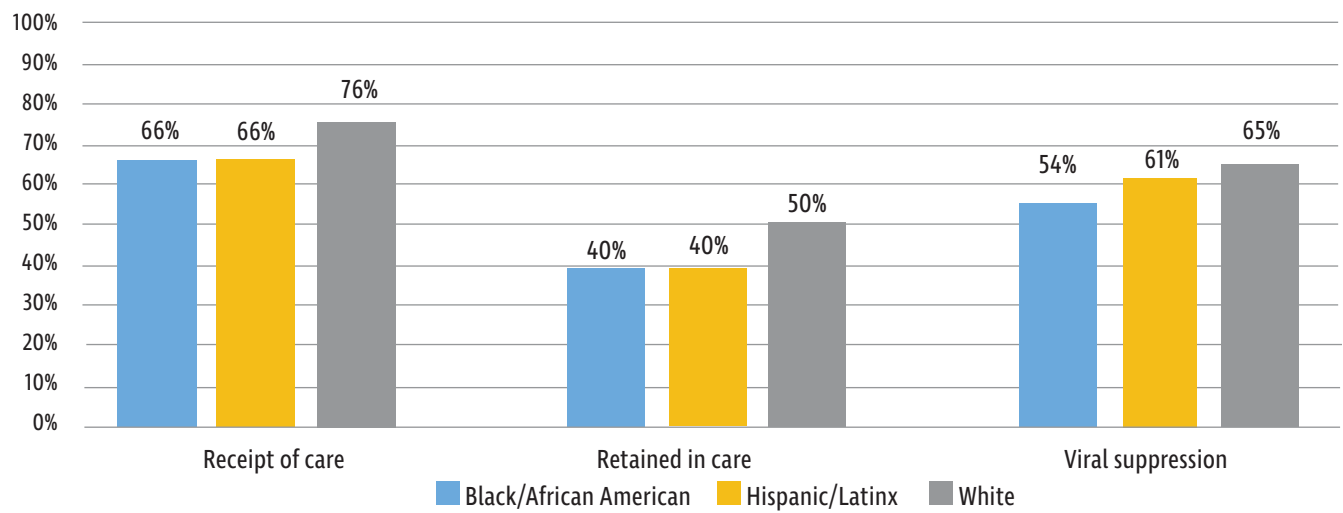
**Figure 113: Continuum of care among persons living with diagnosed HIV infection by selected race/ethnicity, Franklin County, 2017**



Source: Ohio Department of Health, HIV Surveillance Program. Data reported as of April 25, 2019.

Of Blacks/African Americans living with diagnosed HIV in the Columbus TGA at the end of 2017, 66% were in receipt of care, 40% were retained in care, and 54% were virally suppressed. Of Hispanics/Latinx living with diagnosed HIV in the Columbus TGA at the end of 2017, 66% were in receipt of care, 40% were retained in care, and 61% were virally suppressed. Of whites living with diagnosed HIV in the Columbus TGA at the end of 2017, 76% were in receipt of care, 50% were retained in care, and 65% were virally suppressed.

**Figure 114: Continuum of care among persons living with diagnosed HIV infection by selected race/ethnicity, Columbus TGA, 2017**

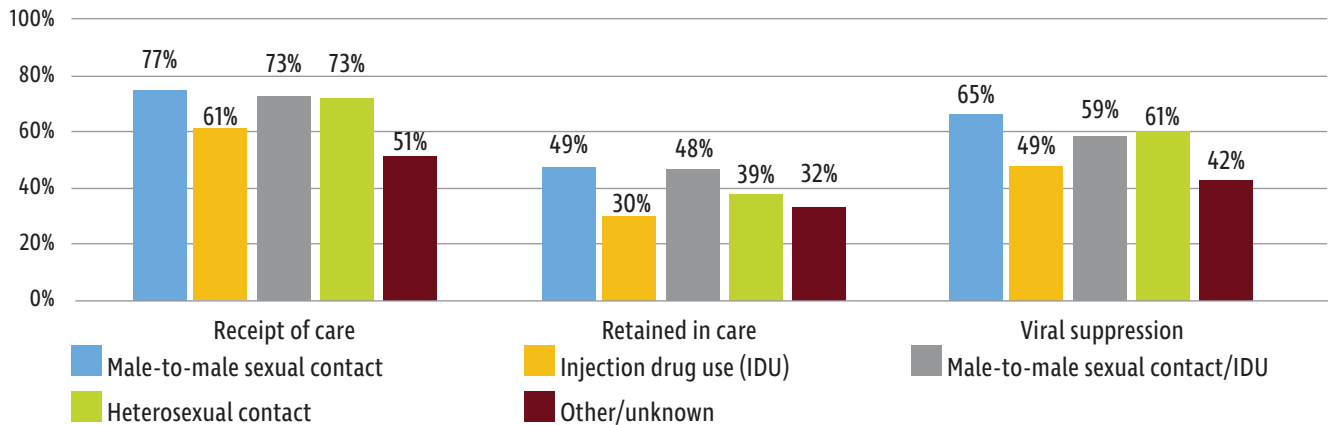


Source: Ohio Department of Health, HIV Surveillance Program. Data reported as of April 25, 2019.



**Transmission category:** Of males living with diagnosed HIV in Franklin County at the end of 2017 with a transmission category of male-to-male sexual contact, 77% were in receipt of care, 49% were retained in care, and 65% were virally suppressed. Of males with a transmission category of IDU, 61% were in receipt of care, 30% were retained in care, and 49% were virally suppressed. Of males with a transmission category of male-to-male sexual contact/IDU, 73% were in receipt of care, 48% were retained in care, and 59% were virally suppressed. Of males with a transmission category of heterosexual contact, 73% were in receipt of care, 39% were retained in care, and 61% were virally suppressed. Of males with a transmission category of heterosexual contact, 73% were in receipt of care, 39% were retained in care, and 61% were virally suppressed. Of males with a transmission category of heterosexual contact, 73% were in receipt of care, 39% were retained in care, and 61% were virally suppressed.

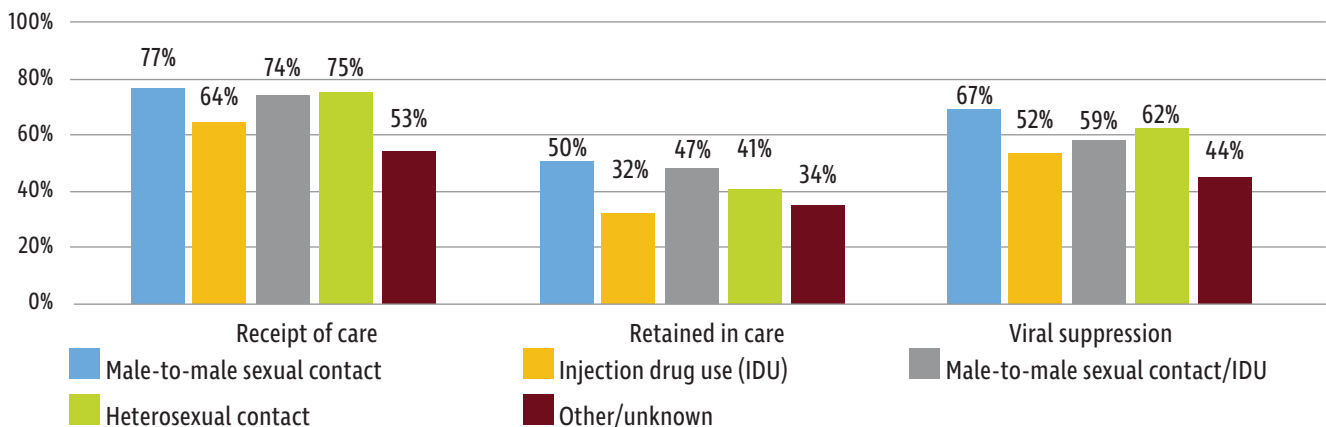
**Figure 115: Continuum of care among males living with diagnosed HIV infection by transmission category, Franklin County, 2017**



Source: Ohio Department of Health, HIV Surveillance Program. Data reported as of April 25, 2019.

Of males living with diagnosed HIV in the Columbus TGA at the end of 2017 with a transmission category of male-to-male sexual contact, 77% were in receipt of care, 50% were retained in care, and 67% were virally suppressed. Of males with a transmission category of IDU, 64% were in receipt of care, 32% were retained in care, and 52% were virally suppressed. Of males with a transmission category of male-to-male sexual contact/IDU, 74% were in receipt of care, 47% were retained in care, and 59% were virally suppressed. Of males with a transmission category of heterosexual contact, 75% were in receipt of care, 41% were retained in care, and 62% were virally suppressed. Of males with a transmission category of heterosexual contact, 75% were in receipt of care, 41% were retained in care, and 62% were virally suppressed.

