#### National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention



### Behavioral and Clinical Characteristics of Persons with Diagnosed HIV Infection

Medical Monitoring Project 2016 Cycle (June 2016–May 2017)



#### **Medical Monitoring Project**

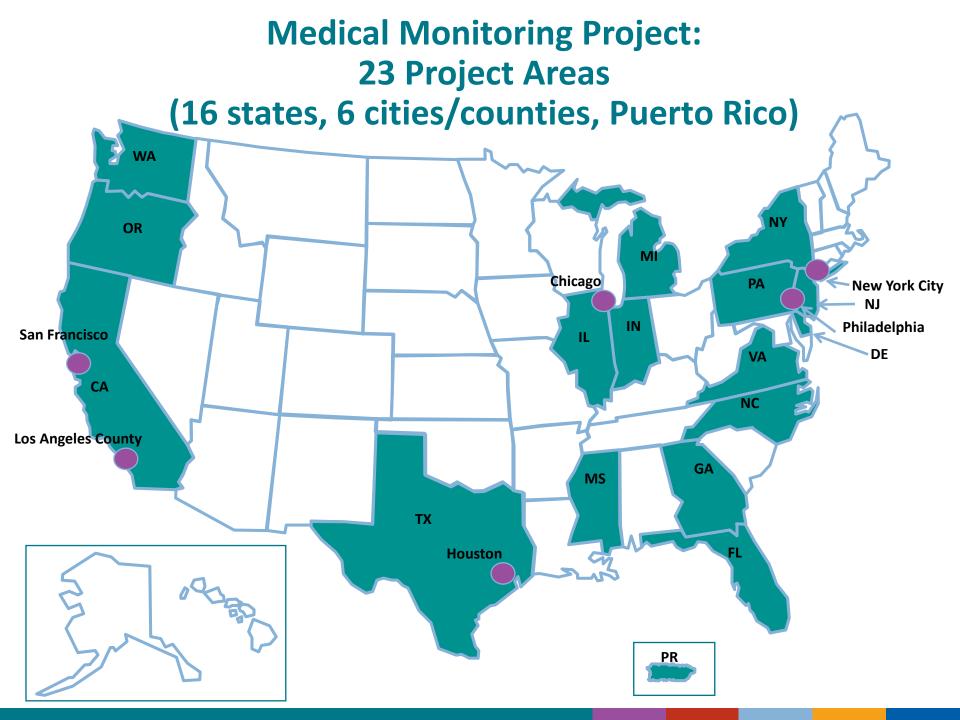
- Surveillance system among U.S. adults with diagnosed HIV that monitors and reports nationally and locally representative estimates of:
  - Risk behaviors and clinical outcomes
  - Health-related behaviors
  - Accessibility and use of prevention, care, and support services
  - HIV care and treatment
  - Variations of factors by characteristics

#### **Medical Monitoring Project: Design**

- 2-stage sampling to produce nationally and locally representative estimates of adults with diagnosed HIV infection<sup>a,b</sup>
- Cross-sectional, annual
- Data collection: face-to-face or telephone interviews and medical record abstractions, June 2016—May 2017
- Time period for measurement of the estimates presented in this slide set is during the 12 months before interview unless otherwise noted

<sup>&</sup>lt;sup>a</sup> https://www.cdc.gov/hiv/pdf/library/reports/surveillance/cdc-hiv-surveillance-special-report-number-21.pdf

