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HIV Surveillance Report, 2016

HIV/AIDS Surveillance System

Introduction (I)

- These two introduction slides provide a general context for the data used to create this slide set. If you have questions about any of the slides please refer to the Companion Text to the Minnesota HIV Surveillance Report, 2016 or HIV Surveillance Technical Notes.
- This slide set describes new HIV diagnoses (including AIDS at first diagnosis) in Minnesota by person, place, and time.
- The slides rely on data from HIV/AIDS cases diagnosed through 2016 and reported to the Minnesota Department of Health (MDH) HIV/AIDS Surveillance System.
- The data are displayed by year of HIV diagnosis.

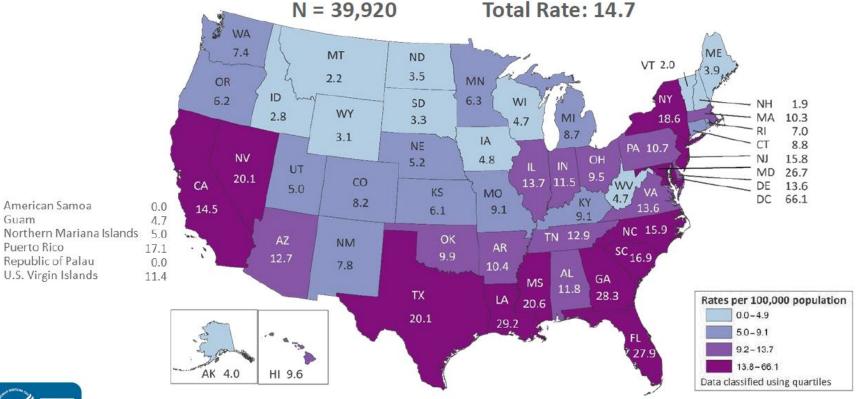
Introduction (II)

- Data analyses exclude persons diagnosed in federal or private correctional facilities, but include state prisoners (number of state prisoners believed to be living with HIV/AIDS = 102).
- Data analyses for new HIV diagnoses exclude persons arriving to Minnesota through the HIV+ Refugee Resettlement Program (number of primary HIV+ refugees in this program living in MN as of December 31, 2016= 168), as well as, other refugees/immigrants reporting a positive test prior to their arrival in Minnesota (n=171).
- Some limitations of surveillance data:
 - Data do not include HIV-infected persons who have not been tested for HIV
 - Data do not include persons whose positive test results have not been reported to MDH
 - Data do not include HIV-infected persons who have only tested anonymously
 - Case numbers for the most recent years may be undercounted due to delays in reporting
 - Reporting of living cases that were not initially diagnosed in Minnesota is known to be incomplete

National Context

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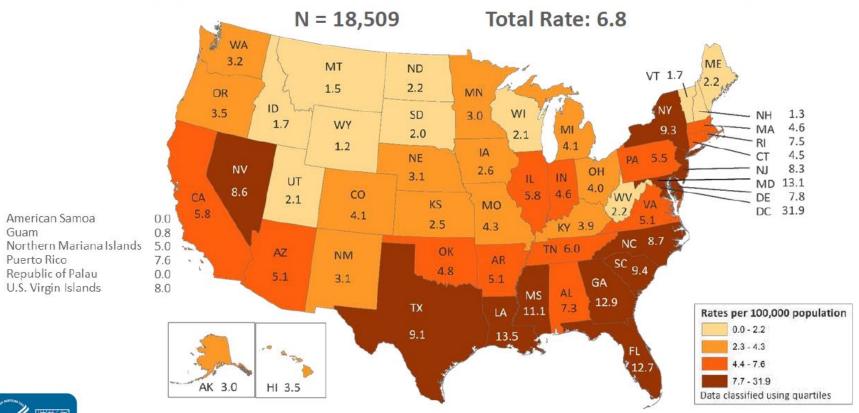
Rates of Diagnoses of HIV Infection among Adults and Adolescents, by Area of Residence, 2015 — United States and 6 Dependent Areas





Note. Data include persons with a diagnosis of HIV infection regardless of stage of disease at diagnosis. Data for the year 2015 are preliminary and based on 6 months reporting delay.

Rates of Diagnosed HIV Infection Classified as Stage 3 (AIDS) among Adults and Adolescents, by Area of Residence, 2015 — United States and 6 Dependent Areas



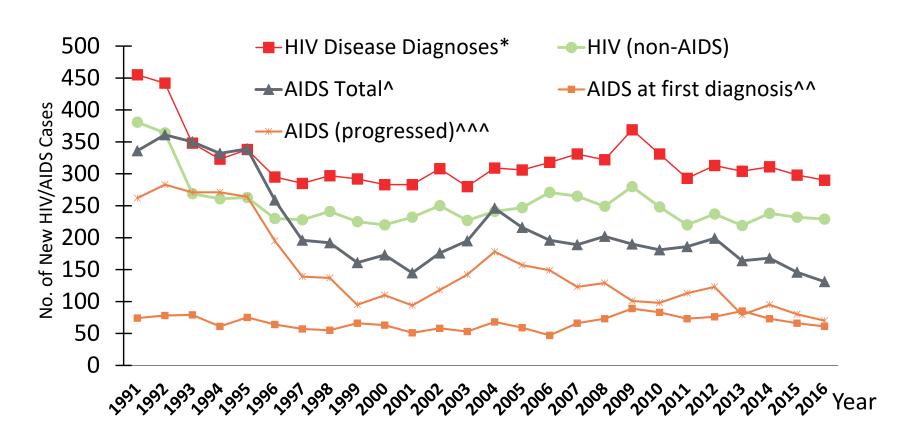


Note. Data for the year 2015 are preliminary and based on 6 months reporting delay.

