Acknowledgements

We gratefully acknowledge the continuing collaboration of people living with HIV, as well as clinicians, microbiologists, immunologists, public health practitioners, occupational health doctors, nurses and other colleagues who contribute to the surveillance of HIV and STIs and the monitoring of HIV care in the UK.

Further information

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London
NW9 5EQ

Email: harsqueries@phe.gov.uk
Website: www.gov.uk/phe
New HIV diagnoses fall by a third in the UK since 2015

Annual HIV data published today show a continued decline with new diagnoses at their lowest level since 2000.

Data published today by Public Health England (PHE) reveal that new HIV diagnoses in the UK have fallen to their lowest level since 2000. New diagnoses fell by almost a third (28%) from 8,271 in 2015 to 4,454 in 2018.

New HIV diagnoses have been declining in both gay and bisexual and heterosexual populations. The steepest falls have been seen among gay and bisexual men, where new diagnoses declined by 39% between 2015 and 2018. The biggest falls have been among gay and bisexual men who are:

-80% white (46% decrease from 3,383 in 2015 to 1,375 in 2018)
-78% born in the UK (49% decrease from 1,627 in 2015 to 873 in 2018)
-75% aged 15-24 (47% decrease from 505 in 2015 to 269 in 2018)
-72% living in London (51% decrease from 1,459 in 2015 to 336 in 2018)

During the same period, new diagnoses have also fallen by a quarter (24%) among people who acquired HIV through heterosexual contact.

The continued decline in HIV diagnoses is largely due to the success of combination HIV prevention over the past decade, which includes HIV testing, condom provision, the scale-up of pre-exposure prophylaxis (PrEP) and anti-retroviral therapy (ART) - drugs that keep the level of HIV in the body low and prevent the virus being passed on.

Dr Valerie Delpech, Head of HIV Surveillance at Public Health England, said: ‘It is thanks to the enormous testing and prevention efforts in the UK that we are seeing further declines in new HIV diagnoses, which have now reached their lowest in almost 20 years. People with HIV now benefit from effective treatments that stop the virus being passed on to sexual partners and the number of people diagnosed late is lower than ever before.'
Surveillance and monitoring tools

- Estimates of the undiagnosed
- Estimates of incidence
- New diagnoses
- Recently acquired
- Transmission probably acquired in the UK
- Late diagnosis

- Coverage and Uptake of interventions
- Granularity
- Year on year comparisons
- Completion, Quality, timeliness
- triangulation
- interpretation
Methodology: Public Health England

1. Centralised data collection system, huge collaboration from front-line workers
3. New HIV diagnoses: all individuals diagnosed by place of residence
4. National HIV cohort data of people accessing HIV care at outpatient clinics
5. Sexual health data from all outpatient clinics
6. Positive Voices
7. Ad hoc surveys (eg sexual health surveys, injecting, Prep Use)
Number of new HIV diagnoses by gender:\(^{1}\):
United Kingdom, 2009 to 2018

\(^{1}\) New HIV diagnoses totals for males and females are based on gender identity and include trans people. The overall total includes people who identify gender in another way and those with gender identity not reported.
Number of new HIV diagnoses among gay and bisexual men by area of residence: United Kingdom, 2009 - 2018

- London
- Midlands and East of England
- North of England
- South of England
- Wales
- Scotland
- Northern Ireland

Yearly data for the number of new HIV diagnoses among gay and bisexual men in various regions of the United Kingdom from 2009 to 2018.
HIV diagnoses among gay and bisexual men by population characteristics: United Kingdom, 2009 - 2018
Number of people seen for HIV care by age-group: United Kingdom, 2009 - 2018
Number of people seen for HIV care by ART coverage: United Kingdom, 2009 - 2018

![Graph showing the number of people seen for HIV care by ART coverage in the United Kingdom from 2009 to 2018.](image)

- 82% of people were receiving treatment in 2009.
- 84% of people were receiving treatment in 2010.
- 86% of people were receiving treatment in 2011.
- 88% of people were receiving treatment in 2012.
- 90% of people were receiving treatment in 2013.
- 92% of people were receiving treatment in 2014.
- 94% of people were receiving treatment in 2015.
- 96% of people were receiving treatment in 2016.
- 97% of people were receiving treatment in 2017.
- 97% of people were receiving treatment in 2018.
Proportion of adults receiving antiretroviral treatment (ART): United Kingdom, 2018