**Figure 116: Continuum of care among males living with diagnosed HIV infection by transmission category, Columbus TGA, 2017**

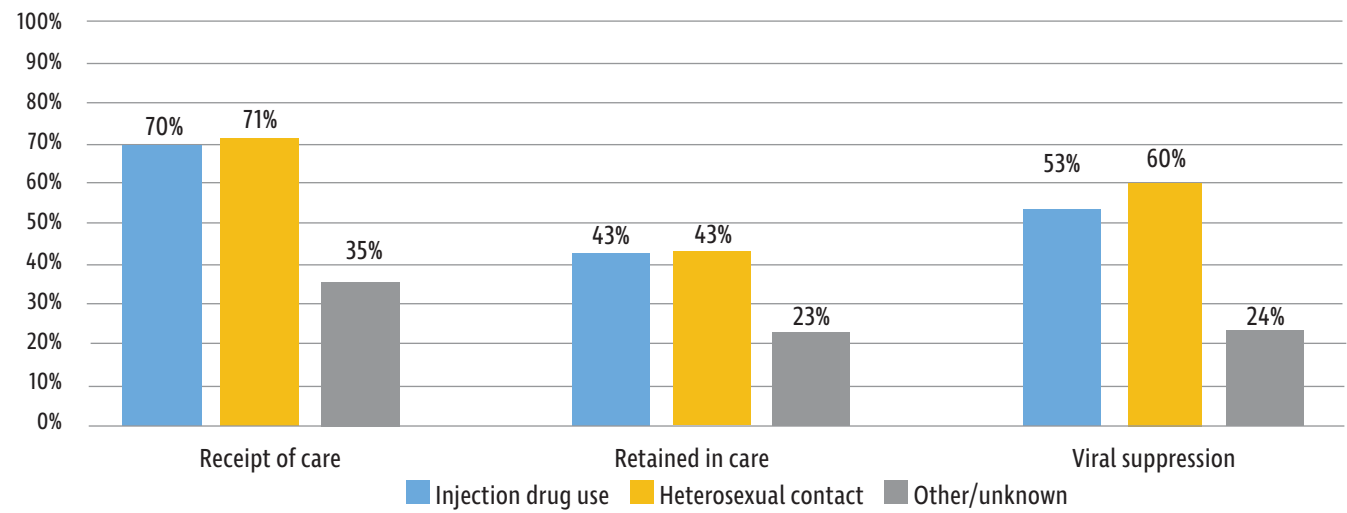


Source: Ohio Department of Health, HIV Surveillance Program. Data reported as of April 25, 2019.



Of females living with diagnosed HIV in Franklin County at the end of 2017 with a transmission category of IDU, 70% were in receipt of care, 43% were retained in care, and 53% were virally suppressed. Of females with a transmission category of heterosexual contact, 71% were in receipt of care, 43% were retained in care, and 60% were virally suppressed.

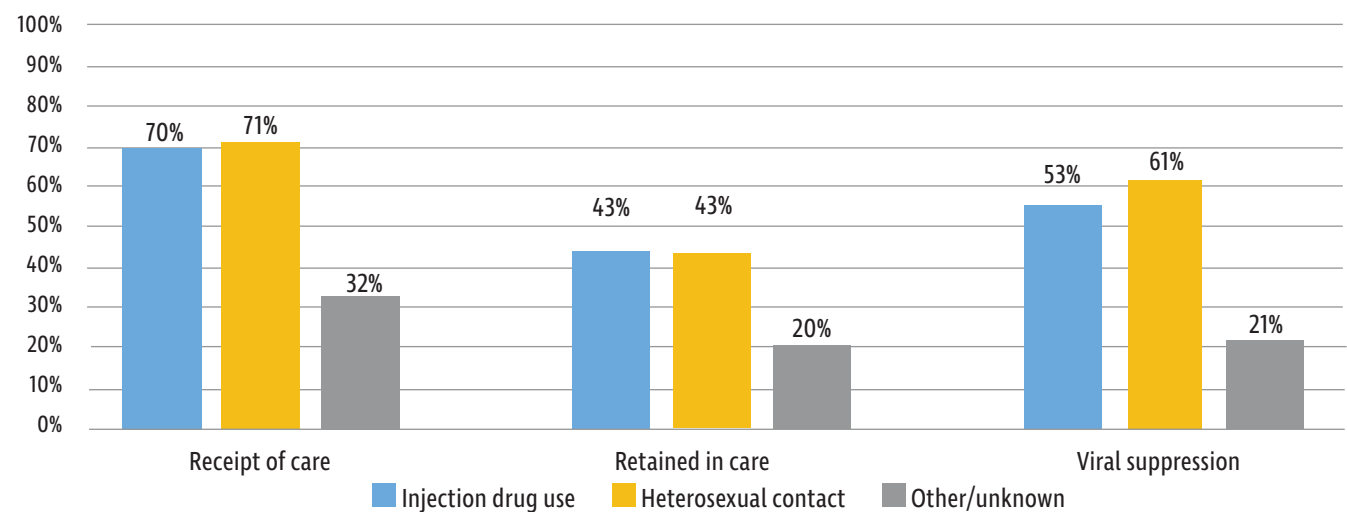
**Figure 117: Continuum of care among females living with diagnosed HIV infection by transmission category, Franklin County, 2017**



Source: Ohio Department of Health, HIV Surveillance Program. Data reported as of April 25, 2019.

Of females living with diagnosed HIV in the Columbus TGA at the end of 2017 with a transmission category of IDU, 70% were in receipt of care, 43% were retained in care, and 53% were virally suppressed. Of females with a transmission category of heterosexual contact, 71% were in receipt of care, 43% were retained in care, and 61% were virally suppressed.

**Figure 118: Continuum of care among females living with diagnosed HIV infection by transmission category, Columbus TGA, 2017**

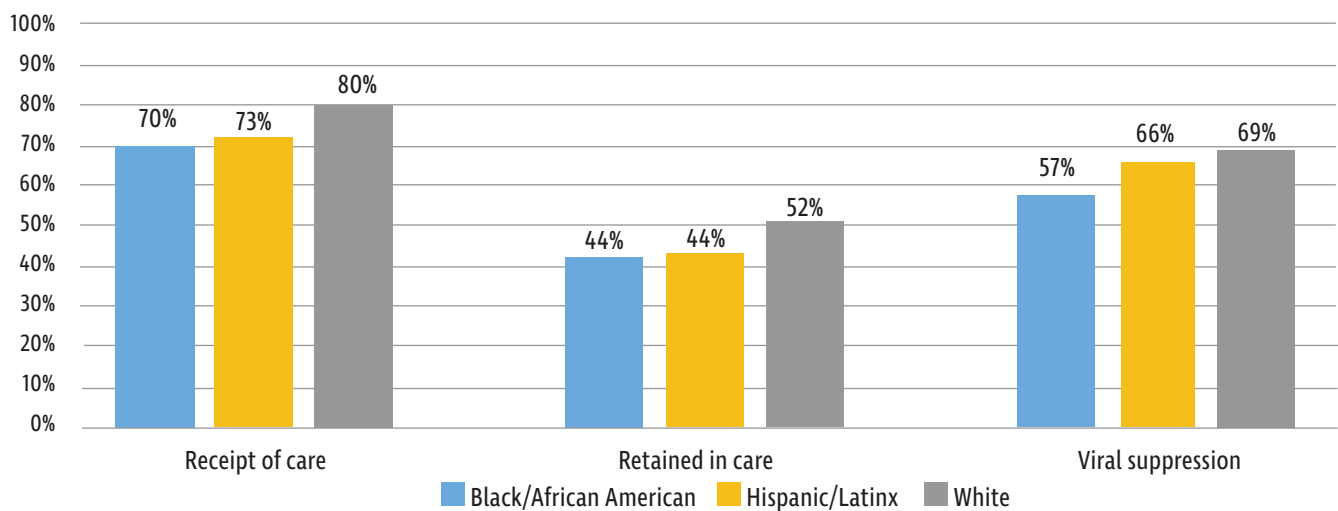


Source: Ohio Department of Health, HIV Surveillance Program. Data reported as of April 25, 2019.



**Special Populations:** Of Black/African American MSM living with diagnosed HIV in Franklin County at the end of 2017, 70% were in receipt of care, 44% were retained in care, and 57% were virally suppressed. Of Hispanic/Latinx MSM, 73% were in receipt of care, 44% were retained in care, and 66% were virally suppressed. Of white MSM, 80% were in receipt of care, 52% were retained in care, and 69% were virally suppressed. Here, the term MSM is defined as persons who were assigned male at birth, and who have a transmission category of 'male-to-male sexual contact' or 'male-to-male sexual contact/IDU.'

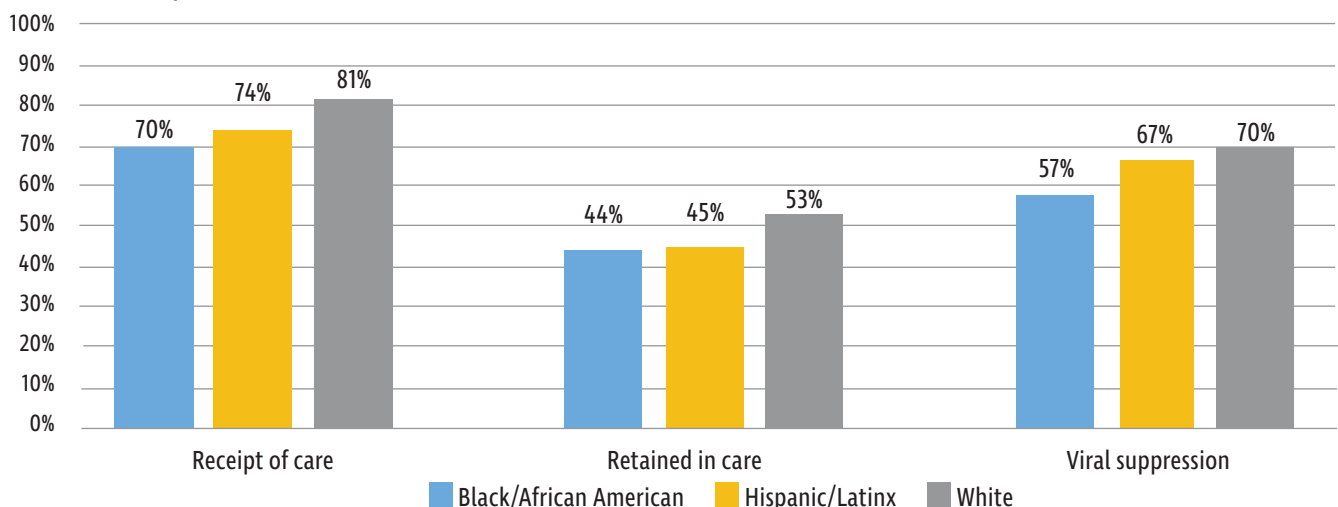
**Figure 119: Continuum of care among MSM living with diagnosed HIV infection by selected race/ethnicity, Franklin County, 2017**



Source: Ohio Department of Health, HIV Surveillance Program. Data reported as of April 25, 2019.

