

# Massachusetts Department of Public Health Bureau of Infectious Disease and Laboratory Sciences

# Massachusetts HIV Epidemiologic Profile: Data as of 7/1/2024

Population Report: People Born Outside the United States

### Suggested citation:

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Questions about this report

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Questions about infectious disease reporting

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**HIV Data Dashboard** 

https://www.mass.gov/info-details/hiv-data-dashboard

Requests for additional data

https://www.mass.gov/lists/infectious-disease-data-reports-and-requests

Slide sets for HIV Epidemiologic Profile Reports

https://www.mass.gov/lists/hivaids-epidemiologic-profiles

<sup>&</sup>lt;sup>1</sup> Providers may use this number to report individuals newly diagnosed with a notifiable sexually transmitted infection, including HIV, or request partner services. Partner services is a free and confidential service for individuals recently diagnosed with a priority infection. The client-centered program offers counseling, linkage to other health and social services, anonymous notification of partners who were exposed and assistance with getting testing and treatment. For more information, see: <a href="https://www.mass.gov/service-details/partner-services-program-information-for-healthcare-providers">https://www.mass.gov/service-details/partner-services-program-information-for-healthcare-providers</a>)

People born outside the United States make up 18.0% (N=1,263,580/7,001,399) of the total Massachusetts population. Non-US born persons living with HIV infection in Massachusetts are a very diverse group with at least 155 reported countries of birth represented.

#### PEOPLE BORN OUTSIDE THE US AT A GLANCE

N=645 45%

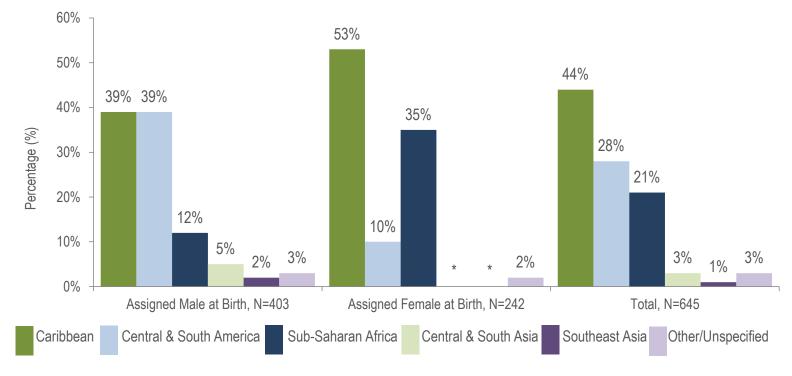
of 1,435 new HIV diagnoses from 2021–2023<sup>iii</sup> were among non-US born individuals

N=7,928 33°

of 24,119 persons living with HIV infection in MA as of 12/31/2023 were non-US born individuals

#### **WORLD REGION OF BIRTH**

**FIGURE 1**. HIV diagnoses among people born outside the United States by sex assigned at birth and world region of birth, Massachusetts 2021–2023



<sup>\*</sup> Values less than five are suppressed for populations less than 50,000 or for populations of unknown size. Percentages do not add up to 100% due to suppressed value.

#### **KEY FACT**

- People born outside the United States and diagnosed with HIV infection in Massachusetts from 2021 to 2023 were primarily from the Caribbean (44%), Central and South America (28%), and Sub-Saharan Africa (21%).
- There were differences in the distribution of individuals assigned male at birth (AMAB) and individuals assigned female at birth (AFAB) recently diagnosed with HIV infection by world region of birth. The largest proportion of individuals AFAB was from the Caribbean (53%), while the largest proportion of individuals AMAB was equally from the Caribbean and Central and South America (both 39%).

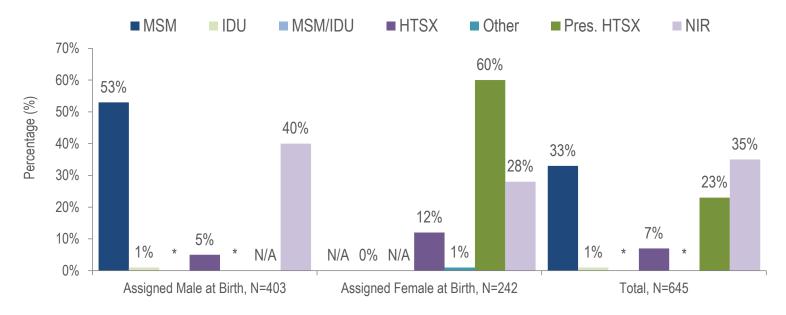
Data Source: US Census Bureau, 2023 American Community Survey 1-Year Estimates Detailed Tables, Table S0501, accessed at https://data.census.gov on 9/26/2024

ii Individuals born outside the US (non-US born) excludes individuals born in the United States, Puerto Rico, American Samoa, Guam, the Northern Mariana Islands, the Republic of Palau, and the U.S. Virgin Islands.

