Alabama Diagnosis-based HIV Care Continuum, 2022 Preliminary Data

Note: Preliminary 2022 data should be interpreted with caution as not all reported cases have been investigated and entered into the HIV Surveillance database; data will be finalized December 31, 2023. Alabama utilizes the National HIV Surveillance System diagnosis-based HIV care continuum methodology (i.e., the number of people living with diagnosed HIV is the denominator utilized for receipt of care, retained in care, and viral suppression). The prevalence estimate is shown in the first step as a percentage above 100, and is not utilized as the denominator for other steps in the care continuum.

* Prevalence includes both people whose infection has been diagnosed and those who are unaware of their infection (i.e., not yet diagnosed). Prevalence is estimated by applying Alabama’s HIV-prevalence estimate (84.5%) to the number of persons diagnosed with HIV infection by the end of 2021 and living as of December 31, 2022 (i.e., 84.5% of persons aged ≥13 years living with HIV infection in Alabama are aware of their infection and 15.5%, or 1 in 6.5 HIV-positive individuals, are unaware of their infection). Source of Alabama’s prevalence estimate: HIV Surveillance Report, Estimated HIV Incidence and Prevalence in the United States 2010-2016, Table 13. 2016 (most recent year available).

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£ Viral suppression is defined as <200 copies/mL on the most recent viral load test in 2022. Viral suppression is calculated as the percentage of persons living with HIV who had a suppressed viral load (<200 copies/mL) at the last viral load collected during 2022.

National HIV/AIDS Strategy 2020 Goals:
- 85% linked to care within 1 month
- 90% retained in HIV medical care
- 80% virally suppressed
HIV Continuum of Care Statewide and by Public Health District, Alabama Preliminary 2022

Alabama East Central District Diagnosis-based HIV Care Continuum, 2022 Preliminary Data

Note: Preliminary 2022 data should be interpreted with caution as not all reported cases have been investigated and entered into the HIV Surveillance database; data will be finalized December 31, 2023. Alabama utilizes the National HIV Surveillance System diagnosis-based HIV care continuum methodology (i.e., the number of people living with diagnosed HIV is the denominator utilized for receipt of care, retained in care, and viral suppression). The prevalence estimate is shown in the first step as a percentage above 100, and is not utilized as the denominator for other steps in the care continuum.

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National HIV/AIDS Strategy 2020 Goals:
- 85% linked to care within 1 month
- 90% retained in HIV medical care
- 80% virally suppressed

Preliminary 2022 Data as of 10.12.23
HIV Continuum of Care Statewide and by Public Health District, Alabama Preliminary 2022

Alabama Jefferson County District Diagnosis-based HIV Care Continuum, 2022 Preliminary Data

<table>
<thead>
<tr>
<th>Percentage</th>
<th>Estimated HIV-infected (prevalence estimate)*</th>
<th>HIV-diagnosed†</th>
<th>Linked to care (2022 Alabama)‡</th>
<th>Receipt of Care (Any care)α</th>
<th>Retained in care (Continuous care)§</th>
<th>Viral Suppression (&lt;200 copies/mL)£</th>
</tr>
</thead>
<tbody>
<tr>
<td>120%</td>
<td>4650</td>
<td>3878</td>
<td>132</td>
<td>2314 (77%)</td>
<td>469 (54%)</td>
<td>1917 (67%)</td>
</tr>
<tr>
<td>100%</td>
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<td></td>
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<td></td>
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<tr>
<td>80%</td>
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<td>60%</td>
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<td>40%</td>
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<td>20%</td>
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<td>0%</td>
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</tbody>
</table>

**Note:** Preliminary 2022 data should be interpreted with caution as not all reported cases have been investigated and entered into the HIV Surveillance database; data will be finalized December 31, 2023.