<table>
<thead>
<tr>
<th>Gender</th>
<th>0%</th>
<th>10%</th>
<th>20%</th>
<th>30%</th>
<th>40%</th>
<th>50%</th>
<th>60%</th>
<th>70%</th>
<th>80%</th>
<th>90%</th>
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<tbody>
<tr>
<td>Men</td>
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<td>Women</td>
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<td>25-34</td>
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<td>Exposure-group</td>
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<tr>
<td>Sex between men</td>
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<tr>
<td>Heterosexual contact - men</td>
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<tr>
<td>Heterosexual contact - women</td>
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<td>97%</td>
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<tr>
<td>Injected drug use</td>
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<td>Outside London</td>
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<td></td>
<td>97%</td>
</tr>
</tbody>
</table>
Diagnosed HIV prevalence (per 1,000 population aged 15 to 59 years): England, 2018

Legend
- 0 - 0.99
- 1 - 1.99
- 2 - 4.99 (high)
- 5+ (extremely high)
People seen for HIV care in a given PHE centre who were non-residents: England, 2018
Number of people seen for HIV care in PHE centre who resided elsewhere: United Kingdom, 2009 - 2018

[Graph showing the number of people seen for HIV care in different regions of the UK from 2009 to 2018.]

- London
- East of England
- East Midlands
- West Midlands
- North East
- North West
- Yorkshire and Humber
- South East
- South West
- Wales
- Northern Ireland
- Scotland
Proportion of adults diagnosed late with HIV by demographic group: United Kingdom, 2018
Proportion of adults diagnosed late with HIV by exposure category: United Kingdom, 2009 - 2018
Adjusted number of adults diagnosed late with HIV by exposure group: United Kingdom, 2009 - 2018

- Gay and bisexual men
- Black African heterosexual men
- Black African heterosexual women
- White heterosexual men
- White heterosexual women

[Graph showing the adjusted number of adults diagnosed late with HIV by exposure group over the years 2009 to 2018.]
One-year mortality (per 1,000) among adults newly diagnosed with HIV by CD4 count at diagnosis: United Kingdom, 2018
Fast Track Cities in the UK, 2018

Glasgow
- New HIV diagnoses: 107
- Diagnosed prevalence: 3.1/1,000

Liverpool
- New HIV diagnoses: 50
- Proportion diagnosed late: 33%
- Diagnosed prevalence: 3.5/1,000

Manchester
- New HIV diagnoses: 255
- Proportion diagnosed late: 40%
- Diagnosed prevalence: 3.2/1,000

London
- New HIV diagnoses: 1,504
- Proportion diagnosed late: 27%
- Diagnosed prevalence: 5.6/1,000

Brighton
- New HIV diagnoses: 46
- Proportion diagnosed late: 24%
- Diagnosed prevalence: 8.0/1,000

* The proportion diagnosed late is unavailable for Glasgow.

* Contains Ordnance Survey data. © Crown copyright
Number of new HIV diagnoses in selected cities, 2014-2018

[Graph showing the number of new HIV diagnoses in selected cities from 2014 to 2018. The cities include London, Brighton and Hove, Greater Manchester, Liverpool, and Glasgow. The graph indicates a decrease in diagnoses over the years for all cities, with London showing the most significant decrease.]
Continuum of HIV care: Brighton, 2018

Population Estimates

<table>
<thead>
<tr>
<th>Age Group</th>
<th>2017</th>
</tr>
</thead>
<tbody>
<tr>
<td>All ages</td>
<td>288,155</td>
</tr>
<tr>
<td>Aged 15-59</td>
<td>195,072</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Health Indicator</th>
<th>Brighton - All</th>
<th>UNAIDS 90:90:90 Target</th>
</tr>
</thead>
<tbody>
<tr>
<td>People living with HIV</td>
<td>100%</td>
<td>91%</td>
</tr>
<tr>
<td>People diagnosed with HIV</td>
<td>90%</td>
<td>90%</td>
</tr>
<tr>
<td>On ART</td>
<td>99%</td>
<td>81%</td>
</tr>
<tr>
<td>Virally suppressed</td>
<td>97%</td>
<td>73%</td>
</tr>
</tbody>
</table>

Estimated number of persons with viral load above 200 copies/L = 218 (0.8/1,000 residents)
Number of new diagnosis in 2018 = 46
Transmission ratio = 0.21
Continuum of HIV care: London, 2018

