



DELAWARE HIV SURVEILLANCE REPORT

**FOR CASES DIAGNOSED
THROUGH DECEMBER
2019**



DELAWARE HEALTH AND SOCIAL SERVICES
Division of Public Health
Health Promotion and Disease Prevention

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Executive Summary

As of the end of 2019, a total of 3,483 Delawareans were known to be living with Human Immunodeficiency Virus (HIV) and of those, 2,020 had progressed to stage 3 HIV, also known as Acquired Immune Deficiency Syndrome (AIDS). The cumulative number of HIV/stage 3 (AIDS) cases ever diagnosed in Delaware reached 6,210 that same year. As noted in the Centers for Disease Control and Prevention's (CDC) HIV Surveillance Report of 2019, Delaware's HIV incidence rate for 2018 (11.2 per 100,000 persons) was the 16th highest in the United States. The five-year average number of new infections diagnosed in Delaware currently stands at 106 cases per year (2015-2019). Males account for the majority (72%) of HIV/stage 3 HIV (AIDS) cases diagnosed in Delaware.

The distribution of HIV cases in Delaware mirrors county-level population distribution. New Castle County – the most populous county – has the largest number of cases with most confined to the densely populated Wilmington metropolitan area. The Wilmington metropolitan area accounts for 56% of the county's individuals living with HIV (all stages) and 36% of all cases in Delaware. By county, the prevalence rates are: New Castle County = 391.2, Kent County = 281.4, Sussex County = 337.2.

African Americans are disproportionately affected by the HIV/stage 3 HIV (AIDS) burden. While 22% of Delaware's total population is African American, this group accounts for 65% of all HIV/stage 3 HIV (AIDS) cases ever diagnosed in the state. This racial disparity is more pronounced in Delaware compared to the general U.S. population and persists. Of all persons living with a diagnosed HIV infection, African Americans account for 41% in the U.S. and 58% in Delaware.

Persons living with HIV (PLWH) in Delaware tend to be slightly older than PLWH in the U.S. Fifty percent of PLWH in the U.S. were 50 years of age or older. In Delaware, that measure is 62%.

Pediatric HIV/stage 3 HIV (AIDS) (defined as disease in children under 13 years of age) account for 1% of cases ever reported in Delaware (consistent with general U.S. figures). Legislation requiring HIV testing of all expectant mothers and treatment referrals for those infected, has been effective. Only one infected infant was born in Delaware in the past 10 years.

Among new HIV infections diagnosed in Delaware from 2015 through 2019, the largest proportion (44%; N=236) were attributable to men who have sex with men (MSM). Heterosexual transmission followed with 36% (N=190), while injection drug users (IDU) accounted for 6% (N=32). Three-percent (N=18) were attributable to persons with a dual defined risk of MSM and IDU. Ten percent (N=53) fell into the "Other Risk" or "No Risk Identified" behavioral categories.

Top percentage rates for those living with HIV in Delaware are MSM (40%), heterosexual (34%), and IDU (15%). In New Castle County, the rates are heterosexual (37%), MSM (35%), and IDU (19%). In Kent County, the rates are heterosexual (37%), MSM (35%), and IDU (13%). In Sussex County, the rates are MSM (59%), heterosexual (23%), and IDU (7%).

From 1981 through December 2019, 2,945 Delawareans diagnosed with HIV died. In the past two decades, the survival of those living with HIV has increased significantly, which is in line with the slowing of the progression of HIV to stage 3 HIV (AIDS). Earlier diagnoses of HIV infection and advances in medical management have all contributed to the marked improvements in the quality of life and survival of PLWH.

Background and Introduction

The Delaware Department of Health and Social Services, Division of Public Health (DPH) initiated AIDS (stage 3 HIV) surveillance and reporting in 1981. In 2001, surveillance was expanded to include all stages of HIV infection. Surveillance relies on data compiled from health care professionals and local/national reference laboratories.

HIV is the underlying biological agent that weakens the immune system, leading to the development of stage 3 HIV(AIDS). Except for an initial acute viral response, the infection may not manifest with symptoms for an extended period of time. Following the progression to stage 3 HIV (AIDS), symptoms and signs (specific infections, cancers, or changes within the immune system) may appear.

The gathering and analysis of HIV/stage 3 HIV (AIDS) incidence and prevalence data is a crucial component of prevention activities. The Delaware HIV Planning Council relies on this data to guide HIV prevention efforts, HIV health care planning, and HIV services administration. Surveillance data allows DPH to monitor the impact of risk reduction and disease prevention activities, and also influences the federal funds that Delaware receives to assist in the fight against HIV.

Delaware's HIV surveillance efforts focus on three fundamental epidemiological concepts:

- **Person:** Identifies the likely risk factor(s) for HIV acquisition. The information guides future prevention efforts. Surveillance staff characterize the mode of HIV transmission using case report forms, personal interviews, and medical record reviews.
- **Place:** Refers to the residence at time of HIV/stage 3 HIV (AIDS) diagnosis. Delaware engages in data-sharing agreements with other states to identify Delawareans that may have been diagnosed or received treatment outside of the state.
- **Time:** Two dates characterize HIV disease trends: (1) date of HIV diagnosis and (2) date of stage 3 HIV (AIDS) diagnosis. DPH works with health care providers and laboratories to facilitate timely reporting.

The DPH HIV Surveillance Office adheres to data confidentiality protocols that mandate physical, operational, and personnel security when handling HIV data. Data confidentiality must be maintained as a condition of receiving federal funding for surveillance activities.

To review Delaware's HIV education, surveillance, monitoring, and treatment strategies as well as funding sources, read the Delaware Integrated HIV Prevention & Care Plan, 2017-2020, visit: <https://www.dhss.delaware.gov/dhss/dph/dpc/files/comphivplan.pdf>

For national HIV/stage 3 HIV (AIDS) information, visit: <http://www.cdc.gov/hiv/library/reports/hiv-surveillance.html>

Technical Notes

Data Source Descriptions, Limitations, and Precautions

- **HIV Prevention Program:** provides statewide HIV testing and counseling data via the Delaware HIV Counseling and Testing System database. Health care practitioners use standardized data collection forms to report from clinics across the state.
- **Delaware-specific sexually transmitted infection data:** provides information pertaining to diseases such as gonorrhea, chlamydia, and syphilis. Sexually transmitted infection (STI) data are helpful for identifying populations at increased risk for contracting or spreading HIV.
- **Mortality data:** A diagnosis of HIV may not be noted on death certificates due to family request, lack of information regarding HIV status, or failure to record underlying causes of death. For these reasons, the number of HIV-related deaths may be artificially suppressed not only in Delaware, but across the nation.
- **The Delaware Population Consortium:** provides Delaware-specific, county-level population data. The American Community Survey also provides ZIP Code level data to enable defining the 25 ZIP codes in the Wilmington Metropolitan area.
- **CDC:** provides national level HIV/stage 3 HIV (AIDS) trend data via the Enhanced HIV/AIDS Reporting System (eHARS). While eHARS represents an advanced public health surveillance system, it is still possible that actual HIV/stage 3 HIV (AIDS) prevalence and incidence counts are under-reported due to delays in reporting and non-compliance. HIV data are reported to the CDC by all 50 states, but the quality of data varies from state to state. The quality of Delaware's eHARS data is of high standard due to: (1) the efforts of staff to increase record reviews and education of healthcare professionals and laboratories regarding accurate reporting procedures; and (2) significant improvements in death ascertainment within eHARS. This report also utilizes data from the CDC-published HIV Surveillance Report which summarizes national and state-level HIV/stage 3 (AIDS) trends.
- **The Medical Monitoring Project (MMP):** provides data on care patterns including barriers which may influence treatment outcomes. Data is collected via client interviews and medical record abstractions and helps to define levels of antiretroviral therapy, stigma, and behavioral issues. Data collection cycles are June 2015-May 2016 and June 2016-May 2017. These cycles are represented throughout the report as MMP 2015-2016 and MMP 2016-2017.
- **The Youth Risk Behavior Survey (YRBS):** a CDC survey that tracks trends among youth (e.g., nutrition, substance use, accidents, sexual behaviors, and delinquency). These data explore the relationship between risk behaviors and health. YRBS uses self-administered, anonymous questionnaires to collect data from high school students in odd-numbered years. In Delaware, 84% of students approached for participation completed a YRBS questionnaire.
- **The U.S. Health Resources and Services Administration (HRSA):** provides data on HIV service utilization patterns via state Ryan White Services Reports (RSR) and the AIDS Drug Assistance Program (ADAP) Drug Report (ADR). The Ryan White Program provides a comprehensive system of HIV primary medical care, essential support services, and medications for low-income PLWH who are uninsured and underserved. HRSA uses the data to monitor HIV service utilization patterns across the nation. While HRSA data are limited to HIV patients in healthcare, the data are nonetheless important for future healthcare planning.

Data Specifics

In 1993, the CDC expanded the AIDS surveillance case definition to include all HIV-infected persons with less than 200 CD4+ T-lymphocytes/ul, or a CD4+ T-lymphocyte percentage of total lymphocytes of less than 14. The expansion added three clinical conditions – pulmonary tuberculosis, recurrent pneumonia, and invasive cervical cancer -- and retained the 23 clinical conditions in the AIDS surveillance case definition published in 1987. The revision resulted in an artificial increase in the prevalence of AIDS cases at state and national levels.

The HIV case definition was modified again in 2007; however, this change did not affect the data reported. The HIV case definition was modified again in early 2014. This change incorporated a sliding scale upon which HIV positive persons are assigned an HIV infection stage based on age-specific CD4+T-lymphocyte count (Table 1). This change also gave birth to the now widely used term “stage 3 HIV (AIDS),” previously known as AIDS.

Table 1: HIV Case Definition, Centers for Disease Control and Prevention, 2014

Stage	Age on date of CD4+ T-lymphocyte test					
	<1 yr		1–5 yrs		≥6 yrs	
	Cells/ μ L	%	Cells/ μ L	%	Cells/ μ L	%
1	≥1,500	≥34	≥1,000	≥30	≥500	≥26
2	750–1,499	26–33	500–999	22–29	200–499	14–25
3	<750	<26	<500	<22	<200	<14
<p>* The stage is based primarily on the CD4+ T-lymphocyte count; the CD4+ T-lymphocyte count takes precedence over the CD4 T-lymphocyte percentage, and the percentage is considered only if the count is missing. There are three situations in which the stage is not based on this table: 1) if the criteria for stage 0 are met, the stage is 0 regardless of criteria for other stages (CD4 T-lymphocyte test results and opportunistic illness diagnoses); 2) if the criteria for stage 0 are not met and a stage-3-defining opportunistic illness has been diagnosed, then the stage is 3 regardless of CD4 T-lymphocyte test results; or 3) if the criteria for stage 0 are not met and information on the above criteria for other stages is missing, then the stage is classified as unknown.</p>						

Source: Centers for Disease Control and Prevention, *Morbidity and Mortality Weekly Review*, April 11, 2014, Vol. 63, No. 3.

Delaware initiated HIV surveillance in 2001, 20 years after the initiation of AIDS surveillance. In this report, 2001-2019 HIV data are combined with stage 3 HIV (AIDS) data. For reporting years 1981-2000, data reflect AIDS (stage 3 HIV) data only. The inclusion of HIV cases beginning year 2001 created an apparent sharp increase in case counts in Delaware. The increase was due to the large number of HIV infected persons included who were previously not counted because they did not meet the AIDS definition. These individuals were all reported as HIV positive in a single year (2001).

Per DPH data release policy, no Delaware-specific HIV data can be released in a format that may allow for individual identification. Data may be combined or suppressed to ensure patient confidentiality. Any combined or suppressed data are identified in footnotes.

Percentage calculations may not add to 100% due to rounding. However, the total data does represent 100%. These calculation are generally off by only one tenth of a percentage point.

Prevalence and Incidence

Prevalence and incidence rates are calculated per 100,000 in population. As reported in the CDC 2019 HIV Surveillance Report, Delaware's 2018 HIV incidence rate of 11.2 per 100,000 among adults and adolescents is lower than the overall 2018 U.S rate of 13.6 per 100,000. In that same year, Delaware's stage 3 AIDS incidence rate of 6.7 per 100,000 is nearly equal to the overall 2018 U.S. rate of 6.2 per 100,000. In 2018, Delaware HIV and stage 3 HIV (AIDS) incidence rates ranked 16th and 14th respectively compared to other states. In 2018 Delaware's prevalence rate of 403.6 ranked 9th in the country and was considerably higher than the rate in the United States overall (372.8).

HIV and stage 3 (AIDS) prevalence and incidence data are unavailable for smaller, hard-to-reach populations, such as the homeless, transgender, and those with mental and behavioral health issues. Additionally, some HIV and stage 3 HIV (AIDS) cases may be diagnosed through routine screenings (e.g., blood donations) and little additional information is available regarding the risk category.

Definition of Terms

Adult/adolescent case:	Individual age ≥ 13 years at time of diagnosis.
Epidemiology:	Study of the patterns, causes, and effects of health and disease in defined populations.
Heterosexual:	An enduring pattern of or disposition to experience sexual, affectionate, physical or romantic attractions to persons of the opposite sex.
Incidence Rate:	A measure of the rate of development of new cases of a disease in population over a period of time.
Lost to Care (LTC)	A person who has not received HIV related medical care within a 12-month period. Typically identified through the absence of such testing within the past 12 months or more.
Pediatric case:	Individual age < 13 years at the time of diagnosis.
Prevalence Rate:	The percentage of a population affected with a specific disease at a point in time.
Quantile	A quantile is where a sample is divided into equal-sized, adjacent, subgroups (sometimes called a "fractile"). It can also refer to dividing a probability distribution into areas of equal probability.
Stage 3 HIV	This is late stage HIV where a person's immune system has been badly damaged and can no longer fight off serious infections and illnesses. This stage is also known as AIDS (see abbreviations).
Transfusion associated:	Person who acquired the HIV virus as a result of receiving infected blood or blood products.
Year of diagnosis:	The year when the disease event was first confirmed.

Year of report: The year when the case was reported to the Delaware HIV/AIDS Surveillance Office.

Abbreviations

AIDS	Acquired Immune Deficiency Syndrome
ADAP	AIDS Drug Assistance Program
ADR	ADAP Drug Report
A/PI	Asian/Pacific Islander
ART	Antiretroviral Therapy
CDC	Centers for Disease Control and Prevention
CTS	Counseling and Testing Services
DHSS	Delaware Department of Health and Social Services
DPH	Division of Public Health
eHARS	Enhanced HIV/AIDS Reporting System (CDC database)
HAART	Highly active antiretroviral therapy
HIV	Human Immunodeficiency Virus
HRSA	United States (U.S.) Health Resources and Services Administration
IDU(s)	Injection Drug User(s)
MMP	Medical Monitoring Project
MSM	Men who have Sex with Men
MSM/IDU	Men who have Sex with Men and Inject Drugs
NA/AN	Native American/Alaskan Native
NIR	No Identified Risk
NRR	No Risk Reported
PLWH	Persons living with HIV
RSR	Ryan White Services Report
STD (STI)	Sexually Transmitted Disease (Infection)
WSW	Women who have Sex with Women
YRBS	Youth Risk Behavior Survey

Transmission Category Hierarchy

All diagnosed HIV/stage 3 HIV (AIDS) cases are assigned to a CDC HIV transmission risk hierarchy (shown below). Case assignment indicates the risk factor most likely associated with HIV transmission. If a case reports more than one suspected mode of HIV transmission, it is assigned the higher of the identified risk categories in the hierarchy. The one exception to this rule involves males with a history of both sexual contact with other men and injecting drug use; these individuals comprise a separate exposure category (Risk Category 3).

1. Men who have sex with men
2. Injection drug user
3. Men who have sex with men and inject drugs
4. Heterosexual contact "sex partner at risk"
 - a. Sexual contact with an injecting drug user
 - b. Sexual contact with a bisexual male
 - c. Sexual contact with a person with hemophilia
 - d. Sexual contact with a transfusion recipient with HIV
 - e. Sexual contact with a transplant recipient with HIV
 - f. Sexual contact with a person with HIV/AIDS; with a risk unspecified
5. Transfusion of blood/blood components
6. Transplant of tissue/organs or artificial insemination

7. Worked in a health care or laboratory setting

“No identified risk” (NIR) category indicates no risk information is available. For example, private laboratories and blood banks generally do not capture information on individuals’ risk behaviors. In Delaware, 2.9% of all known cases are classified as NIR.



Section 1: Demographic Characteristics and Social Determinants of Health in Delaware

Demographic Characteristics and Social Determinants of Health in Delaware

Delaware is the second smallest state in the U.S., measuring 100 miles from north to south and 30 miles from west to east. The state is comprised of three counties. New Castle County, located to the north, is the most populous and is home to 58% of the state's population. Almost 13% of New Castle County residents live in the City of Wilmington. Centrally-located Kent County, home to 18% of Delawareans, includes a blend of urban, suburban, and agricultural zones. Dover Air Force Base and the state capital (Dover) are located in Kent County. Sussex County, the southernmost of the three counties where 24% of Delawareans live, is largely rural and home to a large number of poultry, dairy, and crop-growing operations. Eastern Sussex County includes the beach communities, which draws a large number of retirees (both from within Delaware and also out-of-state) and tourists.

In 2019, Delaware's population was estimated at 972,332, representing 0.3% of the U.S. population. The majority of Delawareans (62%) are Caucasian; African Americans and Hispanics comprise 22% and 9% of the state's population respectively. Approximately 7% of Delawareans are Asian, Pacific Islander, Native American or multi-race. Females account for 52% of the population, similar to the national gender distribution (Table 2).

Table 2: Racial and Ethnic Population Distribution by County, Delaware, 2019

County	Caucasian		African-American		Hispanic		Other		Total	
	#	%	#	%	#	%	#	%	#	%
New Castle	319,202	53%	142,913	67%	58,153	63%	42,426	65%	562,694	58%
Sussex	171,233	28%	27,000	13%	22,910	25%	10,476	16%	231,619	24%
Kent	111,620	19%	42,518	20%	11,841	13%	12,040	19%	178,019	18%
Delaware	602,055	62%	212,431	22%	92,904	9%	64,942	7%	972,332	100%

Source: Delaware Population Consortium, 2019 estimates.

The median age in Delaware is 41. Compared to the general U.S. population, Delaware has a slightly higher median annual household income (\$65,627 vs. \$60,293, respectively) and similar patterns of educational attainment. Thirteen percent of Delaware residents report speaking a language other than English in the home (U.S. Census Bureau, 2020).

The tables and figures in the following pages highlight key social determinants of health elicited through Delaware Medical Monitoring Project (MMP) interviews and compares them to the general population in Delaware and the United States. The social determinants of health are often defined as the conditions in which people live, learn, work, play and pray. SDOH are believed to be the most important determinants of health; and differences in these conditions result in health inequities. The World Health Organization (WHO) explains that these circumstances are in turn shaped by a wider set of forces: economics, social policies such as education, and politics.

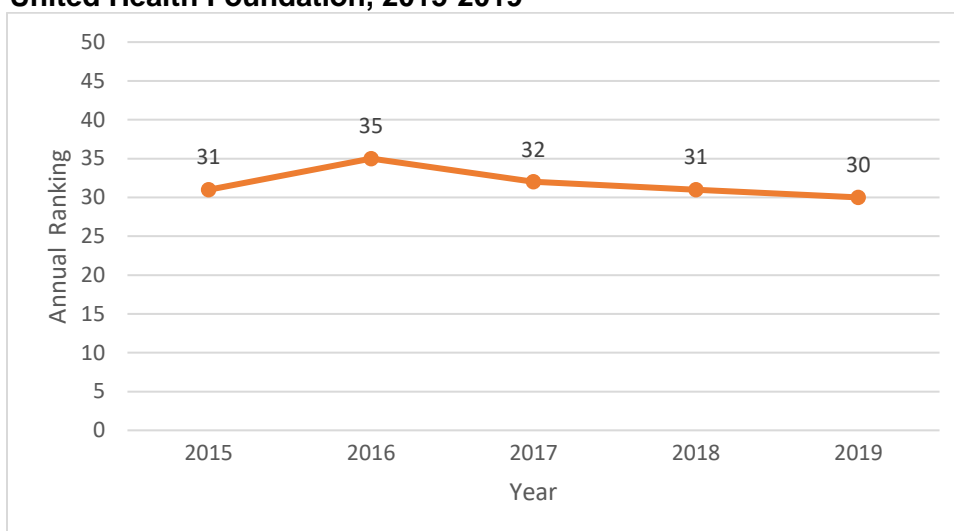
Additional charts compare general health standings in Delaware and the United States. In general:

- African American Delawareans are disproportionately affected by HIV.
- Men who have sex with men (MSM) is the top exposure mode.
- Males contract HIV at a greater rate than females.

The overall health ranking assessment in the 2019 United Health Foundation's America's Health Rankings Report, is based on health policy, clinical care, risk behaviors, community and environment, and health outcomes in all 50 states. Figure 1 shows that Delaware has consistently ranked in the low-to-mid-thirties among all states for overall health.

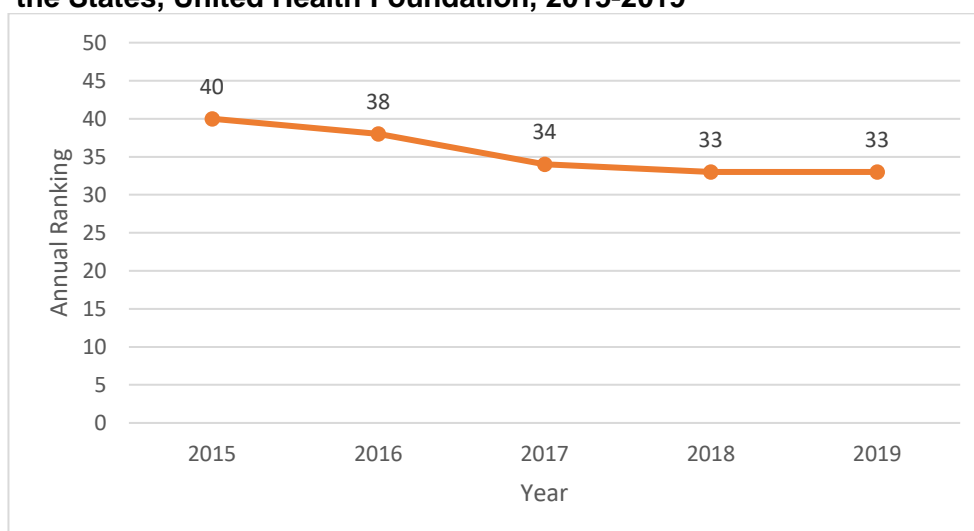
The report's community and environment assessment outline the following factors: children in poverty, air pollution, infectious diseases, occupational fatalities, and violent crime. Figure 2 indicates that Delaware's ranking improved from 40 in 2015 to 33 in 2019, according to the 2019 report.

Figure 1: Delaware's Overall Health Ranking among the States, United Health Foundation, 2015-2019



Source: United Health Foundation, America's Health Rankings, 2019.

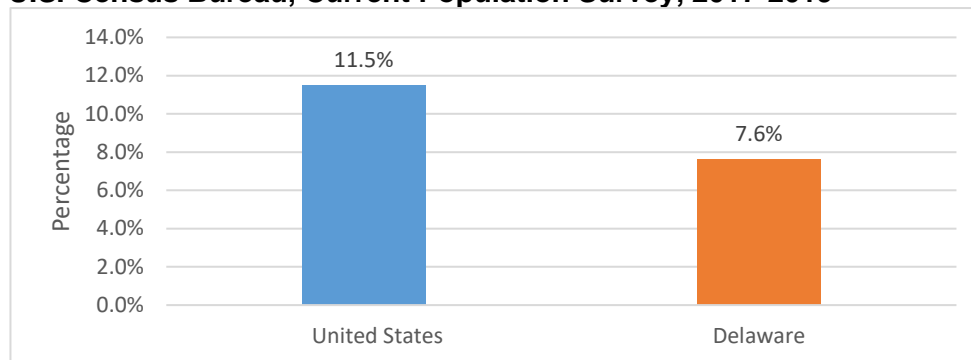
Figure 2: Delaware's Community and Environment Ranking among the States, United Health Foundation, 2015-2019



Source: United Health Foundation, America's Health Rankings, 2019.

When looking at the percentage of people living in poverty, Delaware is approximately four percentage points lower in this category at 7.6%, than the U.S. percentage of 11.5%. From 2015-2019, Delaware ranked between 21st and 22nd among all states in per capita income. The Delaware ZIP Codes with the lowest per-capita incomes also appear to have the highest incidence of HIV infection. This may indicate that HIV infection occurs at higher rates in high poverty areas (Figures 3-4 and Table 3). The federal poverty level is the minimum annual income required to avoid living in poverty in the U.S. Any level of income below this level is considered insufficient to meet the basic necessities of life. In 2019 this level was \$12,760.

Figure 3: Percentage of People in Poverty, U.S. vs. Delaware, U.S. Census Bureau, Current Population Survey, 2017-2019



Source: U.S. Census Bureau, Current Population Survey, 2017 to 2019 Annual Social and Economic Supplements.

Table 3: Per Capita Income Comparison of Top Four Infection Level ZIP Codes, New Castle County and Delaware, 2019

HIV Diagnosis ZIP Code	HIV Incidence 1981-2020	Percentage below New Castle County Per Capita Income (\$34,541)	Percentage below Delaware Per Capita Income (\$32,625)
198xx	953	31%	27%
198xx	788	45%	41%
198xx	657	32%	28%
197xx	559	22%	16%

Sources: Delaware Department of Health and Social Services, Division of Public Health, 2018 and U.S. Census Bureau-American Community Survey 2016 5-year estimates.

Last two digits of ZIP Codes de-identified to comply with local data release standards.

Figure 4: Ranking of Per Capita Annual Income, Delaware, United Health Foundation, 2015-2019

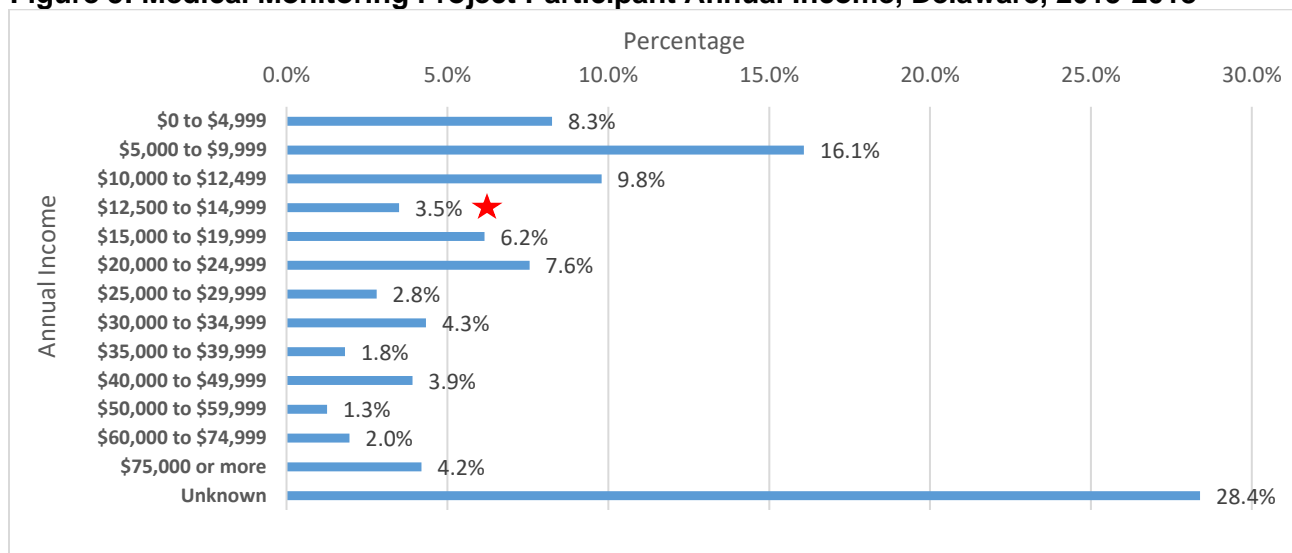


Source: United Health Foundation, America's Health Rankings, 2019.

Approximately 38% of Delaware MMP participants reported an annual income at, or only slightly above the federal poverty level of \$12,760 (Figure 5). The U.S. Census defines poverty as living in a household with a total cash income below 50 percent of its poverty threshold (U.S. Census Bureau, 2020). When compared to the U.S., MMP respondents had significantly higher incomes.

Figure 6 shows that the combined percentage of people “Unable to Work” and “Out of Work for More than 1 Year” categories is greater than the percentage of participants that are working for wages at 46% and 35%, respectively.

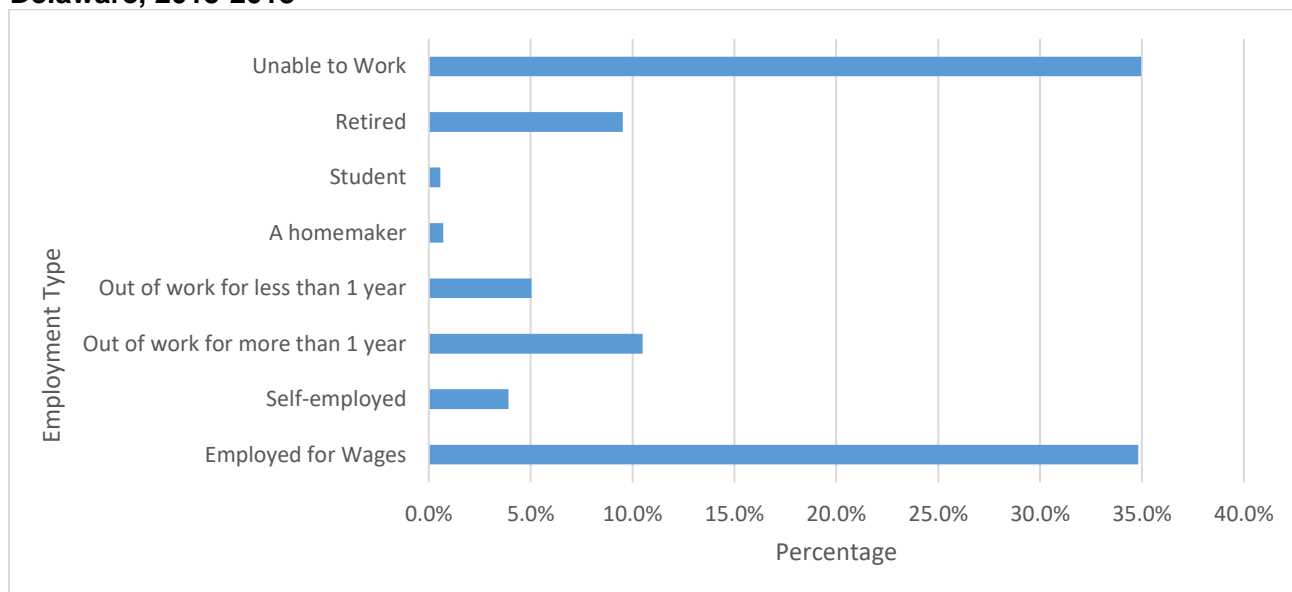
Figure 5: Medical Monitoring Project Participant Annual Income, Delaware, 2015-2018



Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

★ It is within this category that MMP participants broke below the poverty level (\$12,760).

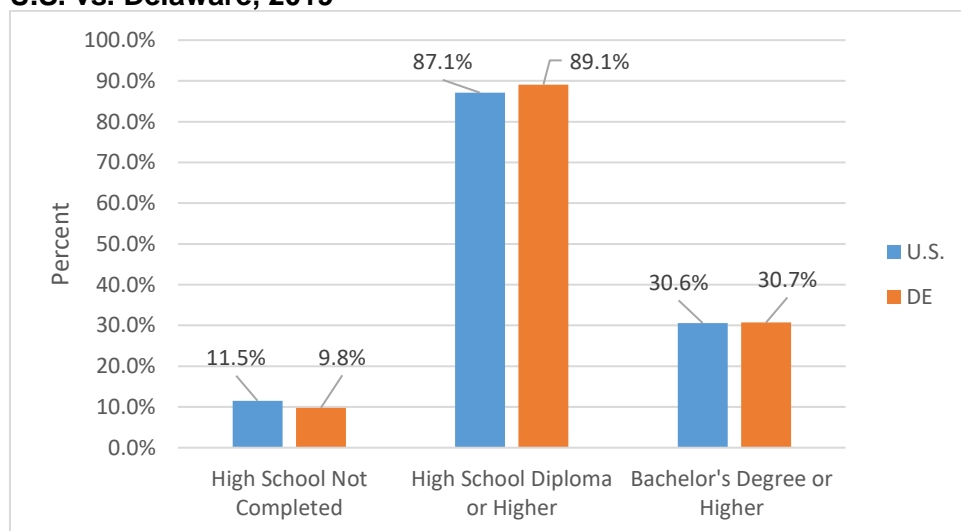
Figure 6: Current Employment Status by Employment Type, Medical Monitoring Project, Delaware, 2015-2018



Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

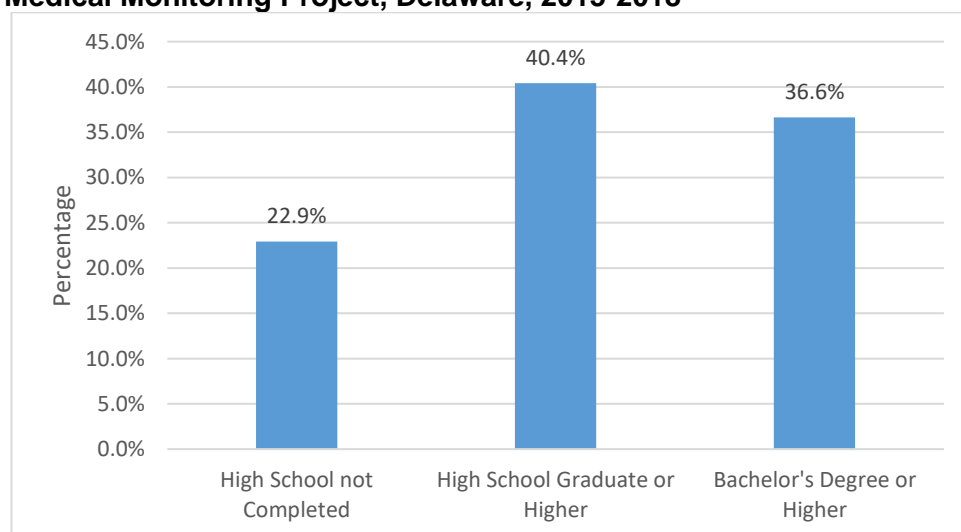
The proportion of Delawareans not completing high school, with a high school diploma, and with a bachelor's degree or higher, is comparable to that of the general U.S. population. MMP participants had lower attainment rates in each of these areas when compared with Delaware's or the U.S. general population. This may indicate higher levels of infection among those with limited education. (Figures 7-8).

Figure 7: Percentage of Persons Age 18 years+ by Educational Attainment, U.S. vs. Delaware, 2019



Source: U.S. Census Bureau, American Community Survey 2019.

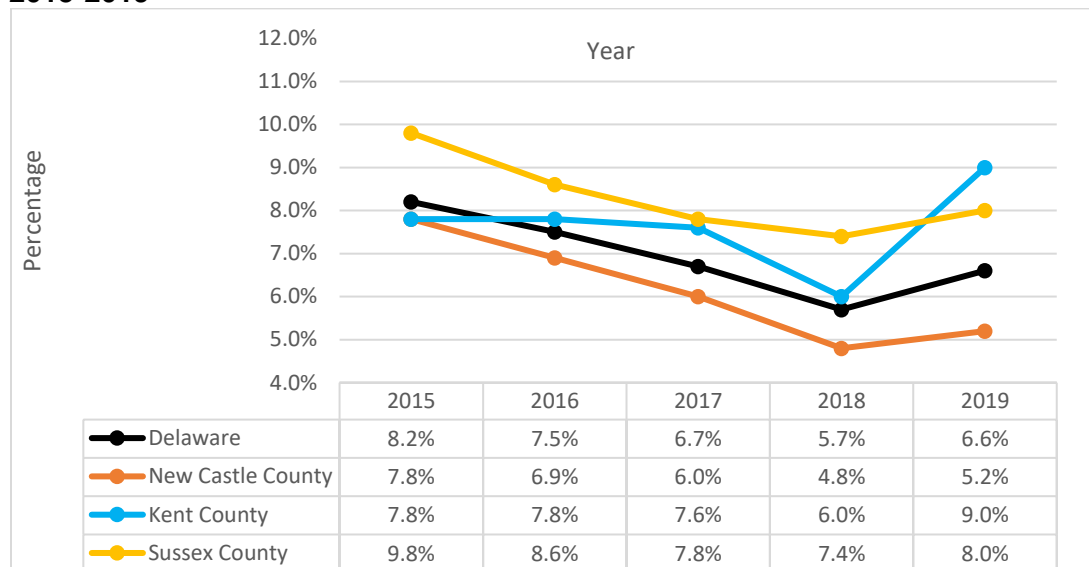
Figure 8: Percentage of Persons Age 18 years+ by Educational Attainment, Medical Monitoring Project, Delaware, 2015-2018



Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

Delaware has fewer uninsured persons compared with other states, ranking 13 out of 50 in 2019, according to America's Health Ranking by the United Health Foundation. Of all Delawareans, 6.6% are without health insurance (Figure 9) compared to 5.7% of MMP participants (Table 4).

Figure 9: Percentage of Persons without Health Insurance, Delaware and by county, 2015-2019



Source: U.S. Census Bureau-American Community Survey 2019 5-year estimates.

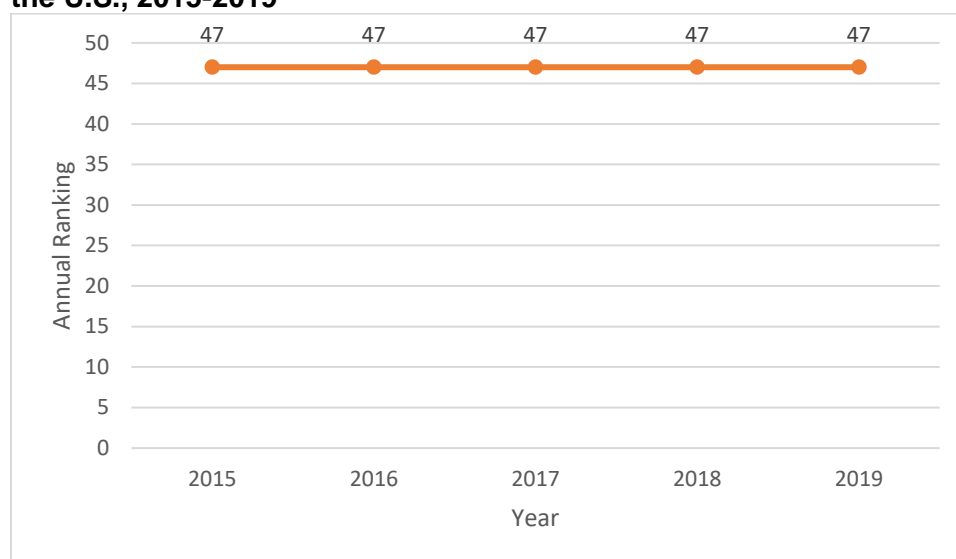
Table 4: During the past 12 months, was there a time that you didn't have any health insurance or health coverage?, Medical Monitoring Project, Delaware, 2015-2018

	Total	
	#	%
No	663	92.7%
Yes	41	5.7%
Unknown	11	1.5%
Total	715	100.0%

Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

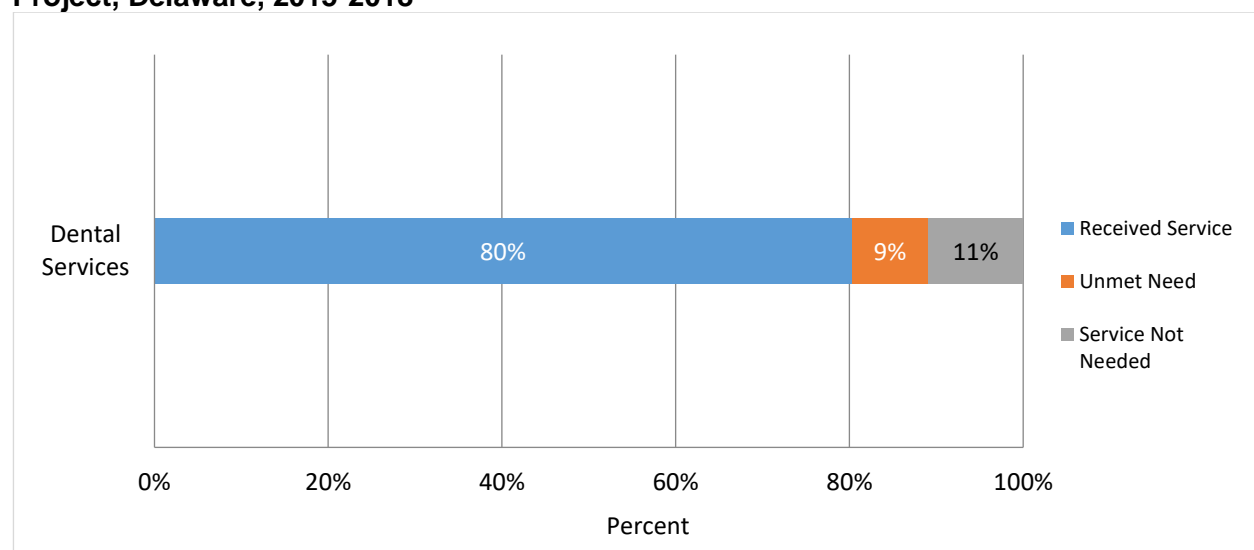
While MMP participants had acceptable rates of health insurance, other indicators of health care suggested unmet needs. Dental service was the leading unmet need of HIV clients. Delaware consistently ranks low, 47 out of 50, in the U.S. for number of dentists per 100,000 persons (Figure 10). Nine percent of Delaware MMP respondents for 2015-2018 reported unmet dental needs (Figure 11). It is possible the lack of dentists in Delaware is creating this barrier for HIV positive persons.

Figure 10: Number of Dentists per 100,000 Population, Delaware Ranking within the U.S., 2015-2019



Source: United Health Foundation, America's Health Rankings, 2020.

Figure 11: Dental Services Provided and Unmet Need, Medical Monitoring Project, Delaware, 2015-2018



Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

Section 2: Scope of HIV/AIDS in Delaware and the U.S.

Persons ever Diagnosed with HIV or Stage 3 HIV (AIDS) in Delaware

From 1981 through 2019, 6,210 Delawareans were diagnosed with HIV or stage 3 HIV (AIDS) (Table 5). Males account for 72% of all cases ever diagnosed in the state. African Americans account for 65% of cases ever diagnosed, and represent a disproportionate share of the state's HIV/stage 3 HIV (AIDS) burden. Caucasian and Hispanic Delawareans account for 27% and 6% of those ever diagnosed, respectively. The largest percentage of HIV/stage 3 HIV (AIDS) cases have been diagnosed among adults ages 30 to 39. New Castle County residents account for the majority of cases.

Table 5: Reported HIV and Stage 3 HIV (AIDS) Cases, Delaware, 1981-2019*

	HIV (Not AIDS) Cases		Stage 3 HIV (AIDS) Cases		Total Cases All Stages	
	#	%	#	%	#	%
Total Cases	1,556	100%	4,654	100%	6,210	100%
Gender						
Males	1,104	71%	3,361	72%	4,465	72%
Females	452	29%	1,293	28%	1,745	28%
Race						
Caucasian	461	30%	1,242	27%	1,703	27.42%
African-American	946	61%	3,095	67%	4,041	65.07%
Hispanic	118	8%	269	6%	387	6.23%
Other / Unknown	31	2%	48	1%	79	1.27%
Age Group (Years at initial HIV Diagnosis)**						
< 13					54	1%
13-14					1	0%
15-19					171	3%
20-24					586	9%
25-29					897	14%
30-34					1,103	18%
35-39					1,098	18%
40-44					874	14%
45-49					637	10%
50-54					361	6%
55-59					197	3%
60-64					125	2%
65+					106	2%
County						
New Castle (NCC)	1,086	70%	3,462	74%	4,548	73%
NCC, City of Wilmington	627	40%	2,262	49%	2,889	47%
NCC, non-Wilmington	459	29%	1,200	26%	1,659	27%
Kent County	216	14%	515	11%	731	12%
Sussex County	254	16%	677	15%	931	15%

Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

Note: In Delaware, AIDS and HIV surveillance efforts began in 1981 and 2001, respectively.

*Table represents cumulative Delaware diagnosed cases regardless of current vital status.

**HIV and Stage 3 (AIDS) are two separate disease states thus the age at HIV diagnoses is represented as a total based on the first known HIV disease date.

Table 6 and Maps 1 through 4 describe the primary modes of exposure and geographic locations.

Table 6: Reported HIV Cases, All Stages by Exposure Risk Group, Delaware, 1981-2019*

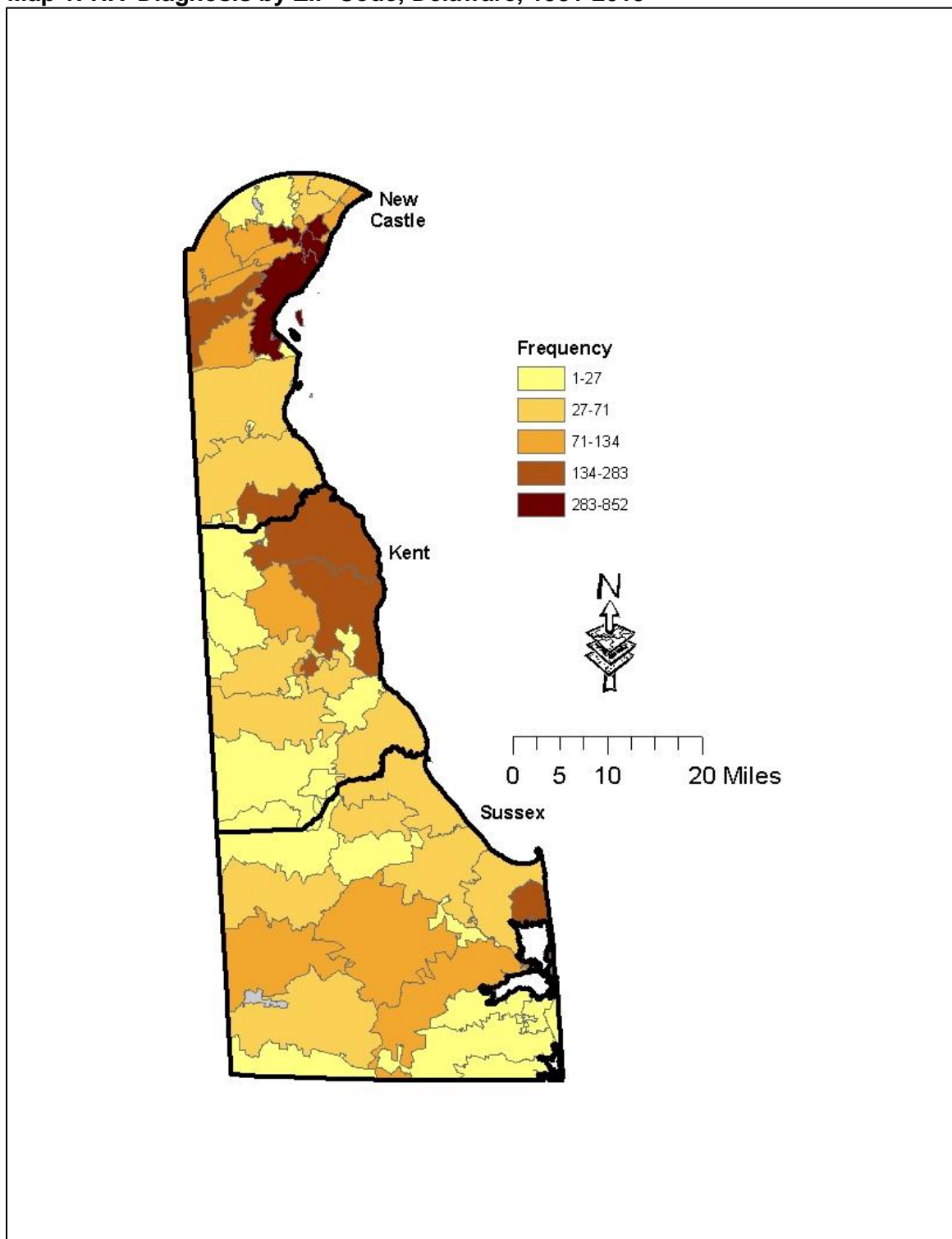
HIV Exposure Mode	#	%
Men Who Have Sex with Men (MSM)	2056	33.1%
Injection Drug User (IDU)	1834	29.5%
MSM and IDU	313	5.0%
Heterosexual contact w/IDU	418	6.7%
Heterosexual contact	1332	21.4%
Transfusion/transplant recipient	21	0.3%
Risk not reported/other	182	2.9%
Pediatric Exposure	54	0.9%
Total	6210	100%

Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

*Table represents cumulative Delaware diagnosed cases regardless of current vital status.

Seventy-three percent of HIV cases ever diagnosed in Delaware occurred in New Castle County with 47% of all cases in Delaware were in the Wilmington Metropolitan area. Kent and Sussex counties comprised 12% and 15% respectively (Map 1).

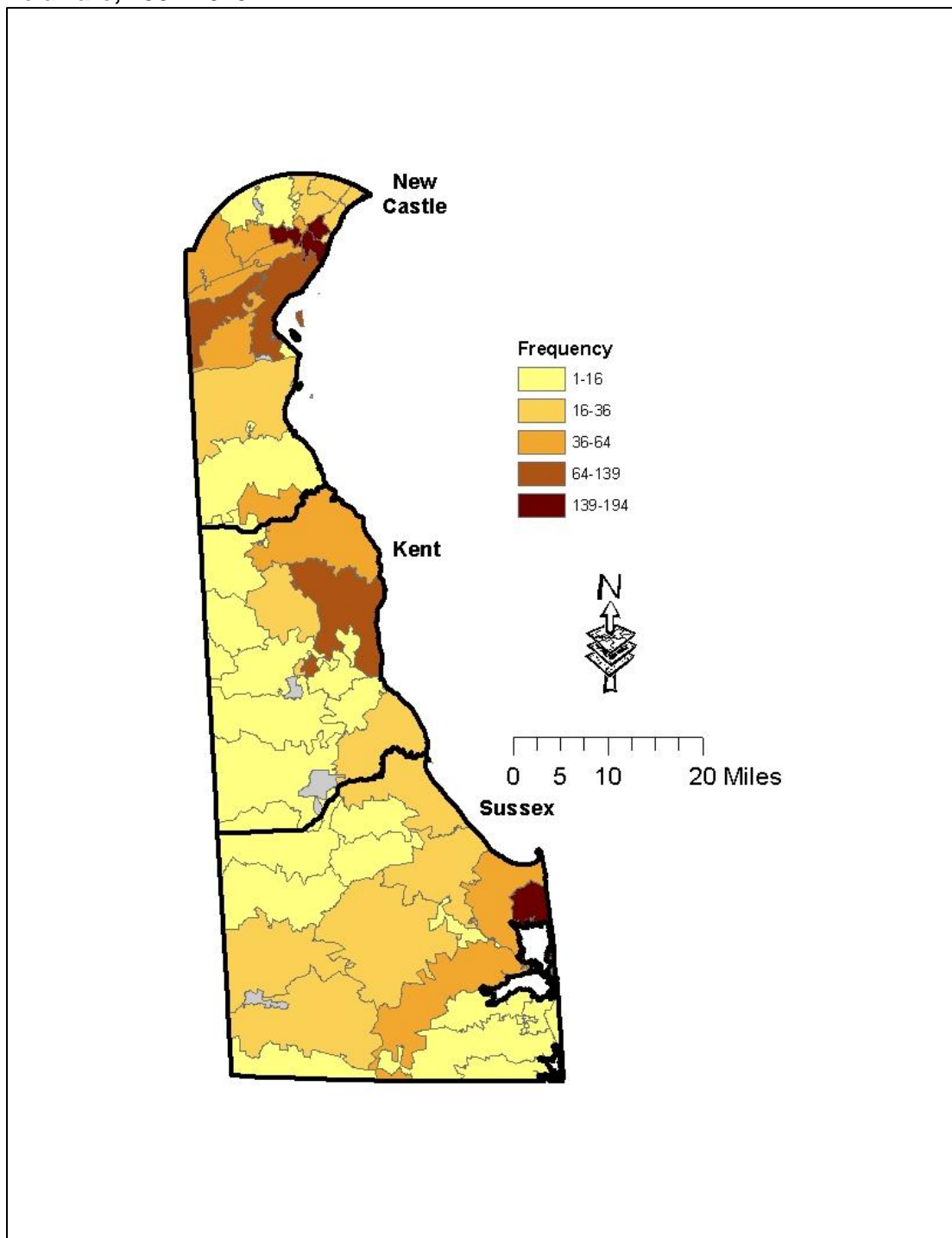
Map 1: HIV Diagnosis by ZIP Code, Delaware, 1981-2019



Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

Sixty-five percent of HIV cases among men who have sex with men (MSM) in Delaware occurred in New Castle County. Kent and Sussex counties comprised 12% and 23% respectively. Notably, 50% of all HIV cases occurring in Sussex County were among MSM and were primarily concentrated in the Rehoboth Beach area (MAP 2).

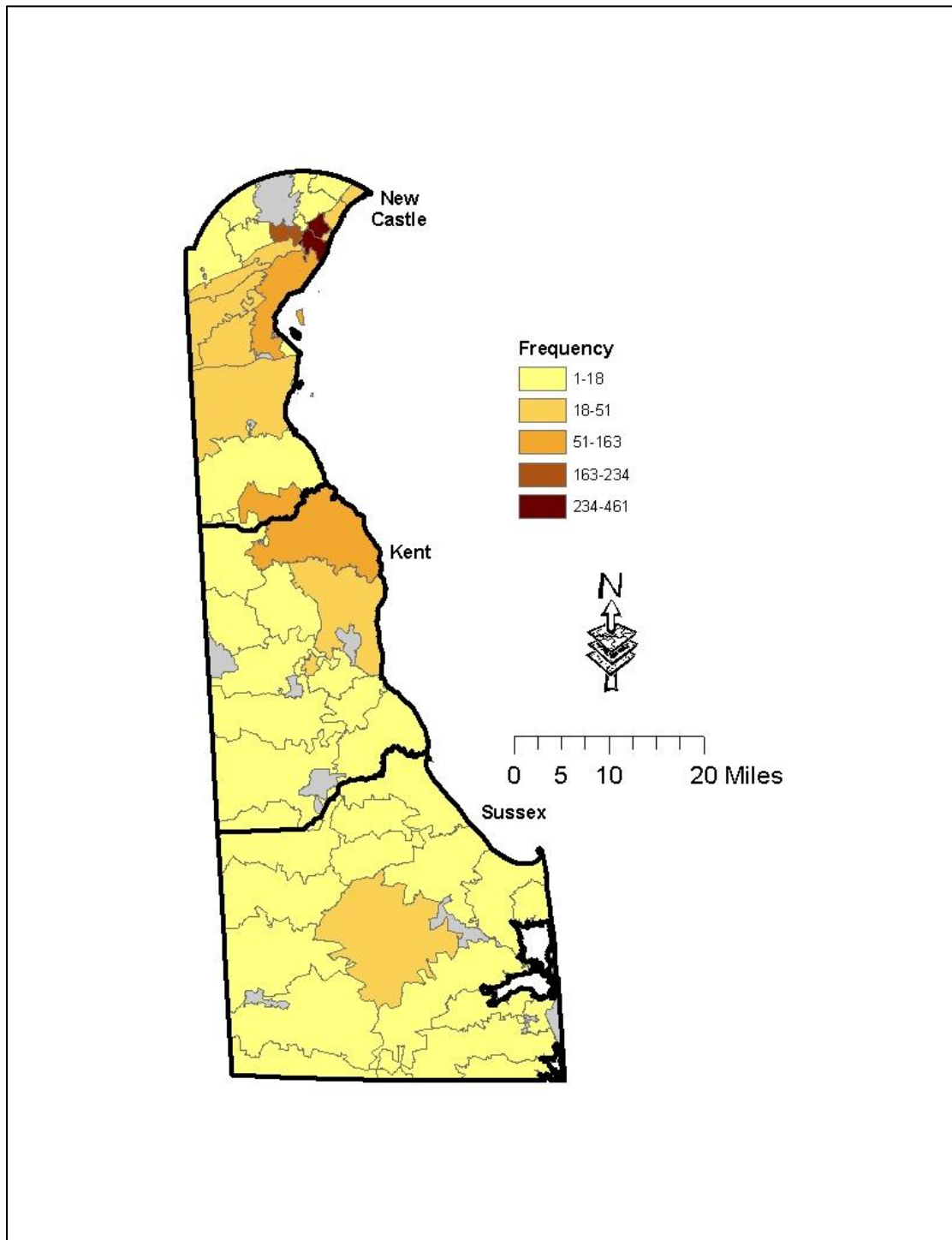
Map 2: HIV Diagnosis among Men Who Have Sex with Men (MSM) by ZIP Code, Delaware, 1981-2019



Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

Eighty-five percent of all HIV cases attributed to injection drug use (IDU) occurred in New Castle County with 67% of the statewide cases occurring in the Wilmington Metropolitan area. Kent and Sussex counties comprise 7% and 8% of cases respectively (MAP 3).

