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Introduction to AIDSVu

- **Partnership since 2010** between Gilead and Emory University
- Online platform that **visualizes data and disseminates insights on the U.S. HIV epidemic**
- Mission to make data widely available, easily accessible, and locally relevant to **increase awareness and inform public health decision making**
- **Broad user base**, including public health officials, policymakers, advocates, researchers, people impacted by HIV, and general public
AIDSVu 101: Maps
Maps by State, County, City

- **State**: Georgia - Rates of Persons Living with HIV, 2020
- **County**: Georgia - Rates of Persons Living with HIV, 2020
- **City**: Atlanta - Rates of Persons Living with HIV, 2020
HIV Data by ZIP Code for 53 Cities
AIDSVu Data at City-, County-, and State-Levels

<table>
<thead>
<tr>
<th>Level</th>
<th>HIV Prevalence</th>
<th>New HIV Diagnoses</th>
<th>HIV Care Continuum(^1)</th>
<th>PrEP</th>
<th>PrEP-to-Need Ratio(^2)</th>
<th>HIV Testing</th>
<th>HIV Mortality</th>
</tr>
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<tr>
<td>City</td>
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Data Stratifications by Race/Ethnicity, Age, Sex and Transmission Category

\(^1\) HIV Care Continuum indicators on AIDSVu include: Late HIV Diagnoses, Linkage to Care, Receipt of Care, and Viral Suppression

\(^2\) PrEP-to-Need Ratio is the ratio of the number of PrEP users to the number of new HIV diagnoses
City Data: Atlanta

Local Data: Atlanta

In 2020, there were 36,140 people living with HIV in Atlanta. In 2020, 1,254 people were newly diagnosed with HIV.
Examining PrEP Equity Metrics in US Cities
Background

• It is critical to monitor not only the number of US PrEP users, but also whether PrEP use is *equitable* along critical dimensions (e.g., age, sex).

• The PrEP-to-Need Ratio (PnR) is a PrEP equity metric that has been evaluated in US regions, states and counties, but has not been promoted for monitoring PrEP uptake in US cities.

\[
PnR = \frac{\text{Number of PrEP Users}}{\text{Number of New HIV Diagnoses}}
\]
Methods

• We used county data as a surrogate for city data for two select cities for which county boundaries approximate city boundaries.

• We compared PnR by sex and age in city/state pairs:
  – Miami (approximated by data from Dade County) and Florida
  – New Orleans (approximated by data from Orleans Parish) and Louisiana
Results

Lower PnR =
• More unmet need
• Less Equitable PrEP use

PrEP-to-Need Ratios (PnRs) by Sex, Age
Dade County (proxy for Miami) and Florida; Orleans Parish (proxy for New Orleans) and Louisiana, 2022
Conclusions

• These cities outperform their states in terms of equitable PrEP access
  – Even considering that Miami and New Orleans have more people with PrEP indications than do other parts of their states, their equitable provision of PrEP is higher.

• The differences might be attributable to social determinants, such as a higher density of PrEP providers and corresponding lower commute times to PrEP care

• PrEP equity metrics should be promoted as critical components of prevention effort evaluation.

• Additionally, further evaluation should be conducted to identify why PrEP equity is higher in these cities than in their host states and what city strategies might be exportable to state programs.
Key Takeaways & Potential Next Steps

• We need more granular data to consider the special needs of cities
• However, there are challenges:
  – PrEP data is not readily available at the city level and county data may not be a good representation if a city is comprised of several different counties
• Possible opportunities to obtain or estimate city level data:
  – Consider county as a surrogate for city when county boundaries approximate city boundaries
  – When city and county boundaries differ, sum counties to estimate city counts, using partial allocations where appropriate
  – Consider sources/funding for more granular PrEP data, at the zip code level
Thank you