"Unmet need" is defined by the Health Resources and Services Administration (HRSA) as "the need for HIV-related health services by individuals with HIV who are aware of their HIV status, but are not receiving regular primary health care." "Primary medical care" for persons living with HIV is defined as "a medical visit which entails at least one of the following: CD4 count, viral load, or an HIV-related prescription for medication" at least once within the fiscal year of interest. † Overall, 33 percent of persons living with HIV in Michigan had an unmet need for HIV care in fiscal year 2012. This analysis demonstrates disparities in unmet need by demographics characteristics such as race/sex, age, and HIV risk transmission category.

Figure 1. Persons living with HIV in Michigan with unmet need, by risk transmission category, FY 2012: Includes persons living with HIV in Michigan as of September 30, 2012 who were diagnosed by October 1, 2011. Injection drug users (IDU) had the highest proportion of unmet need at 41%, followed by recipients of HIV-infected blood products at 40%.

Figure 2. Persons living with HIV in Michigan with unmet need, by race and sex, FY 2012: Includes persons living with HIV in Michigan as of September 30, 2012 who were diagnosed by October 1, 2011. Hispanic persons of both sexes had the highest levels of unmet need (females 51%, males 45%).

Figure 3. Persons living with HIV in Michigan with unmet need, by current age, FY 2012: Includes persons living with HIV in Michigan as of September 30, 2011 who were diagnosed by October 1, 2011. Persons 35-39 and 40-44 years had the highest levels of unmet need at 35%.

*Data are not available on medication use or medical visits; therefore, CD4 and viral load laboratory tests are used as proxies for care visits.
†Fiscal year 2012 (FY 2012) is October 1, 2011 to September 30, 2012.