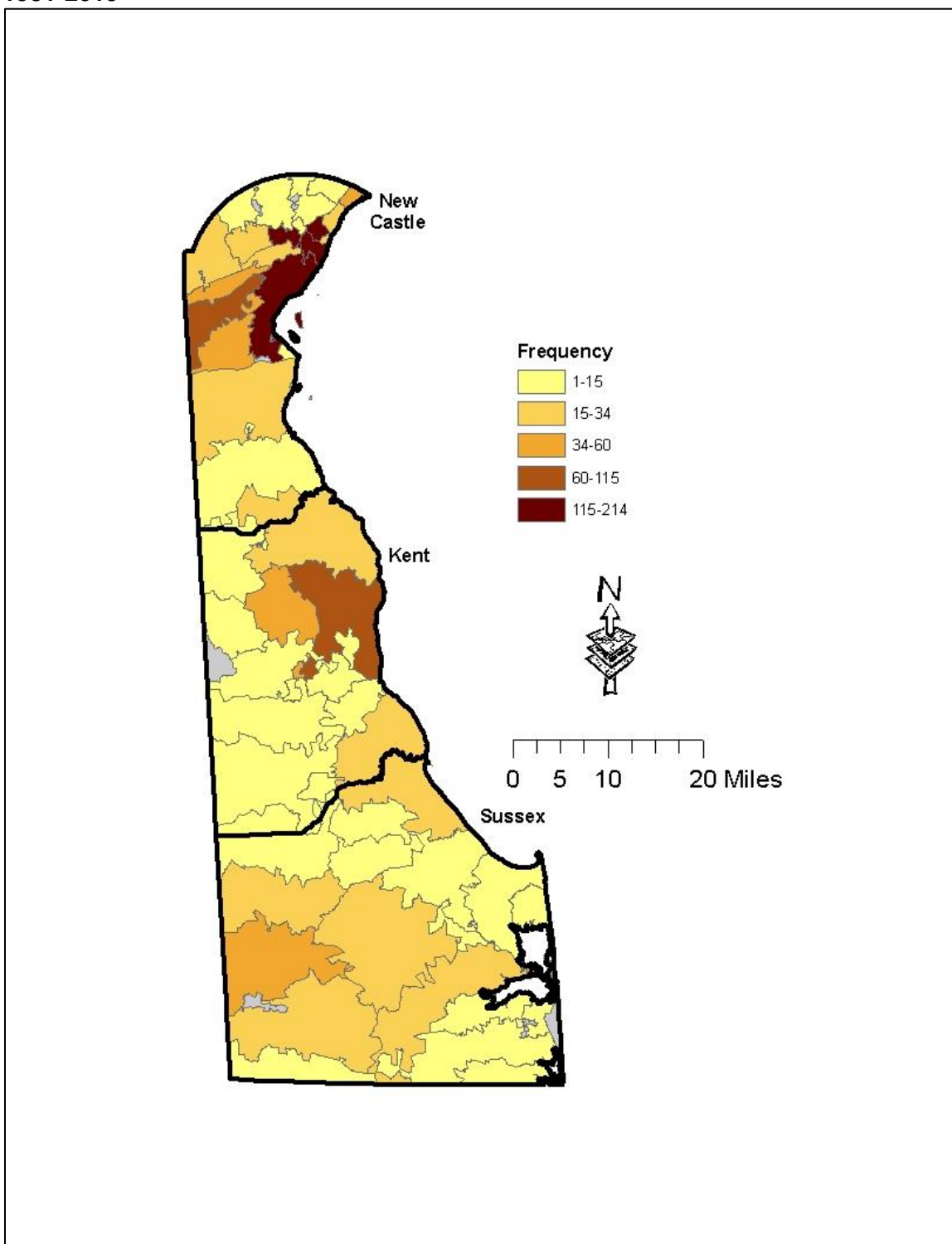
Map 3: HIV Diagnosis among Injection Drug Users (IDU) by ZIP Code, Delaware, 1981-2019



Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

Seventy-one percent of all HIV cases attributed heterosexual activity occurred in New Castle County. Kent and Sussex counties comprise 15% and 14% of cases respectively (MAP 4).

Map 4: HIV Diagnosis among Heterosexuals by ZIP Code, Delaware, 1981-2019



Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

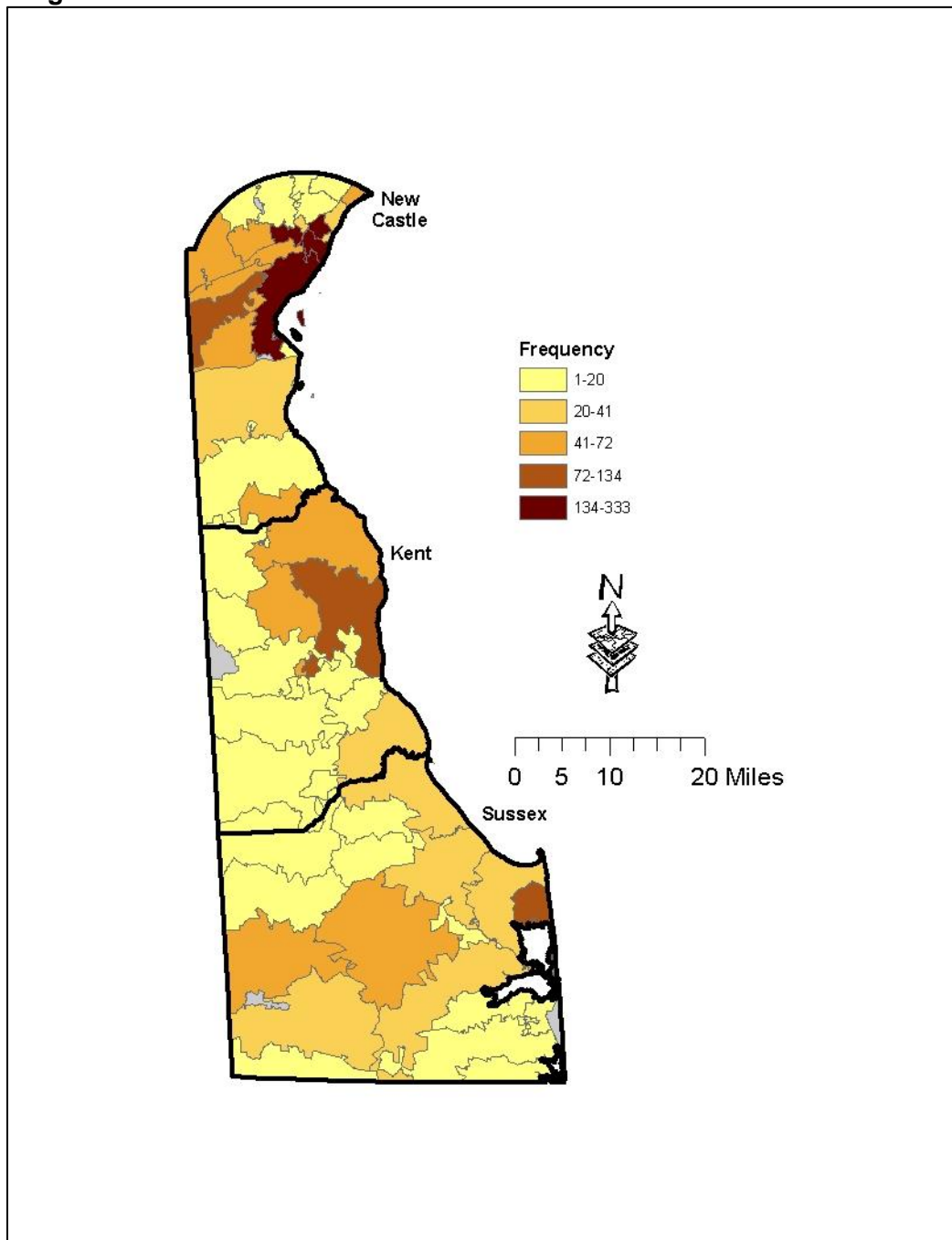


Living with HIV – All Stages

Delawareans Living with HIV - All Stages

In 2019, a total of 3,483 Delawareans were living with HIV and 2,020 (59%) of them had progressed to stage 3 HIV (AIDS). Approximately 24% of these cases relocated to Delaware after initial HIV diagnosis elsewhere (Map 5).

Map 5: HIV Positive Persons Living in Delaware by ZIP Code, Diagnosed 1981-2019

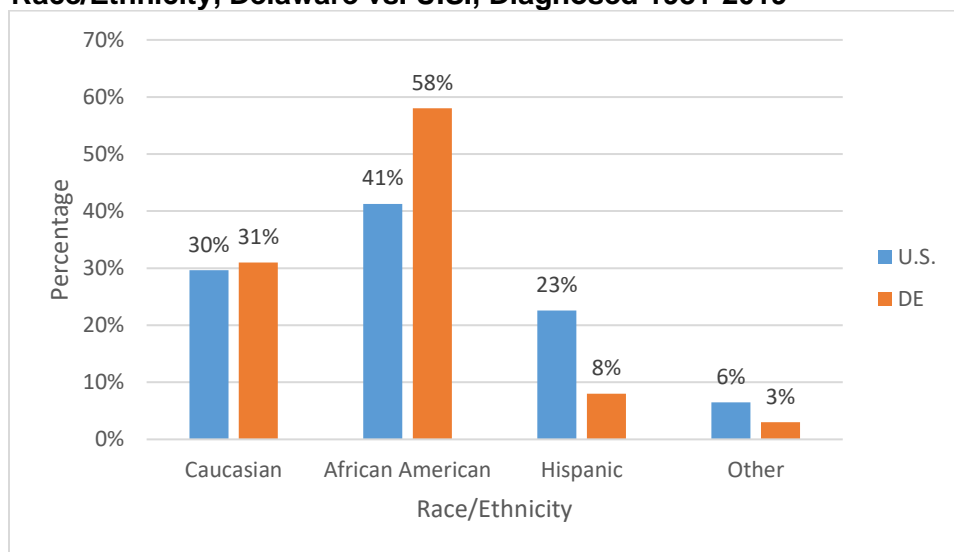


Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

Living with HIV All Stages, Delaware vs. U.S.

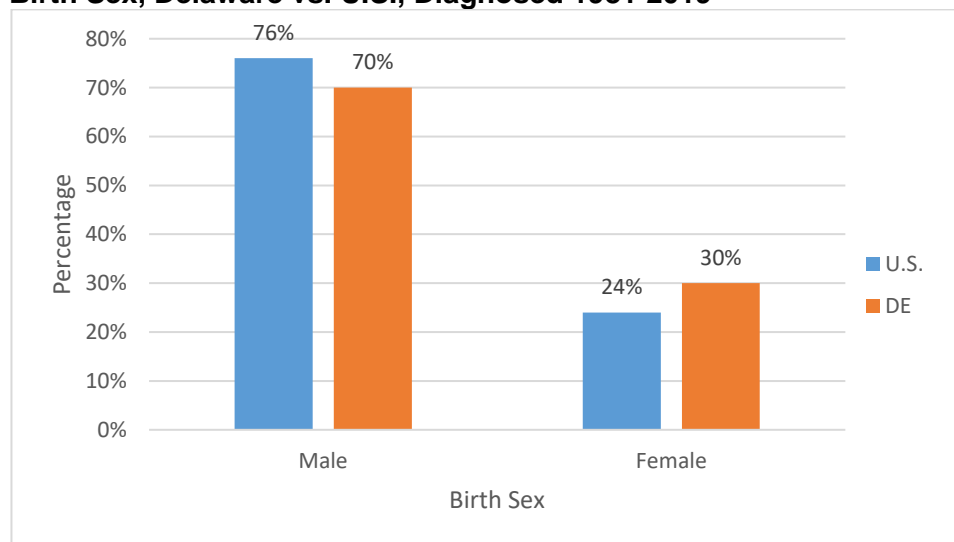
Delaware's percentage of African Americans living with HIV is 17% higher than the U.S., Delaware Hispanics are 15% lower than U.S. Hispanics. Caucasians and those in other categories are comparable in percentages. The percentage of Delaware males living with HIV is 6% lower than the U.S. percentage; Delaware females are 6% higher than compared to females in the U.S. (Figure 13).

Figure 12: Percentage of Persons Living with HIV, All Stages by Race/Ethnicity, Delaware vs. U.S., Diagnosed 1981-2019



Source: Delaware Department of Health and Social Services, Division of Public Health, 2020, CDC HIV Surveillance Report, 2018; Vol. 31.

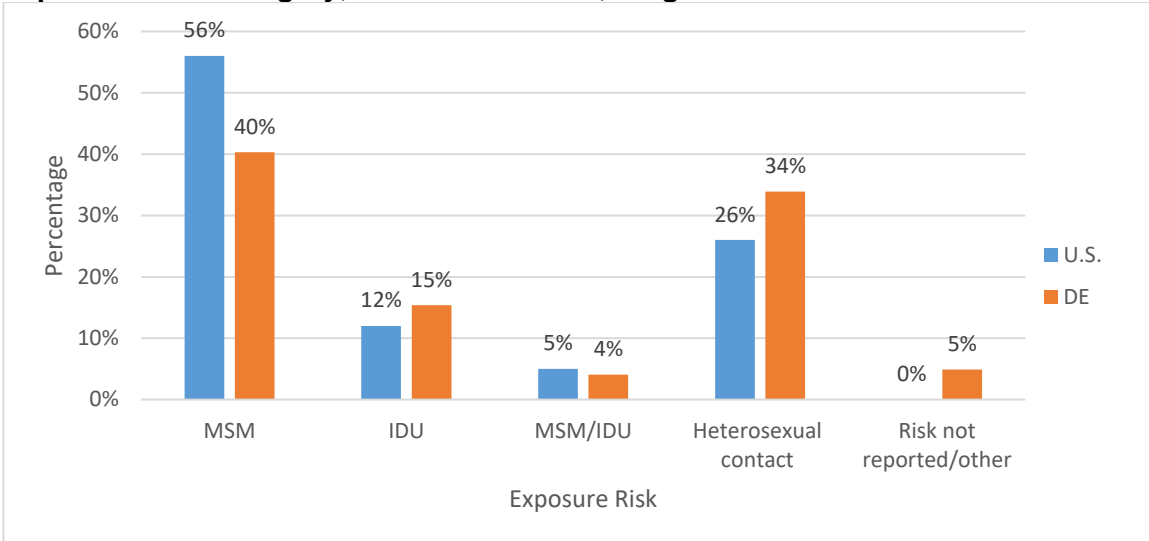
Figure 13: Percentage of Persons Living with HIV, All Stages by Birth Sex, Delaware vs. U.S., Diagnosed 1981-2019



Source: Delaware Department of Health and Social Services, Division of Public Health, 2020, CDC HIV Surveillance Report, 2018; Vol. 31.

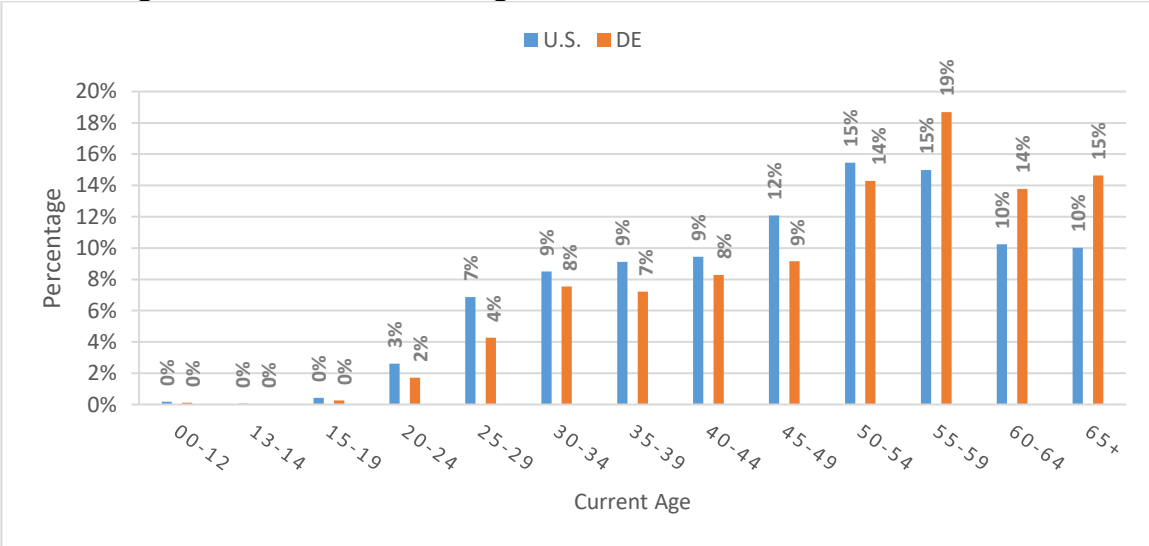
In Delaware, the percentages of HIV positive MSM and men who have sex with men and inject drugs (MSM/IDU) are 16% and 1% lower than for the U.S., respectively (Figure 14). Delaware's injection drug user (IDU), heterosexual, and other risk categories are 3%, 8%, and 5% higher than for the U.S., respectively. Delawareans living with HIV are generally older than similar U.S. populations (Figure 15).

Figure 14: Percentage of Persons Living with HIV, All Stages by Exposure Risk Category, Delaware vs. U.S., Diagnosed 1981-2019



Source: Delaware Department of Health and Social Services, Division of Public Health 2020, CDC HIV Surveillance Report, 2018; Vol. 31.

Figure 15: Percentage of Persons Living with HIV, All Stages by Current Age, Delaware vs. U.S., Diagnosed 1981-2019



Source: Delaware Department of Health and Social Services, Division of Public Health 2020, CDC HIV Surveillance Report, 2018; Vol. 31.

Living with HIV - All Stages in Delaware, Diagnosed 1981-2019

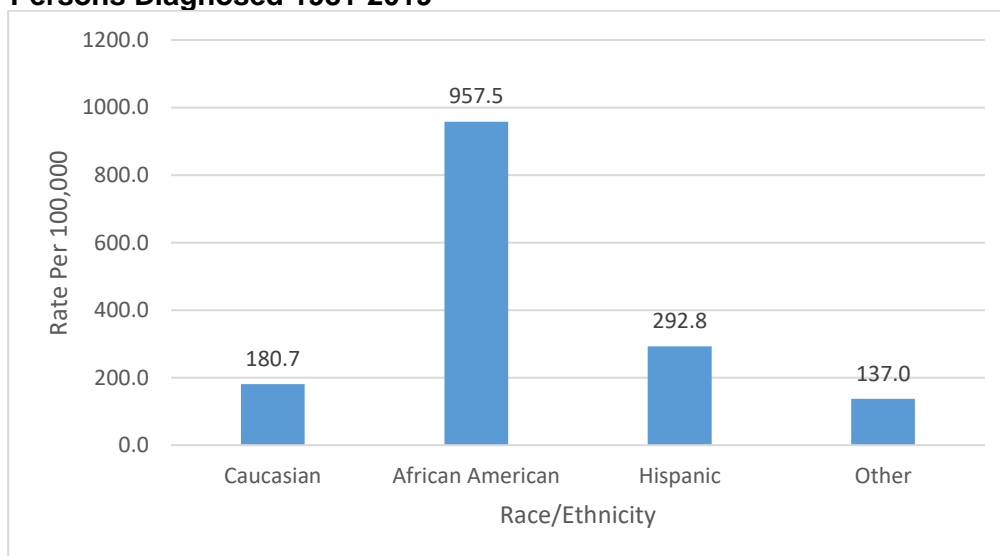
Among those living with HIV in Delaware, the prevalence by race is highest among African Americans. Among African Americans in Delaware, the prevalence of HIV is highest among males. (Table 7 and Figures 16-18).

Table 7: Living with HIV - All Stages by Race/Ethnicity and Birth Sex, Delaware, Diagnosed 1981-2019

Race / Ethnicity	Caucasian	African American	Hispanic	Other	
All					Total
Living with HIV - All Stages 2019	1,088	2,034	272	89	3,483
Percentage within Category	31%	58%	8%	3%	100%
Rate Per 100,000	180.7	957.5	292.8	137.0	358.2
Male					Total
Living with HIV - All Stages 2019	908	1,290	195	68	2,461
Percentage within Category	37%	52%	8%	3%	100%
Rate Per 100,000	311.9	1282.1	398.0	223.1	522.2
Female					Total
Living with HIV - All Stages 2019	180	744	77	21	1,022
Percentage within Category	18%	73%	8%	2%	100%
Rate Per 100,000	57.9	665.4	175.4	60.9	204.0

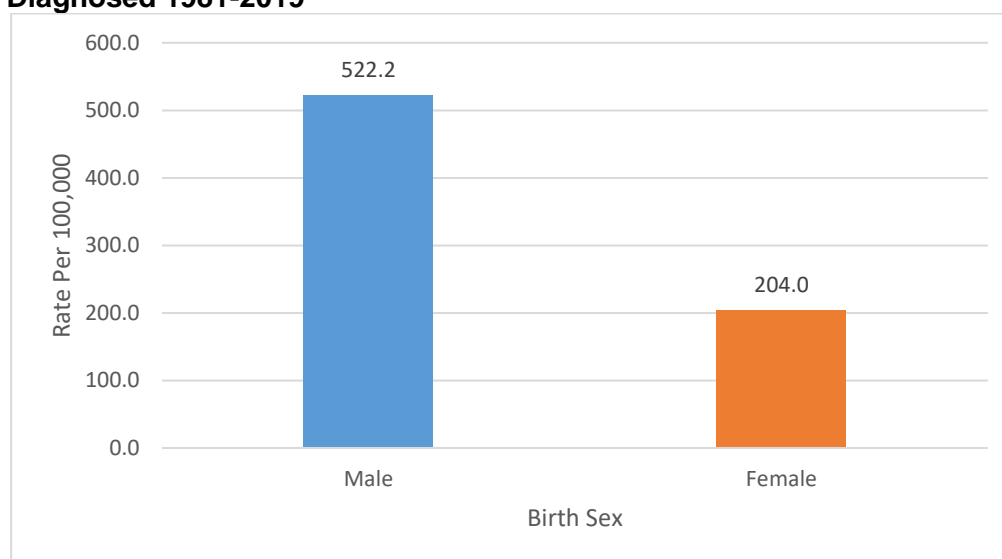
Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

Figure 16: Rate of HIV Prevalence, All Stages by Race/Ethnicity, Delaware, Persons Diagnosed 1981-2019



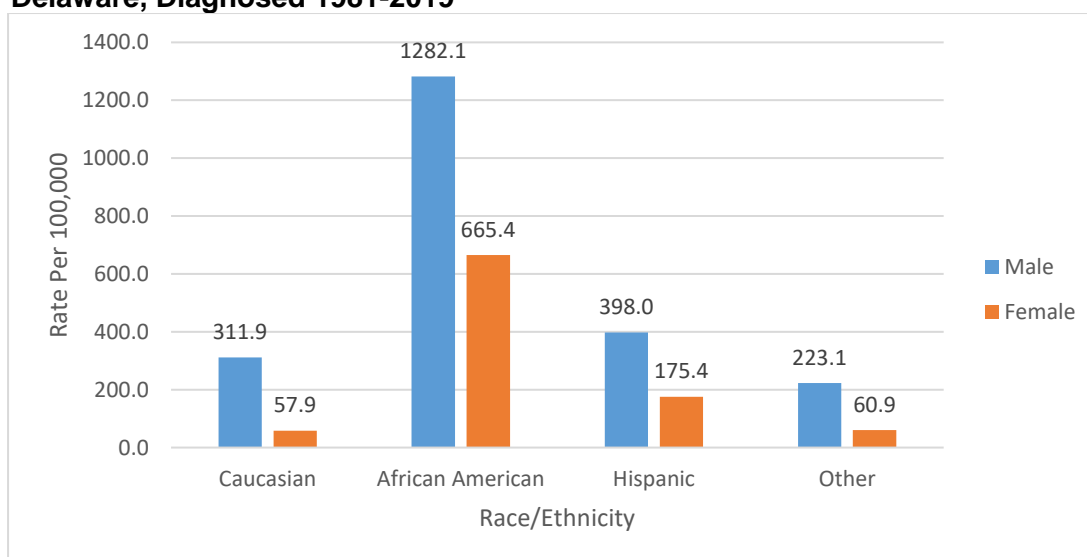
Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

Figure 17: Rate of HIV Prevalence, All Stages by Birth Sex, Delaware, Diagnosed 1981-2019



Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

Figure 18: Rate of HIV Prevalence, All Stages by Birth Sex and Race/Ethnicity, Delaware, Diagnosed 1981-2019



Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

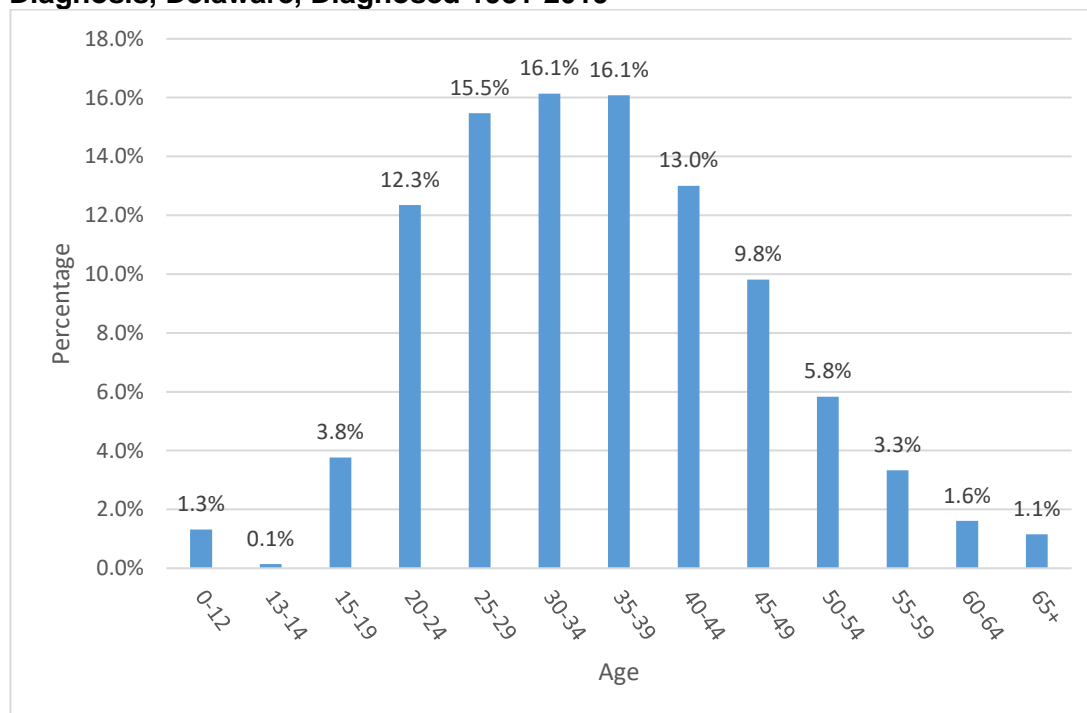
Most Delawareans with HIV are diagnosed between the ages of 25-39 (48%) (Table 8 and Figure 19).

Table 8: Living with HIV - All Stages by Age at HIV Disease Diagnosis, Delaware, Diagnosed 1981-2019

Age Group	#	%
0-12	46	1.3%
13-14	5	0.1%
15-19	131	3.8%
20-24	430	12.3%
25-29	539	15.5%
30-34	562	16.1%
35-39	560	16.1%
40-44	453	13.0%
45-49	342	9.8%
50-54	203	5.8%
55-59	116	3.3%
60-64	56	1.6%
65+	40	1.1%
Total	3,483	100.0%

Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

Figure 19: Percentage of Persons Living with HIV, All Stages by Age at Diagnosis, Delaware, Diagnosed 1981-2019



Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

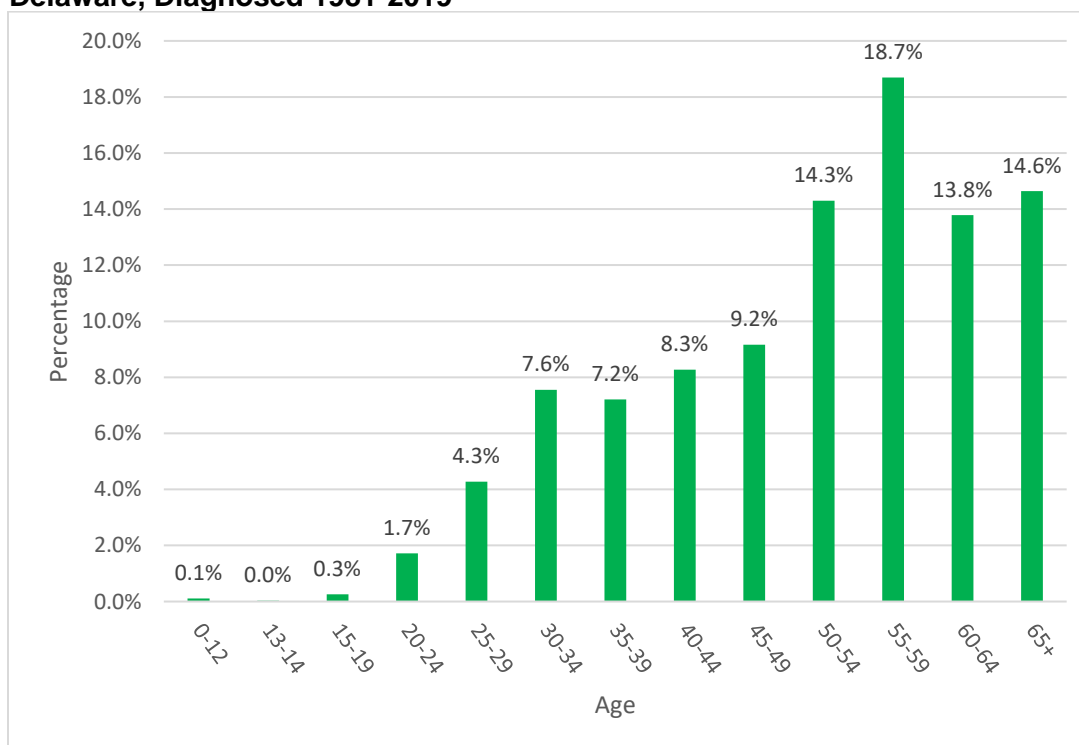
As of December 2019, 71% of persons living with HIV (PLWH) in Delaware were older than 45. Persons younger than 20 comprised less than 1% of this population (Table 9 and Figure 20).

Table 9: Living with HIV - All Stages by Current Age, Delaware, Diagnosed 1981-2019

Age Group	#	%
00-12	4	0.1%
13-14	1	0.0%
15-19	9	0.3%
20-24	60	1.7%
25-29	149	4.3%
30-34	263	7.6%
35-39	251	7.2%
40-44	288	8.3%
45-49	319	9.2%
50-54	498	14.3%
55-59	651	18.7%
60-64	480	13.8%
65+	510	14.6%
Total	3,483	100.0%

Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

Figure 20: Percentage of Persons Living with HIV, All Stages by Current Age, Delaware, Diagnosed 1981-2019



Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

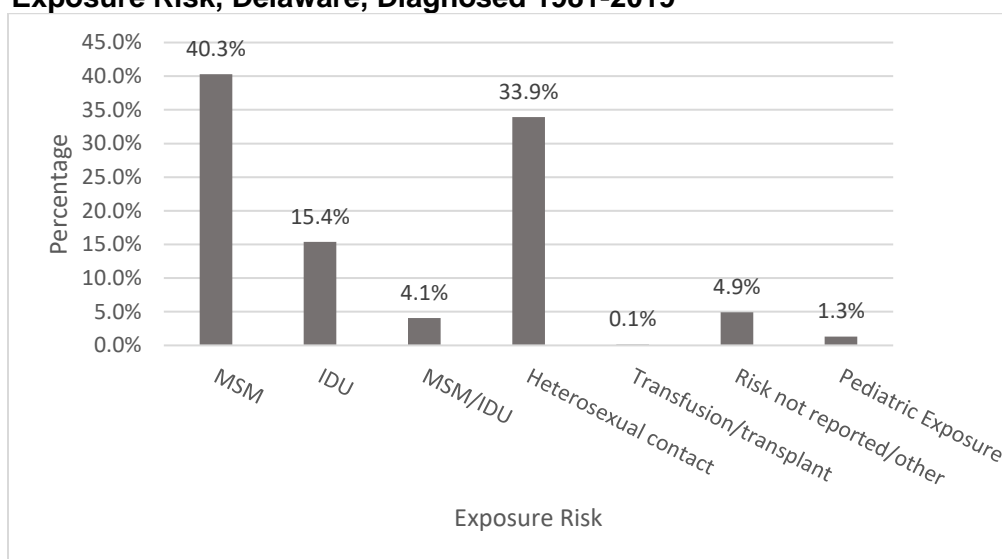
The leading risk factor among those living with HIV in Delaware is MSM (40%). The second highest risk factor is heterosexual contact (34%) and the third highest is IDU (15%). All other risk factors comprise approximately 11% (Table 10 and Figures 21-23).

Table 10: Living with HIV - All Stages by Exposure Category, Delaware, Diagnosed 1981-2019

	All		Male		Female	
	#	%	#	%	#	%
Men Who Have Sex with Men (MSM)	1404	40.3%	1404	57.0%	0	0.0%
Injection Drug User (IDU)	535	15.4%	324	13.2%	211	20.7%
MSM/IDU	142	4.1%	142	5.8%	0	0.0%
Heterosexual Contact	1181	33.9%	432	17.5%	749	73.3%
Transfusion/Transplant	4	0.1%	2	0.1%	2	0.2%
Risk not Reported/Other	171	4.9%	137	5.6%	34	3.3%
Pediatric Exposure	46	1.3%	20	0.8%	26	2.5%
Total	3483	100%	2,461	100%	1,022	100%

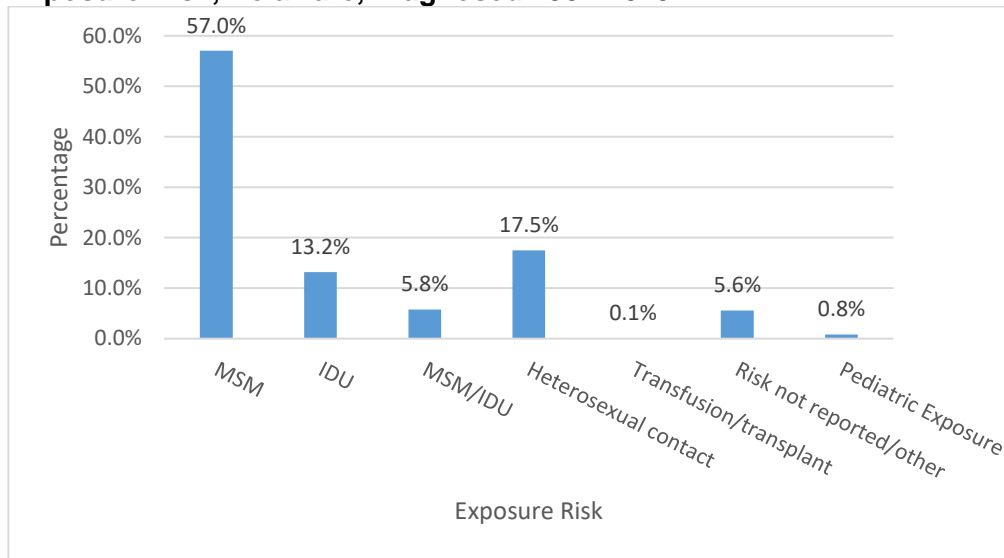
Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

Figure 21: Percentage of Persons Living with HIV, All Stages by Exposure Risk, Delaware, Diagnosed 1981-2019



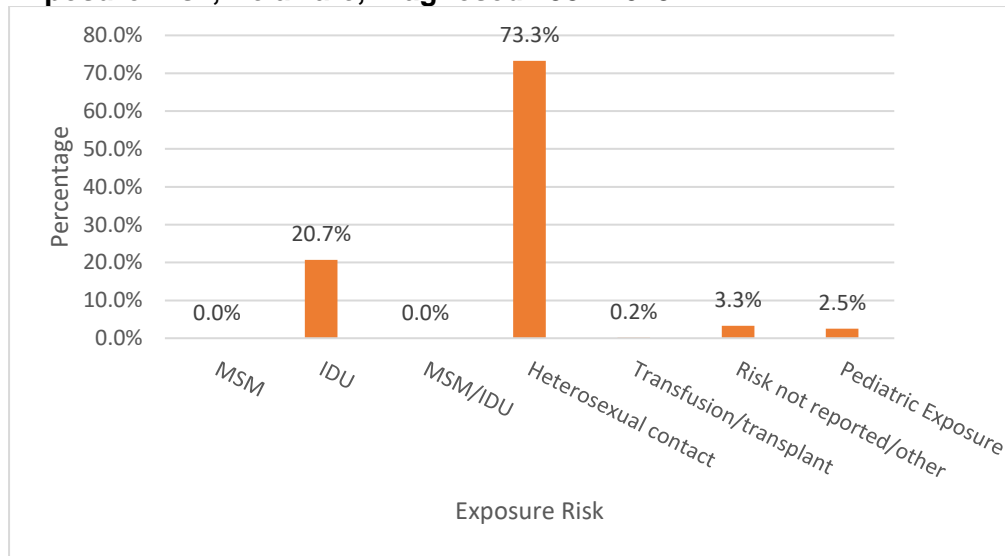
Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

Figure 22: Percentage of Males Living with HIV, All Stages by Exposure Risk, Delaware, Diagnosed 1981-2019



Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

Figure 23: Percentage of Females Living with HIV, All Stages by Exposure Risk, Delaware, Diagnosed 1981-2019



Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

Living with HIV – All Stages in New Castle County, Delaware, Diagnosed 1981-2019

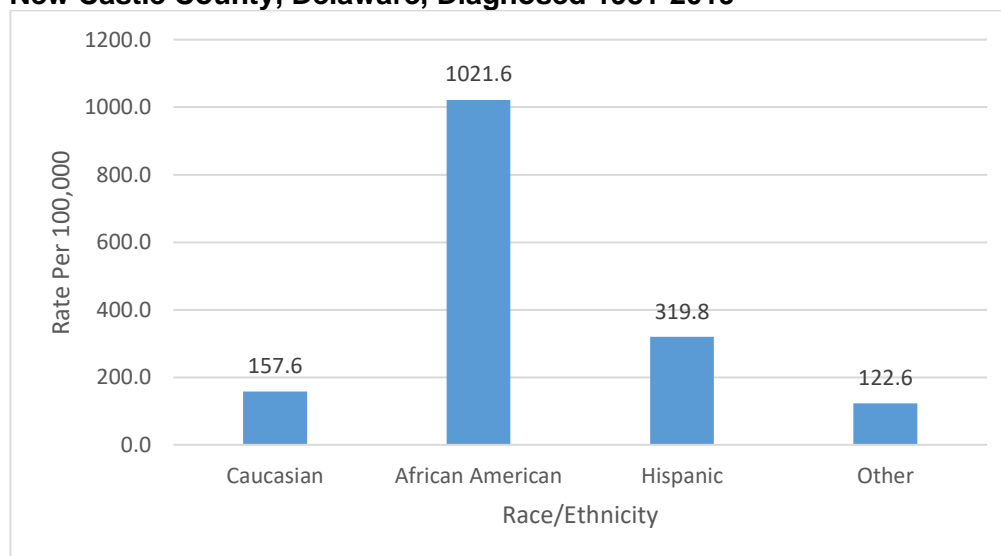
These numbers are very similar to the statewide statistics. In New Castle County, the prevalence of HIV by race is highest among African Americans; African American males also have the highest prevalence rate. Prevalence of HIV among all New Castle County males is approximately 51% higher than among all females (Table 11 and Figures 24-26).

Table 11: Living with HIV - All Stages by Race/Ethnicity and Sex, New Castle County, Delaware, Diagnosed 1981-2019

Race / Ethnicity	Caucasian	African American	Hispanic	Other	
All					Total
Living with HIV - All Stages 2019	503	1,460	186	52	2,201
Percentage within Category	23%	66%	8%	2%	100%
Rate Per 100,000	157.6	1021.6	319.8	122.6	391.2
Male					Total
Living with HIV - All Stages 2019	398	919	131	34	1482
Percentage within Category	27%	62%	9%	2%	100%
Rate Per 100,000	257.6	1360.7	424.5	166.8	542.3
Female					Total
Living with HIV - All Stages 2019	105	541	55	18	719
Percentage within Category	15%	75%	8%	3%	100%
Rate Per 100,000	63.7	717.8	201.5	81.7	248.4

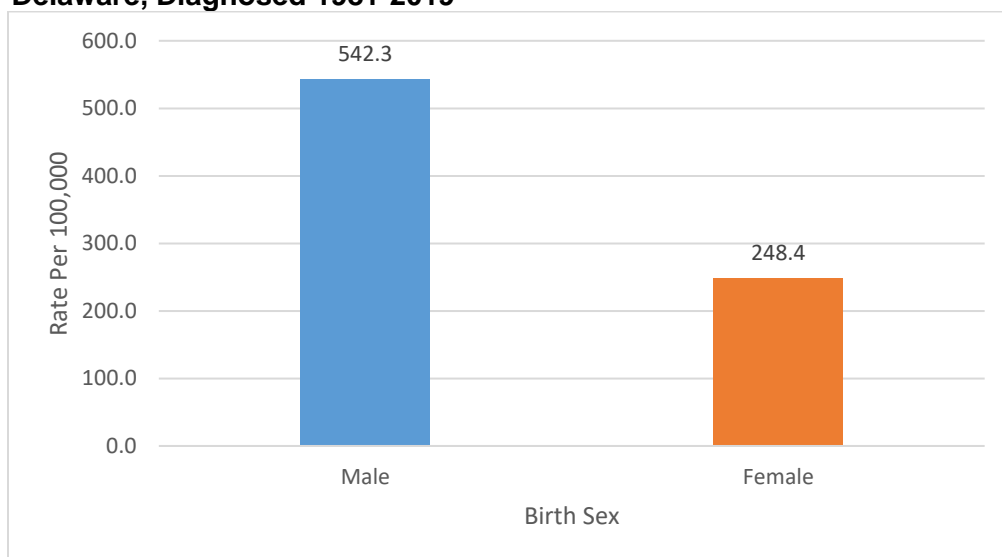
Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

Figure 24: Rate of HIV Prevalence, All Stages by Race/Ethnicity, New Castle County, Delaware, Diagnosed 1981-2019



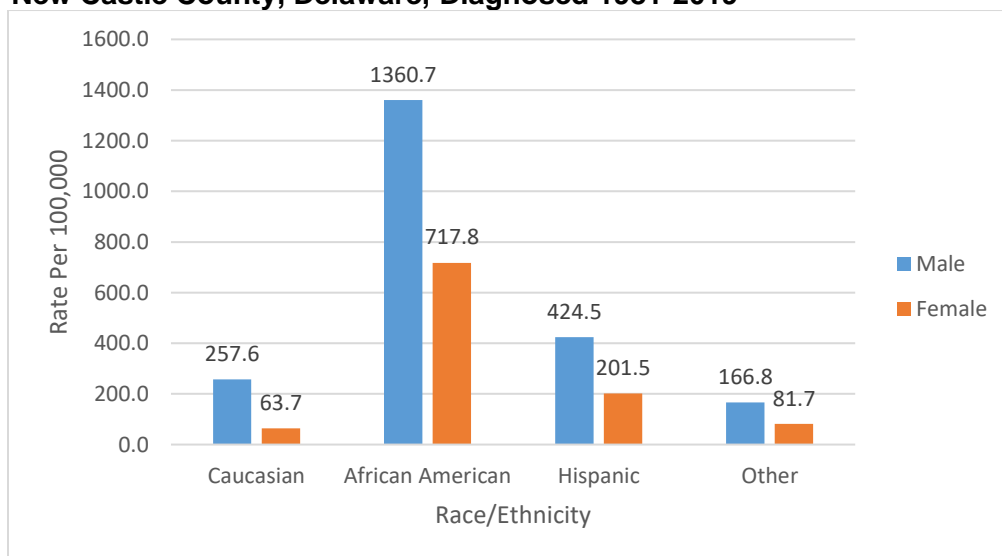
Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

Figure 25: Rate of HIV Prevalence, All Stages by Birth Sex, New Castle County, Delaware, Diagnosed 1981-2019



Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

Figure 26: Rate of HIV Prevalence, All Stages by Birth Sex and Race/Ethnicity, New Castle County, Delaware, Diagnosed 1981-2019



Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

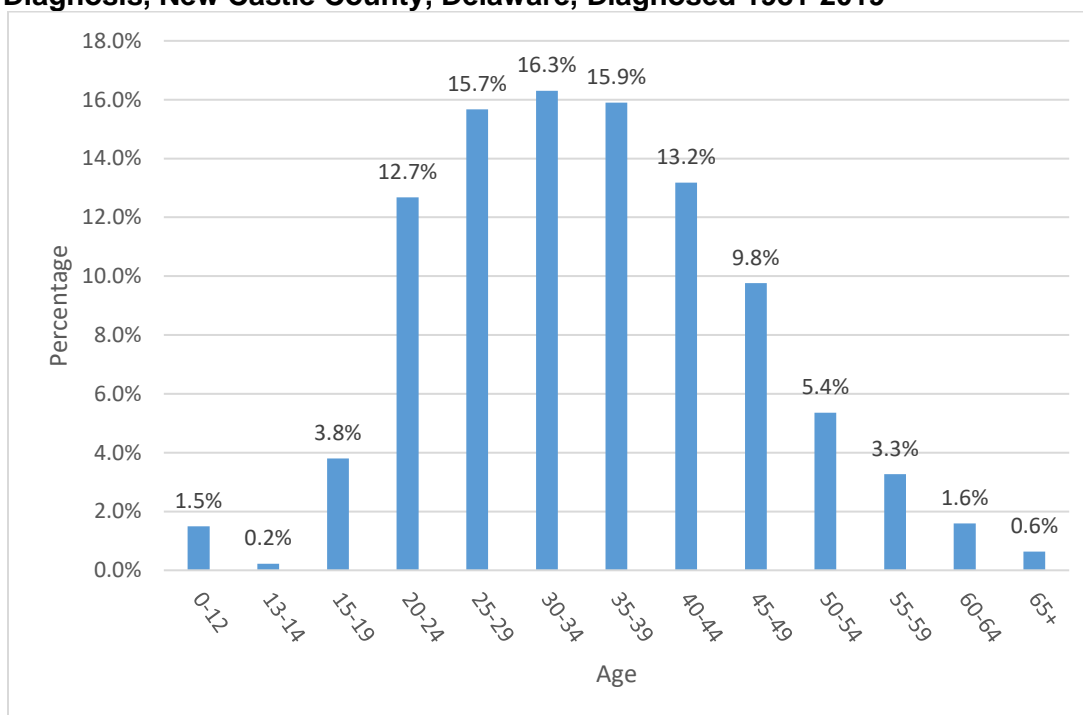
By age in New Castle County, persons diagnosed with HIV between the ages of 25-39 make up 48% of county residents living with HIV (Table 12 and Figure 27).

Table 12: Living with HIV - All Stages by Age at HIV Diagnosis, New Castle County, Delaware, Diagnosed 1981-2019

Age Group	#	%
00-12	33	1.5%
13-14	5	0.2%
15-19	85	3.8%
20-24	279	12.7%
25-29	345	15.7%
30-34	360	16.3%
35-39	350	15.9%
40-44	290	13.2%
45-49	215	9.8%
50-54	118	5.4%
55-59	72	3.3%
60-64	35	1.6%
65+	14	0.6%
Total	2201	100.0%

Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

Figure 27: Percentage of Persons Living with HIV, All Stages by Age at Diagnosis, New Castle County, Delaware, Diagnosed 1981-2019



Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

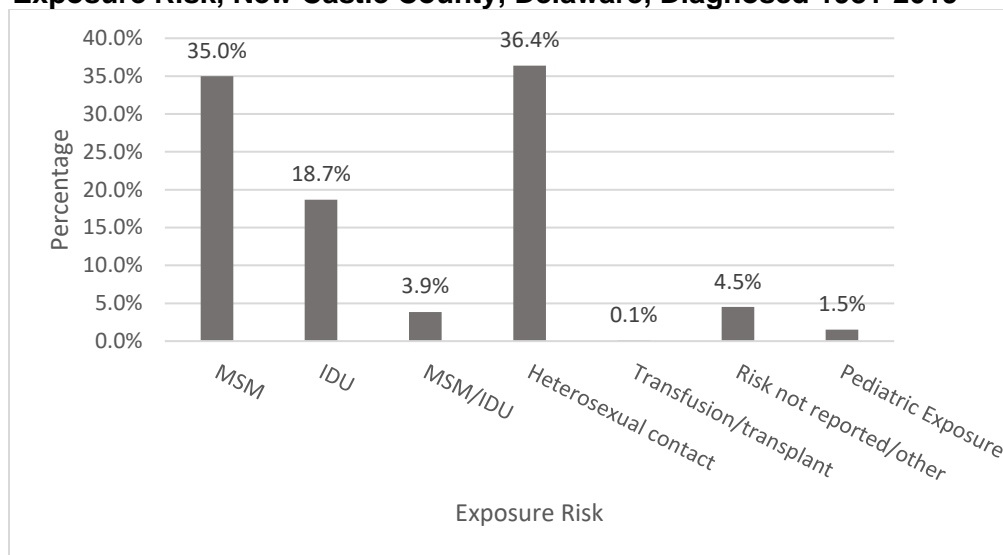
In New Castle County, the leading HIV exposure mode is heterosexual contact (37%), compared to MSM (35%) and IDU (19%). All other exposure modes make up approximately 11% (Table 13 and Figures 28-30).

Table 13: Living with HIV - All Stages by Exposure Risk, New Castle County, Delaware, Diagnosed 1981-2019

	All		Male		Female	
	#	%	#	%	#	%
Men Who Have Sex with Men (MSM)	770	35.0%	770	51.9%	0	0.0%
Injection Drug User (IDU)	411	18.7%	246	16.6%	165	22.9%
MSM/IDU	85	3.9%	85	5.7%	0	0.0%
Heterosexual Contact	801	36.4%	287	19.4%	514	71.5%
Transfusion/Transplant	2	0.1%	1	0.1%	1	0.1%
Risk not Reported/Other	99	4.5%	81	5.5%	18	2.5%
Pediatric Exposure	33	1.5%	12	0.8%	21	2.9%
Total	2,201	100%	1,482	100%	719	100%

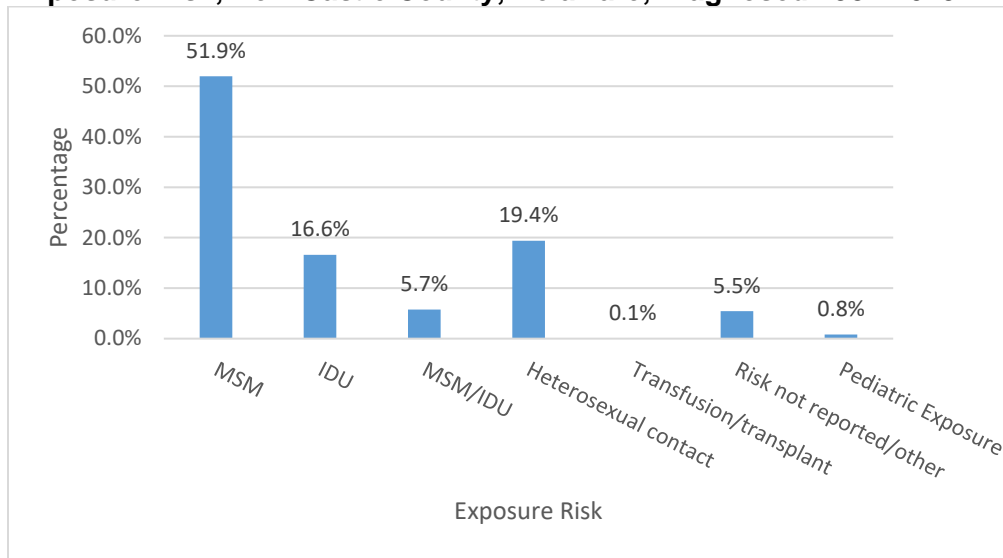
Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

Figure 28: Percentage of Persons Living with HIV, All Stages by Exposure Risk, New Castle County, Delaware, Diagnosed 1981-2019



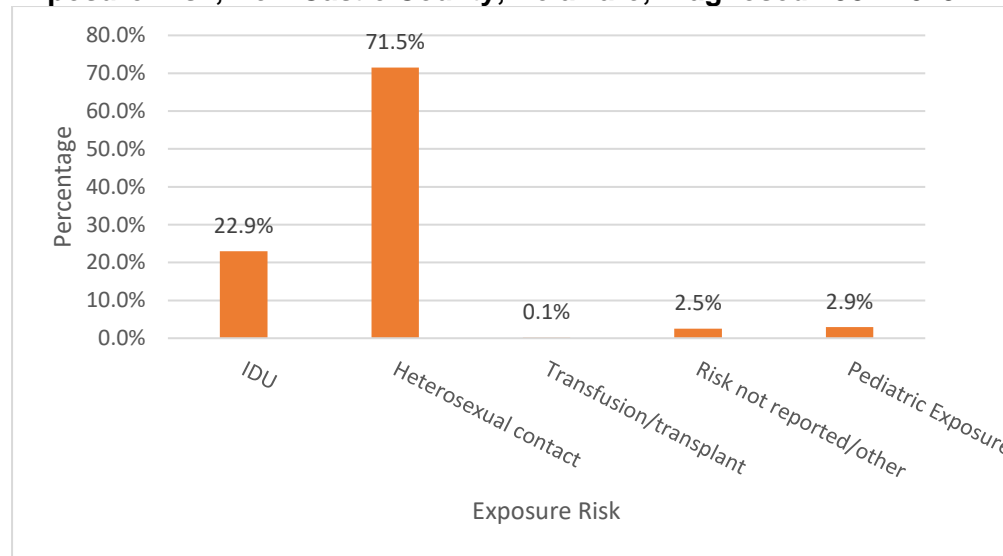
Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

Figure 29: Percentage of Males Living with HIV, All Stages by Exposure Risk, New Castle County, Delaware, Diagnosed 1981-2019



Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

Figure 30: Percentage of Females Living with HIV, All Stages by Exposure Risk, New Castle County, Delaware, Diagnosed 1981-2019



Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

Living with HIV – All Stages in Kent County, Delaware, Diagnosed 1981-2019

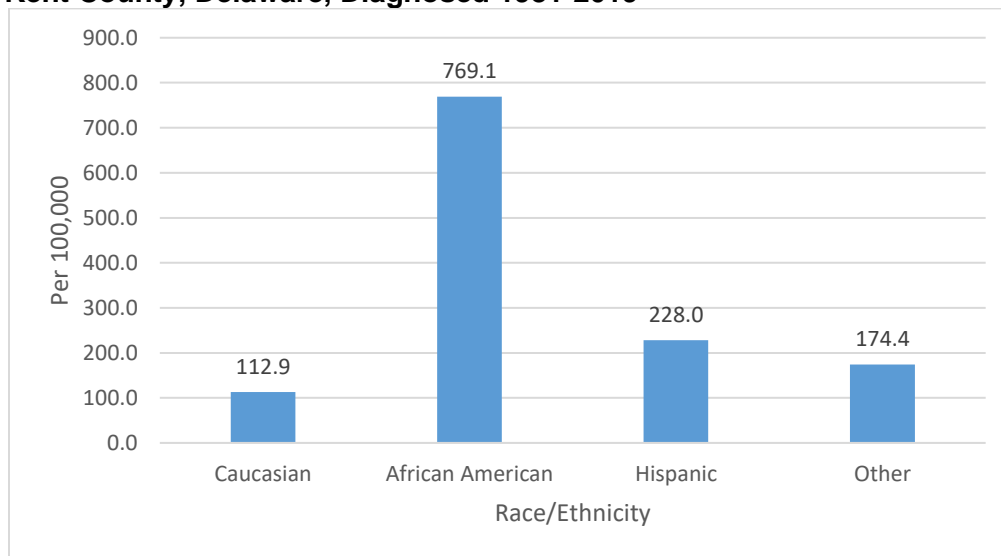
In Kent County, HIV prevalence is highest among African Americans, especially among African American males. Among African Americans in Kent County, HIV prevalence among males is approximately 51% higher than among females (Table 14 and Figures 31-33).