Of Black/African American MSM living with diagnosed HIV in the Columbus TGA at the end of 2017, 70% were in receipt of care, 44% were retained in care, and 57% were virally suppressed. Of Hispanic/Latinx MSM, 74% were in receipt of care, 45% were retained in care, and 67% were virally suppressed. Of white MSM, 81% were in receipt of care, 53% were retained in care, and 70% were virally suppressed. Here, the term MSM is defined as persons who were assigned male at birth, and who have a transmission category of 'male-to-male sexual contact' or 'male-to-male sexual contact/IDU.'

**Figure 120: Continuum of care among MSM living with diagnosed HIV infection by selected race/ethnicity, Columbus TGA, 2017**



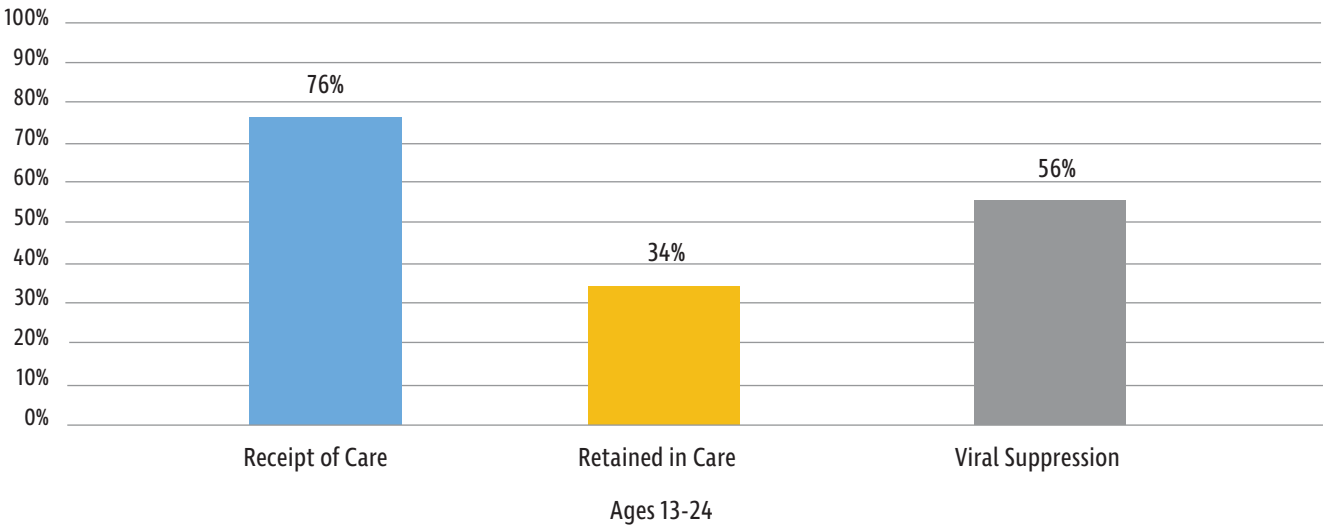
Source: Ohio Department of Health, HIV Surveillance Program. Data reported as of April 25, 2019.





Of youth aged 13 to 24 years living with diagnosed HIV in Franklin County at the end of 2017, 76% were in receipt of care, 34% were retained in care, and 56% were virally suppressed.

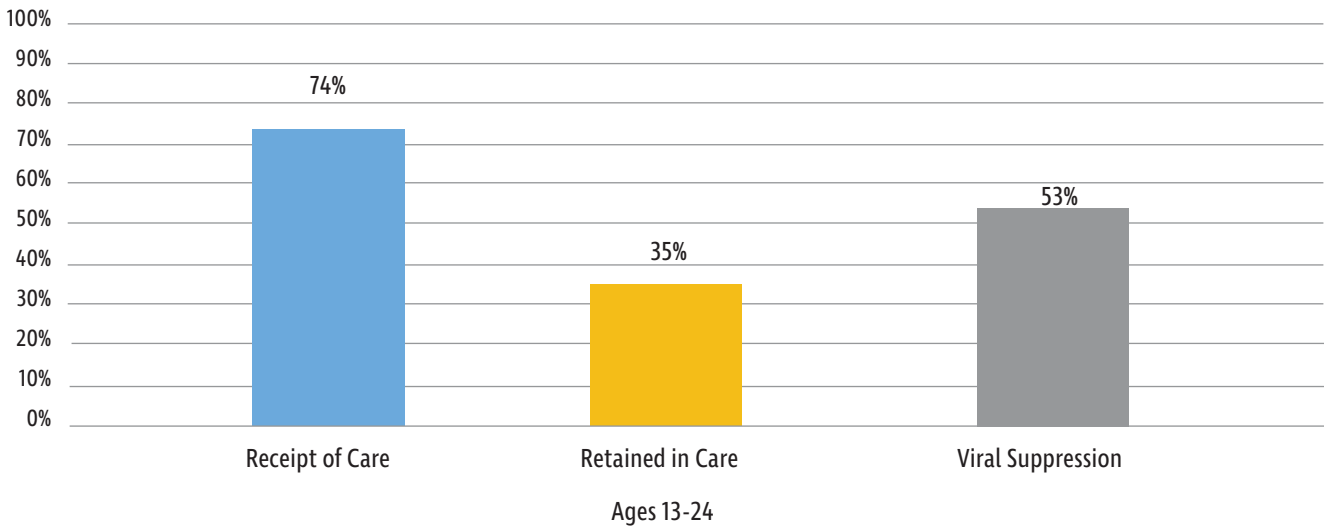
**Figure 121: Continuum of care among youth living with diagnosed HIV infection by transmission category, Franklin County, 2017**



Source: Ohio Department of Health, HIV Surveillance Program. Data reported as of April 25, 2019.

Of youth aged 13 to 24 years living with diagnosed HIV in Columbus TGA at the end of 2017, 74% were in receipt of care, 35% were retained in care, and 53% were virally suppressed.

**Figure 122: Continuum of care among youth living with diagnosed HIV infection, Columbus TGA, 2017**



Source: Ohio Department of Health, HIV Surveillance Program. Data reported as of April 25, 2019.

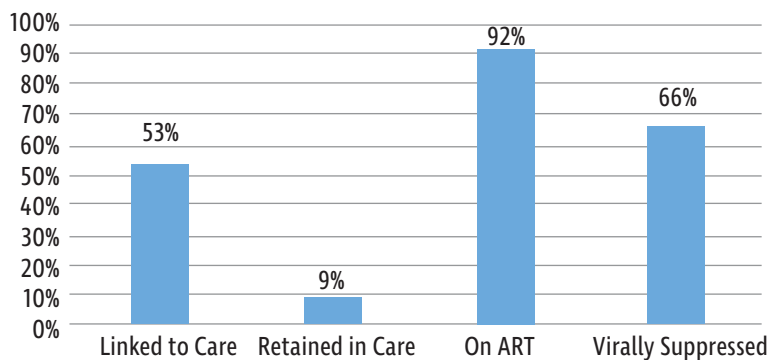


**Ryan White All-Parts:** These data include all clients who had a service provided by one of the Ohio Ryan White Parts A, B, C, or D in 2018. This data also excludes clients who received only medication services through the Ohio AIDS Drug Assistance Program and no other Ryan White service.

**Table 53: Continuum of care measures as defined by Health Resources and Services Administration (HRSA)**

Denominator	Denominator	Denominator
Linked to Care	Clients with first service date within 90 days of their HIV diagnosis date.	Clients diagnosed with HIV in 2018 and who received a service paid for by an Ohio Ryan White Part grantee in 2018.
Retained in Care	Clients who received at least two services in 2018, at least 90 days apart.	Clients with a service in 2018 paid by an Ohio Ryan White Part Grantee.
On ART (antiretroviral therapy)	Clients prescribed ART (as indicated by a current ART medication identified in CAREWare).	Clients with a service in 2018 paid by an Ohio Ryan White Part Grantee.
Virally Suppressed	Clients whose most recent viral load test is $\leq 200$ copies per ml in the service year.	Clients with a service in 2018 paid by an Ohio Ryan White Part Grantee.

**Figure 123: Continuum of care among Ryan White clients, All-Parts, Franklin County, 2018**

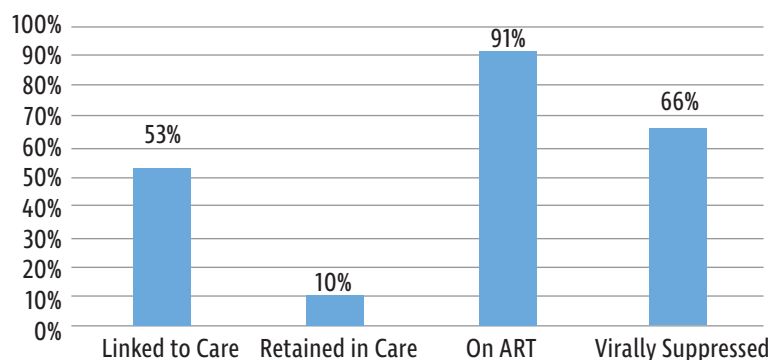


	# of Clients
Total new diagnosed in 2018	17
Linked to care	9
Retained in care	97
On ART	946
Virally suppressed*	683
Total who received a service in 2018	1,033

\*Of clients with a viral load reported in 2018 (n=744), 92% were virally suppressed.

Source: CAREWare, All-Parts. Data reported through Nov. 14, 2019.

