



# Houston Area HIV Services Ryan White Planning Council

## Joint Meeting of the Comprehensive HIV Planning, Research, Data & Evaluation, and the Monitoring, Quality Assurance and Evaluation Committees 2:00 pm, Thursday, March 14, 2024

Join Zoom Meeting by clicking on this link:

<https://us02web.zoom.us/j/89330219598?pwd=RW9wKzFCWHI6SzRRNG12VndnR21YUT09>

Meeting ID: 893 3021 9598 Passcode: 253271 To join via telephone call: (346) 248-7799

**In-person location:** Bering Church, 1440 Harold Street, Houston, TX 77006. Please park and enter the building from behind the church on Hawthorne Street.

### AGENDA

- I. Reminder Regarding the Joint Meeting Process Tori Williams
  
- II. Call to Order
  - A. Welcoming Remarks and Moment of Reflection Kenia Gallardo, *She/Her/Hers*, and
  - B. Introductions Robert Sliepka, *Him/His/They*
  - C. Adoption of the Agenda Co-Chairs
  - D. Approval of the Minutes
  
- III. Public Comment and Announcements  
(NOTE: If you wish to speak during the Public Comment portion of the meeting, please sign up on the clipboard at the front of the room. No one is required to give his or her name or HIV status. All meetings are audio taped by the Office of Support for use in creating the meeting minutes. The audiotape and the minutes are public record. If you state your name or HIV status it will be on public record. If you would like your health status known, but do not wish to state your name, you can simply say: "I am a person living with HIV", before stating your opinion. If you represent an organization, please state that you are representing an agency and give the name of the organization.)
  
- IV. Comprehensive HIV Planning Committee Updates Tori Williams
  - A. Houston EMA/HSDA Epidemiological Profile
  - B. Houston EMA/HSDA HIV Needs Assessment
  - C. EHE/Integrated HIV Prevention and Care Planning Body
    - 1. See attached Summary of February 2024 Activities
  
- V. Training: Evaluation Skills Building Evelio Salinas Escamilla,  
Co-Chair, Monitoring, QI &  
Evaluation Committee
  
- VI. Review: Houston Continuum of Care/2023 Epi Supplement Evelio Salinas Escamilla
  
- VII. Assign Tasks & Set Date for Next Meeting: May 9, 2024
  
- VIII. Announcements
  
- IX. Adjourn

Agenda/Documentation of Progress for the Research, Data & Implementation and the Monitoring, Quality Assurance & Evaluation Committees

2:00 p.m., Thursday, March 14 2024

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NEXT MEETING DATE: \_\_\_\_\_

SUMMARY OF MEETING (over if more space is needed):

DECISIONS MADE & TASK ASSIGNMENTS:

Submitted by: \_\_\_\_\_  
Aryana Butler or Ama Williams, Staff

Date: \_\_\_\_\_

## Houston Area HIV Services Ryan White Planning Council

### Joint Meeting of the Comprehensive HIV Planning, Integrated Plan Research, Data & Evaluation, and the Integrated Plan Monitoring, Quality Assurance and Evaluation Committees

2:00 pm, Thursday, February 8, 2024

Meeting Location: Bering Church 1440 Harold St, Houston, TX 77006 and Zoom teleconference

### Minutes

COMMITTEE MEMBERS PRESENT	COMMITTEE MEMBERS ABSENT	IP COMMITTEES MEMBERS PRESENT
Jay Bhowmick**	Kenia Gallardo	Ms. Dee Francis
Johanna Castillo	Robert Sliepka, excused	Jeffrey Meyer
Kathryn Fergus	Titan Capri	Gloria Sierra
Glen Hollis**	Mary Guidry**, excused	Aryana Butler, HHD staff
Kenneth Jones		Ama Williams, HHD staff
Shital Patel		
Beatriz E.X. Rivera		<b>OTHERS PRESENT</b>
Evelio Salinas Escamilla**		Josh Mica, he/him/él, RWPC Chair
Jose Serpa-Alvarez		Sha'Terra Johnson, TRG
Imran Shaikh		Tionna Cobb, TRG
Steven Vargas**		Maylyne Gonzalez, TRG Intern
Gina German		Tori Williams, Office of Support
		Diane Beck, Office of Support

\*\* Comprehensive HIV Planning and Integrated Plan committee members

**Call to Order:** Josh Mica, he/him/él, RWPC Chair, called the meeting to order at 2:05 p.m. and asked for a moment of reflection. He then asked everyone to introduce themselves.

**Adoption of Agenda: Motion #1:** *it was moved and seconded (Vargas, Escamilla) to adopt the agenda with one change: add after Public Comment -- III. Elect a Committee Vice Chair. Motion carried.*

**Approval of the Minutes: Motion #2:** *it was moved and seconded (Rivera, Escamilla) to approve the November 9, 2023 minutes. Motion carried.* Abstentions: Bhowmick, Hollis, Jones, Patel, Rivera, Serpa-Alvarez, Shaikh, Vargas.

**Public Comment:** None.

**Elect a Committee Vice Chair:** Escamilla and Rivera nominated Vargas for vice chair; Vargas accepted the nomination.

#### EHE/Integrated HIV Prevention & Care Planning Committees

Mica welcomed members of the Research, Data & Evaluation and Monitoring, Quality Assurance and Evaluation Committees. He asked everyone to introduce themselves. T.

Williams briefly described the EHE/Integrated Plan and explained the format for the combined committee meetings each month. Committee members were asked to choose one or more of the Integrated Planning subcommittees and workgroups to serve as the evaluator. The evaluator for each committee/workgroup will report back and bring problems back to this group. The assignments are as follows:

**Committee Name - Assigned Evaluator**  
Status Neutral/Diagnose – Kathryn Fergus  
Treat – Kenneth Jones  
Education & Awareness - TBD  
Prevention & Policy – Beatriz Rivera  
Respond – Gina German  
Quality of Life/Social Determinants – TBD

**Workgroup Name – Assigned Evaluator**  
Consumer/Community Engagement – Josh Mica  
College – Gina German  
Needing In-Person Education – Josh Mica  
Youth – Kenneth Jones  
Professional Healthcare – Johanna Castillo  
Aging & HIV– Evelio Salinas Escamilla & Glen Hollis  
Housing – Kenia Gallardo and Mary Guidry  
Racial & Social Justice – Titan Capri

At the next joint committee meeting, Escamilla will provide training to members on evaluation tools and techniques.

**Announcements:** Escamilla said to look at ahead.hiv.gov to see the progress that has been made toward ending the epidemic in the Houston/Harris county area.