Table 14: Living with HIV - All Stages by Race/Ethnicity, Kent County, Delaware, Diagnosed 1981-2019

Race / Ethnicity	Caucasian	African American	Hispanic	Other	
All					Total
Living with HIV - All Stages 2019	126	327	27	21	501
Percentage within Category	25%	65%	6%	4%	100%
Rate Per 100,000	112.9	769.1	228.0	174.4	281.4
Male					Total
Living with HIV - All Stages 2019	97	200	20	19	336
Percentage within Category	29%	59%	6%	6%	100%
Rate Per 100,000	179.1	999.9	342.2	364.5	394.3
Female					Total
Living with HIV - All Stages 2019	29	127	7	2	165
Percentage within Category	18%	77%	4%	1%	100%
Rate Per 100,000	50.5	564.1	116.7	29.3	177.8

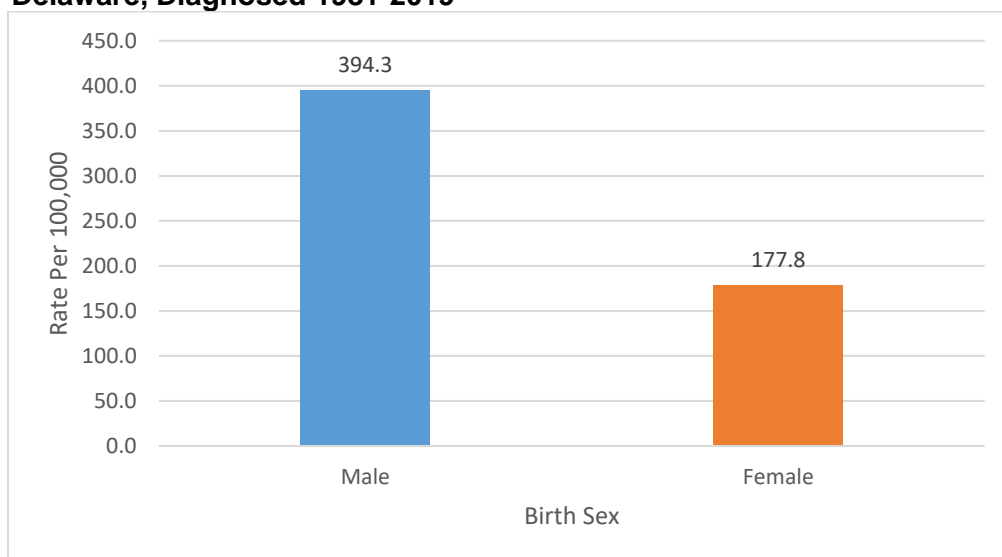
Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

Figure 31: Rate of HIV Prevalence, All Stages by Race/Ethnicity, Kent County, Delaware, Diagnosed 1981-2019



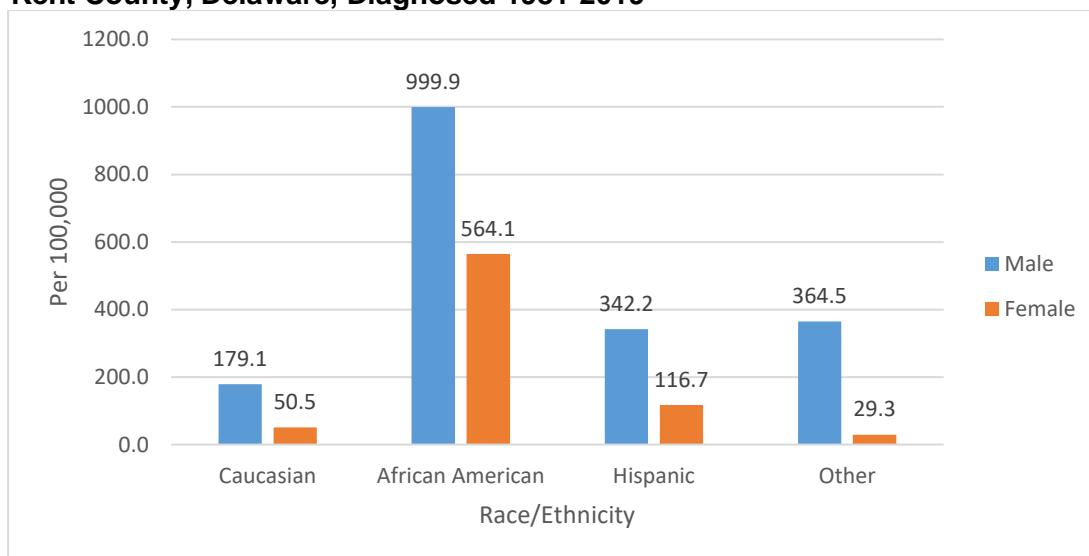
Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

Figure 32: Rate of HIV Prevalence, All Stages by Birth Sex, Kent County, Delaware, Diagnosed 1981-2019



Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

Figure 33: Rate of HIV Prevalence, All Stages by Birth Sex and Race/Ethnicity, Kent County, Delaware, Diagnosed 1981-2019



Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

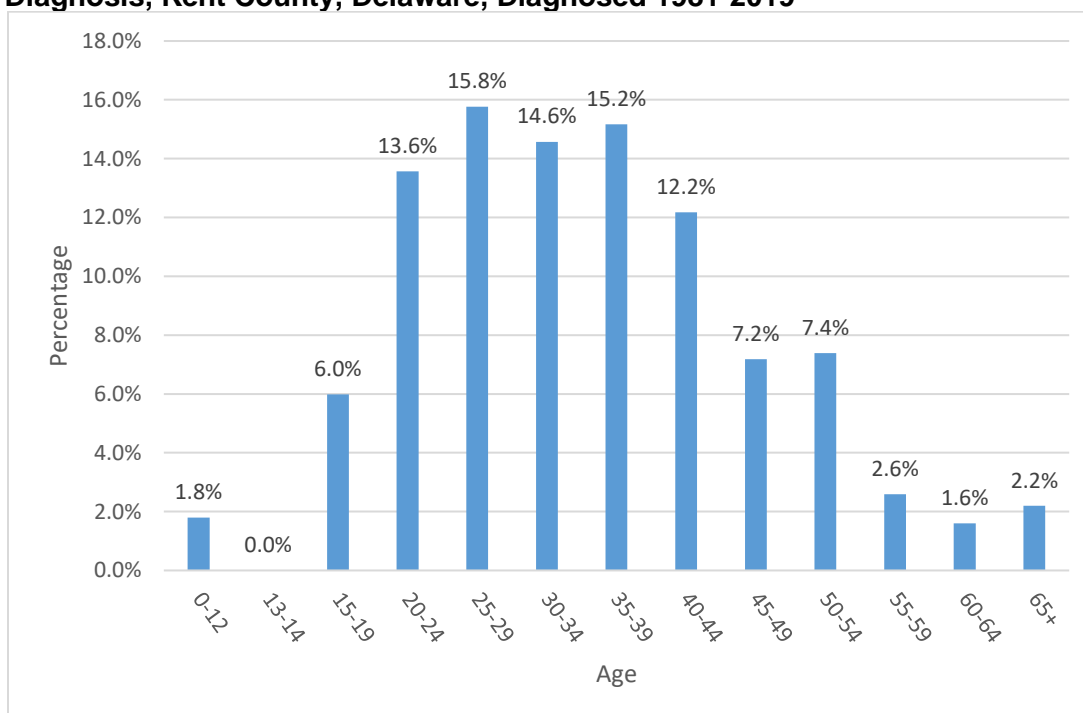
By age in Kent County, persons between the ages of 25 and 39 who were diagnosed with HIV make up 46% of all cases (Table 15 and Figure 34).

Table 15: Living with HIV - All Stages by Age at HIV Diagnosis, Kent County, Delaware, Diagnosed 1981-2019

Age Group	#	%
00-12	9	1.8%
13-14	0	0.0%
15-19	30	6.0%
20-24	68	13.6%
25-29	79	15.8%
30-34	73	14.6%
35-39	76	15.2%
40-44	61	12.2%
45-49	36	7.2%
50-54	37	7.4%
55-59	13	2.6%
60-64	8	1.6%
65+	11	2.2%
Total	501	100.0%

Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

Figure 34: Percentage of Persons Living with HIV, All Stages by Age at Diagnosis, Kent County, Delaware, Diagnosed 1981-2019



Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

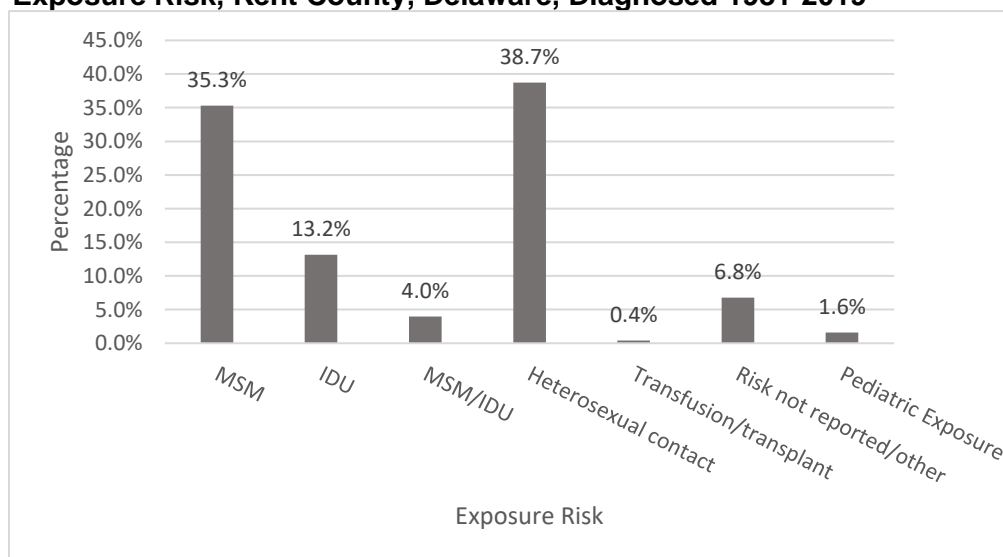
The leading exposure risk category in Kent County is heterosexual contact (37%), followed by MSM (35%) and IDU (13%). All other risk categories make up approximately 15% (Table 16 and Figures 35-37).

Table 16: Living with HIV - All Stages by Exposure Risk, Kent County, Delaware, Diagnosed 1981-2019

	All		Male		Female	
	#	%	#	%	#	%
Men Who Have Sex with Men (MSM)	177	35.3%	177	52.7%	0	0.0%
Injection Drug User (IDU)	66	13.2%	43	12.8%	23	13.9%
MSM/IDU	20	4.0%	20	6.0%	0	0.0%
Heterosexual Contact	194	38.7%	67	19.9%	127	77.0%
Transfusion/Transplant	2	0.4%	1	0.3%	1	0.6%
Risk not Reported/Other	34	6.8%	24	7.1%	10	6.1%
Pediatric Exposure	8	1.6%	4	1.2%	4	2.4%
Total	501	100%	336	100%	165	100%

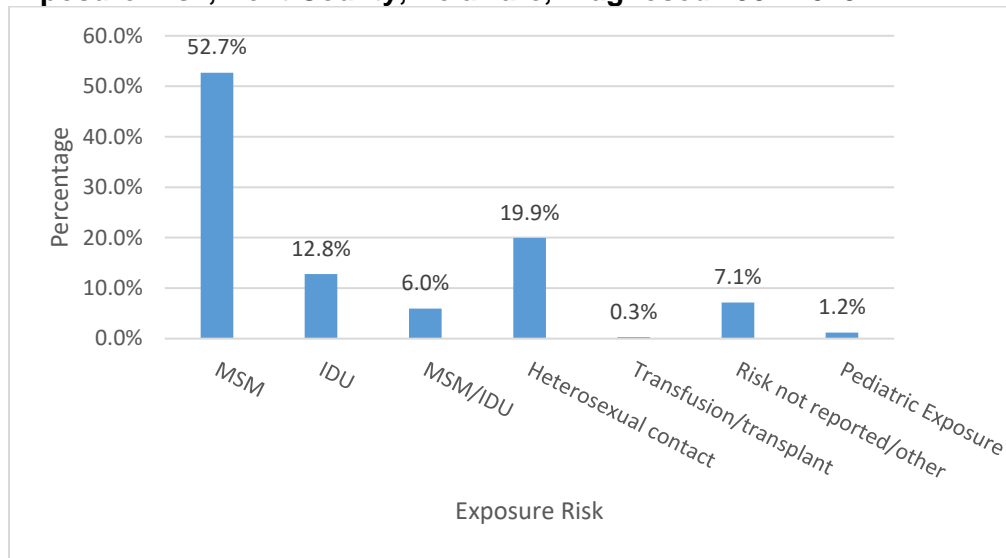
Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

Figure 35: Percentage of Persons Living with HIV, All Stages by Exposure Risk, Kent County, Delaware, Diagnosed 1981-2019



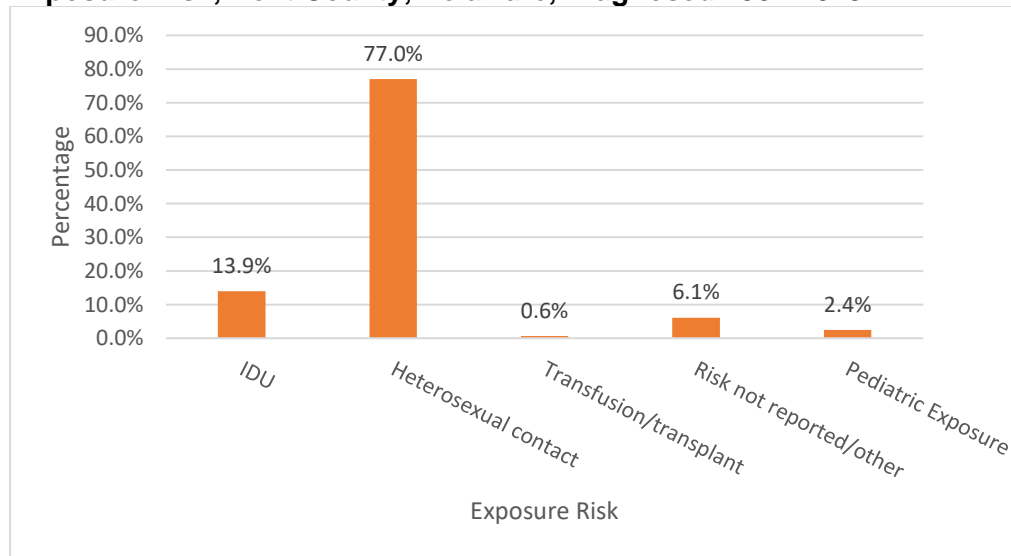
Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

Figure 36: Percentage of Males Living with HIV, All Stages by Exposure Risk, Kent County, Delaware, Diagnosed 1981-2019



Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

Figure 37: Percentage of Females Living with HIV, All Stages by Exposure Risk, Kent County, Delaware, Diagnosed 1981-2019



Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

Living with HIV – All Stages in Sussex County, Diagnosed 1981-2019

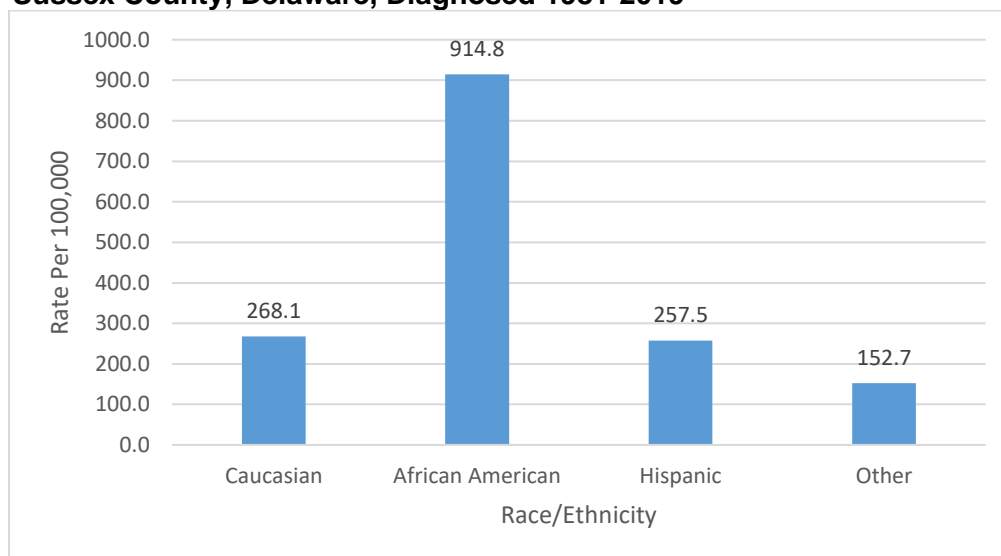
In Sussex County, the prevalence of HIV is highest among African Americans. Among African Americans in Sussex County, HIV prevalence is approximately 78% higher among males than among females (Table 17 and Figures 38-40).

Table 17: Living with HIV - All Stages by Race/Ethnicity, Sussex County, Delaware, Diagnosed 1981-2019

Race / Ethnicity	Caucasian	African American	Hispanic	Other	
All					Total
Living with HIV - All Stages 2019	459	247	59	16	781
Percentage within Category	59%	32%	7%	2%	100%
Rate Per 100,000	268.1	914.8	257.5	152.7	337.2
Male					Total
Living with HIV - All Stages 2019	413	171	44	15	643
Percentage within Category	64%	27%	7%	2%	100%
Rate Per 100,000	500.6	1307.8	357.9	307.4	570.3
Female					Total
Living with HIV - All Stages 2019	46	76	15	1	138
Percentage within Category	33%	55%	11%	1%	100%
Rate Per 100,000	51.8	545.8	141.3	17.9	116.1

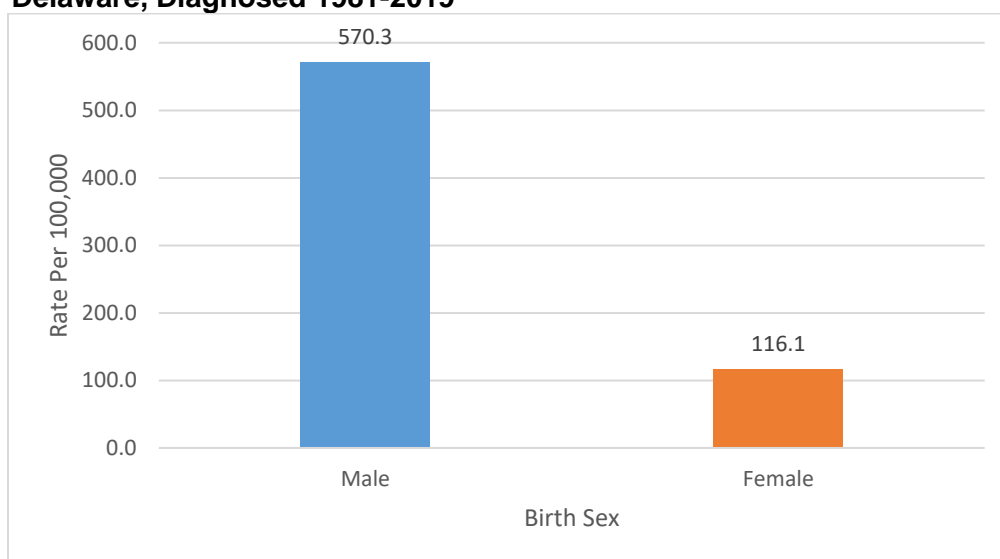
Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

Figure 38: Rate of HIV Prevalence, All Stages by Race/Ethnicity, Sussex County, Delaware, Diagnosed 1981-2019



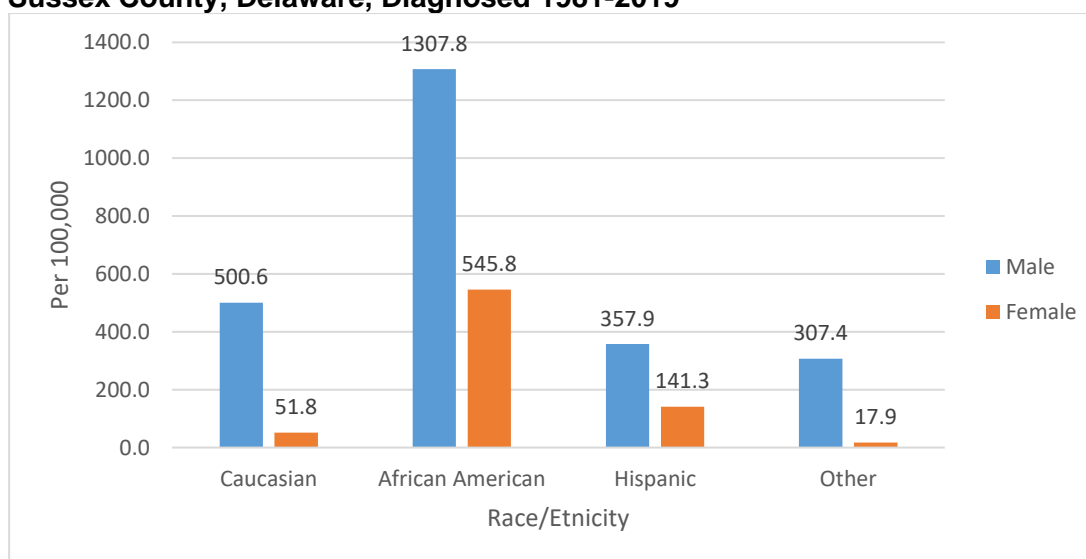
Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

Figure 39: Rate of HIV Prevalence, All Stages by Birth Sex, Sussex County, Delaware, Diagnosed 1981-2019



Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

Figure 40: Rate of HIV Prevalence, All Stages by Birth Sex and Race/Ethnicity, Sussex County, Delaware, Diagnosed 1981-2019



Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

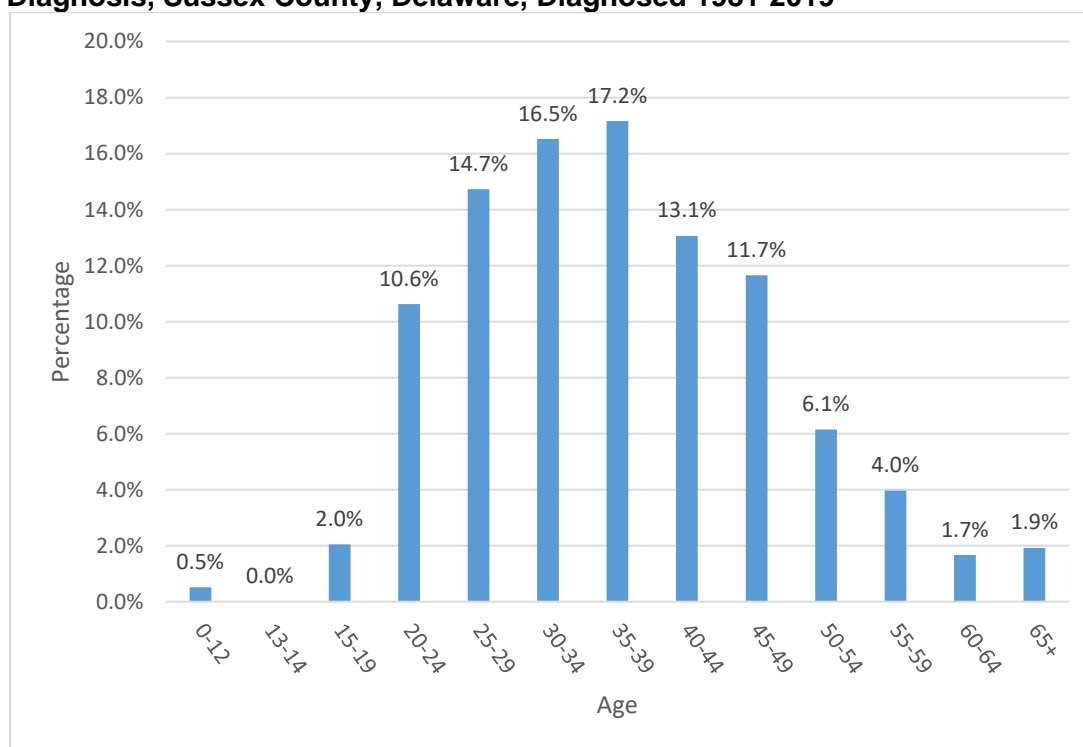
In Sussex County, persons between the ages of 25 and 39 diagnosed with HIV, make up 48% of all persons living with HIV in the county (Table 18 and Figure 41).

Table 18: Living with HIV - All Stages by Age at HIV Diagnosis, Sussex County, Delaware, Diagnosed 1981-2019

Age Group	#	%
00-12	4	0.5%
13-14	0	0.0%
15-19	16	2.0%
20-24	83	10.6%
25-29	115	14.7%
30-34	129	16.5%
35-39	134	17.2%
40-44	102	13.1%
45-49	91	11.7%
50-54	48	6.1%
55-59	31	4.0%
60-64	13	1.7%
65+	15	1.9%
Total	781	100.0%

Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

Figure 41: Percentage of Persons Living with HIV, All Stages by Age at Diagnosis, Sussex County, Delaware, Diagnosed 1981-2019



Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

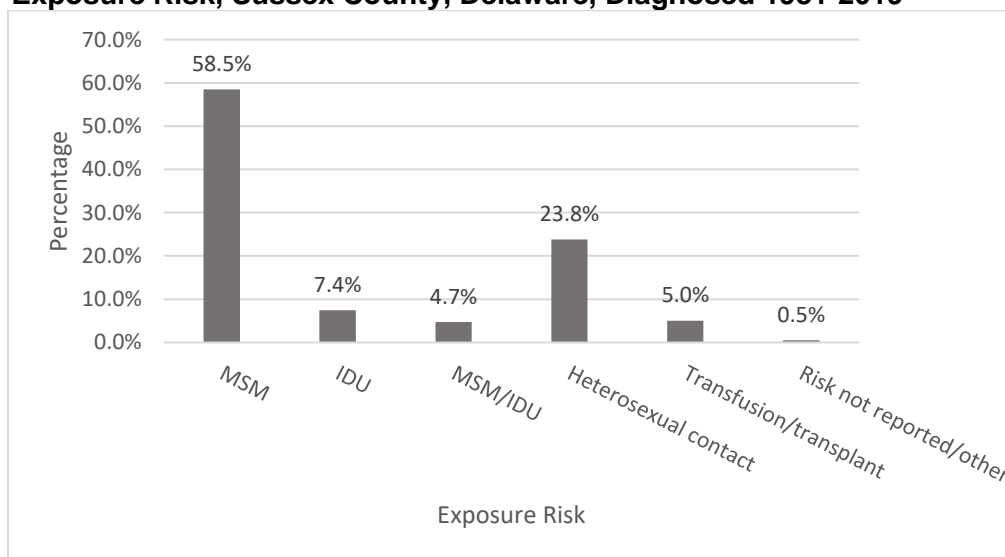
The leading risk category among Sussex Countians living with HIV is MSM (59%), followed by heterosexual contact (24%) and IDU (7%). All other risk categories make up approximately 10% (Table 19 and Figures 42-44).

Table 19: Living with HIV - All Stages by Exposure Risk, Sussex County, Delaware, Diagnosed 1981-2019

	All		Male		Female	
	#	%	#	%	#	%
Men Who Have Sex with Men (MSM)	457	58.5%	457	71.1%	0	0.0%
Injection Drug User (IDU)	58	7.4%	35	5.4%	23	16.7%
MSM/IDU	37	4.7%	37	5.8%	0	0.0%
Heterosexual Contact	186	23.8%	78	12.1%	108	78.3%
Risk not Reported/Other	39	5.0%	33	5.1%	6	4.3%
Pediatric Exposure	4	0.5%	3	0.5%	1	0.7%
Total	781	100%	643	100%	138	100%

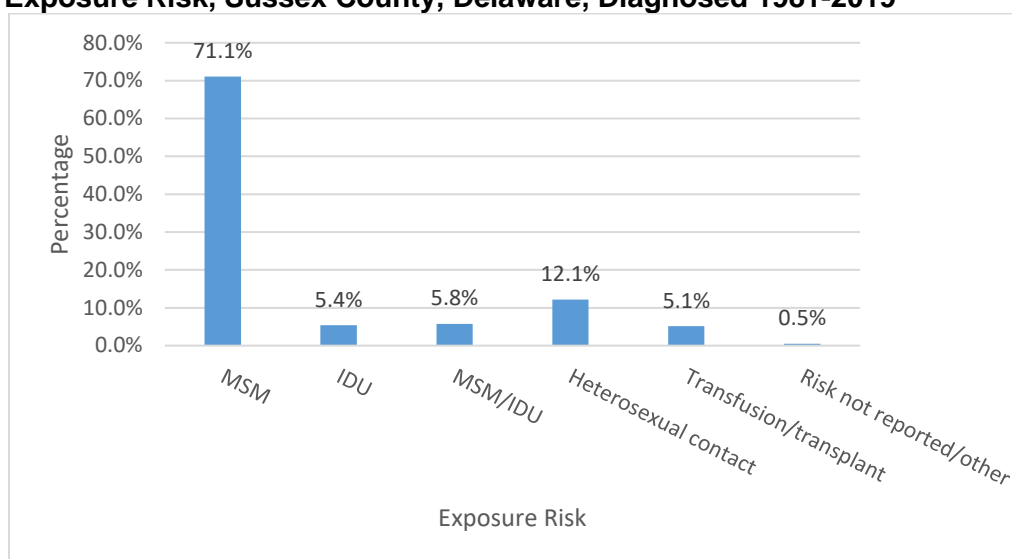
Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

Figure 42: Percentage of Persons Living with HIV, All Stages by Exposure Risk, Sussex County, Delaware, Diagnosed 1981-2019



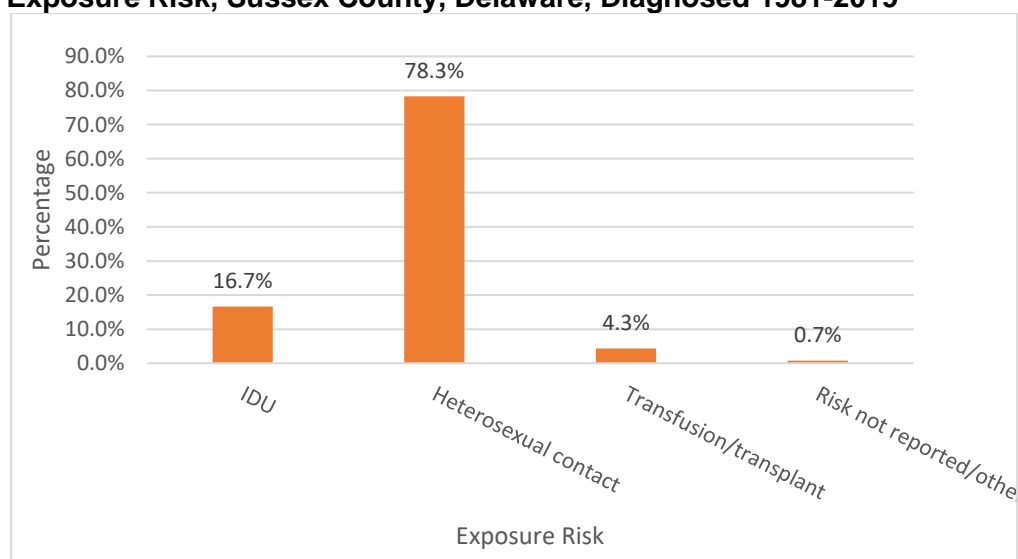
Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

Figure 43: Percentage of Males Living with HIV, All Stages by Exposure Risk, Sussex County, Delaware, Diagnosed 1981-2019



Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

Figure 44: Percentage of Females Living with HIV, All Stages by Exposure Risk, Sussex County, Delaware, Diagnosed 1981-2019



Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

Living with HIV – All Stages in the Wilmington Metropolitan Area, Delaware, Diagnosed Through 2019

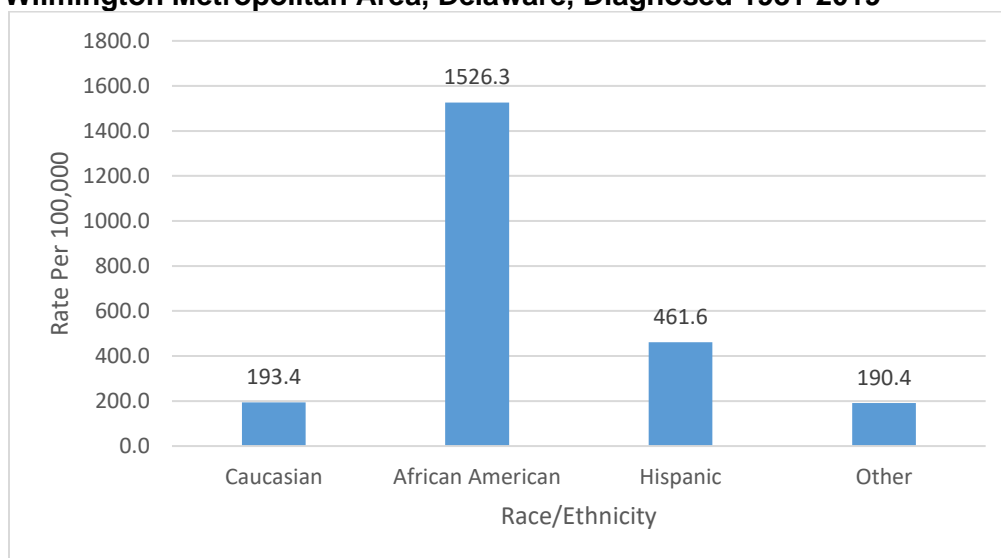
The 2018 American Community Survey was used for the latest population estimates within ZIP Codes 19801 to 19810, located in Delaware's Wilmington Metropolitan Area. The data does not break out persons by birth sex and race. HIV prevalence with the Wilmington Metropolitan Area was therefore calculated by locational stratification with a single sub-level (Tables 20-21 and Figures 45-46).

Table 20: Living with HIV, All Stages by Race/Ethnicity, Wilmington Metropolitan Area, Diagnosed 1981-2019 (19801-19810 ZIP Codes)

Race / Ethnicity	Caucasian	African American	Hispanic	Other	
All					Total
Living with HIV - All Stages 2019	245	861	105	26	1,237
Percentage within Category	19.8%	69.6%	8.5%	2.1%	100%
Rate Per 100,000	193.4	1526.3	461.6	190.4	563.6

Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

Figure 45: Rate of HIV Prevalence, All Stages by Race/Ethnicity, Wilmington Metropolitan Area, Delaware, Diagnosed 1981-2019



Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

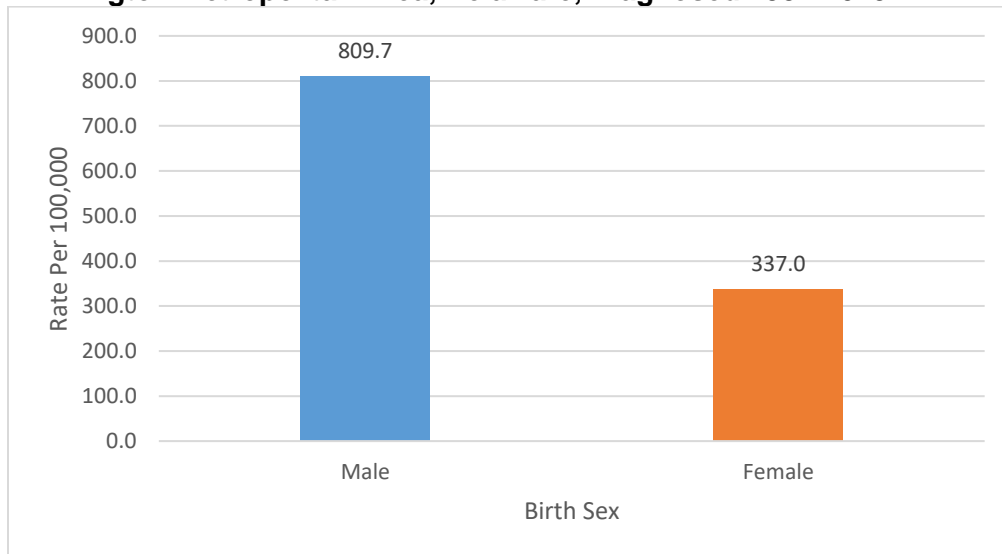
HIV prevalence among males in Wilmington is 55% higher than among females (Table 21 and Figure 46).

Table 21: Living with HIV - All Stages by Sex, Wilmington Metropolitan Area, Delaware, Diagnosed 1981-2019 (19801-19810 ZIP Codes)

	Male	Female	Total
Living with HIV - All Stages 2019	852	385	1,237
Prevalence Rate	809.7	337.0	563.6

Source: Delaware Department of Health and Social Services, Division of Public Health, 2020

Figure 46: Rate of HIV Prevalence, All Stages by Birth Sex, Wilmington Metropolitan Area, Delaware, Diagnosed 1981-2019



Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

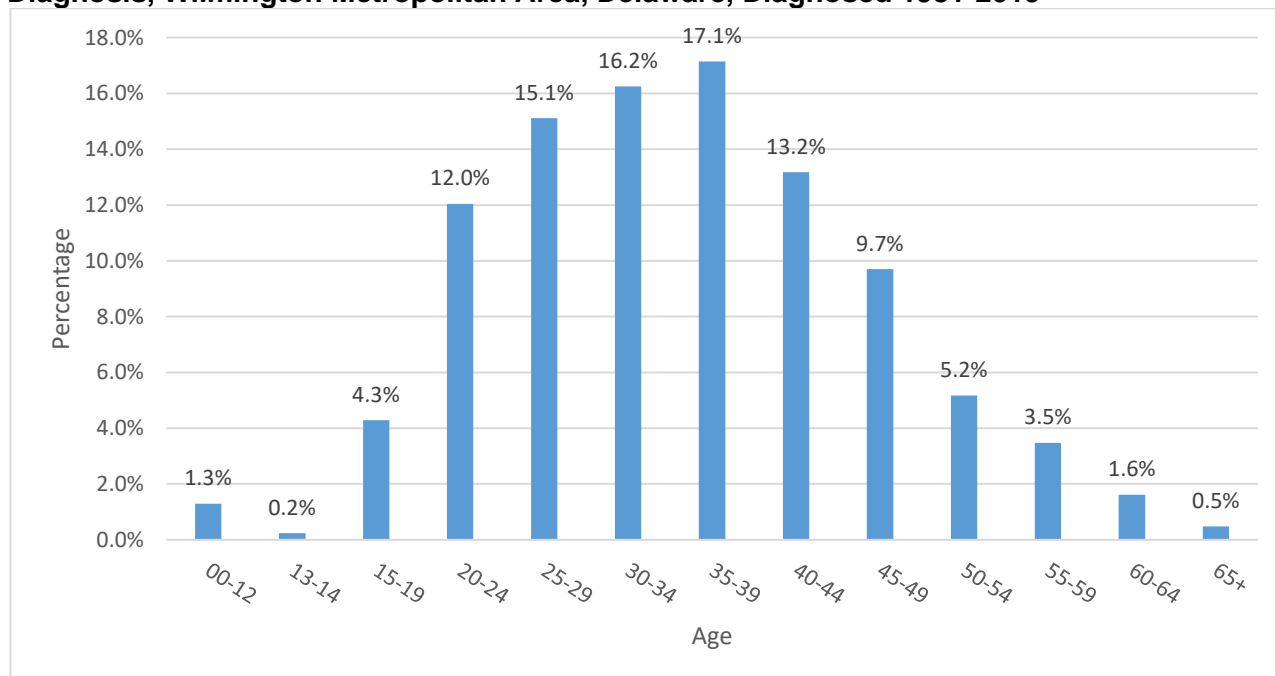
In the Wilmington Metropolitan Area, persons between the ages of 25 and 44 diagnosed with HIV, make up 62% of those living with HIV (Table 22 and Figure 47).

Table 22: Living with HIV - All Stages by Age at HIV Disease Diagnosis, Wilmington Metropolitan Area, Delaware, Diagnosed 1981-2019 (19801-19810 ZIP Codes)

Age Group	#	%
00-12	16	1.3%
13-14	3	0.2%
15-19	53	4.3%
20-24	149	12.0%
25-29	187	15.1%
30-34	201	16.2%
35-39	212	17.1%
40-44	163	13.2%
45-49	120	9.7%
50-54	64	5.2%
55-59	43	3.5%
60-64	20	1.6%
65+	6	0.5%
Total	1,237	100.0%

Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

Figure 47: Percentage of Persons Living with HIV, All Stages by Age at Diagnosis, Wilmington Metropolitan Area, Delaware, Diagnosed 1981-2019



Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

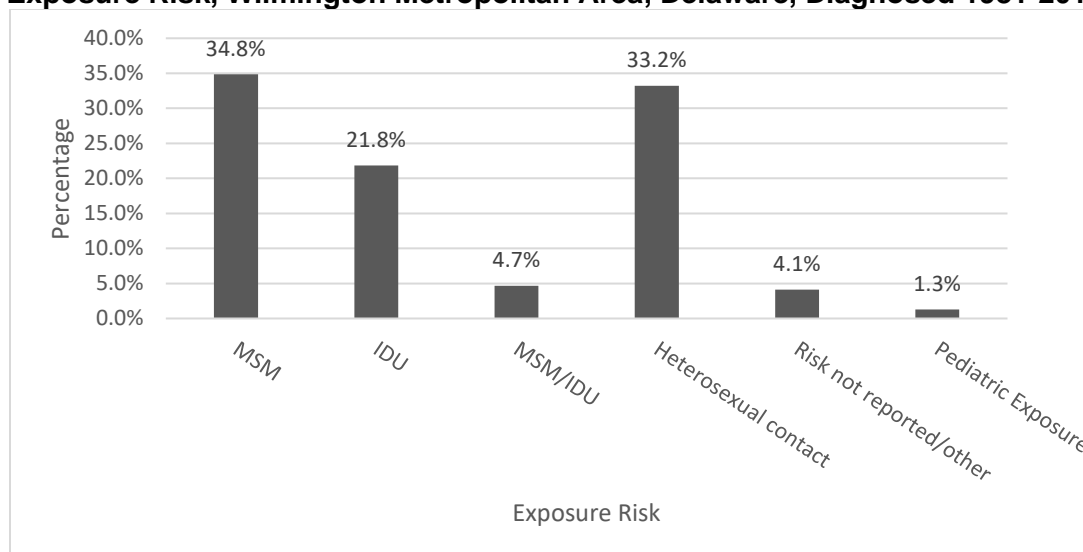
In the Wilmington Metropolitan Area, the leading risk categories is MSM contact (35%) contact and heterosexual contact (33%). IDU is the third highest risk category at 22%. All other exposure modes make up approximately 10% (Table 23 and Figures 48-50).

Table 23: Living with HIV - All Stages by Exposure Risk, Wilmington Metropolitan Area, Delaware, Diagnosed 1981-2019 (19801-19810 ZIP Codes)

	All		Male		Female	
	#	%	#	%	#	%
Men Who Have Sex with Men (MSM)	431	34.8%	431	50.6%	0	0.0%
Injection Drug User (IDU)	270	21.8%	160	18.8%	110	28.6%
MSM/IDU	58	4.7%	58	6.8%	0	0.0%
Heterosexual Contact	411	33.2%	153	18.0%	258	67.0%
Transfusion/Transplant Recipient	0	0.0%	0	0.0%	0	0.0%
Risk not Reported/Other	51	4.1%	43	5.0%	8	2.1%
Pediatric Exposure	16	1.3%	7	0.8%	9	2.3%
Total	1,237	100.0%	852	100%	385	100%

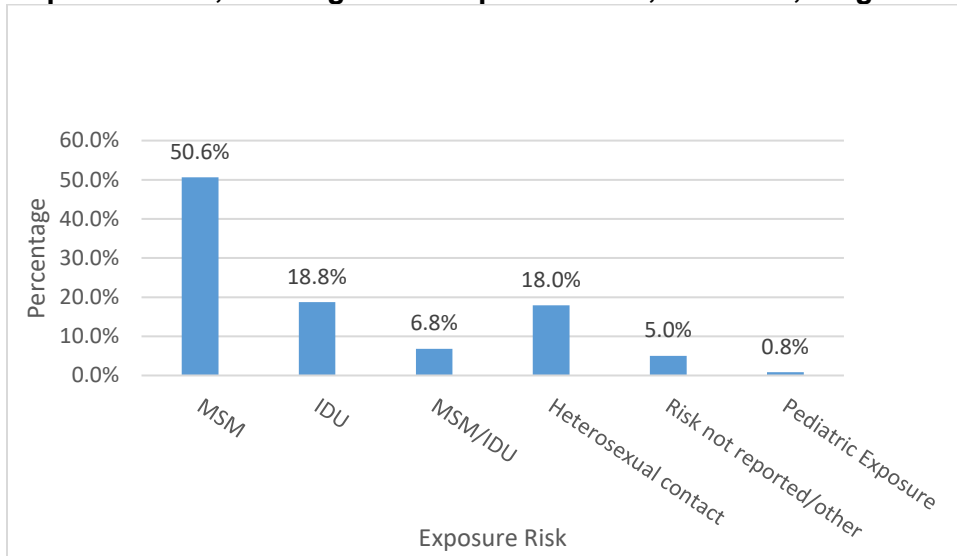
Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

Figure 48: Percentage of Persons Living with HIV, All Stages by Exposure Risk, Wilmington Metropolitan Area, Delaware, Diagnosed 1981-2019



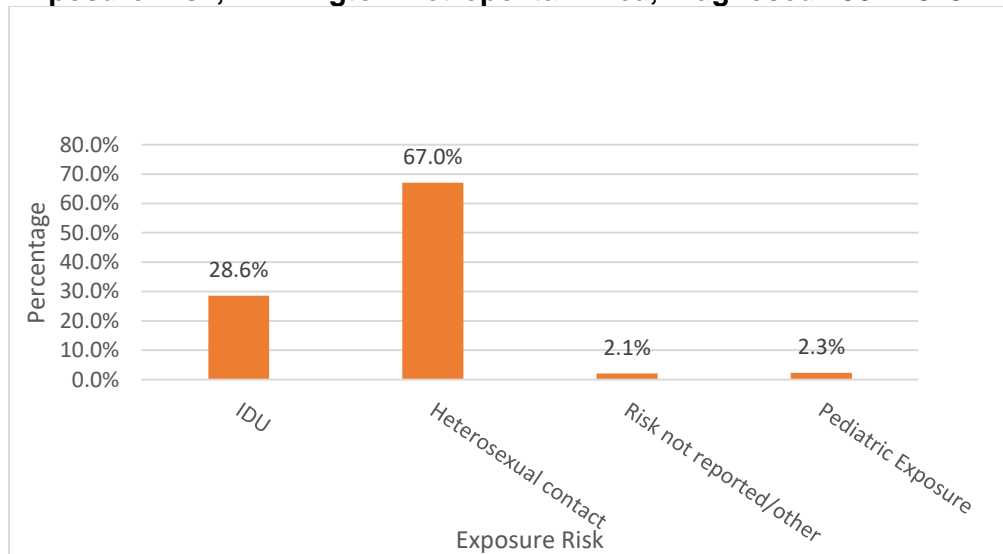
Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

Figure 49: Percentage of Males Living with HIV, All Stages by Exposure Risk, Wilmington Metropolitan Area, Delaware, Diagnosed 1981-2019



Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

Figure 50: Percentage of Females Living with HIV, All Stages by Exposure Risk, Wilmington Metropolitan Area, Diagnosed 1981-2019



Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

Living with Stage 3 HIV (AIDS)

Note: Stage 3 HIV (AIDS) is the documentation of an “AIDS-defining” condition or an immunologic determination made in accordance with Table 1, found on page 4.

Living with Stage 3 HIV (AIDS) in Delaware, Diagnosed 1981-2019

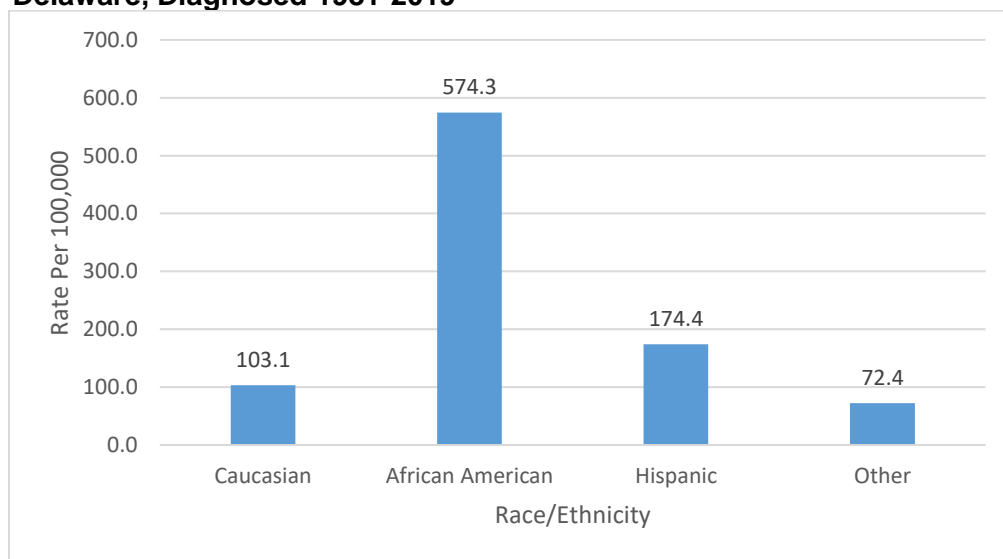
The prevalence of stage 3 HIV (AIDS) by race is highest among African Americans. Prevalence of stage 3 HIV (AIDS) is 58% higher among males than among females (Table 24 and Figures 51-53).

Table 24: Living with Stage 3 HIV (AIDS) by Race/Ethnicity, Delaware, Diagnosed 1981-2019

Race / Ethnicity	Whites	African American	Hispanic	Other	
All					Total
Living with Stage 3 HIV (AIDS) 2019	621	1220	162	47	2050
Percentage within Category	30%	60%	8%	2%	100%
Rate Per 100,000	103.1	574.3	174.4	72.4	210.8
Male					Total
Living with Stage 3 HIV (AIDS) 2019	525	771	113	33	1442
Percentage within Category	36%	54%	8%	2%	100%
Rate Per 100,000	180.3	766.3	230.6	108.3	306.0
Female					Total
Living with Stage 3 HIV (AIDS) 2019	96	449	49	14	608
Percentage within Category	16%	74%	8%	2%	100%
Rate Per 100,000	30.9	401.6	111.6	40.6	121.3

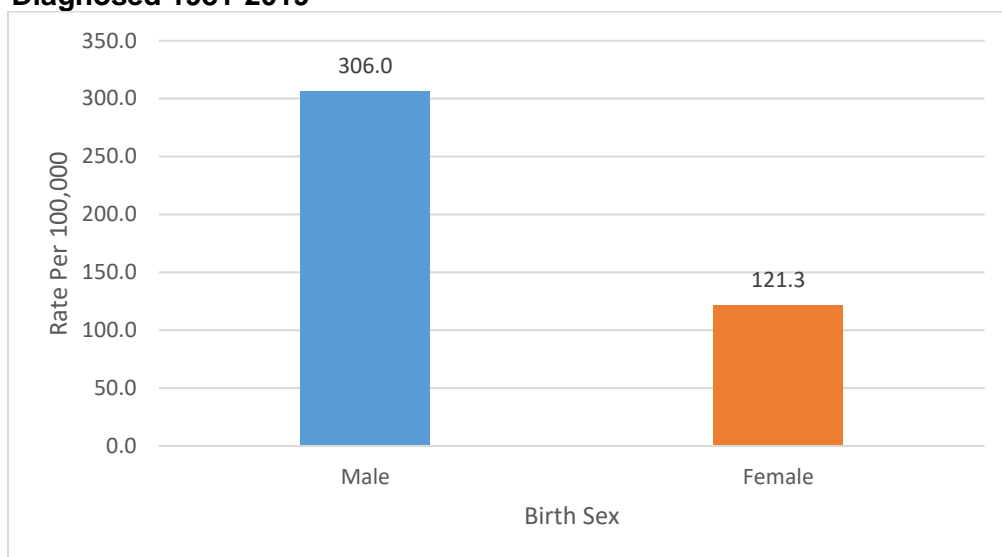
Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

Figure 51: Rate of Stage 3 HIV (AIDS) Prevalence by Race/Ethnicity, Delaware, Diagnosed 1981-2019



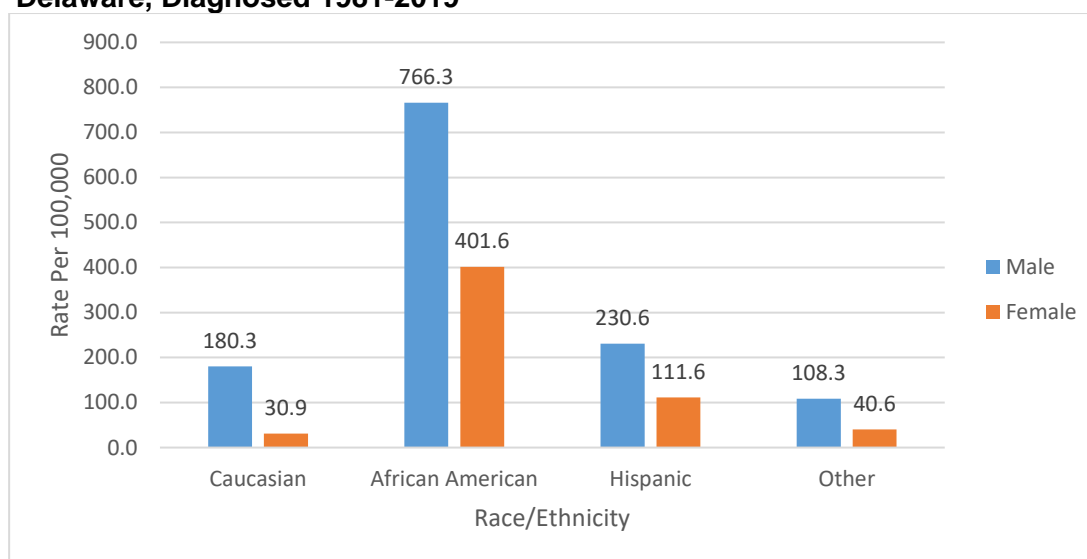
Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

Figure 52: Rate of Stage 3 HIV (AIDS) Prevalence by Birth Sex, Delaware, Diagnosed 1981-2019



Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

Figure 53: Rate of Stage 3 HIV (AIDS) Prevalence by Birth Sex and Race/Ethnicity, Delaware, Diagnosed 1981-2019



Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

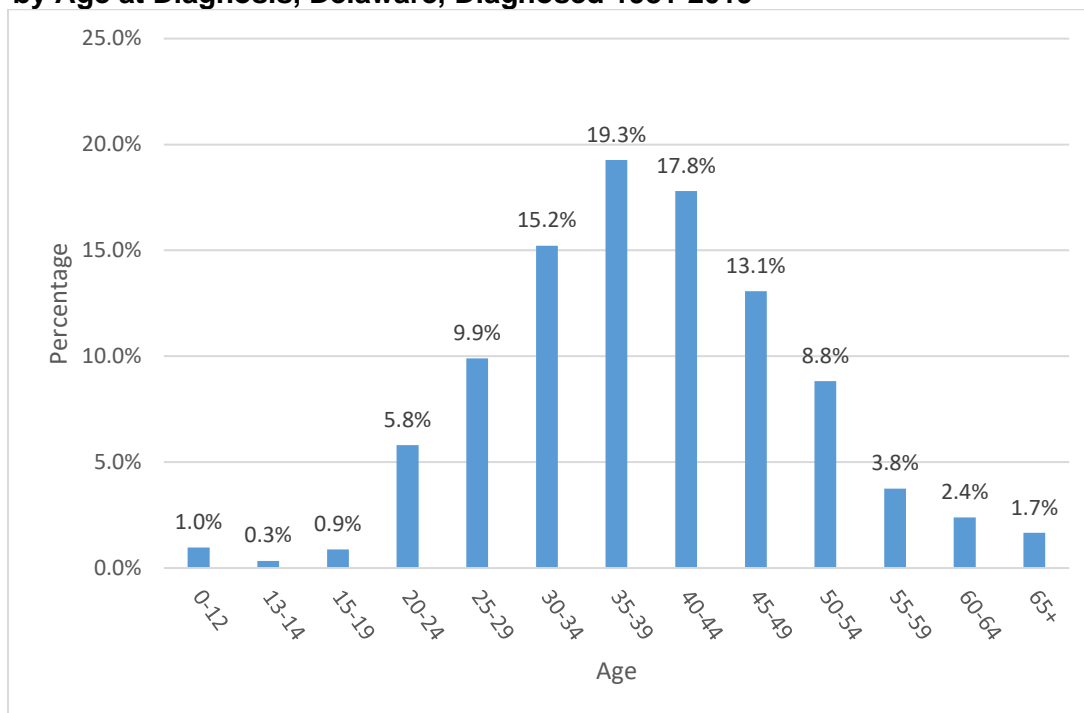
The majority of Delawareans (65%) are diagnosed with stage 3 HIV (AIDS) between the ages of 30 and 49 (Table 25 and Figure 54).