bhttps://www.researchprotocols.org/2019/11/e15453/



#### **Medical Monitoring Project 2016 Cycle: Data**

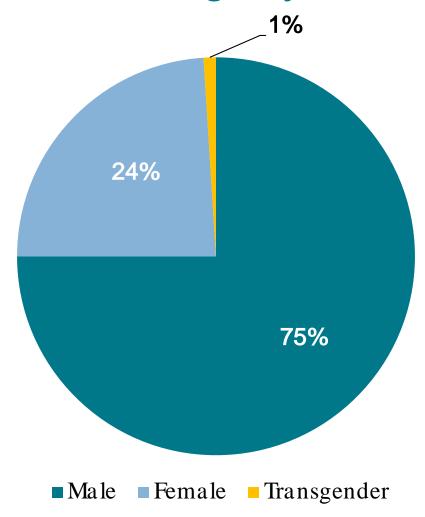
Adjusted response rates

Project area: 100%

Person: 44%

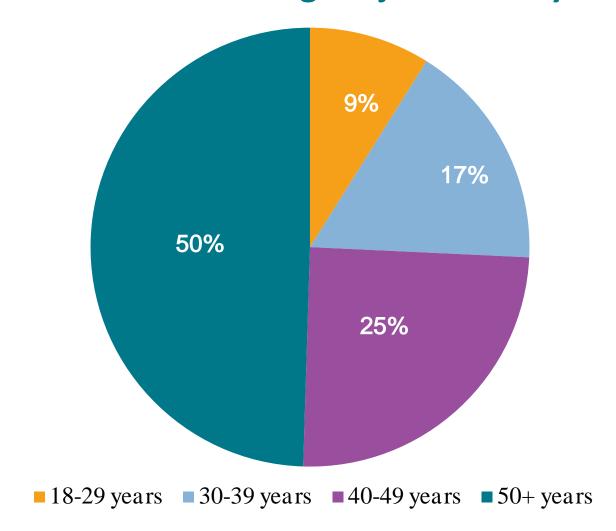
- 4,038 adults with diagnosed HIV living in the 16 states and territory as
  of December 31, 2015 responded to the interview and, for persons
  who received HIV care within the past 12 months, had their medical
  records abstracted at their most frequent source of medical care
  during that time.
- Data were weighted to represent all adults with diagnosed HIV infection living in the United States and Puerto Rico
  - All data in the following slides are presented as weighted percentages

#### Adults with Diagnosed HIV by Gender, Medical Monitoring Project 2016 Cycle



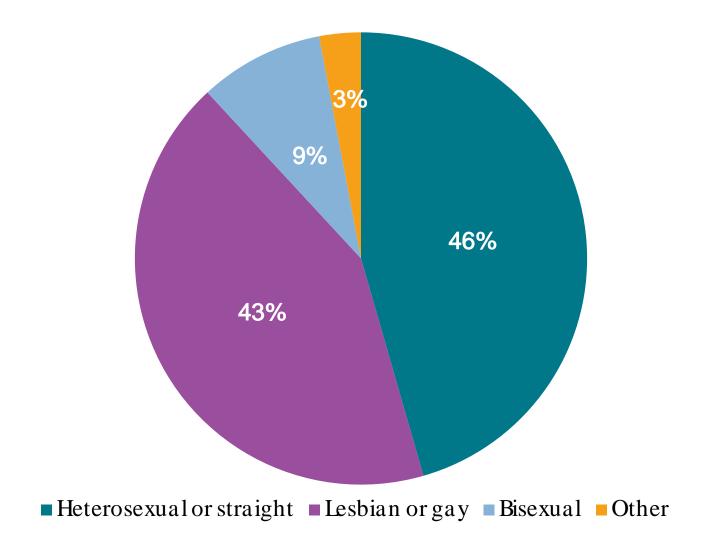
*Note:* Transgender defined as those who self-identified as transgender or who reported a gender identity different from sex assigned at birth

#### Adults with Diagnosed HIV by Age, Medical Monitoring Project 2016 Cycle



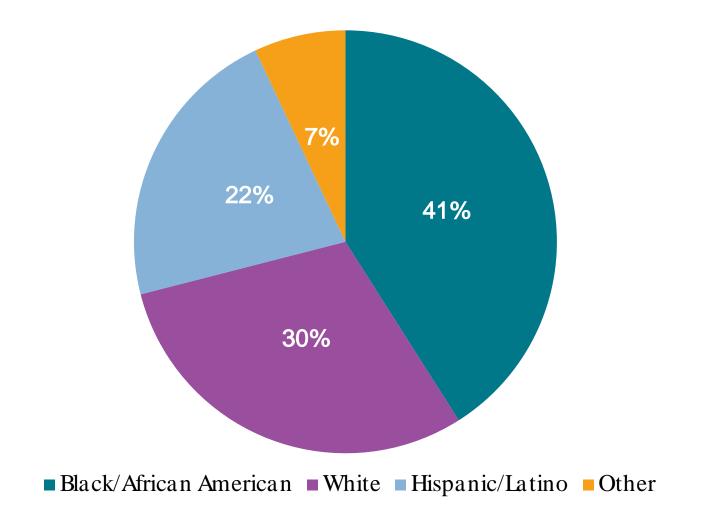
<sup>\*</sup>Percentages may not add up to 100% due to rounding.

#### Adults with Diagnosed HIV by Sexual Orientation, Medical Monitoring Project 2016 Cycle



<sup>\*</sup>Percentages may not add up to 100% due to rounding.

