Understanding HIV in Montréal:

4 key takeaways & 2 clear recommendations

Published by the Santé Montréal (aka, regional health board 'the DRSP') on May 12, the *Portrait épidémiologique du VIH à Montréal, 2024* is a data-rich report on HIV in the last year of record. Despite its typical array of tables and graphs, the report's engaging and empathetic tone is noteworthy, a welcome reminder of the human stories behind the statistics. Our summary and analysis of the state of HIV in Montréal highlights the report's four key aspects and two explicit recommendations.

First of all, we have to address one of the most salient points: among the 675 people diagnosed with HIV in Montréal in 2024, a large majority (409, or 61%) arrived here less than a year prior to being tested. To break that down: of the 39,000 people who immigrated here in 2024[1], just under 1% are living with HIV—a higher prevalence than in the general Canadian population. However, this comes after decades of neglecting new arrivals living with HIV. In fact, of all the people who arrived via formal or informal immigration prior to 2022, HIV prevalence[2] was 10 times *lower* than worldwide rates[3]. So, our city has perhaps become a beacon of hope (or, see below on why 2022 has made the years since so special). To people living with HIV (PLHIV) who have chosen Montréal as their home, to your families, and to everyone living with HIV who has come here despite the challenges of borders, we welcome you!

Summarizing the rest of the *Portrait* had meant balancing largely promising local data, on the one hand, with the realities faced by newly arrived PLHIV who encounter antagonistic barriers to accessing care, on the other. Many newcomers face the dual challenge of finding out their HIV-positive status and having to wait for their residency status to be confirmed before being able to access the healthcare system. For locals, we know that the cascade of care is, for the most part, working (see below on 'late diagnoses' rates).

On this topic, a new terminological distinction has been made in this edition of the *Portrait* between "prior diagnoses" (*diagnostics antérieurs*, people who were already aware of their status) versus "first-time diagnoses" (*premiers diagnostics*, i.e. people made aware of their status for the first time). How/why this distinction matters:

- Of the 675 people diagnosed in 2024, 408 fall into the category of prior diagnoses.
- Of this number, approximately 10% are people born in Canada who *retake* an HIV test for unknown reasons. Several factors may explain this, such as gaps in medical follow-up, a problem that can only be resolved through significantly improving healthcare access for vulnerable people and the underserved alike.

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[1] "Immigrants in Montreal, Quebec | Annual Arrivals & Census Trends/Statistics" *Canada Immigrants* (12 May 2026) based on statistics from the Immigration, Refugees, and Citizenship Canada

[2] "HIV in Canada: 2024 surveillance highlights" Health Canada (2024)

[3] "Global Epidemiology of HIV/AIDS: A Resurgence in North America and Europe" *-Journal of Epidemiological & Global Health* PMC (2021)

This 10% of people—who find themselves without optimal medical care for HIV—are a reminder that peoples' lives are at stake.

In short, this report paints a bittersweet picture. While some data points are encouraging (such as the decline in late diagnoses), others highlight pressing needs in our communities, such as the fact that the number of diagnoses among women remains higher than it was before the COVID-19 pandemic. Still others make us wish we had the 2025 data right now!

Key takeaways from this edition of Santé Montréal's report on HIV in 2024:

New (local) diagnoses among people born in Canada or who settled here before 2023

The number of new local diagnoses is stable compared to the average of the previous 10 years. This is good news! The post-2022 bounceback will hopefully restore downward trends in the years to come.

- Number of Montrealers diagnosed in 2024: **93**
- Average over the past 10 years (2015 to 2024)*: **93**

*Pandemic years (2020-2021) caused an aberrant dip in the data not reflected in this average. For more on this topic, see prior 'Résumé et analyse' texts on the 2022 and 2023 *Portraits* on this website.

Late Diagnoses

The rate of late diagnoses is improving.

> **One in four (¼)**: the proportion of late diagnoses [Fig. 11, page 15] among all positive HIV test results in 2024 in Montréal.

An HIV diagnosis is considered "late" when a person has a white blood-cell (CD4) count below 350/mml at the time of their first screening, suggesting that the infection has been present for more than a year. While this may indicate a systemic lack of access to care, late diagnosis rates are also a key metric for assessing the extent to which preventive measures have been adopted by the local population.

