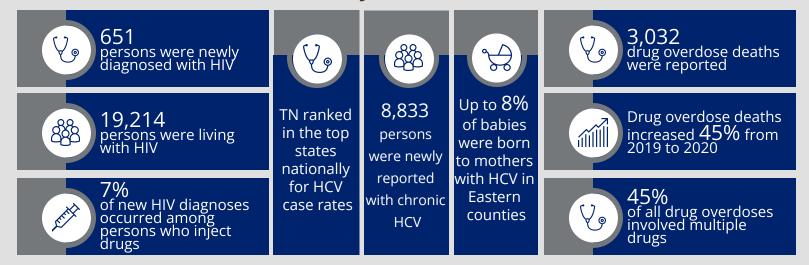
Understanding the HIV, Hepatitis C Virus (HCV), and Drug Overdose Syndemic in Tennessee

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



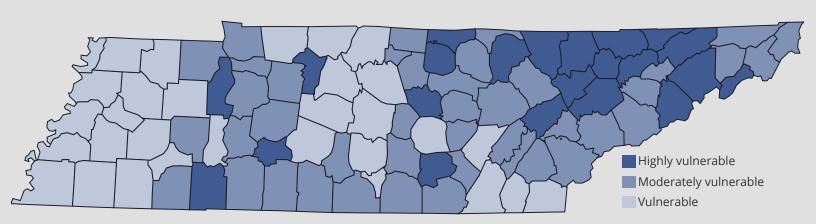
Want more data? Search for HIV, viral hepatitis, and drug overdose epidemiology profiles: www.tn.gov/health

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 heath 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.

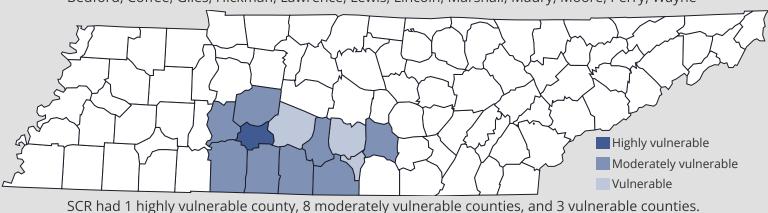
A map of Tennessee's county-level vulnerability is shown below.



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

South Central Region (SCR) HIV/HCV Vulnerability

Bedford, Coffee, Giles, Hickman, Lawrence, Lewis, Lincoln, Marshall, Maury, Moore, Perry, Wayne



SCR HIV, HCV, and Drug Overdose Facts, 2020







drug overdose deaths

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

| Socioeconomic Factors | TN | SCR* |
|---|--------|--------|
| % of population that is non-Hispanic white | 87% | 89% |
| % of population with a disability | 19% | 17% |
| High unemployment rate | 51% | 33% |
| Access to Healthcare | TN | SCR* |
| % of individuals ages 12+ receiving TDMHSAS-funded substance abuse treatment and recovery services for any opioid abuse | 53% | 49% |
| Rate of uninsured individuals receiving Behavioral Health Safety Net Services, per 1,000 residents | 52.2 | 60.8 |
| Health Outcome | TN | SCR* |
| Years of potential life lost | 10,348 | 10,159 |
| Rate of injury related deaths, per 100,000 residents | 98.9 | 99.4 |
| Opioid Use | TN | SCR* |
| High intensity drug trafficking area | 34% | 0% |
| Rate of patients filing buprenorphine prescriptions, per 1,000 residents | 201.1 | 178.8 |
| Rate of deaths related to all drugs, per 100,000 residents | 25.7 | 22.8 |

^{*}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

CDC websites: www.cdc.gov/hiv, www.cdc.gov/hepatitis, www.tntogether.com

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



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