**Figure 124: Continuum of care among Ryan White clients, All-Parts, Columbus TGA, 2018**



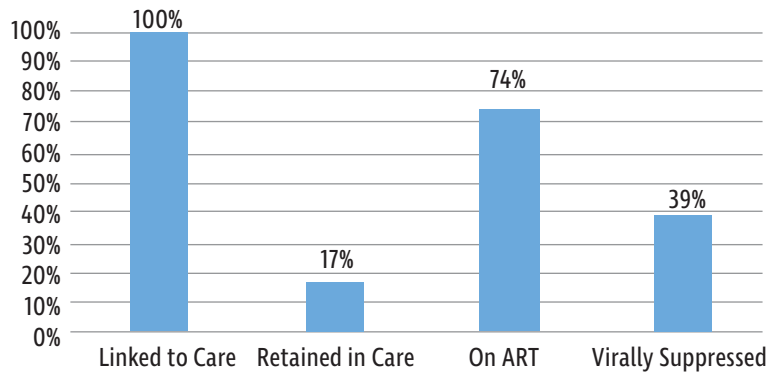
	# of Clients
Total new diagnosed in 2018	17
Linked to care	9
Retained in care	107
On ART	1,019
Virally suppressed*	739
Total who received a service in 2018	1,119

\*Of clients with a viral load reported in 2018 (n=803), 92% were virally suppressed.

Source: CAREWare, All-Parts. Data reported through Nov. 14, 2019.



**Figure 125: Continuum of care among Ryan White clients aged 13-24 years, All-Parts, Franklin County, 2018**

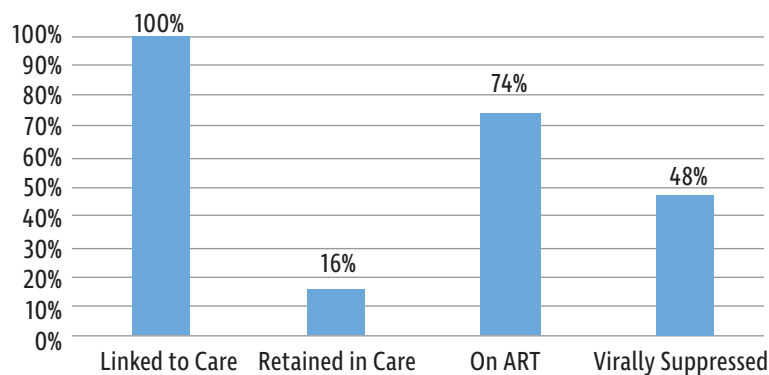


Source: CAREWare, All-Parts. Data reported through Nov. 14, 2019.

	# of Clients
Total new diagnosed in 2018	1
Linked to care	1
Retained in care	4
On ART	17
Virally suppressed*	9
Total who received a service in 2018	23

\*Of clients with a viral load reported in 2018 (n=15), 60% were virally suppressed.

**Figure 126: Continuum of care among Ryan White clients aged 13-24 years, All-Parts, Columbus TGA, 2018**

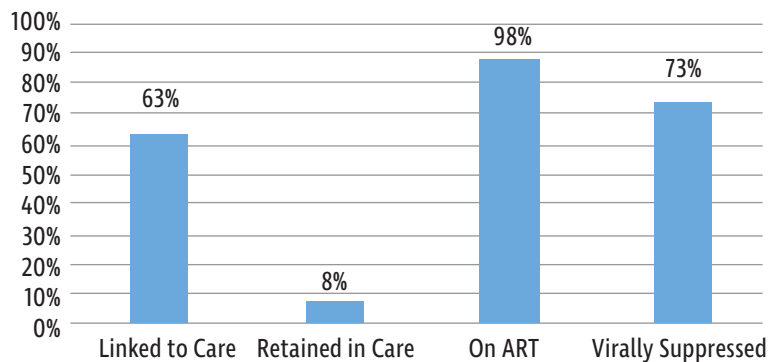


Source: CAREWare, All-Parts. Data reported through Nov. 14, 2019.

	# of Clients
Total new diagnosed in 2018	1
Linked to care	1
Retained in care	5
On ART	23
Virally suppressed*	15
Total who received a service in 2018	31

\*Of clients with a viral load reported in 2018 (n=22), 68% were virally suppressed.

**Figure 127: Continuum of care among Ryan White MSM, All-Parts, Franklin County, 2018**



Source: CAREWare, All-Parts. Data reported through Nov. 14, 2019.

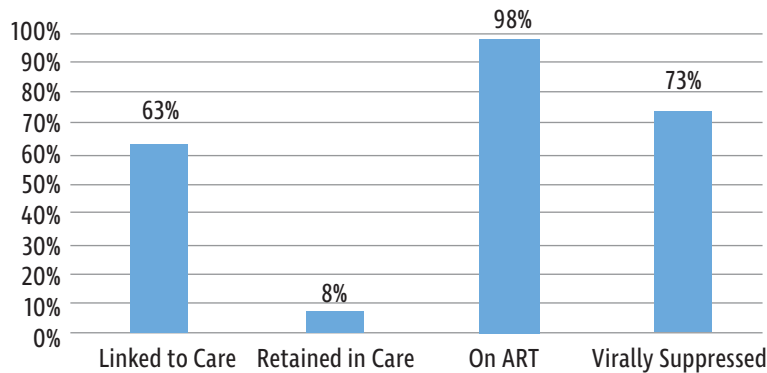
	# of Clients
Total new diagnosed in 2018	8
Linked to care	5
Retained in care	49
On ART	598
Virally suppressed*	448
Total who received a service in 2018	611

\*Of clients with a viral load reported in 2018 (n=481), 93% were virally suppressed.



Here, the term MSM is defined as persons who were assigned male at birth, and who have a risk factor of 'male-to-male sexual contact.'

**Figure 128: Continuum of care among Ryan White MSM, All-Parts, Columbus TGA, 2018**



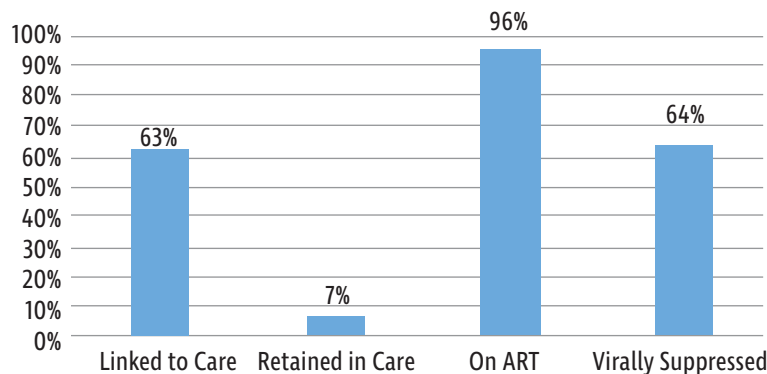
	# of Clients
Total new diagnosed in 2018	8
Linked to care	5
Retained in care	51
On ART	641
Virally suppressed*	481
Total who received a service in 2018	655

\*Of clients with a viral load reported in 2018 (n=515), 93% were virally suppressed.

Source: CAREWare, All-Parts. Data reported through Nov. 14, 2019.

Here, the term MSM is defined as persons who were assigned male at birth, and who have a risk factor of 'male-to-male sexual contact.'

**Figure 129: Continuum of care among Ryan White minority MSM, All-Parts, Franklin County, 2018**



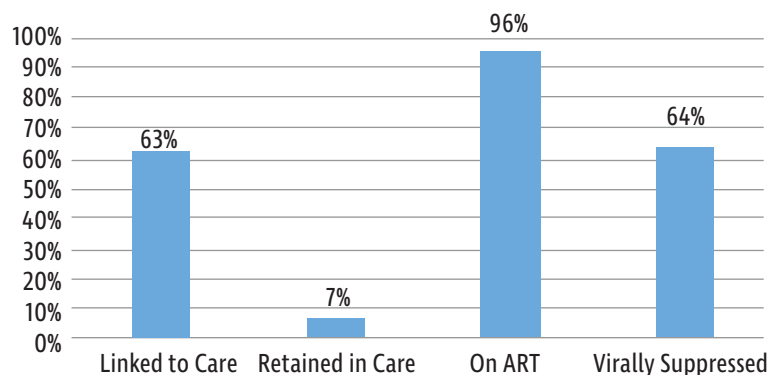
	# of Clients
Total new diagnosed in 2018	8
Linked to care	5
Retained in care	20
On ART	258
Virally suppressed*	171
Total who received a service in 2018	269

\*Of clients with a viral load reported in 2018 (n=194), 88% were virally suppressed.

Source: CAREWare, All-Parts. Data reported through Nov. 14, 2019.

Here, the term MSM is defined as persons who were assigned male at birth and who have a risk factor of 'male-to-male sexual contact,' and minority is defined as black/African American or Hispanic/Latinx.