#### Adults with Diagnosed HIV by Race/Ethnicity, Medical Monitoring Project 2016 Cycle



<sup>\*</sup>Other defined as persons who were American Indian/Alaska Native, Asian, Native Hawaiian/Other Pacific Islander, or multiracial; Hispanics or Latinos can be of any race. Percentages may not add up to 100% due to rounding.

## Social Determinants of Health in the Past 12 Months Among Adults with Diagnosed HIV, Medical Monitoring Project 2016 Cycle

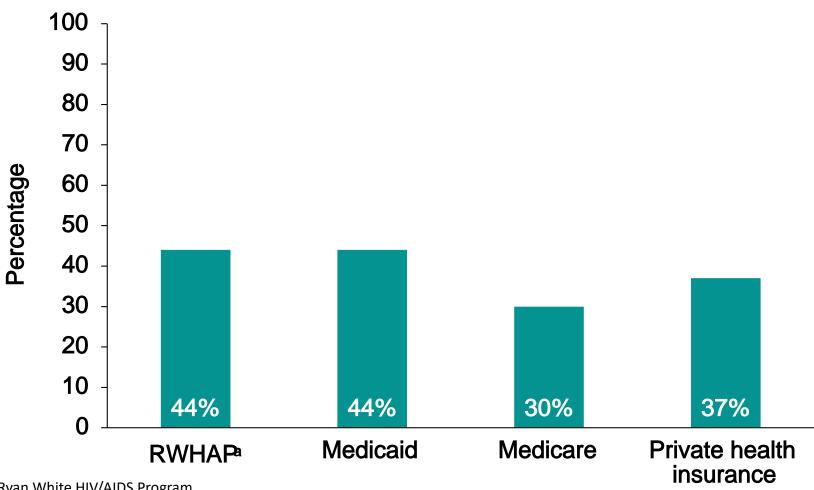
	Weighted %	95% CI
Health insurance or coverage for care or antiretroviral medications (including Ryan White HIV/AIDS Program coverage)	98	(98-99)
Household at or below poverty threshold <sup>a</sup>	42	(38-47)
Less than high school education	17	(15-20)
Homeless <sup>b</sup>	8	(7-10)
Incarceration <sup>c</sup>	5	(4-6)

<sup>&</sup>lt;sup>a</sup> Poverty threshold in the past 12 months defined by the Department of Health and Human Services

<sup>&</sup>lt;sup>b</sup> Living on the street, in a shelter, in a single-room-occupancy hotel, or in a car at any time during past 12 months

<sup>&</sup>lt;sup>c</sup> Incarcerated >24 hours in the past 12 months

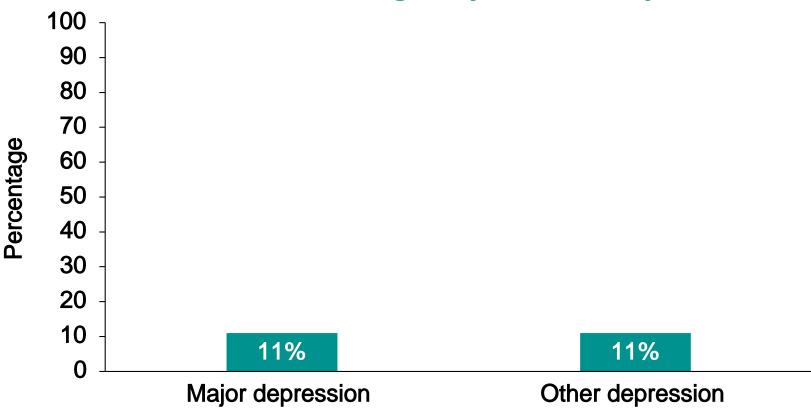
# Health Insurance or Coverage for Care or Antiretroviral Medications in the Past 12 Months among Adults with Diagnosed HIV, Medical Monitoring Project 2016 Cycle



<sup>&</sup>lt;sup>a</sup> RWHAP, Ryan White HIV/AIDS Program

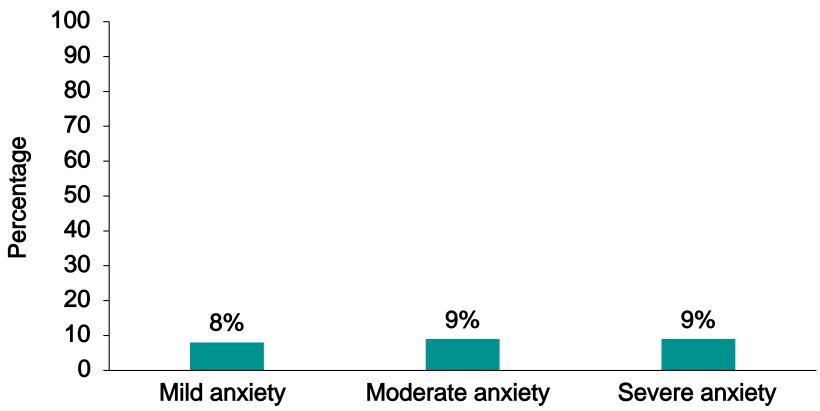
<sup>\*</sup>Healthcare coverage types not mutually exclusive; people could report >1 type of coverage.