Please consider the impact of the COVID-19 pandemic on infectious disease screening, treatment, and surveillance in the interpretation of data from 2020 to 2023

#### **EXPOSURE MODE**

**FIGURE 2**. HIV diagnoses among people born outside the United States by sex assigned at birth and exposure mode, Massachusetts 2021–2023



<sup>\*</sup> Values less than five are suppressed for populations less than 50,000 or for populations of unknown size. Percentages do not add up to 100% due to suppressed value.

MSM=Male-to-Male Sex; IDU=Injection Drug Use; HTSX=Heterosexual Sex; Pres. HTSX=presumed heterosexual exposure, includes individuals assigned female at birth with a negative history of injection drug use who report having sex with an individual that identifies as male of unknown HIV status and risk; NIR=No Identified Risk; N/A = not applicable

#### **KEY FACT**

- Thirty-five percent of the 645 non-US born individuals recently diagnosed with HIV infection (2021–2023)<sup>i</sup> did not have exposure mode information reported that met CDC-defined categories, indicating challenges in assigning primary exposure modes for this population.
- Among people born outside the US and diagnosed with HIV infection from 2021 to 2023, MSM (33%) was the most frequently <u>reported</u> exposure mode, although a higher percentage were reported with no identified risk (NIR, 35%).
- Among individuals AMAB born outside the US and recently diagnosed with HIV infection, MSM (53%) was the predominant exposure mode. Presumed heterosexual sex (60%) was the predominant exposure mode among individuals AFAB.

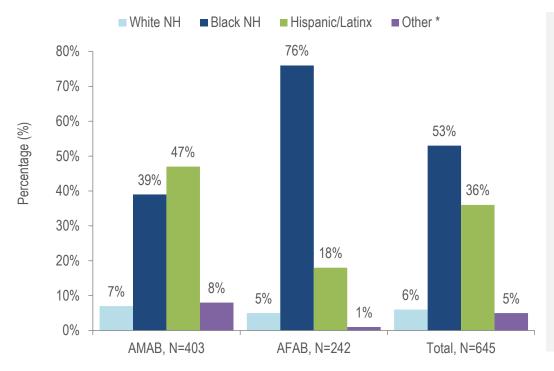
#### RACE/ETHNICITY

#### **KEY FACT**

- Non-US born individuals recently diagnosed with HIV infection or living with HIV infection were predominantly Black (non-Hispanic) or Hispanic/Latinx.
- Fifty-three percent of the 645 non-US born people diagnosed with HIV infection from 2021 to 2023 were Black (non-Hispanic), 36% were Hispanic/Latinx, 6% were White (non-Hispanic), 5% were Asian/Pacific Islander, and <1% were of other or unknown race/ethnicity.

Among 7,928 non-US born people living with HIV infection on 12/31/23,<sup>i</sup> 51% were Black (non-Hispanic), 32% were Hispanic/Latinx, 10% were White (non-Hispanic), 6% were Asian/Pacific Islander, and 1% were of other or unknown race/ethnicity.

**FIGURE 3.** HIV diagnoses among people born outside the US by sex assigned at birth and race/ethnicity, Massachusetts 2021–2023

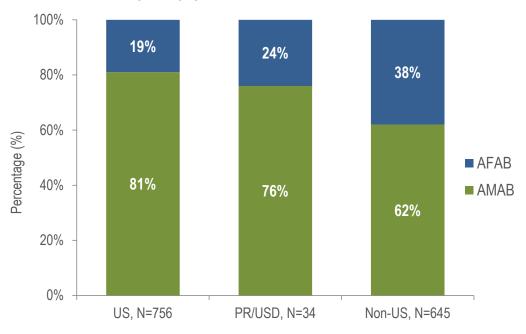


\* Other includes more than one race/ethnicity, unknown, and other race/ethnicities (Asian/Pacific Islander, Native American/Alaska Native), NH=Non-Hispanic, AMAB=Assigned Male at Birth, AFAB=Assigned Female at Birth

- Among individuals AMAB born outside the US and newly diagnosed with HIV infection in Massachusetts from 2021 to 2023, 47% were Hispanic/Latinx and 39% were Black (non-Hispanic).
- The majority (76%) of individuals AFAB born outside the US and newly diagnosed with HIV infection in Massachusetts from 2021 to 2023 were Black (non-Hispanic).