**Adjournment:** Motion: *it was moved and seconded (Escamilla, Hollis) to adjourn the meeting at 3:32 p.m. Motion Carried.*

Submitted by:

Approved by:

\_\_\_\_\_  
Tori Williams, Office of Support      Date

\_\_\_\_\_  
Chair of Committee      Date

**JA = Just arrived at meeting**  
**R = Left room temporarily**  
**M = Left the meeting**  
**C = Chaired the meeting**

**2024 Voting Record for Meeting Date February 8, 2024**

<b>MEMBERS</b>	<b>Motion #1: Agenda</b>				<b>Motion #2: Minutes</b>			
	<b>ABSENT</b>	<b>YES</b>	<b>NO</b>	<b>ABSTAIN</b>	<b>ABSENT</b>	<b>YES</b>	<b>NO</b>	<b>ABSTAIN</b>
Kenia Gallardo, Co-Chair	X				X			
Robert Sliepka, Co-Chair	X				X			
Jay Bhowmick		X						X
Johanna Castillo		X				X		
Titan Capri	X				X			
Kathryn Fergus		X				X		
Glen Hollis		X						X
Kenneth Jones		X						X
Shital Patel		X						X
Beatriz E.X. Rivera		X						X
Evelio Salinas Escamilla		X				X		
Jose Serpa-Alvarez		X						X
Imran Shaikh		X						X
Steven Vargas		X						X
<i>Gina German</i>		X				X		

## Ending the HIV Epidemic/Integrated HIV Prevention and Care Planning Body

## Summary Reports from Committees and Workgroups February 2024

The following EHE/Integrated Planning Body (EIPB) Committees and workgroups met for the first time in February 2024. Each group received general orientation, reviewed their committee/workgroup goals and determined activities for their committee/workgroup over the next couple of months.

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**Name of Committee/Workgroup, Date of Last Meeting, Staff Person Submitting Report**  
**Items of Note - Next meeting time & date** (unless stated otherwise, all meetings will be virtual only)

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**Aging & HIV Workgroup, 02/07/24, Diane Beck, Ryan White Office of Support (RWOoS)**

Jules Levin, Founder, the National AIDS Advocacy Project, briefly provided some new data on Aging and HIV. Diane will distribute the information to all members, along with the Clinical Guidelines used in NYC. And, Jules will hopefully return in May to give a more robust presentation. In March, Dr. Patel the Medical Director for South Central AETC is being asked to provide information on the training program currently being developed for the 5 Ryan White Part A funded HIV case managers who will receive training in gerontology and placed in Ryan White funded primary care clinics. Tori will also provide some basic information she gathered about Legacy Senior Services. **Next meeting: 12 noon, Wed., March 20, 2024**

**Consumer & Community Engagement Workgroup, 02/07/24, Richon Ohafia, Ryan White Grant Administration (RWGA)**

This workgroup agreed to merge with the Ryan White Affected Community Committee. They asked staff to add Jason Black to the membership list. **Next meeting: 11 am, Mon., March 25, 2024.**

**Housing Workgroup, 02/29/24, Tori Williams, RWOoS**

The three co-chairs of the workgroup welcomed the four attendees who joined the meeting, which was a session meant to orient participants. Participants recognized the expertise present in the co-chairs and in Mary Guidry, an Allies in Hope housing specialist, who will serve as the evaluator for the group's progress. Co-chair Megan Rowe announced that the Housing Opportunities for People Living with HIV (HOPWA) program will expect results from its own Houston housing needs assessment to be completed in June 2025. She also mentioned that some of the HOPWA funded service providers have developed ways to help their clients replace lost or stolen identification documents since this is often a significant barrier to clients receiving housing and other services. **Next meeting: 2 p.m., Thursday, March 28, 2024.**

**Needing In-Person Engagement Workgroup, 02/14/24, Tori Williams, RWOoS**

A workgroup member shared that they had recently been at a meeting of staff who work with the homeless. They expressed concern about administering Narcan for fear of contracting HIV. Members of the workgroup talked about collaborating with AETC to provide education about HIV prevention and referral-to-care for this group of providers twice a year since there is significant staff turnover in the field. Perhaps HIV case managers could be part of the bi-annual meetings for cross trainings on HIV and Housing. Could EHE funds be used to underwrite the cost? The March meeting will be dedicated to fleshing out this idea, reviewing the list of priority populations and identifying more people with expertise and personal experience that could help the group meet its goals. **Next meeting: 10 am, Wed., March 13, 2024**

(continued)

**Prevention and Policy Committee, 02/13/24, Eliot Davis, Houston Health Department (HHD)**

At the March meeting, Committee members are going to review and possibly edit some of their Committee goals. Staff and committee members will also focus on identifying people with expertise and personal experience that could help the group meet its goals. Of particular interest is locating Task Force membership lists. **Eliot receives the Staff Support Person of the month for his participation during the meeting and for submitting his notes per instructed and in a timely fashion. Hats off to Eliot! Next meeting: 12 noon, Tues., March 12, 2024**

**Racial and Social Justice Workgroup, 02/20/24, Richon Ohafia, RWGA**

Introductions were completed; 16 people attended. Roles and responsibilities were reviewed and the potential to invite and work with a number of other groups (Texas Black Women’s’ Health Initiative and others) was discussed. Workgroup members brought up the following: the importance of debunking myths of bathroom bills and transgender folks rights to use the bathroom of their choosing in peace. One member offered to share a document outlining how some cities are filling gaps with city funding budgeted for ending HIV. Another member asked for data on current STI and HIV prevalence at TDCJ. Members agreed to review goals more thoroughly at the next meeting and to adopt hybrid formats by meeting at Bering Church and on Zoom on the 3rd Tuesday of the month at 6 pm. **Next meeting: 6 pm, March 19, 2024 using hybrid formats. Participants are welcome to bring a brown bag dinner if they chose since there is no budget to provide food or beverages.**

**Research/Data/Implement. & Monitor./Quality Assur/Eval. Committees, 02/08/24, Tori Williams, RWOoS**

These two committees agreed to merge with the Ryan White Comprehensive HIV Planning Committee since a coordinated effort among the 3 committees will be efficient and beneficial to all members. Members volunteered to be assigned to each committee or workgroup to develop evaluation activities related to goals. The assignments are as follows:

**Committee Name - Assigned Evaluator**

Status Neutral/Diagnose – Kathryn Fergus  
Treat – Kenneth Jones  
Education & Awareness - TBD  
Prevention & Policy – Beatriz Rivera  
Respond – Gina German  
Quality of Life/Social Determinants – TBD

**Workgroup Name – Assigned Evaluator**

Consumer/Community Engagement – Josh Mica  
College – Gina German  
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Youth – Kenneth Jones  
Professional Healthcare – Johanna Castillo  
Aging & HIV– Evelio Salinas Escamilla & Glen Hollis  
Housing – Kenia Gallardo and Mary Guidry  
Racial & Social Justice – Titan Capri

**Next meeting: 2 pm, 2nd Thurs. of every month**

**Respond Committee, 02/28/24, Sha’Terra Johnson, TRG**

Co-Chair Tana Pradia led seven attendees through the agenda, including introductions and orientation to the Committee process. Co-Chair Paul Richards announced that he will soon be moving out of state, but he will contact someone else in his department who might be willing to co-chair the Committee. Discussion followed about the needed participation on the committee of Houston Health Department (HHD) personnel since Molecular Surveillance is under the purview of HHD. Sha’Terra offered to reach out and trade committees with a staff member from HHD. Because of conflicts with the Houston meeting of the Presidential Advisory Council on HIV/AIDS (PACHA) in March and the Leadership TEAM meeting in April, the next meeting was postponed until May. **Next meeting: 1 p.m., Wednesday, May 22, 2024**

**(continued)**



**Status-Neutral Systems and Diagnose Committee, 02/28/24, Chelsea Frand, Houston Health Department**

The committee was convened by Co-Chair Rodney Mills. Sha'Terra Johnson noted that the Community Planning Group (CPG) had recently encouraged its members to join Integrated Planning Body committees and workgroups. She will ask staff to send Tori the membership sign up lists and contact information. Chelsea Frand accepted the task of updating committee and workgroup goals from the EHE Plan to match those in the HHD *Master Plan*. Committee tasks assigned to all members included reviewing goals, identifying resources, and recruiting members. **Next meeting: 3 p.m., March 13, 2024**