#### Symptoms of Depression<sup>a</sup> in the Past 2 Weeks Among Adults With Diagnosed HIV, Medical Monitoring Project 2016 Cycle



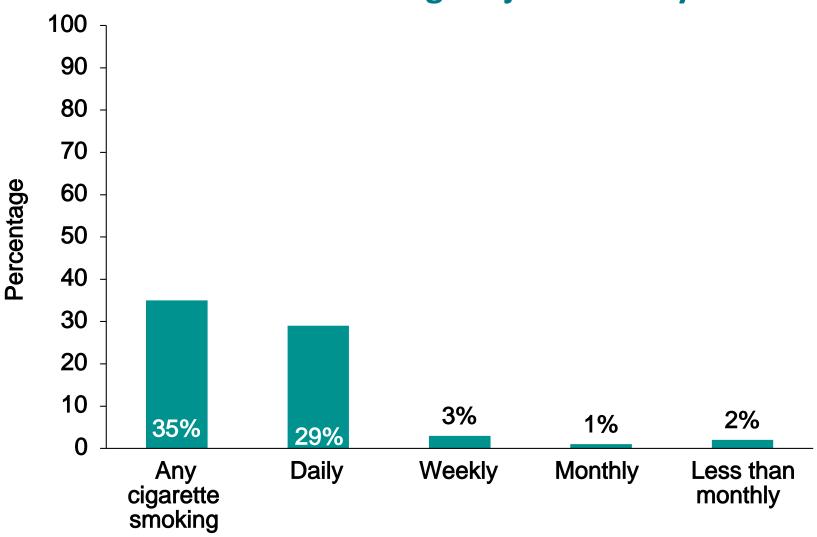
<sup>a</sup>Responses to the items on the PHQ-8 were used to define "major depression" and "other depression," according to criteria from the DSM-IV. "Major depression" was defined as having at least 5 symptoms of depression; "other depression" was defined as having 2–4 symptoms of depression. The PHQ-8 classification "other depression" comprises the DSM-IV categories of dysthymia and depressive disorder, not otherwise specified, which includes minor or subthreshold depression.

#### Symptoms of Anxiety<sup>a</sup> in the Past 2 Weeks Among Adults With Diagnosed HIV, Medical Monitoring Project 2016 Cycle

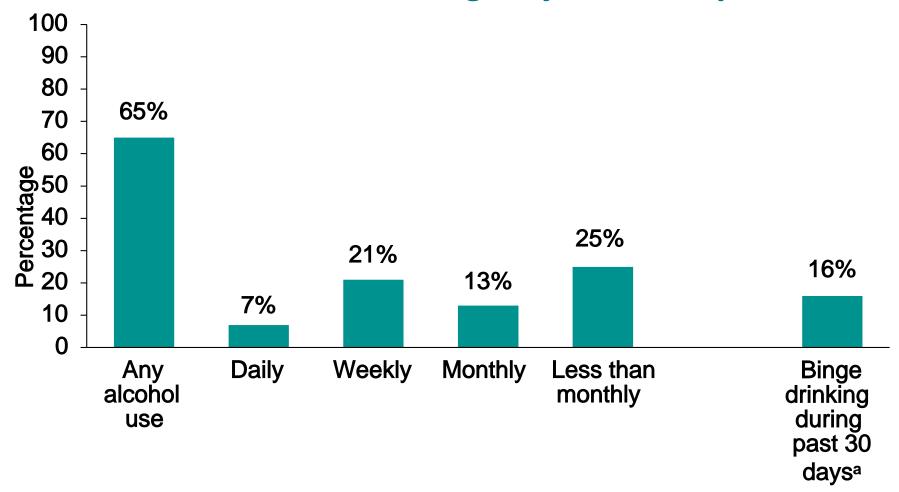


<sup>&</sup>lt;sup>a</sup>Responses to the GAD-7 were used to define "mild anxiety," "moderate anxiety," and "severe anxiety," according to criteria from the DSM-IV. "Severe anxiety" was defined as having a score of ≥15; "moderate anxiety" was defined as having a score of 10–14; and "mild anxiety" was defined as having a score of 5–9.

