



# Massachusetts HIV/AIDS Data Fact Sheet

## Who is currently living with HIV/AIDS?

### Fast Facts

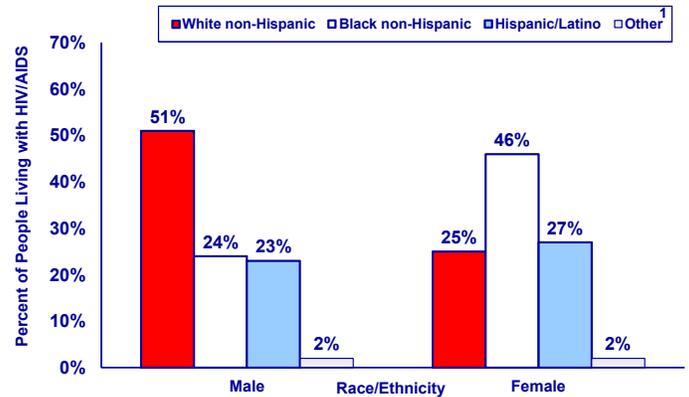
- More people are staying well with HIV/AIDS in Massachusetts.
- However, challenges to the achievement of health equity in the prevention, care, and treatment of HIV/AIDS remain:
  - Racial/ethnic disparities persist among persons living with HIV/AIDS with marked differences by risk exposure, gender, place of birth and residence in region of the state when data are analyzed by race and ethnicity.
  - Male-to-male sex accounts for exposure among a large proportion of people living with HIV/AIDS.
  - IDU remains the predominant exposure mode among Latinos living with HIV/AIDS.

### Overview

On December 31, 2013 there were 19,165 people living with HIV in Massachusetts, and an additional 3,162 residents who were first diagnosed in another state.<sup>1</sup> Since the beginning of the epidemic, the total number of people living with HIV/AIDS in Massachusetts, as reported to the MDPH, has increased every year. In the past ten years, it has increased by 30%, while new diagnoses of HIV infection fell by 41% and deaths in persons with HIV infection also declined by 34%.

Among those currently known to be living with HIV/AIDS in Massachusetts who were first diagnosed in the state, there is considerable diversity by gender, race/ethnicity and other demographic characteristics. For example, while just over half of males living with HIV/AIDS are white (non-Hispanic) (51%), the largest proportion of females living with HIV/AIDS are black (non-Hispanic) (46%) (Figure 1).

**Figure 1. People Living with HIV/AIDS on December 31, 2013 by Gender and Race/Ethnicity: Massachusetts**



<sup>1</sup> Other include Asian/Pacific Islander and American Indian/Alaska Native  
Data Source: MDPH HIV/AIDS Surveillance Program, Data as of 1/1/14

While roughly half (52%) of males living with HIV/AIDS were exposed to HIV infection through male-to-male sex and 18% had undetermined risk, 35% of females were exposed through sex with males of known risk and/or HIV status (heterosexual), and 31% were exposed through sex with males of unknown risk and HIV status (presumed heterosexual<sup>ii</sup>). Reported exposure resulting in HIV infection also varies by race/ethnicity. The predominant reported exposure mode among white (non-Hispanic) individuals living with HIV/AIDS is male-to-male sex (59%) and among Hispanic/Latino individuals is injection drug use (31%). Among black (non-Hispanic) individuals the largest proportion is reported with undetermined exposure mode (24%), followed by heterosexual sex (21%) and presumed heterosexual sex (19%).

### Gender and Exposure Mode:

- Male-to-male sex and injection drug use are the leading reported exposure risks for HIV infection among all people living with HIV/AIDS, accounting for 37% and 19% of all exposure modes, respectively.
- Among males, male-to-male sex is the predominant exposure mode (52%), followed by injection drug use (18%). Exposure mode is undetermined for 18% of males living with HIV/AIDS and heterosexual sex accounts for 6%, MSM/IDU 5%, and other modes 2% of exposures.





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- Among females, heterosexual sex (with males of known risk and/or HIV status) and sex with males of unknown risk and HIV status (presumed heterosexual) account for the most frequently reported exposure modes at 35% and 31%, respectively. Injection drug use accounts for 23%, other modes 3%, and exposure mode is undetermined in 8% of females living with HIV/AIDS.