Table 25: Living with Stage 3 HIV (AIDS) by Age at Stage 3 Diagnosis, Delaware, Diagnosed 1981-2019

Age Group	#	%
00-12	20	1.0%
13-14	7	0.3%
15-19	18	0.9%
20-24	120	5.8%
25-29	204	9.9%
30-34	312	15.2%
35-39	395	19.3%
40-44	365	17.8%
45-49	268	13.1%
50-54	181	8.8%
55-59	77	3.8%
60-64	49	2.4%
65+	34	1.7%
Total	2,050	100.0%

Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

Figure 54: Percentage of Persons Living with Stage 3 HIV (AIDS) by Age at Diagnosis, Delaware, Diagnosed 1981-2019



Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

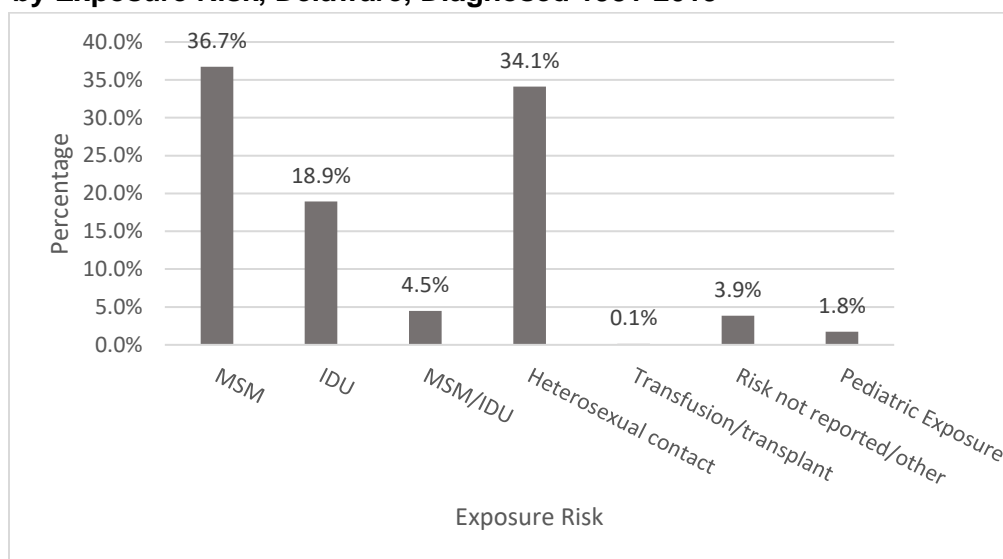
The leading exposure categories among Delawareans living with stage 3 HIV (AIDS) are MSM (37%), heterosexual contact (34%), and IDU (19%). All other exposure modes make up approximately 10% (Table 26 and Figures 55-57).

Table 26: Living with Stage 3 HIV (AIDS) by Exposure Risk, Delaware, Diagnosed 1981-2019

	All		Male		Female	
	#	%	#	%	#	%
Men Who Have Sex with Men (MSM)	753	36.7%	753	52.2%	0	0.0%
Injection Drug User (IDU)	388	18.9%	239	16.6%	149	24.5%
MSM/IDU	92	4.5%	92	6.4%	0	0.0%
Heterosexual Contact	699	34.1%	277	19.2%	422	69.4%
Transfusion/Transplant Recipient	3	0.1%	1	0.1%	2	0.3%
Risk not Reported/Other	79	3.9%	65	4.5%	14	2.3%
Pediatric Exposure	36	1.8%	15	1.0%	21	3.5%
Total	2,050	100%	1442	100%	608	100%

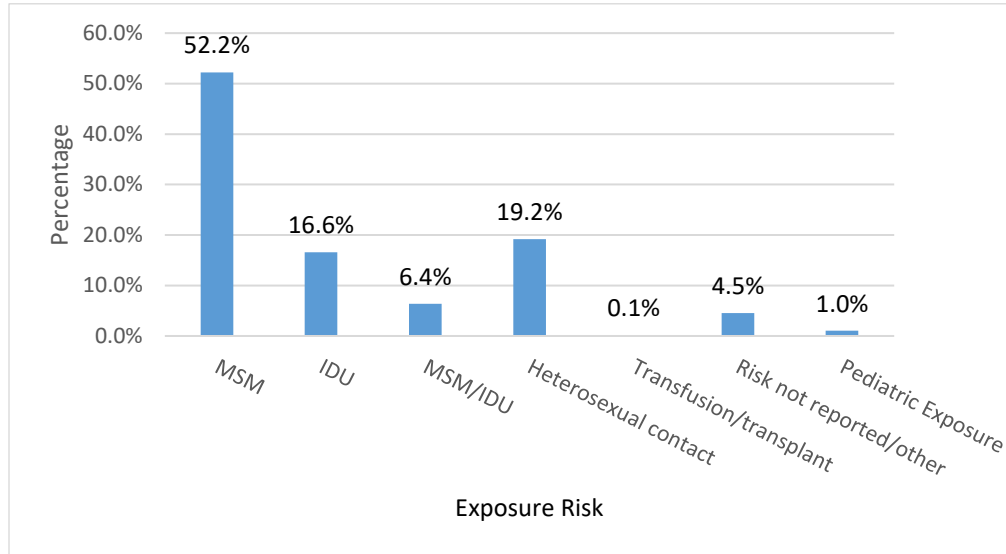
Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

Figure 55: Percentage of Persons Living with Stage 3 HIV (AIDS) by Exposure Risk, Delaware, Diagnosed 1981-2019



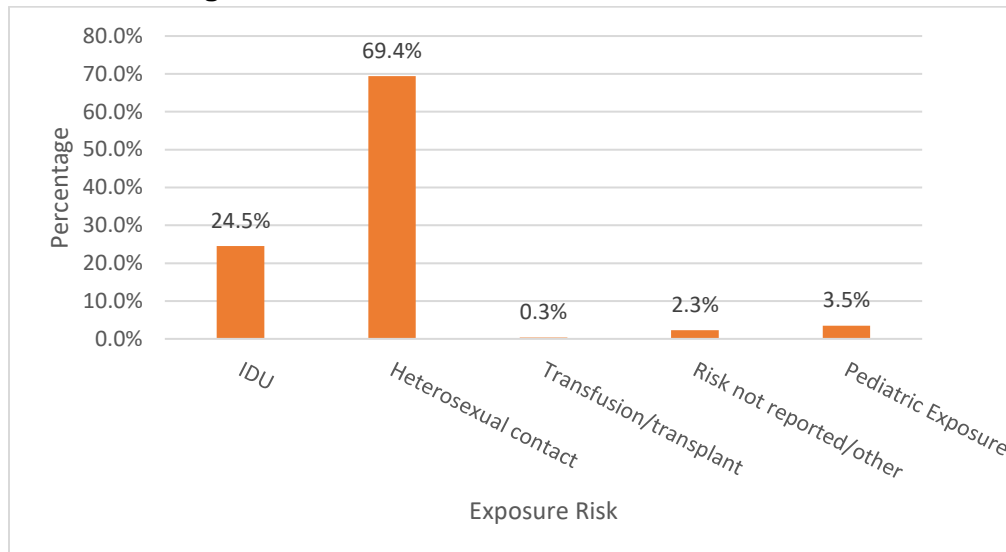
Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

Figure 56: Percentage of Males Stage 3 HIV (AIDS) by Exposure Risk, Delaware, Diagnosed 1981-2019



Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

Figure 57: Percentage of Females Stage 3 HIV (AIDS) by Exposure Risk, Delaware, Diagnosed 1981-2019



Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

Living with Stage 3 HIV (AIDS) in New Castle County, Delaware, Diagnosed 1981-2019

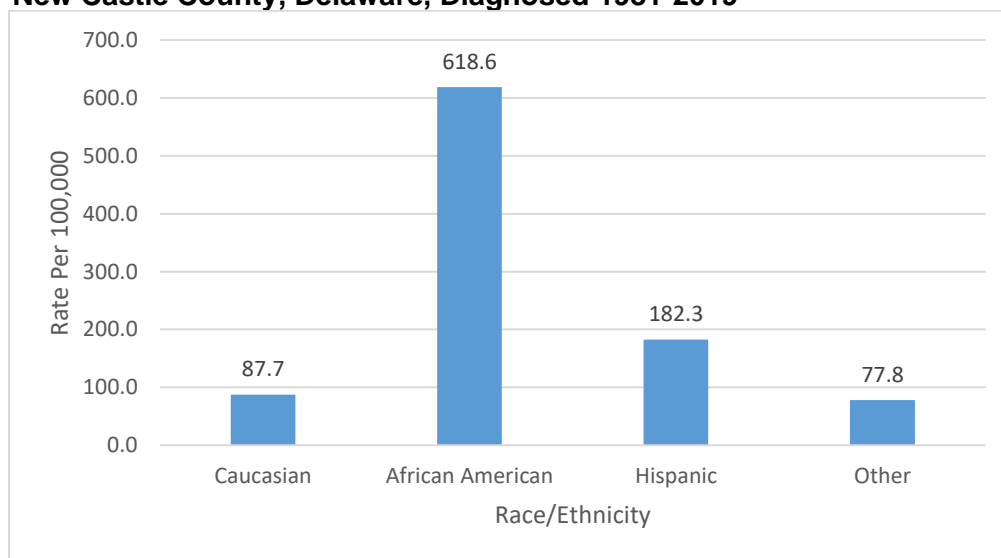
In New Castle County, the prevalence of stage 3 HIV (AIDS) by race is highest among African Americans. The prevalence of stage 3 HIV (AIDS) among males in New Castle County is approximately 51% higher than among females (Table 27 and Figures 58-60).

Table 27: Persons Living with Stage 3 HIV (AIDS) by Race/Ethnicity, New Castle County, Delaware, Diagnosed 1981-2019

Race / Ethnicity	Whites	African American	Hispanic	Other	
All					Total
Living with Stage 3 HIV (AIDS) 2019	280	884	106	33	1303
Percentage within Category	21%	68%	8%	3%	100%
Rate Per 100,000	87.7	618.6	182.3	77.8	231.6
Male					Total
Living with Stage 3 HIV (AIDS) 2019	223	548	72	21	864
Percentage within Category	26%	64%	8%	2%	100%
Rate Per 100,000	144.3	811.4	233.3	103.0	316.2
Female					Total
Living with Stage 3 HIV (AIDS) 2019	57	336	34	12	439
Percentage within Category	13%	77%	8%	3%	100%
Rate Per 100,000	34.6	445.8	124.6	54.4	151.7

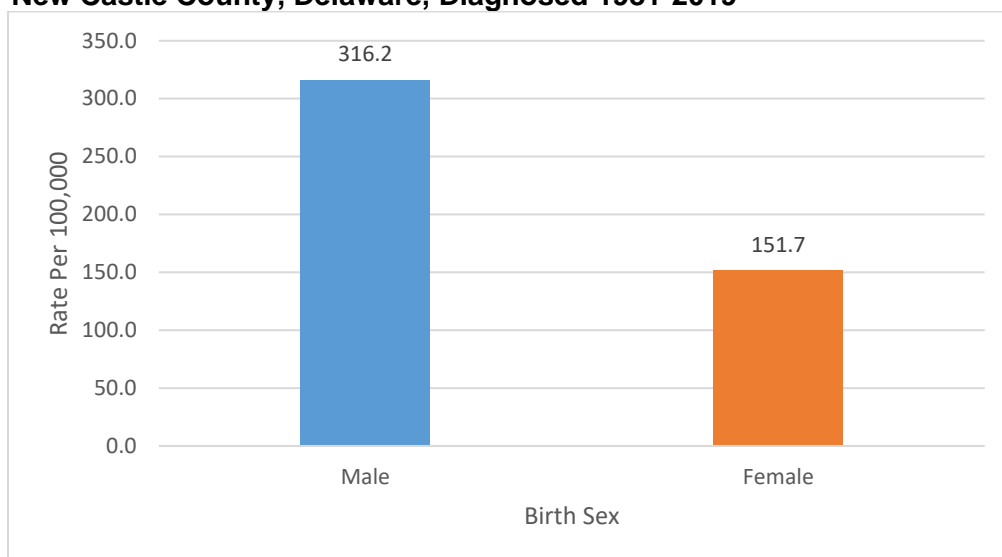
Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

Figure 58: Rate of Stage 3 HIV (AIDS) Prevalence by Race/Ethnicity, New Castle County, Delaware, Diagnosed 1981-2019



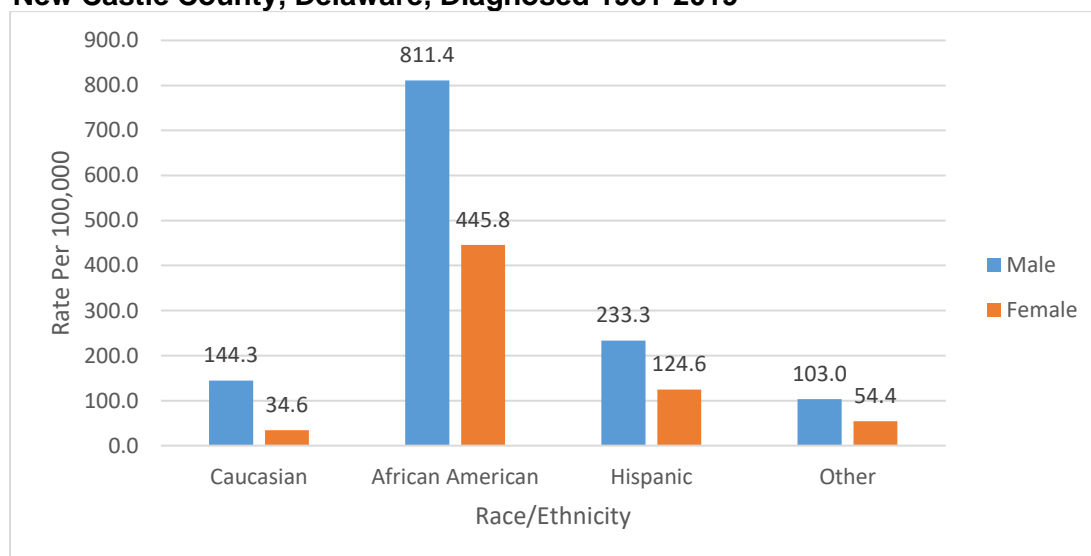
Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

Figure 59: Rate of Stage 3 HIV (AIDS) Prevalence by Birth Sex, New Castle County, Delaware, Diagnosed 1981-2019



Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

Figure 60: Rate of Stage 3 HIV (AIDS) Prevalence by Birth Sex and Race/Ethnicity, New Castle County, Delaware, Diagnosed 1981-2019



Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

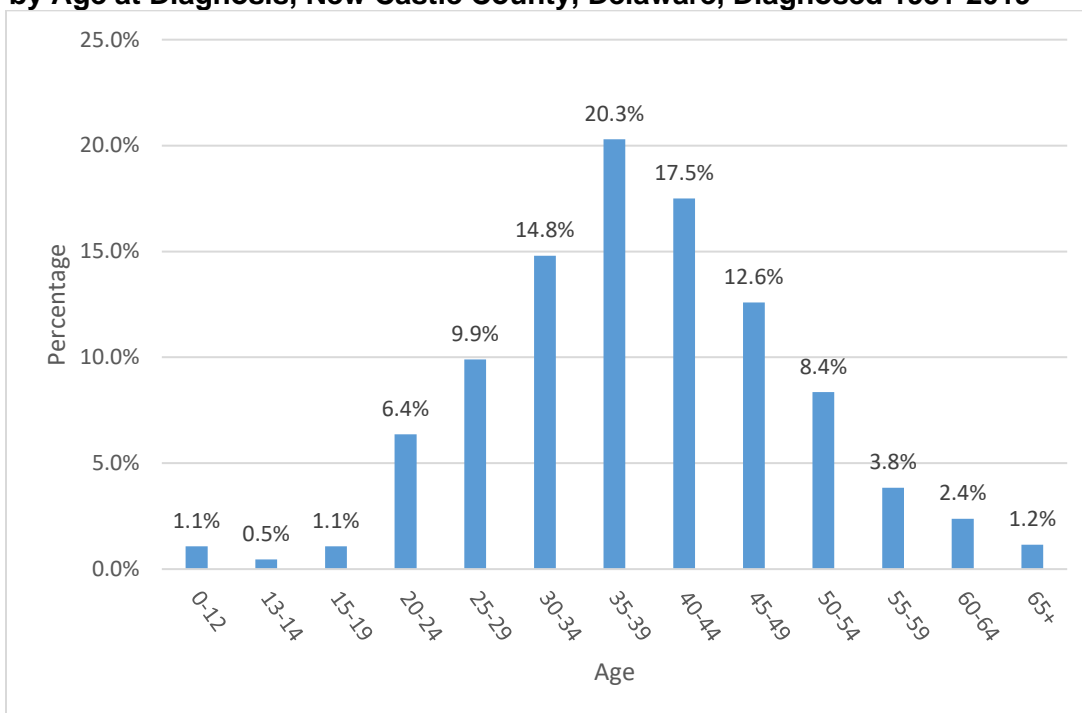
In New Castle County, persons diagnosed with stage 3 HIV (AIDS) between the ages of 30 and 49 make up 65% of all age groups (Table 28 and Figure 61).

Table 28: Persons Living with Stage 3 HIV (AIDS) by Age at Stage 3 Diagnosis, New Castle County, Delaware, Diagnosed 1981-2019

Age Group	#	%
00-12	14	1.1%
13-14	6	0.5%
15-19	14	1.1%
20-24	83	6.4%
25-29	129	9.9%
30-34	194	14.8%
35-39	266	20.3%
40-44	228	17.5%
45-49	164	12.6%
50-54	109	8.4%
55-59	50	3.8%
60-64	31	2.4%
65+	15	1.2%
Total	1303	100.0%

Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

Figure 61: Percentage of Persons Living with Stage 3 HIV (AIDS) by Age at Diagnosis, New Castle County, Delaware, Diagnosed 1981-2019



Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

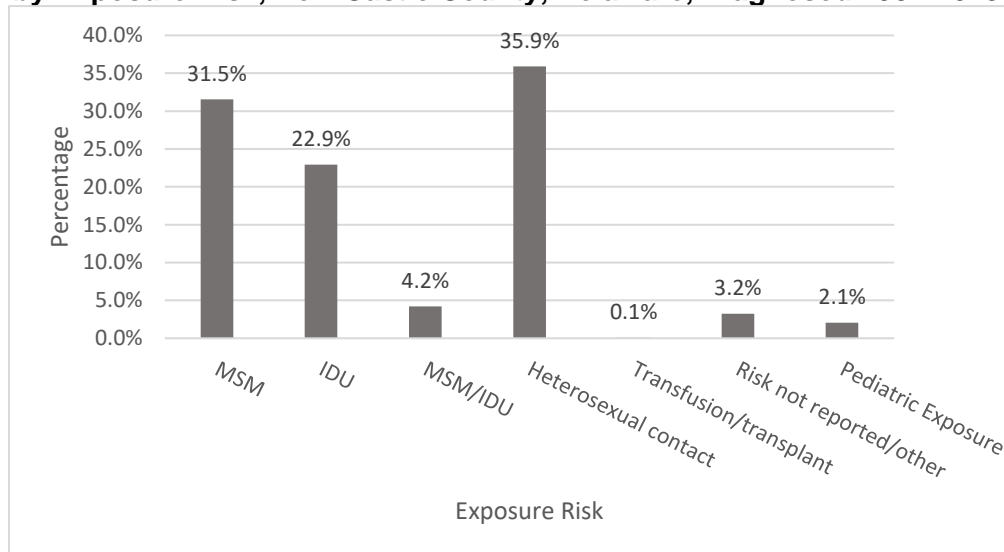
The leading exposure mode for persons living with Stage 3 HIV (AIDS) is heterosexual contact (37%). MSM and IDU are 32% and 23% of exposure modes, respectively. All other exposure modes make up approximately 8% (Table 29 and Figures 62-64).

Table 29: Persons Living with Stage 3 HIV (AIDS) by Exposure Risk, New Castle County, Delaware, Diagnosed 1981-2019

	All		Male		Female	
	#	%	#	%	#	%
Men Who Have Sex with Men (MSM)	411	31.5%	411	47.6%	0	0.0%
Injection Drug User (IDU)	299	22.9%	181	20.9%	118	26.9%
MSM/IDU	55	4.2%	55	6.4%	0	0.0%
Heterosexual Contact	468	35.9%	174	20.1%	294	67.0%
Transfusion/Transplant Recipient	1	0.1%	0	0.0%	1	0.2%
Risk not Reported/Other	42	3.2%	34	3.9%	8	1.8%
Pediatric Exposure	27	2.1%	9	1.0%	18	4.1%
Total	1303	100%	864	100%	439	100%

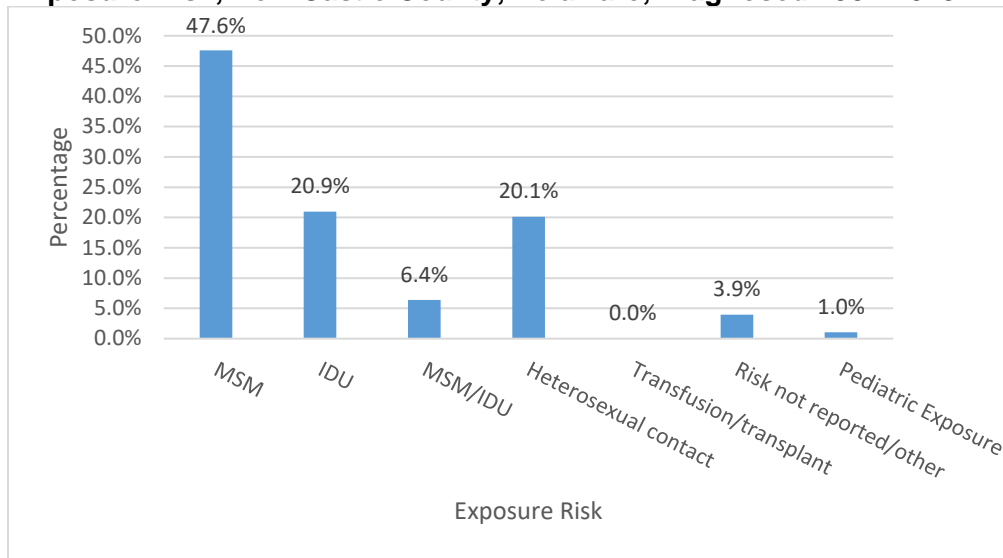
Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

Figure 62: Percentage of Persons Living with Stage 3 HIV (AIDS) by Exposure Risk, New Castle County, Delaware, Diagnosed 1981-2019



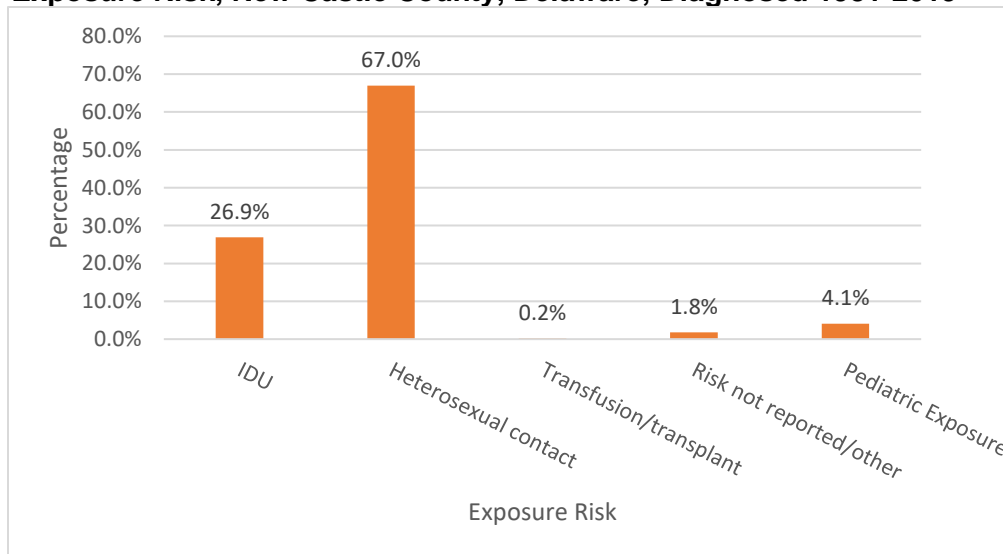
Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

Figure 63: Percentage of Males Stage 3 HIV (AIDS) by Exposure Risk, New Castle County, Delaware, Diagnosed 1981-2019



Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

Figure 64: Percentage of Females Stage 3 HIV (AIDS) by Exposure Risk, New Castle County, Delaware, Diagnosed 1981-2019



Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

Living with Stage 3 HIV (AIDS) in Kent County, Delaware, Diagnosed 1981-2019

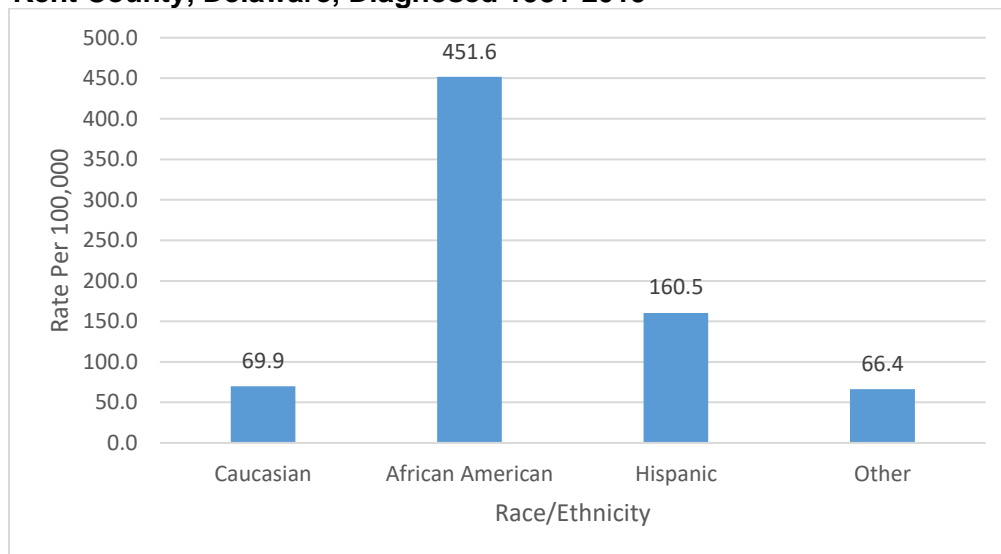
In Kent County, Delaware, the prevalence of stage 3 HIV (AIDS) by race is highest among African Americans. The prevalence of stage 3 HIV (AIDS) among all males in Kent County is approximately 57% higher than among all females (Table 30 and Figures 65-67).

Table 30: Living with Stage 3 HIV (AIDS) by Race/Ethnicity, Kent County, Delaware, Diagnosed 1981-2019

Race / Ethnicity	Whites	African American	Hispanic	Other	
All					Total
Living with Stage 3 HIV (AIDS) 2019	78	192	19	8	297
Percentage within Category	26%	65%	6%	3%	100%
Rate Per 100,000	69.9	451.6	160.5	66.4	166.8
Male					Total
Living with Stage 3 HIV (AIDS) 2019	62	127	13	6	208
Percentage within Category	30%	61%	6%	3%	100%
Rate Per 100,000	114.5	634.9	222.4	115.1	244.1
Female					Total
Living with Stage 3 HIV (AIDS) 2019	16	65	6	2	89
Percentage within Category	18%	73%	7%	2%	100%
Rate Per 100,000	27.8	288.7	100.1	29.3	95.9

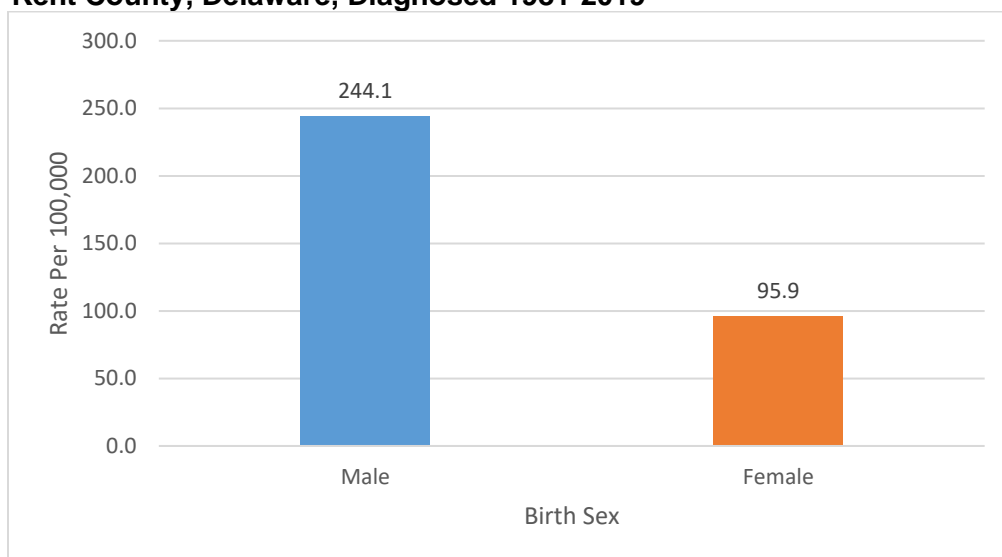
Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

Figure 65: Rate of Stage 3 HIV (AIDS) Prevalence by Race/Ethnicity, Kent County, Delaware, Diagnosed 1981-2019



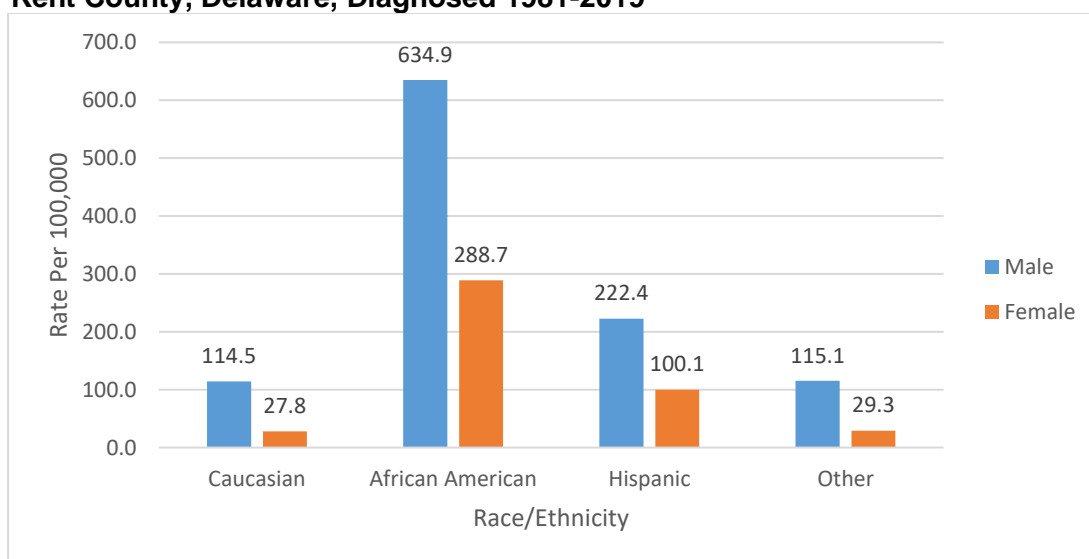
Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

Figure 66: Rate of Stage 3 HIV (AIDS) Prevalence by Birth Sex, Kent County, Delaware, Diagnosed 1981-2019



Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

Figure 67: Rate of Stage 3 HIV (AIDS) Prevalence by Birth Sex and Race/Ethnicity, Kent County, Delaware, Diagnosed 1981-2019



Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

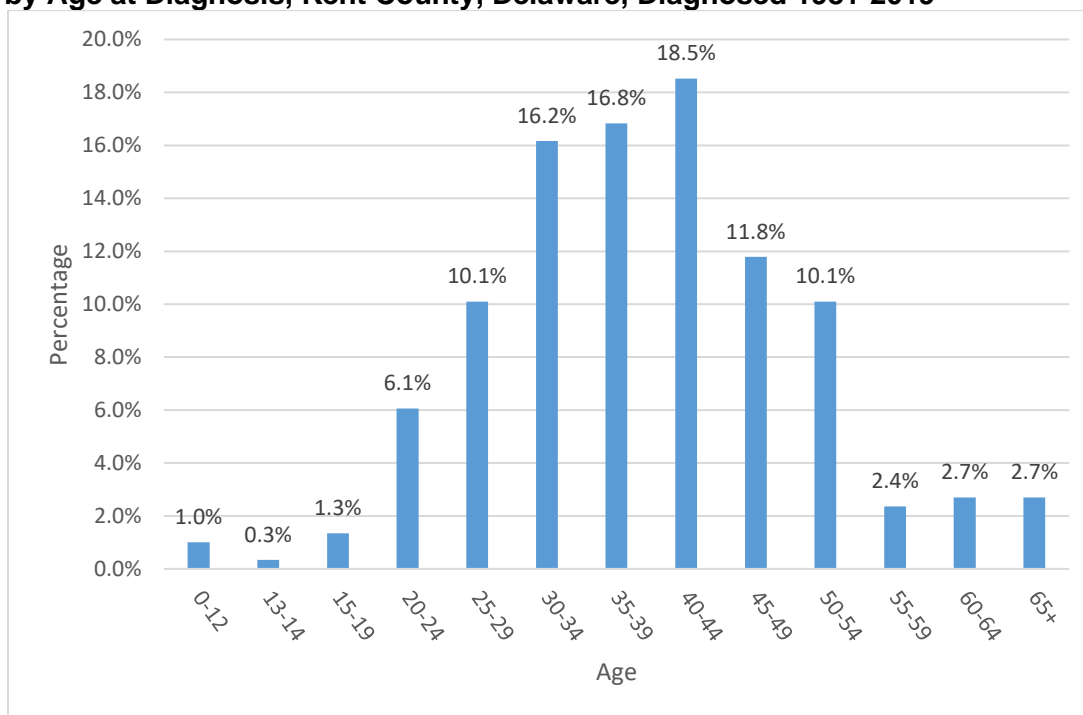
In Kent County, persons diagnosed with stage 3 HIV (AIDS) between the ages of 30 and 49 make up 63% of all persons diagnosed with stage 3, when compared to all other age groups (Table 31 and Figure 68).

Table 31: Persons Living with Stage 3 HIV (AIDS) by Age at Stage 3 Diagnosis, Kent County, Delaware, Diagnosed 1981-2019

Age Group	#	%
00-12	3	1.0%
13-14	1	0.3%
15-19	4	1.3%
20-24	18	6.1%
25-29	30	10.1%
30-34	48	16.2%
35-39	50	16.8%
40-44	55	18.5%
45-49	35	11.8%
50-54	30	10.1%
55-59	7	2.4%
60-64	8	2.7%
65+	8	2.7%
Total	297	100.0%

Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

Figure 68: Percentage of Persons Living with Stage 3 HIV (AIDS) by Age at Diagnosis, Kent County, Delaware, Diagnosed 1981-2019



Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

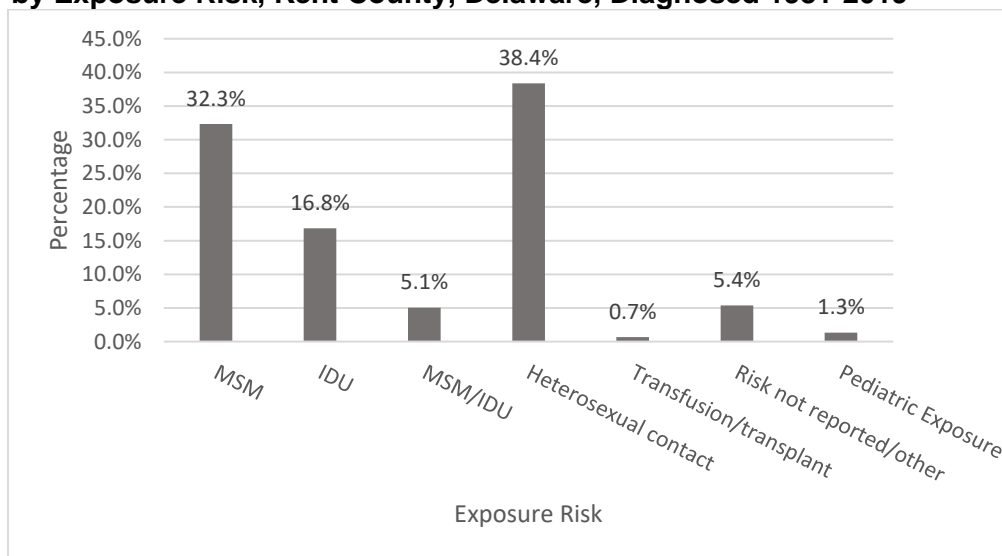
The leading exposure mode in Kent County is heterosexual contact at 38%. MSM and IDU are 32% and 17% for exposure modes, respectively. All other exposure modes make up approximately 12% (Table 32 and Figures 69-71).

Table 32: Living with Stage 3 HIV (AIDS) by Exposure Risk, Kent County, Delaware, Diagnosed 1981-2019

	All		Male		Female	
	#	%	#	%	#	%
Men Who Have Sex with Men (MSM)	96	32.3%	96	46.2%	0	0.0%
Injection Drug User (IDU)	50	16.8%	34	16.3%	16	18.0%
MSM/IDU	15	5.1%	15	7.2%	0	0.0%
Heterosexual Contact	114	38.4%	47	22.6%	67	75.3%
Transfusion/Transplant Recipient	2	0.7%	1	0.5%	1	1.1%
Risk not Reported/Other	16	5.4%	13	6.3%	3	3.4%
Pediatric Exposure	4	1.3%	2	1.0%	2	2.2%
Total	297	100%	208	100%	89	100%

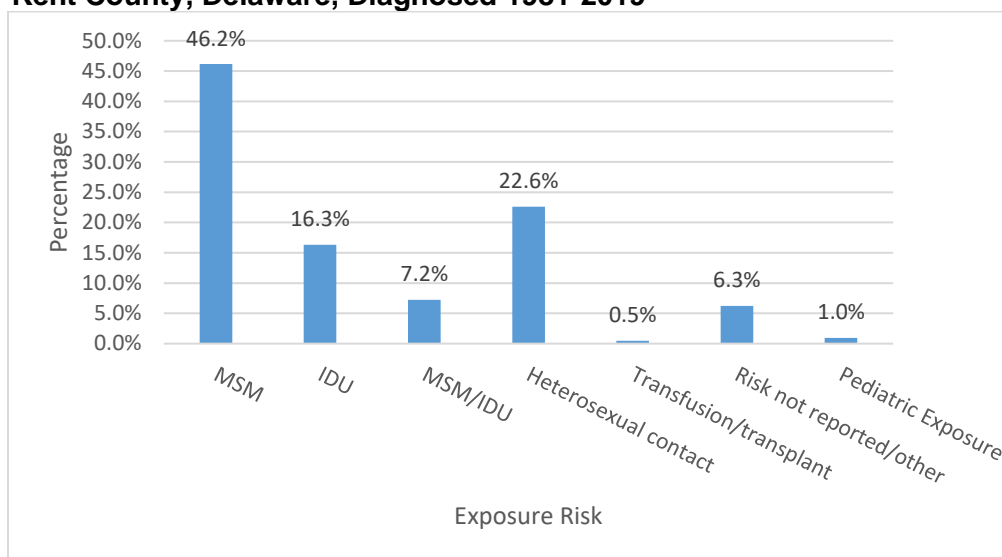
Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

Figure 69: Percentage of Persons Living with Stage 3 HIV (AIDS) by Exposure Risk, Kent County, Delaware, Diagnosed 1981-2019



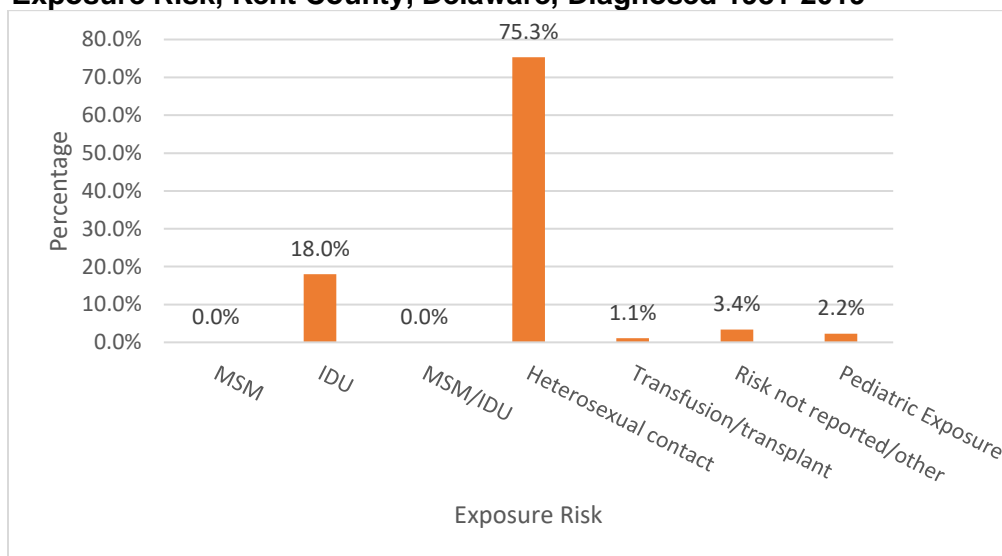
Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

Figure 70: Percentage of Males Stage 3 HIV (AIDS) by Exposure Risk, Kent County, Delaware, Diagnosed 1981-2019



Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

Figure 71: Percentage of Females Stage 3 HIV (AIDS) by Exposure Risk, Kent County, Delaware, Diagnosed 1981-2019



Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

Living with Stage 3 HIV (AIDS) in Sussex County, Delaware, Diagnosed 1981-2019

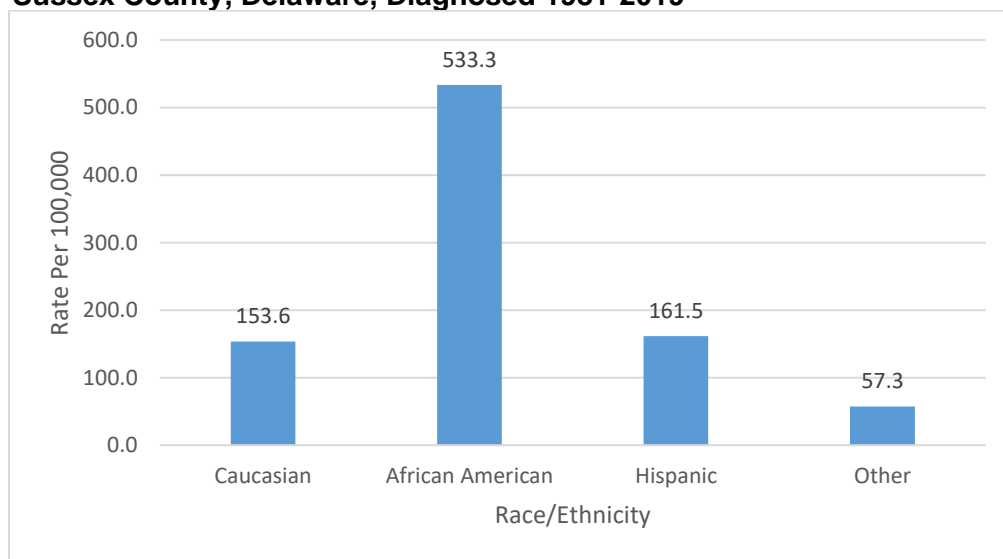
In Sussex County, the prevalence of stage 3 HIV (AIDS) by race is highest among African Americans. The prevalence of stage 3 HIV (AIDS) among all males in Sussex County is approximately 79% higher than among all females (Table 33 and Figures 72-74).

Table 33: Persons Living with Stage 3 HIV (AIDS) by Race/Ethnicity, Sussex County, Delaware, Diagnosed 1981-2019

Race / Ethnicity	Whites	African American	Hispanic	Other	
All					Total
Living with Stage 3 HIV (AIDS) 2019	263	144	37	6	450
Percentage within Category	59%	32%	8%	1%	100%
Rate Per 100,000	153.6	533.3	161.5	57.3	194.3
Male					Total
Living with Stage 3 HIV (AIDS) 2019	240	96	28	6	370
Percentage within Category	66%	26%	8%	2%	100%
Rate Per 100,000	290.9	734.2	227.8	123.0	328.2
Female					Total
Living with Stage 3 HIV (AIDS) 2019	23	48	9	0	80
Percentage within Category	29%	60%	11%	0%	100%
Rate Per 100,000	25.9	345.1	91.6	0.0	68.5

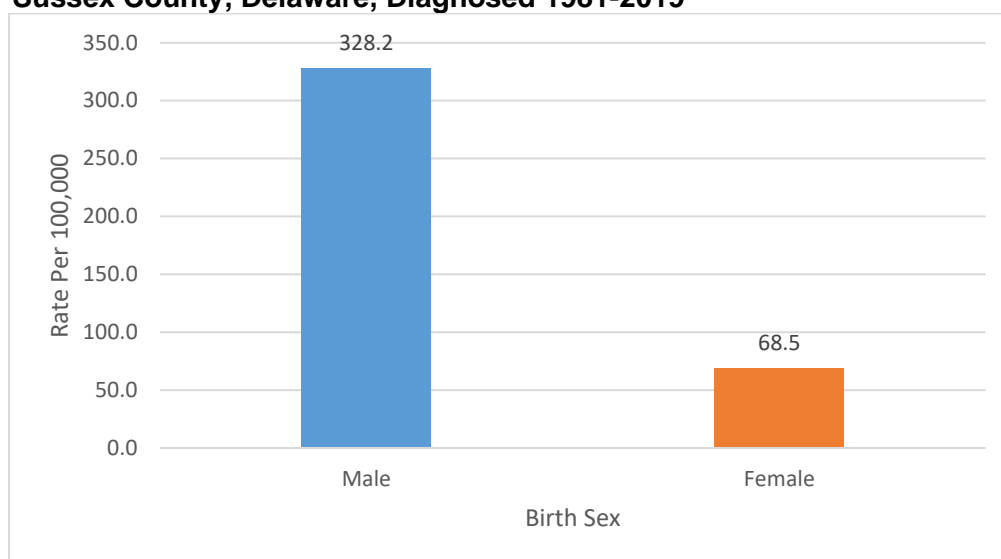
Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

Figure 72: Rate of Stage 3 HIV (AIDS) Prevalence by Race/Ethnicity, Sussex County, Delaware, Diagnosed 1981-2019



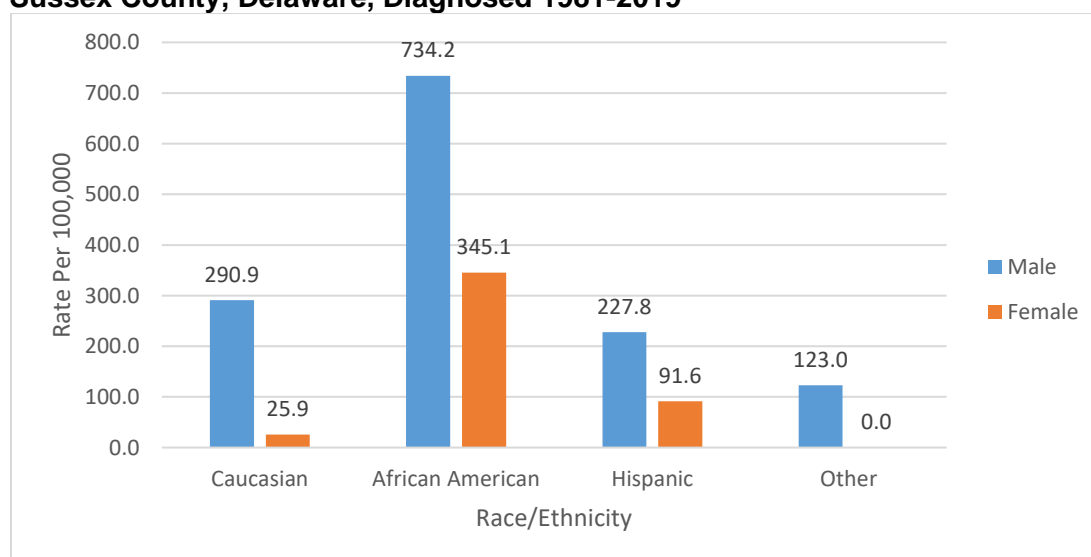
Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

Figure 73: Rate of Stage 3 HIV (AIDS) Prevalence by Birth Sex, Sussex County, Delaware, Diagnosed 1981-2019



Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

Figure 74: Rate of Stage 3 HIV (AIDS) Prevalence by Birth Sex and Race/Ethnicity, Sussex County, Delaware, Diagnosed 1981-2019



Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

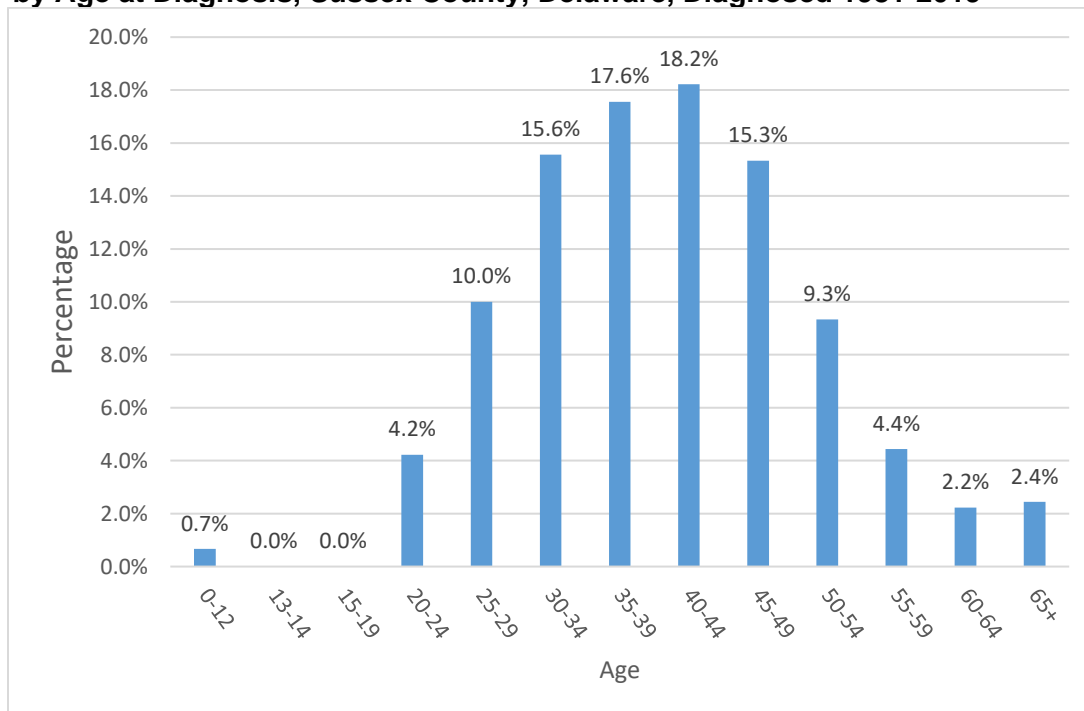
In Sussex County, persons diagnosed with stage 3 HIV (AIDS) between the ages of 30 and 49 make up 67% of persons diagnosed at this stage, compared to all other age groups (Table 34 and Figure 75).

Table 34: Persons Living with Stage 3 HIV (AIDS) by Age at Stage 3 Diagnosis, Sussex, Delaware, Diagnosed 1981-2019

Age Group	#	%
00-12	3	0.7%
13-14	0	0.0%
15-19	0	0.0%
20-24	19	4.2%
25-29	45	10.0%
30-34	70	15.6%
35-39	79	17.6%
40-44	82	18.2%
45-49	69	15.3%
50-54	42	9.3%
55-59	20	4.4%
60-64	10	2.2%
65+	11	2.4%
Total	450	100.0%

Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

Figure 75: Percentage of Persons Living with Stage 3 HIV (AIDS) by Age at Diagnosis, Sussex County, Delaware, Diagnosed 1981-2019



Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

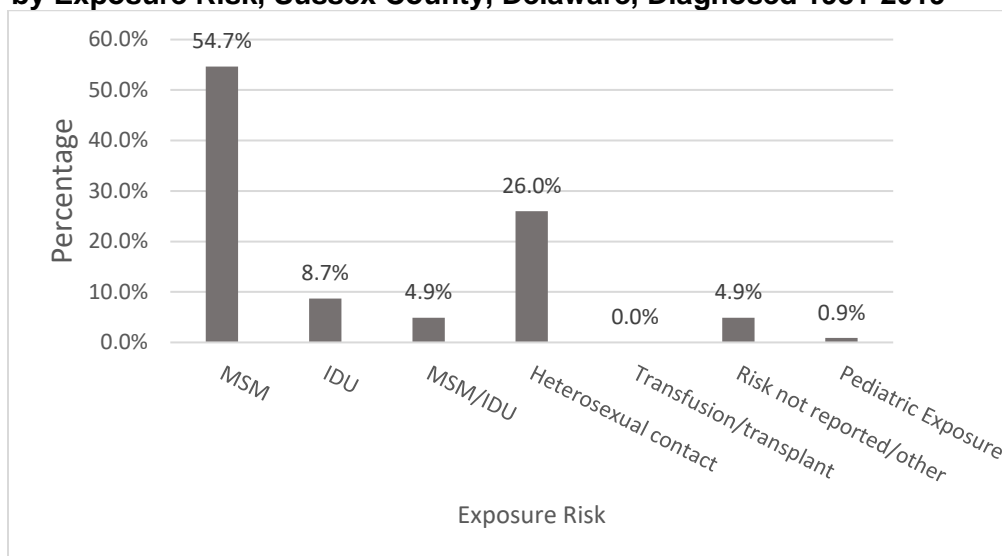
In Sussex County, the leading exposure mode is MSM (55%), followed by heterosexual contact (26%) and IDU (9%). All other exposure modes make up approximately 12% (Table 35 and Figures 76-78).

Table 35: Persons Living with Stage 3 HIV (AIDS) by Exposure Risk, Sussex County, Delaware, Diagnosed 1981-2019

	All		Male		Female	
	#	%	#	%	#	%
Men Who Have Sex with Men (MSM)	246	54.7%	246	66.5%	0	0.0%
Injection Drug User (IDU)	39	8.7%	24	6.5%	15	18.8%
MSM/IDU	22	4.9%	22	5.9%	0	0.0%
Heterosexual Contact	117	26%	56	15.1%	61	76.3%
Transfusion/Transplant Recipient	0	0.0%	0	0.0%	0	0.0%
Risk not Reported/Other	22	4.9%	19	5.1%	3	3.8%
Pediatric Exposure	4	0.9%	3	0.8%	1	1.3%
Total	450	100%	370	100%	80	100%

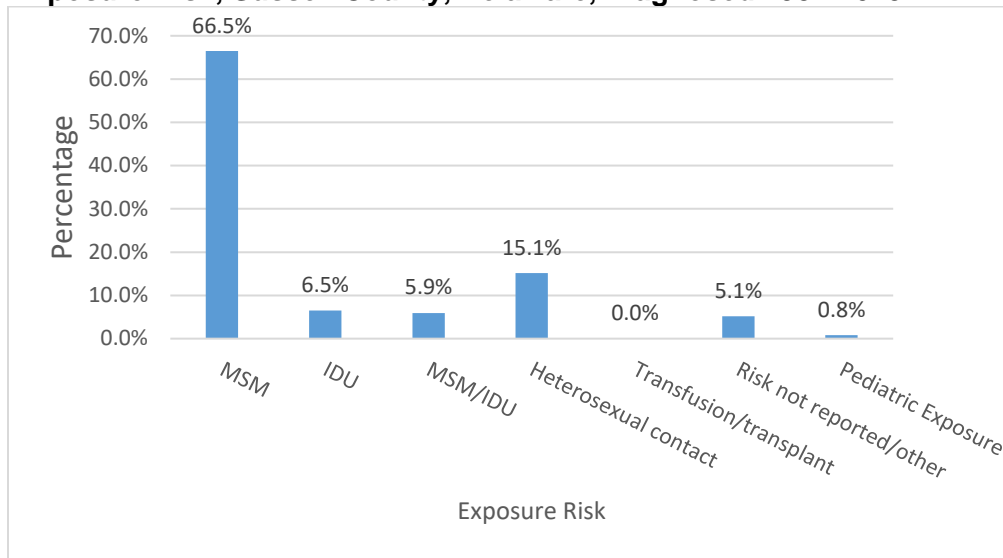
Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

Figure 76: Percentage of Persons Living with Stage 3 HIV (AIDS) by Exposure Risk, Sussex County, Delaware, Diagnosed 1981-2019



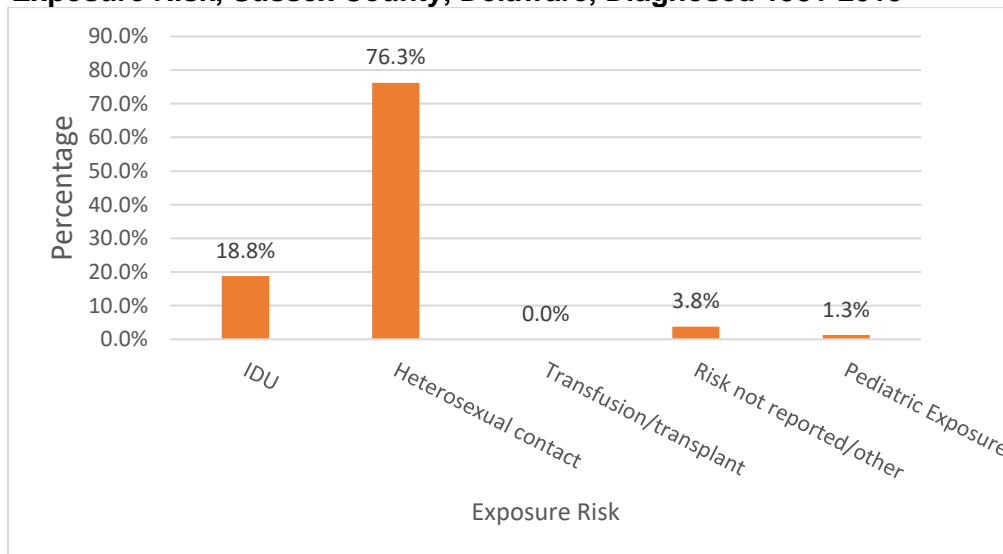
Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

Figure 77: Percentage of Males Stage 3 HIV (AIDS) by Exposure Risk, Sussex County, Delaware, Diagnosed 1981-2019



Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

Figure 78: Percentage of Females Stage 3 HIV (AIDS) by Exposure Risk, Sussex County, Delaware, Diagnosed 1981-2019



Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

Living with Stage 3 HIV (AIDS) in the Wilmington Metropolitan Area, Delaware, Diagnosed 1981-2019

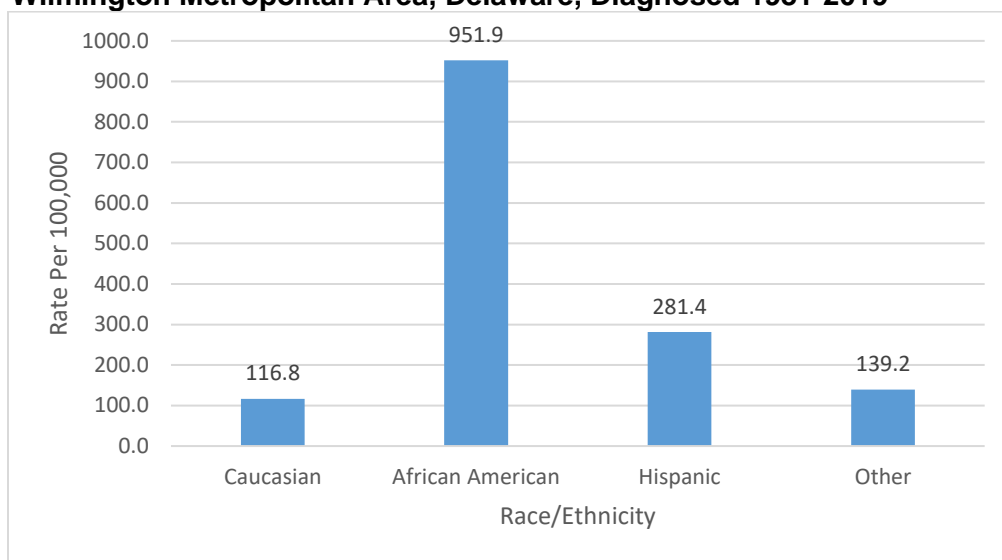
In Delaware's Wilmington Metropolitan Area, the prevalence of stage 3 HIV (AIDS) by race is highest among African Americans. The 2018 American Community Survey provided the latest estimates for populations within ZIP Codes 19801-19810 (Tables 36-37 and Figures 79-80).