## Cigarette Smoking in the Past 12 Months Among Adults with Diagnosed HIV, Medical Monitoring Project 2016 Cycle



## Alcohol Use in the Past 12 Months Among Adults with Diagnosed HIV, Medical Monitoring Project 2016 Cycle



<sup>&</sup>lt;sup>a</sup> 5 or more alcoholic beverages in one sitting for men or 4 or more alcoholic beverages for women

## Recreational Drug Use in the Past 12 Months Among Adults with Diagnosed HIV, Medical Monitoring Project 2016 Cycle

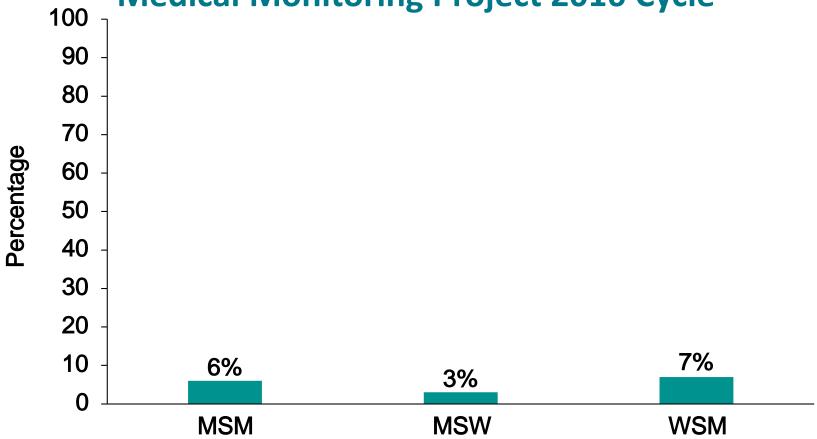
	Weighted %	95% CI
Use of any injection drugs a	3	(2-3)
Use of any noninjection drugs b	30	(27-32)
Marijuana	26	(23-28)
Amyl nitrite (poppers)	7	(5-8)
Methamphetamine (e.g., crystal meth, tina, crank, ice)	5	(4-7)
Cocaine that is smoked or snorted	5	(5-6)
Prescription opioids (e.g., oxycodone, hydrocodone, Vicodin, Percocet)	3	(2-4)
Club drugs (e.g., Ecstasy or X, ketamineor Special K, GHB)	3	(2-4)
Crack	3	(2-4)
Prescription tranquilizers (e.g., Valium, Ativan, Xanax, downers)	2	(2-3)
Amphetamine (e.g., speed, bennies, uppers)	2	(1-2)

Note. Participants may report more than one drug used

<sup>&</sup>lt;sup>a</sup> Any drug that was administered by injection and that was not used for medical purposes, including legal drugs that were not used for medical purposes

<sup>&</sup>lt;sup>b</sup> Any drug that was administered by any route other than injection and that was not used for medical purposes, including legal drugs that were not used for medical purposes

## High-Risk Sex<sup>a</sup> in the Past 12 Months Among Adults with Diagnosed HIV, Medical Monitoring Project 2016 Cycle

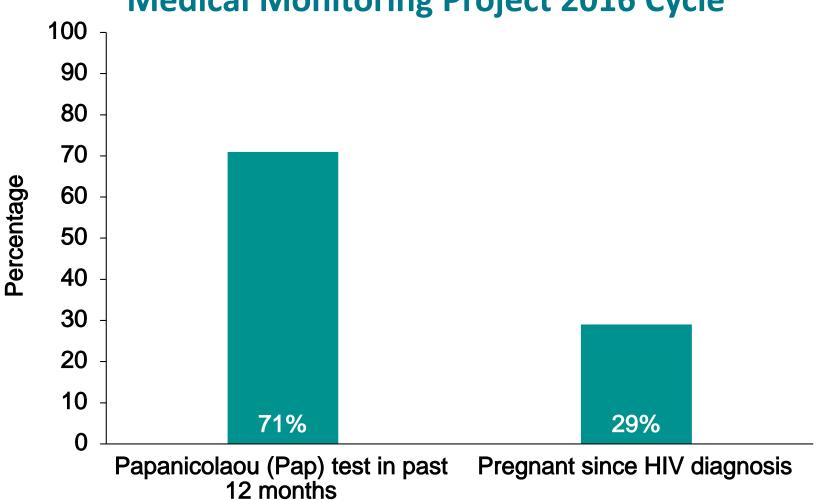


Note: MSM, men who have sex with men; WSM, women who have sex with men; MSW, men who have sex only with women

