

HIV Infections Among Asians and Pacific Islanders in the United States¹

In 2017, there were 38,281 new reported diagnoses of HIV infection in the United States. Of these, 942 were among Asians and 57 were among Native Hawaiians/Other Pacific Islanders (NHOPI) according to estimates from the Centers for Disease Control and Prevention (CDC). The rate of new reported diagnoses of HIV infection among Asians in the United States remained stable from 2012 to 2017 (5.1 per 100,000 population for each year, and the rate for NHOPI increased slightly (9.8 per 100,000 population in 2012 to 9.9 per 100,000 population in 2017). The rates of new reported diagnoses of HIV infection in 2017 for Asians was the same as the rate for whites (5.1 per 100,000 population).

Of all new HIV diagnoses reported in Asian men in the United States in 2017, 91 percent were attributed to male-to-male sexual contact, five percent were attributed to heterosexual contact, two percent were attributed to injection drug use, and two percent were attributed to both male-to-male sexual contact and injection drug use (IDU). Of those reported in Asian women, 94 percent were attributed to heterosexual contact and five percent were attributed to IDU. Of all new HIV diagnoses reported in NHOPI in the United States in 2017, 67 percent were attributed to male-to-male sexual contact, 26 percent were attributed to heterosexual contact, three percent were attributed to both male-to-male sexual contact and injection drug use, and three percent were attributed to IDU only.

According to CDC, 14,472 (1.4 percent) of the 991,447 persons living with diagnosed HIV infection in the United States at the end of 2016 were Asian or NHOPI. Many people living with HIV infection have never received a diagnosis and are unaware of their infection. CDC estimates that only about 80 percent of Asians living with HIV in the United States in 2016 had received a diagnosis, the lowest diagnosis rate of all races/ethnicities, and only about 58 percent living with HIV in 2015 received HIV medical care. Possible reasons some Asians do not seek HIV testing and treatment may include language

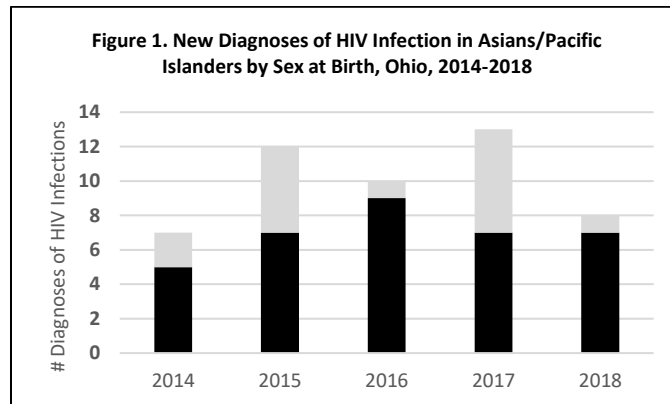
barriers, immigration issues, stigma, or fear of shame from their families.²

¹Source: Centers for Disease Control and Prevention. *HIV Surveillance Report*, 2017; vol. 28. <http://www.cdc.gov/hiv/library/reports/hiv-surveillance.html>. Published November 2018. Accessed 8/6/19.

²Source: Centers for Disease Control and Prevention. *HIV and Asians*. <https://www.cdc.gov/hiv/group/racialethnic/asians/index.html>. Published May 2019. Accessed 8/6/2019.

New Reported Diagnoses of HIV Infection Among Asians and Pacific Islanders in Ohio

Of the 989 new diagnoses of HIV infection reported in Ohio in 2018, eight were among Asian/Pacific Islanders (seven adult/adolescent males and one pediatric female) (Figure 1). The rate of new diagnoses of HIV infections in Asian/Pacific Islanders per 100,000 population decreased from 3.0 in 2014 to 2.8 in 2018. Rates of new diagnoses of HIV infections in 2018 were higher for whites (4.7 per 100,000 population), blacks/African-Americans (31.8 per 100,000 population), and Hispanics/Latinx (11.7 per 100,000 population). Caution is advised when interpreting Asian/Pacific Islander data due to small numbers.



Asian/Pacific Islanders accounted for one percent of new reported diagnoses of HIV infections in Ohio in 2018 (Figure 2). In the same year, whites accounted for 43 percent, black/African-Americans accounted for 47 percent, and Hispanics/Latinx accounted for five percent of new reported diagnoses of HIV infections in Ohio.