Table 36: Living with Stage 3 HIV by Race/Ethnicity, Wilmington Metropolitan Area, Delaware, Diagnosed 1981-2019 (19801-19810 ZIP Codes)

Race / Ethnicity	Caucasian	African American	Hispanic	Other	
All					Total
Living with Stage 3 HIV (AIDS) 2019	148	537	64	19	768
Percentage within Category	19%	70%	8%	3%	100%
Rate Per 100,000	116.8	951.9	281.4	139.2	349.9

Source: U.S. Census Bureau, American Community Survey 2018, Delaware Department of Health and Social Services, Division of Public Health, 2020.

Figure 79: Rate of Stage 3 HIV (AIDS) Prevalence by Race/Ethnicity, Wilmington Metropolitan Area, Delaware, Diagnosed 1981-2019



Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

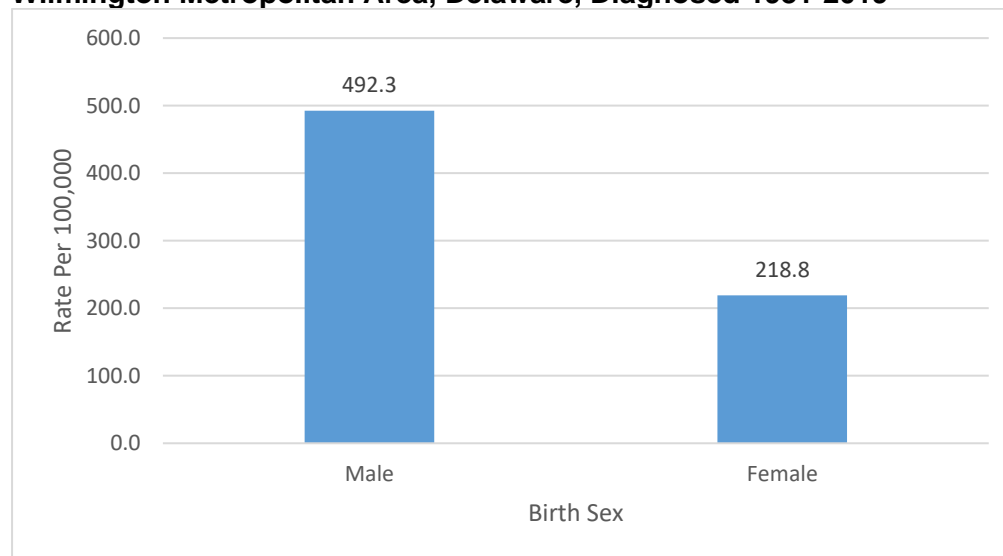
In the Wilmington Metropolitan Area, Stage 3 HIV (AIDS) prevalence among males is 52% higher than among females (Table 37 and Figure 84).

Table 37: Living with Stage 3 HIV (AIDS) by Birth Sex, Wilmington Metropolitan Area, Delaware, Diagnosed 1981-2019 (19801-19810 ZIP Codes)

	Male	Female	Total
Living with HIV - Stage 3 (AIDS) 2019	518	250	768
Prevalence Rate	492.3	218.8	349.9

Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

Figure 80: Rate of Stage 3 HIV (AIDS) Prevalence by Birth Sex, Wilmington Metropolitan Area, Delaware, Diagnosed 1981-2019



Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

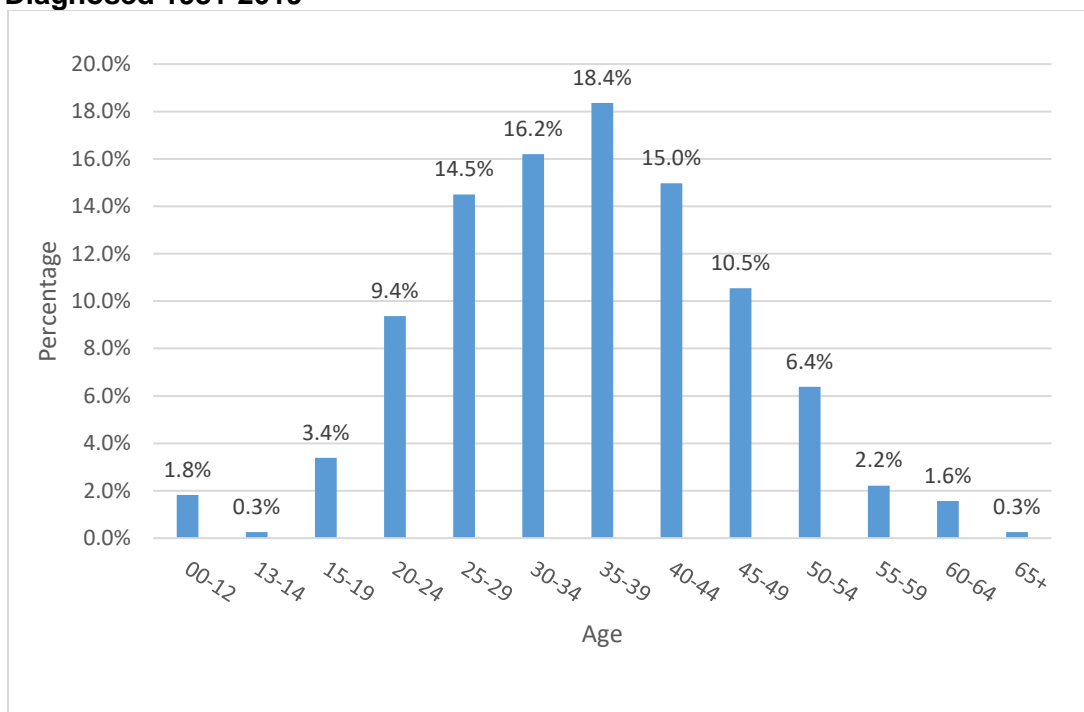
In the Wilmington Metropolitan Area, persons diagnosed with stage 3 HIV (AIDS) between the ages of 25 and 44 make up 64% of those diagnosed at this stage, compared to all other age groups (Table 38 and Figure 81).

Table 38: Persons Living with Stage 3 HIV (AIDS) by Age at HIV Diagnosis, Wilmington Metropolitan Area, Delaware, Diagnosed 1981-2019 (19801-19810 ZIP Codes)

00-12	14	1.8%
13-14	2	0.3%
15-19	26	3.4%
20-24	72	9.4%
25-29	112	14.5%
30-34	125	16.2%
35-39	141	18.4%
40-44	115	15.0%
45-49	81	10.5%
50-54	49	6.4%
55-59	17	2.2%
60-64	12	1.6%
65+	2	0.3%
Total	768	100.0%

Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

Figure 81: Percentage of Persons Living with Stage 3 HIV (AIDS) by Age at Diagnosis, Wilmington Metropolitan Area, Delaware, Diagnosed 1981-2019



Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

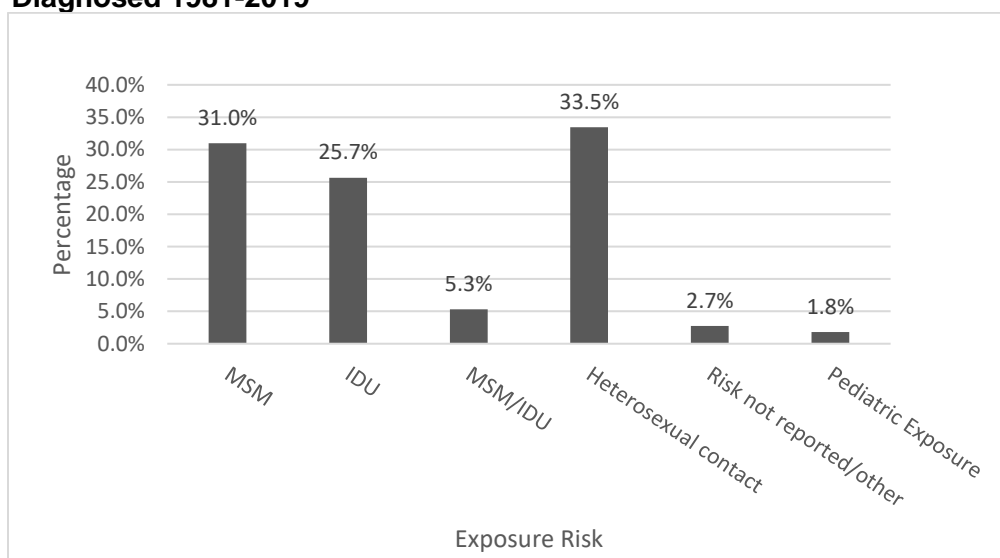
Within the Wilmington Metropolitan Area, the leading exposure mode among those living with Stage 3 HIV (AIDS) is heterosexual contact at 34%. MSM and IDU are 31% and 26% for exposure modes, respectively. All other exposure modes make up approximately 9% (Table 39 and Figures 82-84).

Table 39: Persons Living with Stage 3 HIV (AIDS) by Exposure Category, Wilmington Metropolitan Area, Delaware, Diagnosed 1981-2019 (19801-19810 ZIP Codes)

	All		Male		Female	
	#	%	#	%	#	%
Men Who Have Sex with Men (MSM)	238	31.0%	238	45.9%	0	0.0%
Injection Drug User (IDU)	197	25.7%	117	22.6%	80	32.0%
MSM/IDU	41	5.3%	41	7.9%	0	0.0%
Heterosexual Contact	257	33.5%	100	19.3%	157	62.8%
Transfusion/Transplant Recipient	0	0.0%	0	0.0%	0	0.0%
Risk not Reported/Other	21	2.7%	16	3.1%	5	2.0%
Pediatric Exposure	14	1.8%	6	1.2%	8	3.2%
Total	768	100.0%	518	100%	250	100%

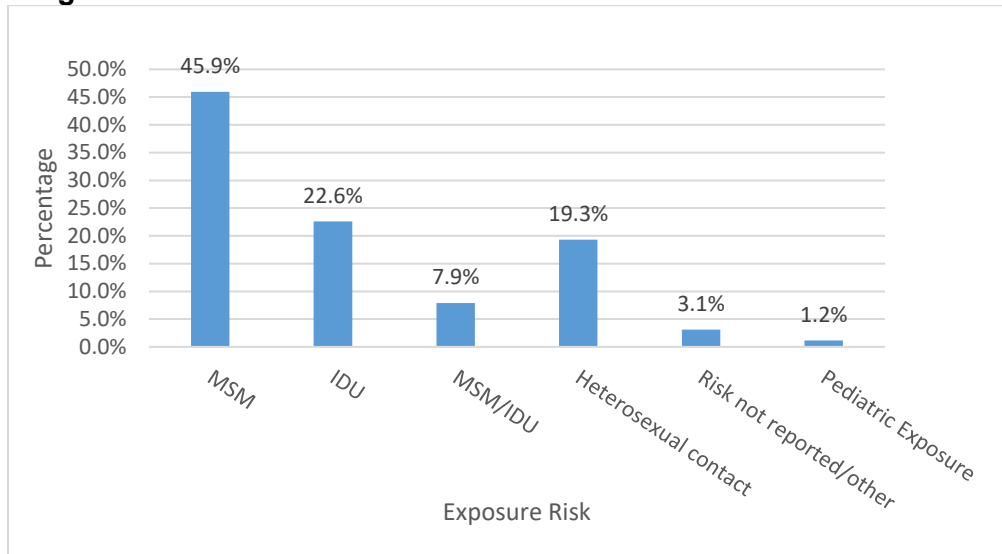
Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

Figure 82: Percentage of Persons Living with Stage 3 HIV (AIDS) by Exposure Risk, Wilmington Metropolitan Area, Delaware, Diagnosed 1981-2019



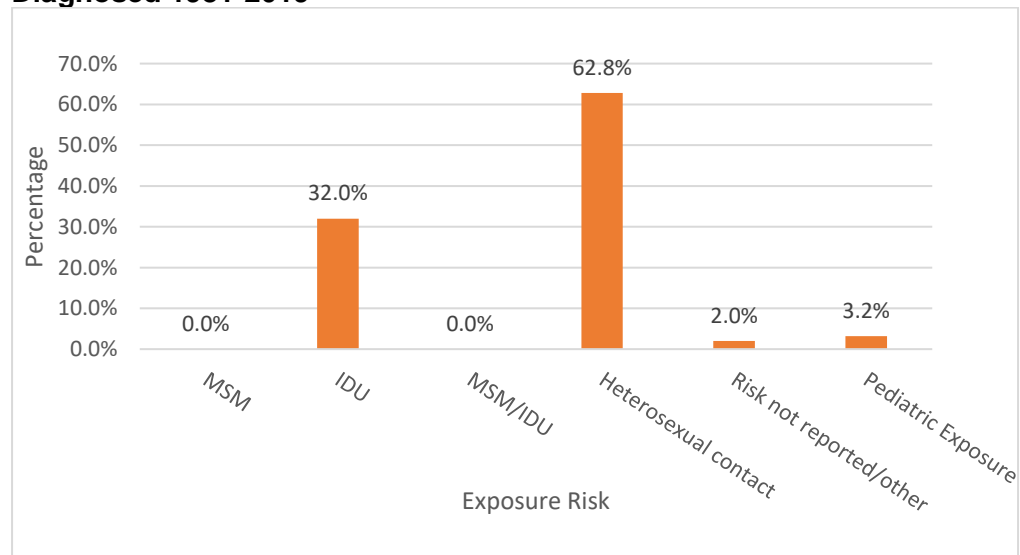
Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

Figure 83: Percentage of Males Stage 3 HIV (AIDS) by Exposure Risk, Wilmington Metropolitan Area, Delaware, Diagnosed 1981-2019

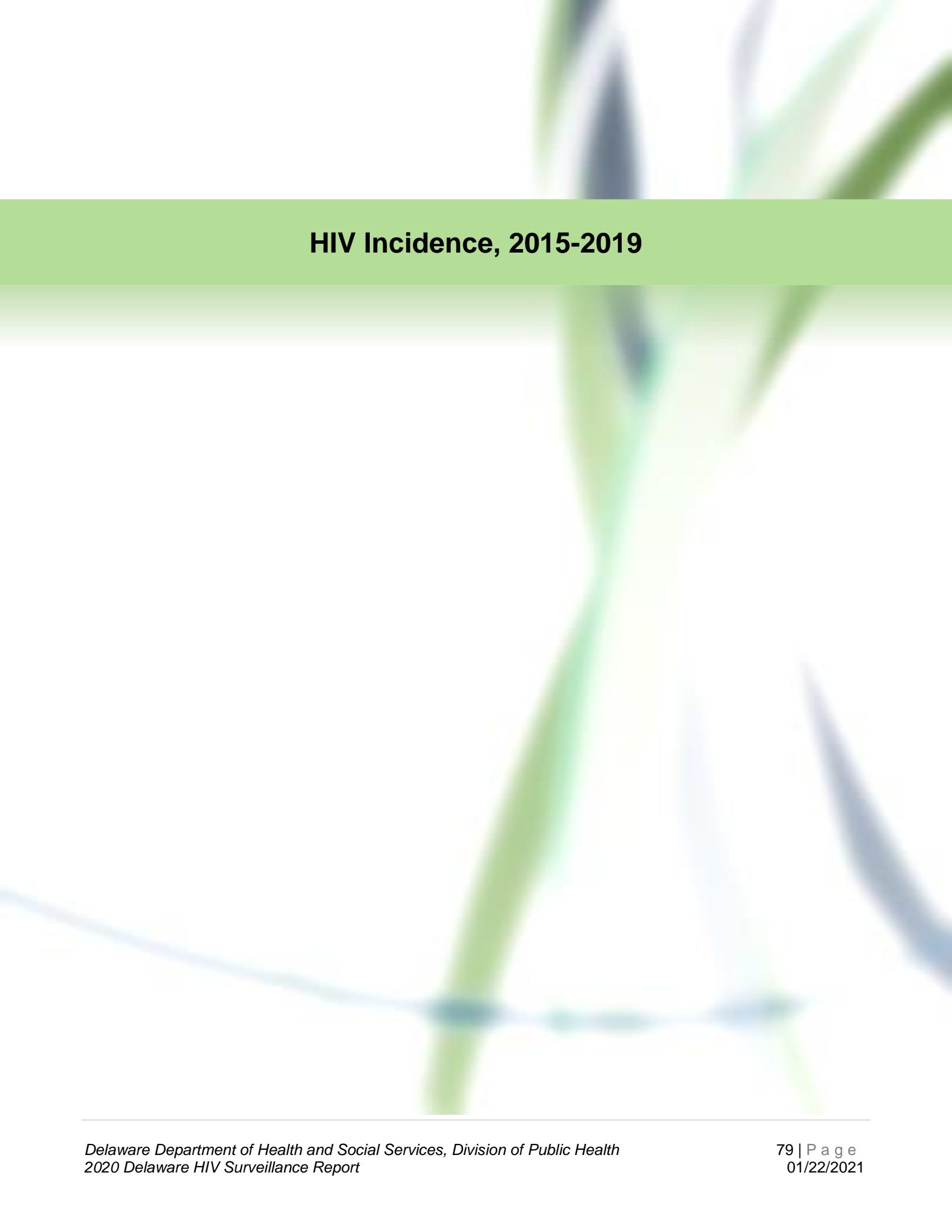


Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

Figure 84: Percentage of Females Stage 3 HIV (AIDS) by Exposure Risk, Wilmington Metropolitan Area, Delaware, Diagnosed 1981-2019



Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.



HIV Incidence, 2015-2019

HIV Incidence in Delaware, 2015-2019

From 2015 through 2019, the average HIV incidence rate in Delaware was 11.1 per 100,000 population. The five-year average for males (17.4 per 100,000) is approximately three times higher than for females (5.1 per 100,000) (Table 40 and Figures 85 and 86).

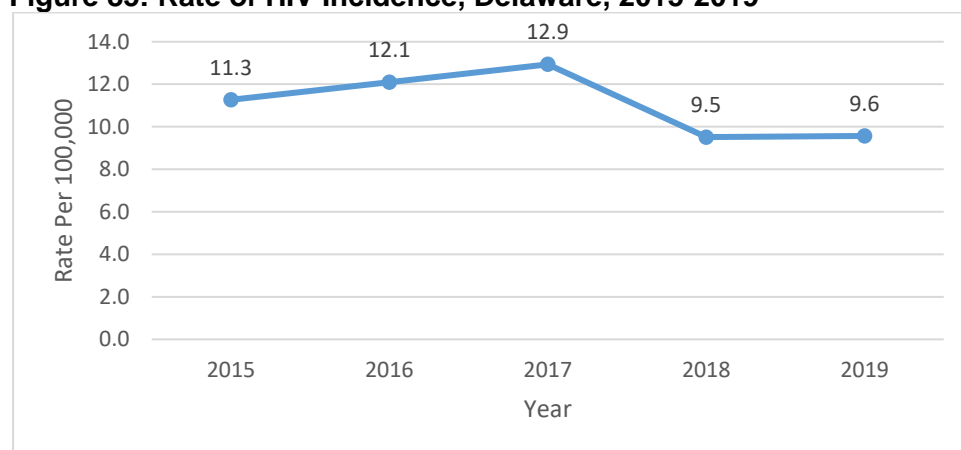
Table 40: Rate of HIV Incidence, Delaware, 2015-2019

Year	All		Male		Female	
	#	Rate*	#	Rate*	#	Rate*
2015	106	11.3	87	19.1	19	3.9
2016	115	12.1	88	19.1	27	5.5
2017	124	12.9	90	19.4	34	6.9
2018	92	9.5	69	14.7	23	4.6
2019	93	9.6	69	14.6	24	4.8

Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

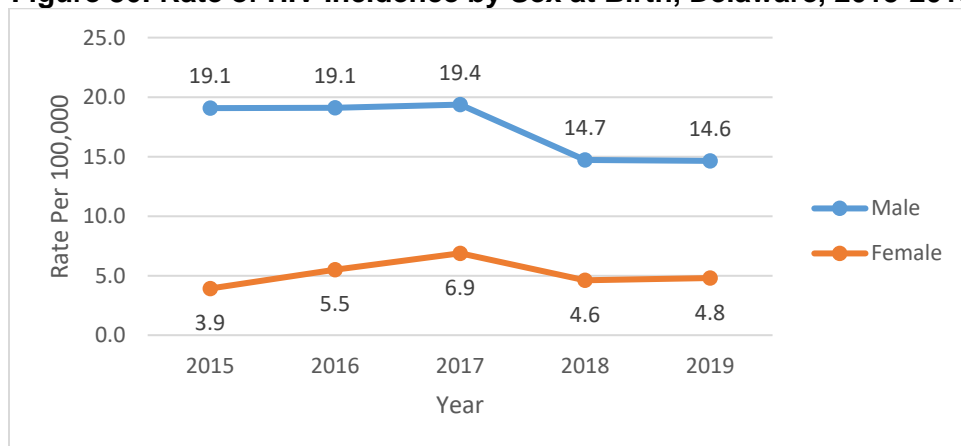
*per 100,000

Figure 85: Rate of HIV Incidence, Delaware, 2015-2019



Source: Delaware Department of Health and Social Services, Division of Public Health, 2020

Figure 86: Rate of HIV Incidence by Sex at Birth, Delaware, 2015-2019



Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

In Delaware, the five-year HIV incidence rate among African Americans (31.7) remains the highest among all groups. (Table 41 and Figure 87).

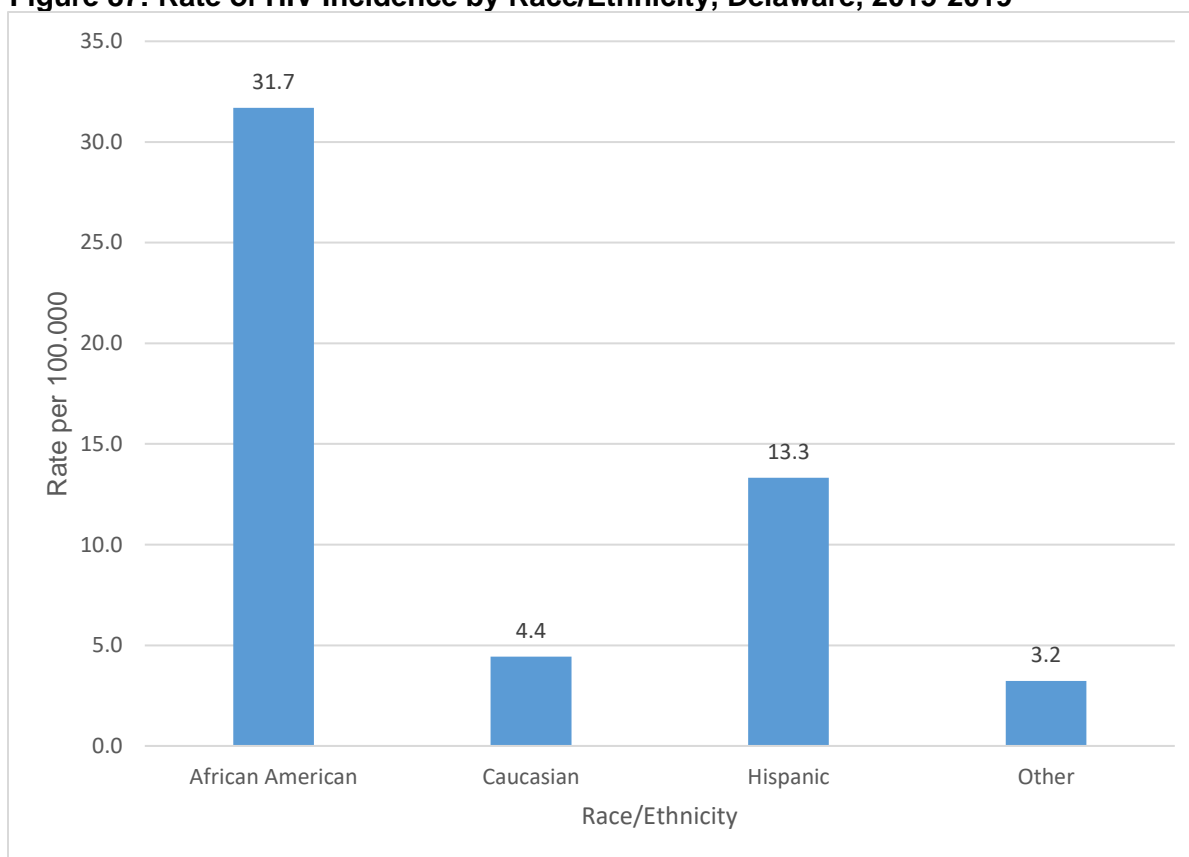
Table 41: Rate of HIV Incidence by Race/Ethnicity, Delaware, 2015-2019

Year	African American		Caucasian		Hispanic		Other	
	#	Rate*	#	Rate*	#	Rate*	#	Rate*
2015-2019	328	31.7	133	4.4	59	13.3	10	3.2

Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

*per 100,000

Figure 87: Rate of HIV Incidence by Race/Ethnicity, Delaware, 2015-2019



Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

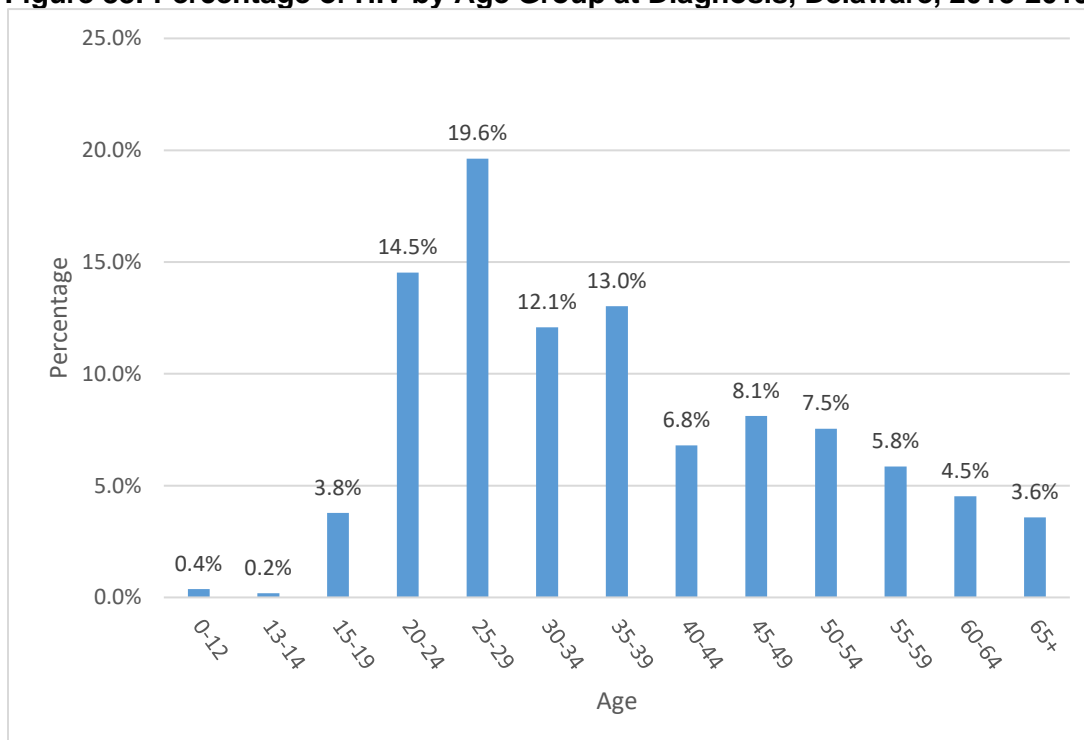
The highest rate of HIV infection in Delaware between 2015 and 2019, occurred among those 20-39 years old, accounting for 59% of all age groups (Table 42 and Figure 88).

Table 42: Cases of HIV by Age Group at Diagnosis, Delaware, 2015-2019

Age Group	#	%
00-12	2	0.4%
13-14	1	0.2%
15-19	20	3.8%
20-24	77	14.5%
25-29	104	19.6%
30-34	64	12.1%
35-39	69	13.0%
40-44	36	6.8%
45-49	43	8.1%
50-54	40	7.5%
55-59	31	5.8%
60-64	24	4.5%
65+	19	3.6%
Total	530	100.0%

Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

Figure 88: Percentage of HIV by Age Group at Diagnosis, Delaware, 2015-2019



Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

Statewide, MSM and heterosexual contact were the top two HIV exposure categories across a five-year time span with an average of 45% and 36%, respectively. All other risk categories comprised 19%. Delaware had one perinatal HIV case in 2017, the first in over eight years (Table 43 and Figure 89).

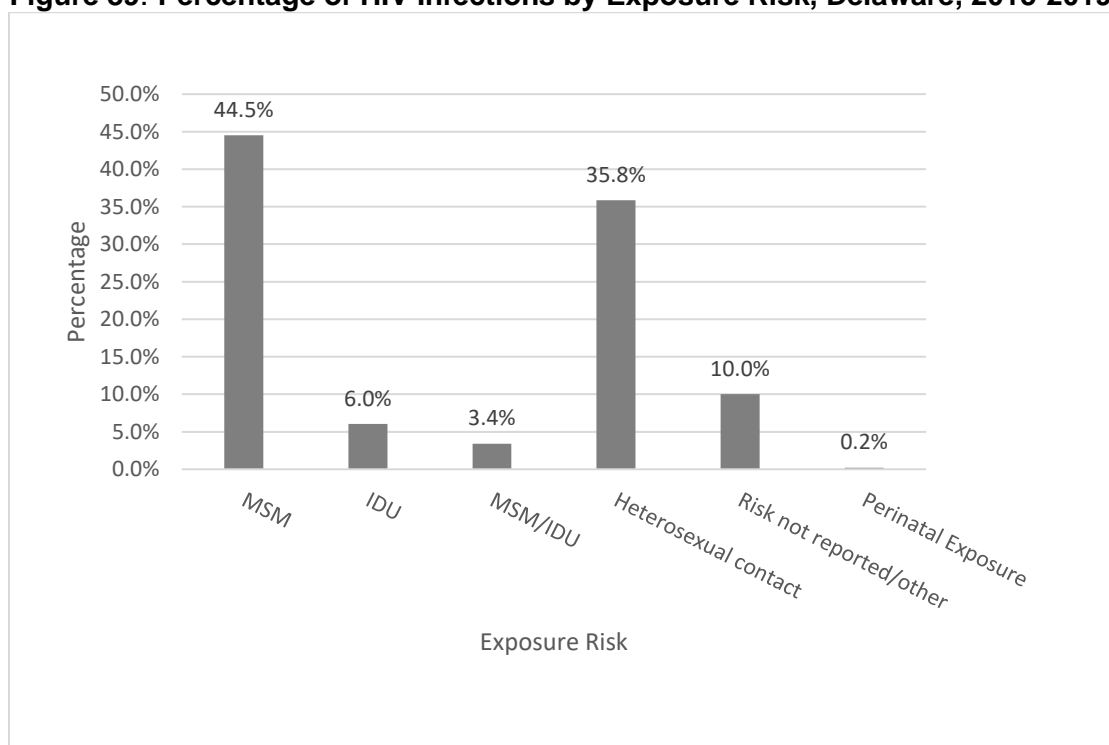
Table 43: HIV Infections by Exposure Risk, Delaware, 2015-2019

Exposure Risk	Years	
	2015-2019	
	#	%
Men Who Have Sex With Men (MSM)	236	44.5%
Injection Drug User (IDU)	32	6.0%
MSM/IDU	18	3.4%
Heterosexual contact	190	35.8%
Risk not reported/other	53	10.0%
Perinatal Exposure	1	0.2%
Total	530	100.0%

Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

Note: Only risk reported for cohort are listed.

Figure 89: Percentage of HIV Infections by Exposure Risk, Delaware, 2015-2019



Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

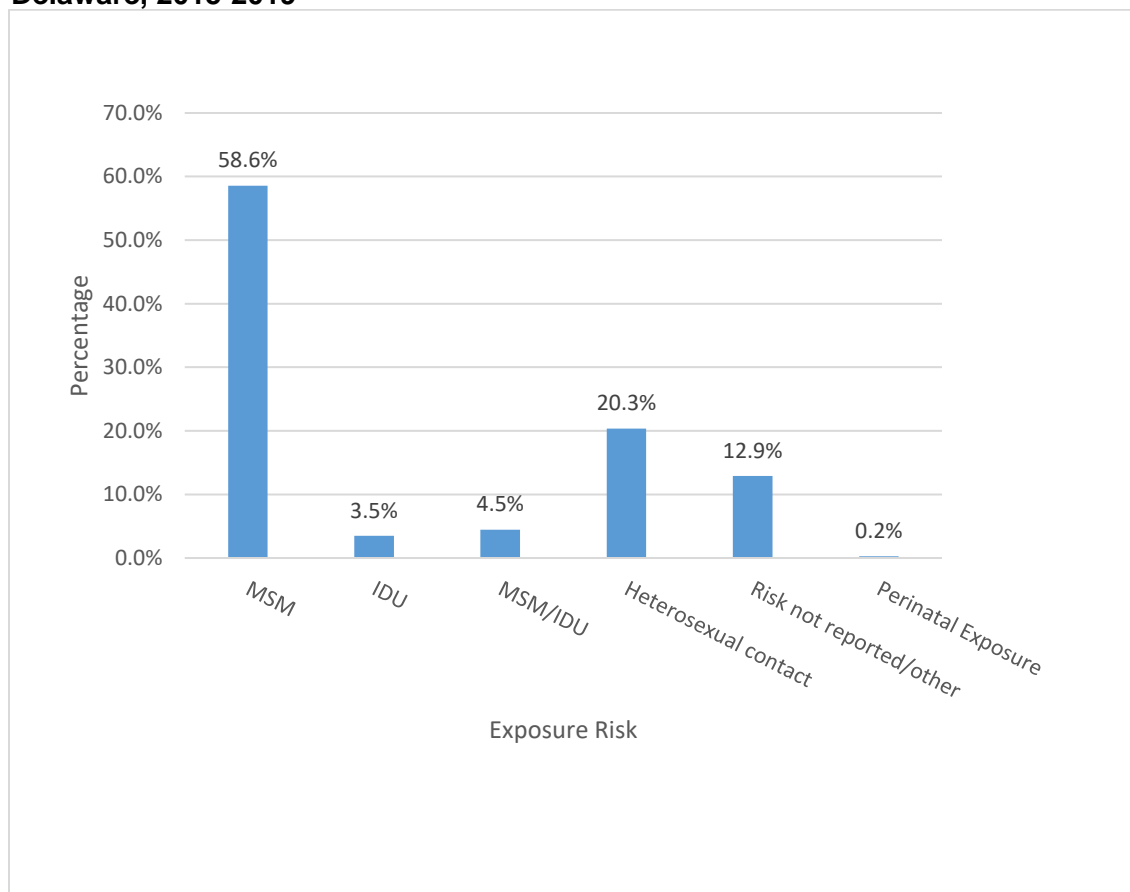
Over the five-year period (2015-2019) in Delaware, MSM and heterosexual contact were the top HIV exposure risks for males at 59% and 20%, respectively. Females had two exposure risks: heterosexual contact (86%) and IDU (14%) (Tables 44-45 and Figures 90-91).

Table 44: HIV Infections by Exposure Risk among Males, Delaware, 2015-2019

Exposure Risk	Years	
	2015-2019	
	#	%
Men Who Have Sex with Men (MSM)	236	58.6%
Injection Drug User (IDU)	14	3.5%
MSM/IDU	18	4.5%
Heterosexual contact	82	20.3%
Risk not reported/other	52	12.9%
Pediatric Exposure	1	0.2%
Total	403	100.0%

Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.
Note: Only risk reported for cohort are listed.

Figure 90: Percentage of HIV Infections by Exposure Risk among Males, Delaware, 2015-2019



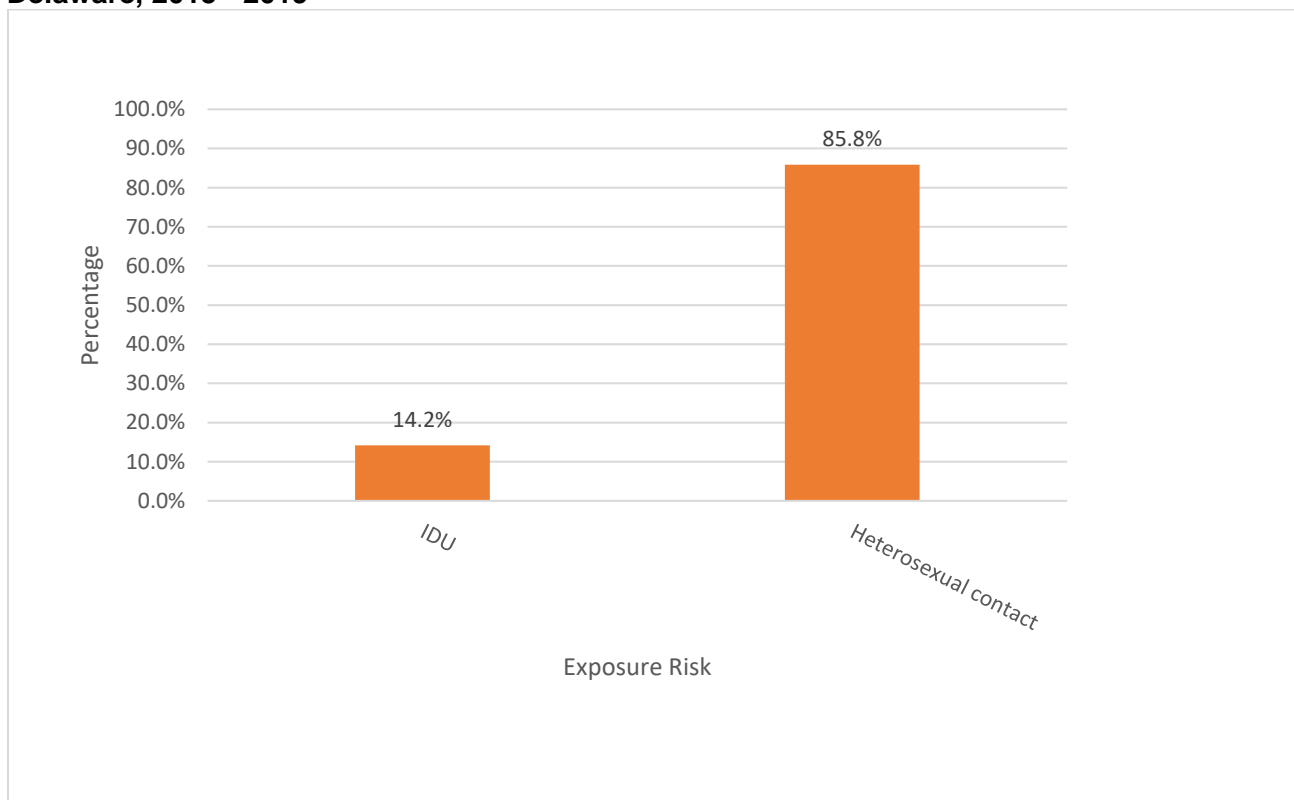
Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

Table 45: HIV Infections by Exposure Risk among Females, Delaware, 2015-2019

Exposure Risk	Years	
	2015-2019	
	#	%
Injection Drug User (IDU)	18	14.2%
Heterosexual contact	109	85.8%
Total	127	100.0%

Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.
Note: Only risk reported for cohort are listed.

Figure 91: Percentage of HIV Infections by Exposure Risk among Females, Delaware, 2015 - 2019



Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

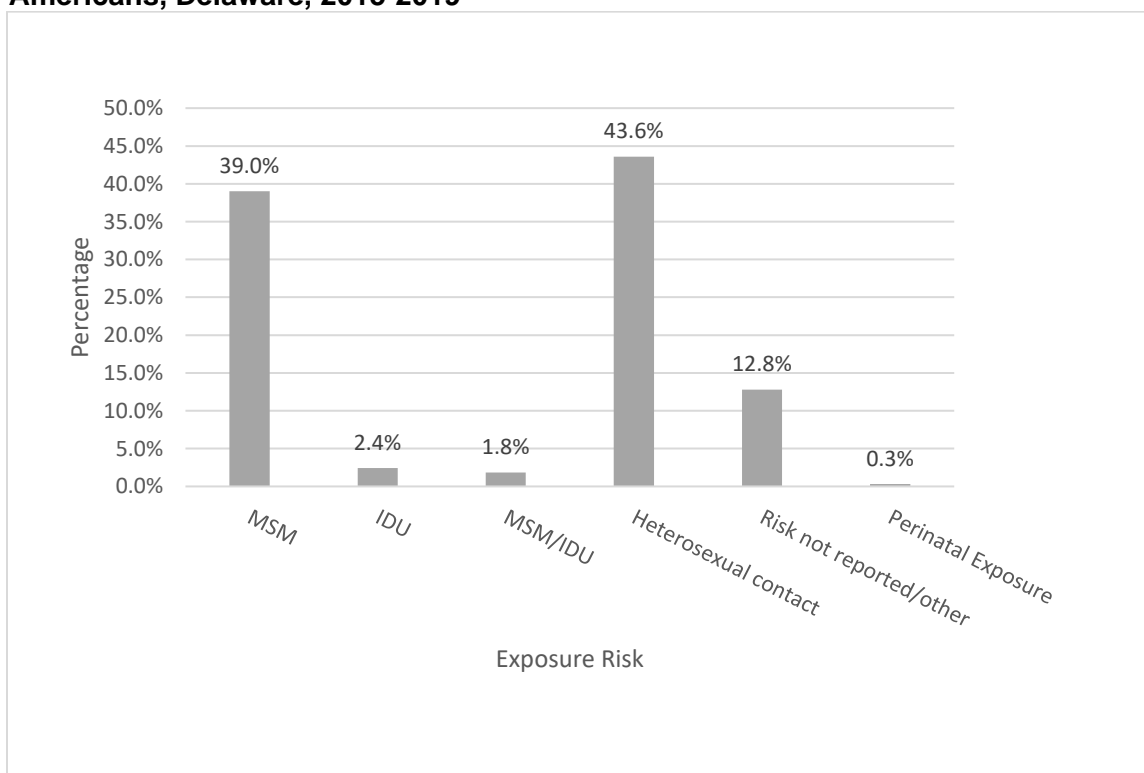
In Delaware, the top HIV exposure risks for African Americans over the five-year period (2015-2019) were heterosexual contact (44%) and MSM (39%). The top HIV exposure risks for Caucasians were MSM (56%) and heterosexual contact (19%) (Tables 46-47 and Figures 92-93).

Table 46: HIV Infections by Exposure Risk among African Americans, Delaware, 2015-2019

Exposure Risk	Years	
	2015-2019	
	#	%
Men Who Have Sex With Men (MSM)	128	39.0%
Injection Drug User (IDU)	8	2.4%
MSM/IDU	6	1.8%
Heterosexual contact	143	43.6%
Risk not reported/other	42	12.8%
Perinatal Exposure	1	0.3%
Total	328	100.0%

Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.
Note: Only risk reported for cohort are listed.

Figure 92: Percentage of HIV Infections by Exposure Risk among African Americans, Delaware, 2015-2019



Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

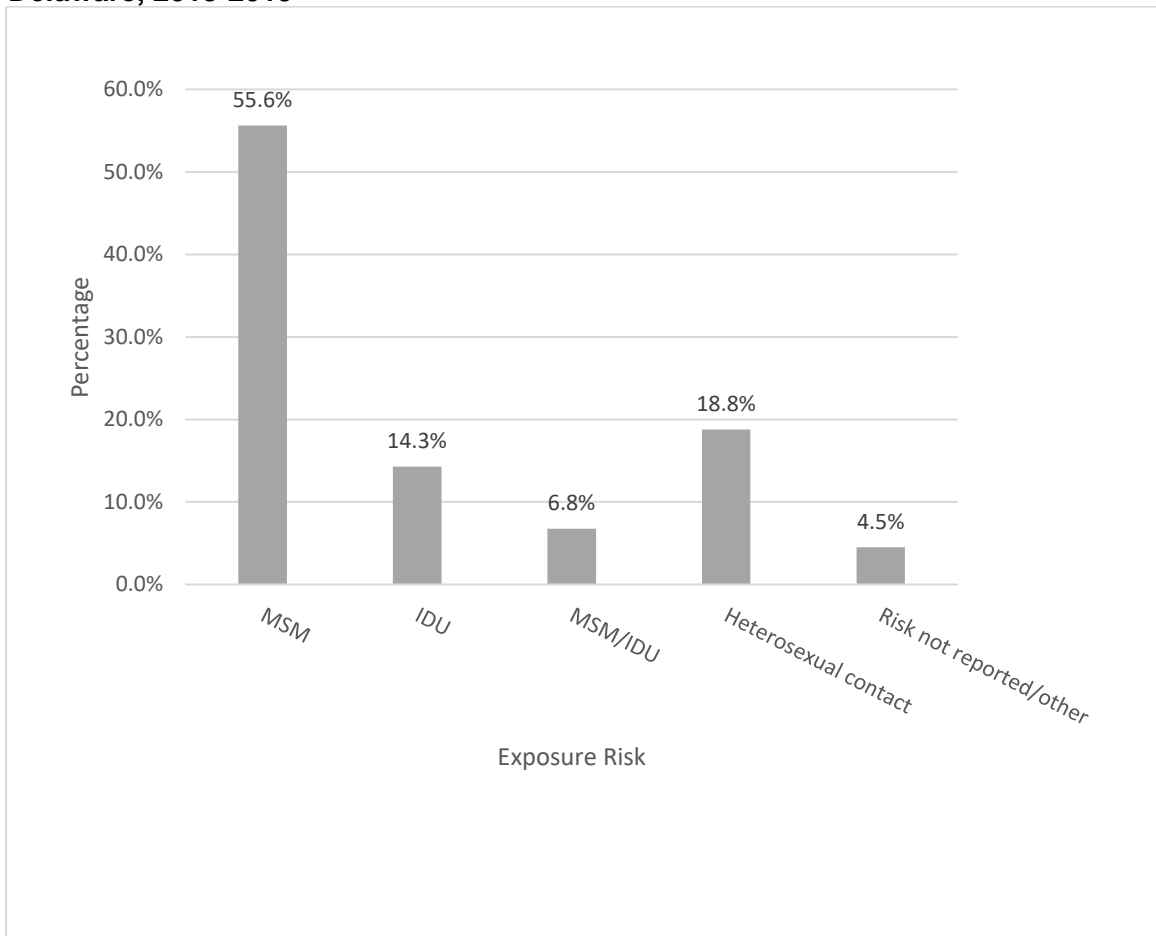
Table 47: HIV Infections by Exposure Risk among Caucasians, Delaware, 2015-2019

Exposure Risk	Years	
	2015-2019	
	#	%
Men Seeking Men (MSM)	74	55.6%
Intravenous Drug User (IDU)	19	14.3%
MSM/IDU	9	6.8%
Heterosexual contact	25	18.8%
Risk not reported/other	6	4.5%
Total	133	100.0%

Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

Note: Only risk reported for cohort are listed.

Figure 93: Percentage of HIV Infections by Exposure Risk among Caucasians, Delaware, 2015-2019



Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

Over the five-year period 2015-2019 in Delaware, the top HIV exposure risks for Hispanics were MSM and heterosexual contact at 46% and 32%, respectively. For all other races (American Indian, Alaskan Native, Native Hawaiian/Pacific Islander, and Asian), the leading exposure risks were MSM (70%) and heterosexual contact (30%) (Tables 48-49 and Figures 94-95).

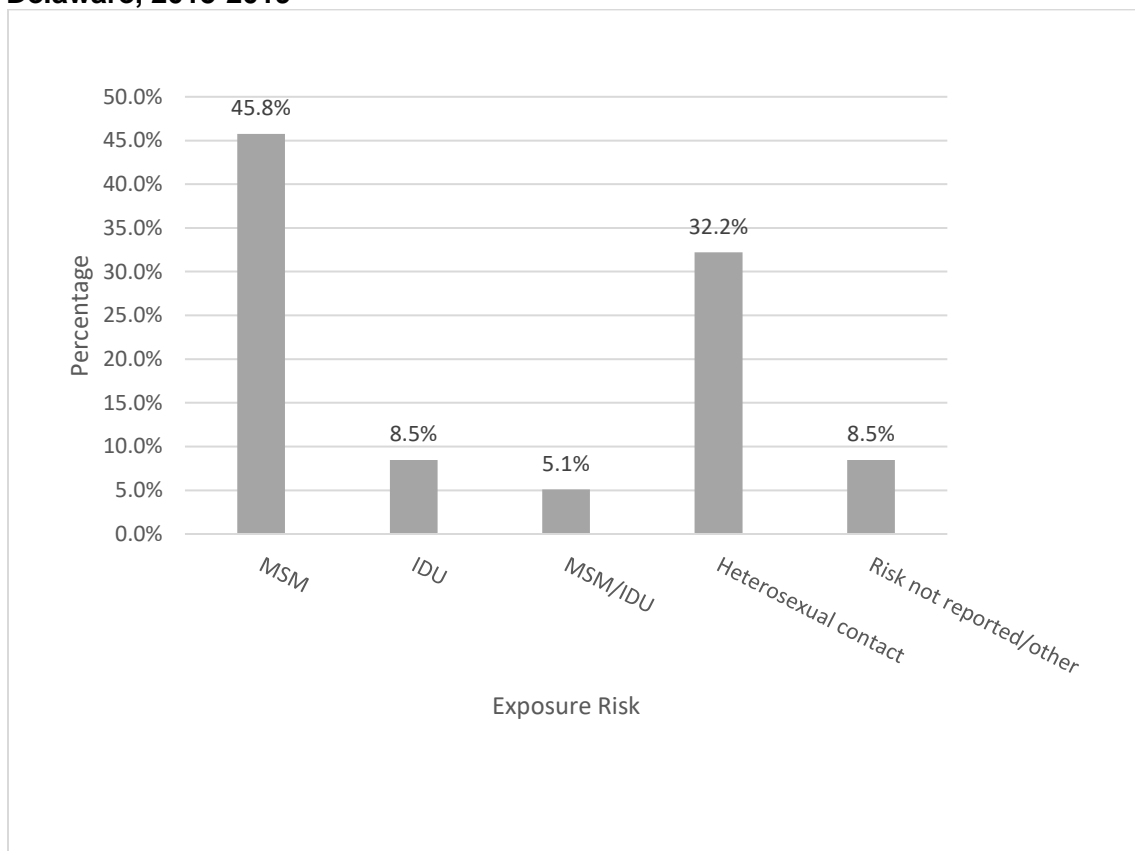
Table 48: HIV Infections by Exposure Risk among Hispanics, Delaware, 2015-2019

Exposure Risk	Years	
	2015-2019	
	#	%
Men Who Have Sex With Men (MSM)	27	45.8%
Injection Drug User (IDU)	5	8.5%
MSM/IDU	3	5.1%
Heterosexual contact	19	32.2%
Risk not reported/other	5	8.5%
Total	59	100.0%

Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

Note: Only risk reported for cohort are listed.

Figure 94: Percentage of HIV Infections by Exposure Risk among Hispanics, Delaware, 2015-2019



Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

Table 49: HIV Infections by Exposure Risk among Other Races, Delaware, 2015-2019

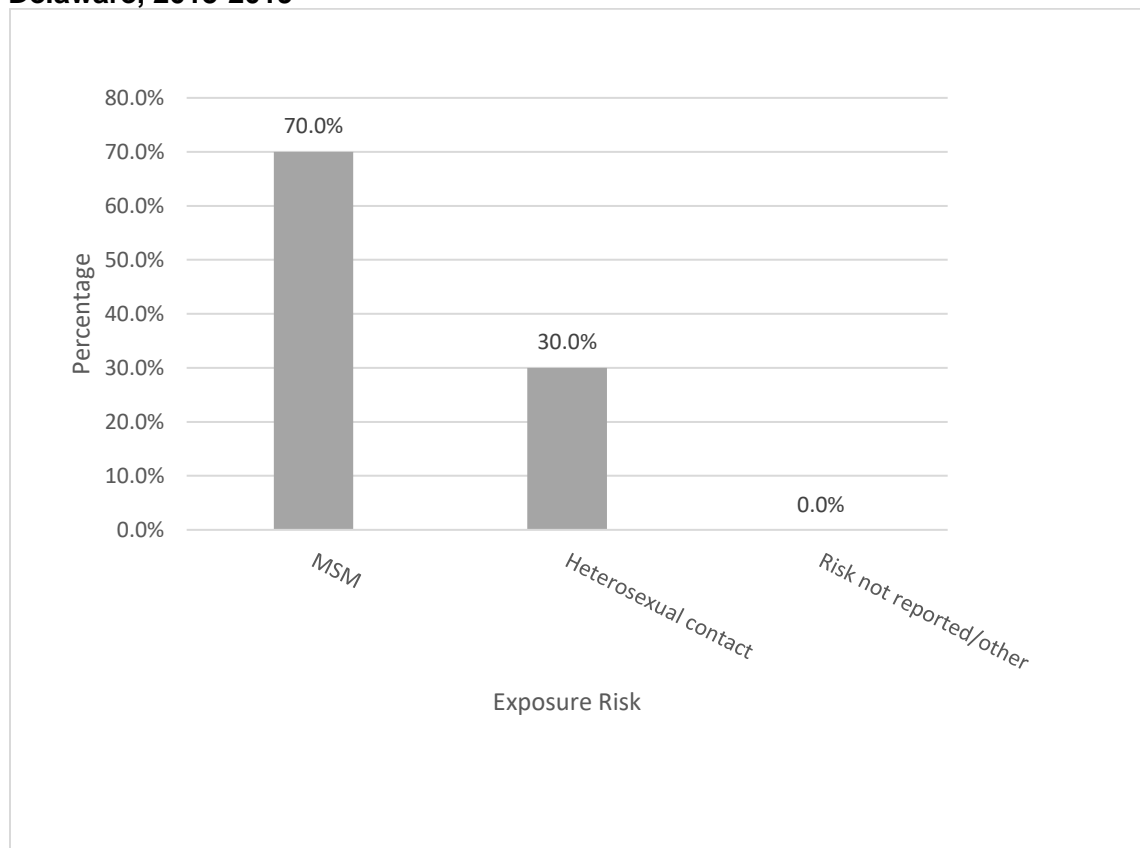
Exposure Risk	Years	
	2015-2019	
	#	%
Men Who Have Sex With Men (MSM)	7	70.0%
Heterosexual contact	3	30.0%
Risk not reported/other	0	0.0%
Total	10	100.0%

Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

Note: Other Races includes American Indian/Alaskan Native, Asian, Native Hawaiian/Pacific Islander, Multi-Race and Unknown Race.