#### **SEX ASSIGNED AT BIRTH**

**FIGURE 4.** HIV diagnoses by sex assigned at birth and place of birth, Massachusetts 2021–2023



PR/USD = Puerto Rico/US Dependency, 94% of individuals diagnosed with HIV infection from 2021–2023 who were born in a US dependency (USD) were born in Puerto Rico (PR).

- Thirty-eight percent of non-US born individuals diagnosed with HIV infection from 2021 to 2023 were AFAB, compared to 19% of US born individuals and 24% of individuals born in Puerto Rico/US Dependencies.
- Similarly, 40% of non-US born persons living with HIV on 12/31/2023 were AFAB, compared to 22% of US born individuals and 35% of people born in Puerto Rico/US Dependencies. Data not displayed.

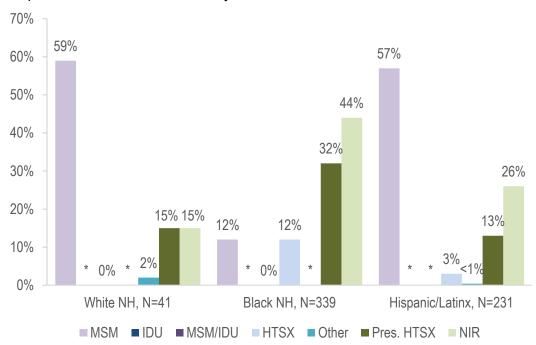
Please consider the impact of the COVID-19 pandemic on infectious disease screening, treatment, and surveillance in the interpretation of data from 2020 to 2023

#### TRANSGENDER INDIVIDUALS AND PLACE OF BIRTH

• Sixty-one percent (N=78/128) of persons living with HIV infection on 12/31/2023<sup>i</sup> and reported to be transgender were born in the United States, 24% (N=31/128) were born outside the US, and 15% (N=19/128) were born in Puerto Rico or another US dependency.

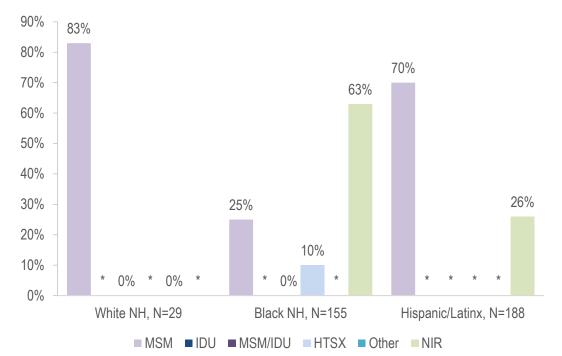
#### **EXPOSURE MODE AND RACE/ETHNICITY**

**FIGURE 5**. HIV diagnoses among individuals born outside the US by exposure mode and race/ethnicity, Massachusetts 2021–2023



While the predominant exposure mode among White (non-Hispanic) and Hispanic/Latinx individuals born outside the US and recently diagnosed with HIV infection was MSM (59% and 57%, respectively), the largest proportion of Black (non-Hispanic) individuals was assigned no identified risk for exposure mode (44%).

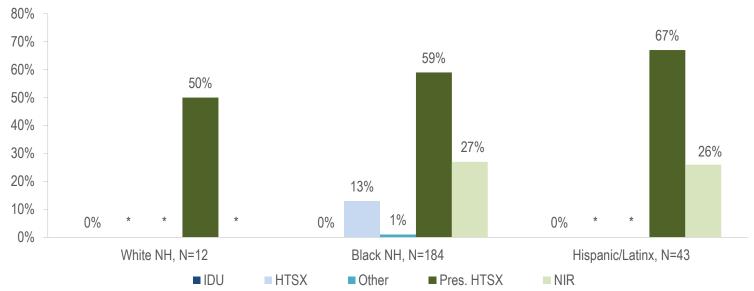
**FIGURE 6.** HIV diagnoses among individuals AMAB born outside the US by exposure mode and race/ethnicity, Massachusetts 2021–2023



 MSM was the most frequently reported exposure mode among White (non-Hispanic) (83%) and Hispanic/Latinx (70%) individuals AMAB born outside the US, while NIR accounted for the largest proportion among Black (non-Hispanic) individuals AMAB (63%).

<sup>\*</sup> Values less than five are suppressed for populations less than 50,000 or for populations of unknown size. Percentages do not add up to 100% due to suppressed value. MSM=male-to-male sex; IDU=injection drug use; HTSX=heterosexual sex; Pres. HTSX=presumed heterosexual exposure, includes individuals assigned female at birth with a negative history of injection drug use who report having sex with an individual that identifies as male of unknown HIV status and risk; NIR=no identified risk Please consider the impact of the COVID-19 pandemic on infectious disease screening, treatment, and surveillance in the interpretation of data from 2020 to 2023.