**Figure 130: Continuum of care among Ryan White minority MSM, All-Parts, Columbus TGA, 2018**



	# of Clients
Total new diagnosed in 2018	8
Linked to care	5
Retained in care	20
On ART	262
Virally suppressed*	175
Total who received a service in 2018	274

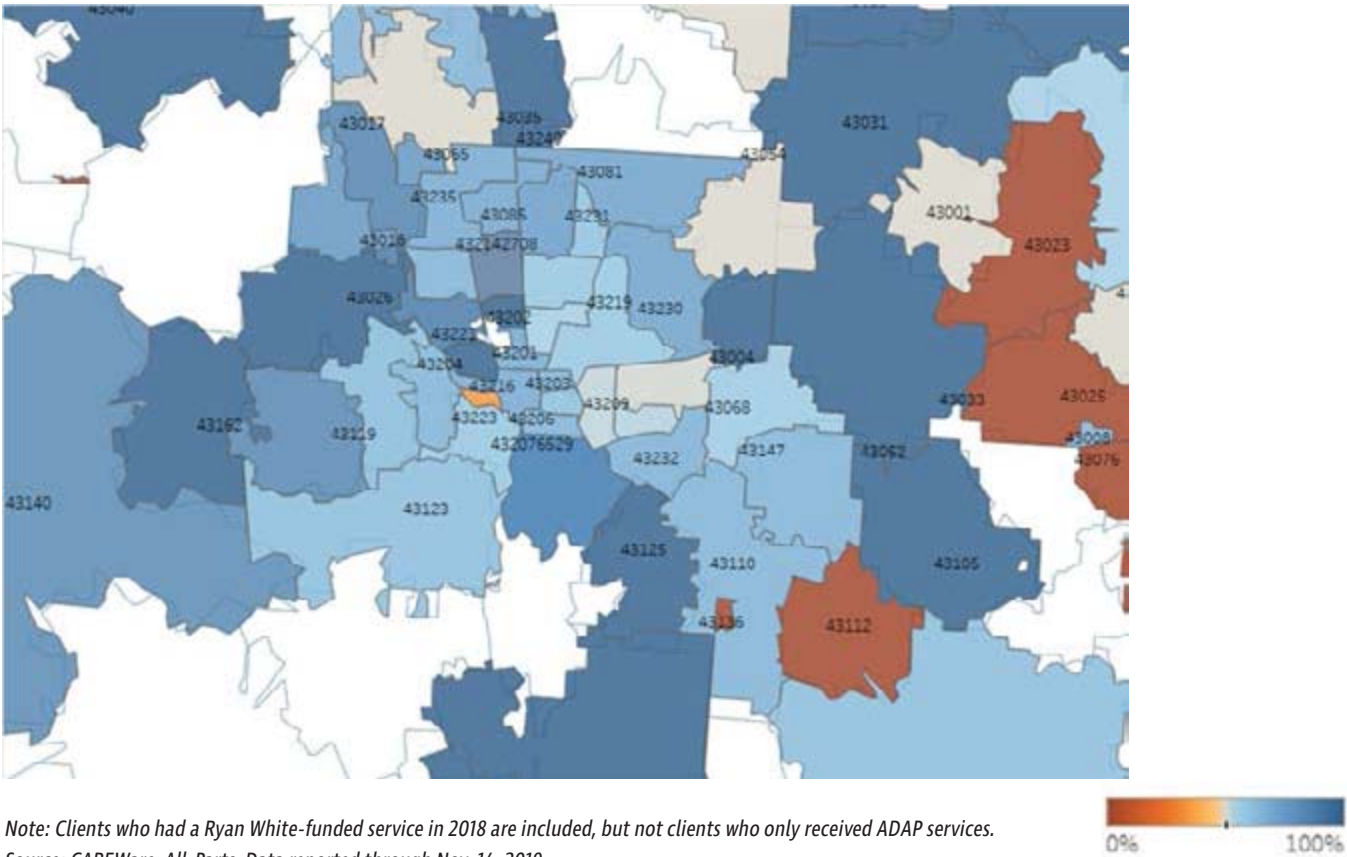
\*Of clients with a viral load reported in 2018 (n=198), 88% were virally suppressed.

Source: CAREWare, All-Parts. Data reported through Nov. 14, 2019.



Here, the term MSM is defined as persons who were assigned male at birth and who have a risk factor of 'male-to-male sexual contact,' and minority is defined as Black/African American or Hispanic/Latinx.

**Figure 131: Viral suppression among Ryan White clients (All-Parts) by ZIP code, Franklin County, 2018**



Among Part A clients with at least one medical visit in 2018 in Franklin County, 75.5% were virally suppressed.  
Among Part A clients in the Columbus TGA, 75.6% were virally suppressed.

**Table 54: Viral suppression among Part A clients with at least one medical visit, 2018**

	Numerator	Denominator	Percentage
Franklin County	1,262	1,670	75.5%
Columbus TGA	1,383	1,834	75.6%

Source: Columbus TGA Part A. Data reported through Nov. 30, 2019.



**Table 55: Viral suppression among Part A clients with at least one medical visit by ZIP code, Columbus TGA, 2018**

ZIP Code	%VLS	ZIP Code	%VLS	ZIP Code	%VLS
43004	92.31%	43105	100.00%	43213	79.49%
43008	50.00%	43107	100.00%	43214	65.38%
43015	75.00%	43109	100.00%	43215	84.44%
43016	33.33%	43110	85.00%	43216	0.00%
43017	71.43%	43113	100.00%	43217	100.00%
43025	66.67%	43119	62.50%	43219	80.33%
43026	80.00%	43123	77.78%	43220	57.14%
43031	50.00%	43125	84.62%	43221	69.23%
43035	83.33%	43130	60.00%	43222	82.35%
43040	100.00%	43137	100.00%	43223	66.18%
43054	66.67%	43140	77.78%	43224	79.41%
43055	80.00%	43143	100.00%	43227	72.22%
43056	100.00%	43147	75.00%	43228	81.43%
43061	100.00%	43149	100.00%	43229	79.78%
43062	50.00%	43201	74.65%	43230	87.50%
43064	100.00%	43202	72.22%	43231	73.08%
43065	100.00%	43203	72.22%	43232	80.15%
43068	73.33%	43204	70.18%	43235	91.67%
43071	100.00%	43205	69.51%	43240	100.00%
43074	100.00%	43206	72.63%	43311	100.00%
43080	100.00%	43207	77.00%	43315	0.00%
43081	85.00%	43209	71.43%	43334	100.00%
43082	66.67%	43210	100.00%	43338	0.00%
43085	55.56%	43211	67.05%	44904	100.00%
43103	100.00%	43212	100.00%	Unknown	75.00%

Source: CAREWare, Columbus Public Health. Data reported through November 30, 2019.

**Ryan White Part B:** There were a total of 1,830 clients enrolled in the Ryan White Part B program in the Columbus TGA in 2018. There were a total of 45 clients aged 13 to 24 years enrolled in 2018, a total of 971 MSM clients enrolled in 2018, and a total of 377 minority MSM clients enrolled in 2018.

**Table 56: Continuum of care measures as defined by the Ryan White Part B Program**

Measure	Denominator
Receipt of Care	Number of Ryan White Part B clients (including clients enrolled in ADAP) who had a least one medical visit (i.e., medical care appointment, prescription co-payment, or medication dispense).
Measure	Numerator
Retained in Care	Number of clients who had at least two medical visits.
Received Antiretroviral Therapy (ART)	Number of clients who received ART, as evidenced by a CVS medication dispense.
Virally Suppressed	Number of clients whose most recent documented viral load $\leq 200$ copies/mL.



**Table 57: Continuum of care among Ryan White Part B clients, Franklin County, 2018**

	Total		Youth (aged 13-24 years)		MSM		Minority MSM	
	Franklin County	Columbus TGA	Franklin County	Columbus TGA	Franklin County	Columbus TGA	Franklin County	Columbus TGA
Enrolled in Ryan White Part B	1,677	1,830	43	45	897	971	374	377
Receipt of Care	844	921	26	27	461	504	199	200
Retained in Care	438	484	6	6	232	256	92	92
Received ART	757	821	24	24	406	440	184	185
Virally Suppressed	736	804	21	22	402	440	163	164

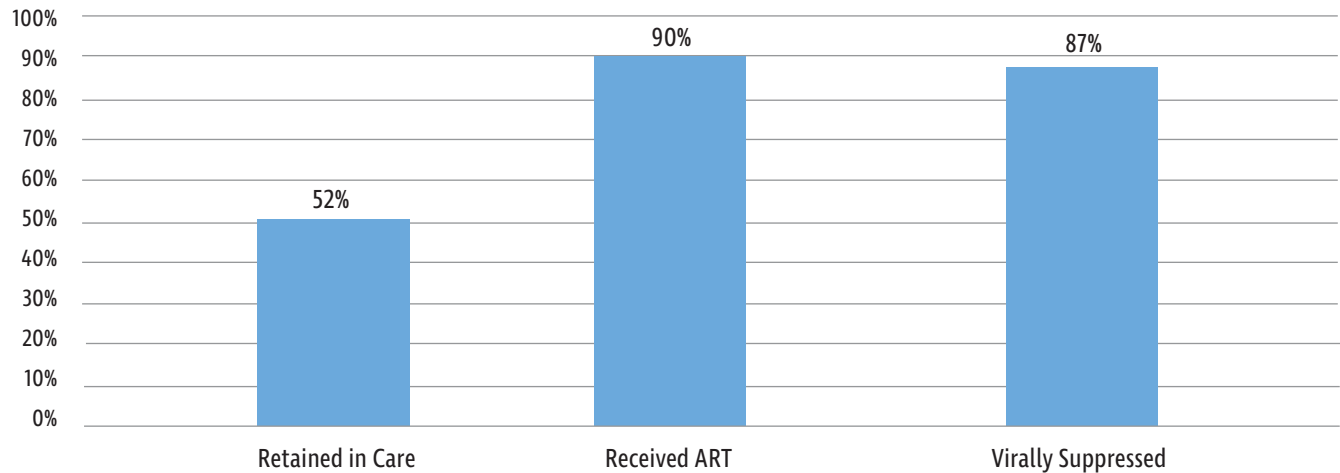
*Note: Clients enrolled in the Ryan White Part B Program may also receive services from other pay sources (e.g., other Ryan White Parts, Medicaid).*

*Source: Ryan White Application Database. Data reported through Nov. 14, 2019.*

Here, the term MSM is defined as persons who were assigned male at birth and who have a risk factor of 'male-to-male sexual contact,' and minority is defined as Black/African American or Hispanic/Latinx.

Of Ryan White Part B clients in 2018 in Franklin County, 52% were retained in care, 90% received ART, and 87% were virally suppressed.