### Race/Ethnicity and Exposure Mode:

- Among **white (non-Hispanic) people** living with HIV/AIDS, male-to-male sex is the most frequently reported exposure mode, accounting for 59% of exposures.
- Among **black (non-Hispanic) individuals**, the largest proportion has an undetermined exposure mode (24%), followed by heterosexual sex (21%), presumed heterosexual sex (female reporting sex with male of unknown HIV status and risk, 19%), injection drug use (15%) and male-to-male sex (16%).
- Among **Hispanic/Latino people** living with HIV/AIDS, the predominant risk for HIV infection is injection drug use, which accounts for 31% of exposures.
- Among **Asian/Pacific Islanders** living with HIV/AIDS, the predominant risk for HIV infection is male-to-male sex, accounting for 44% of exposures.

### Race/Ethnicity and Exposure Mode by Gender:

- Among **white (non-Hispanic) males** living with HIV/AIDS, male-to-male sex is the primary reported risk for HIV infection, accounting for 71% of exposures, followed by injection drug use at 11%; for 9% exposure mode is undetermined.
- Exposure mode is undetermined in 35% of **black (non-Hispanic) males** living with HIV/AIDS. Among those with a reported risk, male-to-male sex is most frequently reported, accounting for 29% of all exposures, followed by injection drug use at 18% and heterosexual sex at 11% of reported exposures.
- Among **Hispanic/Latino males** living with HIV/AIDS, injection drug use and male-to-male sex are the leading reported risks for HIV infection, each accounting for 34% of exposures; for 18% exposure mode is undetermined.

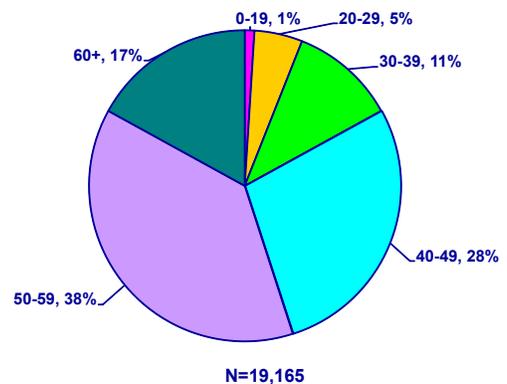
- While the predominant exposure mode among **white (non-Hispanic) females** living with HIV/AIDS is injection drug use (43%), the predominant exposure mode among **black (non-Hispanic) females** is sex with males of unknown risk and HIV status (presumed heterosexual sex, 44%) and among **Hispanic/Latina females** is heterosexual sex with males of known risk and/or HIV status (42%).

### Place of Birth, Race/Ethnicity and Gender:

- Seventy-one percent of people living with HIV/AIDS in Massachusetts are male and 29% are female.
- Twenty-four percent of people living with HIV/AIDS were born outside the US, 10% were born in Puerto Rico or another US Dependency and 65% were born in the US.
- Among people living with HIV/AIDS who are Asian/Pacific Islander, 76% were born outside the US, compared to 46% of black (non-Hispanic), 27% of Hispanic/Latino and 6% of white (non-Hispanic) individuals. An additional 41% percent of Hispanic/Latino individuals living with HIV/AIDS were born in Puerto Rico or another US Dependency.
- Thirty-five percent of females living with HIV/AIDS were born outside the US, and an additional 12% were born in Puerto Rico or another US Dependency, compared to 20% and 9%, respectively, of males.

### Current Age:

Figure 2. People Living with HIV/AIDS on December 31, 2013 by Age: Massachusetts



Data Source: MDPH HIV/AIDS Surveillance Program, Data as of 1/1/14



For detailed data tables and technical notes see Appendix  
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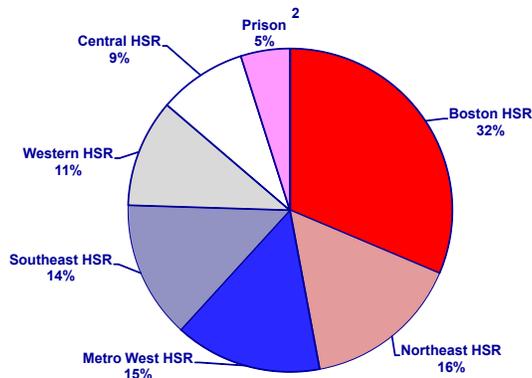
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### Distribution by Health Service Region (HSR)<sup>iii</sup>:

- See Figures 3 and 4 for the distribution of people living with HIV/AIDS by HSR and race/ethnicity.