**Treat Committee, 02/06/24, Tori Williams, RWOoS**

Activities for the next meeting include: meeting the assigned representative(s) from the Data and Evaluation Committees, a more careful review of each goal assigned to the committee and the workgroups under the Committee, and identifying names of individuals who should be invited to serve on the Committee. **Next meeting: 12 noon, Fri., March 8, 2024**

**Youth Workgroup, 02/06/24, Rod Avila, RWOoS**

Members of the workgroup feel as if *Goal 3Ac: Increase consumer input into developing educational materials about HIV...should inform Goal 3Ab: Develop and implement information programs that are tailored to priority populations and others....* At the March meeting, the workgroup members are going to hear about an active Youth Community Advisory Board (CAB) that focuses on clinical trials for youth. It started out being 100% on Zoom. Then, the group is going to hear about plans to create a Ryan White Youth Council. Members are also going to find friends who might have a copy of the contact list for the Youth Task Force. **Next meeting: 6 pm, Mon., March 4, 2024 (typically meets on Tuesdays)**



# HIV in the Houston Area

## 2023 Epidemiologic Supplement for HIV Prevention and Care Services Planning

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Produced Through a Partnership between:



**Houston Area Ryan  
White Planning  
Council**



**Houston Health  
Department**

**Disclaimer:**

This document is a supplement to and should be used in conjunction with the *2019 Houston Area Integrated Epidemiologic Profile for HIV Prevention and Care Services Planning*. (December 2019). This document contains data on selected epidemiological measures of HIV disease for the jurisdictions of Houston/Harris County and the Houston Eligible Metropolitan Area (**EMA**) for the reporting period of January 1 to December 31, 2021 (unless otherwise noted). It is intended for use in HIV prevention and care services planning conducted in years 2023-24. The separation of jurisdictions in the data presentation is intended to enhance the utility of this document as a tool for planning both HIV prevention and HIV care services. Data for the third geographic service jurisdiction in the Houston Area, the Houston Health Services Delivery Area (**HSDA**), are not presented here due to the overlap of data and data sources with the EMA, which makes the data virtually identical. The 2019 Epidemiologic Profile should be referenced for a comprehensive discussion of data pertaining to the epidemiological questions outlined in joint guidance from the Centers for Disease Control and Prevention and the Health Resources and Services Administration. More recent data may have become available since the time of publication.

**Funding acknowledgment:**

This document is supported by CDC-RFA-PS18-1802 from the Centers for Disease Control and Prevention (**CDC**) as part of an award totaling \$8,671,634. Its contents are solely the responsibility of the authors and do not necessarily represent the official views of the CDC.

This document is also supported by the Health Resources and Services Administration (**HRSA**) of the U.S. Department of Health and Human Services (**HHS**) as part of an award totaling \$24,272,961 and was not financed with nongovernmental sources. The contents are those of the authors and do not necessarily represent the official views of, nor an endorsement, by HRSA, HHS or the U.S. Government.

**Suggested citation:**

2023 Epidemiologic Supplement for HIV Prevention and Care Services Planning. Reporting period: January 1 to December 31, 2020. Approved: TBD

**Acknowledgments:**

The development of this document was overseen by the Ryan White Planning Council and HIV Prevention Community Planning Group.

**Contributors, reviewers and staff:**

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## Ryan White Planning Council Office of Support

- Tori Williams, Director
- Mackenzie Hudson, Health Planner

## Special thanks to the HIV surveillance team at the Houston Health Department (HHD):

Hafeez Rehman, Jeffrey Meyer, Maha Al-Selwadi, Safina Hsu, Paloma Ortega, Raoul Garcia, Veronica Anderson, Juan Gonzalez, Jr., Denise Guzman, Mayra Serrato, Andrea Diarte

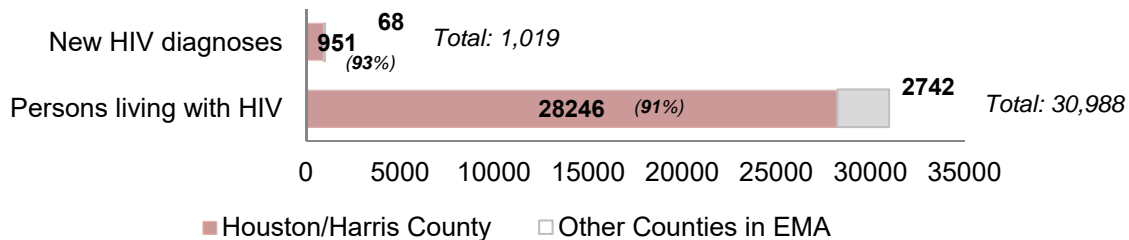
## EXECUTIVE SUMMARY

Local communities use data on patterns of HIV, or HIV epidemiology, to better understand who is diagnosed and living with HIV. This helps local communities make informed decisions about HIV services, funding, and quality.

This document is a supplement to the Houston Area’s current epidemiological profile of HIV (published in December 2019) and provides updated data on core HIV indicators used in local planning, including new HIV diagnoses and cumulative people living with HIV (HIV prevalence), for the two local jurisdictions of Houston/Harris County and the Houston Eligible Metropolitan Area (**EMA**), a six-county area that includes Houston/Harris County.<sup>1</sup> Data for the year 2020 should be interpreted with caution due to the impact of the COVID-19 pandemic on access to HIV testing, care-related services, and surveillance activities in state/local jurisdictions. A summary of key data is below:

- At the end of calendar year 2020, there were 30,988 diagnosed people living with HIV (**PLWH**) in the Houston EMA, a 2.6% increase from 2019 (2019 total = 30,198). In 2020, 91% of PLWH resided in Houston/Harris County.
- Also, in 2020, 1,019 new diagnoses of HIV were reported in the Houston EMA, a 22% decrease from 2019 (2019 total = 1,313). At the time of diagnosis, 93% resided in Houston/Harris County.

### Number of New HIV Diagnoses and People Living with HIV in the Houston EMA, by County, 2020



Sources: Texas eHARS, as of 12/31/2022

Definitions: New HIV diagnoses = People diagnosed with HIV between 1/1/2020 and 12/31/2020, with residence at diagnosis in Houston EMA. People living with HIV = People living with HIV at the end of calendar year 2020.

- In both Houston/Harris County and the Houston EMA, the rates of new HIV diagnoses and prevalence continue to exceed rates both for Texas and the U.S. The rate of new HIV diagnoses in Houston/Harris County is more than twice the rate for the U.S.
- Compared to the general population in the Houston EMA, PLWH are disproportionately male, Black/African Americans, and ages 45 to 54. There is a larger proportion of people ages 25 to 34 among new HIV diagnoses.
- Among 30,988 HIV-diagnosed individuals in the Houston EMA in 2020, 73% had receipt of care (at least one CD4/VL test in year); 56% were retained in HIV care (at least two CD4/VL tests in year, at least three months apart); and 60% maintained or reached viral load suppression ( $\leq 200$  copies/mL).