**Figure 132: Continuum of care among Ryan White Part B clients, Franklin County, 2018**



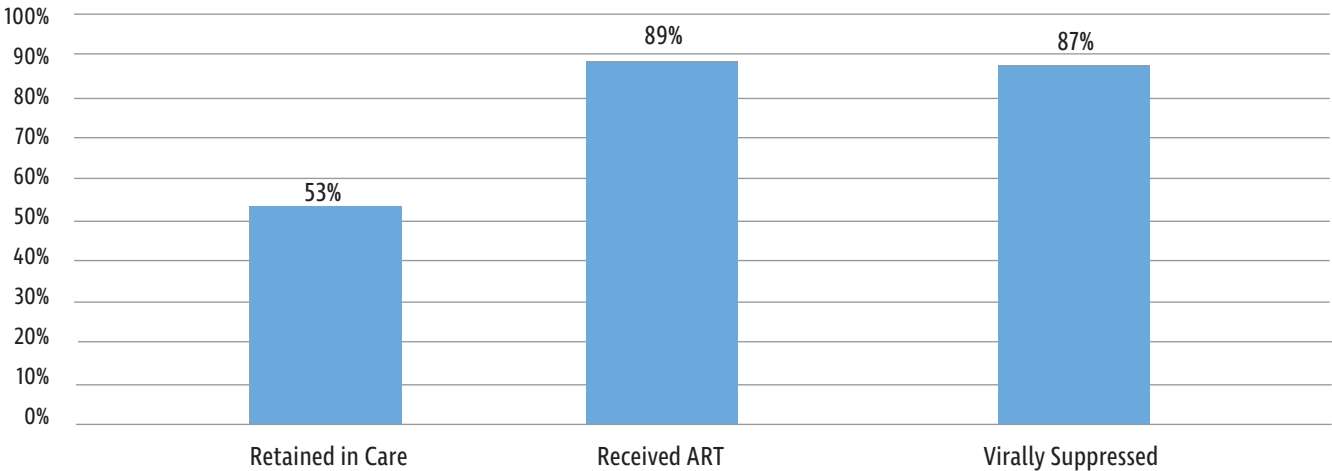
*Note: Clients enrolled in the Ryan White Part B Program may also receive services from other pay sources (e.g., other Ryan White Parts, Medicaid).*

*Source: Ryan White Application Database. Data reported through Nov. 14, 2019.*



Of Ryan White Part B clients in 2018 in Columbus TGA, 53% were retained in care, 89% received ART, and 87% were virally suppressed.

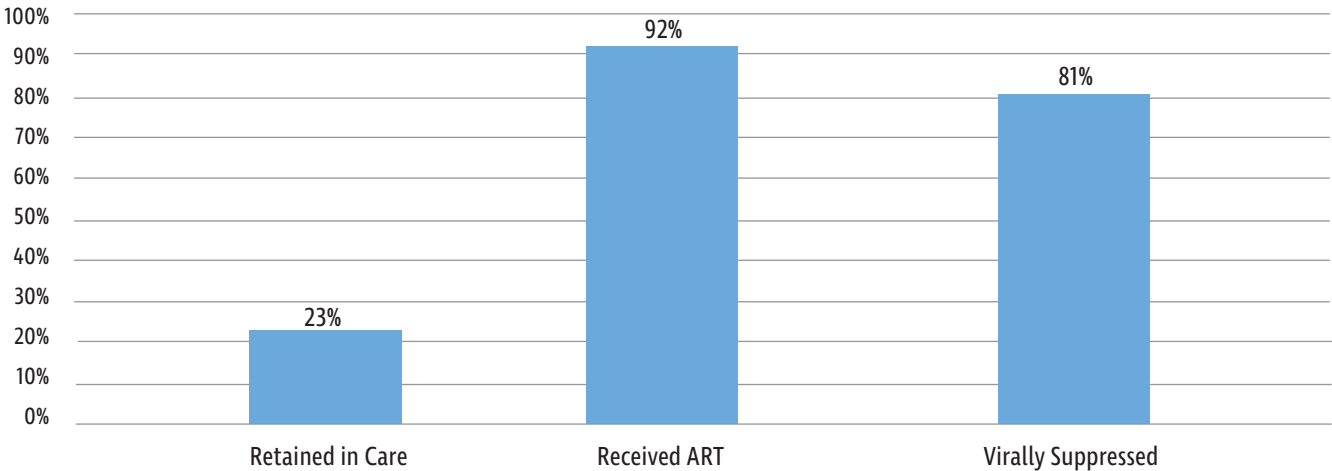
**Figure 133: Continuum of care among Ryan White Part B clients, Columbus TGA, 2018**



*Note: Clients enrolled in the Ryan White Part B Program may also receive services from other pay sources (e.g., other Ryan White Parts, Medicaid).  
Source: Ryan White Application Database. Data reported through Nov. 14, 2019.*

Of Ryan White Part B clients in 2018 in Franklin County, 23% were retained in care, 92% received ART, and 81% were virally suppressed.

**Figure 134: Continuum of care among Ryan White Part B youth clients, Franklin County, 2018**



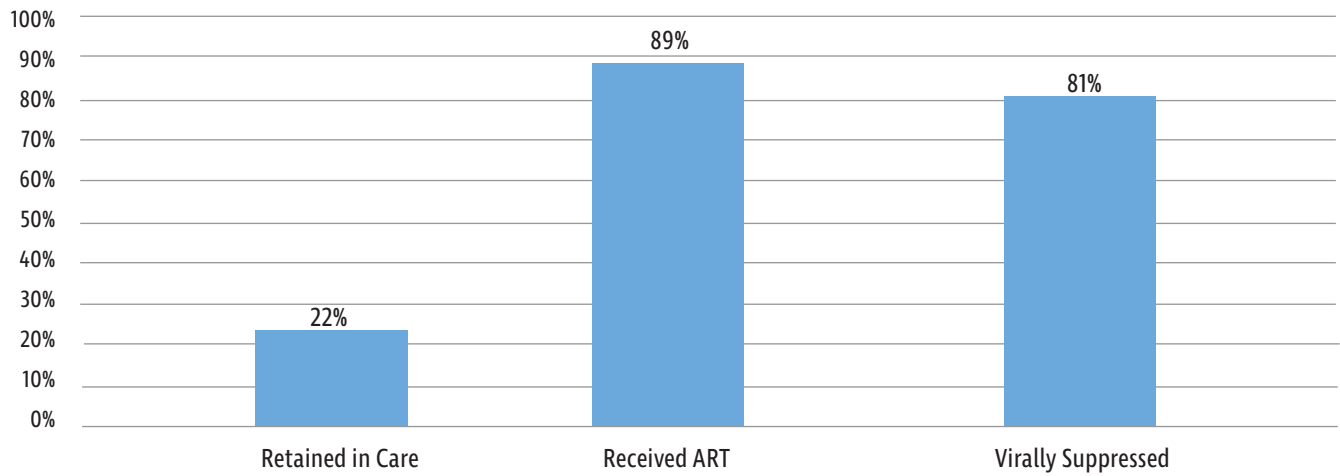
*Note: Clients enrolled in the Ryan White Part B Program may also receive services from other pay sources (e.g., other Ryan White Parts, Medicaid).  
Source: Ryan White Application Database. Data reported through Nov. 14, 2019.*





Of Ryan White Part B youth clients in 2018 in the Columbus TGA, 22% were retained in care, 89% received ART, and 81% were virally suppressed.

**Figure 135: Continuum of care among Ryan White Part B youth clients, Columbus TGA, 2018**

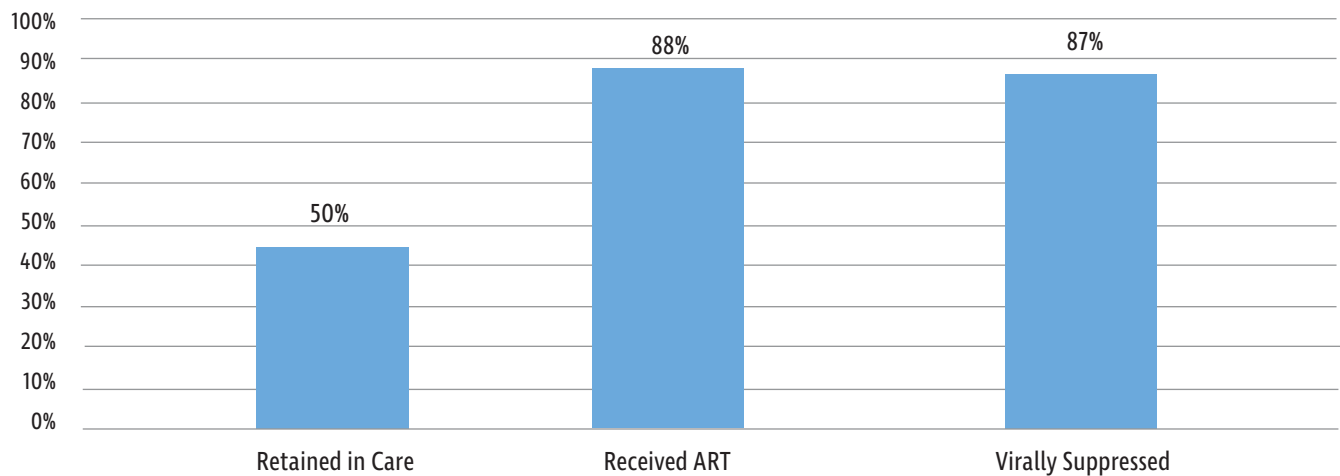


*Note: Clients enrolled in the Ryan White Part B Program may also receive services from other pay sources (e.g., other Ryan White Parts, Medicaid).*

*Source: Ryan White Application Database. Data reported through Nov. 14, 2019.*

Of Ryan White Part B Minority MSM clients in 2018, 50% were retained in care, 88% received ART, and 87% were virally suppressed.