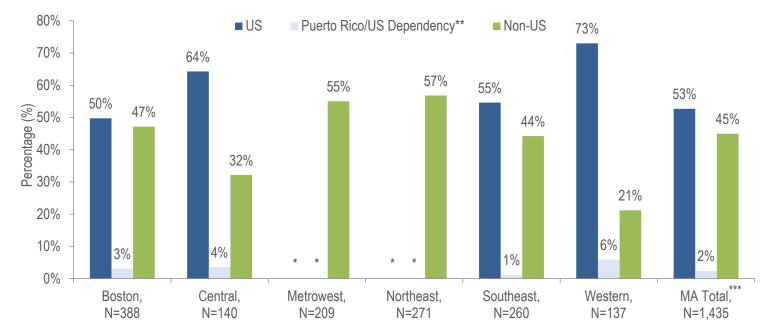
**FIGURE 7.** HIV diagnoses among individuals AFAB born outside the US by exposure mode and race/ethnicity, Massachusetts 2021–2023



<sup>\*</sup> Values less than five are suppressed for populations less than 50,000 or for populations of unknown size. Percentages do not add up to 100% due to suppressed value. IDU=injection drug use; HTSX=heterosexual sex; Pres. HTSX=presumed heterosexual exposure, includes individuals assigned female at birth with a negative history of injection drug use who report having sex with an individual that identifies as male of unknown HIV status and risk; NIR=no identified risk

 Presumed heterosexual sex was the predominant exposure mode among White (non-Hispanic) (50%), Black (non-Hispanic) (59%), and Hispanic/Latinx (67%) individuals AFAB born outside the US and diagnosed with HIV infection from 2021 to 2023.<sup>i</sup>

FIGURE 8. HIV infection diagnoses by Health Service Region and place of birth, Massachusetts 2021–2023



HSR is based on residence at HIV infection diagnosis.

The Northeast (57%) and Metrowest (55%) Health Service Regions had the largest proportions
of individuals recently diagnosed with HIV infection who were born outside the United States.

<sup>\*</sup> Values less than five are suppressed for populations less than 50,000 or for populations of unknown size. Percentages do not add up to 100% due to suppressed value

<sup>\*\* 94%</sup> of individuals diagnosed with HIV infection from 2021–2023 who were born in a US dependency (USD) were born in Puerto Rico (PR).

<sup>\*\*\*</sup> Total includes individuals diagnosed in a correctional facility.

**TABLE 1.** Massachusetts cities/towns<sup>i</sup> with the highest percentage of HIV diagnoses among non-US born individuals, 2021–2023

	HIV Diagnoses Among Non-US Born (N)	HIV Diagnoses Among Non- US Born as Percent of Total HIV Diagnoses (%)
Massachusetts Total	645	45%
Top Cities/Towns		
Brockton	59	79%
Chelsea	16	76%
Everett	16	76%
Malden	22	76%
Lawrence	24	69%
Framingham	14	64%
Lowell	24	56%
Lynn	21	48%
Boston	156	44%
Worcester	27	39%
All Other Cities/Townsii	266	37%

<sup>&</sup>lt;sup>i</sup> City/town is based on residence at HIV infection diagnosis.

 Among cities and towns with at least 20 reported HIV diagnoses from 2021 to 2023,<sup>iii</sup> Brockton, Chelsea, Everett, and Malden had the highest percentages of HIV diagnoses among people born outside the United States. Over 75% of new HIV diagnoses in each of these cities were among non-US born individuals.

**TABLE 2.** Countries of birth with the highest percentage of HIV diagnoses among non-US born individuals, 2021–2023

		oses by Country of Percent of Total orn HIV Diagnoses (%)
Top Countries		
Haiti	197	31%
Brazil	92	14%
Dominican Republic	71	11%
Cape Verde	39	6%
Colombia	27	4%
El Salvador	17	3%
Ghana	15	2%
Kenya	13	2%
Nigeria	12	2%
Uganda	12	2%
Massachusetts Total Non-		
US Born	645	100%

Haiti, Brazil, and the
 Dominican Republic
 accounted for the highest
 percentages of HIV
 diagnoses from 2021 to
 2023 among people born
 outside the United States.
 Combined, these three
 countries represent the
 country of birth for 56% of
 non-US born individuals
 diagnosed with HIV infection
 in this time period.

ii All Other Cities/Towns includes individuals diagnosed in a correctional facility.

iii Please consider the impact of the COVID-19 pandemic on infectious disease screening, treatment, and surveillance in the interpretation of data from 2020 to 2023