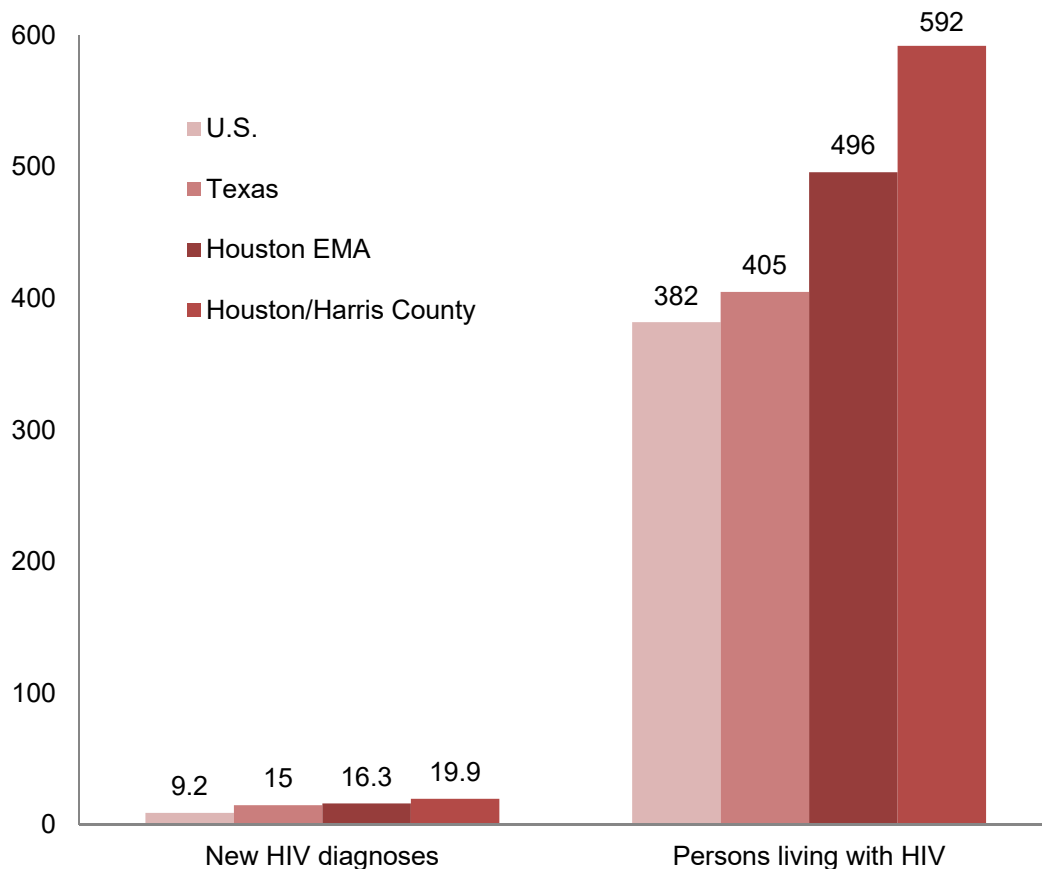
<sup>1</sup>Pages marked “EMA” in the top left corner use 2020 Houston EMA HIV prevalence data, and pages marked “H/HC” in the top left corner use 2020 Houston/Harris County HIV prevalence data, unless otherwise noted.

## COMPARISON OF HIV RATES IN HOUSTON, TEXAS, AND THE U.S.

A comparison of core HIV epidemiological indicators between the two Houston area jurisdictions (Houston/Harris County and the Houston EMA), the State of Texas, and the U.S. provides context for the local HIV burden data described in this document.

Overall, both Houston/Harris County and the Houston EMA have higher rates of new HIV diagnoses and HIV prevalence (or PLWH per 100,000 population) than both Texas and the U.S. This indicates that the HIV burden in the Houston area is greater than the state and the nation, even when adjusted for population size. In 2020, the Houston EMA had the highest new HIV diagnoses of any EMA/Transitional Grant Areas in Texas, according to epidemiological data provided by the Texas Department of State Health Services (**TDSHS**).

**Rate of New HIV Diagnoses and of People Living with HIV for the U.S., Texas, and Houston Area Jurisdictions**



\*Rate is per 100,000 population in the respective jurisdiction.

Sources:

U.S.: U.S.: Centers for Disease Control and Prevention. *Diagnoses of HIV Infection in the United States and Dependent Areas, 2020*. HIV Surveillance Report, 2020 (Preliminary); vol. 33. Published August 2022.

AIDSVu: Rates of Persons Living with HIV, 2020

Houston EMA: Texas eHARS. All data, 2020;

Houston/Harris County: Houston/Harris County eHARS. Diagnoses, 2020; Prevalence, 2020.

## NEW HIV DIAGNOSES IN HOUSTON/HARRIS COUNTY (H/HC)

In 2020, 951 new diagnoses of HIV disease (including stage 3 HIV/formerly AIDS) were reported in Houston/Harris County, a 23% decrease from 2019 (2019 total = 1,233). Data for the year 2020 should be interpreted with caution due to the impact of the COVID-19 pandemic on access to HIV testing, care-related services, and surveillance activities in state/local jurisdictions. The rate of new HIV and stage 3 HIV diagnoses in Houston/Harris County decreased from 25.9 to 19.9, while the rate of stage 3 HIV was approximately 5 new diagnoses for every 100,000 residents. When compared to 2019, decreases in new HIV rates occurred among all groups.

Proportionally, Black/African Americans made up the majority of new HIV diagnoses in 2020 at 47%, followed by Hispanic/Latinx at 38%. Male-to-male sexual contact or MSM accounted for the most transmission risk at 74%, followed by Sex with male/Sex with female (formerly heterosexual) at 19%.

New Diagnoses of HIV and Stage 3 HIV in Houston/Harris County by Sex assigned at Birth, Race/Ethnicity, Age, and Transmission Risk, 2020 <sup>a</sup>						
	New HIV <sup>b</sup>			New stage 3 HIV		
	Cases	%	Rate <sup>c</sup>	Cases	%	Rate <sup>c</sup>
<b>Total</b>	951	100.0	19.93	229	100.0	4.80
<b>Sex assigned at Birth</b>						
Male	799	84.02	34.10	187	81.66	7.98
Female	152	15.98	6.39	42	18.34	1.77
<b>Race/Ethnicity</b>						
White	107	11.25	8.15	21	9.17	1.60
Black/African American	445	46.79	49.00	95	41.48	10.46
Hispanic/Latinx	365	38.38	17.83	102	44.54	4.98
Other/Multiracial	34	3.58	6.76	11	4.80	2.19
<b>Age at Diagnosis</b>						
0 - 24 <sup>d</sup>	245	25.76	14.41	36	15.72	2.12
25 - 34	358	37.64	47.14	71	31.00	9.35
35 - 44	165	17.35	24.47	48	20.96	7.12
45 - 54	99	10.41	16.88	38	16.59	6.48
55 - 64	69	7.26	13.65	29	12.66	5.74
65+	15	1.58	3.03	7	3.06	1.42
<b>Transmission Risk<sup>e</sup></b>						
Male-to-male sexual contact (MSM)	707	74.34	*	151.7	66.24	*
Person who injects drugs (PWID)	42.4	4.46	*	14.5	6.33	*
MSM/PWID	20.6	2.17	*	5.5	2.40	*
Sex with male/Sex with female	176	18.51	*	56.3	24.59	*
Perinatal transmission	**	**	*	**	**	*

<sup>a</sup>Source: Texas eHARS, analyzed by the Houston Health Department

<sup>b</sup>HIV = People diagnosed with HIV, regardless of stage 3 HIV status, with residence at diagnosis in Houston/Harris County

<sup>c</sup>Rate per 100,000 population. Source: American Community Survey, 2020 5- year Estimates (for Harris County)

<sup>d</sup>Age group 0-12 years was combined with 13-24 years because 0-12 years category had less than 5 cases and could not be reported.