- **People living with HIV**: 100%
- **People diagnosed with HIV**: 95%
- **On treatment**: 98%
- **Virally suppressed**: 97%

London - All

**UNAIDS 90:90:90 target**

- **90%**
- **90%**
- **90%**
- **90%**

Population Estimates

<table>
<thead>
<tr>
<th>Category</th>
<th>2017</th>
</tr>
</thead>
<tbody>
<tr>
<td>All ages</td>
<td>8,825,001</td>
</tr>
<tr>
<td>Aged 15-59</td>
<td>5,698,690</td>
</tr>
</tbody>
</table>

People living with HIV: 38,691 (4.4/1,000 residents)
People diagnosed: 36,690 (95%)
On ART: 35,925 (98%)
Virally suppressed: 34,847 (97%)

Estimated number of persons with viral load above 200 copies/L = **3,869 (0.44/1,000 residents)**
Number of new diagnosis in 2018 = **1504**
Transmission ratio = **0.39**
Continuum of HIV care: Manchester, 2018

Estimated number of persons with viral load above 200 copies/L = 749 (0.27 /1,000) residents
Number of new diagnosis in 2018 = 277
Transmission ratio = 0.37
Continuum of HIV care: Liverpool, 2018

- **People living with HIV**: 803 people, 1.6/1000 residents
- **People diagnosed with HIV**: 729, 91%
- **On ART**: 722, 99%
- **Virally suppressed**: 692, 96%

Estimated number of persons with viral load above 200 copies/L = 111 (0.23/1,000 residents)
Number of new diagnosis in 2018 = 50
Transmission ratio = 0.45
Continuum of HIV care: Glasgow, 2018

- **Glasgow - All**
- **UNAIDS 90:90:90 target**

<table>
<thead>
<tr>
<th>People living with HIV</th>
<th>People diagnosed with HIV</th>
<th>On treatment</th>
<th>Virally suppressed</th>
</tr>
</thead>
<tbody>
<tr>
<td>100%</td>
<td>91%</td>
<td>86%</td>
<td>80%</td>
</tr>
</tbody>
</table>

**Estimated number of persons with viral load above 200 copies/L = 377 No (0.6 /1,000 residents)**

**Number of new diagnosis in 2018 = 107**

**Transmission ratio = 0.28**

---

**Population Estimates**

<table>
<thead>
<tr>
<th></th>
<th>2017</th>
</tr>
</thead>
<tbody>
<tr>
<td>all ages</td>
<td>621,020</td>
</tr>
<tr>
<td>aged 15-59</td>
<td>412,412</td>
</tr>
</tbody>
</table>

**All**

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
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</thead>
<tbody>
<tr>
<td>People living with HIV</td>
<td>1,842 (3.0 /1,000)</td>
</tr>
<tr>
<td>People diagnosed</td>
<td>1,676 (91%)</td>
</tr>
<tr>
<td>On ART</td>
<td>1,575 (94%)</td>
</tr>
<tr>
<td>Virally suppressed</td>
<td>1,465 (93%)</td>
</tr>
</tbody>
</table>
DRIVING AND IMPROVING CARE
## HIV Clinical dashboard Results 2018

<table>
<thead>
<tr>
<th>Description</th>
<th>London</th>
<th>England</th>
</tr>
</thead>
<tbody>
<tr>
<td>Late HIV diagnosis  CD4 &lt;350 copies/ML</td>
<td>37%</td>
<td>44%</td>
</tr>
<tr>
<td>Very late HIV diagnosis  CD4 &lt;200mL</td>
<td>21%</td>
<td>24%</td>
</tr>
<tr>
<td>Newly diagnosed adults seen for care within 1 month</td>
<td>82%</td>
<td>81%</td>
</tr>
<tr>
<td>Virological success in people established on ART</td>
<td>96%</td>
<td>96%</td>
</tr>
<tr>
<td>Virological success in people newly starting ART</td>
<td>97%</td>
<td>97%</td>
</tr>
<tr>
<td>ART coverage (all adults)</td>
<td>99%</td>
<td>98%</td>
</tr>
<tr>
<td>ART coverage (adults with the last CD4 count &lt;350)</td>
<td>98%</td>
<td>97%</td>
</tr>
<tr>
<td>Retention in care (newly diagnosed)</td>
<td>87%</td>
<td>89%</td>
</tr>
<tr>
<td>Retention in care (all adults)</td>
<td>93%</td>
<td>94%</td>
</tr>
<tr>
<td>: Time to treatment (initiating treatment within 91 days)</td>
<td>79%</td>
<td>83%</td>
</tr>
</tbody>
</table>
QUALITY OF LIFE
QUALITY OF CARE
SATISFACTION WITH HEALTH AND SOCIAL CARE SERVICES
February – September 2017
Nationally representative
Random sample from HARS
~20% patients/clinic
Clinic-based recruitment
Face to face, post or email
Self-completion
Paper (87%) or online (13%)
Incentive
£5 high street voucher
Results:
73 clinics
4,424 responses
51% response rate
Participant characteristics