Note: Only risk reported for cohort are listed.

Figure 95: Percentage of HIV Infections by Exposure Risk among Other Races, Delaware, 2015-2019



Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

HIV Incidence in New Castle County, Delaware 2015-2019

In New Castle County, the HIV incidence rate dropped from a high of 16.7 in 2017 to 9.4 in 2019. The five-year average incidence rate is 12.5 per 100,000. Among New Castle County males, the five-year average rate of HIV incidence (19.1 per 100,000) is nearly three times higher than among New Castle County females (6.3 per 100,000) (Table 50 and Figures 96 and 97).

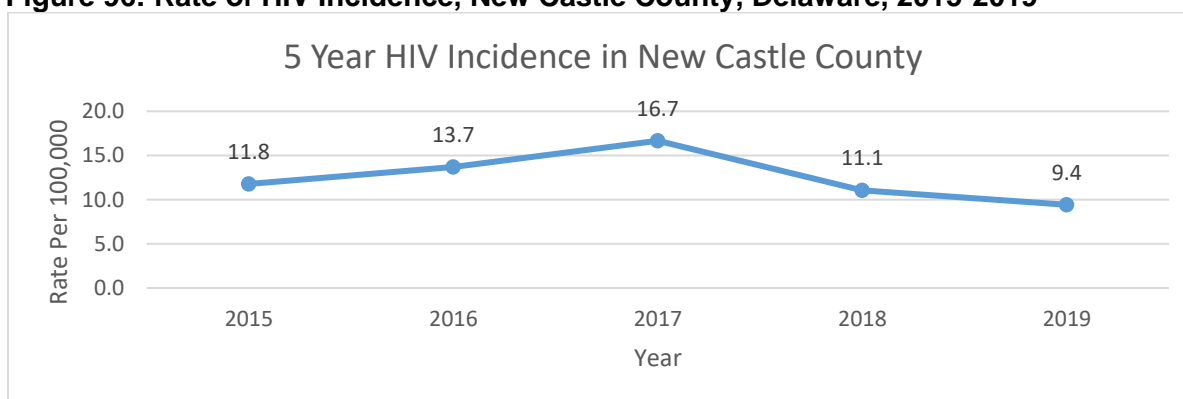
Table 50: HIV Incidence, New Castle County, Delaware, 2015-2019

Year	All		Male		Female	
	#	Rate*	#	Rate*	#	Rate*
2015	65	11.8	52	19.4	13	4.6
2016	76	13.7	56	20.8	20	7.0
2017	93	16.7	66	24.3	27	9.4
2018	62	11.1	45	16.5	17	5.9
2019	53	9.4	40	14.6	13	4.5

Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

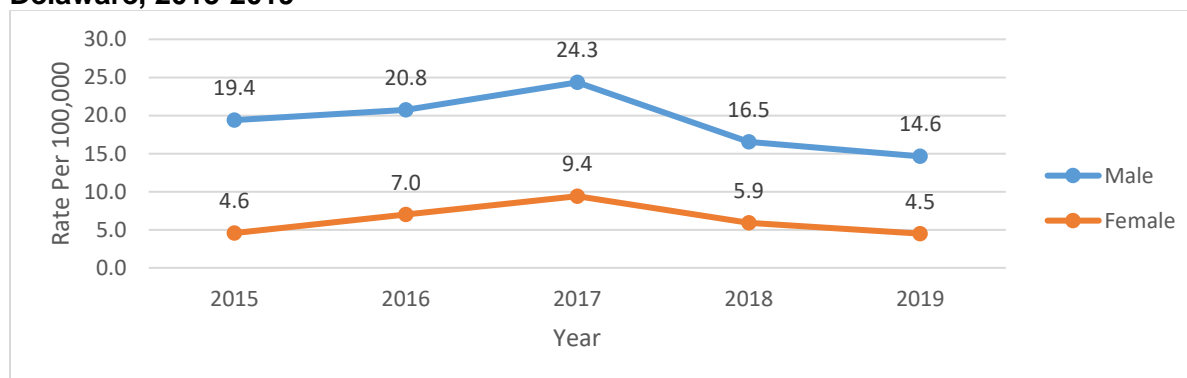
*per 100,000

Figure 96: Rate of HIV Incidence, New Castle County, Delaware, 2015-2019



Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

Figure 97: Rate of HIV Incidence by Birth Sex, New Castle County, Delaware, 2015-2019



Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

The HIV incidence rate among African Americans in New Castle County from 2015-2019 is the highest among all groups in this measure at 32.2 per 100,000 population. (Table 51 and Figure 98).

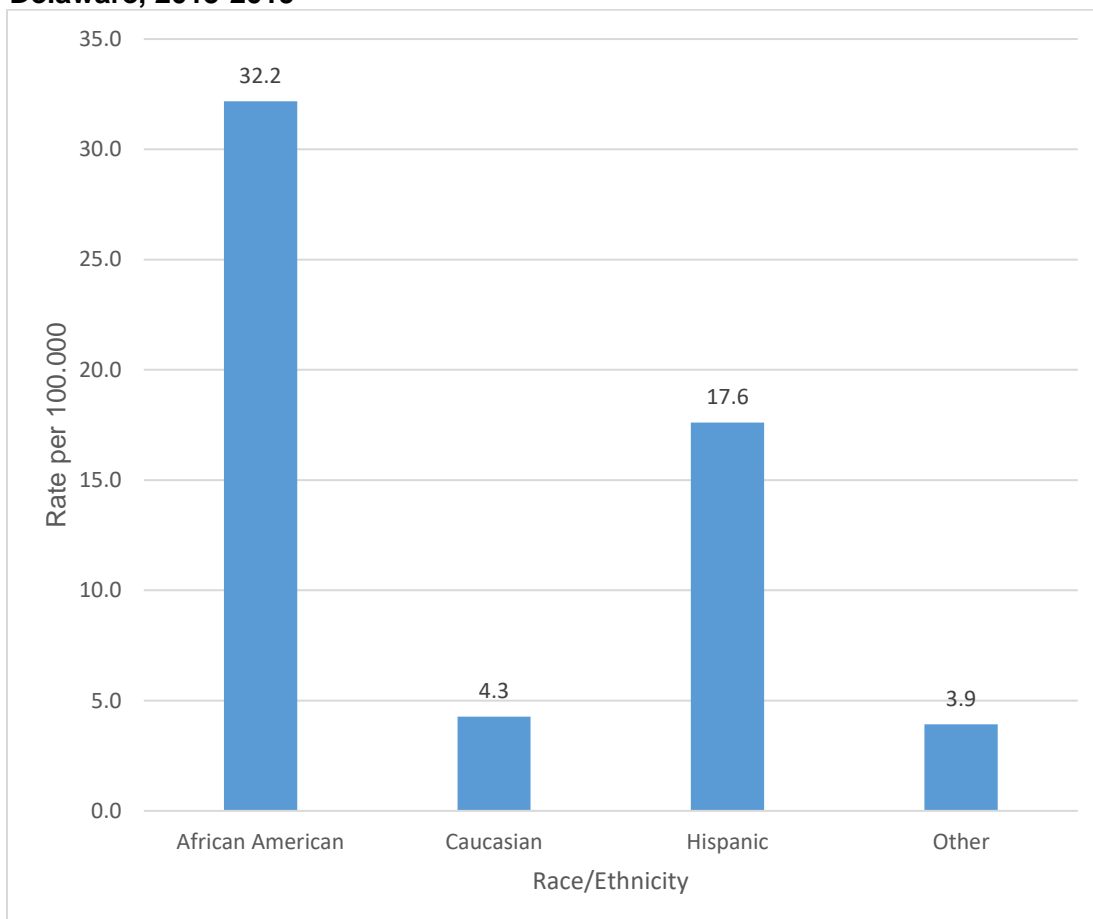
Table 51: HIV Incidence by Race/Ethnicity, New Castle County, Delaware, 2015-2019

Year	African American		Caucasian		Hispanic		Other	
	#	Rate*	#	Rate*	#	Rate*	#	Rate*
2015-2019	223	32.2	69	4.3	49	17.6	8	3.9

Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

*per 100,000

Figure 98: Rate of HIV Incidence by Race and Ethnicity, New Castle County, Delaware, 2015-2019



Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

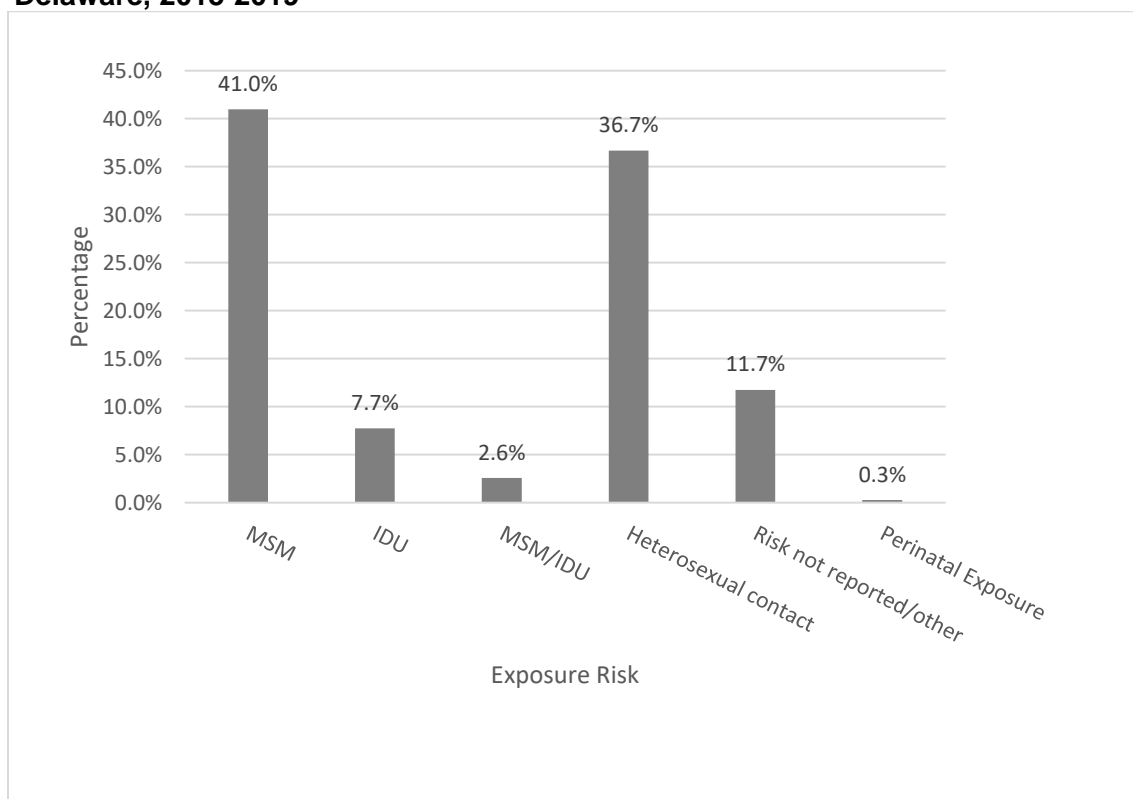
In New Castle County (2015-2019), the highest HIV exposure risks were MSM (41%) and heterosexual contact (37%). All other risk categories account for 22% (Table 52 and Figure 99) of exposures.

Table 52: HIV Infections by Exposure Risk, New Castle County, Delaware, 2015-2019

Exposure Risk	Years	
	2013-2017	
	#	%
Men Who Have Sex with Men (MSM)	143	41.0%
Injection Drug User (IDU)	27	7.7%
MSM/IDU	9	2.6%
Heterosexual contact	128	36.7%
Risk not reported/other	41	11.7%
Perinatal Exposure	1	0.3%
Total	349	100.0%

Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

Figure 99: Percentage of HIV Infections by Exposure Risk, New Castle County, Delaware, 2015-2019



Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

HIV Incidence in Kent County, Delaware, 2015-2019

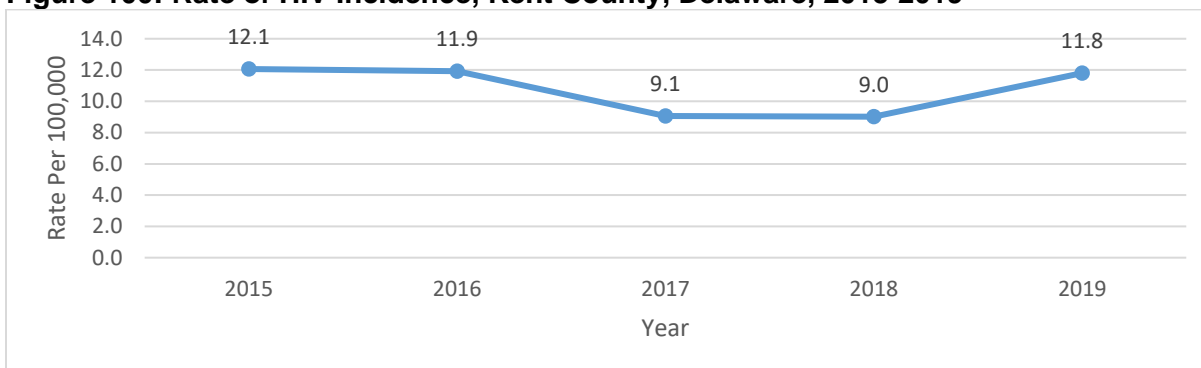
The overall HIV incidence rate in Kent County, has shown a small decline with a five-year average incidence rate of 10.8 per 100,000 population. The average HIV incidence rate among males in Kent County is 16.3 per 100,000 Population, while females are 5.7 per 100,000 population within the five-year period (Table 53 and Figures 100 and 101).

Table 53: HIV Incidence, Kent County, Delaware, 2015-2019

Year	Cases	
	#	Rate*
2015	21	12.1
2016	21	11.9
2017	16	9.1
2018	16	9.0
2019	21	11.8

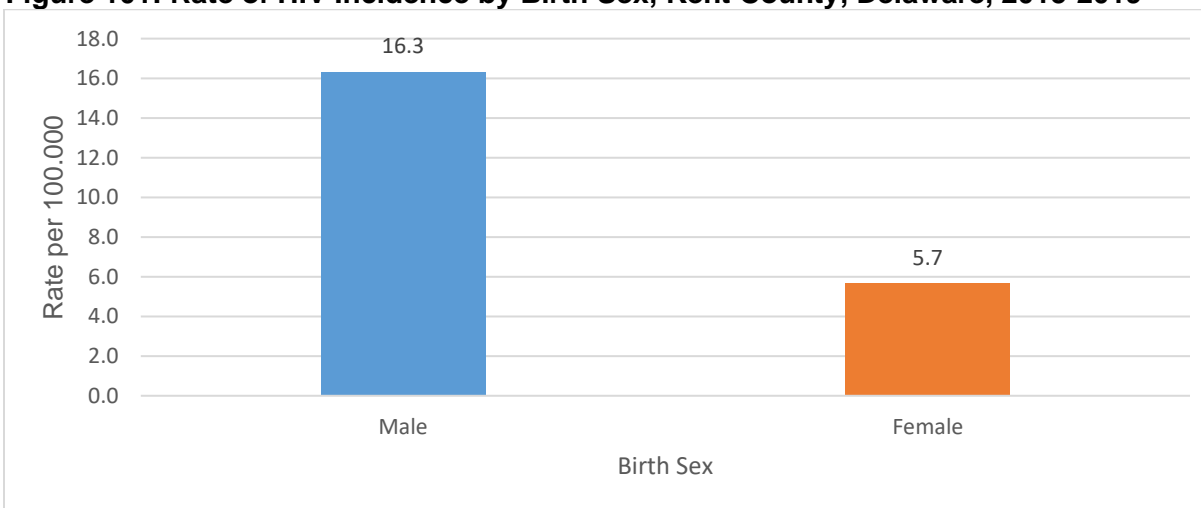
Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.
*per 100,000

Figure 100: Rate of HIV Incidence, Kent County, Delaware, 2015-2019



Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

Figure 101: Rate of HIV Incidence by Birth Sex, Kent County, Delaware, 2015-2019



Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

By race and ethnicity, the five-year average HIV incidence rate among African Americans in Kent County remained the highest among all groups at 32.5 per 100,000 population (Table 54 and Figure 102).

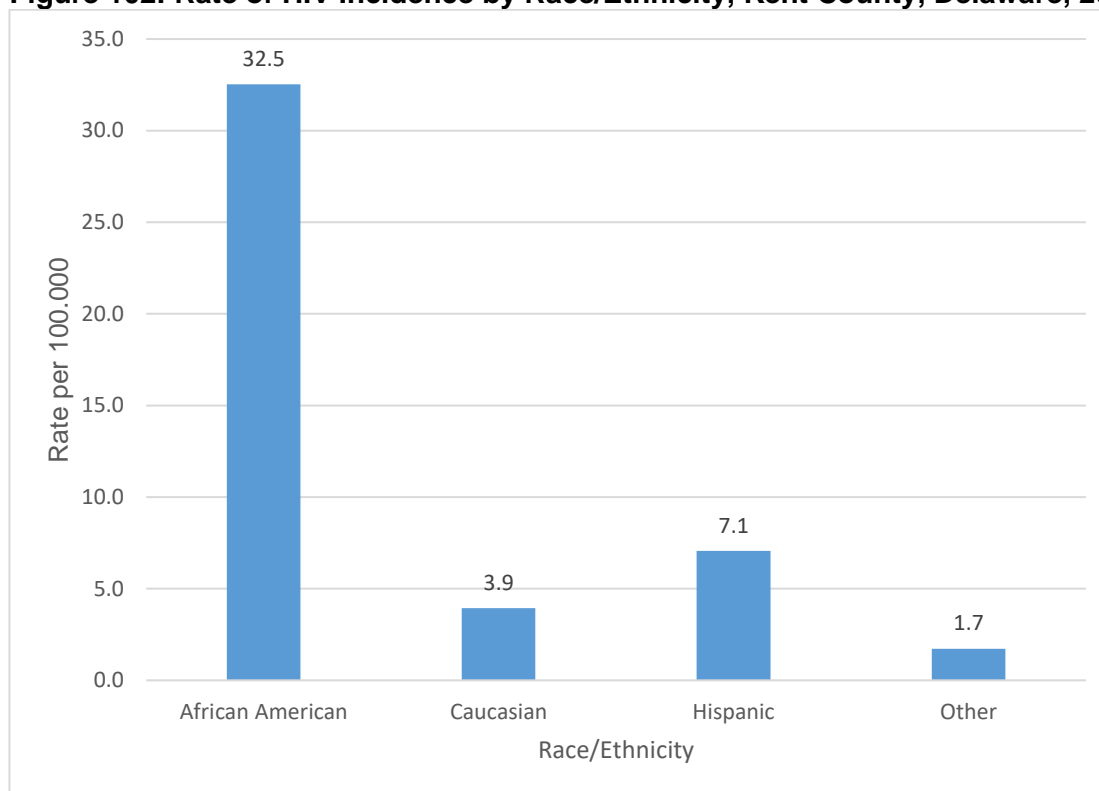
Table 54: HIV Incidence by Race/Ethnicity, Kent County, Delaware, 2015-2019

	African American		Caucasian		Hispanic		Other	
Year	#	Rate*	#	Rate*	#	Rate*	#	Rate*
2015-2019	68	32.5	22	3.9	4	7.1	1	1.7

Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

*per 100,000

Figure 102: Rate of HIV Incidence by Race/Ethnicity, Kent County, Delaware, 2015-2019



Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

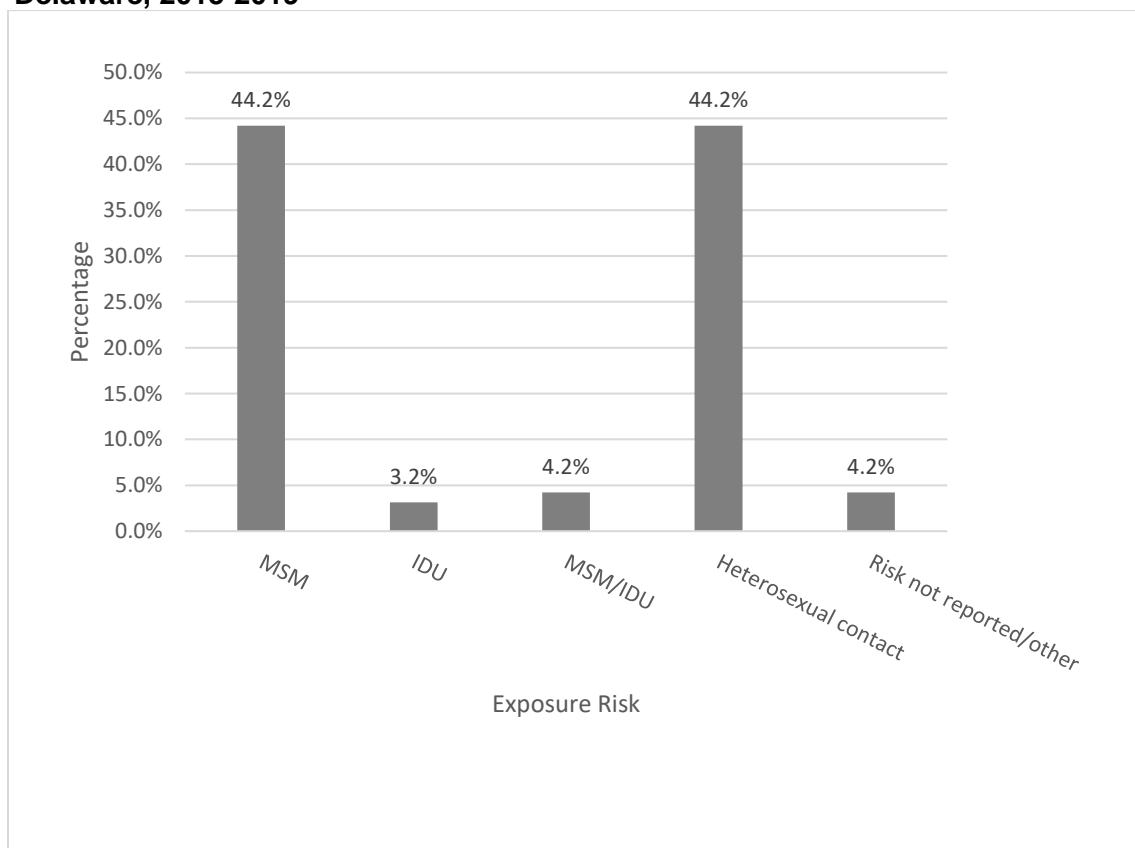
In Kent County, MSM and heterosexual contact are the highest HIV exposure risks at 44% each. All other risk categories account for 12% (Table 55 and Figure 103).

Table 55: HIV Infections by Exposure Risk, Kent County, Delaware, 2015-2019

Exposure Risk	Years	
	2015-2019	
	#	%
Men Who Have Sex With Men (MSM)	42	44.2%
Injection Drug User (IDU)	3	3.2%
MSM/IDU	4	4.2%
Heterosexual contact	42	44.2%
Risk not reported/other	4	4.2%
Total	95	100.0%

Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

Figure 103: Percentage of HIV Infections by Exposure Risk, Kent County, Delaware, 2015-2019



Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

HIV Incidence in Sussex County, Delaware, 2015-2019

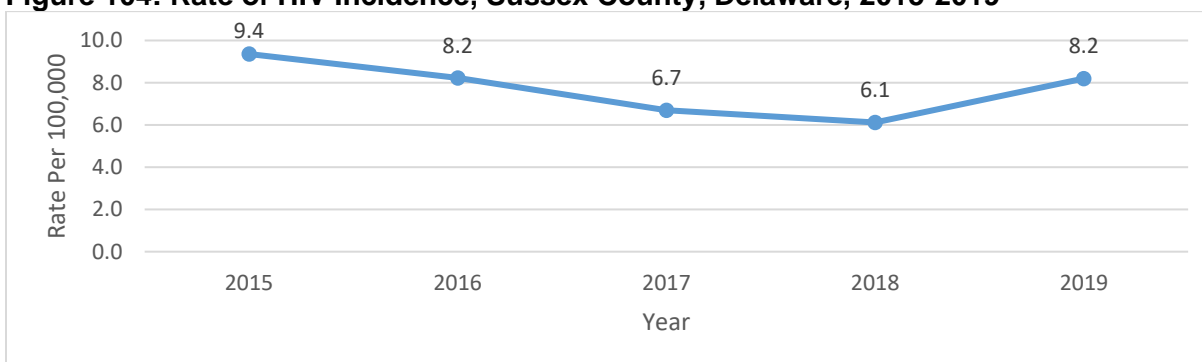
The overall HIV incidence rate has declined from 9.4 (per 100,000 population) in 2015 to 8.2 (per 100,000) in 2019. Sussex County had a five year average incidence rate of 7.7. The HIV incidence rate among Sussex County males is 86% higher than among Sussex County females (Table 56 and Figures 104 and 105).

Table 56: HIV Incidence, Sussex County, Delaware, 2015–2019

Year	Cases	
	#	Rate*
2015	20	9.4
2016	18	8.2
2017	15	6.7
2018	14	6.1
2019	19	8.2

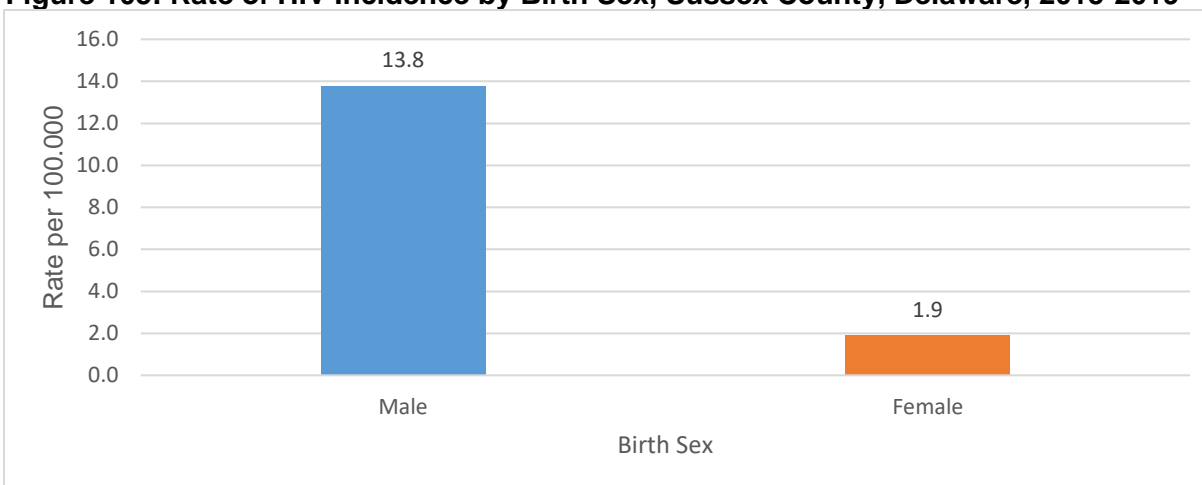
Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.
*per 100,000

Figure 104: Rate of HIV Incidence, Sussex County, Delaware, 2015-2019



Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

Figure 105: Rate of HIV Incidence by Birth Sex, Sussex County, Delaware, 2015-2019



Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

In Sussex County, the HIV incidence rate among African Americans remains the highest among all groups with a five-year average rate of 27.9 per 100,000 population (Table 57 and Figure 106).

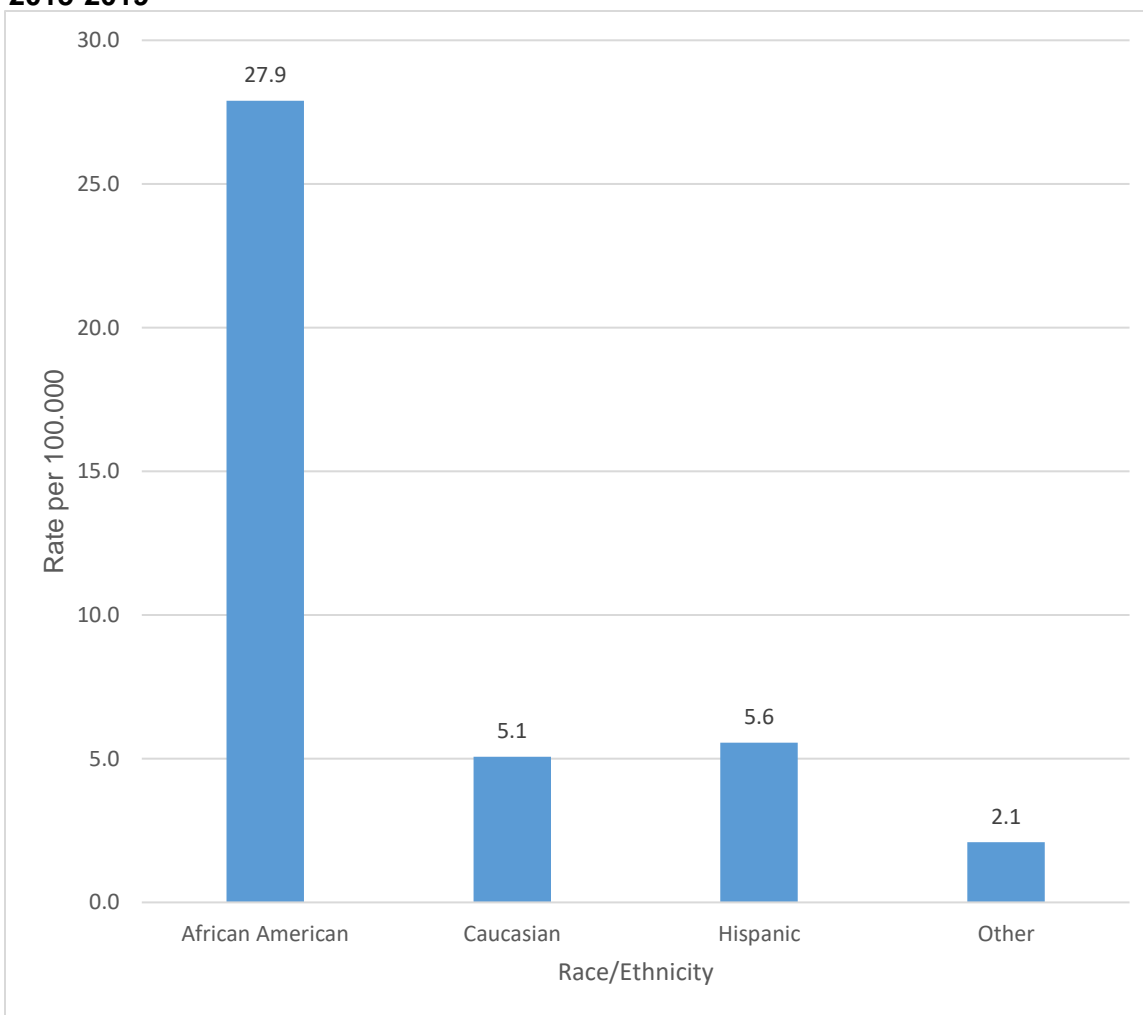
Table 57: HIV Incidence by Race/Ethnicity, Sussex County, Delaware, 2015-2019

	African American		Caucasian		Hispanic		Other	
Year	#	Rate*	#	Rate*	#	Rate*	#	Rate*
2015-2019	37	27.9	42	5.1	6	5.6	1	2.1

Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

*per 100,000

Figure 106: Rate of HIV Incidence by Race/Ethnicity, Sussex County, Delaware, 2015-2019



Source: Delaware Department of Health and Social Services, Division of Public Health, 2020

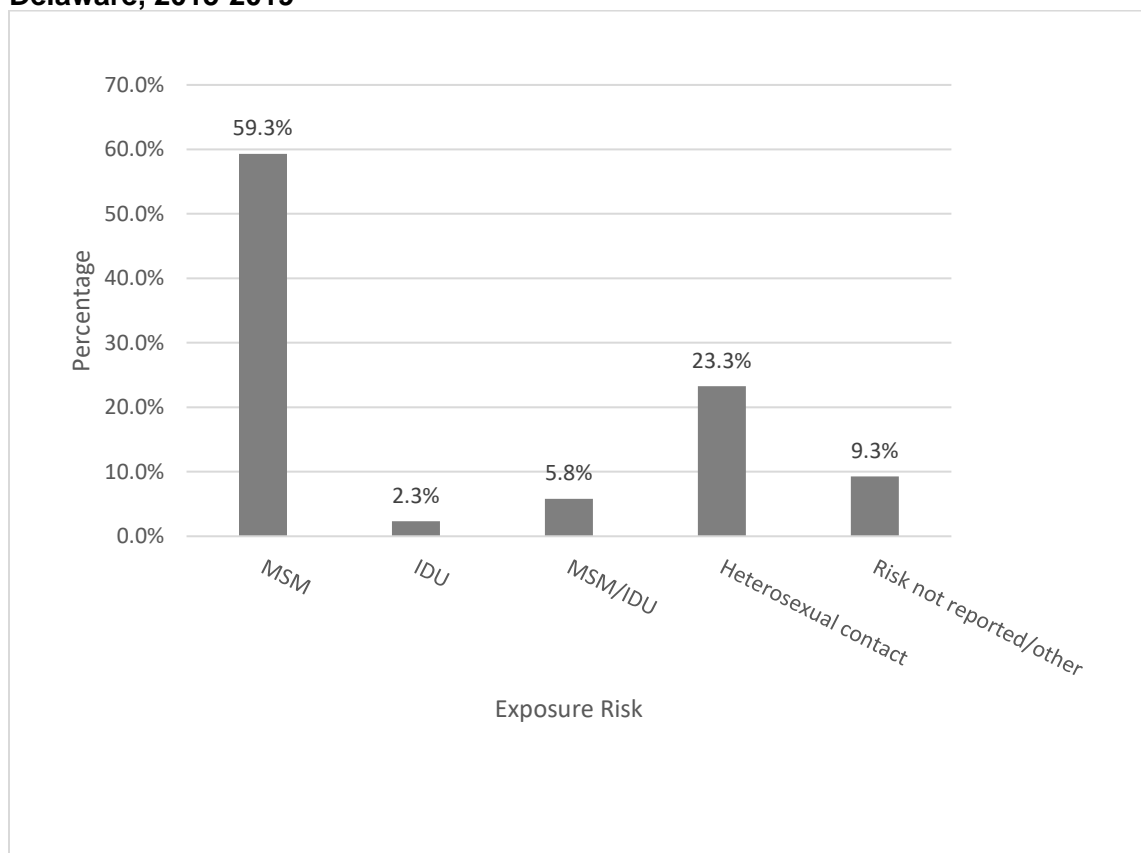
In Sussex County, MSM was the highest HIV exposure risk factor from 2015-2019 at 59%, and heterosexual contact followed at 23%. All other risk groups accounted for 18% of exposures (Table 58 and Figure 107).

Table 58: HIV Infection by Exposure Risk, Sussex County, Delaware, 2015-2019

Exposure Risk	Years	
	2015-2019	
	#	%
Men Who Have Sex with Men (MSM)	51	59.3%
Injection Drug User (IDU)	2	2.3%
MSM/IDU	5	5.8%
Heterosexual contact	20	23.3%
Risk not reported/other	8	9.3%
Total	86	100.0%

Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.
*per 100,000

Figure 107: Percentage of HIV infections by Exposure Risk, Kent County, Delaware, 2015-2019



Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

Stage 3 HIV (AIDS) Incidence, 2015-2019

Stage 3 HIV (AIDS) Incidence in Delaware, 2015-2019

Delaware's Stage 3 HIV (AIDS) incidence rate decreased from 7.0 per 100,000 population in 2015 to 4.5 per 100,000 in 2019 with a five-year average incidence rate of 5.9 per 100,000. The average rate among Delaware males (9.0 per 100,000) is three times higher than among Delaware females (3.0 per 100,000) (Table 59 and Figures 108-109).

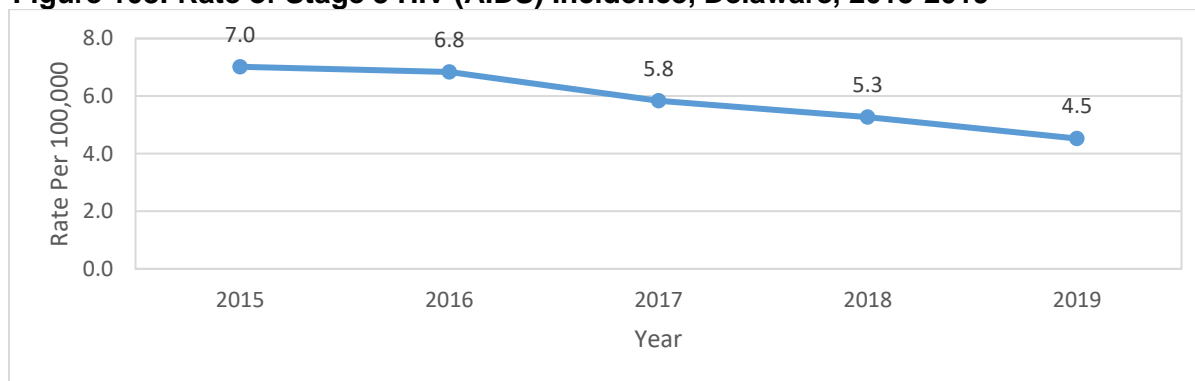
Table 59: Stage 3 HIV (AIDS) Diagnosis, All and by Birth Sex, Delaware, 2015 - 2019

Year	All		Male		Female	
	#	Rate*	#	Rate*	#	Rate*
2015	66	7.0	49	10.7	17	3.5
2016	65	6.8	51	11.1	14	2.9
2017	56	5.8	43	9.3	13	2.6
2018	51	5.3	36	7.7	15	3.0
2019	44	4.5	29	6.2	15	3.0

Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

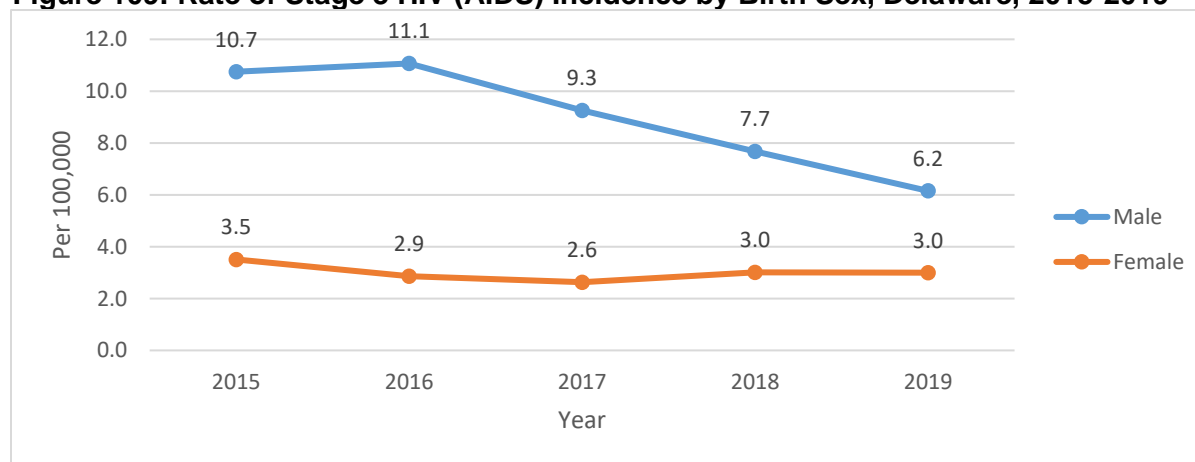
*per 100,000

Figure 108: Rate of Stage 3 HIV (AIDS) Incidence, Delaware, 2015-2019



Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

Figure 109: Rate of Stage 3 HIV (AIDS) Incidence by Birth Sex, Delaware, 2015-2019



Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

In Delaware, the five-year average Stage 3 HIV (AIDS) incidence rate among African Americans is the highest among all groups at 17.9 per 100,000 (Table 60 and Figure 110).

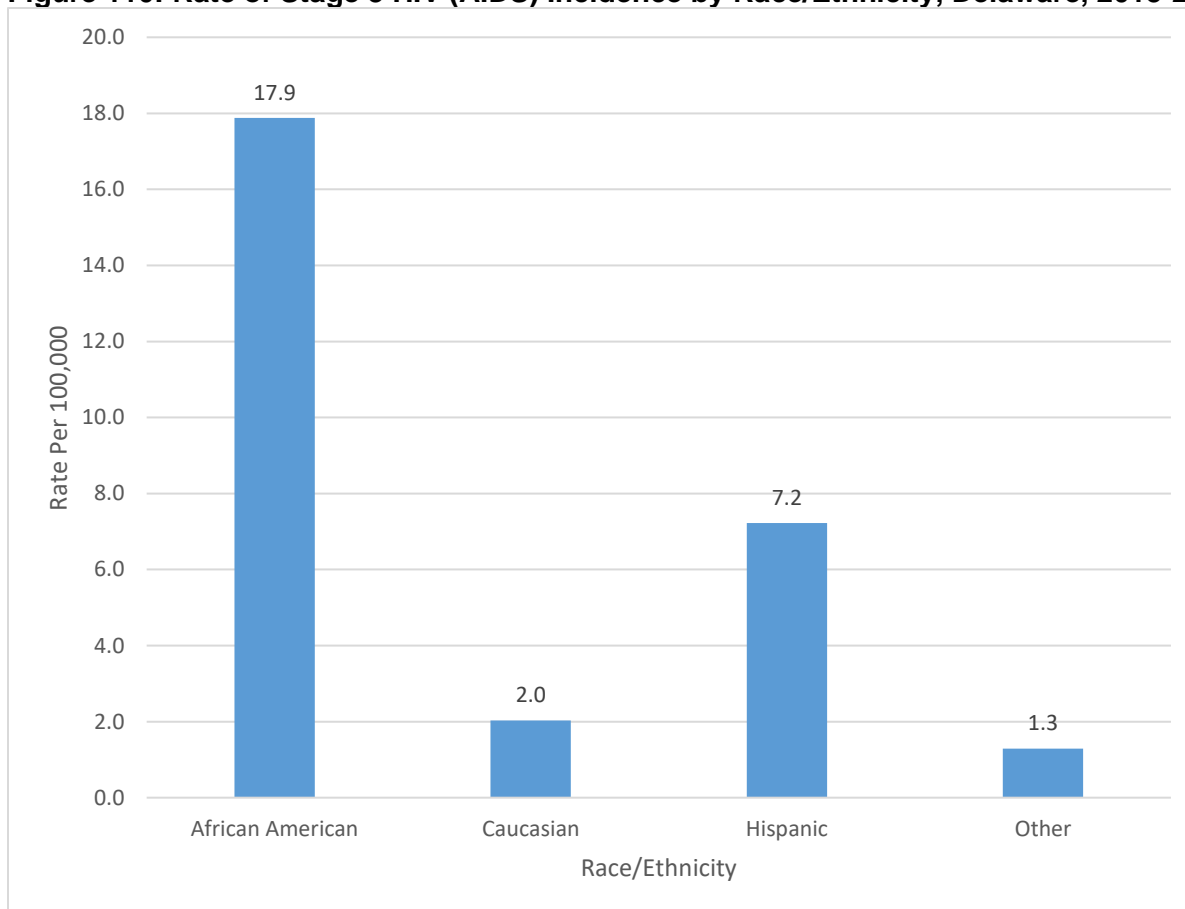
Table 60: Stage 3 HIV (AIDS) Diagnosis by Race/Ethnicity, Delaware, 2015-2019

	African American		Caucasian		Hispanic		Other	
Year	#	Rate*	#	Rate*	#	Rate*	#	Rate*
2015-2019	185	17.9	61	2.0	32	7.2	4	1.3

Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

*per 100,000

Figure 110: Rate of Stage 3 HIV (AIDS) Incidence by Race/Ethnicity, Delaware, 2015-2019



Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

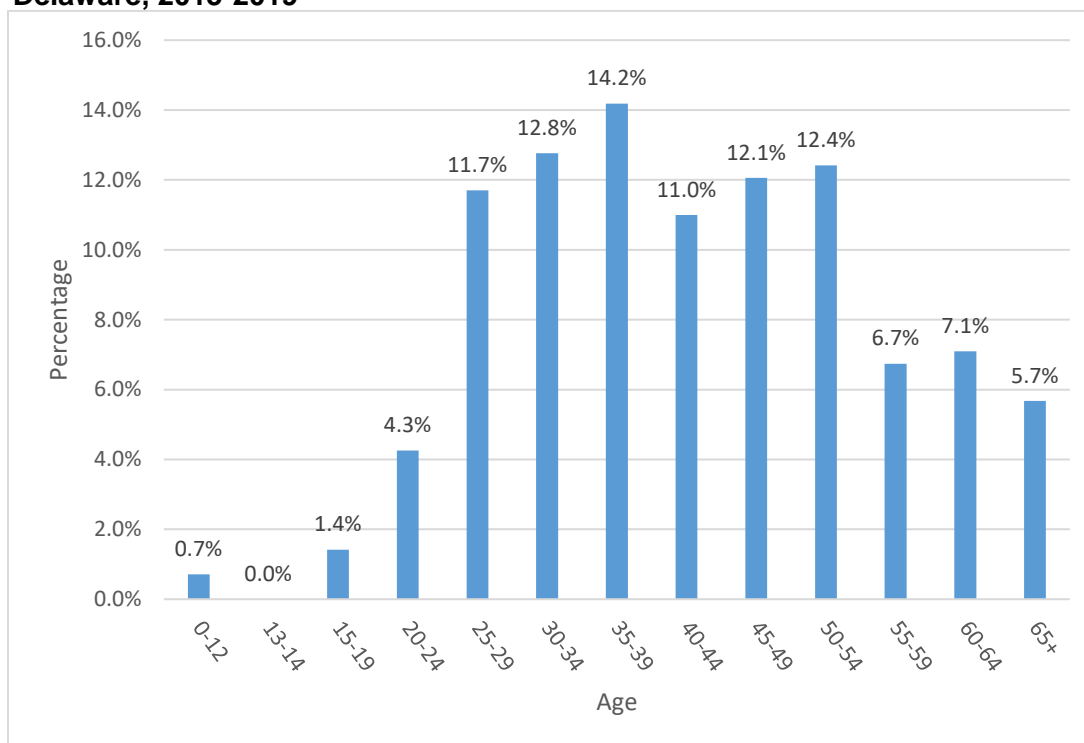
In Delaware from 2015-2019, the greatest number of diagnoses of Stage 3 HIV (AIDS) occurred in the ages of 25-54, accounting for 74% of all groups (Table 61 and Figure 111)

Table 61: Stage 3 HIV (AIDS) by Age at Diagnosis, Delaware, 2015-2019

Age Group	#	%
00-12	2	0.7%
13-14	0	0.0%
15-19	4	1.4%
20-24	12	4.3%
25-29	33	11.7%
30-34	36	12.8%
35-39	40	14.2%
40-44	31	11.0%
45-49	34	12.1%
50-54	35	12.4%
55-59	19	6.7%
60-64	20	7.1%
65+	16	5.7%
Total	282	100.0%

Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

Figure 111: Percentage of Stage 3 HIV (AIDS) by Age at Diagnosis, Delaware, 2015-2019



Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

In Delaware from 2015-2019, MSM and heterosexual contact were the highest HIV exposure risks with a five-year average of 40% and 39%, respectively. All other risk categories combined had a five-year average of 20% (Table 62 and Figure 112).

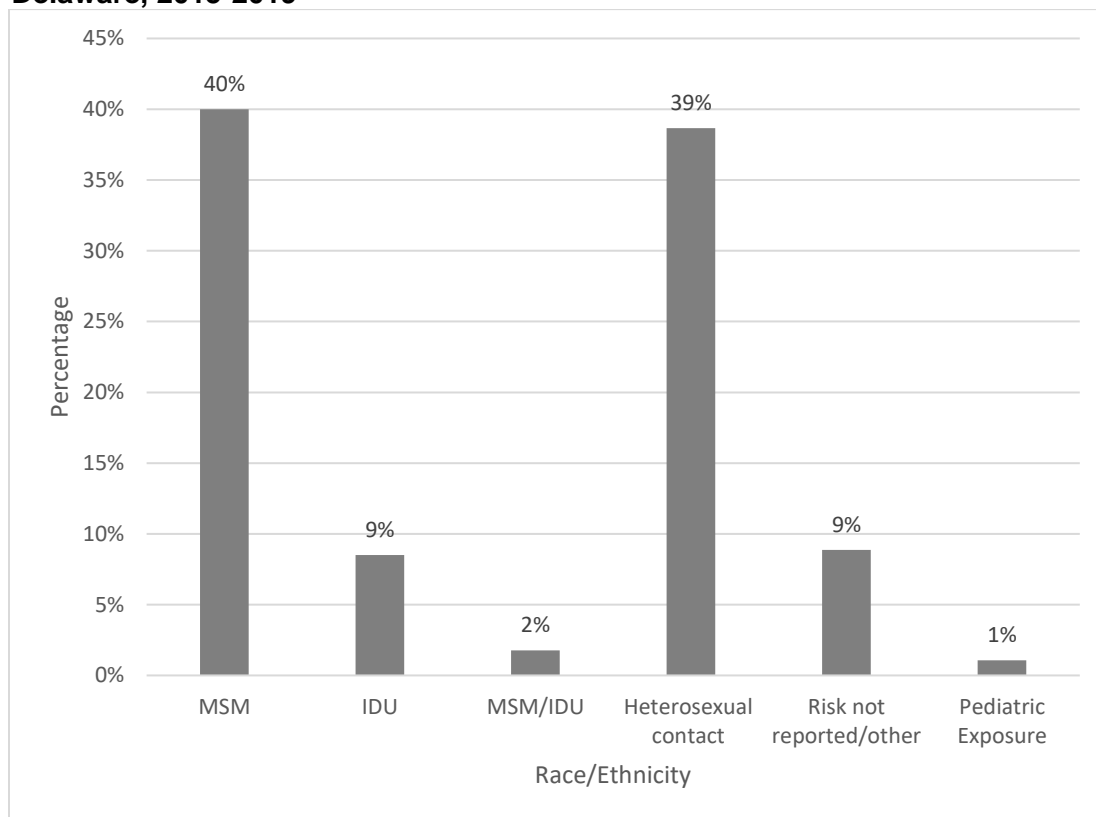
Table 62: Stage 3 HIV (AIDS) by HIV Exposure Risk, Delaware, 2015-2019

Exposure Risk	Years	
	2015-2019	
	#	%
Men Who Have Sex with Men (MSM)	116	40%
Injection Drug User (IDU)	24	9%
MSM/IDU	5	2%
Heterosexual contact	109	39%
Risk not reported/other	25	9%
Pediatric Exposure	3	1%
Total	282	100%

Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

From 2015 - 2019, 64% of Delaware's Stage 3 HIV (AIDS) cases list their residence as New Castle County, compared to 18% residing in both Kent and Sussex County (Table 63 and Figure 113).

Figure 112: Percentage of Stage 3 HIV (AIDS) by HIV Exposure Risk, Delaware, 2015-2019



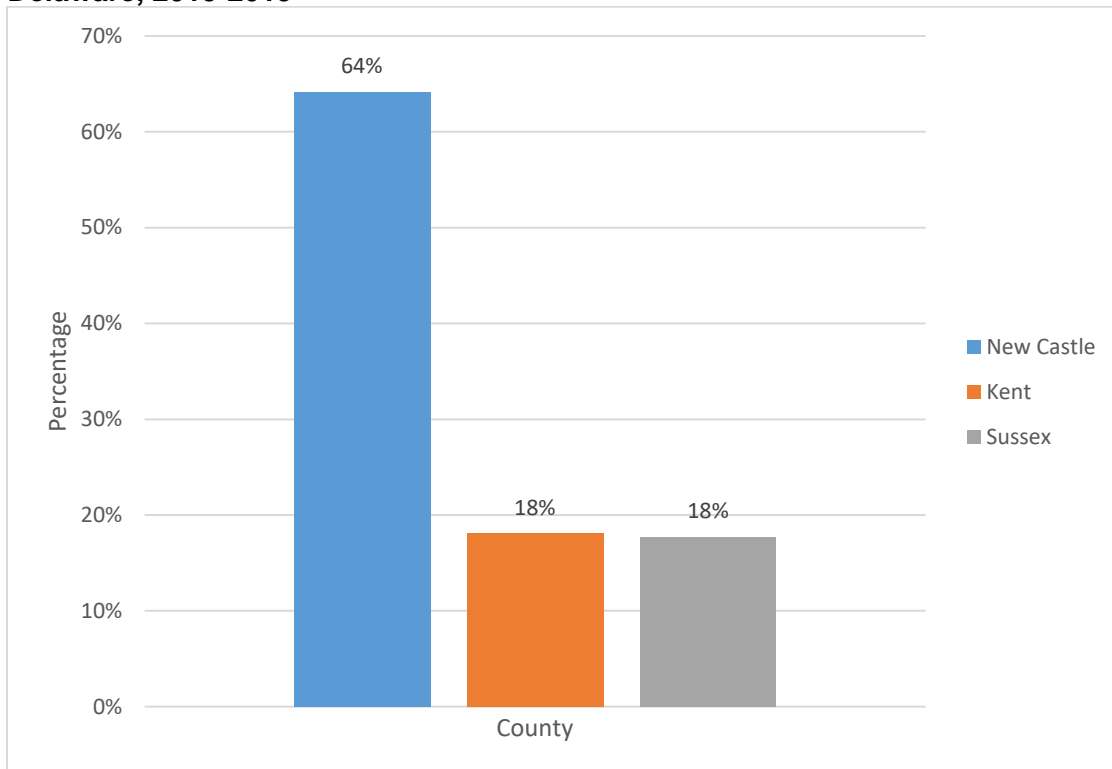
Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

Table 63: Stage 3 HIV (AIDS) by County of Residence at Diagnosis, Delaware, 2015-2019

County at Stage 3 HIV (AIDS) Diagnosis	#	%
New Castle	181	64%
Kent	51	18%
Sussex	50	18%
Total	282	100%

Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

Figure 113: Percentage of Stage 3 HIV (AIDS) by County of Residence at Diagnosis, Delaware, 2015-2019



Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.



Late-Stage HIV Diagnosis, 2015-2019

Late-Stage HIV Diagnosis, 2015–2019

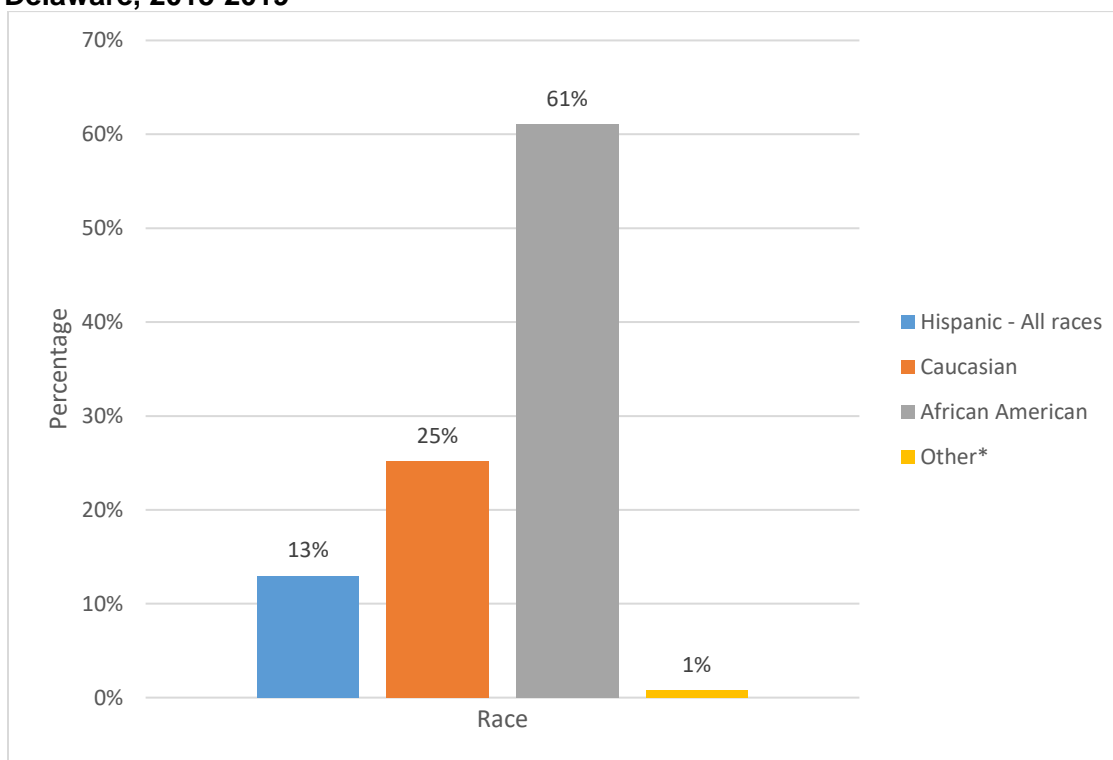
Late-stage HIV diagnosis occurs when a person is diagnosed with stage 3 HIV (AIDS) within 90 days of initial HIV diagnosis. This is a measure of the effectiveness of the message to test for HIV and to repeat testing regularly for those with ongoing risk of infection. Tables 64-65 and Figures 114-115 show the percentage of late-stage diagnosis by race and birth sex.