**Figure 136: Continuum of care among MSM Ryan White Part B clients, Franklin County, 2018**



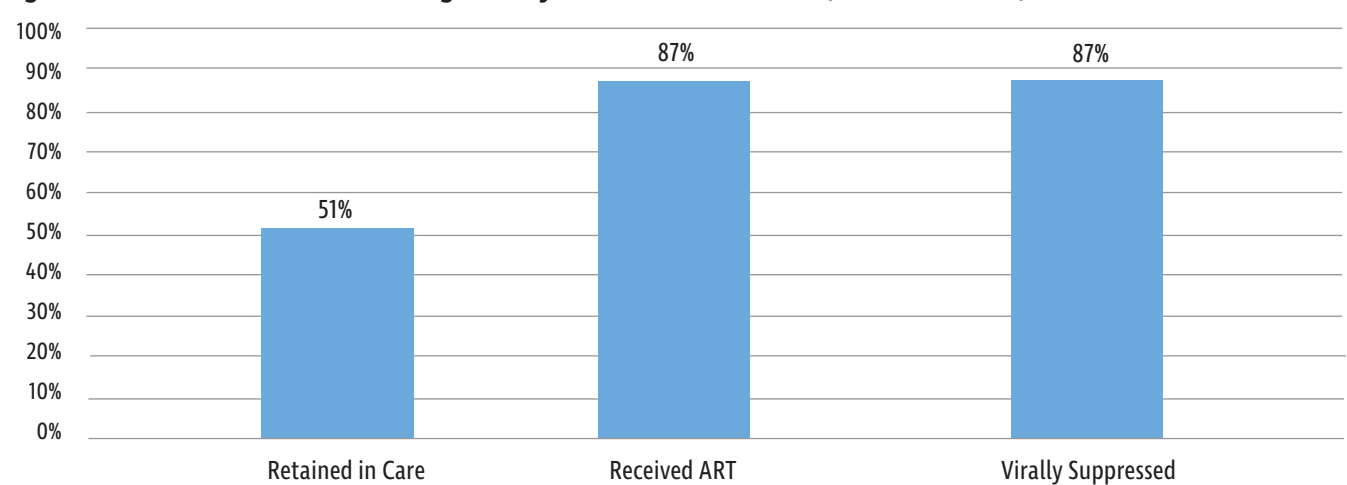
*Note: Clients enrolled in the Ryan White Part B Program may also receive services from other pay sources (e.g., other Ryan White Parts, Medicaid).*

*Source: Ryan White Application Database. Data reported through Nov. 14, 2019.*



Of Ryan White Part B youth clients in 2018, 51% were retained in care, 87% received ART, and 87% were virally suppressed.

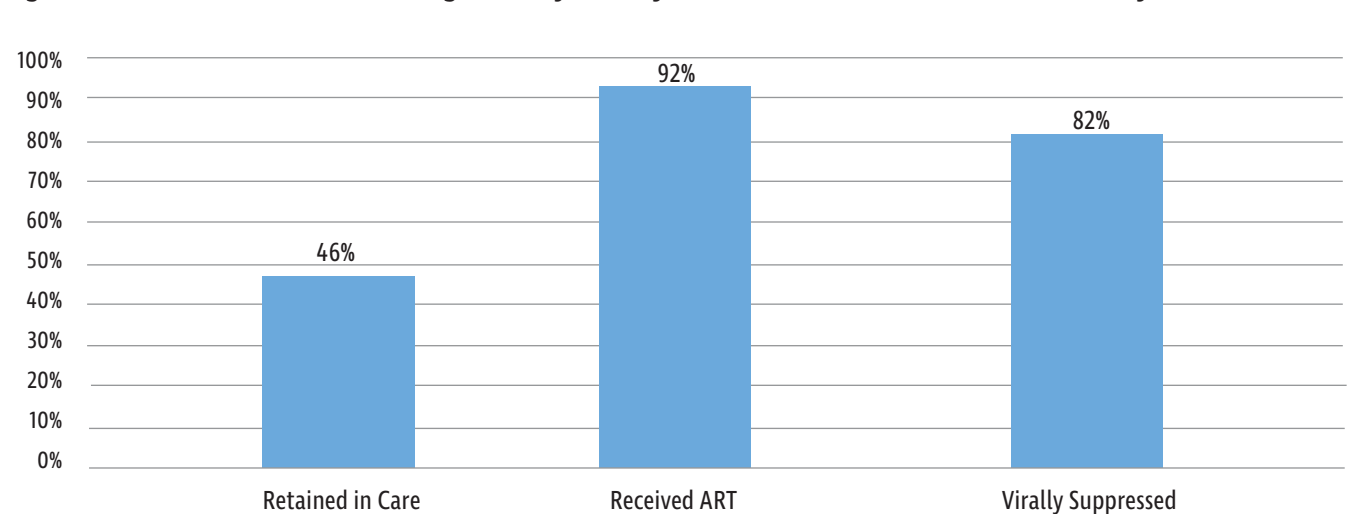
**Figure 137: Continuum of care among MSM Ryan White Part B clients, Columbus TGA, 2018**



*Note: Clients enrolled in the Ryan White Part B Program may also receive services from other pay sources (e.g., other Ryan White Parts, Medicaid).*  
*Source: Ryan White Application Database. Data reported through Nov. 14, 2019.*

Of Ryan White Part B Minority MSM clients in 2018, 46% were retained in care, 92% received ART, and 82% were virally suppressed.

**Figure 138: Continuum of care among Minority MSM Ryan White Part B clients, Franklin County, 2018**

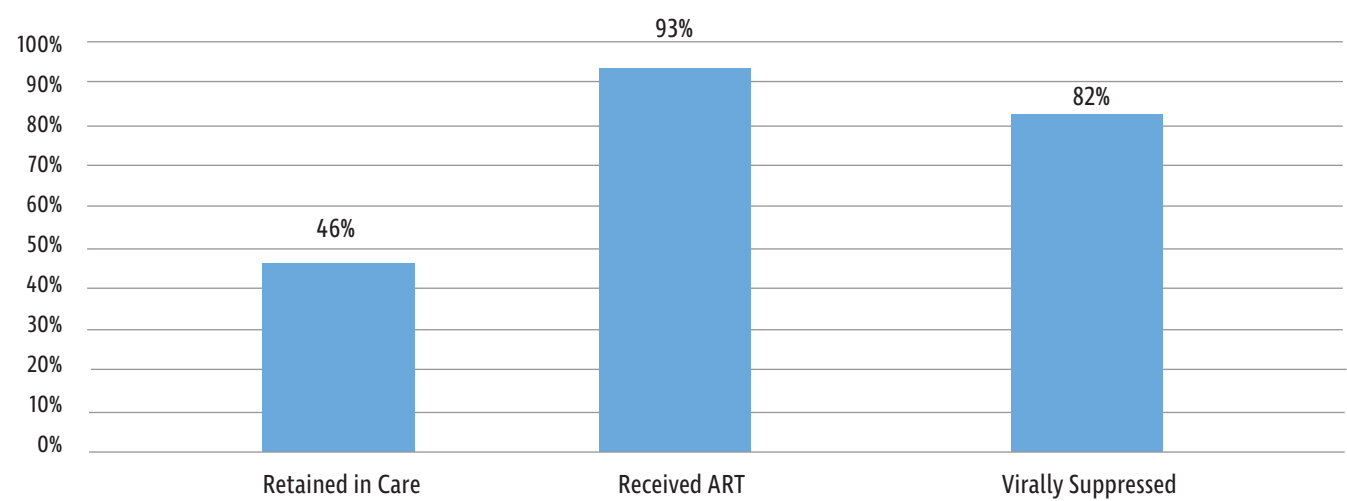


*Note: Clients enrolled in the Ryan White Part B Program may also receive services from other pay sources (e.g., other Ryan White Parts, Medicaid).*  
*Source: Ryan White Application Database.*



Of Ryan White Part B Minority MSM clients in 2018, 46% were retained in care, 93% received ART, and 82% were virally suppressed.

**Figure 139: Continuum of care among Minority MSM Ryan White Part B clients, Columbus TGA, 2018**



*Note: Clients enrolled in the Ryan White Part B Program may also receive services from other pay sources (e.g., other Ryan White Parts, Medicaid).  
Source: Ryan White Application Database.*

**Table 58: Viral suppression among Ryan White Part B clients, Franklin County, 2018**

Agency	Suppressed	Not Suppressed	Missing Viral Load Data
Equitas Health Columbus	81.3%	10.4%	8.1%
Southeast Inc.	85.5%	6.9%	7.6%

*Note: These numbers include only case management clients and do not include those clients who receive ADAP services only.  
Source: Ryan White Application Database. Data reported through Nov. 14, 2019.*

# PREVENT: Prevent new HIV transmissions by using proven interventions, including pre-exposure prophylaxis (PrEP) and syringe services programs



## Pre-Exposure Prophylaxis (PrEP)

PrEP is a drug taken by individuals who are at high risk of acquiring HIV to prevent disease transmission. In 2018, the PrEP utilization rate in Ohio was 50, while the PrEP utilization rate in Franklin County in 2016 was 88. Nationally, the PrEP utilization rate was 47.9 in 2018.