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National HIV/AIDS Strategy 2020 Goals:
- 85% linked to care within 1 month
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- 80% virally suppressed

Preliminary 2022 Data as of 10.12.23
HIV Continuum of Care Statewide and by Public Health District, Alabama Preliminary 2022

Alabama Mobile County District Diagnosis-based HIV Care Continuum, 2022 Preliminary Data

National HIV/AIDS Strategy 2020 Goals:
- 85% linked to care within 1 month
- 90% retained in HIV medical care
- 80% virally suppressed

Engagement in HIV Care

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Estimated HIV-infected (prevalence estimate)*

HIV-diagnosed†
Linked to care (2022 Alabama)‡
Receipt of Care (Any care)α
Retained in care (Continuous care)§
Viral Suppression (<200 copies/mL)£

Percentage

2376
1982
91
1165 (69%)
255 (49%)
844 (47%)

85% (≤ 30 days)
8% (31-90 days)

85% linked to care within 1 month
90% retained in HIV medical care
80% virally suppressed

* Prevalence includes both people whose infection has been diagnosed and those who are unaware of their infection (i.e., not yet diagnosed). Prevalence is estimated by applying Alabama’s HIV-prevalence estimate (84.5%) to the number of persons diagnosed with HIV infection by the end of 2021 and living as of December 31, 2022 (i.e., 84.5% of persons aged ≥13 years living with HIV infection in Alabama are aware of their infection and 15.5%, or 1 in 6.5 HIV-positive individuals, are unaware of their infection). Source of Alabama’s prevalence estimate: HIV Surveillance Report, Estimated HIV Incidence and Prevalence in the United States 2010-2016, Table 13. 2016 (most recent year available).

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Preliminary 2022 Data as of 10.12.23
HIV Continuum of Care Statewide and by Public Health District, Alabama Preliminary 2022

Alabama Northeastern District Diagnosis-based HIV Care Continuum, 2022 Preliminary Data

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Alabama Northern District Diagnosis-based HIV Care Continuum, 2022 Preliminary Data

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HIV Continuum of Care Statewide and by Public Health District, Alabama Preliminary 2022

Alabama Southeastern District Diagnosis-based HIV Care Continuum, 2022 Preliminary Data

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National HIV/AIDS Strategy 2020 Goals:
- 85% linked to care within 1 month
- 90% retained in HIV medical care
- 80% virally suppressed
Alabama Southwestern District Diagnosis-based HIV Care Continuum, 2022 Preliminary Data

**Estimated HIV-infected (prevalence estimate)**
- Statewide: 952
- 794
- 79% ≤ 30 days
- 43
- 7% 31-90 days
- 501 (73%)
- 109 (47%)
- 407 (58%)

**Note:** Preliminary 2022 data should be interpreted with caution as not all reported cases have been investigated and entered into the HIV Surveillance database; data will be finalized December 31, 2023. Alabama utilizes the National HIV Surveillance System diagnosis-based HIV care continuum methodology (i.e., the number of people living with diagnosed HIV is the denominator utilized for receipt of care, retained in care, and viral suppression). The prevalence estimate is shown in the first step as a percentage above 100, and is not utilized as the denominator for other steps in the care continuum.

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**National HIV/AIDS Strategy 2020 Goals:**
- 85% linked to care within 1 month
- 90% retained in HIV medical care
- 80% virally suppressed

Preliminary 2022 Data as of 10.12.23
Alabama West Central District Diagnosis-based HIV Care Continuum, 2022 Preliminary Data

**Estimated HIV-infected (prevalence estimate)**

- **Statewide**: 1275
- **National HIV/AIDS Strategy 2020 Goals**:
  - 85% linked to care within 1 month
  - 90% retained in HIV medical care
  - 80% virally suppressed

**HIV-diagnosed†**

- **Statewide**: 1063

**Linked to care (2022 Alabama)‡**

- **Statewide**: 48
  - 8% 31-90 days
  - 83% ≤ 30 days

**Receipt of Care (Any care)α**

- **Statewide**: 671 (76%)

**Retained in care (Continuous care)§**

- **Statewide**: 186 (56%)

**Viral Suppression (<200 copies/mL)£**

- **Statewide**: 556 (66%)

**Percentage**

- 0%
- 20%
- 40%
- 60%
- 80%
- 100%
- 120%

**Engagement in HIV Care**

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