> **Fewer than one in five (⅕) men of sexual and gender diversity** born in Canada (or residing here for 6 years or more) received a late diagnosis in 2024.

While this exact figure does not appear in the report, an epidemiologist at the DRSP discreetly shared with us the percentage of these "local" men who had a CD4 count below 350/mml at the time of testing. We ask for this data point every year because this community—which is particularly vulnerable to HIV infection—also tends to have a high level of awareness regarding risk reduction. Since peaking at 47% in 2022, we have seen a significant decline in late diagnoses among men from this community to 40% for 2023, and now half that. Dare we say the trend is looking positive?

New Arrivals (2023-2024)

Of all the people diagnosed with HIV in Montreal in 2024, 409 had arrived in the 12 months prior to testing positive.

Here, we must reiterate the context of Canada's recent immigration influx, impart a vibe that Montréal has entered a new epidemiological era in HIV, and highlight a couple of the *Portrait* authors' welcome recommendations.

When considering the prevalence of HIV in Québec, (approx. 0.2%, a smidgen higher than Canada's overall) compared to rates among 2024 newcomers, recall that HIV testing is mandatory for people undergoing a formal immigration or refugee/asylum claim process. If testing were more widely available to the general population, the report's authors contend, we may see closer percentages of prevalence. Not to mention if testing was more broadly required, as it is in prenatal settings or (elsewhere in Canada) in hospital emergency departments, where refusing an HIV test requires a patient to 'opt out' of taking one administered by default.

Catch 2022

Since 2022, the community of people living with HIV in Montréal has experienced a period of exceptional growth and diversification. While the average number of newcomers with HIV during the previous decade (2015 to 2024, excluding the pandemic years of 2020–2021) was 140 people, the annual average has risen to 214 people since 2022, a crucial year for at least two reasons: #AIDS2022: as host of the International AIDS Conference that year, Montréal showcased the medical expertise and high levels of social acceptance for which community groups serve as essential catalysts. Furthermore, the impact of government policies— namely, those "Amending the Immigration and Refugee Protection Regulations"[4] regarding "excessive demand" of healthcare costs—has helped new arrival communities stay healthier because applicants have been less likely to be rejected simply based on the cost of common medical treatments (like antiretrovirals). A combination of this reputational glow-up and a few novel factors (reduced administrative burdens, lower prices for certain treatments, and the well-known superpower, word-of-mouth) has contributed to this relative (150%) and real (+ 74 people annual) increase.

We join the DRSP in emphasizing that the influx of newcomers calls for a big boost in resources allocated to community groups supporting PLHIV and working on the prevention of HIV, HCV, and STIs—such as the 32 members of TOMS, most of which already work with newcomers, either as part of their core mission or in response to their members' evolving needs.

[4] *Canada Gazette*, Part 2, Volume 156, Number 6: Regulations Amending the Immigration and Refugee Protection Regulations (Excessive Demand)

Data Reads on Gender and Sexual Orientation

When we peak at the gender and sexual orientation of people behind the numbers, 2024 data show continuity in the epidemiology for some groups and a somewhat unexpected trend for others.

- Men of sexual and gender diversity account for a strong majority of new diagnoses among Montrealers. A total of 72 men tested positive for HIV in 2024;
- The number of women has doubled in 10 years: HIV among women has continued its upward trajectory since 2015. Although the pre-pandemic average was 106 women yearly, the 230 women diagnosed in 2024 represent an increase that is proportional to the number of new arrivals diagnosed here; hence, prevalence among all Montréal women may not be increasing as sharply.
- The number of people who contracted HIV through heterosexual transmission (345) is comparable to the average of the previous two years (342);

Across the board, these figures confirmed what already we knew: we need to expand prevention measures among the general population.

Santé Montréal calls for more resources, better access to prevention & treatment

Throughout the *Portrait*, its authors call for free access, or the complete removal of barriers to accessing care, including universal free access to antiretroviral treatments and PrEP for people of any residency status, as well as expanded access to all prevention methods included in the latest guidelines. While it may seem obvious, we remain happy to read these supportive, science-backed words from the DRSP.

Link to the DRSP's 2026 publication (in French): *Portrait épidémiologique du VIH à Montréal, 2024*