**Table 59: PrEP utilization, Ohio, 2018 and Franklin County, 2016**

PrEP Utilization	Ohio, 2018		Franklin County, 2016	
	Users	Rate/100,000	Users	Rate/100,000
Total	4,878	50	574	88
Males	4,559	96	549	173
Females	319	6	25	7
<24	715	39	65	45
25-34	2,105	138	227	169
35-44	1,116	81	151	152
45-54	667	44	97	100
55 and older	333	9	42	25

*Note: There is currently no single data source that includes data on all unique users of PrEP across the U.S. Source Healthcare Analytics (SHA) collects data from over 54,000 pharmacies, 1,500 hospitals, 800 outpatient facilities, and 80,000 physician practices across the U.S. SHA's dataset is an open sample of commercially available data, which excludes entities that do not make their data available, such as closed healthcare systems and entities that choose not to share their data with SHA.*

*Source: AIDSVu. Emory University, Rollins School of Public Health. Atlanta, Georgia.*

PAPI (Prevention Assistance Program Interventions) is a program for HIV-negative Ohioans who have or are seeking a PrEP prescription. PAPI pays for PrEP-related medical costs, including office and medical copays, copays associated with required laboratory work, prescription copays that are not covered by a patient assistance program, and medical services for people who are not eligible for insurance. There are two facilities in the Columbus TGA that offer these services (Equitas Health and Columbus Public Health). However, it is important to note that PAPI only captures information on clients who are accessing payment assistance, but the PrEP help navigators at these facilities provide navigation services to anyone seeking or referred to PrEP services.

**Table 60: PAPI clients, Columbus TGA**

PAPI Clients	Ohio		Franklin County Region	
	No.	%	No.	%
Concerns regarding privacy	12	3%	6	4%
Chlamydia diagnosis within one year	40	11%	23	16%
Gonorrhea diagnosis within one year	37	10%	22	15%
Syphilis diagnosis within one year	28	8%	13	9%
Sex without a condom within one year	200	56%	91	63%
Been prescribed PEP* within one year	25	7%	10	7%
<b>Total</b>	<b>358</b>		<b>145</b>	

*Source: Ohio Department of Health, HIV Prevention Program. Data reported as of Jan. 9, 2020.*

*\*Post-exposure prophylaxis.*



## Syringe Services Programs and Other Substance Use-related Data

Safe Point, operated by Equitas Health, houses the only syringe exchange program in Franklin County. The program is a hybrid exchange program and participants can receive up to 10 syringes in addition to a one-for-one exchange for used syringes. Participants may also receive risk reduction education, obtain sharps containers, be tested for HIV and hepatitis C, access naloxone, and be referred for additional services. In 2019, Safe Point distributed 967,316 syringes and disposed of 649,714 syringes, and served 3,233 unique clients, including 2,351 first time clients. Participants from Franklin County make up 83.4% of the unduplicated visits in 2019. The ZIP codes in Franklin County having the highest number of persons served (unduplicated) in 2019 (based on client residence) were 43223 (n=393), 43204 (n=392), 43222 (n=366), 43207 (n=309), and 43228 (n=149).

In 2018, there were 5,706 emergency department visits due to suspected overdoses in the Columbus TGA and 3,993 in Franklin County. The ZIP codes in the Columbus TGA having the highest number of emergency room visits due to suspected overdoses (based on patient residence) were 43207, 43204, 43223, 43130, and 43055.

**Table 61: Emergency Department visits for suspected drug overdoses by ZIP code, Columbus TGA**

ZIP Code	Suspected Overdose ED Visits	Rate per 10k ED Visits	ZIP Code	Suspected Overdose ED Visits	Rate per 10k ED Visits	ZIP Code	Suspected Overdose ED Visits	Rate per 10k ED Visits
43004	23	30.2	43105	17	52.1	43212	34	92.3
43008	13	70	43107	10	69	43213	117	53.6
43015	144	75.6	43110	79	50.3	43214	52	73.7
43016	59	71.2	43112	12	59.9	43215	121	118.8
43017	54	65.7	43113	83	52.3	43217	11	65.3
43021	11	44.4	43119	81	70	43219	108	56.9
43023	22	44.2	43123	167	61.7	43220	37	61.5
43025	10	36	43125	54	79.6	43221	46	70.4
43026	94	57.7	43130	232	70.8	43222	65	93.7
43031	29	66.1	43140	65	52.6	43223	262	90.7
43035	18	27.8	43143	15	53.8	43224	183	70.3
43040	80	66.1	43146	42	92.7	43227	103	58.4
43054	12	29.9	43147	54	46.4	43228	187	59.5
43055	218	54.8	43148	12	93.2	43229	142	52.2
43056	40	45.5	43162	30	83.9	43230	108	70.1
43062	58	42.7	43201	69	80.3	43231	53	56
43064	30	73.2	43202	38	91.7	43232	159	54.3
43065	39	45.3	43203	73	93.4	43235	69	65.1
43068	124	49.2	43204	276	90.8	43315	23	53.7
43074	28	86	43205	76	71.9	43334	12	40.2
43080	13	53.5	43206	140	88.7	43338	23	33.6
43081	79	45.6	43207	388	108	43344	21	91
43082	35	51.3	43209	50	53.1	44833	55	46.2
43085	32	54.9	43210	25	142.6			
43103	35	64.7	43211	185	86			

Source: Ohio Department of Health, EpiCenter. Data reported as of Dec. 31, 2019.

## RESPOND: Respond quickly to potential HIV outbreaks to get needed prevention and treatment services to people who need them



**Time-Space analysis:** ODH performs monthly time-space cluster analyses. The following criteria are considered when determining if time-space clusters require further investigation: size of the transmission cluster, evidence of ongoing risk behavior (e.g., injection drug use), late diagnoses, pregnant women, local epidemiology, and resource availability. Time-space reports are routinely and consistently monitored for potential outbreaks. No potential outbreaks were detected in the Columbus TGA in 2018.

**Table 62: Time-space alerts, Ohio and the Columbus TGA, 2018**

Residence at HIV diagnosis	Overall Alert	Overall # diagnoses 2018	IDU/MSM-IDU Alert	IDU/MSM-IDU # diagnoses 2018	IDU Alert	IDU # diagnoses 2018	IDU-IDU Alert	MSM-IDU # diagnoses 2018
Delaware County	N	4	N	1	N	1	N	-
Fairfield County	N	3	N	1	N	-	N	1
Franklin County	N	198	N	24	N	16	N	8
Licking County	N	13	N	-	N	-	N	-
Madison County	N	3	N	1	N	1	N	-
Morrow County	N	-	N	-	N	-	N	-
Pickaway County	N	14	N	5	N	5	N	-
Union County	N	2	N	1	N	1	N	-
Ohio	N	986	N	150	N	115	Y	35

Report produced using CDC SAS program and does not account for cases diagnosed in correctional facilities (i.e., cases diagnosed in correctional facilities are included in the counts for the county where prison is located).

Source: Ohio Department of Health, HIV Surveillance Program. Data reported through June 30, 2019.

**Table 63: New reported diagnoses of HIV infection identifying IDU as the mode of transmission and new reported diagnoses of HIV infection, Columbus TGA, 2017-2019**

	2017		2018		2019	
	IDU	Total HIV	IDU	Total HIV	IDU	Total HIV
Delaware County	1	2	1	4	-	4
Fairfield County	-	4	1	3	-	3
Franklin County	26	222	24	198	17	152
Licking County	-	6	-	13	1	7
Madison County	-	4	1	3	-	-
Morrow County	-	2	-	-	2	2
Pickaway County	-	1	-	1	-	-
Union County	-	2	-	1	-	2
Ohio	128	979	150	983	134	906

Notes: Includes HIV transmission categories injection drug use (IDU) and male-to-male sexual contact/IDU. IDU and male-to-male sexual contact/IDU are mutually exclusive mode of transmission categories.

County reflects county of residence at time of earliest diagnosis. Cases diagnosed while in a state or federal correctional facility or whose county is unknown are included in No County.

Source: Ohio Department of Health, HIV Surveillance Program. Data reported through Feb. 3, 2020.



**Table 64: Newly diagnosed cases of HIV in the Ohio Disease Reporting System (ODRS), Columbus TGA, 2018-2019**

	Male		Female		Total	
	2018	2019	2018	2019	2018	2019
Delaware County	3	2	-	1	3	3
Fairfield County	3	4	-	-	3	4
Franklin County	151	183	52	36	203	219
Licking County	8	4	2	3	10	7
Madison County	1	2	2	-	3	2
Morrow County	-	1	-	1	-	2
Pickaway County	15	7	-	-	15	7
Union County	-	3	2	-	2	3
<b>Ohio</b>	<b>819</b>	<b>782</b>	<b>180</b>	<b>190</b>	<b>999</b>	<b>972</b>

**Notes:**

Newly diagnosed HIV is derived from partner services data in the Ohio Disease Reporting System.

Small numbers are unstable and should be interpreted with caution.

Provisional data. Numbers subject to change when additional information is gained.

Source: Ohio Department of Health, STI Surveillance Program. Data reported as of Feb. 2, 2020.

**Vulnerable county assessment:** ODH conducted a vulnerable county assessment to determine areas at high risk for 1) opioid overdoses, and 2) bloodborne infections (i.e., HIV, hepatitis C, hepatitis B associated with non-sterile drug injection). This vulnerable county assessment was used to develop plans that strategically allocate prevention and intervention services and distribute findings to key stakeholders. Data was obtained from multiple sources to reflect indicators plausibly associated with opioid overdoses or injection-related HIV and/or hepatitis C infections. Indicators were selected based on stakeholder input regarding the recent burden of the opioid-related epidemic in Ohio and in consultation with internal and external partners. An overall rate average was calculated for each county using six indicators, and counties were then ranked by severity. In the vulnerable county assessment, it was determined that Pike, Scioto, Gallia, Fayette, Adams, Lawrence, Ross, Jackson, Montgomery, and Marion counties were ranked as the most vulnerable to an injection-related HIV and/or hepatitis C outbreak.







## Additional Sources

- 1) Grey JA, Bernstein KT, Sullivan PS, Purcell DW, Chesson HW, Gift TL, Rosenberg ES. Estimating the Population Sizes of Men Who Have Sex With Men in US States and Counties Using Data From the American Community Survey. *JMIR Public Health Surveill* 2016;2(1):e14. Updated 2019.





# **End the HIV Epidemic Epidemiologic Profile**

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