<sup>e</sup>People with no risk reported were recategorized into standard categories using the multiple imputation program of the Centers for Disease Control and Prevention (CDC).

\*\*Cases less than 5 are suppressed.

\*Population data are not available for risk groups; therefore, it is not possible to calculate rate by risk.

## PEOPLE LIVING WITH HIV IN HOUSTON/HARRIS COUNTY (H/HC)

Data on the total number of people living with HIV (PLWH) in Houston/Harris County are available as of the end of calendar year 2020. At that time, there were 28,246 PLWH (regardless of progression) in Houston/Harris County. This is a prevalence rate of 592 PLWH for every 100,000 people in the jurisdiction.

Of those living with HIV in Houston/Harris County, 76% are male, 48% are Black/African Americans, 76% are people ages 35 and older, and 60% report MSM as their primary transmission risk.

<b>People Living with HIV in Houston/Harris County by Sex assigned at Birth, Race/Ethnicity, Age, and Transmission Risk, 2020<sup>a</sup></b>			
	Cases <sup>b</sup>	%	Rate <sup>c</sup>
<b>Total</b>	28246	100.0	592.00
<b>Sex assigned at Birth</b>			
Male	21527	76.21	918.80
Female	6719	23.79	282.57
<b>Race/Ethnicity</b>			
White	4409	15.61	335.69
Black/African American	13526	47.89	1489.32
Hispanic/Latino	8844	31.31	432.07
Other/Multiracial	1467	5.19	291.77
<b>Current Age (as of 12/31/2020)</b>			
0 - 24	1116	3.95	65.63
25 - 34	5776	20.45	760.49
35 - 44	6608	23.39	979.83
45 - 54	6660	23.58	1135.23
55 - 64	5792	20.51	1146.00
65+	2294	8.12	464.08
<b>Transmission Risk<sup>d</sup></b>			
Male-to-male sexual contact (MSM)	16871	59.73	*
Person who injects drugs (PWID)	2184	7.73	*
MSM/PWID	1187	4.20	*
Sex with male/Sex with female	7686	27.21	*
Perinatal transmission <sup>e</sup>	247	0.87	*
Other adult risk	13	0.05	*

<sup>a</sup>Source: Texas eHARS analyzed by the Houston Health Department

<sup>b</sup>PLWH at end of 2020 = People living with HIV, regardless of stage 3 HIV status

<sup>c</sup>Rate per 100,000 population. Source: American Community Survey, 2020- 5-year Estimates (for Harris County)

<sup>d</sup>Patients with no risk reported were recategorized into standard categories using the multiple imputation or risk program of the Centers for Disease Control and Prevention (CDC).

<sup>e</sup>Perinatal transmission doesn't include perinatal exposure w/HIV age 13+ years.

\*Population data are not available for risk groups; therefore, it is not possible to calculate rate by risk.

## NEW HIV DIAGNOSES IN THE HOUSTON EMA

In 2020, 1,019 new HIV diagnoses were reported in the Houston EMA, 22% decrease from 2019. The rate of new HIV diagnoses for every 100,000 people in the Houston EMA decreased by 22% from 20.8 in 2019 to 16.3 in 2020.

Noticeable decreases in rates compared to 2019 occurred among all groups.

Black/African Americans comprised the highest proportion of new HIV diagnoses in 2020 at 47%, followed by Hispanic/Latinx at 38%. MSM accounted for the majority of transmission risk at 74%, followed by Sex with male/Sex with female at 19%.

<b>New Diagnoses of HIV in the Houston EMA by Sex assigned at Birth, Race/Ethnicity, Age, and Transmission Risk, 2020<sup>a</sup></b>				
		<b>Cases</b>	<b>%</b>	<b>Rate<sup>c</sup></b>
<b>Total</b>		1,019	100.0	16.32
<b>Sex assigned at Birth</b>				
	Male	847	83.12	27.37
	Female	172	16.88	5.46
<b>Race/Ethnicity</b>				
	White	128	12.56	6.10
	Black/African American	474	46.52	44.04
	Hispanic/Latinx	384	37.68	15.97
	Other/Multiracial	33	3.24	4.97
<b>Age</b>				
	0 – 24 <sup>d</sup>	255	25.02	11.38
	25 - 34	378	37.10	39.85
	35 - 44	188	18.45	21.03
	45 - 54	108	10.60	13.60
	55 - 64	75	7.36	10.92
	65+	15	1.47	2.21
<b>Transmission Risk<sup>b</sup></b>				
	Male-male sexual contact (MSM)	755	74.09	*
	Person who injects drugs (PWID)	47	4.61	*
	MSM/PWID	17	1.67	*
	Sex with male/Sex with female	198	19.43	*
	Perinatal transmission	**	**	*

<sup>a</sup> Source: Texas eHARS, new HIV diagnoses in the Houston EMA between 1/1/2020 and 12/31/2020.

<sup>b</sup> Cases with unknown transmission risk have been redistributed based on historical patterns of risk ascertainment and reclassification

<sup>d</sup> Age group 0-12 years was combined with 13-24 years because 0-12 years category had less than 5 cases and could not be reported.

\*\*Data has been suppressed to meet cell size limit of 5.

\*Population data are not available for risk groups; therefore, it is not possible to calculate rate by risk.



## PEOPLE LIVING WITH HIV IN THE HOUSTON EMA

At the end of calendar year 2020, there were 30,988 people living with HIV in the Houston EMA, a 3% increase from 2019 (30,198 cases). The rate of HIV prevalence also increased in 2020 to 496 PLWH for every 100,000 people in the Houston EMA, up from 478 in 2019.

Noticeable increases in prevalence rates in 2020 compared to 2019 occurred among all groups, except for Other/Multiracial and people ages 45 to 54.

Black/African Americans comprised the highest proportion of PLWH in 2020 at 48%, followed by Hispanic/Latinx at 30%. MSM accounted for the majority of transmission risk at 59%, followed by Sex with male/Sex with female at 28%.

<b>People Living with HIV in the Houston EMA by Sex assigned at Birth, Race/Ethnicity, Age, and Transmission Risk, 2020<sup>a</sup></b>				
		<b>Diagnosed PLWH</b>		
		<b>Cases</b>	<b>%</b>	<b>Rate<sup>c</sup></b>
<b>Total</b>		30,988	100.0%	496.28
<b>Sex assigned at Birth</b>				
	Male	23,440	75.64	757.34
	Female	7,548	24.36	239.69
<b>Race/Ethnicity</b>				
	White	5,163	16.66	246.01
	Black/African American	14,765	47.65	1371.76
	Hispanic/Latinx	9,448	30.49	392.82
	Other/Multiracial	1,612	5.20	242.83
<b>Age</b>				
	0 - 24	1,198	3.87	53.46
	25 - 34	6,251	20.17	659.08
	35 - 44	7,174	23.15	802.56
	45 - 54	7,427	23.97	935.12
	55 - 64	6,409	20.68	932.75
	65+	2,529	8.16	372.32
<b>Transmission Risk<sup>b</sup></b>				
	Male-male sexual contact (MSM)	18,395	59.36	*
	Person who injects drugs (PWID)	2,411	7.78	*
	MSM/PWID	1,270	4.10	*
	Sex with male/Sex with female	8,579	27.68	*

<sup>a</sup> Source: Texas eHARS, diagnosed PLWH in the Houston EMA between 1/1/2020 and 12/31/2020.

<sup>b</sup> Cases with unknown transmission risk have been redistributed based on historical patterns of risk ascertainment and reclassification; information for perinatal transmission risk and other adult risk is not available.

<sup>c</sup> Rate per 100,000 population. Source: American Community Survey, 2020 5-year estimates Houston EMA Population Denominators.

\*Population data are not available for risk groups; therefore, it is not possible to calculate rate by risk.

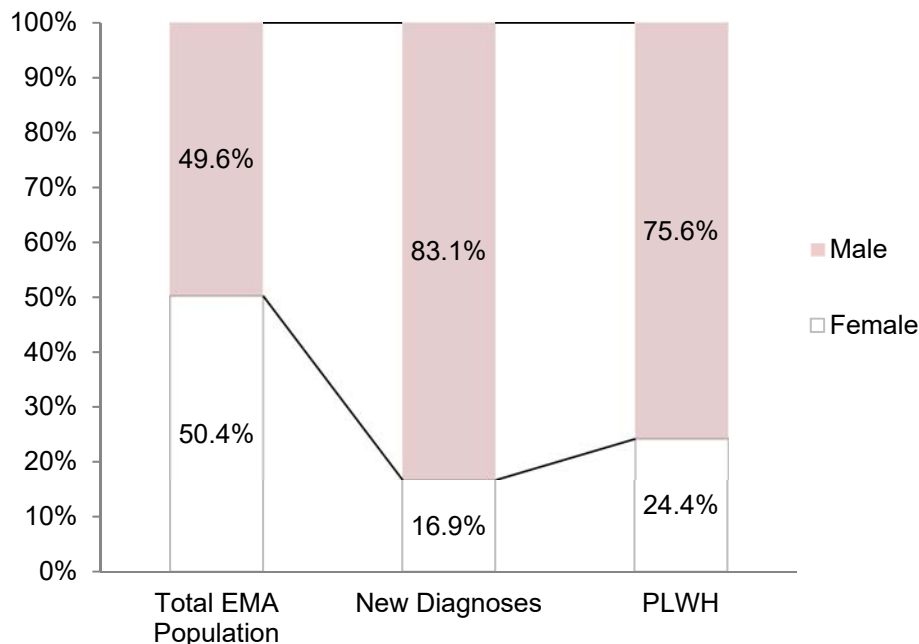
## COMPARISON OF THE HOUSTON EMA POPULATION TO THE POPULATION LIVING WITH HIV

**By Sex Assigned at Birth:** In 2020, the Houston EMA population was divided almost equally between males and females. However, more males than females were both newly diagnosed with HIV (83% vs. 17%) and living with HIV (76% vs. 24%) at the end of 2020.

**By Race/Ethnicity:** Black/African Americans, Hispanic/Latinx, and people of other or multiple races account for 66% of the total Houston EMA population, while these groups comprised 87% of all new HIV diagnoses in 2020 and 83% of all PLWH at the end of 2020. Black/African Americans account for 17% of the total Houston EMA population but comprised 47% of new HIV diagnoses in 2020 and close to half of all PLWH (48%) in the region at the end of 2020.

**By Age:** People ages 25 to 34 accounted for a much larger proportion of new HIV diagnoses (37%) than their share of the Houston EMA population (15%) in 2020. Similarly, people ages 45 to 54 accounted for a much larger proportion of those living with HIV (24%) at the end of 2020 than their share of the population (13%).

**Comparison of Total Population<sup>a</sup> in the Houston EMA to People Living with HIV<sup>b</sup> by Sex assigned at Birth,<sup>c</sup> 2020**

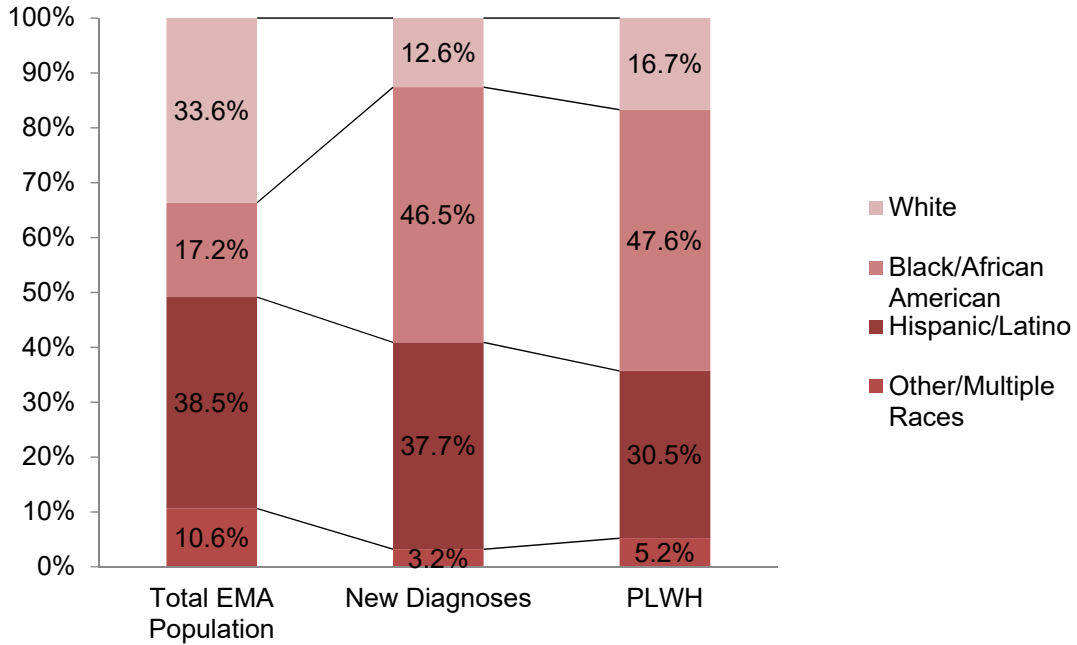


<sup>a</sup>Source: American Community Survey, 2020 5-year estimates

<sup>b</sup>Texas eHARS, Diagnosed PLWH in the Houston EMA as of 12/31/2020; new HIV diagnoses in the Houston EMA between 1/1/2020 and 12/31/2020.

<sup>c</sup>Transgender people are reflected in data by sex assigned at birth due to underreporting.

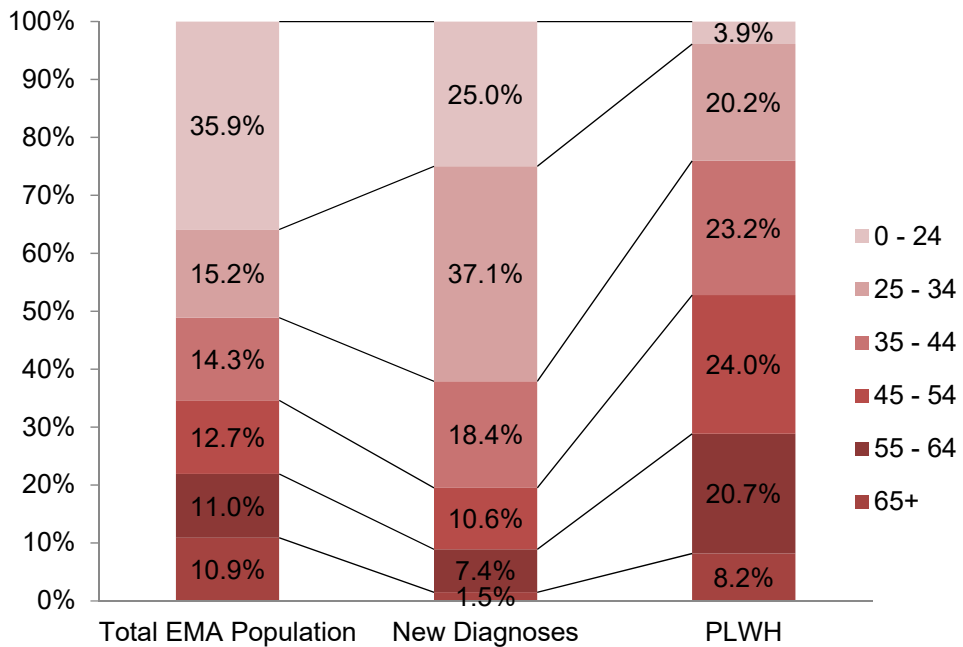
**Comparison of Total Population<sup>a</sup> in the Houston EMA to People Living with HIV<sup>b</sup> by Race/Ethnicity, 2020**



<sup>a</sup>Source: American Community Survey, 2020 5-year estimates

<sup>b</sup>Texas eHARS, Diagnosed PLWH in the Houston EMA as of 12/31/2020; new HIV diagnoses in the Houston EMA between 1/1/2020 and 12/31/2020.

**Comparison of Total Population<sup>a</sup> in the Houston EMA to People Living with HIV<sup>b</sup> by Age, 2020**



<sup>a</sup>Source: American Community Survey, 2020 5-year estimates

<sup>b</sup>Texas eHARS, Diagnosed PLWH in the Houston EMA as of 12/31/2020; new HIV diagnoses in the Houston EMA between 1/1/2020 and 12/31/2020.

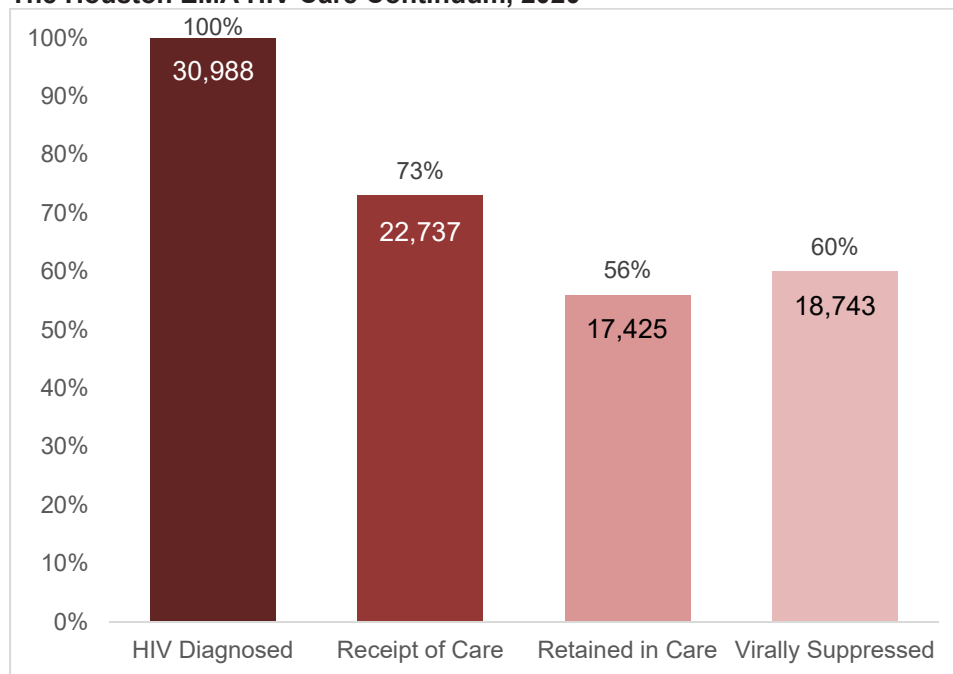
<sup>N</sup>Data suppressed as case number was fewer than 5.

## THE HOUSTON EMA HIV CARE CONTINUUM

The Houston EMA HIV Care Continuum depicts the number and percentage of PLWH in Harris, Fort Bend, Waller, Montgomery, Liberty and Chambers counties at each stage of HIV care, from being diagnosed with HIV to viral suppression then linkage to care. Stakeholders use this analysis to measure the extent to which PLWH have community-wide access to care and identify potential service gaps. The methodology follows the CDC definition for a diagnosis-based HIV care continuum.

Among 30,988 HIV-diagnosed individuals in the Houston EMA in 2020, 73% had receipt of care (at least one CD4/VL test in year); 56% were retained in HIV care (at least two CD4/VL tests in year, at least three months apart); and 60% maintained or reached viral load suppression ( $\leq 200$  copies/mL).

**The Houston EMA HIV Care Continuum, 2020**



*Methodology of CDC diagnosis-based HIV Care Continuum:*

HIV Diagnosed: No. of HIV-diagnosed people residing in the Houston EMA, 2020.

Receipt of Care: No. of HIV-diagnosed people who had a care visit as documented by a CD4 or viral load in 2020.

Retained in Care: No. of HIV-diagnosed people who had at least two care visits documented by a CD4 or viral load at least 90 days apart in 2020

Virally Suppressed: No. of HIV-diagnosed people whose last viral load test of the year was  $\leq 200$  copies/mL.

Source: TDSHS HIV Unmet Need Project (incl. eHARS, ELR, ARIES, ADAP, Medicaid, private payer data)

Linked to care data is not available.

## **ADDENDUM**

To provide up-to-date findings, we include 2021 data of Houston/Harris County as an addendum to our existing report for comparison since 2021 data of EMA is not available.

## NEW HIV DIAGNOSES IN HOUSTON/HARRIS COUNTY (H/HC)

In 2021, 1,182 new diagnoses of HIV disease (including stage 3 HIV/formerly AIDS) were reported in Houston/Harris County, an 24% increase from 2020 (2020 total = 951). Data for the year 2020 should be interpreted with caution due to the impact of the COVID-19 pandemic on access to HIV testing, care-related services, and surveillance activities in state/local jurisdictions. The rate of new HIV and stage 3 HIV diagnoses in Houston/Harris County increased from 19.9 to 24.9, while the rate of stage 3 HIV remained approximately 6 new diagnoses for every 100,000 residents. When compared to 2020, increases in new HIV rates occurred among all groups.

Proportionally, Black/African Americans made up the majority of new HIV diagnoses in 2021 at 46%, followed by Hispanic/Latinx at 40%. Male-to-male sexual contact or MSM accounted for the most transmission risk at 72%, followed by Sex with male/Sex with female (formerly heterosexual) at 20%.