Table 64: Late-Stage HIV Diagnosis by Race/Ethnicity, Delaware, 2015-2019

Race/Ethnicity	#	%
African American	17	13%
Caucasian	33	25%
Hispanic	80	61%
Other*	1	1%
Total	131	100%

Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

Figure 114: Percentage of Late-Stage HIV Diagnosis by Race/Ethnicity, Delaware, 2015-2019



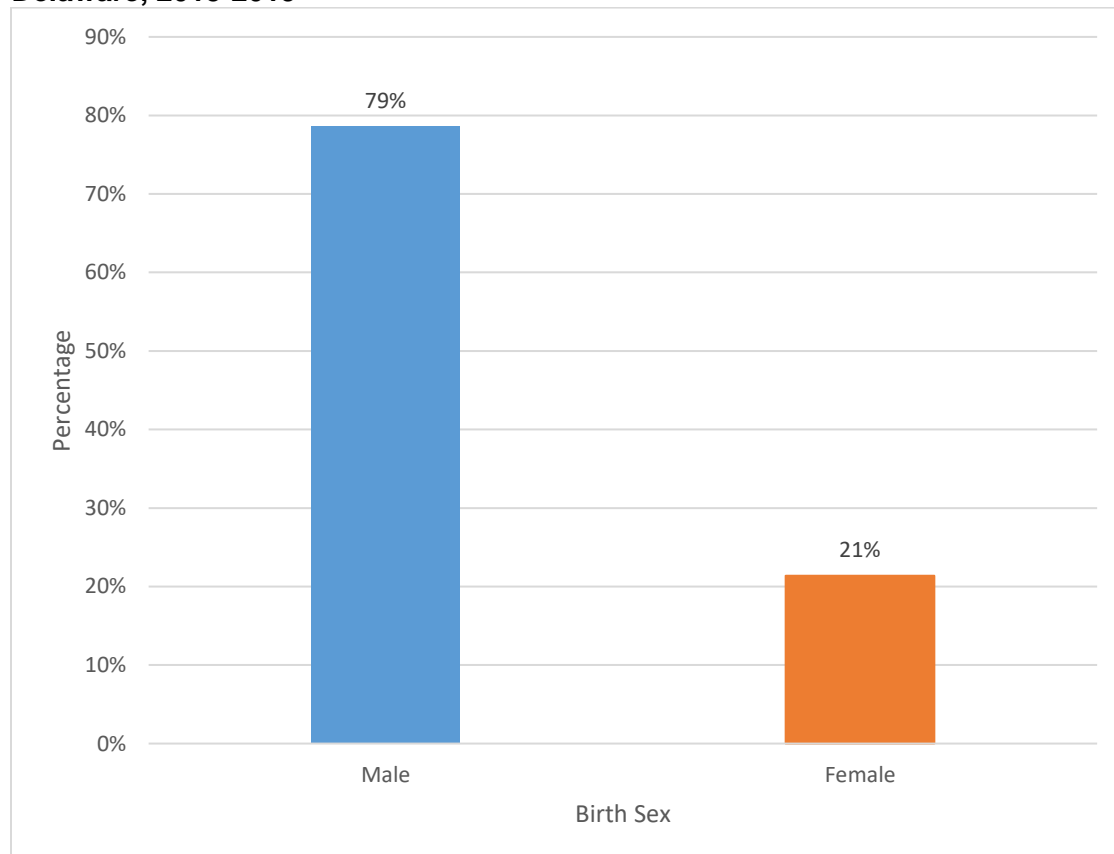
Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

Table 65: Late-Stage HIV Diagnosis by Birth Sex, Delaware, 2015-2019

Birth Sex	#	%
Male	103	79%
Female	28	21%
Total	131	100%

Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

Figure 115: Percentage of Late-Stage HIV Diagnosis by Birth Sex, Delaware, 2015-2019



Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

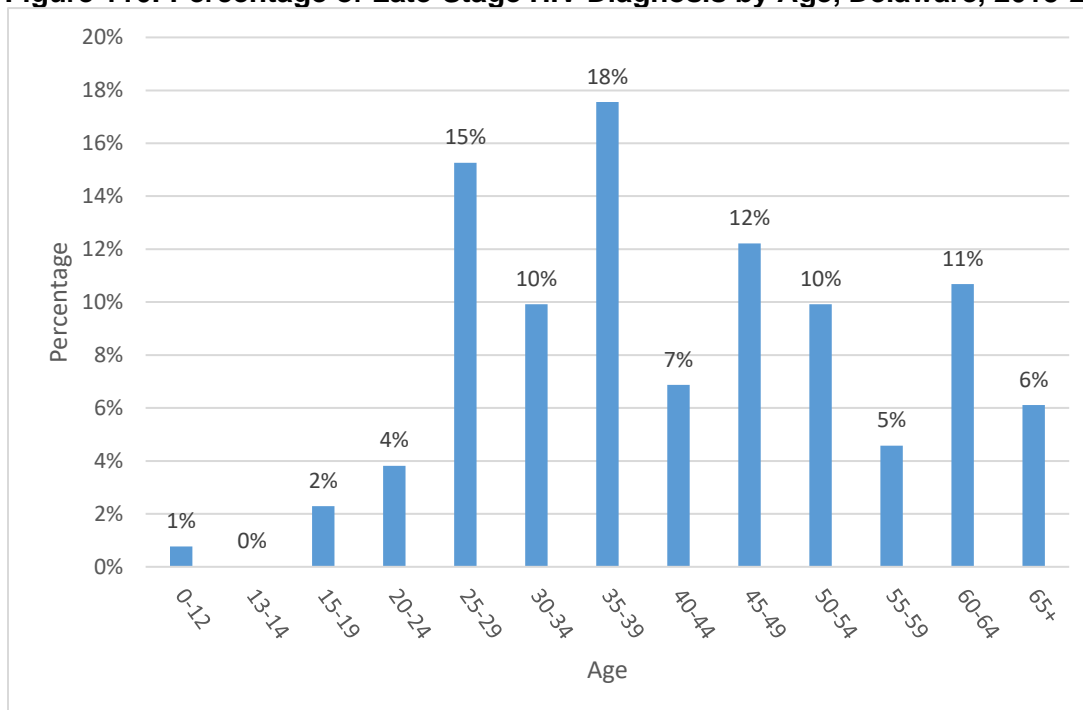
Most late-stage HIV diagnoses in Delaware from 2015-2019 were seen at ages 25-39. The pattern is identical to that seen in initial HIV diagnosis and may suggest HIV exposures are occurring at an earlier age (Table 66 and Figure 116).

Table 66: Late-Stage HIV Diagnosis by Age, Delaware, 2015-2019

Age Group	#	%
00-12	1	1%
13-14	0	0%
15-19	3	2%
20-24	5	4%
25-29	20	15%
30-34	13	10%
35-39	23	18%
40-44	9	7%
45-49	16	12%
50-54	13	10%
55-59	6	5%
60-64	14	11%
65+	8	6%
Total	131	100%

Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

Figure 116: Percentage of Late-Stage HIV Diagnosis by Age, Delaware, 2015-2019



Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

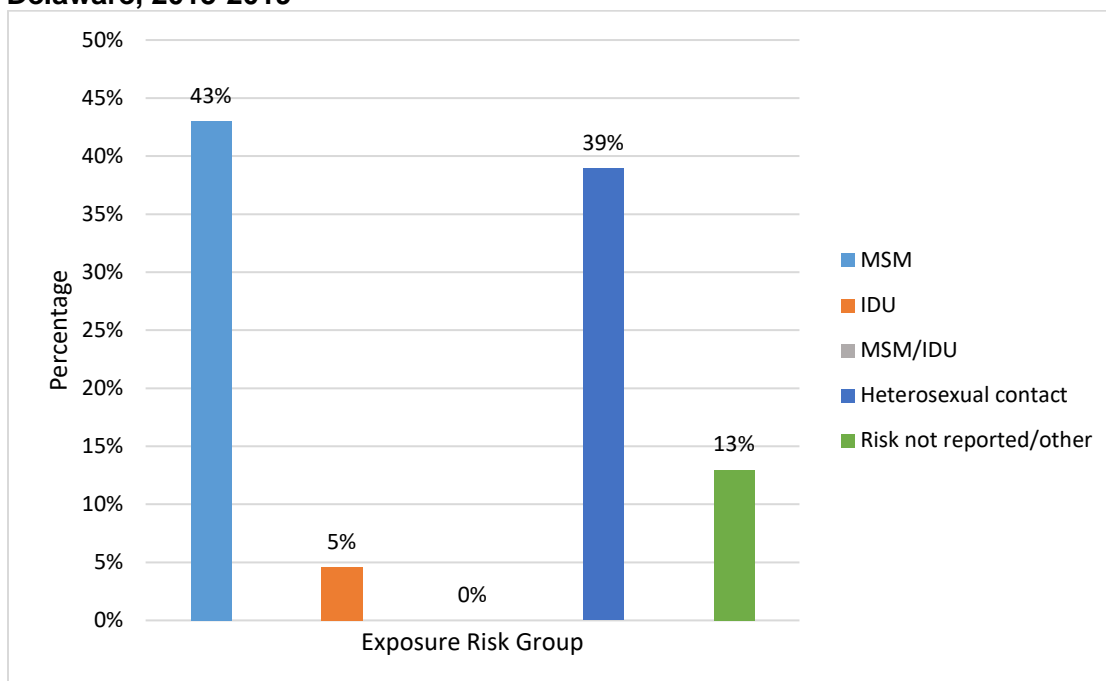
In Delaware, MSM and heterosexual exposure risks account for 44% and 39% respectively, of all late-stage HIV diagnoses. (Table 67 and Figure 117)

Table 67: Late-Stage HIV Diagnosis by Exposure, Delaware, 2015-2019

	#	%
Men Who Have Sex with Men (MSM)	57	43%
Injection Drug User (IDU)	6	5%
MSM/IDU	0	0%
Heterosexual contact	51	39%
Risk not reported/other	17	13%
Total	131	100%

Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

Figure 117: Percentage of Late-Stage HIV Diagnosis by Exposure Risk Category, Delaware, 2015-2019



Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

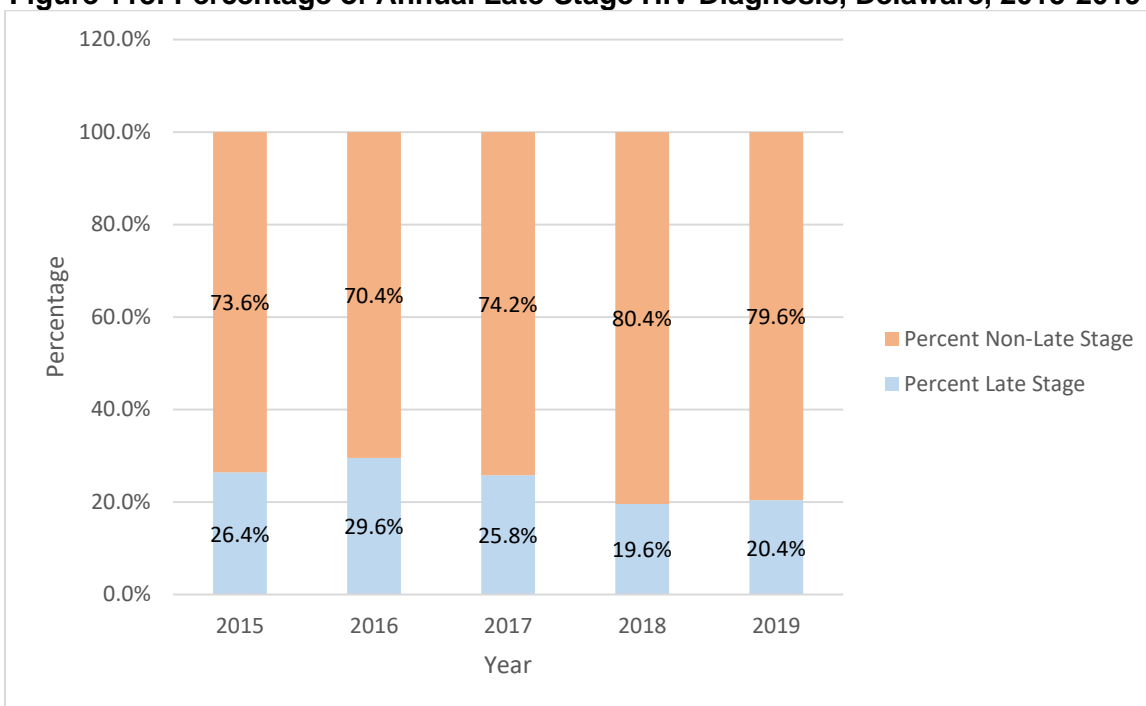
Delaware's five-year average (2015-2019) of late stage HIV diagnosis is 25% (Table 68 and Figure 118).

Table 68: Annual Late-Stage HIV Diagnosis, Delaware, 2015-2019

Year	#	%
2015	28	26.4%
2016	34	29.6%
2017	32	25.8%
2018	18	19.6%
2019	19	20.4%
Total	131	24.7%

Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

Figure 118: Percentage of Annual Late-Stage HIV Diagnosis, Delaware, 2015-2019



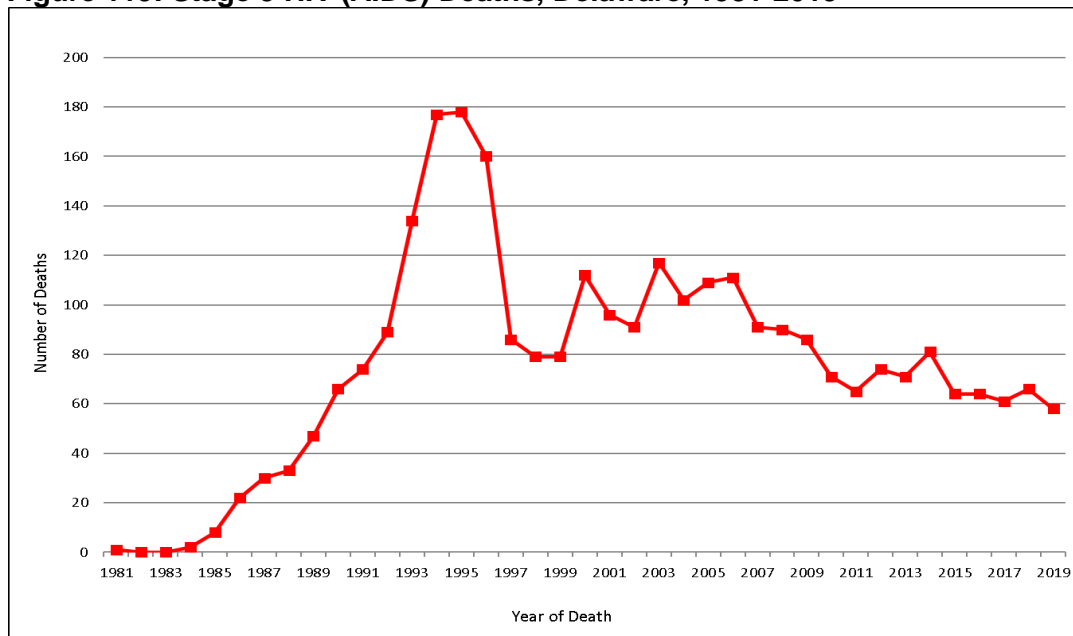
Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

Mortality among Persons with Stage 3 HIV (AIDS), 1981-2019

Mortality

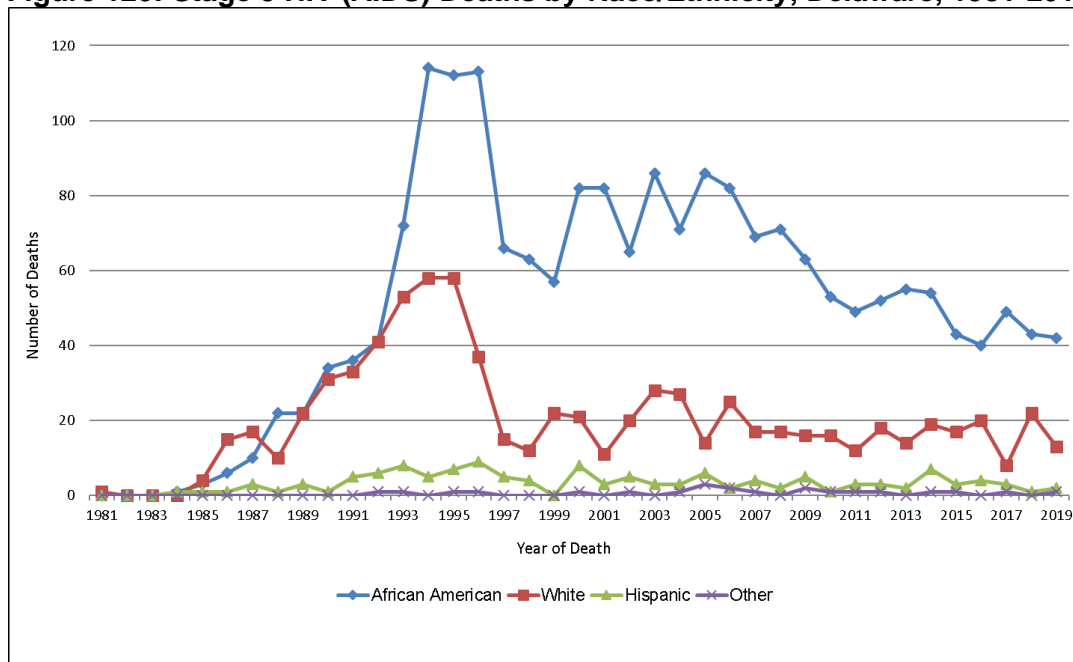
A total of 2,945 Delawareans with stage 3 HIV (AIDS) died from 1981-2019. Improved Antiretroviral Therapy (ART) treatments have reduced deaths among those with advanced stage HIV. This trend is observed among all racial groups and by birth sex (Figures 119-121).

Figure 119: Stage 3 HIV (AIDS) Deaths, Delaware, 1981-2019



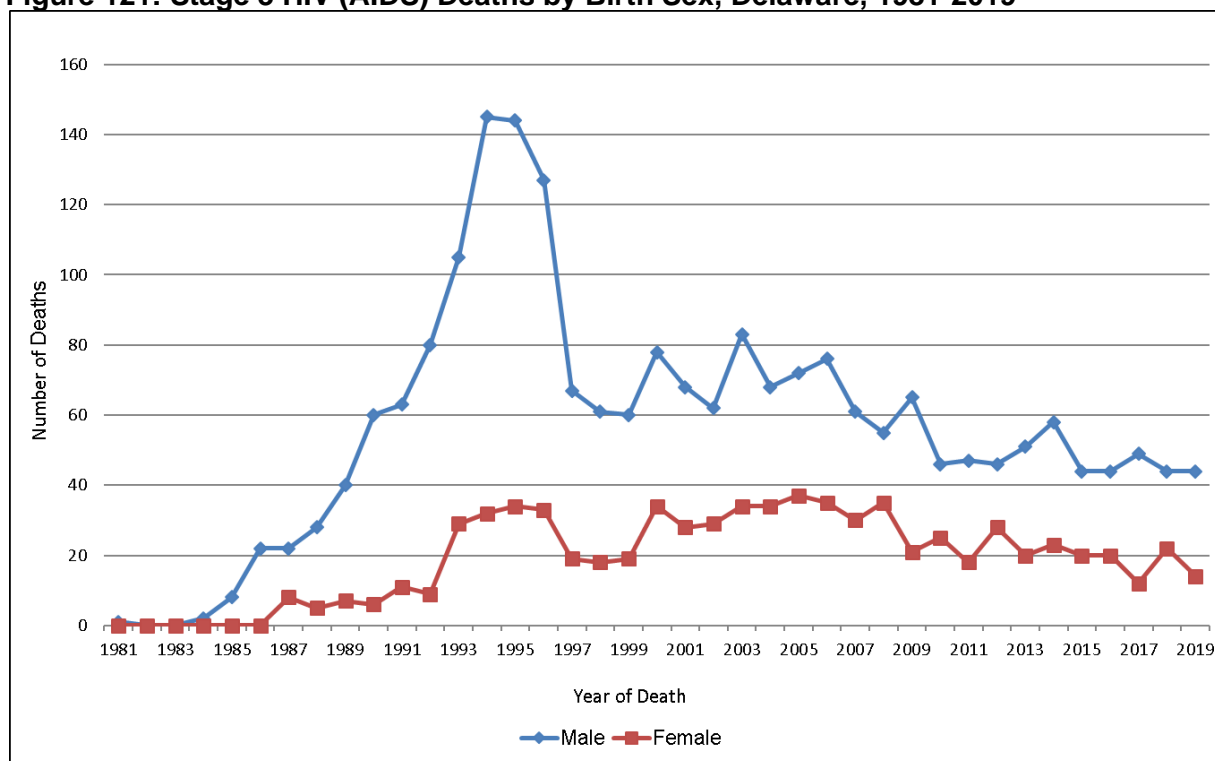
Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

Figure 120: Stage 3 HIV (AIDS) Deaths by Race/Ethnicity, Delaware, 1981-2019



Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

Figure 121: Stage 3 HIV (AIDS) Deaths by Birth Sex, Delaware, 1981-2019



Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

Note: Delaware is in the ninth year of National Death Index (NDI) matching and data importation which allow for better expression of primary and secondary causes of death. NDI data was complete through 2017 (NDI data is always two years behind the matching date). This means that some deaths occurring in 2018 and 2019 will appear with an undetermined underlying cause of death which may be updated with future NDI imports. The importation of NDI matched records into eHARS is the only method for assigning underlying cause of death.

As of 2019, HIV was the underlying cause of death in 63% of all Delawareans who died with stage 3 HIV (AIDS). Thirty-two percent died of other causes. The underlying cause was not determined in 5% of the cases.



Pediatric HIV in Delaware, 1981-2017

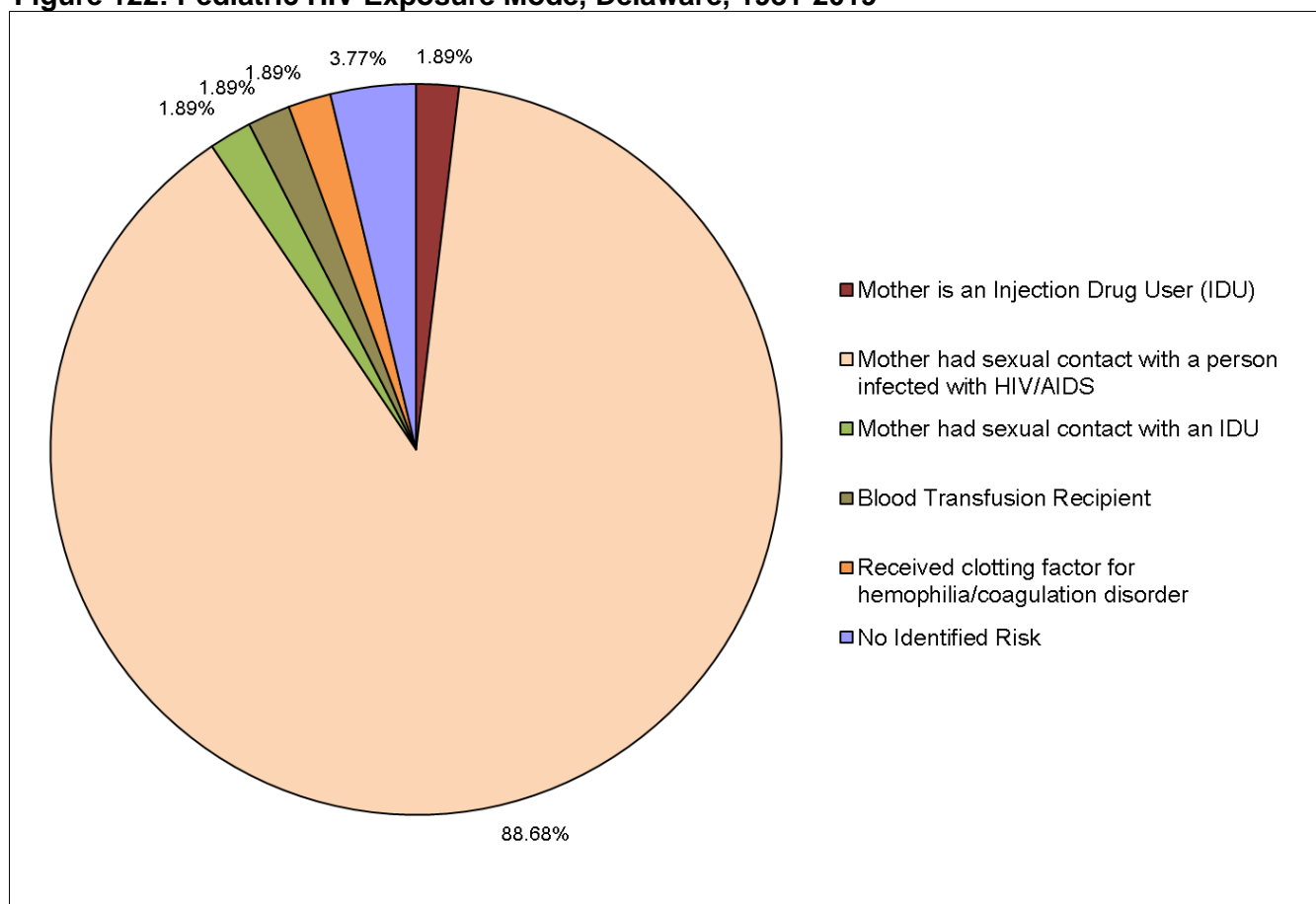
Pediatric HIV in Delaware

From 1981-2019, 53 cases of pediatric HIV/stage 3 HIV (AIDS) (defined as disease in children under 13 years of age) were diagnosed in Delaware. Perinatal exposure accounts for nearly 93% of these cases. Two percent of the mothers were IDUs; 89% had sexual contact with a person infected with HIV/stage 3 HIV (AIDS); and 2% had sexual contact with an IDU. In the remaining 7% of the cases, 4% percent of pediatric cases contracted the disease through transfusions of blood or blood products and 3% percent had no identifiable risk (Figure 122). Of all 53 cases, 15 died with AIDS as the underlying cause. An additional eight died of unrelated or unknown causes.

Of the 53 diagnosed pediatric HIV/stage 3 HIV (AIDS) cases, African Americans accounted for 77% of the diagnosed cases while Caucasians accounted for 15% and Hispanics accounted 8%.

Of the 53 diagnosed pediatric HIV/stage 3 HIV (AIDS) cases, 75% were from New Castle County, 15% were from Kent County, and 10% were from Sussex County.

Figure 122: Pediatric HIV Exposure Mode, Delaware, 1981-2019



Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.



Section 3: Delaware HIV Care Continuum, 2020

Delaware HIV Care Continuum (as of August 31, 2020)

The goal of HIV treatment is to achieve viral suppression, which means the level of HIV in the body is extremely low or undetectable. This is important for people living with HIV (PLWH) to stay healthy, have improved quality of life, and live longer. Undetectable levels of HIV mean there is an extremely low risk of transmitting HIV to others. The HIV care continuum consist of several steps towards viral suppression: (1) HIV diagnosis, (2) linkage to care, (3) receipt of care (ART), and (4) viral suppression (CDC 2019).

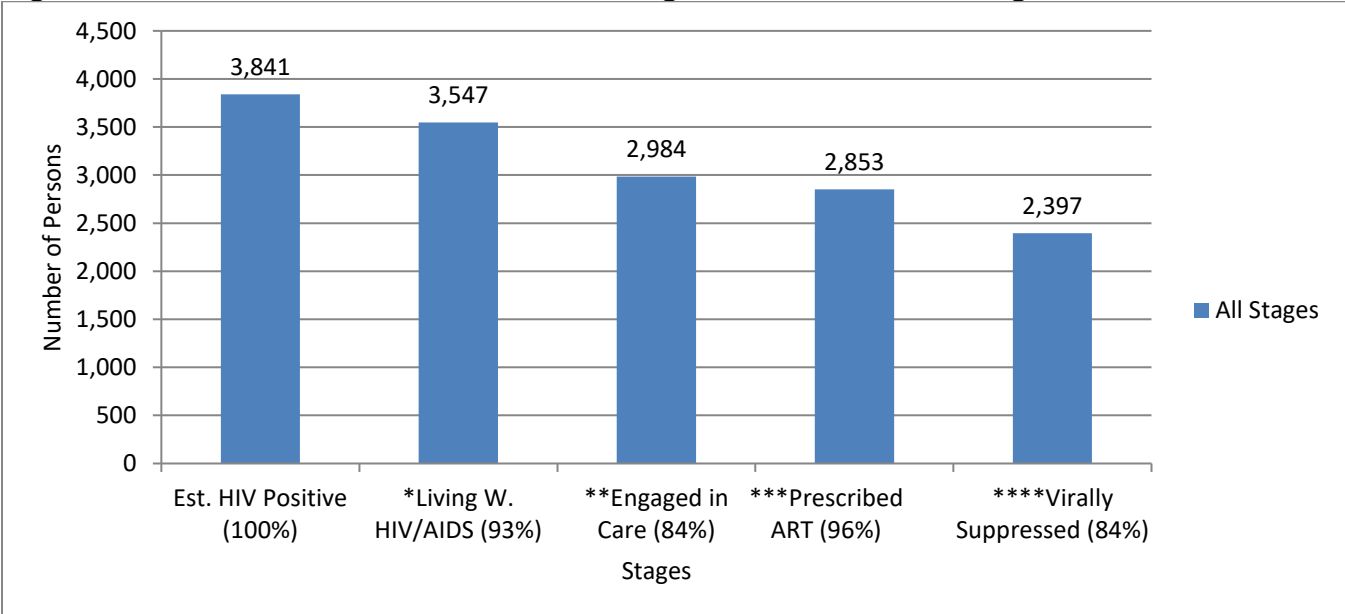
Information on the Delaware HIV Care Continuum is compiled from several data sources including: care data from HIV clinics, Enhanced HIV/AIDS Reporting System (eHARS) data, Ryan White data, and Medical Monitoring Project (MMP) data. From these sources, it was determined that 2,984 (84%) persons were engaged in HIV care out of 3,547 persons living with HIV in Delaware.

A CDC suite of back calculation programs estimated that an additional 284 persons in Delaware were living with HIV but were not aware of their status. This brought the total estimated number of persons with HIV living in Delaware to 3,841 (Figure 123).

MMP medical record abstraction (MRA) data estimated that 96% (N=2,853) of those persons in care had been prescribed antiretroviral medications (ARVs).

Eighty-four percent (N=2,397) of those receiving ARVs were virally suppressed with viral load counts <200 within the assessment period).

Figure 123: HIV Care Continuum, Persons Living with HIV, Delaware, Diagnosed 1981-2019

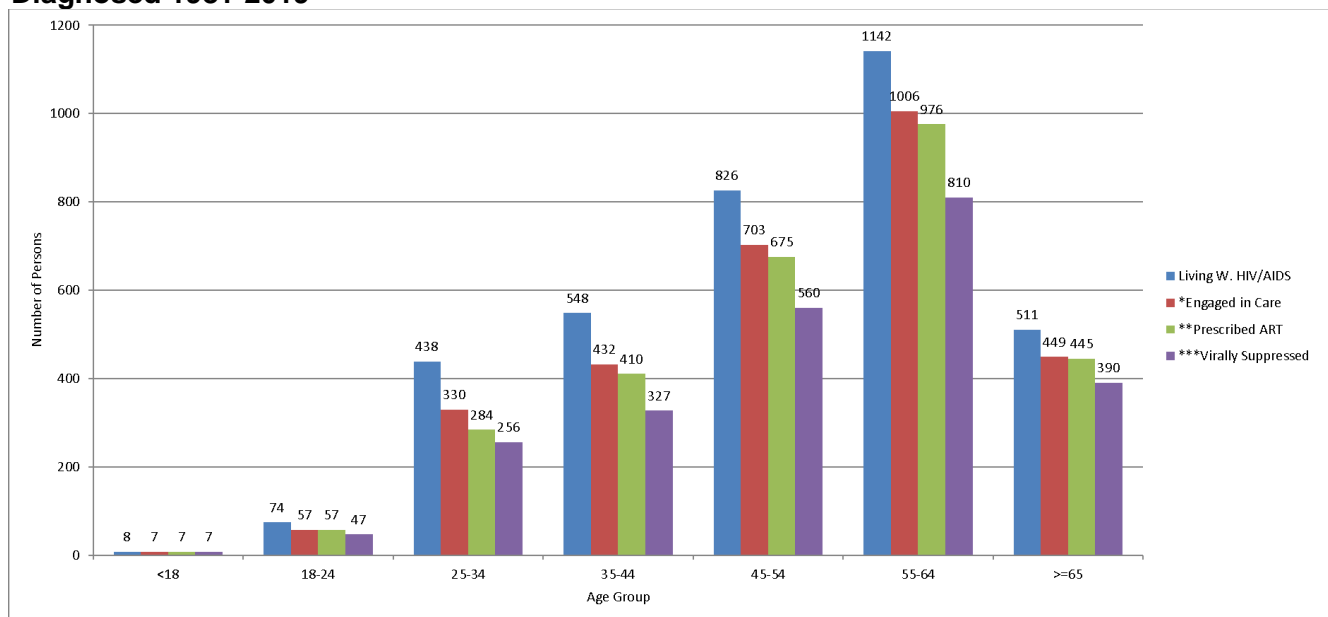


Source: Delaware Department of Health and Social Services, Division of Public Health, 2020, Christiana Care Health Systems (Centricity), CDC, Delaware Health Department Infectious Disease Clinic Survey, and MMP 2015-2018 interview and MRA data.

Percentage calculated from Est. HIV Positive, *Percentage calculated from Living W. HIV/AIDS, **Percentage calculated from Engaged in Care, ***Percentage calculated from prescribed ART, ****Percentage Virally Suppressed.

The status of persons along the care continuum by age are covered in Figure 124 and Table 69.

Figure 124: HIV Care Continuum, Persons Living with HIV by Age Group, Delaware, Diagnosed 1981-2019



Source: Delaware Department of Health and Social Services, Division of Public Health, 2020, Christiana Care Health Systems (Centricity), CDC, Delaware Health Department Infectious Disease Clinic Survey, and MMP 2015-2018 interview and MRA data.

*Percentage calculated from Living with HIV, **Percentage calculated from Engaged in Care, (see Table 69).

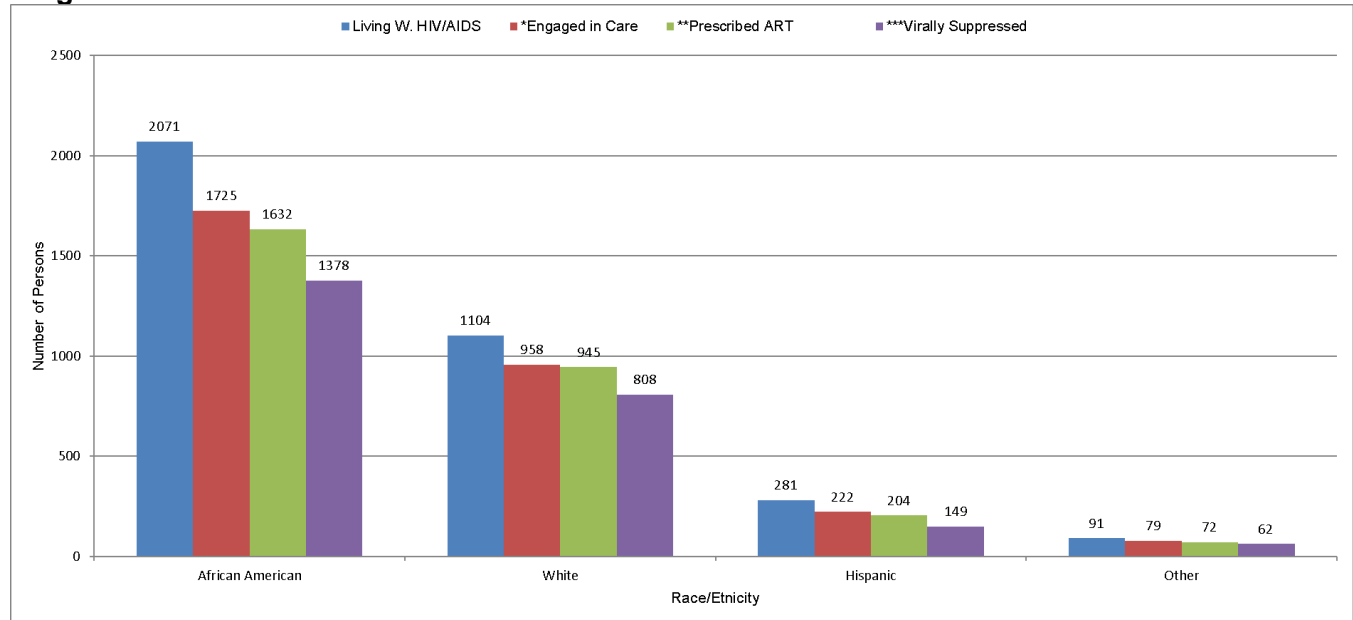
Table 69: HIV Care Continuum, Persons Living with HIV by Age Group, Delaware, Diagnosed 1981-2019

Current Age	Living With HIV		Engaged in Care		Prescribed ART		Virally Suppressed	
	#	%	#	%*	#	%**	#	%***
<18	8	100%	7	88%	7	100%	7	100%
18-24	74	100%	57	77%	57	100%	47	82%
25-34	438	100%	330	75%	284	86%	256	90%
35-44	548	100%	432	79%	410	95%	327	80%
45-54	826	100%	703	85%	675	96%	560	83%
55-64	1142	100%	1006	88%	975	97%	810	83%
≥65	511	100%	449	88%	445	99%	390	88%
Total	3547	100%	2984	84%	2853	96%	2397	84%

Source: Delaware Enhanced HIV/AIDS Reporting System (eHARS), Christiana Care Health Systems (Centricity), CDC, Delaware Health Department Infectious Disease Clinic Survey, and MMP 2015-2018 interview and MRA data. *Percentage calculated from Living with HIV, **Percentage calculated from Engaged in Care, ***Percentage Calculated from Prescribed ART.

The status of persons along the care continuum by race/ethnicity are displayed in Figure 125 and Table 70.

Figure 125: HIV Care Continuum, Persons Living with HIV by Race/Ethnicity, Delaware, Diagnosed 1981-2019



Source: Delaware Enhanced HIV/AIDS Reporting System (eHARS), Christiana Care Health Systems (Centricity), CDC, Delaware Health Department Infectious Disease Clinic Survey, and MMP 2015-2018 interview and MRA data. *Percentage calculated from Living with HIV, **Percentage calculated from Engaged in Care, ***Percentage Calculated from Prescribed ART.

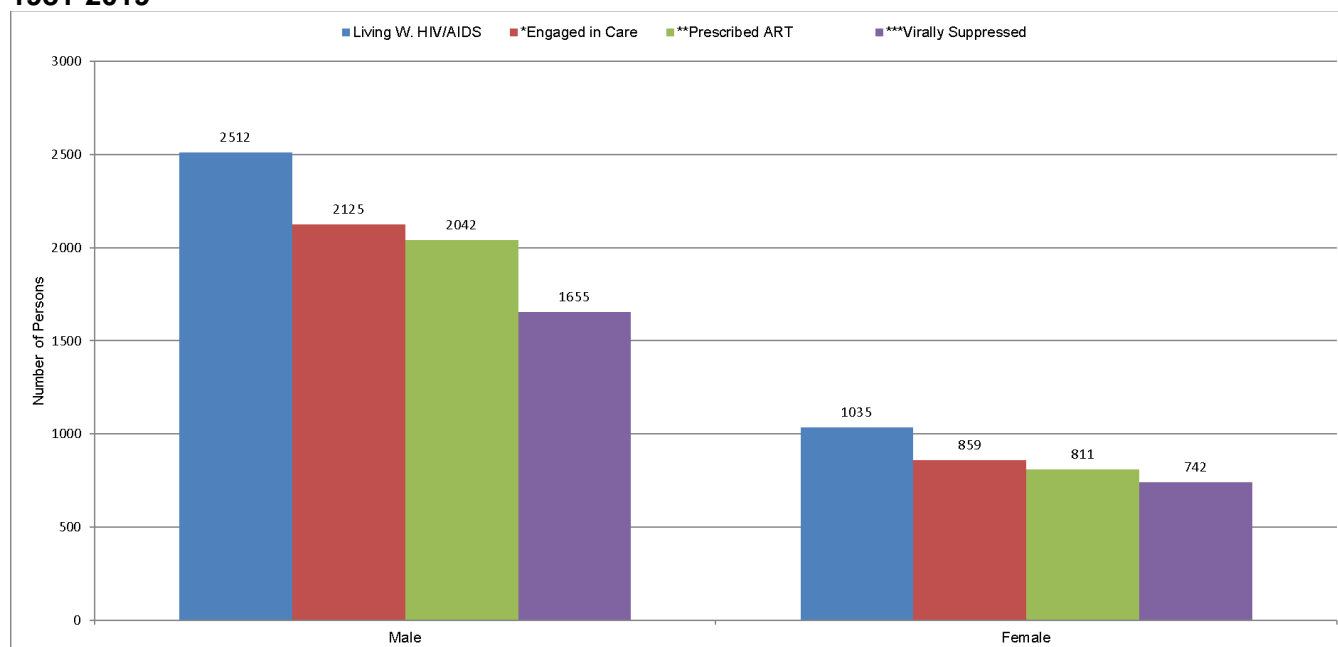
Table 70: HIV Care Continuum, Persons Living with HIV by Race/Ethnicity, Delaware, Diagnosed 1981-2019

Race/Ethnicity	Living With HIV		Engaged in Care		Prescribed ART		Virally Suppressed	
	#	%	#	%*	#	%**	#	%***
African American	2071	100%	1725	83%	1632	95%	1378	84%
White	1104	100%	958	87%	945	99%	808	86%
Hispanic	281	100%	222	79%	204	92%	149	73%
Other	91	100%	79	87%	72	91%	62	86%
Total	3547	100%	2984	84%	2853	96%	2397	84%

Source: Delaware Enhanced HIV/AIDS Reporting System (eHARS), Christiana Care Health Systems (Centricity), CDC, Delaware Health Department Infectious Disease Clinic Survey, and MMP 2015-2018 interview and MRA data. *Percentage calculated from Living with HIV, **Percentage calculated from Engaged in Care, ***Percentage Calculated from Prescribed ART.

Figure 126 and Table 71 include the status of persons along the care continuum by birth sex.

Figure 126: HIV Care Continuum, Persons Living with HIV by Birth Sex, Delaware, Diagnosed 1981-2019



Source: Delaware Enhanced HIV/AIDS Reporting System (eHARS), Christiana Care Health Systems (Centricity), CDC, Delaware Health Department Infectious Disease Clinic Survey, and MMP 2015-2018 interview and MRA data. *Percentage calculated from Living with HIV, **Percentage calculated from Engaged in Care, ***Percentage Calculated from Prescribed ART.

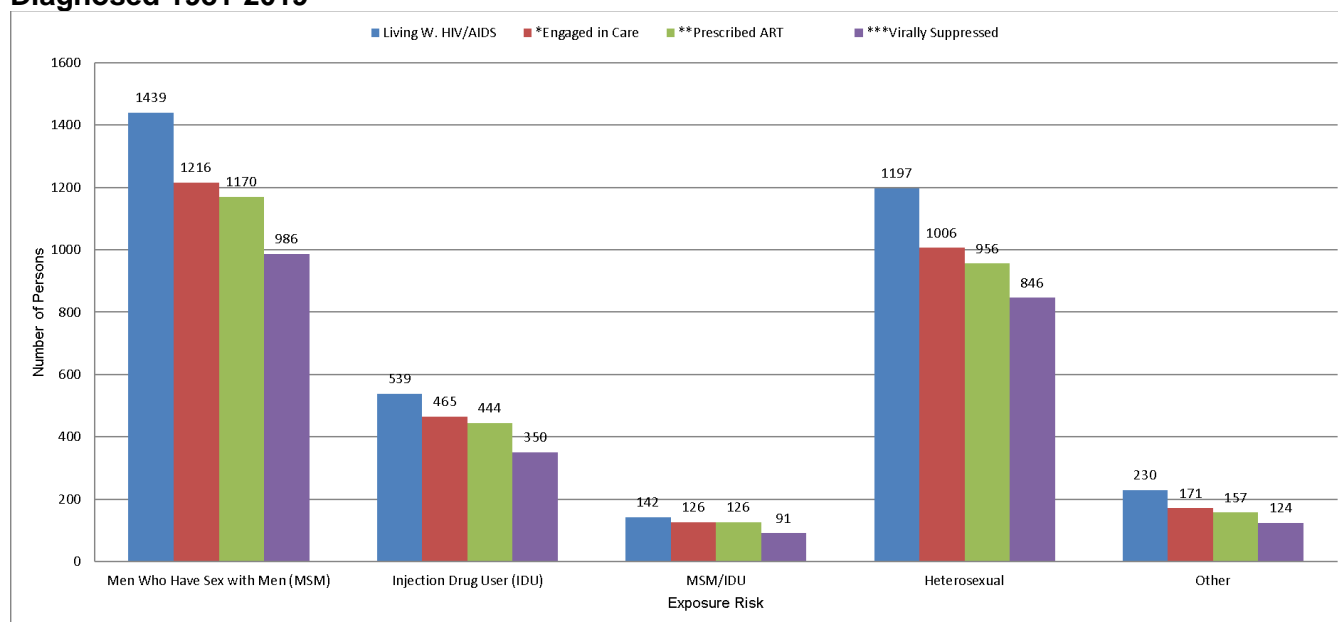
Table 71: HIV Care Continuum, Persons Living with HIV by Birth Sex, Delaware, Diagnosed 1981-2019

Birth Sex	Living With HIV		Engaged in Care		Prescribed ART		Virally Suppressed	
	#	%	#	%*	#	%**	#	%***
Male	2512	100%	2125	85%	2042	96%	1655	81%
Female	1035	100%	859	83%	811	94%	742	91%
Total	3547	100%	2984	84%	2853	96%	2397	84%

Source: Delaware Enhanced HIV/AIDS Reporting System (eHARS), Christiana Care Health Systems (Centricity), CDC, Delaware Health Department Infectious Disease Clinic Survey, and MMP 2015-2018 interview and MRA data. *Percentage calculated from Living with HIV, **Percentage calculated from Engaged in Care, ***Percentage Calculated from Prescribed ART.

Figure 127 and Table 72 cover the status of persons along the care continuum by risk exposure.

Figure 127: HIV Care Continuum, Persons Living with HIV by Exposure Risk, Delaware, Diagnosed 1981-2019

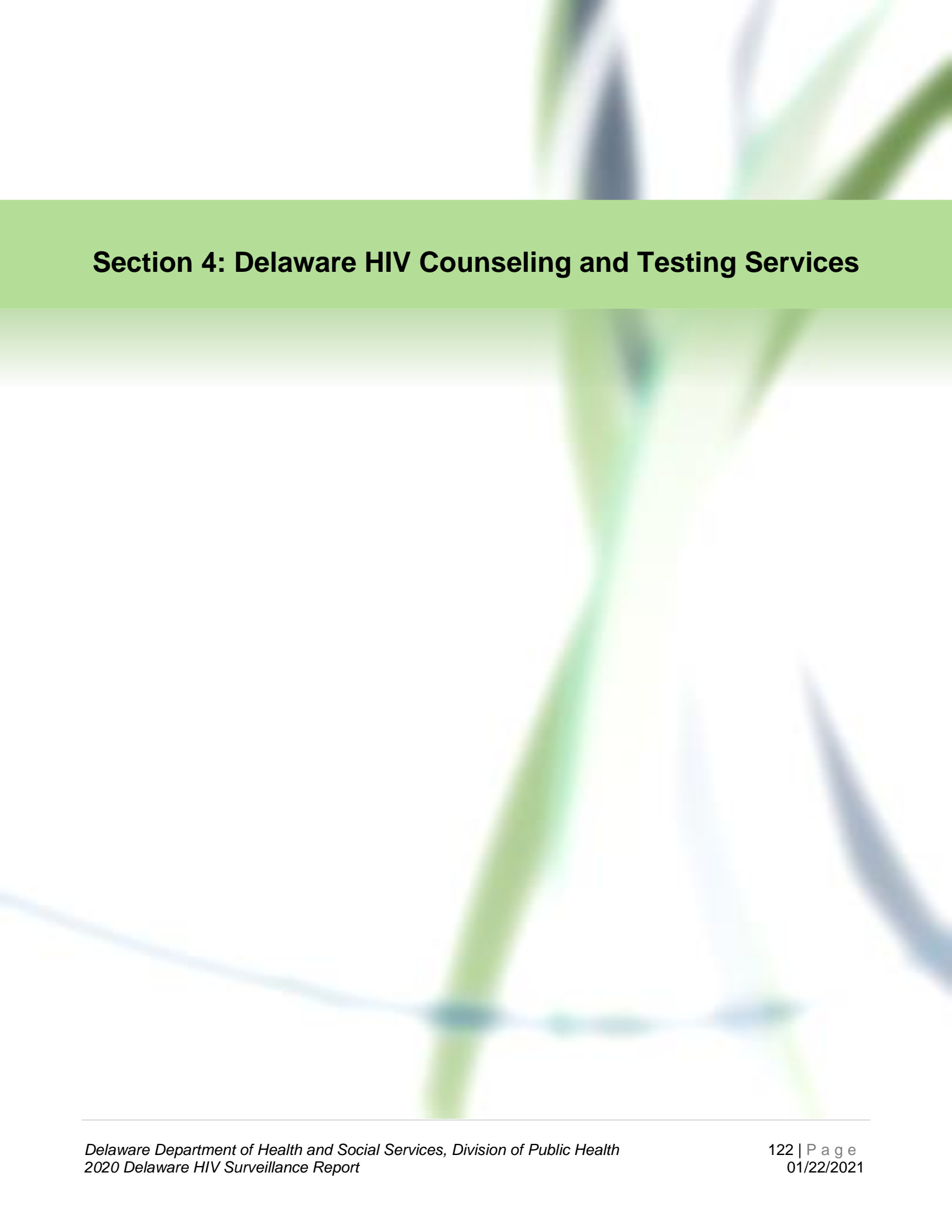


Source: Delaware Enhanced HIV/AIDS Reporting System (eHARS), Christiana Care Health Systems (Centricity), CDC, Delaware Health Department Infectious Disease Clinic Survey, and MMP 2015-2018 interview and MRA data. *Percentage calculated from Living with HIV, **Percentage calculated from Engaged in Care, ***Percentage Calculated from Prescribed ART.

Table 72: HIV Care Continuum, Persons Living with HIV by Exposure Risk, Delaware, Diagnosed 1981-2019

Risk Group	Living With HIV		Engaged in Care		Prescribed ART		Virally Suppressed	
	#	%	#	%*	#	%**	#	%***
Men Who Have Sex with Men (MSM)	1439	100%	1216	85%	1170	96%	986	84%
Injection Drug User (IDU)	539	100%	465	86%	444	95%	350	79%
MSM/IDU	142	100%	126	89%	126	100%	91	72%
Heterosexual	1197	100%	1006	84%	956	95%	846	88%
Other	230	100%	171	74%	157	92%	124	79%
Total	3547	100%	2984	84%	2853	96%	2397	84%

Source: Delaware Enhanced HIV/AIDS Reporting System (eHARS), Christiana Care Health Systems (Centricity), CDC, Delaware Health Department Infectious Disease Clinic Survey, and MMP 2015-2018 interview and MRA data. *Percentage calculated from Living with HIV, **Percentage calculated from Engaged in Care, ***Percentage Calculated from Prescribed ART.



Section 4: Delaware HIV Counseling and Testing Services

Delaware HIV Counseling and Testing Services

In 2018 and 2019, 21,448 Delawareans were counseled and tested for HIV at 92 state-funded counseling and testing sites. Of those, 67 (0.31%) tested HIV positive. Females accounted for 47% of all tests and 25% of positive tests. The counseling process consists of HIV risk education and HIV prevention strategies such as condom use and other safe sex practices. Counseling also covers the benefits of pre-exposure prophylaxis (PrEP) and the importance of not sharing needles if clients are IDU's.

Forty-nine percent of those tested were African American; Caucasians accounted for 34%. The proportions of HIV positive cases were 67% among African Americans and 15% among Caucasians. The remaining percentage is among smaller groups as shown in table 73.

Those 30-65 years of age were tested the most at 52% and were 61% of all new positive tests. Heterosexual contact comprised the largest exposure risk category seeking testing, though less than 1% tested positive. Of all new HIV diagnoses diagnosed through DPH-funded testing in 2018 and 2019, MSM contact accounted for 49% and heterosexual contact accounted for 33%.

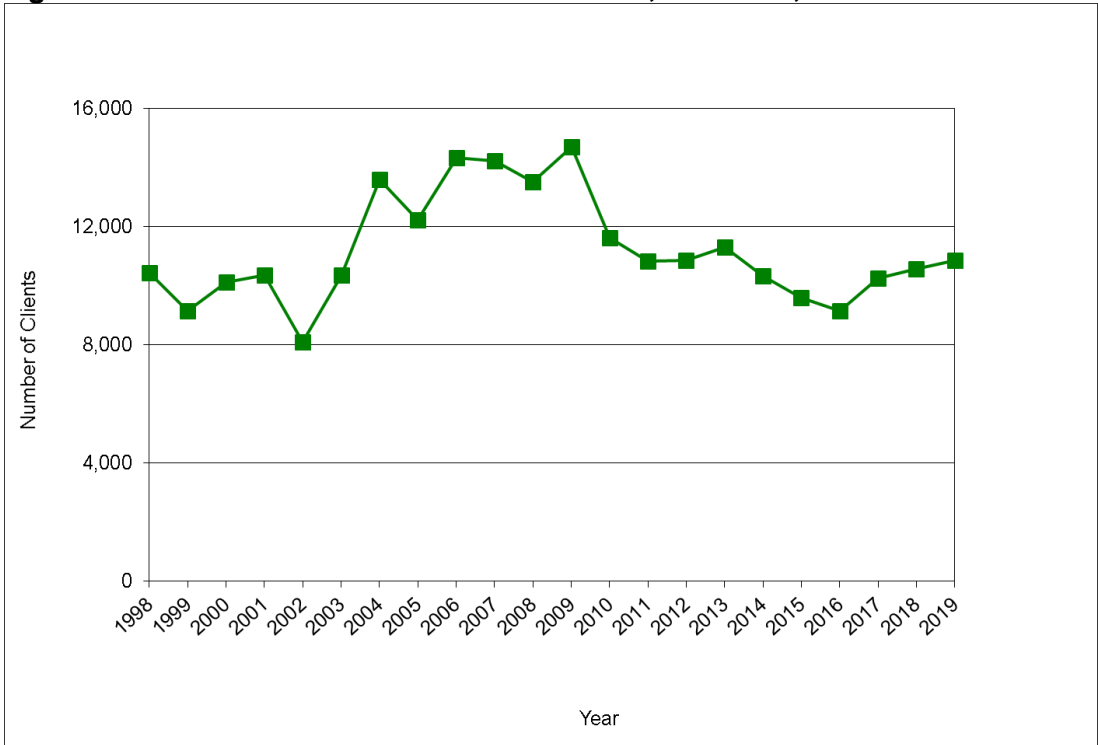
Table 73: Public Health HIV Testing Services in Delaware, 2018-2019

	HIV Tests Performed		Positive HIV Tests	
	#	%	#	%
Total	21,448	100.0%	67	100.0%
Gender				
Male	11,288	52.6%	50	74.6%
Female	9,992	46.6%	17	25.4%
Transgender	0	0.0%	0	0.0%
Other	168	0.8%	0	0.0%
Race/Ethnicity				
Caucasian (not Hispanic)	7,335	34.2%	10	14.5%
African-American (not Hispanic)	10,504	49.0%	44	66.7%
Hispanic	2,924	13.6%	9	13.0%
Asian	182	0.8%	2	2.9%
Native Hawaiian/Pacific Islander (not Hispanic)	34	0.2%	0	0.0%
Am Indian/AK Native (not Hispanic)	62	0.3%	0	0.0%
Other	407	1.9%	2	2.9%
Age Groups (Years)				
<13	1	0.0%	0	0.0%
13 – 19	2,217	10.3%	2	3.0%
20 – 29	7,763	36.2%	24	35.8%
30 – 65	11,164	52.1%	41	61.2%
Over 65	303	1.4%		
Transmission Risk Category				
Heterosexual Transmission	15,279	71.2%	22	32.8%
MSM	2,640	12.3%	33	49.3%
IDU	2,070	9.7%	3	4.5%
MSM/IDU	85	0.4%	2	3.0%
Other	1,374	6.4%	7	10.4%

Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

Figure 128 displays the trend of HIV testing in Public Health funded sites throughout Delaware.