- Ethnicity: White, BAME (non-white), Heterosexual
- Exposure Route: Injecting drugs, Blood/blood products, MTCT
- Sex: Male, Female
- Age Group: 15-34, 35-44, 45-54, 55-64, 65+
- Residence: Outside London, London

* Positive Voices participants
* All people accessing HIV services

* 2016 HIV clinic attendees, aged ≥18 resident England and Wales
Felt that you were refused healthcare or delayed a treatment or medical procedure?

Been treated differently to other patients?

Avoided seeking healthcare when you needed it?

Been worried that you would be treated differently to other patients?

Yes, in the past year

Yes, more than a year ago
Met and unmet needs

Three sections

HIV-related services (6)

Health-related services (11)

Social & Welfare services (12)
HIV service satisfaction from Positive Voices 2017: England and Wales (n=4,422)

- Clinic provides enough information about my HIV
- I feel supported to self-manage my HIV
- I am involved in decisions about treatment & care
- Have enough time to discuss everything at appointments
- Staff listen carefully to what I have to say

- Male
- Female
- <35 years
- 35-44 years
- 45-54 years
- 55+ years
- White
- Black
- Other
## POZQOL SCALE

### 13 items across 4 domains

<table>
<thead>
<tr>
<th><strong>Domain</strong></th>
<th><strong>Items</strong></th>
</tr>
</thead>
</table>
| **Health concerns** | I worry about my health  
I worry about the impact of HIV on my health  
I fear the health effects of HIV as I get older |
| **Psychological** | I am enjoying life  
I feel in control of my life  
I am optimistic about my future  
I feel good about myself as a person |
| **Social** | I feel that HIV limits my personal relationships  
I lack a sense of belonging with people around me  
I am afraid that people might reject me when they learn I have HIV |
| **Functional** | I feel that HIV prevents me from doing as much as I would like  
Having HIV limits my opportunities in life  
Managing HIV wears me out |

Curtesy: Graham Brown
Defining “Unmet need”: those who did not receive help in past year, of those who needed it.
Positive Voices 2017: What help do you need?

- **HIV-RELATED NEEDS**: 83% of patients with a need, 20% of needs were unmet.
- **HEALTH-RELATED NEEDS**: 77% of needs were unmet.
- **SOCIAL AND WELFARE NEEDS**: 45% of needs were unmet.
HIV RELATED SERVICES
- Peer support
- Disclosure support
- Support managing LTC
- Information - living with HIV
- HIV treatment advice
- Adherence support

HEALTH SERVICES
- Drug detox or maintenance
- Chemsex support
- Stress management
- Smoking cessation
- Alcohol counselling/treatment
- Weight management
- Drug counselling
- Advice regarding sex life
- Psychologist or counsellor
- Home health services
- Family planning

SOCIAL & WELFARE SERVICES
- Loneliness or isolation
- Career skills and training
- Childcare services
- Financial advice
- Employment advice
- Legal advice
- Relationship advice
- Meal or food services
- Immigration support
- Domestic violence services
- Housing support
- Benefit claim support
Challenges

• Estimates of the undiagnosed
• Estimates of incidence
• New diagnoses
• Recently acquired
• Transmission probably acquired in the UK
• Late diagnosis

• Coverage and uptake
• Granularity
• Year on year comparisons
• Completion, Quality, timeliness
• triangulation
• interpretation
Transmission has no border
Any person can acquire HIV
no particular person or place

Life is not an RCT (although it
is random)

Best practice in one place may
not be in another

Whole system approach
Local solutions by local people