<sup>&</sup>lt;sup>a</sup> Vaginal or anal sex with at least 1 HIV-negative or unknown status partner while not having sustained viral suppression (all viral load measurements in the past 12 months undetectable or <200 copies/mL), when a condom was not used, and the partner was not known to be taking pre-exposure prophylaxis (PrEP)

## Measures of Gynecologic and Reproductive Health Services in the Past 12 Months Among Women with Diagnosed HIV,

**Medical Monitoring Project 2016 Cycle** 



#### Self-reported Antiretroviral Therapy (ART) Use in the Past 12 Months Among Adults with Diagnosed HIV, Medical Monitoring Project 2016 Cycle

	Weighted %	95% CI
Evertaken ART	97	(96-98)
Currently taking ART	92	(91-94)
Reasons for never taking ARTb		
Health care provider said person should not start taking ART	53	(41-66)
Person did not believe they need ART	32	(18-46)
Person thinks ART would make them feel sick or harm them	29	(15-44)
Reasons for not currently taking ART		
Money or insurance problems	38	(28-48)
Person thinks ART would make them feel sick or harm them	31	(19-43)
Person did not believe they need ART	26	(14-38)

<sup>&</sup>lt;sup>a</sup> Participants may report more than one reason for not taking ART

<sup>&</sup>lt;sup>b</sup> Among those who have never taken ART

<sup>&</sup>lt;sup>c</sup> Among those with a history of ART use

### Adherence to Antiretroviral Therapy (ART) in the Past 30 Days Among Adults with Diagnosed HIV taking ART, Medical Monitoring Project 2016 Cycle

	Weighted %	95% CI
Took 100% of prescribed ART doses in past 30days	59	(56-61)
How well did you do at taking your HIV medicines in the way you were supposed to?		
Very poor	1	(1-2)
Poor	1	(1-2)
Fair	5	(4-6)
Good	13	(12-15)
Very good	28	(26-30)
Excellent	52	(50-54)
How often did you take your HIV medicines in the way you were supposed to?		
Never		
Rarely	1	(0-1)
Sometimes	2	(1-2)
Usually	5	(4-7)
Almost always	23	(21-25)
Always	68	(66-71)

Note: Excluded are values with a coefficient of variation ≥0.30, "don't know" responses, and skipped (missing) responses.

## Reasons<sup>a</sup> for Last Missed Antiretroviral Therapy (ART) Dose Among Adults with Diagnosed HIV taking ART, Medical Monitoring Project 2016 Cycle

	Weighted %	95% CI
Forgot to take medicines	39	(37-41)
Change in your daily routine or were out of town	26	(23-29)
Fell asleep early or overslept	24	(22-25)
Had a problem getting a prescription, a refill, insurance coverage, or paying for HIV medicines	18	(16-20)
Felt depressed or overwhelmed	11	(10-12)
Did not feel like taking HIV medicines	8	(7-10)
Had side effects from your HIV medicines	7	(6-8)
In the hospital or too sick to take HIV medicine	7	(6-7)
Was drinking or using drugs	6	(5-7)

<sup>&</sup>lt;sup>a</sup> Participants may report more than one reason for last missed dose

### Receipt of Care Among Adults with Diagnosed HIV, Medical Monitoring Project 2016 Cycle

	Weighted %	95% CI
Received outpatient HIV care, past 12 months a	97	(96-98)
Received outpatient HIV care, past 24 months a	98	(98-99)
Retained in HIV care, past 12months b	80	(78-83)
Retained in HIV care, past 24months b	64	(61-67)
Prescribed antiretroviral therapy	84	(81-87)
Prescribed PCP prophylaxis d	43	(36-51)
Prescribed MAC <sup>e</sup> prophylaxis <sup>f</sup>	33	(20-45)
Received influenza vaccination	78	(76-80)

<sup>&</sup>lt;sup>a</sup> Outpatient HIV care was defined as any documentation of the following: encounter with an HIV care provider, viral load test result, CD4 test result, HIV resistance test or tropism assay, ART prescription, PCP prophylaxis, or MAC prophylaxis

<sup>&</sup>lt;sup>b</sup> Two elements of outpatient HIV care at least 90 days apart in each 12-month period

