2023 ANNUAL HIV SURVEILLANCE SUMMARY REPORT

Bureau of Epidemiology

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DEPARTMENT OF HEALTH

Helpful and Contact Information

The Annual HIV Surveillance Summary is prepared by the
Bureau of Epidemiology
Pennsylvania Department of Health

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The data provided in the tables, figures, and maps are based on HIV reports received through March 31, 2024. Expanded analysis of data presented in the Annual HIV Surveillance Summary and other HIV data may be requested by sending email to c-hivepi@pa.gov or by telephone/fax to our office at 717-787-3350 (Tel) or 717-772-6975 (fax).

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A Special Note for the Readers of Pennsylvania HIV Surveillance Report
Explanation for Changes in the Annual HIV Surveillance Summary Report

This note is intended to inform readers of changes that were introduced in the Pennsylvania Annual Human Immunodeficiency Virus (HIV) Surveillance Summary Report since the 2021 report. These changes are intended to present HIV surveillance data in a format that reflects an evolving understanding of and efforts to end the HIV epidemic by 2030. Format changes were made to reflect the way HIV is viewed and to make this report more understandable to a wider audience. This report provides additional information about the estimated number of people living with HIV disease and the characteristics of both people newly diagnosed with HIV and those living with HIV. We present the age at diagnosis and current ages in categories that are consistent with reports from the Centers for Disease Control and Prevention (CDC) and the US Health Resources & Services Administration (HRSA). We also use racial/ethnicity designations that are consistent with CDC and HRSA reports, and we added some information about concurrent diagnosis of HIV and Acquired immunodeficiency syndrome (AIDS).

In 2002, Pennsylvania promulgated public health regulations revising the reportability of adult and pediatric AIDS, adding HIV, CD4 count (<200 cells/uL or <14%), detectable viral load, and perinatal exposure to HIV. In addition, in October 2020, Pennsylvania's disease reporting regulations were changed to mandate the reporting of all CD4 and HIV viral load laboratory results. Prior to this time, only CD4 test results less that 200 cells (14%) and detectable viral load results were required to be reported to the Pennsylvania Department of Health (PADOH).

The CDC recognizes HIV disease as a condition with varying degrees of severity. The case definition for adults and adolescents (i.e., persons aged ≥13 years) is slightly different than for childen under the age of 13. These case definitions are intended for public health surveillance only and not as a guide for clinical diagnosis. The most recent revision to the HIV disease case definition was published by CDC in 2014.[1]

Consequently, any comparison of this report to previous years should take into account these differences.

Questions and comments can be directed to
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Abbreviations

AIDS	Acquired immunodeficiency syndrome
CDC	Centers for Disease Control and Prevention
eHARS	enhanced HIV/AIDS Reporting System
HAART	Highly Active Antiretroviral Treatment
HIV	Human Immunodeficiency virus
HRSA	Health Resources and Services Administration
IDU	Injection drug use
IHPCP	Integrated HIV prevention and care plan
MSM	Gay, bisexual, and other men who have sex with men
NIR	No identified risk
NRR	No risk reported
PA	Pennsylvania
PA-DOH	Pennsylvania Department of Health
PA-NEDSS	Pennsylvania National Electronic Disease Surveillance System
PLWH	People living with HIV
SC-FHCCP	Southcentral- Family Health Council of Central PA
SPBP	Special Pharmaceuticals Benefits Program
STD	Sexually transmitted disease(s)
SW-JHF	Southwest- Jewish Healthcare Foundation

Note About the Impact of the COVID- 19 Pandemic on Surveillance of HIV Disease

The COVID-19 pandemic in the United States led to disruptions in HIV testing services and access to clinical services throughout 2020 and 2021. This disruption resulted in a steep, single-year decline in new HIV diagnoses in 2020 of approximately 21% fewer diagnoses compared to 2019. In 2021, Pennsylvania (PA) witnessed approximately 8% fewer diagnoses of HIV disease compared to 2019. This decline in newly diagnosed HIV disease is thought to be attributed to declines in testing caused by less frequent visits to health centers, reduced outreach services, and shifting of public health staff to COVID-19 response activities. Given these disruptions, data for 2020 and 2021 should be interpreted with caution. Trends that include 2020 and 2021 are not discussed in the commentary sections of this report although data are presented for HIV diagnoses. COVID-19 disruptions in HIV testing and care in 2020 and 2021 also made estimation of incidence, prevalence, and knowledge of HIV diagnostic status challenging.

With the end of federal COVID-19 Public Health Emergency in May 2023, it is critical that we continue our work to expand and improve HIV prevention, care, and treatment for groups who could most benefit, including transgender persons, Black/African American women, and gay, bisexual, and other men who have sex with men. We will continue our work to improve access to prevention services for people who inject drugs, a population for whom progress continues to be threatened by the nation's opioid and stimulant epidemics. Getting back on track with prevention, surveillance and care services will require scale-up of strategies to optimize health and close gaps in HIV prevention, care, and treatment.

Note About Data Suppression

Restricting the release of HIV disease data for public health use, often referred to as data suppression, refers to various approaches that data scientists, statisticians, epidemiologists, and data analysts use to limit unintended disclosure of confidential information and eliminate misuse and misinterpretation of results. Some factors are considered when suppressing data released for public health use. These include population size used as the numerator or denominator or the type of information that might inadvertently identify an individual in a small population, such as sex, gender, race, ethnicity, age, or HIV transmission mode. Suppression could be primary or secondary/complementary. In primary suppression, there is direct suppression of cells, rows, or columns with small counts of less than five. A secondary suppression will be required if primary suppression fails to protect confidentiality. The cells that will be secondarily suppressed do not need to have small data counts but will serve as an additional protection layer for cells with small counts. Cells in this report that are suppressed are identified with a dash (-).

HIV Surveillance Spotlight

The Epidemiology of HIV Disease Among Transgender Individuals in Pennsylvania (PA), 2023

BACKGROUND: Transgender people, specifically transgender women, living in the United States are disproportionately impacted by HIV disease.[2] Reasons for this disparity include higher rates of engaging in risky sexual behaviors, stigma, discrimination, and other sociocultural/socioeconomic factors.[3,4] In PA, approximately 0.5% (66,000) of the population identified as transgender in 2022.[5] The objective of this spotlight is to describe the characteristics of the transgender population in PA impacted by HIV, and to assess their HIV care continuum.

METHODS: The enhanced HIV/AIDS Reporting System (eHARS) was queried to identify transgender persons who were diagnosed with HIV since the beginning of the pandemic in the 1980's. Inclusion criteria are: a person living with HIV (PLWH) who identifies as a gender that is different than their sex at birth; PA resident at time of HIV diagnosis; and a current residence of PA at year-end 2023. Data were analyzed and presented using SAS 9.4 and Microsoft Excel 2016, while the HIV care continuum was generated using the CDC-provided monitoring HIV care outcomes SAS Program.

RESULTS: At year-end 2023, 519 transgender PLWH regardless of the place of diagnosis were resident in PA. Of the total, 95.4% (495/519) were transgender women and 4.6% were transgender men. The distribution of transgender by age and race/ethnicity are shown in tables 1 and 2.

Table 1: Transgender people Living with HIV by Age Group at Year-end 2023 in PA

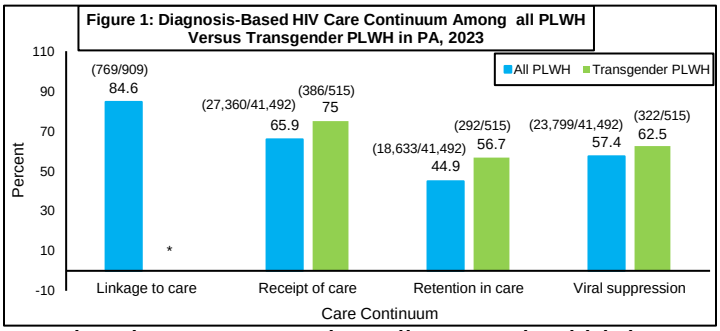
Age group	No.	%
15-24	13	2.5
25-34	161	31.0
35-44	182	35.1
45-54	69	13.3
55-64	68	13.1
≥65	26	5.0
Total	519	100

Table 2: Race/Ethnicity of Transgender People Living with HIV at Year-end 2023 in PA

Race/Ethnicity	No.	%
AIAN, Asian	9	1.7
Black/African American	347	66.9
Hispanic	92	17.7
Multiple race	28	5.4
White	43	8.3
Total	519	100.0

By transmission mode, 74.2% (385/519) were MSM, 11.6% (60/519) were MSM&IDU, 7.9% (41/519) acquired HIV through heterosexual contact, 4% (21/519) acquired HIV through IDU, and 2.3% (12/519) had another mode of transmissions, including pediatric mode, no identified risk (NIR), and no risk reported (NRR). Figure 1 provides information on the HIV care continuum among the 515 transgender people and all 41,492 people diagnosed with HIV by December 31, 2022, and alive on December 31, 2023. Transgender people when compared to all PLWH had higher percentages of receipt of care, retention in care, and viral suppression.

Figure 1: Diagnosis-Based HIV Care Continuum Among all PLWH Versus Transgender PLWH in PA, 2023



CONCLUSION: While transgender people are disproportionately impacted by HIV, their continuum of HIV care assessment is better than that of the general population of PLWH. However, given their higher risk of transmission, more prevention and outreach services should be sustained to ensure continued improvement in linkage to care, retained in care, and virally suppression.

Executive Summary

HIV disease is caused by infection with the human immunodeficiency virus (HIV) and is typically spread by exposure to body fluids or tissue from an infected individual. Sex and injection drug use (IDU) are the most common ways of acquiring HIV.The first incidence of Acquired Immunodeficiency Syndrome (AIDS) was described in 1981, and individuals with confirmed AIDS in PA dating back to 1980 were identified through retrospective review.

HIV takes over cells in the immune system, the part of the body which usually works to fight off infection and disease. If left untreated, HIV infection usually progresses to AIDS, disability and death. Although no cure or vaccine are currently available, HIV is a treatable condition, and individuals living with HIV can live normal lives. Highly active antiretroviral treatments (HAART) first became available in the mid-1990s. These treatments are effective at preventing or slowing the progression of the disease and have the added benefit of reducing the likelihood of transmitting the virus to others.

In 2012 the U.S. Food and Drug Administration approved the use of selected antiretroviral medications for the prevention of HIV disease among people at increased risk for acquiring HIV, such as men who have sex with men, commercial sex workers and people who share injection equipment. The PA Department of Health (PADOH) and community partners work to ensure that people who are newly diagnosed with HIV are offered a number of services to ensure better disease outcomes and that those in their risk network are also offered preventive services. PADOH works with community partners to identify recent and rapidly growing clusters of HIV disease and intervenes to stop or slow the spread of HIV. PADOH uses HIV surveillance data to identify geographic areas and demographic groups that may be at elevated risk for HIV disease.

Since 1981, more than 65,500 residents of PA were diagnosed with HIV disease and nearly 29,200 of them died. It is estimated that 36,300 diagnosed with HIV disease in PA are currently living with the disease in PA. The proportion of people with HIV disease who died has declined steadily since the mid-1990s. The most common methods of transmission are sex between men, heterosexual sex, and (IDU. HIV disease has disproportionately impacted persons of color and is more common in larger population centers.

The number of newly diagnosed individuals peaked in the early to mid-1990s when almost 3,000 new diagnoses were reported annually. The number of new diagnoses steadily decreased with the advent of effective treatments and preventive interventions. In 2020, PA had a 21% decrease in the number of new diagnoses of HIV disease (785 new diagnoses in 2020 compared to 988 in 2019), which might be attributed to the temporary closure of social, school, employment, and other venues, decreases in HIV testing activity and care seeking behavior, as well as decreased HIV surveillance activity as some surveillance resources were diverted to deal with the worldwide COVID-19 pandemic (see the note on the impact of the COVID-19 pandemic on HIV surveillance on page 6).

In 2023, 909 new cases were reported, which represents an approximate 16% rebound (785 new diagnoses in 2020, 909 new diagnoses in 2023) in new diagnoses from 2020. More than three times as many males werediagnosed with HIV disease compared to females.

Blacks/African Americans and Hispanics make up 12.2% and 8.6% of the population of PA, respectively[6], but accounted for 44.9% and 24% of all new diagnoses among PA residents in 2023.

Although a person can be infected at any age, the majority of new diagnoses occurred in persons who are between the ages of 15 and 54. The majority of persons living with HIV disease are aged 55 and older.

The epidemic has evolved since the first cases were reported in the1980s. While men who have sex with men MSM has continued to be the predominant mode of transmission, heterosexual contact became an increasing risk factor since the 1990s. Perinatally acquired infections have declined sharply with very few reported cases; however, medical providers need to remain vigilant by continuing to test for HIV during all pregnancies and especially in the third trimester. Epidemiologists, medical providers and other service managers need to remain alert to ensure all children born to pregnant individuals who are HIV positive and all people of childbearing age are tested for HIV.

This report is based on data collected by the PADOH for cases diagnosed in calendar year 2023 but reported through March 31, 2024. The report provides information on confirmed cases that are counted using specific criteria described in the methods section.

Methods

PA HIV regulations require health care providers such as physicians, hospitals and clinical laboratories report new diagnoses of HIV disease and infants who are exposed to HIV infection during pregnancy and the perinatal period to the PADOH within five days.[7] HIV disease without an AIDS diagnosis became reportable in PA in 2002. HIV disease encompasses both AIDS and HIV infection without an AIDS diagnosis, and individuals who acquire HIV are counted using standard criteria established by the CDC.[1] Typically, new HIV diagnoses are first reported electronically by clinical laboratories, hospitals, and medical providers whenever there is a preliminary or confirmatory event, such as a positive HIV laboratory test or the occurrence of an AIDS-defining clinical condition. The occurences are reported through the PA National Electronic Disease Surveillance Systems (PA-NEDSS).[7] In addition, data are routinely transferred from PA-NEDSS to the eHARS for purposes of data management, analysis and reporting to the CDC.[8]

All reports are followed up by epidemiologists and disease intervention specialists to collect additional information about individuals newly diagnosed with HIV, such as risk factors, residence at diagnosis, and race. These data are continuously processed through electronic data systems that use standardized algorithms to calculate the date of confirmed diagnosis, age at diagnosis, the most likely way the person acquired HIV (e.g., sex, IDU, etc.), clinical status, and a variety of other characteristics. The surveillance of HIV is guided by standard procedures, policies, and practices as established by the CDC.[9,10]

These data are used to (1) monitor trends in the epidemic, (2) target communities, demographic groups, or geographic areas for prevention and outreach efforts, (3) monitor potential outbreaks or clusters of cases, and (4) develop strategies and tools for preventing new infections and ensuring persons who are living with HIV disease are able to receive medical care and support services. Within the PADOH, the HIV surveillance section works closely with the HIV prevention section and sections that provide follow-up services, contact follow-up, and the Special Pharmaceutical Benefits Program. These collaborations ensure that people living with HIV receive necessary medical care and other support services.

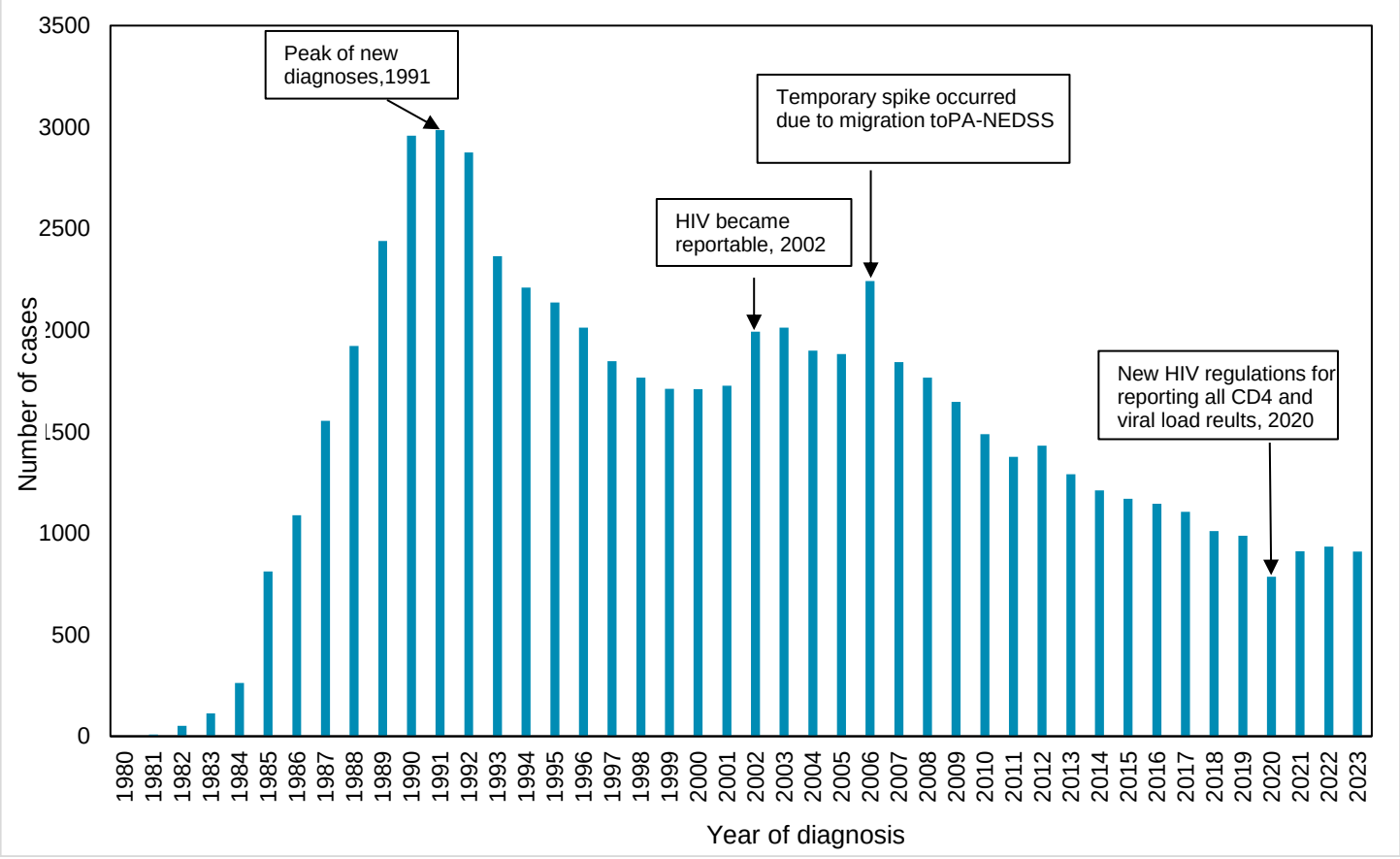
Data in this report are based on confirmed HIV disease among persons who were residents of PA at the time of diagnosis in calendar year 2023 and reported to the PADOH by March 31, 2024. Nationally, certain minimum requirements must be met to be considered a “countable” HIV disease. These requirements are the same as those used by the CDC for publishing national estimates.[1] At a minimum, an individual must have a confirmed diagnosis (either through a standard laboratory testing algorithm or confirmed by a physician) and the following characteristics must be known: the person’s date of birth, sex at birth, county of residence at diagnosis, vital status (i.e., alive or deceased), race, and last name. These data are regularly matched with other databases such as state vital records data to ascertain vital status of diagnosed persons. In addition, PA and all other states regularly exchange information to determine if an individual is truly a new diagnosis or was previously diagnosed in another state.

Findings

The first case of AIDS in PA was reported after the start of the epidemic in 1981, although subsequent epidemiological investigation identified cases that were diagnosed in 1980. The 1980s and first half of the 1990s saw a rapid increase in the number of new cases with a peak occcurring in 1991. In the mid-1990s, the number of newly diagnosed individuals in PA began to steadily decline. The observed increase in reported new diagnoses in 2006 was attributable to mainly the migration of HIV data reporting from the HIV/AIDS Reporting System to the PA-NEDSS in late October 2005. In 2023, 909 new diagnoses of HIV disease among residents of PA were reported. This number may be incomplete due to lags in reporting.

Figure 1 depicts the number of new diagnoses of HIV disease among PA residents by year of diagnosis. For each year, the bars represent new cases of HIV disease. The numbers show persistent decline in new diagnoses of HIV disease since the peak in 1991.

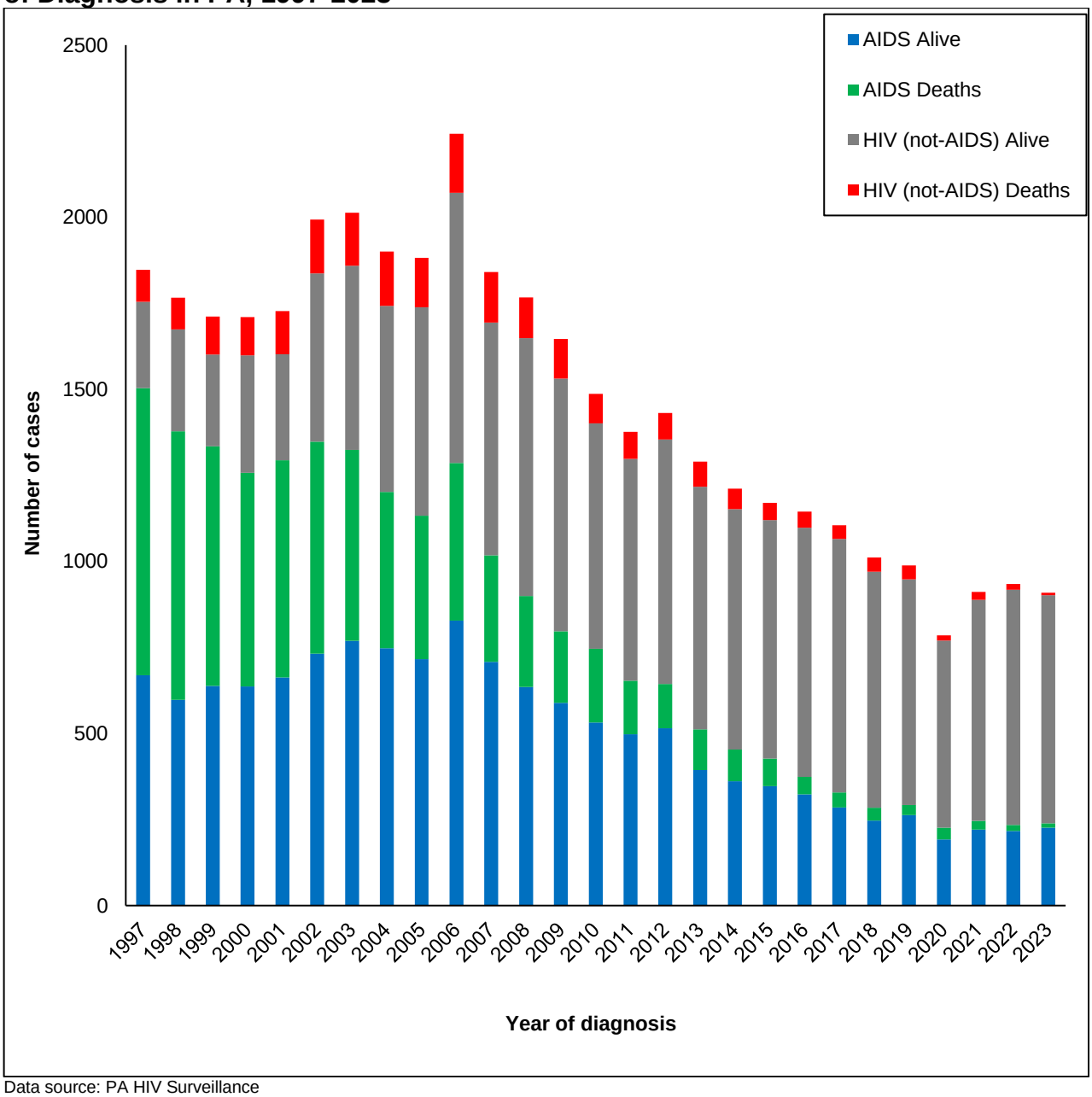
Figure 1: Annual New HIV Disease by Year of Diagnosis in PA, 1980-2023



Note: HIV Infection without AIDS became reportable in Pennsylvania in October 2002.
Data source: PA HIV Surveillance

Figure 2 displays the vital status of people with HIV disease by diagnosis status and year of diagnosis. Mortality among individuals living with HIV disease decreased over time in PA, and this was observed in every population group. HAART first became available in the mid-1990s and had a dramatic impact on the number of deaths among people with HIV disease. The number of deaths among individuals with HIV disease decreased each year, while the number of people living with this condition continued to increase every year.

Figure 2: The Number of AIDS and HIV Disease without AIDS by Vital Status and Year of Diagnosis in PA, 1997-2023



Data source: PA HIV Surveillance

Table 1 provides the number of new HIV disease diagnoses among residents of PA from 1980 through 2023. Pediatric diagnoses are those who were diagnosed with HIV disease before age 13. The number of children perinatally exposed to HIV disease has declined sharply due to mainly prevention efforts among pregnant persons.

Table 1: Annual Diagnoses of HIV Disease Among Residents of PA, 1980-2023

Year of Diagnosis	Adult/Adolescent	Pediatric	Total
1980	3	0	3
1981	8	1	9
1982	49	3	52
1983	107	6	113
1984	259	4	263
1985	786	26	812
1986	1,072	16	1,088
1987	1,536	18	1,554
1988	1,898	24	1,922
1989	2,416	23	2,439
1990	2,918	40	2,958
1991	2,947	39	2,986
1992	2,809	67	2,876
1993	2,297	68	2,365
1994	2,171	39	2,210
1995	2,093	43	2,136
1996	1,980	32	2,012
1997	1,824	23	1,847
1998	1,731	35	1,766
1999	1,682	29	1,711
2000	1,691	19	1,710
2001	1,704	22	1,726
2002	1,975	18	1,993
2003	1,989	24	2,013
2004	1,891	9	1,900
2005	1,869	13	1,882
2006	2,229	13	2,242
2007	1,831	11	1,842
2008	1,754	13	1,767
2009	1,641	6	1,647
2010	1,476	12	1,488
2011	1,370	6	1,376
2012	1,423	9	1,432
2013	1,286	4	1,290
2014	1,208	3	1,211
2015	1,164	6	1,170
2016	1,142	3	1,145
2017	1,104	1	1,105
2018	1,010	1	1,011
2019	988	0	988
2020	783	2	785
2021	909	2	911
2022	933	1	934
2023	909	0	909
Total	**64,865**	**734**	**65,599**

Data source: PA HIV Surveillance

Table 2 depicts HIV disease by sex, race/ethnicity, and year of diagnosis from 2018-2023 and cumulative data from 1980 to 2023. HIV disease had a differential impact on various racial/ethnic groups with a disproportionate impact on blacks/African Americans for both males and females. In 2023, Black/African American males accounted for 42% of all new HIV diagnoses among males, while Black/African American females were 56% of all new HIV diagnoses among females. Overall, non-white individuals accounted for 73% of all persons diagnosed with HIV disease in 2023.

Table 2: Number of Newly Diagnosed HIV Disease by Sex, Race/Ethnicity and Year of Diagnosis in PA, 2018-2023

	2018		2019		2020		2021		2022		2023		Total (1980-2023)	
	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
Total (Male)	**790**	**100**	**760**	**100**	**620**	**100**	**721**	**100**	**741**	**100**	**710**	**100**	**49,620**	**100**
White	240	30	234	31	191	31	231	32	230	31	196	28	18,009	36
Black/African American	342	43	332	44	285	46	312	43	311	42	296	42	22,726	46
Hispanic	159	20	148	19	112	18	144	20	157	21	183	26	6,888	14
Asian	15	2	14	2	7	1	8	1	11	1	19	3	355	1
American Indian or Alaska Native	-	-	-	-	-	-	-	-	-	-	-	-	49	0
Multiple race**	33	4	31	4	21	3	24	3	29	4	16	2	1,593	3
Total (Female)	**221**	**100**	**228**	**100**	**165**	**100**	**190**	**100**	**193**	**100**	**199**	**100**	**15,979**	**100**
White	51	23	50	22	38	23	41	22	52	27	45	23	3,363	21
Black/African American	114	52	128	56	94	57	110	58	90	47	112	56	9,217	58
Hispanic	45	20	44	19	25	15	27	14	38	20	35	18	2,593	16
Asian	-	-	-	-	-	-	-	-	-	-	-	-	92	1
American Indian or Alaska Native	-	-	-	-	-	-	-	-	-	-	-	-	15	0
Multiple races**	10	5	6	3	8	5	9	5	-	-	-	-	699	4
Total	**1,011**	**100**	**988**	**100**	**785**	**100**	**911**	**100**	**934**	**100**	**909**	**100**	**65,599**	**100**

* Count may be incomplete due to lag in reporting as well as effects of COVID-19 pandemic which began in 2019 and continued throughout 2021.
** Multiple races is a selection which encompasses individuals indicating one or more racial categories.
Dash (-) indicates cell size of ≤5
Note: Percentages may not add to 100% due to 'rounding".
Data source: PA HIV Surveillance

Table 3 provides a tabulation of all HIV disease diagnoses among PA residents from 2018-2023 and cumulative data from 1980 to 2023. A person may be diagnosed with HIV disease at any age, but many of the persons are diagnosed between ages 15 and 54. In the past five years, persons in this age range have accounted for the highest proportions of new diagnoses each year.

Table 3: Number of New Diagnosed HIV Disease by Age at Diagnosis and Year of Diagnosis in PA, 2018-2023

	2018		2019		2020		2021		2022*		2023*		Total (1980-2023)	
Age group (years)	**No.**	**%**	**No.**	**%**	**No.**	**%**	**No.**	**%**	**No.**	**%**	**No.**	**%**	**No.**	**%**
<13	-	-	-	-	-	-	-	-	-	-	-	-	734	1
13 -14	-	-	-	-	-	-	-	-	-	-	-	-	90	0
15 - 24	233	23	217	22	164	21	184	20	152	16	161	18	9,033	14
25 - 34	349	35	366	37	287	37	349	38	359	38	343	38	21,363	33
35 - 44	169	17	168	17	137	17	184	20	221	24	205	23	19,477	30
45 - 54	145	14	127	13	111	14	111	12	109	12	109	12	10,308	16
55 - 64	93	9	86	9	69	9	69	8	70	7	69	8	3,613	6
65 +	21	2	23	2	15	2	12	1	21	2	22	2	981	1
Total	**1,011**	**100**	**988**	**100**	**785**	**100**	**911**	**100**	**934**	**100**	**909**	**100**	**65,599**	**100**

* Count may be incomplete due to lag in reporting as well as effects of COVID-19 pandemic which began in 2019 and continued throughout 2021.
Dash (-) indicates cell size of ≤5
Note: Percentages may not add to 100% due to 'rounding".
Data source: PA HIV Surveillance

Table 4 provides a summary of all reported HIV disease among PA residents from 2018-2023 and cumulative data from 1980 to 2023 by mode of transmission. The most common means of transmission are MSM contact, heterosexual sex, and IDU. Most pediatric HIV disease cases occur through perinatal exposure. The predominant mode of transmission in the past 5 years was MSM; MSM accounted for 53% of new diagnoses in 2023, while heterosexual sex accounted for 18% in 2023. IDU (including those with combined MSM and IDU risk factors) accounted for 7% of new diagnoses in 2023.

Table 4: Number of Cases of HIV Disease by Mode of Transmission and Year of Diagnosis in PA, 2018-2023

	2018		2019		2020		2021		2022*		2023*		Total (1980-2023)	
All Modes	**No.**	**%**	**No.**	**%**	**No.**	**%**	**No.**	**%**	**No.**	**%**	**No.**	**%**	**No.**	**%**
Heterosexual contact	226	22	207	21	135	17	217	24	139	15	160	18	15,951	24
IDU	105	10	102	10	48	6	67	7	86	9	43	5	15,538	24
MSM	488	48	528	53	412	52	479	53	482	52	480	53	25,852	39
MSM&IDU	42	4	38	4	43	5	42	5	37	4	17	2	3217	5
Other risks**	-	-	-	-	-	-	-	-	-	-	-	-	478	1
Pediatric mode***	-	-	-	-	-	-	-	-	-	-	-	-	695	1
Unknown risks	147	15	113	11	145	18	105	12	188	20	209	23	3,868	6
All Modes	**1,011**	**100**	**988**	**100**	**785**	**100**	**911**	**100**	**934**	**100**	**909**	**100**	**65,599**	**100**

* Count may be incomplete due to lag in reporting as well as effects of COVID-19 pandemic which began in 2019 and continued throughout 2021
** Other risk includes transfusion/transplant and coagulation disorder that occurred during the earliest part of the HIV pandemic
*** Includes adult cases that had pediatric modes of transmission (e.g., perinatal exposure)
Dash (-) indicates cell size of ≤5
Note: Percentage may not add to 100% due to “rounding”
Data source: PA HIV Surveillance

Table 5.1 provides a summary of all reported new diagnoses of HIV disease during the first two decades of the epidemic among PA residents from 1980-1990 and from 1991 to 2000 by mode of transmission and race/ethnicity. This table shows that MSM was the most common mode of transmission and accounted for 52% of all reported cases during the first decade (1980-1990), where as IDU accounted 27% The order of dominance was reversed in the second decade, where IDU became more common accounting for 36% while MSM accounted for 32% of all reported cases.

Table 5.1: Number of HIV Disease by Mode of Transmission, Race/Ethnicity, and Decades of Diagnosis in PA, 1980-1990, and 1991-2000

	White		Black/African American		Hispanic/Latinx		Asian & Native Hawaiian/ Other Pacific Islander		American Indian/Alaska Native		Multirace*		Total	
	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
Total (1980-1990)	**5,458**	**100**	**4,257**	**100**	**1,315**	**100**	**23**	**100**	**4**	**100**	**156**	**100**	**11,213**	**100**
Heterosexual Contact	233	4	323	8	143	11	-	-	-	-	9	6	710	6
IDU	692	13	1,539	36	789	60	-	-	-	-	56	36	3,078	27
MSM	3,737	68	1,756	41	226	17	17	74	-	-	62	40	5,800	52
MSM&IDU	331	6	438	10	100	8	-	-	-	-	26	17	896	8
Other risks**	308	6	28	1	9	1	-	-	-	-	-	-	346	3
Pediatric mode***	53	1	67	2	29	2	-	-	-	-	-	-	151	1
Unknown risks	104	2	106	2	19	1	-	-	-	-	-	-	232	2
Total (1991-2000)	**6,611**	**100**	**11,471**	**100**	**2,847**	**100**	**65**	**100**	**10**	**100**	**615**	**100**	**21,619**	**100**
Heterosexual Contact	867	13	2,699	24	716	25	19	29	-	-	130	21	4,434	21
IDU	1,476	22	4,779	42	1,382	49	4	6	-	-	231	38	7,874	36
MSM	3,583	54	2,749	24	393	14	28	43	-	-	167	27	6,924	32
MSM&IDU	334	5	698	6	147	5	-	-	-	-	54	9	1,234	6
Other risks**	81	1	23	0	-	-	-	-	-	-	-	-	116	1
Pediatric mode***	49	1	240	2	71	2	-	-	-	-	11	2	372	2
Unknown risks	221	3	283	2	133	5	7	11	-	-	20	3	665	3

* Multirace is a selection which encompasses individuals indicating one or more racial categories.
** Other risk includes transfusion/transplant and coagulation disorder that occurred during the earliest part of the HIV pandemic
*** Includes adult cases that had pediatric modes of transmission (e.g., perinatal exposure)
Dash (-) indicates cell size of ≤5
Note: Percentage may not add to 100% due to “rounding”
Data source: PA HIV Surveillance

Table 5.2 provides a summary of all reported new diagnoses of HIV disease during 2001-2010 and 2011-2023 among PA residents by mode of transmission and race/ethnicity. This table shows that heterosexual transmission was the most common mode of transmission in 2001-2010, accounting for 37% of cases, while MSM accounted for 32% of all reported cases during the same decade. IDU and MSM/IDU transmission accounted for 23% of cases during 2001-2010 and only accounted for 10% in 2011-2023. During the period 2011-2023, MSM became the most common mode of transmission, followed by heterosexual contact.

Table 5.2: Number of HIV Disease by Mode of Transmission, Race/Ethnicity, and Decades of Diagnosis in PA, 2001-2010 and 2011-2023

	White		Black/African American		Hispanic/Latinx		Asian & Native Hawaiian/Other Pacific Islander		American Indian/Alaska Native		Multirace*		Total	
	No.	**%**	**No.**	**%**	**No.**	**%**	**No.**	**%**	**No.**	**%**	**No.**	**%**	**No.**	**%**
Total (2001-2010)	**5,274**	**100**	**9,208**	**100**	**2,831**	**100**	**140**	**100**	**22**	**100**	**1,025**	**100**	**18,500**	**100**
Heterosexual Contact	1,167	22	4,285	47	1,013	36	61	44	11	50	370	36	6,907	37
IDU	784	15	1,747	19	788	28	9	6	-	-	208	20	3,538	19
MSM	2,595	49	2,294	25	638	23	51	36	9	41	304	30	5,891	32
MSM&IDU	254	5	246	3	96	3	-	-	-	-	58	6	656	4
Other risks**	8	0	-	-	-	-	-	-	-	-	-	-	16	0
Pediatric mode***	18	0	83	1	29	1	-	-	-	-	-	-	136	1
Unknown risks	448	8	548	6	264	9	15	11	-	-	81	8	1,356	7
Total (2011-2023)	**4,029**	**100**	**7,007**	**100**	**2,488**	**100**	**219**	**100**	**28**	**100**	**496**	**100**	**14,267**	**100**
Heterosexual Contact	749	19	2,251	32	677	27	65	30	10	36	148	30	3,900	27
IDU	483	12	300	4	230	9	-	-	-	-	29	6	1,048	7
MSM	2,282	57	3,335	48	1,234	50	120	55	15	54	251	51	7,237	51
MSM&IDU	224	6	104	1	76	3	-	-	-	-	21	4	431	3
Other risks**	-	-	21	0	7	0	-	-	-	-	-	-	36	0
Pediatric mode***	288	7	996	14	264	11	23	11	-	-	43	9	1615	11

* Multirace is a selection which encompasses individuals indicating one or more racial categories
** Other risk includes transfusion/transplant and coagulation disorder that occurred during the earliest part of the HIV pandemic
*** Includes adult cases that had pediatric modes of transmission (e.g., perinatal exposure)
Dash (-) indicates cell size of ≤5
Note: Percentage may not add to 100% due to “rounding”
Data source: PA HIV Surveillance

Table 5A.1 provides the number of new diagnoses of HIV disease among **males** during the first two decades of the epidemic among PA residents from 1980-1990 and from 1991-2000 by mode of transmission and race/ethnicity. While MSM had the highest proportion of cases of HIV disease for all decades, IDU increased in the second decade with a 15% increase in cases between the first and second decade.

Table 5A.1: Number of HIV Disease Among Males by Mode of Transmission, Race/Ethnicity, and Decades of Diagnosis in PA, 1980-1990 and 1991-2000

	White		Black/African American		Hispanic/Latinx		Asian & Native Hawaiian/Other Pacific Islander		American Indian/Alaska Native		Multirace*		Total	
	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
Total (1980-1990)	**4,976**	**100**	**3,547**	**100**	**1,014**	**100**	**20**	**100**	**2**	**100**	**128**	**100**	**9687**	**100**
Heterosexual Contact	83	2	112	3	33	3	-	-	-	-	-	-	230	2
IDU	447	9	1,103	31	612	60	-	-	-	-	36	28	2,198	23
MSM	3,737	75	1,756	50	226	22	17	85	-	-	62	48	5,800	60
MSM&IDU	331	7	438	12	100	10	-	-	-	-	26	20	896	9
Other risks**	254	5	16	0	9	1	-	-	-	-	-	-	279	3
Pediatric mode***	44	1	43	1	21	2	-	-	-	-	-	-	109	1
Unknown risks	80	2	79	2	13	1	-	-	-	-	-	-	175	2
Total (1991-2000)	**5,437**	**100**	**8,018**	**100**	**1,911**	**100**	**48**	**100**	**7**	**100**	**418**	**100**	**15,839**	**100**
Heterosexual Contact	350	6	992	12	213	11	9	19	-	-	46	11	1,611	10
IDU	927	17	3,281	41	1,039	54	-	-	-	-	140	33	5,390	34
MSM	3,583	66	2,749	34	393	21	28	58	-	-	167	40	6,924	44
MSM&IDU	334	6	698	9	147	8	-	-	-	-	54	13	1,234	8
Other risks**	62	1	11	0	-	-	-	-	-	-	-	-	81	1
Pediatric mode***	31	1	115	1	46	2	-	-	-	-	-	-	194	1
Unknown risks	150	3	172	2	69	4	-	-	-	-	9	2	405	3

* Multirace is a selection which encompasses individuals indicating one or more racial categories.
** Other risk includes transfusion/transplant and coagulation disorder that occurred during the earliest part of the HIV pandemic
*** Includes adult cases that had pediatric modes of transmission (e.g., perinatal exposure)
Dash (-) indicates cell size of ≤5
Note: Percentage may not add to 100% due to "rounding".
Data source: PA HIV Surveillance

Table 5A.2 provides summary of all reported new diagnoses of HIV disease among **males** from 2001-2010 and from 2011-2023 among PA residents by mode of transmission and race/ethnicity. This table shows that while MSM accounted for 65% of all reported cases in 2011-2023, heterosexual transmission became increasingly common among males compared to earlier decades. IDU and MSM/IDU transmission accounted for 23% during 2001-2010 but only 10% during 2011-2023.

Table 5A.2: Number of HIV Disease Among Males by Mode of Transmission, Race/Ethnicity, and Decades of Diagnosis in PA, 2001-2010 and 2011-2023

	White		Black/African America		Hispanic/Latinx		Asian & Native Hawaiian/Other Pacific Islander		American Indian/Alaska Native		Multirace*		Total	
	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
Total (2001-2010)	**4,220**	**100**	**5,983**	**100**	**1,977**	**100**	**111**	**100**	**13**	**100**	**663**	**100**	**12,967**	**100**
Heterosexual Contact	598	14	1,957	33	459	23	40	36	-	-	143	22	3,201	25
IDU	481	11	1,135	19	605	31	8	7	-	-	124	19	2,353	18
MSM	2,595	61	2,294	38	638	32	51	46	9	69	304	46	5,891	45
MSM&IDU	254	6	246	4	96	5	-	-	-	-	58	9	656	5
Other risks**	6	0	0	0	-	-	-	-	-	-	-	-	9	0
Pediatric mode***	8	0	41	1	16	1	-	-	-	-	-	-	67	1
Unknown risks	278	7	310	5	160	8	10	9	-	-	32	5	790	6
Total (2011-2023)	**3,376**	**100**	**5,178**	**100**	**1,986**	**100**	**176**	**100**	**27**	**100**	**384**	**100**	**11,127**	**100**
Heterosexual Contact	414	12	1,091	21	356	18	33	19	9	33	77	20	1,980	18
IDU	274	8	193	4	168	8	-	-	-	-	16	4	657	6
MSM	2,282	68	3,335	64	1,234	62	120	68	15	56	251	65	7,237	65
MSM&IDU	224	7	104	2	76	4	-	-	-	-	21	5	431	4
Pediatric mode***	-	-	10	0	-	-	-	-	-	-	-	-	17	0
Unknown risks	181	5	445	9	148	7	13	7	-	-	17	4	805	7

* Multirace is a selection which encompasses individuals indicating one or more racial categories.
** Other risk includes transfusion/transplant and coagulation disorder that occurred during the earliest part of the HIV pandemic
*** Includes adult cases that had pediatric modes of transmission (e.g., perinatal exposure)
Dash (-) indicates cell size of ≤5
Note: Percentage may not add to 100% due to "rounding"
Data source: PA HIV Surveillance

Table 5B.1 provides the number of new diagnoses of HIV disease among **females** during the first two decades of the epidemic among PA residents from 1980-1990 and from 1991-2000 by mode of transmission and race/ethnicity. While IDU had the highest proportion of cases of HIV disease for the first decade, heterosexual contact became the most common during the second with 49% of all reported HIV cases.

Table 5B.1: Number of HIV Disease Among Females by Mode of Transmission, Race/Ethnicity, and Decades of Diagnosis in PA, 1980-1990 and 1991-2000

	White		Black/African America		Hispanic/Latinx		Asian & Native Hawaiian/Other Pacific Islander		American Indian/Alaska Native		Multirace*		Total	
	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
Total (1980-1990)	**482**	**100**	**710**	**100**	**301**	**100**	**-**	**-**	**-**	**-**	**28**	**100**	**1,526**	**100**
Heterosexual Contact	150	31	211	30	110	37	-	-	-	-	8	29	480	31
IDU	245	51	436	61	177	59	-	-	-	-	20	71	880	58
Other risks**	54	11	12	2	-	-	-	-	-	-	0	0	67	4
Pediatric mode***	9	2	24	3	8	3	-	-	-	-	0	0	42	3
Unknown risks	24	5	27	4	6	2	-	-	-		0	0	57	4
Total (1991-2000)	**1,174**	**100**	**3,453**	**100**	**936**	**100**	**17**	**100**	**-**	**-**	**197**	**100**	**5,780**	**100**
Heterosexual Contact	517	44	1,707	49	503	54	10	59	-	-	84	43	2,823	49
IDU	549	47	1,498	43	343	37	2	12	-	-	91	46	2,484	43
Other risks**	19	2	12	0	-	-	2	12	-	-	-	-	35	1
Pediatric mode***	18	2	125	4	25	3	0	0	-	-	10	5	178	3
Unknown risks	71	6	111	3	64	7	3	18	-	-	11	6	260	4

* Multirace is a selection which encompasses individuals indicating one or more racial categories.
** Other risk includes transfusion/transplant and coagulation disorder that occurred during the earliest part of the HIV pandemic
*** Includes adult cases that had pediatric modes of transmission (e.g., perinatal exposure)
Dash (-) indicates cell size of ≤5
Note: Percentage may not add to 100% due to "rounding"
Data source: PA HIV Surveillance

Table 5B.2 provides a summary of all reported new diagnoses of HIV disease among **females** during 2001-2010 and 2011-2023 among PA residents by mode of transmission and race/ethnicity. The predominant mode of tranmission for females during these two decades was heterosexual contact. Another notebale observation during these two decades was that persons reported with IDU as mode of HIV transmission declined from 21% to 12%.

Table 5B.2: Number of HIV Disease Among Females by Mode of Transmission, Race/Ethnicity, and Decades of Diagnosis in PA, 2001-2010 and 2011-2023

	White		Black/African America		Hispanic/Latinx		Asian & Native Hawaiian/Other Pacific Islander		American Indian/Alaska Native		Multirace*		Total	
	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
Total (2001-2010)	**1,054**	**100**	**3,225**	**100**	**854**	**100**	**29**	**100**	**9**	**100**	**362**	**100**	**5,533**	**100**
Heterosexual Contact	569	54	2,328	72	554	65	21	72	7	78	227	63	3,706	67
IDU	303	29	612	19	183	21	-	-	-	-	84	23	1,185	21
Other risks**	-	-	-	-	-	-	-	-	-	-	-	-	7	0
Pediatric mode***	10	1	42	1	13	2	-	-	-	-	-	-	69	1
Unknown risks	170	16	238	7	104	12	-	-	-	-	49	14	566	10
Total (2011-2023)	**653**	**100**	**1,829**	**100**	**502**	**100**	**43**	**100**	**1**	**100**	**112**	**100**	**3,140**	**100**
Heterosexual Contact	335	51	1160	63	321	64	32	74	1	100	71	63	1,920	61
IDU	209	32	107	6	62	12	-	-	-	-	13	12	391	12
Pediatric mode***	-	-	11	1	-	-	-	-	-	-	-	-	19	1
Unknown risks	107	16	551	30	116	23	10	23	0	0	26	23	810	26

* Multirace is a selection which encompasses individuals indicating one or more racial categories.
** Other risk includes transfusion/transplant and coagulation disorder that occurred during the earliest part of the HIV pandemic
*** Includes adult cases that had pediatric modes of transmission (e.g., perinatal exposure)
Dash (-) indicates cell size of ≤5
Note: Percentage may not add to 100% due to “rounding”
Data source: PA HIV Surveillance

Table 6 provides a summary of all reported new diagnoses of HIV disease by vital status and county of residence at diagnosis.The majority of persons diagnosed with HIV disease in PA were residents of large population centers, such as Philadelphia and Allegheny counties.

Table 6: Cumulative Number of HIV Disease by Vital Status and County of Residence at Diagnosis in PA, 1980-2023

County	Presumed alive	Reported dead	Cumulative number
Philadelphia	18,150	16,076	34,226
Allegheny	3,060	2,243	5,303
Delaware	1,857	1,456	3,313
Montgomery	1,207	860	2,067
Dauphin	1,128	831	1,959
Berks	1,117	756	1,873
Lehigh	1,100	623	1,723
Bucks	923	679	1,602
Lancaster	889	638	1,527
York	867	555	1,422
Chester	592	520	1,112
Luzerne	438	301	739
Cumberland	385	269	654
Northampton	354	288	642
Erie	365	246	611
Lackawanna	326	215	541
Monroe	291	201	492
Lycoming	191	209	400
Westmoreland	177	197	374
Lebanon	169	114	283
Centre	187	84	271
Beaver	132	126	258
Franklin	157	100	257
Schuylkill	144	111	255
Cambria	121	125	246
Washington	113	125	238
Adams	112	62	174
Blair	79	91	170
Union	107	63	170
Fayette	106	62	168
Carbon	89	62	151
Mercer	87	63	150
Northumberland	77	72	149
Somerset	90	56	146
Butler	95	50	145
Pike	93	46	139
Crawford	80	51	131
Huntingdon	69	55	124
Lawrence	78	45	123
Columbia	81	41	122
Wayne	54	67	121
Clearfield	74	46	120
Bradford	42	36	78
Indiana	39	37	76
Armstrong	38	36	74
Bedford	35	22	57
McKean	29	27	56
Greene	23	29	52
Perry	24	27	51
Venango	21	29	50
Mifflin	19	22	41
Susquehanna	21	20	41
Tioga	20	19	39
Montour	19	17	36
Clarion	24	10	34
Snyder	25	9	34
Warren	21	11	32
Wyoming	18	13	31
Clinton	18	10	28
Juniata	13	14	27
Jefferson	11	10	21
Elk	7	5	12
Fulton	8	4	12
Forest	8	1	9
Sullivan	6	3	9
Potter	2	6	8
Cameron	0	0	0
Total	**36,302**	**29,297**	**65,599**

Dash (-) indicates cell size of ≤5

Data source: PA HIV Surveillance

Table 7 provides a tabulation of all reported cases and rates of HIV disease by county of residence and year of diagnosis (2020 through 2023). In 2022, the rate of new HIV diagnoses for PA was 7.2 per 100,000 population. Philadelphia County had the highest rate at 25 per 100,000 population in 2022. Note: The HIV rate data for 2022 uses PA estimated population data for 2022.

Table7: Annual Diagnoses and Rate of HIV Disease by County of Residence in PA, 2020-2023

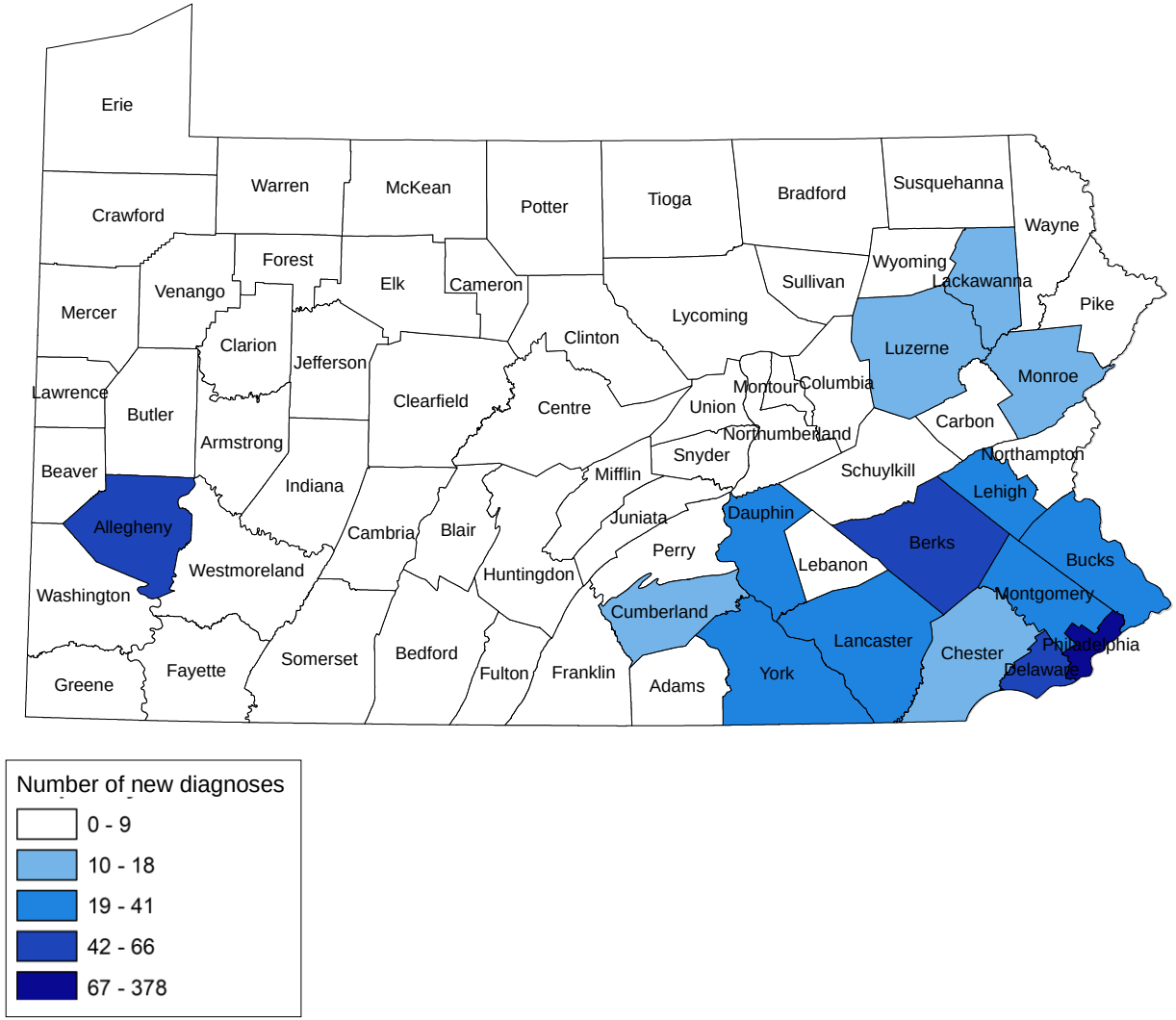
County	2020	2021	2022*	2023*	2022 rate per 100,000**
Adams	-	-	-	-	-
Allegheny	80	89	72	66	5.8
Armstrong	-	-	-	-	-
Beaver	9	-	-	-	-
Bedford	-	-	-		-
Berks	9	30	46	51	10.7
Blair	-	-	-	-	-
Bradford	-	-	-	-	-
Bucks	24	20	28	33	4.3
Butler	-	-	-	-	-
Cambria	-	6	8	-	6.1
Cameron	0	0	0	0	0.0
Carbon	--	-	-	-	-
Centre	-	-	-	-	-
Chester	13	18	14	18	2.6
Clarion	-	-	-	-	-
Clearfield	-	-	-	-	-
Clinton	-	-	-	-	-
Columbia	-	-	-	-	-
Crawford	-	-	-	-	-
Cumberland	13	17	9	10	3.4
Dauphin	26	39	27	30	9.3
Delaware	49	58	46	54	8.0
Elk	0	0	0	0	0.0
Erie	-	18	12	8	4.5
Fayette	-	-	-	-	-
Forest	0	0	0	0	0.0
Franklin	-	9	8	9	5.1
Fulton	-	-	-	-	-
Greene	-	-	-	-	
Huntingdon	-	-	-	-	-
Indiana	-	-	-	-	-
Jefferson	0	0	0	0	0
Juniata	0	0	0	0	0

County	2020	2021	2022*	2023*	2022 rate per 100,000**
Lackawanna	8	14	18	12	8.3
Lancaster	18	14	19	26	3.4
Lawrence	-	-	9	-	10.6
Lebanon	-	8	7	9	4.9
Lehigh	20	23	29	26	7.7
Luzerne	21	28	21	18	6.4
Lycoming	-	6	-	-	-
McKean	-	-	-	-	-
Mercer	-	-	9	-	8.2
Mifflin	-	-	-	-	-
Monroe	6	11	16	11	9.6
Montgomery	34	24	36	41	4.2
Montour	-	-	-	-	-
Northampton	14	19	8	7	2.5
Northumberland	-	-	-	-	-
Perry	0	0	0	0	0.0
Philadelphia	338	365	392	378	25.0
Pike	-	-	-	-	-
Potter	0	1	0	0	0.0
Schuylkill	-	-	9	7	6.3
Snyder	-	-	-	-	-
Somerset	-	-	-	-	-
Sullivan	0	0	0	0	0
Susquehanna	0	0	0	0	0
Tioga	-	-	-	-	-
Union	-	-	-	-	-
Venango	-	-	-	-	-
Warren	-	-	-	-	-
Washington	-	6	-	7	-
Wayne	-				
Westmoreland	6	6	-	-	-
Wyoming	-	-	-	-	-
York	22	32	26	28	5.6
Total	**785**	**911**	**934**	**909**	**7.2**

* Count may be incomplete due to lag in reporting as well as effects of COVID-19 pandemic which began in 2019 and continued throughout 2021.
**Rates based on 2022 estimated population.
Dash (-) indicates cell size of ≤5
Data source: PA HIV Surveillance

Figure 3 displays the number of new diagnoses of HIV disease in 2023 by county of residence at diagnosis. Most of the new HIV diagnoses were in the southeastern and southcentral counties, andAllegheny County in the southwest region of the state.

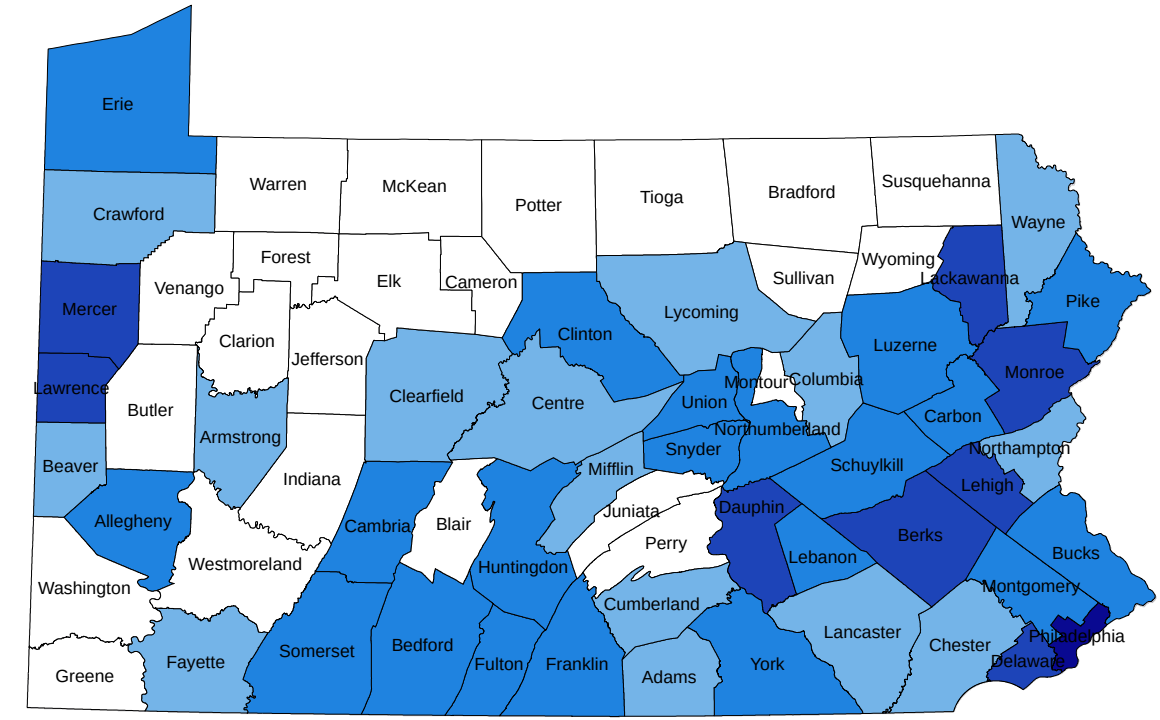
Figure 3: Number of Newly Diagnosed HIV Disease by County in PA, 2023



Data source: PA HIV Surveillance

Figure 4 provides information the rate of new diagnoses of HIV disease in 2022 by county of residence at diagnosis.The overall HIV rate in PA in 2022 was 7.2 per 100,000 population. While only 3 out of 48 rural counties, namely Lawrence, Monroe and Mercer, saw a rate higher than the state rate, six out of 19 urban counties. namely Berks, Dauphin, Delaware, Lackawanna, Lehigh, and Philadelphia. experienced rates higher than the state.The highest rate was observed in Philadelphia County at 25 per 100,000 population.

Figure 4: Rate* (Per 100,000 County Residents) of Newly Diagnosed HIV Disease by County, PA, 2022



Rate per 100,000 population
- 0.0 - 1.4
- 1.5 - 3.6
- 3.7 - 7.0
- 7.1 - 10.7
- 10.8 - 25.0

Data source: PA HIV Surveillance

Ryan White HIV/AIDS Program Part B Subrecipients Regions

This section describes HIV epidemiology in the Ryan White HIV/AIDS Program Part B Subrecipients regions in PA and it covers data presented through page 36. There are seven regional subrecipients, namely Division of HIV Health, AIDSNET, Northeast United Way of Wyoming Valley, Northcentral District Allied Connection, Southcentral Family Health Council, Southwest PA - Jewish Healthcare Foundation, and Northwest PA Thrive Partnership. The HIV Care section is responsible for the coordination and delivery of HIV care and support services. This is accomplished through contracts with seven regional subrecipients, which in turn contract with local providers to provide direct services. This system provides a statewide service delivery network for persons with or impacted by HIV.

The Care section receives funding from several sources: Ryan White Part B Grant (including the Special pharmaceutical benefits program [SPBP] or AIDS Drug Assistance Program) provided by HRSA, Housing opportunities for persons living with AIDS provided through Department of Housing and Urban Development, state funding, and rebates from SPBP.

Approximately 16,000 individuals utilize Ryan White services in PA each year. Services are defined by Core Medical Services or Support Services.

Table 8 provides a summary of the number of new diagnoses of HIV disease by sex, race, age at diagnosis, mode of transmission, and HIV Ryan White Part B Subrecipients Region.

Table 8: Characteristics of HIV Disease by Time Interval of Diagnosis and HIV Ryan White Part B Subrecipients Region in PA, 2018-2023

		Prior to 2018		2018		2019		2020		2021		2022*		2023*		Total (1980-2023)	
		No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
	Total	**60,061**	**100**	**1,011**	**100**	**988**	**100**	**785**	**100**	**911**	**100**	**934**	**100**	**909**	**100**	**65,599**	**100**
SEX	Male	45,278	75	790	78	760	77	620	79	721	79	741	79	710	78	49,620	76
	Female	14,783	25	221	22	228	23	165	21	190	21	193	21	199	22	15,979	24
RACE/ ETHNICITY	Hispanic	8,364	14	204	20	192	19	137	17	171	19	195	21	218	24	9,481	14
	American Indian or Alaska Native	53	0	-	-	-	-	-	-	-	-	-	-	-	-	64	0
	Asian	362	1	16	2	14	1	7	1	11	1	15	2	22	2	447	1
	Black /African American	29,417	49	456	45	460	47	379	48	422	46	401	43	408	45	31,943	49
	White	19,773	33	291	29	284	29	229	29	272	30	282	30	241	27	21,372	33
	Multiple race	2,092	3	43	4	37	4	29	4	33	4	38	4	20	2	2,292	3
AGE (YEARS)	<13	728	-	-	-	-	-	-	-	-	-	-	-	-	-	734	1
	13 to 14	88	-	-	-	-	-	-	-	-	-	-	-	-	-	90	0
	15 to 24	7,922	13	233	23	217	22	164	21	184	20	152	16	161	18	9,033	14
	25 to 34	19,310	32	349	35	366	37	287	37	349	38	359	38	343	38	21,363	33
	35 to 44	18,393	31	169	17	168	17	137	17	184	20	221	24	205	23	19,477	30
	45 to 54	9,596	16	145	14	127	13	111	14	111	12	109	12	109	12	10,308	16
	55 to 64	3,157	5	93	9	86	9	69	9	69	8	70	7	69	8	3,613	6
	65+	867	1	21	2	23	2	15	2	12	1	21	2	22	2	981	1
MODE OF TRANSMISSION	MSM	22,983	38	488	48	528	53	412	52	479	53	482	52	480	53	25,852	39
	IDU	15,087	25	105	10	102	10	48	6	67	7	86	9	43	5	15,538	24
	MSM&IDU	2,998	5	42	4	38	4	43	5	42	5	37	4	17	2	3,217	5
	Heterosexual contact	14,867	25	226	22	207	21	135	17	217	24	139	15	160	18	15,951	24
	Other**	478	1	0	0	0	0	0	0	0	0	0	0	0	0	478	1
	Pediatric mode***	687	1	-	-	-	-	-	-	-	-	-	-	-	-	695	1
	Unknown risk	2,961	5	147	15	113	11	145	18	105	12	188	20	209	23	3,868	6
REGIONAL SUBRECIPIENT	Division of HIV Health	39,130	65	605	60	602	61	458	58	485	53	516	55	524	58	42,320	65
	AIDSNET	4,579	8	98	10	95	10	58	7	90	10	111	12	105	12	5,136	8
	Northeast United Way of Wyoming Valley	1,387	2	41	4	28	3	36	5	44	5	43	5	33	4	1,612	2
	Northcentral District Allied Connection	1,245	2	11	1	14	1	15	2	19	2	22	2	18	2	1,344	2
	Southcentral Family Health Council	6,107	10	105	10	101	10	91	12	126	14	107	11	121	13	6,758	10
	Southwest PA - Jewish Healthcare Foundation	6,425	11	118	12	117	12	111	14	121	13	100	11	88	10	7,080	11
	Northwest PA Thrive Partnership	1,188	2	33	3	31	3	16	2	26	3	35	4	20	2	1,349	2

* Count may be incomplete due to lag in reporting
** Other risk includes transfusion/transplant and coagulation disorder that occurred during the earliest part of the HIV pandemic
*** Includes adult cases that had pediatric modes of transmission (e.g., perinatal exposure)
Dash (-) indicates cell size of ≤5
Note: Percentage may not add to 100% due to “rounding”
Data source: PA HIV Surveillance

Table 9 below provides a summary of the number of new diagnoses of HIV disease by sex, race, age at diagnosis, mode of transmission, and county of residence for the Division of HIV Health region.

Table 9: Characteristics of HIV Disease by Time Interval of Diagnosis for Division of HIV Health Region in PA, 2018-2023

Bucks, Delaware, Chester, Montgomery, and Philadelphia counties

		Prior to 2018		2018		2019		2020		2021		2022*		2023*		Total (1980-2023)	
		No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
	Total	**39,130**	**100**	**605**	**100**	**602**	**100**	**458**	**100**	**485**	**100**	**516**	**100**	**524**	**100**	**42,320**	**100**
SEX	Male	29,265	75	464	77	457	76	346	76	382	79	391	76	403	77	31,708	75
	Female	9,865	25	141	23	145	24	112	24	103	21	125	24	121	23	10,612	25
RACE/ ETHNICITY	Hispanic	4,613	12	116	19	96	16	83	18	66	14	95	18	103	20	5,172	12
	American Indian or Alaska Native	43	0	-	-	-	-	-	-	-	-	-	-	-	-	51	0
	Asian	257	1	13	2	9	1	-	-	8	2	11	2	17	3	319	1
	Black /African American	23,759	61	327	54	360	60	277	60	281	58	280	54	296	56	25,580	60
	White	9,426	24	135	22	118	20	83	18	116	24	108	21	101	19	10,087	24
	Multiple race	1,032	3	13	2	18	3	9	2	13	3	19	4	7	1	1,111	3
AGE (YEARS)	<13	479	1	-	-	-	-	-	-	-	-	-	-	-	-	483	1
	13 to 14	46	0	-	-	-	-	-	-	-	-	-	-	-	-	48	0
	15 to 24	5,274	13	147	24	144	24	93	20	99	20	80	16	105	20	5,942	14
	25 to 34	12,455	32	205	34	214	36	176	38	189	39	205	40	192	37	13,636	32
	35 to 44	11,852	30	107	18	107	18	81	18	98	20	124	24	110	21	12,479	29
	45 to 54	6,312	16	79	13	73	12	61	13	51	11	53	10	61	12	6,690	16
	55 to 64	2,112	5	57	9	49	8	39	9	41	8	37	7	38	7	2,373	6
	65+	600	2	10	2	14	2	7	2	-	-	15	3	18	3	669	2
MODE OF TRANSMISSION	MSM	14,216	36	282	47	315	52	238	52	252	52	264	51	285	54	15,852	37
	IDU	10,445	27	73	12	81	13	32	7	55	11	65	13	28	5	10,779	25
	MSM&IDU	1,943	5	26	4	20	3	17	4	21	4	10	2	7	1	2,044	5
	Heterosexual contact	10,696	27	89	15	78	13	55	12	70	14	66	13	71	14	11,125	26
	Other**	164	0	0	0	0	0	0	0	0	0	0	0	0	0	164	0
	Pediatric mode***	452	1	-	-	-	-	-	-	-	-	-	-	-	-	458	1
	Unknown risk	1,214	3	133	22	108	18	115	25	86	18	109	21	133	25	1,898	4
COUNTY OF DIAGNOSIS	Bucks	1,434	4	36	6	27	4	24	5	20	4	28	5	33	6	1,602	4
	Chester	1,016	3	14	2	19	3	13	3	18	4	14	3	18	3	1,112	3
	Delaware	2,972	8	65	11	69	11	49	11	58	12	46	9	54	10	3,313	8
	Montgomery	1,840	5	50	8	42	7	34	7	24	5	36	7	41	8	2,067	5
	Philadelphia	31,868	81	440	73	445	74	338	74	365	75	392	76	378	72	34,226	81

* Count may be incomplete due to lag in reporting

** Other risk includes transfusion/transplant and coagulation disorder that occurred during the earliest part of the HIV pandemic

*** Includes adult cases that had pediatric modes of transmission (e.g., perinatal exposure).

Dash (-) indicates cell size of ≤5

Note: Percentage may not add to 100% due to “rounding”

Data source: PA HIV Surveillance

Table 10 below provides a summary of the number of new diagnoses of HIV disease by sex, race, age at diagnosis, mode of transmission, and county of residence for the AIDSNET region.

Table 10: Characteristics of HIV Disease by Time Interval of Diagnosis for AIDSNET Region in PA, 2018-2023

Berks, Carbon, Lehigh, Monroe, Northampton, and Schuylkill counties

		Prior to2018		2018		2019		2020		2021		2022*		2023*		Total (1980-2023)	
		No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
	Total	**4,579**	**100**	**98**	**100**	**95**	**100**	**58**	**100**	**90**	**100**	**111**	**100**	**105**	**100**	**5,136**	**100**
SEX	Male	3,152	69	77	79	75	79	41	71	66	73	93	84	82	78	3,586	70
	Female	1,427	31	21	21	20	21	17	29	24	27	18	16	23	22	1,550	30
RACE/ ETHNICITY	Hispanic	1,837	40	42	43	48	51	21	36	35	39	49	44	55	52	2,087	41
	American Indian or Alaska Native	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
	Asian	13	0													17	0
	Black /African American	808	18	25	26	16	17	11	19	25	28	20	18	21	20	926	18
	White	1,707	37	27	28	29	31	21	36	26	29	37	33	25	24	1,872	36
	Multiple race	212	5	-	-	-	-	-	-	-	-	-	-	-	-	232	5
AGE (YEARS)	<13	63	1	-	-	-	-	-	-	-	-	-	-	-	-	64	1
	13 to 14	9	0	-	-	-	-	-	-	-	-	-	-	-	-	9	0
	15 to 24	521	11	14	14	20	21	17	29	18	20	18	16	14	13	622	12
	25 to 34	1,467	32	39	40	30	32	12	21	38	42	41	37	40	38	1,667	32
	35 to 44	1,482	32	12	12	14	15	13	22	12	13	26	23	30	29	1,589	31
	45 to 54	720	16	22	22	19	20	12	21	14	16	15	14	17	16	819	16
	55 to 64	243	5	7	7	9	9	-	-	7	8	10	9	-	-	283	6
	65+	74	2	-	-	-	-	-	-	-	-	-	-	-	-	83	2
MODE OF TRANSMISSION	MSM	1,272	28	40	41	50	53	27	47	46	51	58	52	45	43	1,538	30
	IDU	1,336	29	6	6	3	3	2	3	0	0	4	4	4	4	1,355	26
	MSM&IDU	182	4	1	1	2	2	1	2	2	2	5	5	1	1	194	4
	Heterosexual contact	1,169	26	42	43	37	39	20	34	35	39	13	12	28	27	1,344	26
	Other**	54	1	0	0	0	0	0	0	0	0	0	0	0	0	54	1
	Pediatric mode***	60	1	-	-	-	-	-	-	-	-	-	-	-	-	61	1
	Unknown risk	506	11	8	8	-	-	8	14	7	8	31	28	27	26	590	11
COUNTY OF DIAGNOSIS	Berks	1,682	37	28	29	27	28	9	16	30	33	46	41	51	49	1,873	36
	Carbon	137	3	-	-	-	-	-	-	-	-	-	-	-	-	151	3
	Lehigh	1,560	34	37	38	28	29	20	34	23	26	29	26	26	25	1,723	34
	Monroe	424	9	11	11	13	14	6	10	11	12	16	14	11	10	492	10
	Northampton	554	12	16	16	24	25	14	24	19	21	8	7	7	7	642	13
	Schuylkill	222	5	-	-	-	-	-	-	-	-	9	8	7	7	255	5

* Count may be incomplete due to lag in reporting

** Other risk includes transfusion/transplant and coagulation disorder that occurred during the earliest part of the HIV pandemic

*** Includes adult cases that had pediatric modes of transmission (e.g., perinatal exposure)

Dash (-) indicates cell size of ≤5

Note: Percentage may not add to 100% due to “rounding”.

Data source: PA HIV Surveillance

Table 11 provides a summary of the number of new diagnoses of HIV disease by sex, race, age at diagnosis, mode of transmission and county of residence for the Northeast United Way of the Wyoming Valley HIV region.

Table 11: Characteristics of HIV Disease by Time Interval of Diagnosis for Northeast United Way of the Wyoming Valley Region in PA, 2018-2023

Lackawanna, Luzerne, Pike, Susquehanna, Wayne, and Wyoming counties

		Prior to 2018		2018		2019		2020		2021		2022*		2023*		Total (1980-2023)	
		No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
	Total	**1,387**	**100**	**41**	**100**	**28**	**100**	**36**	**100**	**44**	**100**	**43**	**100**	**33**	**100**	**1,612**	**100**
SEX	Male	1,070	77	29	71	19	68	30	83	35	80	34	79	27	82	1,244	77
	Female	317	23	12	29	9	32	6	17	9	20	9	21	6	18	368	23
RACE/ ETHNICITY	Hispanic	211	15	12	29	9	32	2	6	17	39	9	21	8	24	268	17
	American Indian or Alaska Native	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
	Asian	-	-	-	-	-	-	-	-	-	-	-	-	-	-	6	0
	Black /African American	276	20	7	17	8	29	9	25	10	23	15	35	-	-	328	20
	White	827	60	19	46	10	36	20	56	17	39	17	40	20	61	930	58
	Multiple race	67	5	-	-	-	-	-	-	-	-	-	-	-	-	76	5
AGE (YEARS)	<13	22	2	0	0	0	0	0	0	0	0	0	0	0	0	22	1
	13 to 14	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
	15 to 24	149	11	11	27	8	29	-	-	9	20	6	14	-	-	193	12
	25 to 34	406	29	15	37	16	57	21	58	19	43	19	44	12	36	508	32
	35 to 44	460	33	6	15	-	-	-	-	6	14	6	14	8	24	491	30
	45 to 54	248	18	-	-	-	-	-	-	-	-	7	16	-	-	276	17
	55 to 64	75	5	-	-	-	-	-	-	-	-	-	-	-	-	92	6
	65+	23	2	-	-	-	-	-	-	-	-	-	-	-	-	26	2
MODE OF TRANSMISSION	MSM	503	36	15	37	11	39	18	50	22	50	23	53	17	52	609	38
	IDU	352	25	-	-	-	-	-	-	-	-	6	14	-	-	368	23
	MSM&IDU	74	5	-	-	-	-	-	-	-	-	-	-	-	-	89	6
	Heterosexual contact	293	21	19	46	15	54	9	25	17	39	6	14	12	36	371	23
	Other**	17	1	0	0	0	0	0	0	0	0	0	0	0	0	17	1
	Pediatric mode***	23	2	0	0	0	0	0	0	0	0	0	0	0	0	23	1
	Unknown risk	125	9	-	-	-	-	-	-	-	-	-	-	-	-	135	8
COUNTY OF DIAGNOSIS	Lackawanna	467	34	12	29	10	36	8	22	14	32	18	42	12	36	541	34
	Luzerne	609	44	26	63	16	57	21	58	28	64	21	49	18	55	739	46
	Pike	132	10	-	-	-	-	-	-	-	-	-	-	-	-	139	9
	Susquehanna	39	3	-	-	-	-	-	-	-	-	-	-	-	-	41	3
	Wayne	115	8	-	-	-	-	-	-	-	-	-	-	-	-	121	8
	Wyoming	25	2	-	-	-	-	-	-	-	-	-	-	-	-	31	2

* Count may be incomplete due to lag in reporting
** Other risk includes transfusion/transplant and coagulation disorder that occurred during the earliest part of the HIV pandemic
*** Includes adult cases that had pediatric modes of transmission (e.g., perinatal exposure)
Dash (-) indicates cell size of ≤5
Note: Percentage may not add to 100% due to “rounding”
Data source: PA HIV Surveillance

Table 12 provides a summary of the number of new diagnoses of HIV disease by sex, race, age at diagnosis, mode of transmission and county of residence for the North Central District Allied Connections Region.

Table 12: Characteristics of HIV Disease by Time Interval of Diagnosis for North Central District Allied Connections Region in PA, 2018–2023

Bradford, Centre, Clinton, Columbia, Lycoming, Montour, Northumberland, Potter, Snyder, Sullivan, Tioga, and Union counties

		Prior to 2018		2018		2019		2020		2021		2022*		2023*		Total (1980-2023)	
		No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
	Total	**1,245**	**100**	**11**	**100**	**14**	**100**	**15**	**100**	**19**	**100**	**22**	**100**	**18**	**100**	**1,344**	**100**
SEX	Male	961	77	7	64	13	93	15	100	15	79	18	82	15	83	1,044	78
	Female	284	23	4	36	1	7	0	0	4	21	4	18	3	17	300	22
RACE/ ETHNICITY	Hispanic	163	13	2	18	1	7	4	27	4	21	3	14	0	0	177	13
	American Indian or Alaska Native	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Asian	10	1	-	-	-	-	-	-	-	-	-	-	-	-	12	1
	Black /African American	386	31	-	-	-	-	-	-	-	-	6	27	8	44	408	30
	White	632	51	7	64	11	79	9	60	11	58	12	55	9	50	691	51
	Multiple race	54	4	-	-	-	-	-	-	-	-	-	-	-	-	56	4
AGE (YEARS)	<13	14	1	0	0	0	0	0	0	0	0	0	0	0	0	14	1
	13 to 14	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
	15 to 24	157	13	-	-	-	-	-	-	-	-	-	-	-	-	174	13
	25 to 34	407	33	-	-	8	57	6	40	7	37	7	32	-	-	444	33
	35 to 44	405	33	-	-	-	-	-	-	-	-	-	-	7	39	426	32
	45 to 54	180	14	-	-	-	-	-	-	-	-	-	-	-	-	193	14
	55 to 64	63	5	-	-	-	-	-	-	-	-	-	-	-	-	72	5
	65+	16	1	-	-	-	-	-	-	-	-	-	-	-	-	18	1
MODE OF TRANSMISSION	MSM	436	35	-	-	10	71	10	67	8	42	11	50	10	56	490	36
	IDU	375	30	-	-	-	-	-	-	-	-	-	-	-	-	380	28
	MSM&IDU	96	8	-	-	-	-	-	-	-	-	-	-	-	-	102	8
	Heterosexual contact	203	16	-	-	-	-	-	-	8	42	9	41	-	-	230	17
	Other**	22	2	0	0	0	0	0	0	0	0	0	0	0	0	22	2
	Pediatric mode***	12	1	0	0	0	0	0	0	0	0	0	0	0	0	12	1
	Unknown risk	101	8	-	-	-	-	-	-	-	-	-	-	-	-	108	8
COUNTY OF DIAGNOSIS	Bradford	72	6	-	-	-	-	-	-	-	-	-	-	-	-	78	6
	Centre	253	20	-	-	-	-	-	-	-	-	-	-	-	-	271	20
	Clinton	24	2	-	-	-	-	-	-	-	-	-	-	-	-	28	2
	Columbia	114	9	-	-	-	-	-	-	-	-	-	-	-	-	122	9
	Lycoming	375	30	-	-	-	-	-	-	6	32	-	-	-	-	400	30
	Montour	30	2	-	-	-	-	-	-	-	-	-	-	-	-	36	3
	Northumberland	134	11	-	-	-	-	-	-	-	-	-	-	6	33	149	11
	Potter	7	1	-	-	-	-	-	-	-	-	-	-	-	-	8	1
	Snyder	28	2	-	-	-	-	-	-	-	-	-	-	-	-	34	3
	Sullivan	9	1	0	0	0	0	0	0	0	0	0	0	0	0	9	1
	Tioga	37	3	-	-	-	-	-	-	-	-	-	-	-	-	39	3
	Union	162	13	-	-	-	-	-	-	-	-	-	-	-	-	170	13

* Count may be incomplete due to lag in reporting

** Other risk includes transfusion/transplant and coagulation disorder that occurred during the earliest part of the HIV pandemic.

*** Includes adult cases that had pediatric modes of transmission (e.g., perinatal exposure).

Dash (-) indicates cell size of ≤5.

Note: Percentage may not add to 100% due to “rounding”

Data source: PA HIV Surveillance

Table 13 provides a summary of the number of new diagnoses of HIV disease in PA by sex, race, age at diagnosis, mode of transmission and county of residence for the Southcentral Family Health Council of Central PA (SC-FHCCP) region.

Table 13: Characteristics of HIV Disease by Time Interval of Diagnosis SC-FHCCP Region in PA, 2018–2023

Adams, Bedford, Blair, Cumberland, Dauphin, Franklin, Fulton, Huntingdon, Juniata, Lancaster, Lebanon, Mifflin, Perry, and York counties

		Prior to 2018		2018		2019		2020		2021		2022*		2023*		Total (1980-2023)	
		No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
	Total	**6,107**	**100**	**105**	**100**	**101**	**100**	**91**	**100**	**126**	**100**	**107**	**100**	**121**	**100**	**6,758**	**100**
SEX	Male	4,511	74	85	81	78	77	77	85	104	83	93	87	94	78	5,042	75
	Female	1,596	26	20	19	23	23	14	15	22	17	14	13	27	22	1,716	25
RACE/ ETHNICITY	Hispanic	1,183	19	26	25	29	29	24	26	43	34	27	25	43	36	1,375	20
	American Indian or Alaska Native	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
	Asian	31	1	-	-	-	-	-	-	-	-	-	-	-	-	40	1
	Black /African American	1,550	25	34	32	9	9	23	25	33	26	25	23	34	28	1,708	25
	White	2,982	49	38	36	49	49	38	42	40	32	49	46	39	32	3,235	48
	Multiple race	358	6	7	7	10	10	-	-	9	7	-	-	-	-	396	6
AGE (YEARS)	<13	98	2	0	0	0	0	0	0	0	0	0	0	0	0	98	1
	13 to 14	16	0	0	0	0	0	0	0	0	0	0	0	0	0	16	0
	15 to 24	753	12	27	26	13	13	16	18	32	25	20	19	14	12	875	13
	25 to 34	1,996	33	34	32	37	37	30	33	39	31	35	33	55	45	2,226	33
	35 to 44	1,906	31	20	19	17	17	17	19	31	25	26	24	28	23	2,045	30
	45 to 54	988	16	16	15	18	18	19	21	16	13	13	12	15	12	1,085	16
	55 to 64	283	5	6	6	14	14	9	10	6	5	9	8	8	7	335	5
	65+	67	1	-	-	-	-	-	-	-	-	-	-	-	-	78	1
MODE OF TRANSMISSION	MSM	2,297	38	59	56	56	55	45	49	70	56	60	56	63	52	2,650	39
	IDU	1,519	25	7	7	8	8	8	9	-	-	-	-	-	-	1,556	23
	MSM&IDU	297	5	-	-	-	-	7	8	7	6	9	8	-	-	326	5
	Heterosexual contact	1,328	22	35	33	34	34	21	23	42	33	21	20	32	26	1,513	22
	Other**	86	1	0	0	0	0	0	0	0	0	0	0	0	0	86	1
	Pediatric mode***	93	2	0	0	0	0	0	0	0	0	0	0	0	0	93	1
	Unknown risk	487	8	-	-	-	-	10	11	-	-	12	11	20	17	534	8
COUNTY OF DIAGNOSIS	Adams	156	3	-	-	-	-	-	-	-	-	-	-	-	-	174	3
	Bedford	50	1	-	-	-	-	-	-	-	-	-	-	-	-	57	1
	Blair	161	3	-	-	-	-	-	-	-	-	-	-	-		170	3
	Cumberland	593	10	-	-	9	9	13	14	17	13	9	8	10	8	654	10
	Dauphin	1,777	29	35	33	25	25	26	29	39	31	27	25	30	25	1,959	29
	Franklin	225	4	-	-	-	-	-	-	9	7	8	7	9	7	257	4
	Fulton	9	0	-	-	-	-	-	-	-	-	-	-	-	-	12	0
	Huntingdon	115	2	-	-	-	-	-	-	-	-	-	-	-	-	124	2
	Juniata	27	0	0	0	0	0	0	0	0	0	0	0	0	0	27	0
	Lancaster	1,411	23	15	14	24	24	18	20	14	11	19	18	26	21	1,527	23
	Lebanon	243	4	6	6	7	7	-	-	8	6	7	7	9	7	283	4
	Mifflin	37	1	-	-	-	-	-	-	-	-	-	-	-	-	41	1
	Perry	49	1	-	-	-	-	-	-	-	-	-	-	-	-	51	1
	York	1,254	21	34	32	26	26	22	24	32	25	26	24	28	23	1,422	21

* Count may be incomplete due to lag in reporting
** Other risk includes transfusion/transplant and coagulation disorder that occurred during the earliest part of the HIV pandemic
Dash (-) indicates cell size of ≤5
Note: Percentage may not add to 100% due to “rounding”
Data source: PA HIV Surveillance

Table 14 provides a summary of the number of new diagnoses of HIV disease in PA by sex, race, age at diagnosis, mode of transmission, and county of residence for the Southwest- Jewish Healthcare Foundation region (SW-JHF).

Table 14: Characteristics of HIV Disease by Time Interval of Diagnosis for SW-JHF Region in PA, 2018–2023

Allegheny, Armstrong, Beaver, Butler, Cambria, Fayette, Greene, Indiana, Somerset, Washington, and Westmoreland counties

		Prior to 2018		2018		2019		2020		2021		2022*		2023*		Total (1980-2023)	
		No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
	Total	**6,425**	**100**	**118**	**100**	**117**	**100**	**111**	**100**	**121**	**100**	**100**	**100**	**88**	**100**	**7,080**	**100**
SEX	Male	5,373	84	104	88	97	83	96	86	102	84	86	86	72	82	5,930	84
	Female	1,052	16	14	12	20	17	15	14	19	16	14	14	16	18	1,150	16
RACE/ ETHNICITY	Hispanic	242	4	3	3	6	5	2	2	5	4	9	9	8	9	275	4
	American Indian or Alaska Native																
	Asian	42	1	-	-	-	-	-	-	-	-	-	-	-	-	46	1
	Black /African American	2,345	36	52	44	51	44	53	48	60	50	44	44	41	47	2,646	37
	White	3,477	54	49	42	53	45	48	43	48	40	41	41	34	39	3,750	53
	Multiple race	318	5	11	9	7	6	7	6	7	6	6	6	-	-	361	5
AGE (YEARS)	<13	37	1	-	-	-	-	-	-	-	-	-	-	-	-	38	1
	13 to 14	8	0	0	0	0	0	0	0	0	0	0	0	0	0	8	0
	15 to 24	890	14	24	20	24	21	27	24	19	16	21	21	19	22	1,024	14
	25 to 34	2,193	34	46	39	46	39	35	32	50	41	40	40	31	35	2,441	34
	35 to 44	1,926	30	16	14	25	21	17	15	29	24	24	24	18	20	2,055	29
	45 to 54	973	15	18	15	12	10	11	10	15	12	9	9	8	9	1,046	15
	55 to 64	326	5	13	11	8	7	14	13	6	5	-	-	11	13	383	5
	65+	72	1	-	-	-	-	6	5	-	-	-	-	-	-	85	1
MODE OF TRANSMISSION	MSMcontact	3,751	58	75	64	72	62	63	57	72	60	55	55	49	56	4,137	58
	IDU	824	13	8	7	6	5	2	2	3	2	5	5	3	3	851	12
	MSM&IDU	326	5	6	5	10	9	13	12	6	5	6	6	-	-	372	5
	Heterosexual contact	943	15	25	21	29	25	26	23	35	29	19	19	13	15	1,090	15
	Other**	111	2	0	0	0	0	0	0	0	0	0	0	0	0	111	2
	Pediatric mode***	33	1	-	-	-	-	-	-	-	-	-	-	-	-	34	0
	Unknown risk	437	7	-	-	-	-	6	5	-	-	15	15	18	20	485	7
COUNTY OF DIAGNOSIS	Allegheny	4,844	75	76	64	76	65	80	72	89	74	72	72	66	75	5,303	75
	Armstrong	71	1	-	-	-	-	-	-	-	-	-	-	-	-	74	1
	Beaver	222	3	8	7	9	8	9	8	-	-	-	-	-	-	258	4
	Butler	130	2	-	-	7	6	-	-	-	-	-	-	-	-	145	2
	Cambria	215	3	7	6	-	-	-	-	6	5	8	8	-	-	246	3
	Fayette	147	2	-	-	-	-	-	-	-	-	-	-	-	-	168	2
	Greene	48	1	-	-	-	-	-	-	-	-	-	-	-	-	52	1
	Indiana	70	1	-	-	-	-	-	-	-	-	-	-	-	-	76	1
	Somerset	132	2	-	-	-	-	-	-	-	-	-	-	-	-	146	2
	Washington	209	3	6	5	-	-	-	-	6	5	-	-	7	8	238	3
	Westmoreland	337	5	13	11	7	6	6	5	6	5	-	-	-	-	374	5

* Count may be incomplete due to lag in reporting

** Other risk includes transfusion/transplant and coagulation disorder that occurred during the earliest part of the HIV pandemic

*** Includes adult cases that had pediatric modes of transmission (e.g., perinatal exposure)

Dash (-) indicates cell size of ≤5

Note: Percentage may not add to 100% due to “rounding”.

Data source: PA HIV Surveillance

Table 15 provides a summary of the number of new diagnoses of HIV disease in PA by sex, race, age at diagnosis, mode of transmission and county of residence for the Northwest PA Thrive Partnership region.

Table 15: Characteristics of HIV Disease by Time Interval of Diagnosis for Northwest- PA Thrive Partnership, PA, 2018–2023

Cameron, Clarion, Clearfield, Crawford, Elk, Erie, Forest, Jefferson, Lawrence, McKean, Mercer, Venango, and Warren counties

		Prior to 2018		2018		2019		2020		2021		2022*		2023*		Total (1980-2023)	
		No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
	Total	**1,188**	**100**	**33**	**100**	**31**	**100**	**16**	**100**	**26**	**100**	**35**	**100**	**20**	**100**	**1,349**	**100**
SEX	Male	946	80	24	73	21	68	15	94	17	65	26	74	17	85	1,066	79
	Female	242	20	9	27	10	32	1	6	9	35	9	26	3	15	283	21
RACE/ ETHNICITY	Hispanic	115	10	3	9	3	10	1	6	1	4	3	9	1	5	127	9
	American Indian or Alaska Native	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
	Asian	6	1	-	-	-	-	-	-	-	-	-	-	-	-	7	1
	Black /African American	293	25	10	30	14	45	-	-	10	38	11	31	-	-	347	26
	White	722	61	16	48	14	45	10	63	14	54	18	51	13	65	807	60
	Multiple race	51	4	-	-	-	-	-	-	-	-	-	-	-	-	60	4
AGE (YEARS)	<13	15	1	0	0	0	0	0	0	0	0	0	0	0	0	15	1
	13 to 14	2	0	0	0	0	0	0	0	0	0	0	0	0	0	2	0
	15 to 24	178	15	6	18	-	-	-	-	6	23	-	-	-	-	203	15
	25 to 34	386	32	6	18	15	48	7	44	7	27	12	34	8	40	441	33
	35 to 44	362	30	7	21	-	-	-	-	6	23	10	29	4	20	392	29
	45 to 54	175	15	6	18	-	-	-	-	-	-	8	23	-	-	199	15
	55 to 64	55	5	6	18	6	19	-	-	-	-	-	-	-	-	75	6
	65+	15	1	-	-	-	-	-	-	-	-	-	-	-	-	22	2
MODE OF TRANSMISSION	MSM	508	43	12	36	14	45	11	69	9	35	11	31	11	55	576	43
	IDU	236	20	6	18	-	-	-	-	-	-	-	-	-	-	249	18
	MSM&IDU	80	7	-	-	-	-	-	-	-	-	-	-	-	-	90	7
	Heterosexual contact	235	20	13	39	10	32	-	-	10	38	-	-	-	-	278	21
	Other**	24	2	0	0	0	0	0	0	0	0	0	0	0	0	24	2
	Pediatric mode***	14	1	0	0	0	0	0	0	0	0	0	0	0	0	14	1
	Unknown risk	91	8	-	-	-	-	-	-	-	-	15	43	6	30	118	9
COUNTY OF DIAGNOSIS	Cameron	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Clarion	32	3	-	-	-	-	-	-	-	-	-	-	-	-	34	3
	Clearfield	108	9	-	-	-	-	-	-	-	-	-	-	-		120	9
	Crawford	120	10	-	-	-	-	-	-	-	-	-	-	-		131	10
	Elk	11	1	-	-	-	-	-	-	-	-	-	-	-		12	1
	Erie	539	45	16	48	13	42	5	31	18	69	12	34	8	40	611	45
	Forest	8	1	-	-	-	-	-	-	-	-	-	-	-	-	9	1
	Jefferson	21	2	0	0	0	0	0	0	0	0	0	0	0	0	21	2
	Lawrence	98	8	-	-	-	-	-	-	-	-	-	-	-	-	123	9
	McKean	51	4	-	-	-	-	-	-	-	-	-	-	-	-	56	4
	Mercer	125	11	-	-	-	-	-	-	-	-	9	26	-	-	150	11
	Venango	46	4	-	-	-	-	-	-	-	-	-	-	-		50	4
	Warren	29	2	-	-	-	-	-	-	-	-	-	-	-	-	32	2

* Count may be incomplete due to lag in reporting

** Other risk includes transfusion/transplant and coagulation disorder that occurred during the earliest part of the HIV pandemic

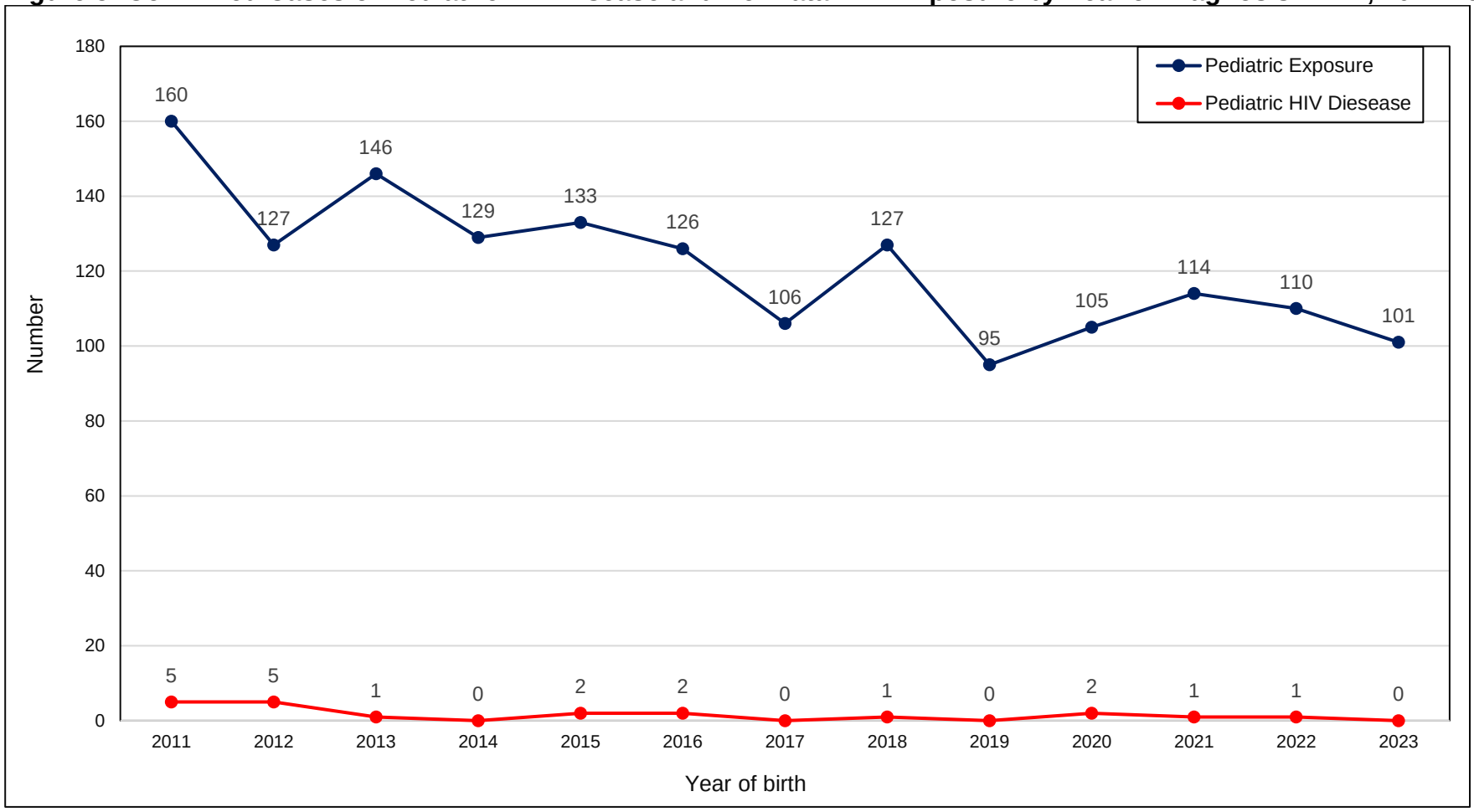
*** Includes adult cases that had pediatric modes of transmission (e.g., perinatal exposure)

Dash (-) indicates cell size of ≤5

Data source: PA HIV Surveillance

Figure 5 depicts the trend in confirmed cases of perinatal HIV disease and the number of children who were perinatally exposed to HIV from 2011 through 2023. Pediatric exposure includes children born to birth mothers who were confirmed to be HIV positive at the time the child was born. Pediatric HIV disease includes all children who are diagnosed with a HIV (non-AIDS) and AIDS.

Figure 5: Confirmed Cases of Pediatric HIV Disease and Perinatal HIV Exposure by Year of Diagnosis in PA, 2011-2023

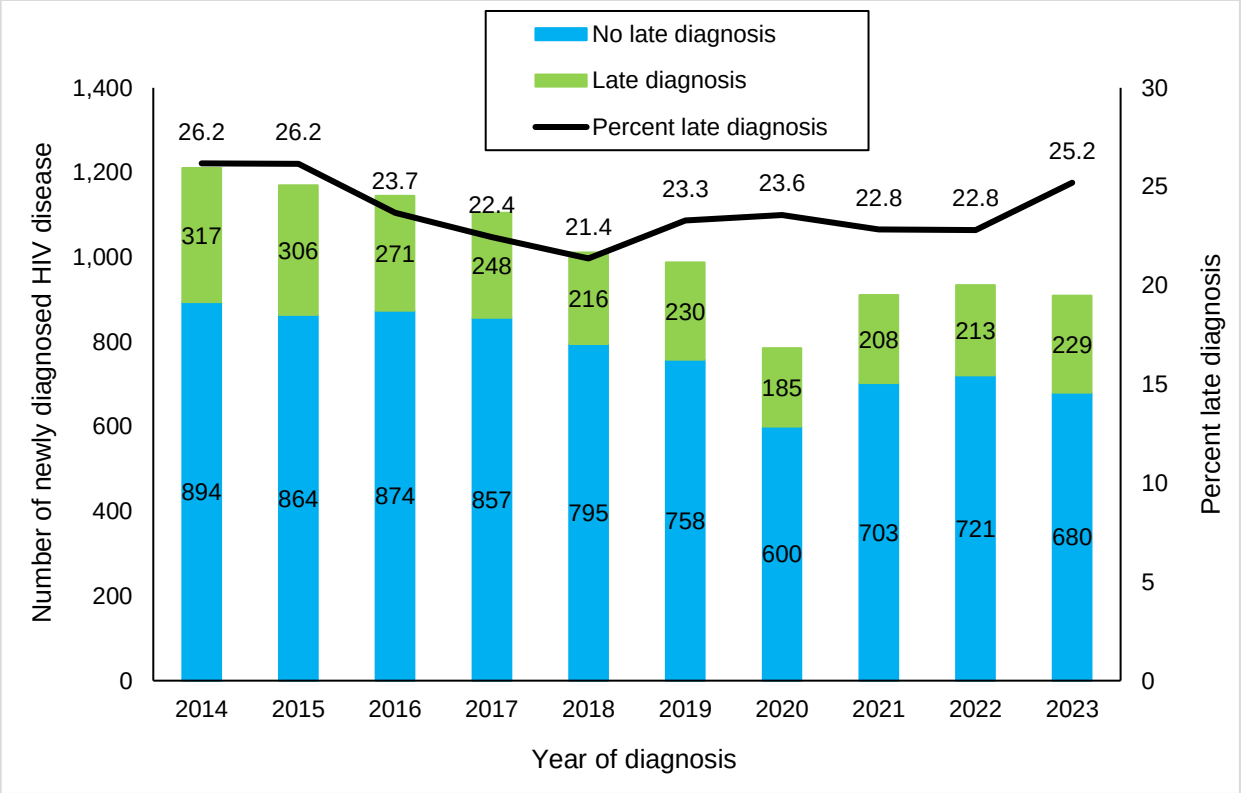


Data source: PA HIV Surveillance

A “late” diagnosis is defined as a person who is newly diagnosed with HIV and receives an AIDS diagnosis within 91 days (≤ 3 months) of their first HIV diagnosis. Stage 3 (AIDS) classification is based on first CD4 test performed or documentation of an AIDS-defining condition ≤ 3 months (≤ 91 days) after a diagnosis of HIV. In most cases, people whose HIV disease is not under control will progress to an AIDS diagnosis in about eight to twelve years as the person’s immune system is damaged. It is important to monitor the proportion of new diagnoses that are late diagnoses to identify the effectiveness and accessibility of HIV testing and prevention services.

Figure 6 indicates that the overall number of new HIV disease diagnoses has steadily declined. The proportion of late diagnoses has also been declining, but in 2019 and 2020 an increase was observed with subsequent decreases in 2021 and 2022 and an increase in 2023.

Figure 6: Trend in Late Diagnoses of HIV Disease in PA, 2014-2023



Data source: PA HIV Surveillance

Table 16 shows the number of people newly diagnosed with HIV disease in PA in 2019 to 2023 by county. Each has the number and percent of late diagnoses of HIV disease. Late diagnosis is defined as any person newly diagnosed with HIV disease that receives an AIDS diagnosis within 91 days (≤ 3 months) of their first diagnosis with HIV disease.