<b>New Diagnoses of HIV and Stage 3 HIV in Houston/Harris County by Sex assigned at Birth, Race/Ethnicity, Age, and Transmission Risk, 2021<sup>a</sup></b>						
	New HIV <sup>b</sup>			New stage 3 HIV		
	Cases	%	Rate <sup>c</sup>	Cases	%	Rate <sup>c</sup>
<b>Total</b>	1182	100.0	24.90	303	100.0	6.38
<b>Sex assigned at Birth</b>						
Male	961	81.30	40.64	237	78.22	10.02
Female	221	18.70	9.28	66	21.78	2.77
<b>Race/Ethnicity</b>						
White	117	9.90	8.77	25	8.25	1.87
Black/African American	544	46.02	61.10	127	41.91	14.26
Hispanic/Latinx	469	39.68	22.69	140	46.20	6.77
Other/Multiracial	52	4.40	11.42	11	3.63	2.42
<b>Age at Diagnosis</b>						
0 - 24 <sup>d</sup>	277	23.43	16.25	37	12.21	2.17
25 - 34	445	37.65	59.64	104	34.32	13.94
35 - 44	213	18.02	31.07	71	23.43	10.36
45 - 54	131	11.08	22.11	43	14.19	7.26
55 - 64	85	7.19	16.61	34	11.22	6.64
65+	31	2.62	6.12	14	4.62	2.77
<b>Transmission Risk<sup>e</sup></b>						
Male-to-male sexual contact (MSM)	846.8	71.64	*	198.8	65.61	*
Person who injects drugs (PWID)	67	5.67	*	21	6.93	*
MSM/PWID	30.3	2.56	*	7.1	2.34	*
Sex with male/Sex with female	236.9	20.04	*	76.1	25.12	*
Perinatal transmission	**	**	*	0	0	*

<sup>a</sup>Source: Texas eHARS, analyzed by the Houston Health Department

<sup>b</sup>HIV = People diagnosed with HIV, regardless of stage 3 HIV status, with residence at diagnosis in Houston/Harris County

<sup>c</sup>Rate per 100,000 population. Source: 2021 American Community Survey 5-Year Estimates and 2020 U.S. Decennial Census

<sup>d</sup>Age group 0-12 years was combined with 13-24 years because 0-12 years category had less than 5 cases and could not be reported.

<sup>e</sup>People with no risk reported were recategorized into standard categories using the multiple imputation program of the Centers for Disease Control and Prevention (CDC).

\*\*Cases less than 5 are suppressed.

\*Population data are not available for risk groups; therefore, it is not possible to calculate rate by risk.

## PEOPLE LIVING WITH HIV IN HOUSTON/HARRIS COUNTY (H/HC)

Data on the total number of people living with HIV (**PLWH**) in Houston/Harris County are available as of the end of calendar year 2021. At that time, there were 29,139 PLWH (regardless of progression) in Houston/Harris County. This is a prevalence rate of 614 PLWH for every 100,000 people in the jurisdiction.

Of those living with HIV in Houston/Harris County, 76% are male, 48% are Black/African Americans, 76% are people ages 35 and older, and 61% report MSM as their primary transmission risk.

People Living with HIV in Houston/Harris County by Sex assigned at Birth, Race/Ethnicity, Age, and Transmission Risk, 2021 <sup>a</sup>			
	Cases <sup>b</sup>	%	Rate <sup>c</sup>
<b>Total</b>	29139	100.0	613.83
<b>Sex assigned at Birth</b>			
Male	22282	76.47	942.36
Female	6857	23.53	287.79
<b>Race/Ethnicity</b>			
White	4380	15.03	328.33
Black/African American	14012	48.09	1573.73
Hispanic/Latinx	9196	31.56	444.84
Other/Multiracial	1551	5.32	340.54
<b>Current Age (as of 12/31/2021)</b>			
0 - 24	1145	3.93	67.17
25 - 34	5944	20.40	796.64
35 - 44	6746	23.15	983.90
45 - 54	6680	22.92	1127.19
55 - 64	6050	20.76	1181.97
65+	2574	8.83	508.39
<b>Transmission Risk<sup>d</sup></b>			
Male-to-male sexual contact (MSM)	17654.8	60.59	*
Person who injects drugs (PWID)	2163.1	7.42	*
MSM/PWID	1192.6	4.09	*
Sex with male/Sex with female	7812.5	26.81	*
Perinatal transmission <sup>e</sup>	242	0.83	*
Other adult risk	13	0.04	*

<sup>a</sup>Source: Texas eHARS analyzed by the Houston Health Department

<sup>b</sup>PLWH at end of 2021 = People living with HIV, regardless of stage 3 HIV status

<sup>c</sup>Rate per 100,000 population. Source: 2021 American Community Survey 5-Year Estimates and 2020 U.S. Decennial Census

<sup>d</sup>Patients with no risk reported were recategorized into standard categories using the multiple imputation or risk program of the Centers for Disease Control and Prevention (CDC).

<sup>e</sup>Perinatal transmission doesn't include perinatal exposure w/HIV age 13+ years.

\*Population data are not available for risk groups; therefore, it is not possible to calculate rate by risk.

<p>UPDATED: 02/29/24</p> <p><b>INTEGRATED PLANNING BODY (IP)</b></p> <p>Unless otherwise noted, all meetings will be held via Zoom or hybrid</p> <p>PACHA = President's Advisory Council on HIV/AIDS</p> <p>Z = Zoom (virtual only)</p>	<i>Sun</i>	<i>Mon</i>	<i>Tue</i>	<i>Wed</i>	<i>Thu</i>	<i>Fri</i>	<i>Sat</i>	
						<b>1</b>	<b>2</b>	
	<b>3</b> Walk to End HIV 2024	<b>4</b> 6:00 p.m. Z IP Youth Wg (Normally meets on 1 <sup>st</sup> Tues.)	<b>5</b> Election Day	<b>6</b>	<b>7</b> 12 noon RW Steering Committee	<b>8</b> 12 noon IP Treat Committee	<b>9</b>	
<h1 style="writing-mode: vertical-rl; transform: rotate(180deg);">March</h1> <h1 style="writing-mode: vertical-rl; transform: rotate(180deg);">2024</h1>	<b>10</b> National Women & Girls HIV Awareness Day	<b>11</b>	<b>12</b> 12 noon IP Prevention & Policy Comm	<b>13</b> 10:00 a.m. IP Needing in Person Engagement Wg  3:00 p.m. Status Neutral & Diagnose Comm	<b>14</b> 12 noon RW Planning Council  2:00 pm RW Comp HIV Planning with the IP Research, Data & Implement. and Monitoring, QA & Evaluation committees	<b>15</b> 12noon Road to Success Bering Church	<b>16</b>	
	<b>17</b>	<b>18</b> 11:00 a.m. RW Operations	<b>19</b> 2:00 p.m. RW Quality Improvement  6:00 p.m. IP Racial & Social Justice Wg	<b>20</b> 12 noon IP HIV & Aging Wg  Nat'l Native American HIV Awareness Day	<b>21</b>	<b>22</b>	<b>23</b>	
	<b>24</b>	<b>25</b> 11:00 a.m. RW Affected Community with the IP Consumer & Community Engagement Wg	<b>26</b>	<b>27</b> PACHA mtg in Houston 12noon Camino Hacia tu Salud Bering Church	<b>28</b> PACHA mtg in Houston 12 noon RW Priority & Allocations  2:00 pm Housing Wg  4:00 p.m. CPG	<b>29</b> HOLIDAY		<b>30</b>
	<b>31</b>							