<sup>&</sup>lt;sup>c</sup> *Pneumocystis* pneumonia

d Among persons with CD4 cell count <200 cells/μL

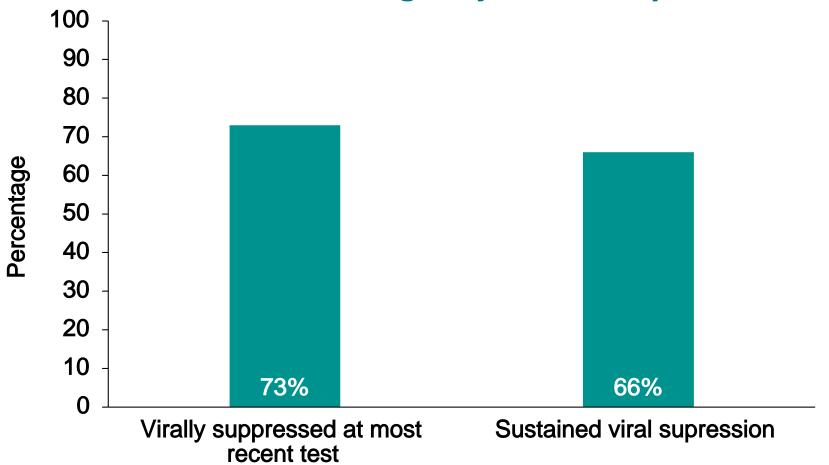
<sup>&</sup>lt;sup>e</sup> Mycobacterium avium complex

f Among persons with CD4 cell count <50 cells/μL

## Emergency Department and Hospital Admissions in the Past 12 Months Among Adults with Diagnosed HIV, Medical Monitoring Project 2016 Cycle

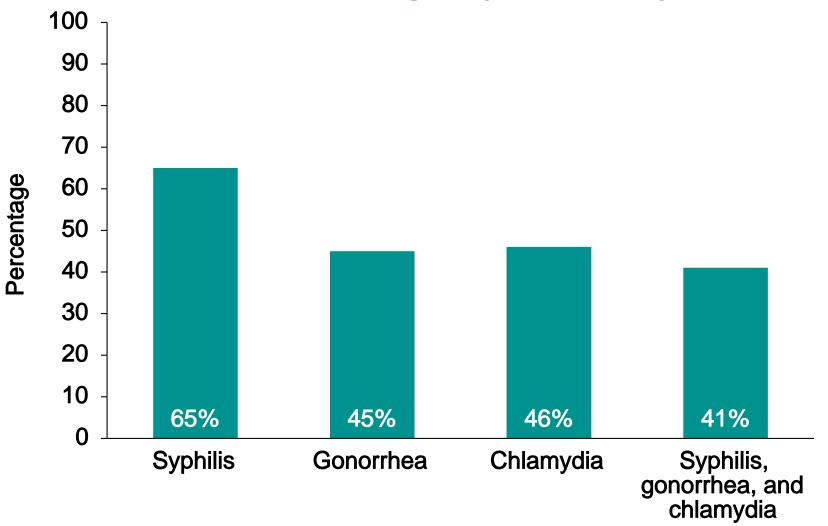
	Weighted %	95% CI
Number of visits to emergency department		
0	62	(60-65)
1	17	(16-19)
2-4	17	(15-18)
≥5	4	(3-5)
Number of hospital admissions		
0	83	(81-85)
1	10	(9-12)
2-4	6	(5-7)
≥5	1	(1-2)

### Viral Suppression<sup>a</sup> in the Past 12 Months Among Adults with Diagnosed HIV, Medical Monitoring Project 2016 Cycle



<sup>&</sup>lt;sup>a</sup> Viral load <200 copies/mL or undetectable. Sustained viral suppression defined as having all viral load tests in the past 12 months <200 copies/mL or undetectable.