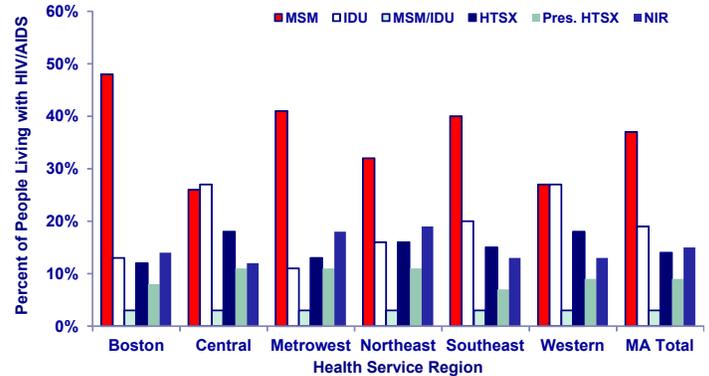
**Figure 3. People Living with HIV/AIDS on December 31, 2013 by Massachusetts Health Service Region<sup>1</sup>**



<sup>1</sup> Reflects the health service region of a person's residence at the time of report (not necessarily current residence)  
<sup>2</sup> Prisons include persons who were diagnosed with HIV/AIDS while in a correctional facility. While prisons are not a region, the prison population is presented separately in this analysis because of its unique service planning needs.  
 Data Source: MDPH HIV/AIDS Surveillance Program, Data as of 1/1/14

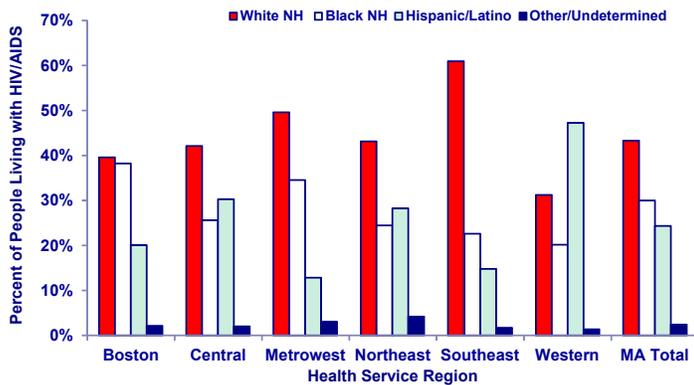
- Injection drug use and male-to-male sex account for nearly the same proportion of people living with HIV/AIDS in the Western (both 27%) and Central (27% and 26%, respectively) regions. (Figure 5)

**Figure 5. People Living with HIV/AIDS on December 31, 2013 by Health Service Region<sup>1</sup> and Exposure Mode: Massachusetts**



<sup>1</sup> Reflects the health service region of a person's residence at the time of report (not necessarily current residence)  
 NH= Non-Hispanic; Data Source: MDPH HIV/AIDS Surveillance Program, Data as of 1/1/14

**Figure 4. People Living with HIV/AIDS on December 31, 2013 by Health Service Region<sup>1</sup> and Race/Ethnicity: Massachusetts**



<sup>1</sup> Reflects the health service region of a person's residence at the time of report (not necessarily current residence)  
 NH= Non-Hispanic; Data Source: MDPH HIV/AIDS Surveillance Program, Data as of 1/1/14

- Male-to-male sex is the exposure mode reported for the largest proportion of people living with HIV/AIDS in the Boston (48%), Metro West (41%), Southeast (40%), and Northeast (32%) regions.

### Data Sources

HIV/AIDS Case Data: Massachusetts Department of Public Health, HIV/AIDS Surveillance Program, all data as of 1/1/14

MDPH Massachusetts Race Allocated Census 2010 Estimates (MRACE 2010), Massachusetts Department of Public Health, Bureau of Health Information, Statistics, Research, and Evaluation, Research and Epidemiology Program. November 2011. MDPH Estimates of Census 2010 SF1, Massachusetts Data.

<sup>i</sup> Effective January 1, 2011, the Massachusetts Department of Public Health, HIV/AIDS fact sheets, epidemiologic reports, and other data presentations have been updated to remove all HIV/AIDS cases that were first diagnosed in another state before being reported in Massachusetts.

<sup>ii</sup> The category of presumed heterosexual is used exclusively for females, to define HIV exposure mode in cases when sex with males is the only reported risk factor for HIV infection.

<sup>iii</sup> Reflects the health service region of a person's residence at the time of diagnosis (not necessarily current residence). HSRs are regions defined geographically to facilitate targeted health service planning. See Epidemiologic Profile General Appendices, Health Service Region Maps, available at [http://www.mass.gov/dph/aids/research/profile2006/app5\\_hrs\\_maps.pdf](http://www.mass.gov/dph/aids/research/profile2006/app5_hrs_maps.pdf) for configuration of health service regions.



For detailed data tables and technical notes see Appendix  
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