Figure 2. Percent of New Diagnoses of HIV Infection by Race/Ethnicity, Ohio, 2018

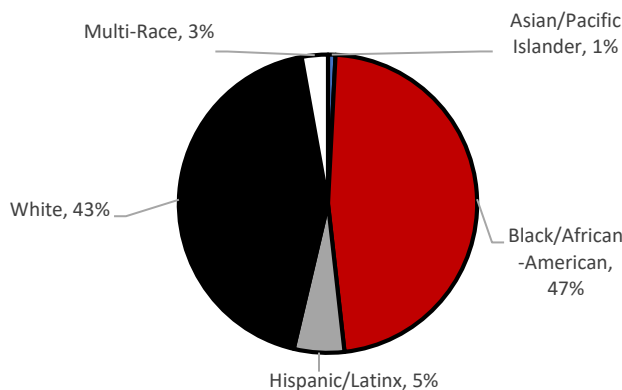


Table 1. Number, Percent, and Rates of Persons Living with Diagnosed HIV Infection by Race/Ethnicity, Ohio, 2018

Race/Ethnicity	Number	%	Rate
American Indian/Alaskan Native	15	<1%	65.9
Asian/Pacific Islander	158	1%	54.9
Black/African-American	10,640	44%	721.6
Hispanic/Latinx	1,704	7%	369.7
White	10,617	44%	115.5
Multi-Race	890	4%	359.3
Unknown	106	<1%	-
Total	24,130		206.4

In 2018 in Ohio, five of the seven Asian/Pacific Islander males diagnosed with HIV infection were reported with male-to-male sexual contact as the transmission category. This information highlights the role of sexual transmission in HIV infection in Asian/Pacific Islanders in Ohio. Since 2014, only two new diagnoses of HIV were reported among Asian/Pacific Islander with a transmission category of IDU.

Asians and Pacific Islanders Living with Diagnosed HIV Infection in Ohio

Table 1 displays the distribution of Ohioans living with diagnosed HIV infection in 2018 by race/ethnicity. At the end of 2018, there were 24,130 persons reported as living with diagnosed HIV infection in Ohio, of which one percent (n=158) were Asian/Pacific Islanders. The rate of Asian/Pacific Islanders living with diagnosed HIV infection (54.9 per 100,000 population) is considerably lower when compared to whites, black/African-Americans, and Hispanics/Latinx (115.5, 721.6, and 369.7 per 100,000 population, respectively).

Of the 158 Asian/Pacific Islanders living with diagnosed HIV infection at the end of 2018, 53 had progressed to AIDS, making up less than one percent of all Ohioans living with AIDS at the end of 2018.

Explanation of Terms:

- Diagnoses of HIV infection include persons with a diagnosis of HIV (not AIDS), a diagnosis of HIV and an AIDS diagnosis within 12 months (HIV & later AIDS), and concurrent diagnoses of HIV and AIDS (AIDS). The rate is the number of persons with a reported diagnosis of HIV infection per 100,000 population calculated using U.S. Census estimates for that year.

- Living with diagnosed HIV infection represents all persons ever diagnosed and reported with HIV or AIDS who have not been reported as having died as of December 31, 2018. Persons living with diagnosed HIV infection represent persons living in Ohio as of December 31, 2018, regardless of whether the person was a resident of Ohio at time of initial HIV and/or AIDS diagnosis. The rate is the number of persons living with diagnosed HIV infection per 100,000 population calculated using 2018 U.S. Census estimates.

- Males and Females refer to sex assigned at birth.

- Hispanics/Latinx may be of any race. Persons with a race of American Indian/Alaska Native, Asian/Pacific Islander, Black/African-American, White, or Multi-Race are not-Hispanic. Asian/Pacific Islander includes Native Hawaiians.

- Transmission categories are mutually exclusive, hierarchical categories defined by the CDC and system-calculated using sex at birth and risk factor history to determine mode of transmission. A person with multiple risks is only represented in the highest category based on the CDC hierarchical algorithm. Thus, transgender women are included in the male-to-male sexual contact transmission category if assigned male at birth and risk factor history indicates sex with males. Please note this is for the categorization of HIV transmission categories only and not to describe sexual orientation.

- Source: Ohio Department of Health, HIV Surveillance Program. Data reported through June 30, 2019.

Please direct questions about this report to: Ohio Department of Health / Division of Health Improvement and Wellness / HIV Surveillance Program / 614-387-2722