### Sexually Transmitted Disease Testing in the Past 12 Months Among Sexually Active Adults with Diagnosed HIV, Medical Monitoring Project 2016 Cycle



## Unmet Needs<sup>a</sup> for Ancillary Services in the Past 12 Months Among Adults with Diagnosed HIV, Medical Monitoring Project 2016 Cycle

	Weighted %	95% CI
Dental care	25	(22-27)
SNAP or WIC	13	(12-15)
Shelter or housing services	12	(11-13)
Mental health services	9	(8-10)
Meal or food services <sup>d</sup>	9	(8-10)
HIV casemanagement services	8	(6-9)
Transportation assistance	7	(6-9)
HIV peer group support	7	(6-8)
Patient navigation services	6	(5-7)
Medicine through ADAPe	4	(3-4)

<sup>&</sup>lt;sup>a</sup> Person needed, but had not received service during 12 months prior to interview

<sup>&</sup>lt;sup>b</sup> Supplemental Nutrition Assistance Program

<sup>&</sup>lt;sup>c</sup> Special Supplemental Nutrition Program for Women, Infants, and Children

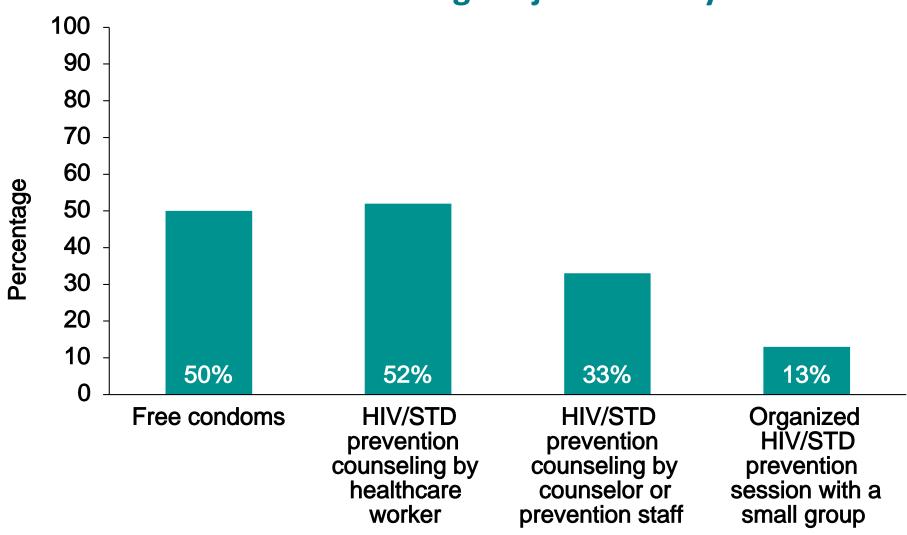
<sup>&</sup>lt;sup>d</sup> Includes services such as soup kitchens, food pantries, food banks, church dinners, or food delivery services

<sup>&</sup>lt;sup>e</sup> AIDS Drug Assistance Program

#### Intimate Partner Violence and Sexual Violence Among Adults with Diagnosed HIV, Medical Monitoring Project 2016 Cycle

	Weighted %	95% CI
Was ever slapped, punched, shoved, kicked, choked, or otherwise physically hurt by a romantic or sexual partner	26	(24-28)
Was slapped, punched, shoved, kicked, choked, or otherwise physically hurt by a romantic or sexual partner, past 12 months	4	(4-5)
Was ever threatened with harm or physically forced to have unwanted vaginal, anal, or oral sex	17	(15-19)
Was threatened with harm or physically forced to have unwanted vaginal, anal, or oral sex, past 12 months	1	(1-2)

### HIV Prevention Services Received in the Past 12 Months Among Adults with Diagnosed HIV, Medical Monitoring Project 2016 Cycle



## National indicators: Homelessness, High-Risk Sex, and HIV Stigma in the Past 12 Months Among Adults with Diagnosed HIV, Medical Monitoring Project 2016 Cycle

	Weighted %	95% CI
Homelessness among persons receiving HIV medical care	8	(7-10)
High-risk sex <sup>a</sup>	6	(5-7)
	Median	IQR
HIV stigma scale <sup>b</sup>	39	(24-56)

<sup>&</sup>lt;sup>a</sup> Vaginal or anal sex with at least 1 HIV-negative or unknown status partner while not having sustained viral suppression (all viral load tests in the past 12 months <200 copies/mL or undetectable), when a condom was not used, and the partner was not on pre-exposure prophylaxis (PrEP)

<sup>&</sup>lt;sup>b</sup> Ten-item scale ranging from 0 (no stigma) to 100 (high stigma) that measures 4 dimensions of HIV stigma: personalized stigma, disclosure concerns, negative self-image, and perceived public attitudes about people living with HIV

#### **Acknowledgements**

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For more information, contact CDC 1-800-CDC-INFO (232-4636)

TTY: 1-888-232-6348 www.cdc.gov

https://www.cdc.gov/hiv/statistics/systems/mmp/

The findings and conclusions in this report are those of the authors and do not necessarily represent the official position of the Centers for Disease Control and Prevention.

