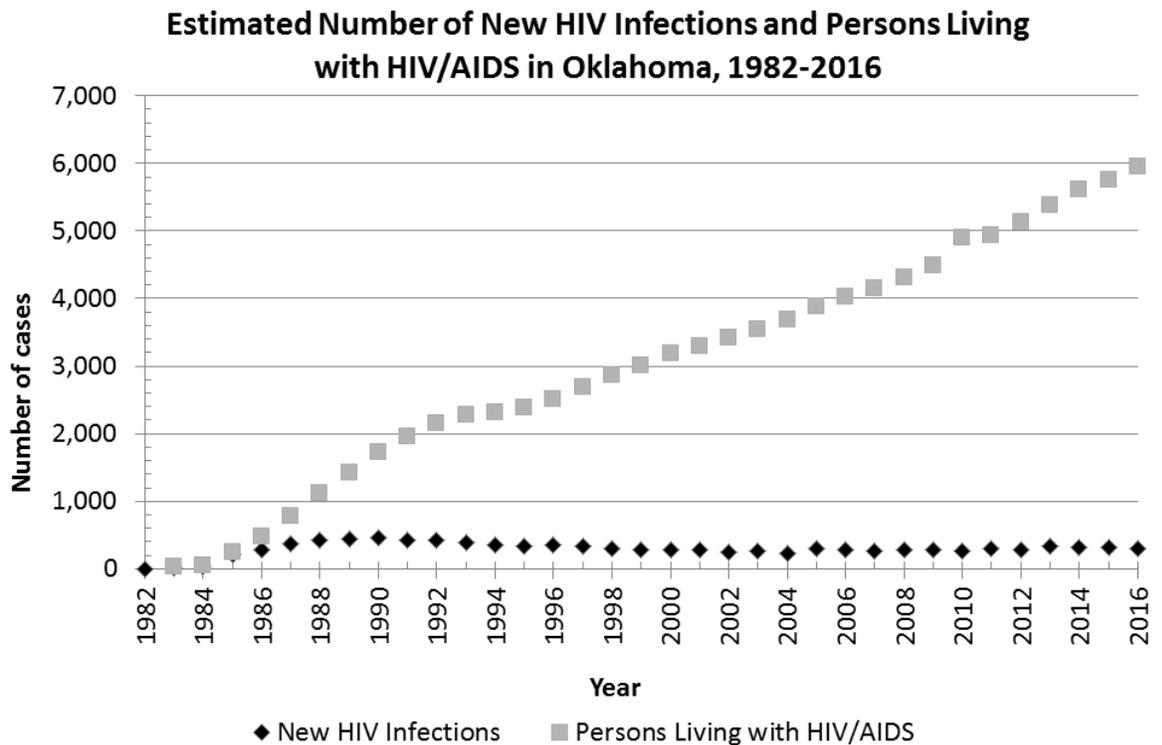


Quick Facts

2016 Living HIV/AIDS Cases in Oklahoma



OVERVIEW

At the end of 2016, an estimated 5,954 cases were living with HIV/AIDS in Oklahoma. Of these, 53.7% (3,197) were HIV cases and 46.3% (2,757) were AIDS cases. The rate of cases living with HIV/AIDS was 151.7 cases per 100,000 population. Of the 10,423 cumulative cases diagnosed in Oklahoma, 42.9% (4,469) were known to have died.

BY SEX

Males accounted for 82.7% (4,925) of the HIV/AIDS cases living in Oklahoma, while females accounted for 17.3% (1,029). The rate of males (253.4 cases per 100,000 population) living with HIV/AIDS in Oklahoma was 4.8 times higher than the rate of females (52.0 cases per 100,000 population). Almost half of the persons living with HIV/AIDS were White males (2,809; 47.2%). Black males accounted for approximately 20% of those living with HIV/AIDS (1,174; 19.7%). White females (462) and Black females (336) accounted for 7.8% and 5.6% of the living HIV/AIDS cases, respectively. Of the race/sex groups, Black males had the highest rate of living with HIV/AIDS (804.7 cases per 100,000), followed by Black females (231.2 cases per 100,000), White males (219.7 cases per 100,000), and Hispanic males (211.4 cases per 100,000).