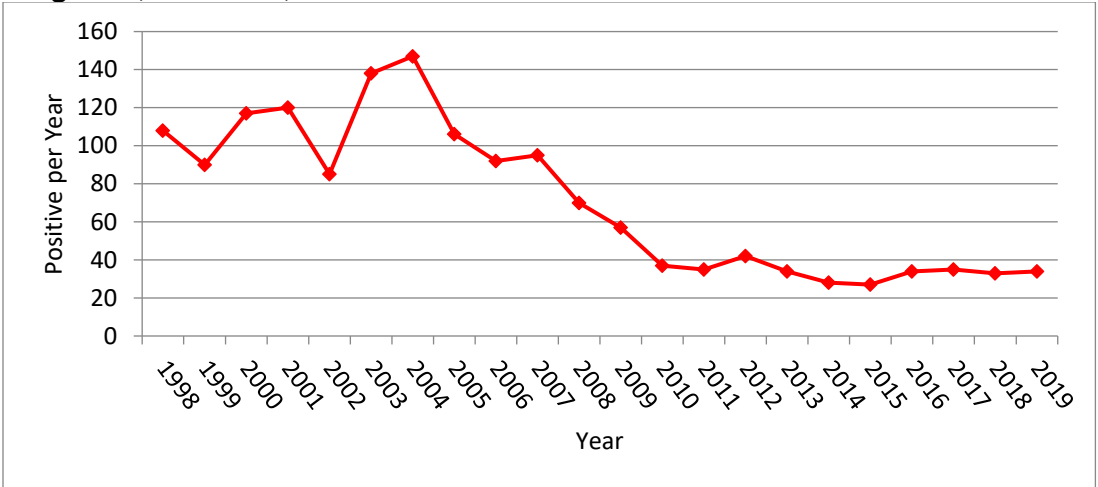
Figure 128: Public Health HIV Tests Performed, Delaware, 1998-2019



Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

Figure 129 shows the number of positive HIV tests among Delawareans since 1998. The number of positive tests peaked in 2004 and has trended downward since.

Figure 129: Number of Positives Discovered through Public Health HIV Testing Programs, Delaware, 1998-2019



Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.



Section 5: Utilization Patterns of HIV Services among Delawareans

Utilization Patterns of HIV Services among Delawareans

DPH relies on data compiled by the Ryan White Program HIV/AIDS Program to determine utilization patterns of HIV Services across the state.

The Ryan White Program provides comprehensive HIV primary medical care, essential support services, and medications for low-income people living with HIV who are uninsured and underserved. The Program funds grants to the state and local community-based organizations to provide care and treatment services to people living with HIV to improve health outcomes and reduce HIV transmission among hard-to-reach populations.

Table 74 compares the demographic characteristics of HIV clients receiving services through the Ryan White program to that of persons living with HIV in Delaware in general.

Table 74: Persons Living with HIV in Delaware Receiving Services through the Ryan White Program Compared to Non-Ryan White, Delaware, 2019

Demographics	Ryan White		Non-Ryan White	
	2019		2019	
	#	%	#	%
Total	1,851	100%	1,632	100%
Ethnicity				
Hispanic or Latino Origin	142	7%	130	8%
Non-Hispanic	1,709	93%	1,502	92%
Race – (Non-Hispanic)				
Caucasian (Non-Hispanic)	495	29%	593	39%
African American (Non-Hispanic)	1,199	70%	835	56%
Other*	15	1%	74	5%
Birth Sex				
Male	1,212	65%	1,249	77%
Female	639	35%	383	23%
Current Age (Years)				
Less than 13 years	0	0%	4	<1%
13 - 19	2	0%	8	<1%
20 - 29	108	6%	101	6%
30 - 39	272	15%	242	15%
40 - 49	297	16%	310	19%
50+	1,172	63%	967	59%

Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

*Other includes Asian, American Indian, and Multi-racial

During 2019, 1,486 clients received AIDS Drug Assistance Program (ADAP) services through the Ryan White program. Table 75 compares the demographic characteristics of HIV clients receiving ADAP services to that of others living with HIV in Delaware.

Table 75: Persons living with HIV in Delaware Receiving AIDS Drug Assistance Program (ADAP) Services Compared to Non-ADAP, 2019

Demographics	ADAP		Non-ADAP	
	2019		As of 2019	
	#	%	#	%
Total	1,486	100%	2,097	100%
Ethnicity				
Hispanic or Latino Origin	118	8%	154	8%
Non-Hispanic	1,368	92%	1,843	92%
Race – (Non-Hispanic)				
Caucasian (Non-Hispanic)	420	30%	668	36%
African American (Non-Hispanic)	940	69%	1,094	60%
Other*	8	1%	81	4%
Birth Sex				
Male	965	65%	1,496	75%
Female	521	35%	501	25%
Current Age (Years)				
0 - 29	68	5%	155	8%
30 - 39	176	12%	338	17%
40 - 49	227	15%	380	19%
50+	1,015	68%	1,224	56%

Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

*Other includes Asian, American Indian, Pacific Islander or Native Hawaiian, Alaskan Native and Multi-racial

Ryan White funding is awarded to the following provider types in Delaware:

1. Hospital-Based Clinics

- a. Infectious Disease Wellness Clinics (IDWC) jointly sponsored by Christiana Care Health System (CCHS) and DPH
 - i. Wilmington Hospital Gateway - Wilmington
 - ii. Porter State Service Center - Wilmington
 - iii. Kent County Wellness Clinic - Smyrna
 - iv. Sussex County Wellness Clinic - Georgetown
 - v. HIV Program at Lancaster - Wilmington

2. Community-Based Organizations (CBOs)

- a. AIDS Delaware
- b. Beautiful Gate Outreach Center
- c. Case Management Services
- d. Delaware HIV Consortium
- e. Kent Sussex Community Services, Inc.
- f. Ministry of Caring
- g. Generations Home Care

3. Delaware Department of Health and Social Services (DHSS), Division of Public Health (DPH)

Table 76: Ryan White Program Services Provided, Delaware, 2019

Service Provided	Number of Clients Served
Health education and case management services	1,851
Dental services	777
Direct state services including eye exams and eye glasses	319
Emergency financial assistance	174
Transportation services	113
Housing assistance services	92
Health insurance services	204
Mental health and nutritional counseling	9

Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

CCHS is the only Ryan White Program funded community health medical provider in the state. In a recent HIV patient satisfaction survey, 76% of respondents indicated that the Community Program was their sole medical care provider. The Program offers HIV medical treatment and treatment for related conditions, in addition to primary health care (cancer screenings, immunizations, nutritional screening and counseling, exercise, stress reduction, and health maintenance). The Program has established a multidisciplinary medical model of care, with physicians (Infectious Disease, Internal Medicine, Family Medicine, OB/GYN, and Psychiatry), nurse practitioners, Licensed Clinical Social Workers (LCSWs), primary care nurses, social workers, pharmacists, and peer educators.

The program maintains a clinic site in each county at the Wilmington Hospital in New Castle County, the Smyrna Wellness Center in Kent County, and the Georgetown Wellness Clinic in Sussex County.

In 2019, 1,767 HIV patients made 10,614 visits to the clinics. Sixty-percent of patients have annual incomes below the federal poverty level. People of color comprised 75% of the patient population. Heterosexual transmission was the primary risk behavior reported by 50% of patients (exceeding national statistics). Thirty percent of patients were female. The predominant insurance was Delaware Medicaid (35% of all patients). Twenty-four percent had Medicare and 26% had private insurance, although many patients experience lapses in coverage due to changes in eligibility criteria, changes requirements, or incarceration.

Sixty percent of the Community Program patients are stage 3 HIV (AIDS). This is a reflection of continued late entry into HIV care. The proportion of patients presenting with, or developing, significant medical comorbidities or mental health issues while in care continues to increase. This is evidenced by a significant increase in the number of visits associated with nested subspecialty clinics (Medication Adherence, Mental Health, Office Based Opioid Treatment, Primary Care, and OB/GYN). The clinical outcomes associated with the Community Program exceed national benchmarks, including retention in care (89%), percentage of patients on ARV therapy (98%), and viral suppression, which is currently at 85%.

Other HIV-related services include Pre-Exposure Prophylaxis (PrEP) and Post-Exposure Prophylaxis (PEP). In 2019, a total of 38 patients received PrEP from the Community Program: 17 in New Castle County, 4 in Kent and 17 in Sussex County.



Section 6: Sexually Transmitted Diseases and Hepatitis C among Delawareans

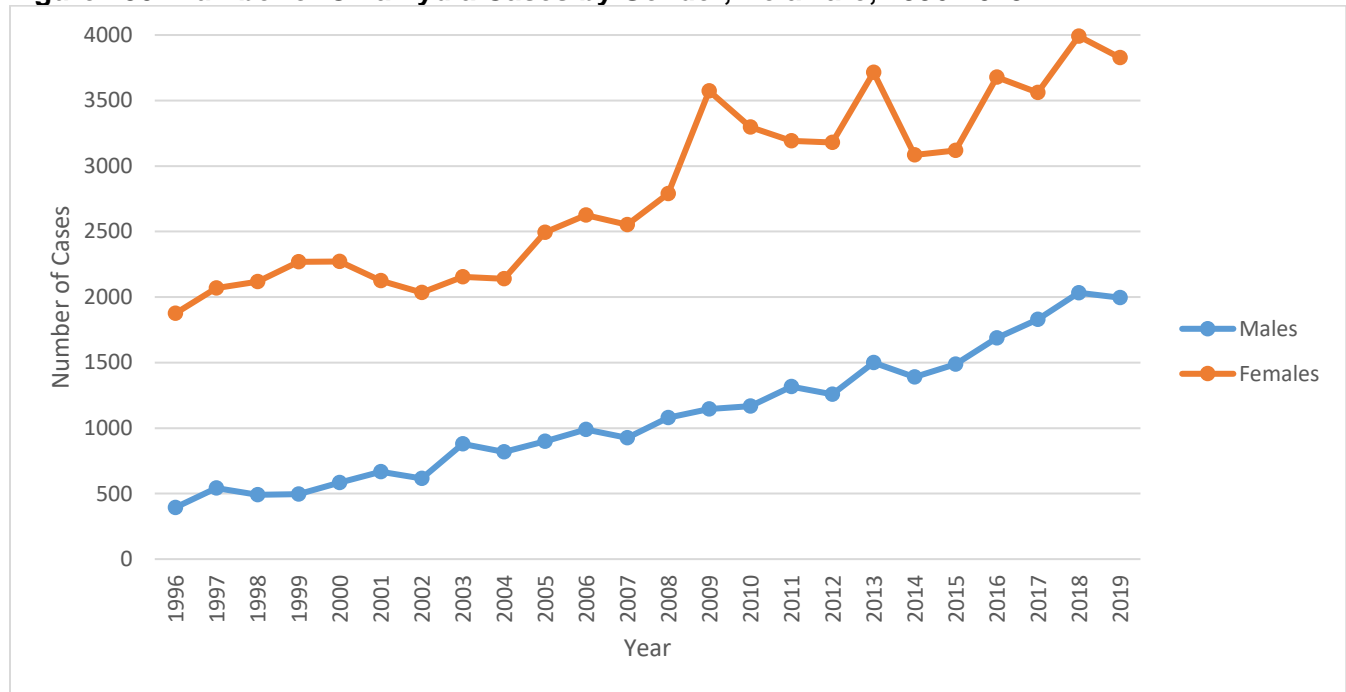
Sexually Transmitted Diseases (STDs) and Hepatitis C (HCV) among Delawareans

Sexually transmitted disease (STD) data helps identify populations at increased risk for transmission of HIV since the virus can be transmitted through unprotected sexual contact and some STDs facilitate HIV transmission.

STD data are reported to DPH by STD clinics, physician offices, correctional facilities, and laboratories. Recurrent STDs in the same individual usually reflects re-infection but may also be treatment failure. Therefore, the STD count per year may be greater than the total number of individuals diagnosed.

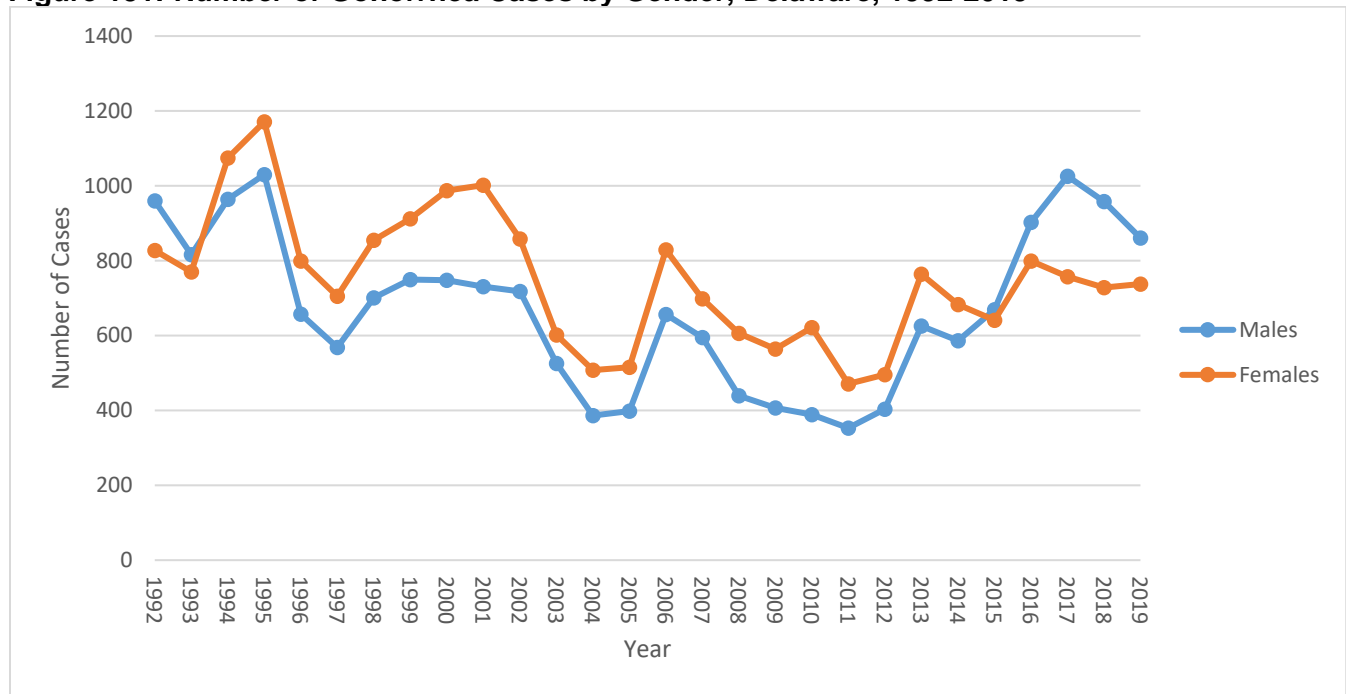
Incidence of gonorrhea and chlamydia has increased in recent years (Figures 130 and 131). In 1996, 2,269 cases of chlamydia were diagnosed. In 2019, this number increased to 5,839. Females accounted for the majority of chlamydia cases (Figure 130). Figure 132 shows the upward trend of primary and secondary syphilis infections from 2010-2019.

Figure 130: Number of Chlamydia Cases by Gender, Delaware, 1996-2019



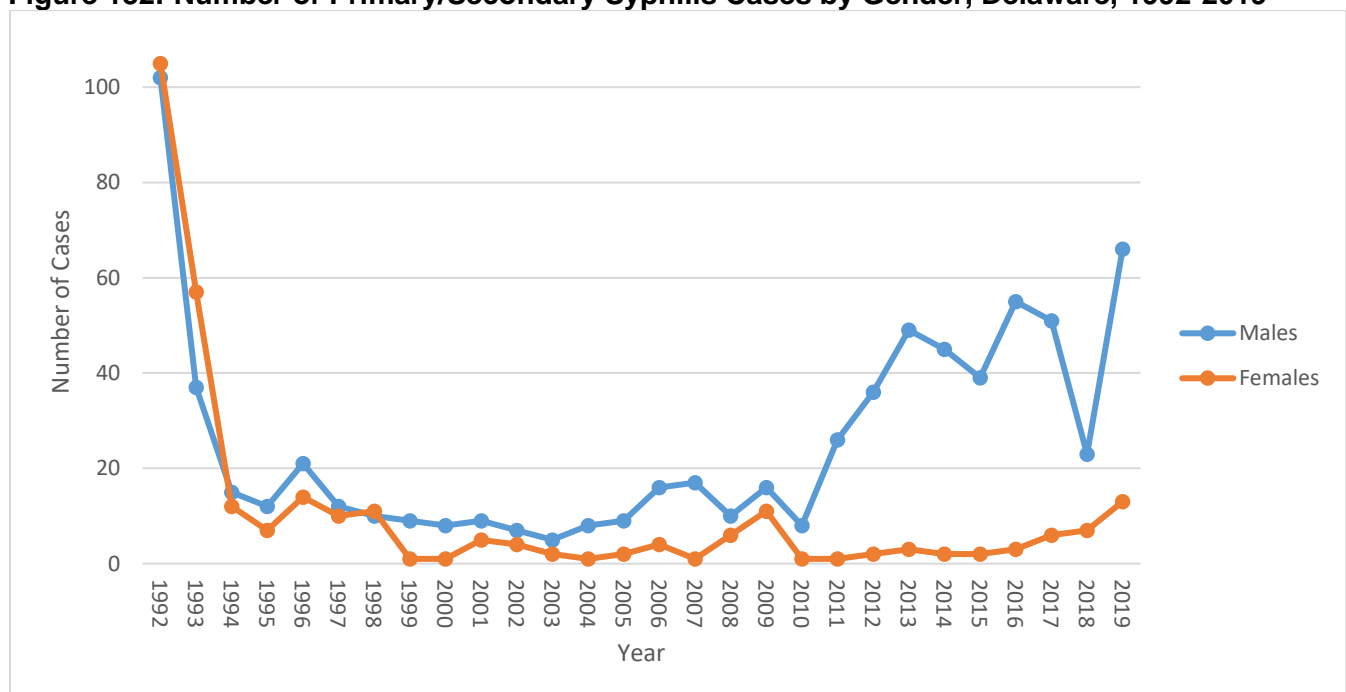
Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

Figure 131: Number of Gonorrhea Cases by Gender, Delaware, 1992-2019



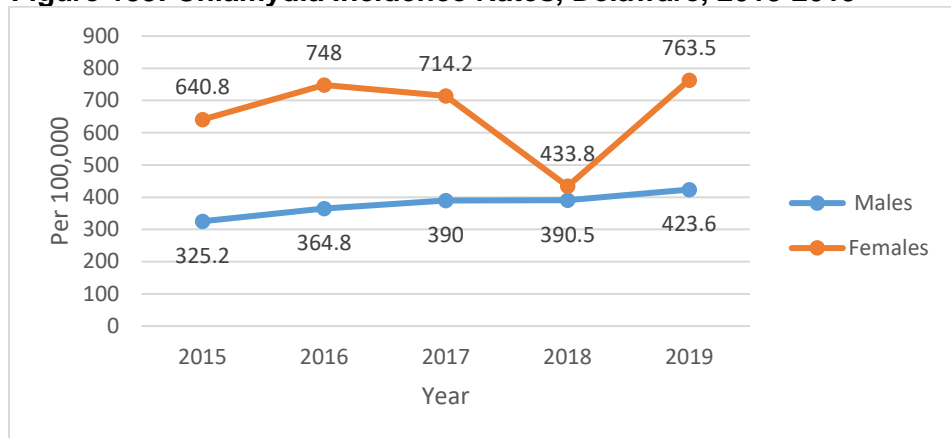
Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

Figure 132: Number of Primary/Secondary Syphilis Cases by Gender, Delaware, 1992-2019



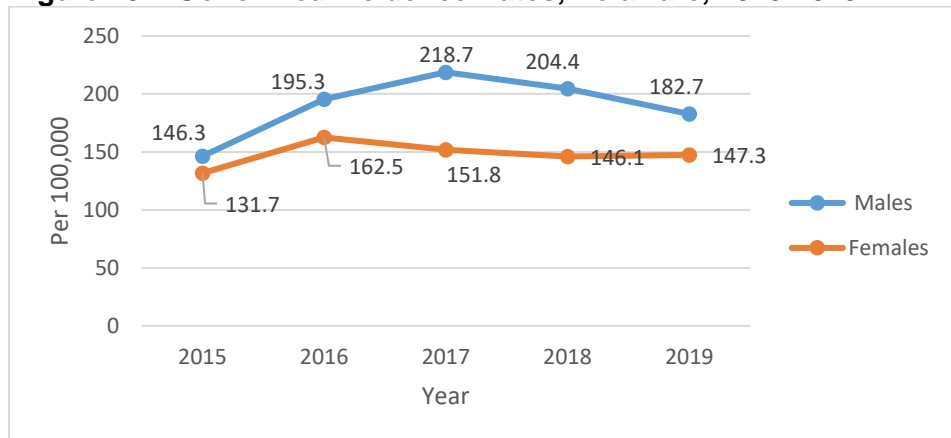
Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

Figure 133: Chlamydia Incidence Rates, Delaware, 2015-2019



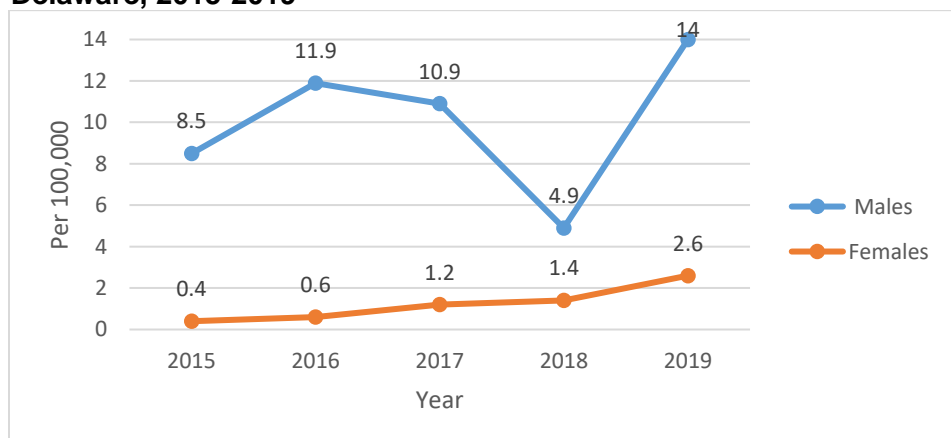
Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

Figure 134: Gonorrhea Incidence Rates, Delaware, 2015-2019



Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

Figure 135: Primary/Secondary Syphilis Incidence Rates, Delaware, 2015-2019



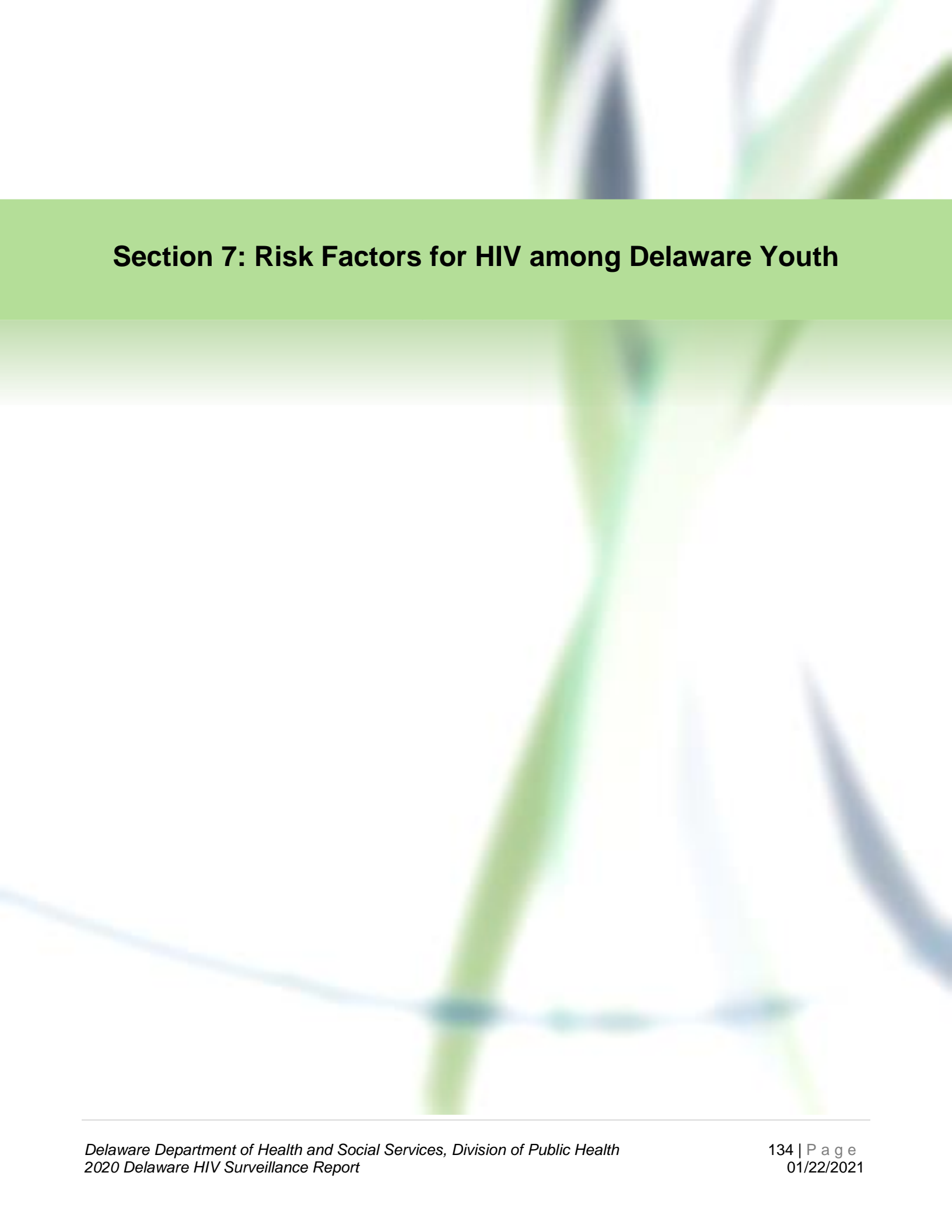
Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

Hepatitis C (HCV) and HIV Co-infection

The CDC recommends that individuals with HIV also be tested for HCV, especially HIV-infected injection drug users. The CDC estimates that 25% of HIV-infected individuals are also infected with HCV (CDC, 2015). The co-infection of HCV and HIV may cause chronic HCV to progress faster. It is unclear if HCV hastens the progress of HIV (U.S. Department of Health & Social Services, 2017).

In 2016, there were 2,592 reported HCV cases in Delaware. DPH's HIV Surveillance Office determined that of the 2,592 persons living in Delaware who are infected with HCV, 85 were also HIV positive. This equates to an approximately 3% HIV co-infection rate among persons with HCV.

Additional information on HIV and HCV co-infection may be found in the 2017 Delaware Hepatitis C Epidemiological Profile. Visit: <https://www.dhss.delaware.gov/dph/dpc/files/dehcvpi2017.pdf>



Section 7: Risk Factors for HIV among Delaware Youth

Risk Factors for HIV among Delaware Youth

Note: Delaware was not able to obtain a full representative sample for 2019

The 2017 Youth Risk Behavior Survey (YRBS) is a CDC-sponsored survey that tracks behavioral trends among high school students (e.g., nutrition, substance use, accidents, sex, and delinquency).

The YRBS uses self-administered, anonymous questionnaires to collect data from high school students. DPH, in cooperation with the University of Delaware's Center for Drug and Health Studies, administers the Delaware YRBS to Delaware public school students in grades 9-12.

The selected YRBS questions indicate youth behaviors that may lead to HIV exposure including the number of respondents that have ever tested for HIV.

Alcohol Use:

- 56.9% had at least one drink of alcohol in their lifetime.
- 16.0% had their first drink of alcohol before age 13.
- 28.7% had at least one drink of alcohol on one or more of the past 30 days.
- 14.9% had four or more drinks of alcohol in a row at least once in the past 30 days.

Other Drug Use:

- 44.1% used marijuana at least once in their lifetime.
- 7.4% tried marijuana for the first time before age 13.
- 26.1% used marijuana one or more times during the past 30 days.
- 2.1% used one or more forms of cocaine at least once in their lifetime.
- 3.2% sniffed glue, breathed the contents of aerosol spray cans, or inhaled any paints or sprays to get high at least once in their lifetime.
- 1.6% used heroin at least once in their lifetime.
- 1.7% used methamphetamines at least once in their lifetime.
- 3.0% used ecstasy at least once in their lifetime.
- 1.4% used a needle to inject any illegal drug into their body at least once in their lifetime.
- 16.8% were offered, sold, or given an illegal drug on school property by someone during the past 12 months

Sexual Behaviors

- 45.4% had sexual intercourse at least once in their lifetime.
- 17.0% had sexual intercourse with four or more people during their lifetime.
- 33.3% had sexual intercourse with one or more people during the past three months.
- 78.8% said they have never been tested for HIV.

Of students who had sexual intercourse during the past three months:

- 8.0% drank alcohol or used drugs during last sexual intercourse.
- 26.0% used a condom during last sexual intercourse.
- 7.3% used birth control pills during last sexual intercourse.



Section 8: Delaware Medical Monitoring Project Data, 2015-2018 Patient Interviews

Delaware MMP Data, 2015-2018 Patient Interviews

The Medical Monitoring Project (MMP)



The MMP is an ongoing population-based surveillance system to assess clinical outcomes and behaviors of HIV infected adults receiving care in the U.S. MMP is conducted in 17 states and 6 cities by local and state public health departments in collaboration with the CDC.

Delaware currently has 15 participating infectious disease clinics statewide. Seven hundred fifteen clients were interviewed from 2015 and 2018.

Respondent Demographic Information Collected

Table 77: Birth Sex and Race of Medical Monitoring Project Respondents, Delaware, 2015-2018

	Male		Female		Total	
	#	%	#	%	#	%
White	165	34.7%	40	16.7%	205	28.7%
Black	261	54.8%	179	74.9%	440	61.5%
Hispanic	28	5.9%	7	2.9%	35	4.9%
Asian	1	0.2%	0	0.0%	1	0.1%
Native Hawaiian/Pacific Islander	2	0.4%	1	0.4%	3	0.4%
American Indian/Alaskan Native	4	0.8%	0	0.0%	4	0.6%
Multiracial	15	3.2%	12	5.0%	27	3.8%
Total	476	100.0%	239	100.0%	715	100.0%

Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.
Data collected from the MMP Interview by DPH, 2015-2018

Table 78: Birth Sex and Age Group of Medical Monitoring Project Respondents, Delaware, 2015-2018

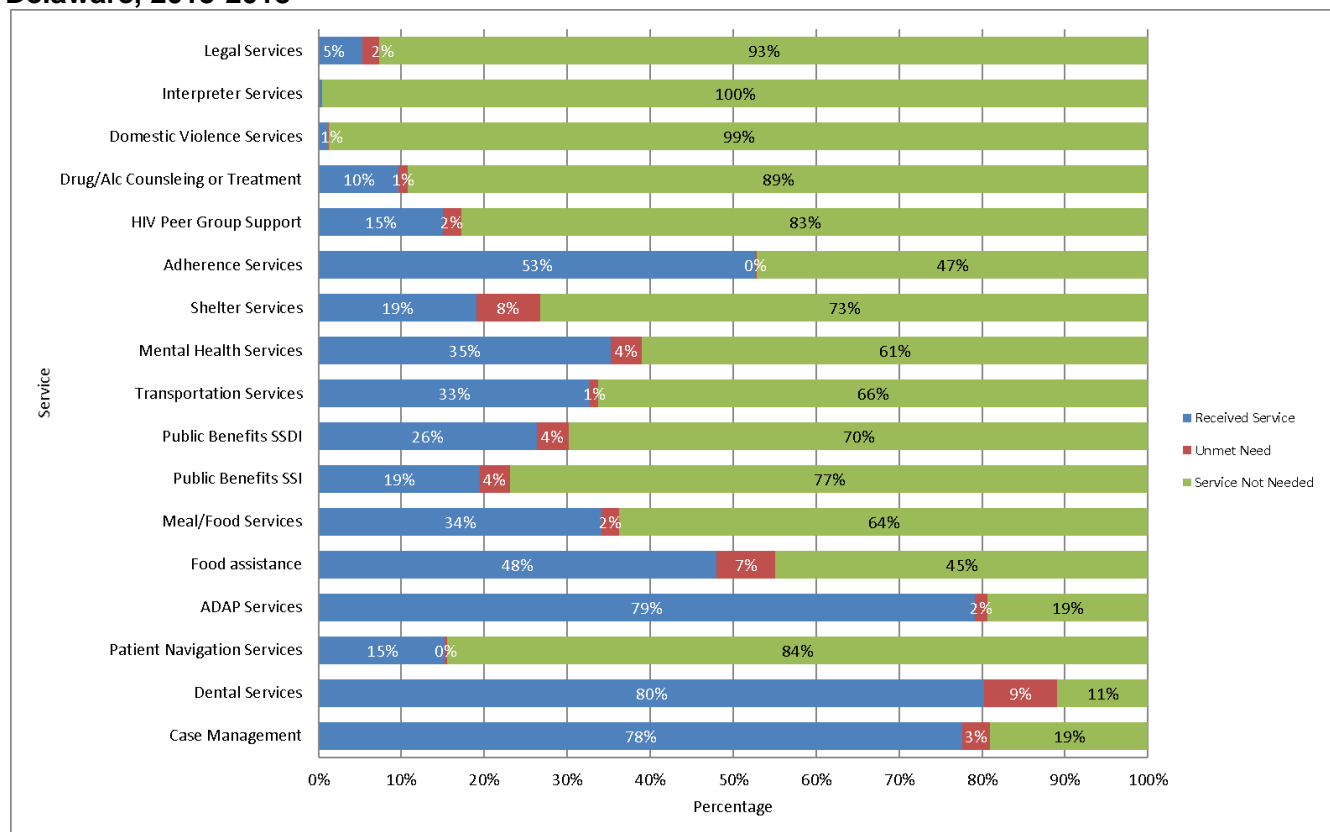
	Male		Female		Total	
	#	%	#	%	#	%
18-24	9	1.9%	1	0.4%	10	1.4%
25-34	49	10.3%	17	7.1%	66	9.2%
35-44	70	14.7%	46	19.2%	116	16.2%
45-54	141	29.6%	81	33.9%	222	31.0%
55+	207	43.5%	94	39.3%	301	42.1%
Total	476	100.0%	239	100.0%	715	100.0%

Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.
Data collected from the MMP Interview by DPH, 2015-2018

Met and Unmet Service Needs, Delaware, 2015-2018

Figure 136 demonstrates the utilization of, and unmet needs for, services as indicated by the 715 interview respondents.

Figure 136: Met and Unmet Service Needs of Medical Monitoring Project Respondents, Delaware, 2015-2018

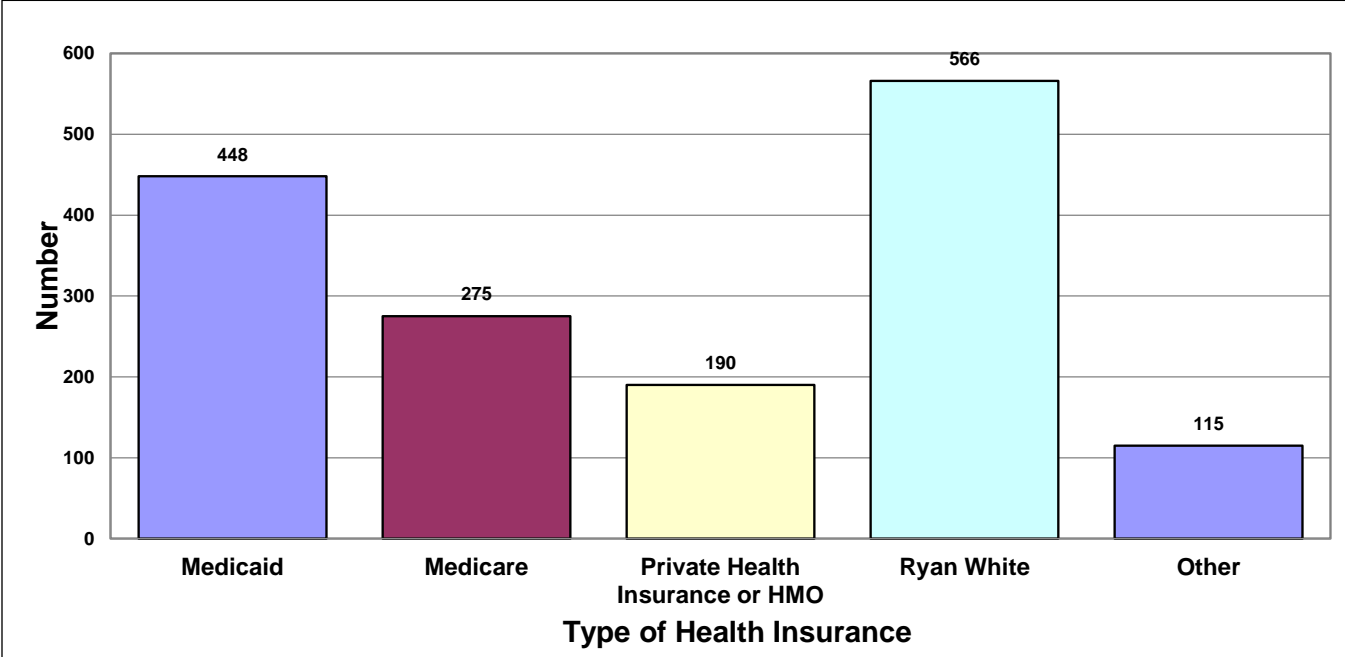


Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.
Data collected from the MMP Interview by DPH, 2015-2018

Medical Coverage in the Last 12 Months

Figure 137 demonstrates the types of health insurance utilized by the 715 interview respondents.

Figure 137: Medical Coverage among Medical Monitoring Project Respondents, Delaware, 2015-2018



Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

Data collected from the Medical Monitoring Project Interview by DPH, 2015-2018

*Categories are not exclusive, respondents may have used more than one type of health coverage

MMP Entry into Care

Tables 79 (a) through 79 (f) cover the experience of 715 respondents while entering initial HIV health care.

Table 79 (a): Within 30 days after you got your first positive HIV test, did someone ask if you needed help finding a place to go for outpatient HIV medical care or let you know where you could go for outpatient HIV medical care?

	Male		Female		Total	
	#	%	#	%	#	%
Yes	242	50.8%	130	54.4%	372	52.0%
No	101	21.2%	48	20.1%	149	20.8%
Refused/other	133	27.9%	61	25.5%	194	27.1%
Total	476	100.0%	239	100.0%	715	100.0%

Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

Data collected from the Medical Monitoring Project Interview by DPH, 2015-2018

Table 79 (b): Within 30 days after you got your first positive HIV test, did a professional help you figure out if you qualified for free or low-cost outpatient HIV medical care?

	Male		Female		Total	
	#	%	#	%	#	%
Yes	245	51.5%	133	55.6%	378	52.9%
No	96	20.2%	45	18.8%	141	19.7%
Refused/other	135	28.4%	61	25.5%	196	27.4%
Total	476	100.0%	239	100.0%	715	100.0%

Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

Data collected from the Medical Monitoring Project Interview by DPH, 2015-2018

Table 79 (c): Did you want a professional to help you figure out if you qualified for free or low-cost outpatient HIV medical care?

	Male		Female		Total	
	#	%	#	%	#	%
Yes	26	27.1%	15	33.3%	41	29.1%
No	70	72.9%	30	66.7%	100	70.9%
Total	96	100.0%	45	100.0%	141	100.0%

Note: These respondents indicated "No" in question B of this section

Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

Data collected from the Medical Monitoring Project Interview by DPH, 2015-2018

Table 79 (d): Did you know that free or low-cost outpatient HIV medical care may be available to those who qualify?

	Male		Female		Total	
	#	%	#	%	#	%
Yes	32	33.3%	18	40.0%	50	35.5%
No	64	66.7%	27	60.0%	91	64.5%
Total	96	100.0%	45	100.0%	141	100.0%

Note: These respondents indicated "No" in question B of this section

Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

Data collected from the Medical Monitoring Project Interview by DPH, 2015-2018

Table 79 (e). Within 30 days after you got your first positive HIV test, did a professional help you make an appointment for outpatient HIV medical care?

	Male		Female		Total	
	#	%	#	%	#	%
Yes	255	53.6%	131	54.8%	386	54.0%
No	87	18.3%	48	20.1%	135	18.9%
Refused/other	134	28.2%	60	25.1%	194	27.1%
Total	476	100.0%	239	100.0%	715	100.0%

Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

Data collected from the Medical Monitoring Project Interview by DPH, 2015-2018

Table 79 (f). Did you want a professional to help you make an appointment?

	Male		Female		Total	
	#	%	#	%	#	%
Yes	14	16.1%	18	37.5%	32	23.7%
No	73	83.9%	30	62.5%	103	76.3%
Total	87	100.0%	48	100.0%	135	100.0%

Note: These respondents indicated "No" in question E of this section

Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

Data collected from the Medical Monitoring Project Interview by DPH, 2015-2018

MMP HIV Medication Prescription and Adherence

Tables 80 (a) through 80 (d) provide a base level measure of MMP respondents who have been prescribed ART, and the level at which those persons appear to be adherent in taking those medications.

Table 80 (a): Medical Records Indicate Antiretroviral Therapy (ART) Prescribed?

	Male		Female		Total	
	#	%	#	%	#	%
Yes	437	91.8%	220	92.1%	657	91.9%
No	39	8.2%	19	7.9%	58	8.1%
Total	476	100.0%	239	100.0%	715	100.0%

Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

Data collected from the Medical Monitoring Project Interview by DPH, 2015-2018

Table 80 (b): Have you ever taken any HIV medicines?

	Male		Female		Total	
	#	%	#	%	#	%
Yes	469	98.5%	234	97.9%	703	98.3%
No	7	1.5%	5	2.1%	12	1.7%
Total	476	100.0%	239	100.0%	715	100.0%

Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

Data collected from the Medical Monitoring Project Interview by DPH, 2015-2018

Table 80 (c): During the past 12 months, have you taken HIV medicines?

	Male		Female		Total	
	#	%	#	%	#	%
Yes	463	97.3%	229	95.8%	692	96.8%
No	13	2.7%	10	4.2%	23	3.2%
Total	476	100.0%	239	100.0%	715	100.0%

Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

Data collected from the Medical Monitoring Project Interview by DPH, 2015-2018

Table 80 (d): Are you currently taking any HIV medicines?

	Male		Female		Total	
	#	%	#	%	#	%
Yes	459	96.4%	224	93.7%	683	95.5%
No	17	3.6%	15	6.3%	32	4.5%
Total	476	100.0%	239	100.0%	715	100.0%

Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

Data collected from the Medical Monitoring Project Interview by DPH, 2015-2018

Sexual Behavior

Table 81: Medical Monitoring Project, Number of Sexual Partners*, Delaware, 2015-2018

	MSM		MSW		WSM	
	#	%	#	%	#	%
None	308	64.7%	361	75.8%	126	52.7%
One	92	19.3%	80	16.8%	105	43.9%
Two or more	76	16.0%	35	7.4%	8	3.3%
Total	476	100.0%	476	100.0%	239	100.0%

Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

*MSM, MSW, WSM; these categories are not exclusive

Data collected from the Medical Monitoring Project Interview by DPH, 2015-2018

Table 82: Medical Monitoring Project, Reported Vaginal or Anal Sex with at Least One Partner in the Last 12 Months, Delaware, 2015-2018

	MSM		MSW		WSM	
	#	%	#	%	#	%
Yes	254	53.4%	204	42.9%	227	95.0%
No	222	46.6%	272	57.1%	12	5.0%
Total	476	100.0%	476	100.0%	239	100.0%

Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

*MSM, MSW, WSM; these categories are not exclusive

Data collected from the Medical Monitoring Project Interview by DPH, 2015-2018

Table 83: Medical Monitoring Project, Sexual Risk Behaviors, Delaware, 2015-2018

	Male		Female	
	#	%	#	%
No vaginal or anal sex	210	44.1%	123	51.5%
Sexually active, *WSW sex only	0	0.0%	4	1.7%
Condom protected vaginal or anal sex only	155	32.6%	75	31.4%
Vaginal or anal sex, but risk behavior unknown	5	1.1%	0	0.0%
Condomless vaginal or anal sex only with HIV-infected partners	42	8.8%	9	3.8%
Condomless vaginal or anal sex with at least one HIV negative partner, but partner was on PrEP	10	2.1%	1	0.4%
Condomless vaginal or anal sex with at least one unknown status partner not known if on PrEP	22	4.6%	7	2.9%
Condomless vaginal or anal sex with at least one HIV negative partner, partner not on PrEP or not known if on PrEP	24	5.0%	17	7.1%
Unknown	8	1.7%	3	1.3%
Total	476	100.0%	239	100.0%

Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

* Women having Sex with Women

Data collected from the Medical Monitoring Project Interview by DPH, 2015-2018

Substance Use

Thirty-seven respondents reported using injection drugs in the last 12 months. Non-injection drug use in the 12 months prior to the interview date is shown below.

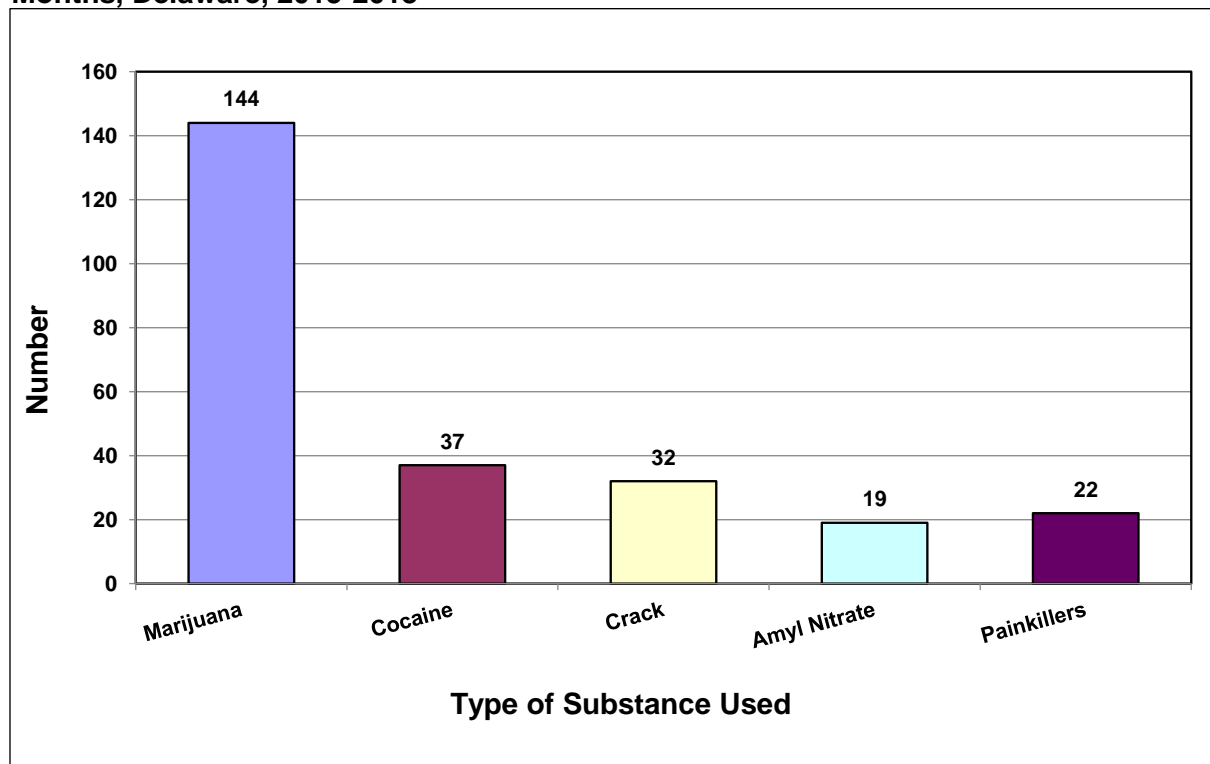
Table 84: Medical Monitoring Project, Non-injection Drug Use in the last 12 Months, Delaware, 2015-2018

	Male		Female		Total	
	#	%	#	%	#	%
Yes	118	24.8%	46	19.2%	164	22.9%
No	358	75.2%	193	80.8%	551	77.1%
Total	476	100.0%	239	100.0%	715	100.0%

Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

Data collected from the Medical Monitoring Project Interview by DPH, 2015-2018

Figure 138: Medical Monitoring Project, Type of Non-injection Drug Use in the last 12 Months, Delaware, 2015-2018



Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

*categories are not exclusive, respondents may have used more than one substance

Data collected from the MMP Interview by DPH, 2015-2018

Stigma

Stigma may interfere with HIV testing or HIV care. The following portion of the report explores barriers to receiving HIV care that were gathered from MMP interviews in 2015 and 2018. (Tables 85(a) through 85(j)).

Table 85 (a): I have been hurt by how people reacted to learning I have HIV

	Male		Female		Total	
	#	%	#	%	#	%
Strongly disagree	248	52.1%	112	46.9%	360	50.3%
Somewhat disagree	26	5.5%	9	3.8%	35	4.9%
Neutral	42	8.8%	15	6.3%	57	8.0%
Somewhat agree	45	9.5%	21	8.8%	66	9.2%
Strongly agree	115	24.2%	82	34.3%	197	27.6%
Total	476	100.0%	239	100.0%	715	100.0%

Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

Data collected from the Medical Monitoring Project Interview by DPH, 2015-2018

Table 85 (b): I have stopped socializing with some people because of their reactions to my HIV status

	Male		Female		Total	
	#	%	#	%	#	%
Strongly disagree	302	63.4%	144	60.3%	446	62.4%
Somewhat disagree	23	4.8%	9	3.8%	32	4.5%
Neutral	24	5.0%	6	2.5%	30	4.2%
Somewhat agree	34	7.1%	18	7.5%	52	7.3%
Strongly agree	93	19.5%	62	25.9%	155	21.7%
Total	476	100.0%	239	100.0%	715	100.0%

Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

Data collected from the Medical Monitoring Project Interview by DPH, 2015-2018

Table 85 (c): I have lost friends by telling them I have HIV

	Male		Female		Total	
	#	%	#	%	#	%
Strongly disagree	326	68.5%	159	66.5%	485	67.8%
Somewhat disagree	23	4.8%	10	4.2%	33	4.6%
Neutral	32	6.7%	10	4.2%	42	5.9%
Somewhat agree	21	4.4%	16	6.7%	37	5.2%
Strongly agree	74	15.5%	44	18.4%	118	16.5%
Total	476	100.0%	239	100.0%	715	100.0%

Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

Data collected from the Medical Monitoring Project Interview by DPH, 2015-2018

Table 85 (d): I am very careful who I tell that I have HIV

	Male		Female		Total	
	#	%	#	%	#	%
Strongly disagree	68	14.3%	35	14.6%	103	14.4%
Somewhat disagree	8	1.7%	2	0.8%	10	1.4%
Neutral	7	1.5%	0	0.0%	7	1.0%
Somewhat agree	29	6.1%	6	2.5%	35	4.9%
Strongly agree	364	76.5%	196	82.0%	560	78.3%
Total	476	100.0%	239	100.0%	715	100.0%

Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

Data collected from the Medical Monitoring Project Interview by DPH, 2015-2018

Table 85 (e): I worry that people who know I have HIV will tell others

	Male		Female		Total	
	#	%	#	%	#	%
Strongly disagree	164	34.5%	85	35.6%	249	34.8%
Somewhat disagree	24	5.0%	9	3.8%	33	4.6%
Neutral	33	6.9%	9	3.8%	42	5.9%
Somewhat agree	39	8.2%	13	5.4%	52	7.3%
Strongly agree	216	45.4%	123	51.5%	339	47.4%
Total	476	100.0%	239	100.0%	715	100.0%

Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

Data collected from the Medical Monitoring Project Interview by DPH, 2015-2018

Table 85 (f): I feel that I am not as good a person as others because I have HIV

	Male		Female		Total	
	#	%	#	%	#	%
Strongly disagree	375	78.8%	174	72.8%	549	76.8%
Somewhat disagree	16	3.4%	8	3.3%	24	3.4%
Neutral	16	3.4%	10	4.2%	26	3.6%
Somewhat agree	28	5.9%	13	5.4%	41	5.7%
Strongly agree	41	8.6%	34	14.2%	75	10.5%
Total	476	100.0%	239	100.0%	715	100.0%

Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

Data collected from the Medical Monitoring Project Interview by DPH, 2015-2018

Table 85 (g): Having HIV makes me feel unclean

	Male		Female		Total	
	#	%	#	%	#	%
Strongly disagree	386	81.1%	172	72.0%	558	78.0%
Somewhat disagree	14	2.9%	11	4.6%	25	3.5%
Neutral	17	3.6%	8	3.3%	25	3.5%
Somewhat agree	28	5.9%	14	5.9%	42	5.9%
Strongly agree	31	6.5%	34	14.2%	65	9.1%
Total	476	100.0%	239	100.0%	715	100.0%

Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

Data collected from the Medical Monitoring Project Interview by DPH, 2015-2018

Table 85 (h): Having HIV makes me feel that I'm a bad person

	Male		Female		Total	
	#	%	#	%	#	%
Strongly disagree	405	85.1%	199	83.3%	604	84.5%
Somewhat disagree	23	4.8%	7	2.9%	30	4.2%
Neutral	12	2.5%	3	1.3%	15	2.1%
Somewhat agree	15	3.2%	12	5.0%	27	3.8%
Strongly agree	21	4.4%	18	7.5%	39	5.5%
Total	476	100.0%	239	100.0%	715	100.0%

Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

Data collected from the Medical Monitoring Project Interview by DPH, 2015-2018

Table 85 (i): Most people think that a person with HIV is disgusting

	Male		Female		Total	
	#	%	#	%	#	%
Strongly disagree	253	53.2%	124	51.9%	377	52.7%
Somewhat disagree	24	5.0%	6	2.5%	30	4.2%
Neutral	42	8.8%	23	9.6%	65	9.1%
Somewhat agree	55	11.6%	19	7.9%	74	10.3%
Strongly agree	102	21.4%	67	28.0%	169	23.6%
Total	476	100.0%	239	100.0%	715	100.0%

Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

Data collected from the Medical Monitoring Project Interview by DPH, 2015-2018

Table 85 (j): Most people with HIV are rejected when others find out.

	Male		Female		Total	
	#	%	#	%	#	%
Strongly disagree	154	32.4%	62	25.9%	216	30.2%
Somewhat disagree	32	6.7%	6	2.5%	38	5.3%
Neutral	45	9.5%	13	5.4%	58	8.1%
Somewhat agree	77	16.2%	37	15.5%	114	15.9%
Strongly agree	168	35.3%	121	50.6%	289	40.4%
Total	476	100.0%	239	100.0%	715	100.0%

Source: Delaware Department of Health and Social Services, Division of Public Health, 2020.

Data collected from the Medical Monitoring Project Interview by DPH, 2015-2018

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Appendix A

Delaware HIV/AIDS Report Feedback

The purpose of this form is to provide the HIV Prevention and Surveillance office with feedback regarding the ease of use and applicability of this report to prevention care planning activities.

Please complete this feedback form and send it via mail, email, or fax to:

HIV/AIDS Surveillance Office
Delaware Division of Public Health
Thomas Collins Building, Suite 12, Rm 203L
540 S Dupont Hwy.
Dover, DE 19901
Fax: 302-739-2550
Email: james.dowling@delaware.gov

1. Of which planning group are you a member?

- ☐ Delaware HIV Planning Council ☐ Formulary Committee ☐ Policy Committee
☐ Other _____

2. Was the HIV Surveillance Report easy to read?

- ☐ Yes ☐ No ☐ Somewhat

3. How were the findings of the HIV Surveillance Report communicated to you?

- ☐ Electronically
☐ Profile Writers presented epidemiologic profile to planning group
☐ Other _____

4. Were the findings of the HIV Surveillance Report clear to you?

- ☐ Yes ☐ No ☐ Somewhat

If somewhat or no is selected, explain why.

5. Was the HIV Surveillance Report useful to your planning process?

- ☐ Yes ☐ No ☐ Somewhat

If somewhat or no is selected, explain why.

6. Describe how you used the HIV Surveillance Report in your planning activities.

7. How can the next HIV Surveillance Report be improved?

7a: What specific questions could be included in the next HIV Surveillance Report?

8. Do you want to receive the Monthly HIV statistical report?

☐ No

☐ Yes, please send the report to me by:
Include your contact information, as appropriate:

Email

Fax

Mail

9. Data from this HIV Surveillance Report is helpful to me as I conduct my job.

☐ Yes ☐ No

If yes, how do you use the data?

☐ Grant writing

☐ Proposal development

☐ Resource for presentations

☐ Other:
