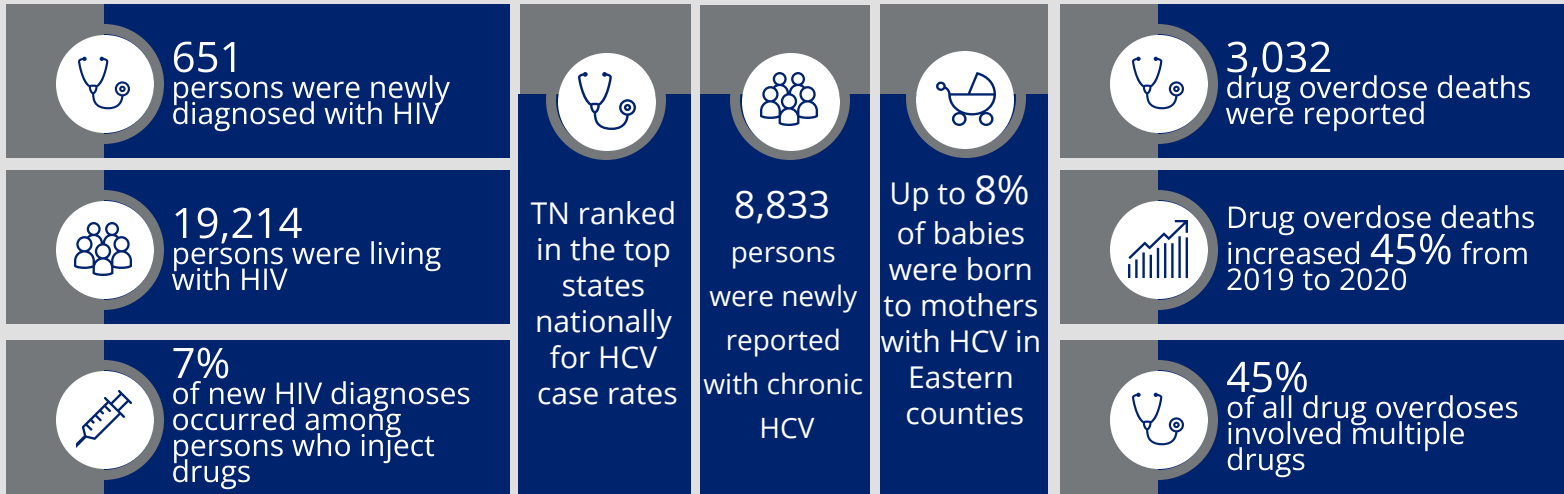


Understanding the HIV, Hepatitis C Virus (HCV), and Drug Overdose Syndemic in Tennessee

Tennessee (TN) is experiencing a syndemic, which means many communities are heavily impacted by overlapping HIV, HCV, and drug overdose epidemics. Read on for more information on what is known about this syndemic and where to find local resources to address it.

Brief Facts on the Syndemic in Tennessee, 2020



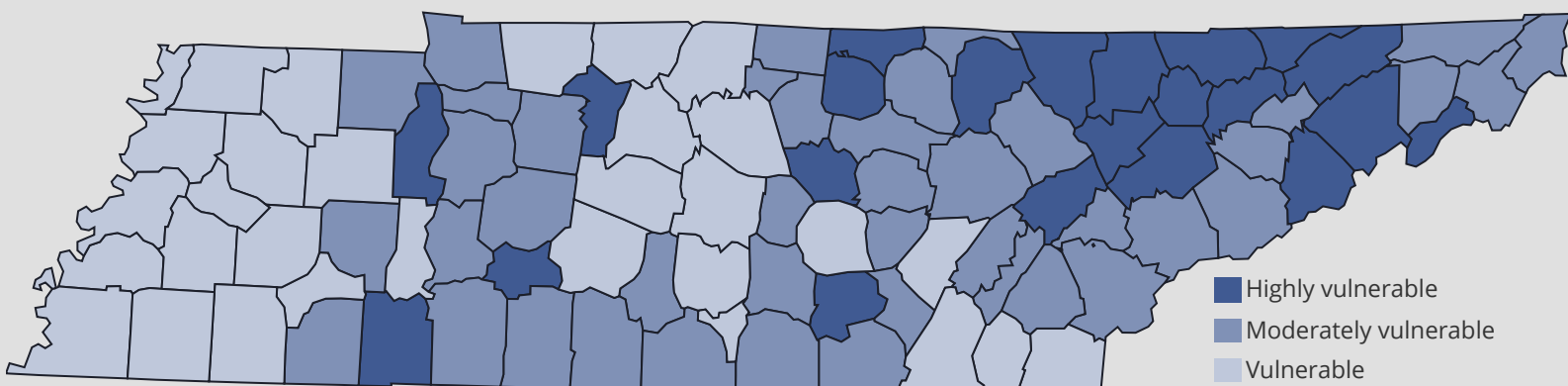
Want more data? Search for HIV, viral hepatitis, and drug overdose epidemiology profiles: www.tn.gov/health

County-Level Vulnerability to HIV and HCV Outbreaks Associated with Drug Use — Tennessee, 2021 Update

Rising drug overdose deaths in Tennessee may be a sign of changing drug-related behaviors. This raises the potential for rapid transmission of certain infections that could result in an HIV or HCV outbreak among persons who use drugs.

To better understand how the HIV, HCV, and drug overdose epidemics are affecting counties in TN, the Tennessee Department of Health evaluated data on socio-economic factors, indicators of drug use, access to health care, and health outcomes to identify county-level vulnerability to an outbreak. To ensure completeness and accuracy, the data were collected from the years 2018 and 2019. Ten measures were used to determine the level of vulnerability for each county.

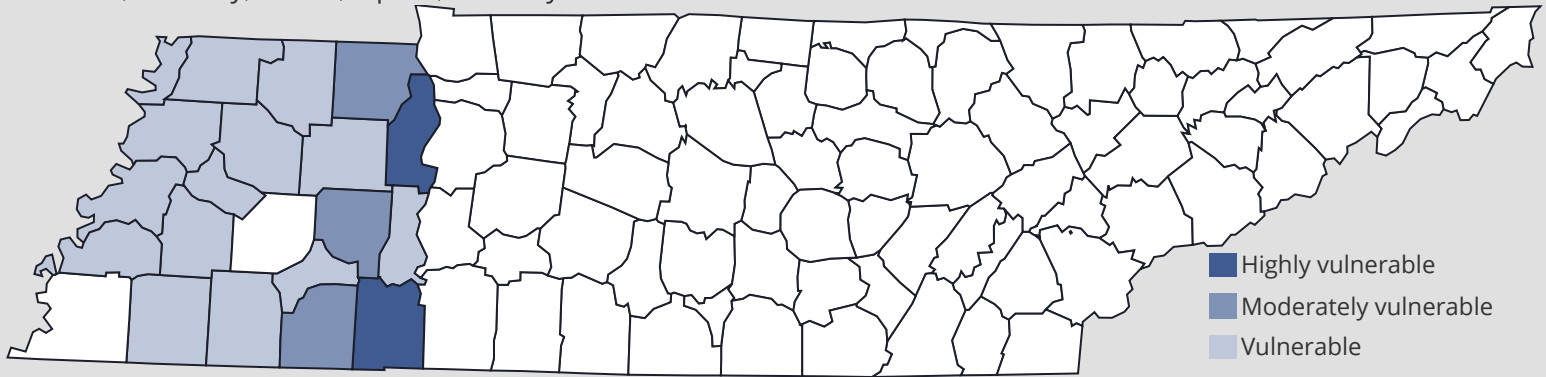
A map of Tennessee's county-level vulnerability is shown below.



Tennessee had 22 highly vulnerable counties, 42 moderately vulnerable counties, and 31 vulnerable counties.

West Tennessee Region (WTR) HIV/HCV Vulnerability

Benton, Carroll, Chester, Crockett, Decatur, Dyer, Fayette, Gibson, Hardeman, Hardin, Haywood, Henderson, Henry, Lake, Lauderdale, McNairy, Obion, Tipton, Weakley



WTR had 2 highly vulnerable counties, 3 moderately vulnerable counties, and 14 vulnerable counties.

WTR HIV, HCV, and Drug Overdose Facts, 2020



39 new HIV diagnoses



620 newly reported chronic cases of HCV



131 drug overdose deaths

Measures Used to Evaluate HIV/HCV Vulnerability, 2018-2019 Data

Socioeconomic Factors	TN	WTR*
% of population that is non-Hispanic white	87%	77%
% of population with a disability	19%	19%
High unemployment rate	51%	68%
Access to Healthcare	TN	WTR*
% of individuals ages 12+ receiving TDMHSAS-funded substance abuse treatment and recovery services for any opioid abuse	53%	38%
Rate of uninsured individuals receiving Behavioral Health Safety Net Services, per 1,000 residents	52.2	47.1
Health Outcome	TN	WTR*
Years of potential life lost	10,348	10,527
Rate of injury related deaths, per 100,000 residents	98.9	91.7
Opioid Use	TN	WTR*
High intensity drug trafficking area	34%	0%
Rate of patients filing buprenorphine prescriptions, per 1,000 residents	201.1	141.0
Rate of deaths related to all drugs, per 100,000 residents	25.7	18.8

*Values listed are an average of the counties in the public health region, bolded numbers are higher than the TN average
For more information about the measures, please visit: <https://www.tn.gov/health/health-program-areas/std/std/vulnerability-assessment.html>

Resources

- SSPs, HIV prevention, or HIV care: HIVSTI.info@tn.gov
- Viral Hepatitis Case Navigation, Harm Reduction Resource Teams, or Perinatal Hepatitis C Coordinator: VH.Health@tn.gov
- Overdose prevention, substance use disorder treatment, or recovery services: health.opioidresponse@tn.gov
- CDC websites: www.cdc.gov/hiv, www.cdc.gov/hepatitis, www.tntogether.com