Table 16: Number of New Diagnoses of HIV Disease and Percent of Late Diagnoses of HIV Disease by County, PA, 2019-2023

County of residence at year-end 2023	Total diagnoses	Late diagnoses	Percent late diagnoses
	No.	No.	%
Adams	16	5	31.3
Allegheny	383	104	27.2
Armstrong	-	-	-
Beaver	28	12	42.9
Bedford	-	-	-
Berks	163	39	23.9
Blair	8	3	37.5
Bradford	6	4	66.7
Bucks	132	41	31.1
Butler	13	2	15.4
Cambria	24	7	29.2
Cameron	0	0	0
Carbon	13	2	15.4
Centre	16	2	12.5
Chester	82	28	34.1
Clarion	-	-	-
Clearfield	11	3	27.3
Clinton	-	-	-
Columbia	7	1	14.3
Crawford	9	2	22.2
Cumberland	58	17	29.3
Dauphin	147	31	21.1
Delaware	276	72	26.1
Elk	1	0	0
Erie	56	25	44.6
Fayette	19	7	36.8
Forest	0	0	0
Franklin	30	12	40
Fulton	-	-	-
Greene	3	0	0
Huntingdon	9	1	11.1
Indiana	-	-	-
Jefferson	0	0	0
Juniata	0	0	0
Lackawanna	62	21	33.9
Lancaster	101	28	27.7
Lawrence	20	9	45
Lebanon	34	10	29.4

County of residence at year-end 2023	Total diagnoses No.	Late diagnoses No.	Percent late diagnoses %
Lehigh	126	26	20.6
Luzerne	104	25	24
Lycoming	21	5	23.8
McKean	-	-	50
Mercer	20	6	30
Mifflin	-	-	-
Monroe	57	18	31.6
Montgomery	177	48	27.1
Montour	-	-	20
Northampton	72	22	30.6
Northumberland	14	5	35.7
Perry	0	0	0
Philadelphia	1,918	332	17.3
Pike	6	3	50
Potter	-	-	-
Schuylkill	28	7	25
Snyder	-	-	40
Somerset	13	4	30.8
Sullivan	0	0	0
Susquehanna	0	0	0
Tioga	-	-	-
Union	8	1	12.5
Venango	-	-	-
Warren	-	-	-
Washington	23	5	21.7
Wayne	6	2	33.3
Westmoreland	24	9	37.5
Wyoming	6	2	33.3
York	134	38	28.4
Total	4,527	1,065	23.5

Dash (-) indicates cell size of ≤5

Data source: PA HIV Surveillance

People Living with HIV (PLWH) at year-end 2023

A total of 42,498 PLWH were resident in the Commonwealth of PA at year-end 2023. Tables 17 through 19 provide summaries of the number of PLWH disease in PA as determined by their last known current residence as of 12/31/2023, regardless of where the person may have been diagnosed, including persons diagnosed in PA, persons diagnosed in other states or territories or persons diagnosed in foreign countries. Current residence is identified by most recent laboratory reporting, residence at diagnosis or other information and is determined by a complex algorithm defined by the eHARS. Some persons may have emigrated out of PA and other persons may have immigrated into PA from other places without the knowledge of the the PA HIV surveillance system. As such, all summaries presented in these tables should be considered as estimates of the number of persons living with HIV disease and should not be treated as a precise count of the number of PLWH in PA at the end of the year 2023. Data are presented at the county level by sex/gender, race/ethnicity and age at year-end 2023. Data on the mode of transmission of PLWH at the county-level at year-end 2023 are not provided, but a state-wide summary is.

Table 17 provides an estimate of the number of people currently living in PA at the end of the year 2023 by birth sex (male and female) and county. To protect the confidentiality of transgender PLWH disease and those with additional gender identities, county level data are not provided. At the end of 2023, 27.3% (11,569/42,498) PLWH disease were females and 71.5% (30,394/42,498) were males. Transgender people accounted for 1.2% (519/42,498) of PLWH disease at year-end of 2023 and 0.04% (16/42,498) as additional gender identity.

Table 17: Number of PLWH Disease by County and Sex at Birth in PA at Year-end 2023

County of residence at year-end 2023	Total	Sex at Birth	
		Females	Males
	No.	No.	No.
Adams	256	89	167
Allegheny	3,970	840	3,130
Armstrong	53	11	42
Beaver	186	39	147
Bedford	52	11	41
Berks	1,478	473	1,005
Blair	136	25	111
Bradford	64	19	45
Bucks	1,371	306	1,065
Butler	119	16	103
Cambria	193	36	157
Cameron	-	-	-
Carbon	216	81	135
Centre	307	30	277
Chester	761	198	563
Clarion	55	7	48
Clearfield	83	9	74
Clinton	41	13	28
Columbia	148	60	88
Crawford	113	34	79
Cumberland	437	99	338
Dauphin	1,308	383	925
Delaware	2,307	814	1,493
Elk	19-	-	-
Erie	426	113	313
Fayette	162	33	129
Forest	11-	-	-
Franklin	224	70	154
Fulton	14-	-	-
Greene	33-	-	-
Huntingdon	102	-	-
Indiana	68	16	52
Jefferson	-	-	-
Juniata	24	10	14
Lackawanna	636	179	457

County of residence at year-end 2023	Total	Sex at Birth	
		Females	Males
	No.	No.	No.
Lancaster	1,006	336	670
Lawrence	99	24	75
Lebanon	300	78	222
Lehigh	1,563	572	991
Luzerne	653	203	450
Lycoming	293	77	216
McKean	26	6	20
Mercer	100	27	73
Mifflin	35	13	22
Monroe	482	179	303
Montgomery	1,414	332	1,082
Montour	23	7	16
Northampton	249	68	181
Northumberland	136	26	110
Perry	24	6	18
Philadelphia	18,287	5,012	13,275
Pike	176	57	119
Potter	10	-	-8
Schuylkill	282	50	232
Snyder	30	-	-
Somerset	83	-	-
Sullivan	4	-	-
Susquehanna	36	-	-
Tioga	30	-	-
Union	170	10	160
Venango	39	11	28
Warren	27	6	21
Washington	146	30	116
Wayne	45	8	37
Westmoreland	178	39	139
Wyoming	14	-	-
York	1,157	367	790
Total	42,498	11,594	30,904

Dash (-) indicates cell size of ≤5

Data source: PA HIV Surveillance

Table 18 provides an estimate of the number of people residing in PA at the year-end 2023 by race/ethnicity at the county level. All persons who identify as Hispanic are included in a single race/ethnicity category and they accounted for 19.4% (8,230/42,498) of PLWH. At year-end of 2023, approximately 0.1% of (53/42,498) PLWH were American Indian or Alaska Native, 1% (437/42,498) were Asian, 45.1% (19,182/42,498) were Black/African American, 4.8% (2,050/42,498) were of multiple race, 0.1% (23/42,498) were Native Hawaiian or Other Pacific Islander (NHPI), and 29.5% (12,523/42,498) were White.

Table 18 Number of PLWH Disease by County and Race/Ethnicity in PA at Year-end 2023

County of residence at year-end 2023	Race/ethnicity					
	Black/African American	Hispanic	Multiple race	Other**	White	Total
	No.	No.	No.	No.	No.	No.
Adams	38	31	-	-	174	256
Allegheny	1,690	266	308	43	1,663	3,970
Armstrong	7	-	-	-	43	53
Beaver	47	12	-	-	120	186
Bedford	-	-	-	-	48	52
Berks	268	720	64	-	424	1,478
Blair	22	8	-	-	97	136
Bradford	8	-	-	-	48	64
Bucks	305	229	96	24	717	1,371
Butler	11	12	-	-	86	119
Cambria	63	23	-	-	98	193
Cameron	-	-	-	-	-	-
Carbon	25	102	-	-	82	216
Centre	87	96	14	9	101	307
Chester	235	141	55	12	318	761
Clarion	22	10	-	-	20	55
Clearfield	20	6	-	-	51	83
Clinton	1	8	-	-	29	41
Columbia	22	20	-	-	96	148
Crawford	10	9	-	-	88	113
Cumberland	88	89	24	6	230	437
Dauphin	501	270	89	17	431	1,308
Delaware	1,482	211	135	20	459	2,307
Elk	-	-	-	-	14	19
Erie	159	68	-	-	171	426
Fayette	37	12	-	-	103	162
Forest	-	-	-	-	9	11
Franklin	50	45	-	-	119	224
Fulton	-	-	-	-	11	14
Greene	7	-	--		20	33
Huntingdon	31	24	6	0	41	102
Indiana	16	-	-	-	45	68
Jefferson	-	-	-	-	--	
Juniata	1	8	-	-	15	24
Lackawanna	146	170	-	-	278	636
Lancaster	141	347	135	7	376	1,006

County of residence at year-end 2023	Race/ethnicity					
	Black/African American	Hispanic	Multiple race	Other**	White	Total
	No.	No.	No.	No.	No.	No.
Lawrence	22	-	12	-	59	99
Lebanon	42	132	-	-	106	300
Lehigh	304	843	76	11	329	1,563
Luzerne	167	155	-	-	282	653
Lycoming	129	25	-	-	111	293
McKean	-	-	-	-	18	26
Mercer	36	6	-	-	52	100
Mifflin	-	-	-	-	23	35
Monroe	153	138	-	-	140	482
Montgomery	522	217	115	26	534	1,414
Montour	-	6	-	-	15	23
Northampton	42	64	-	-	126	249
Northumberland	25	40	-	-	65	136
Perry	-	-	-	-	19	24
Philadelphia	11,540	3,073	446	277	2,951	18,287
Pike	47	33	12	1	83	176
Potter	-	-	-	-	7	10
Schuylkill	85	71	-	-	109	282
Snyder	-	8	-	-	19	30
Somerset	25	13	-	-	40	83
Sullivan	-	-	-	-	-	-
Susquehanna	-	-	-	-	28	39
Tioga	-	-	-		29	30
Union	77	44	-	-	45	170
Venango	-	-	-	-	33	39
Warren	-	-	-	-	24	27
Washington	34	12	-	-	86	146
Wayne	12	10	-	-	20	45
Westmoreland	26	17	-	-	124	178
Wyoming	-	-	-	-	11	14
York	323	343	81	7	403	1,157
Total	**19,182**	**8,230**	**2,050**	**513**	**12,523**	**42,498**

Other includes** American Indian or Alaska Native (AI/AN), Asian, and Native Hawaiian or Other Pacific Islander (NHPI)

Dash (-) indicates cell size of ≤5

Data source: PA HIV Surveillance

Table 19 provides an estimate of the number of people currently living in PA at year-end 2023 by current age. At the end of 2023, approximately 46.1% of PLWH disease were adults aged 55 and older.

Table 19: Number of PLWH Disease by County and Age at Year-end in PA at Year-end 2023

County of residence at year-end 2023	Age at Year-end 2023								
	≤12	13-14	15-24	25-34	35-44	45-54	55-64	≥65	Total
	No.	No.	No.	No.	No.	No.	No.	No.	No.
Adams	-	-	-	29	39	63	78	44	256
Allegheny	-	-	98	668	809	745	1,025	619	3,970
Armstrong	-	-	-	-	7	16	17	10	53
Beaver	-	-	-	36	33	38	49	27	186
Bedford	-	-	-	-	13	6	26	-	52
Berks	-	-	45	178	218	316	445	274	1,478
Blair	-	-	-	7	23	37	36	32	136
Bradford	-	-	-	18	8	8	20	7	64
Bucks	-	-	26	136	241	238	433	294	1,371
Butler	-	-	-	11	22	22	36	26	119
Cambria	-	-	-	20	31	52	57	30	193
Cameron	-	-	-	-	-	-	-	-	-
Carbon	-	-	6	27	40	46	71	26	216
Centre	-	-	10	32	69	76	79	41	307
Chester	-	-	17	90	96	131	238	186	761
Clarion	-	-	-	-	14	11	18	5	55
Clearfield	-	-	-	6	15	13	26	20	83
Clinton	-	-	-	10	-	10	9	6	41
Columbia	-	-	-	25	24	33	39	22	148
Crawford	-	-	-	14	12	29	31	22	113
Cumberland	-	-	-	60	85	105	120	62	437
Dauphin	-	--	31	188	214	266	388	219	1,308
Delaware	-	-	55	304	436	443	651	416	2,307
Elk	-	-	-	-	-	6	-	-	19
Erie	-	-	9	56	79	90	127	64	426
Fayette	-	-	-	25	31	30	56	16	162
Forest	-	-	-	0	1	2	4	2	11
Franklin	-	-	-	30	49	61	55	26	224
Fulton	-		-	-	-	6	-	-	14
Greene	-	-	-	6	6	12	-	-	33
Huntingdon	-	-		22	11	30	24	12	102
Indiana	-	-	-	9	17	11	24	-	68
Jefferson	-	-	-	-	-	-	-	-	-
Juniata	-	--	-	-	-	7	8	-	24
Lackawanna	-	-	11	86	119	140	180	100	636
Lancaster	-	-	31	118	156	230	288	179	1,006
Lawrence	-		-	17	18	17	29	18	99
Lebanon	-	-	7	28	49	44	109	63	300
Lehigh	-	--	33	189	222	321	501	293	1,563
Luzerne	-	-	17	125	140	126	156	88	653
Lycoming	-	-	-	30	52	68	91	48	293

County of residence at year-end 2023		Age at Year-end 2023							
	≤12	13-14	15-24	25-34	35-44	45-54	55-64	≥65	Total
	No.	No.	No.	No.	No.	No.	No.	No.	No.
McKean	-	-	-	-	-	9	8	-	26
Mercer	-	-	-	16	22	13	35	13	100
Mifflin	-	-	-	-	7	8	8	8	35
Monroe	-		12	51	78	72	163	106	482
Montgomery	-	-	29	178	282	258	416	250	1,414
Montour	-	-	-	-	-	-	7	7	23
Northampton	-	-	6	18	42	57	76	50	249
Northumberland	-	-	-	16	23	27	48	20	136
Perry	-	-	-	-	-	-	6	-	24
Philadelphia	-	-	362	2,532	3,515	3,542	5,173	3,151	18,287
Pike	-	-	-	13	17	46	53	44	176
Potter	-	-	-	-	-	-	-	-	10
Schuylkill	-	-	-	36	50	70	82	39	282
Snyder	-	-	-	-	-	-	12	8	30
Somerset	-	-	-	11	11	16	30	14	83
Sullivan	-	-	-	-	-	-	-	-	-
Susquehanna	-	-	-	-	-	8	14	8	39
Tioga	-	-	-	-	6	-	13	6	30
Union	-	-	-	7	25	43	56	34	170
Venango	-	-	-	-	6	7	18	-	39
Warren	-	-	-	-	-	6	9	-	27
Washington	-	-	-	23	25	29	44	24	146
Wayne	-	-	-	-	8	6	14	11	45
Westmoreland	-	-	-	22	36	33	55	30	178
Wyoming	-	-	-	-	-	-	-	-	14
York	-	-	29	142	194	267	356	168	1,157
Total	**31**	**14**	**922**	**5,715**	**7,784**	**8,442**	**12,259**	**7,331**	**42,498**

Dash (-) indicates cell size of ≤5

Data source: PA HIV Surveillance

The Number of PLWH Disease by Mode of Transmission in PA at Year-end 2023

Out of the 42,498 PLWH disease at year-end 2023, individuals with a heterosexual contact transmission mode accounted for 28.1% (11,927/42,498) of the PLWH disease. MSM accounted for 41.3% (17,538/42,498) of PLWH disease. IDU as a mode of transmission accounted for 14.9% (6,334/42,498) of PLWH disease. MSM&IDU accounted for 4.4% (1,849/42,498) PLWH disease. Other modes of transmission which includes no risk reported (NRR) and no identified risk (NIR) accounted for 9.8% (4,165/42,498) of PLWH disease and individuals who had a pediatric mode of transmission accounting for 1.6% (685/42,498).

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