BY RACE/ETHNICITY

At the end of 2016, Blacks had the highest rate of living HIV/AIDS cases (518.5 cases per 100,000) among the racial/ethnic groups in Oklahoma. Hispanics (131.0 cases per 100,000) had the second highest rate, followed closely by Whites (126.0 cases per 100,000). The rate among American Indians/Alaska Natives was 110.0 cases per 100,000 and the rate among

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Multi Race was 98.6 cases per 100,000. Asians/Pacific Islanders had the lowest rate of persons living with HIV/AIDS (81.2 cases per 100,000) in Oklahoma. Blacks are disproportionately affected by HIV/AIDS in Oklahoma, as the rate for Blacks living with HIV/AIDS was 3.4 times higher than the state rate and 4.1 times higher than the rate of Whites living with HIV/AIDS in Oklahoma.

Of the 5,954 persons living with HIV/AIDS at the end of 2016:

- 54.9% (3,271) were White,
- 25.4% (1,510) were Black,
- 8.9% (529) were Hispanic,
- 6.0% (357) were American Indian/Alaska Native,
- 1.2% (74) were Asian/Pacific Islander, and
- 3.6% (213) were Multi Race.

BY AGE

By age at time of diagnosis, the 20-29 years age group (2,175; 36.5%) and the 30-39 years age group (1,978; 33.2%) combined to account for nearly 70% of the living HIV/AIDS cases. The 40-49 years age group accounted for 17.3% (1,032) of the living cases and the 50-59 years age group accounted for 6.5% (385). Approximately 4% (231; 3.9%) of living cases were diagnosed as teenagers (13-19 years), while children 12 years and under (59) only accounted for 1.0% of living cases. Less than 2% (92; 1.5%) of the cases were diagnosed among persons aged 60 years and older.

By current age group, the 50-59 years age group (1,714; 28.8%) had the highest burden of living HIV/AIDS cases in Oklahoma, followed very closely by the 40-49 years age group (1,535; 25.8%). The 30-39 years age group (1,190; 20.0%) accounted for the third highest number of cases. The 20-29 years age group (740) accounted for 12.4% and the 60 years and over (723) accounted for 12.1%. Teenagers (29; 0.5%) and children 12 years and under (23 cases; 0.4%) combined to account for less than 1% of the living HIV/AIDS cases. The 50-59 years age group had the highest rate (340.7 cases per 100,000), followed by the 40-49 years age group (334.3 cases per 100,000).

BY MODE OF TRANSMISSION

Of the 5,954 HIV/AIDS cases living in Oklahoma:

- 55.7% (3,316) were men who have sex with men (MSM),
- 17.8% (1,062) were heterosexual contact,
- 8.5% (505) were MSM and injection drug use (IDU),
- 8.3% (496) were IDU,
- 0.8% (45) were perinatal,
- 0.4% (26) were blood recipients, and
- 8.5% (504) were no reported risk or no identified risk.

Among males, MSM was the most commonly reported risk factor accounting for 67.3% (3,316) of the cases. Heterosexual contact was the second most common risk factor among males accounting for 11.7% (575), followed by cases reporting both MSM and IDU (505; 10.3%) as risk factors. Among females, heterosexual contact (487; 47.3%) was the most commonly reported risk factor, followed by IDU (210; 20.4%).

BY GEOGRAPHY

Approximately 75% of the living HIV/AIDS cases reside in four counties: Oklahoma (2,266; 38.1%), Tulsa (1,582; 26.6%), Cleveland (388; 6.5%), and Comanche (212; 3.6%). Oklahoma County had the highest rate of cases living with HIV/AIDS (289.4 cases per 100,000). Tulsa County had the second highest rate of cases living with HIV/AIDS cases (246.1 cases per 100,000).

The Oklahoma City MSA accounted for nearly half of the living HIV/AIDS cases (2,922; 49.1%) and had the largest rate (212.8 cases per 100,000) among the MSAs. The Tulsa MSA accounted for 31.0% (1,848) of the living cases and had the second highest rate at 187.2 cases per 100,000. The Lawton MSA accounted for 3.6% (214) of the living cases. Approximately 17% (970; 16.3%) of the living HIV/AIDS cases resided in counties outside of these MSAs in Oklahoma.

Over half (54.6%) of the living cases are currently between 40-59 years of age.

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Males accounted for 82.7% of the living cases.

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80.1% of living cases reside in the Oklahoma City MSA or Tulsa MSA.

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Black males had the highest rate of living with HIV/AIDS (804.7 cases per 100,000).