Overview of HIV/AIDS in Minnesota



New HIV Disease Diagnoses, HIV (non-AIDS) and AIDS Cases by Year, 1990-2016



^{*}Includes all new cases of HIV infection (both HIV (non-AIDS) and AIDS at first diagnosis) diagnosed within a given calendar year.

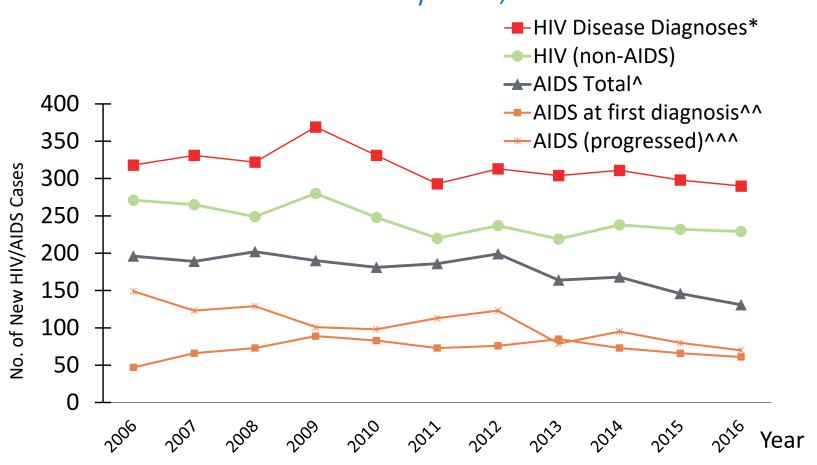
This includes refugees in the HIV+ Resettlement Program, as well as, other refugee/immigrants diagnosed with AIDS subsequent to their arrival in the United States.

HIV/AIDS in Minnesota: Annual Review

[^]Includes all new cases of AIDS diagnosed within a given calendar year, including AIDS at first diagnosis^^ and AIDS ((progressed)^^^ previous diagnosis of HIV).



New HIV Disease Diagnoses, HIV (non-AIDS) and AIDS Cases by Year, 2006-2016



^{*}Includes all new cases of HIV infection (both HIV (non-AIDS) and AIDS at first diagnosis) diagnosed within a given calendar year.

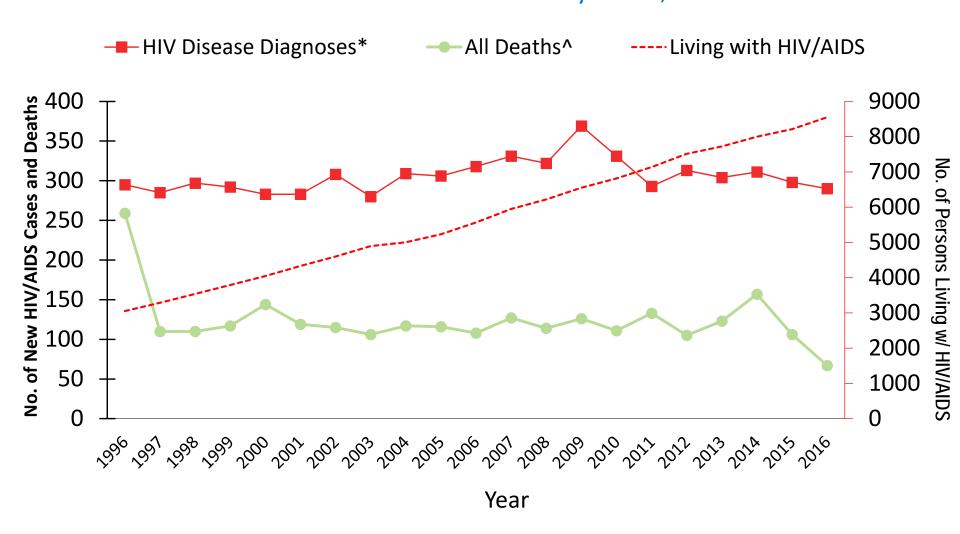
This includes refugees in the HIV+ Resettlement Program, as well as, other refugee/immigrants diagnosed with AIDS subsequent to their arrival in the United States.

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[^]Includes all new cases of AIDS diagnosed within a given calendar year, including AIDS at first diagnosis^^ and AIDS ((progressed)^^^ previous diagnosis of HIV).



New HIV Disease Diagnoses, Deaths and Prevalent Cases by Year, 1996-2016

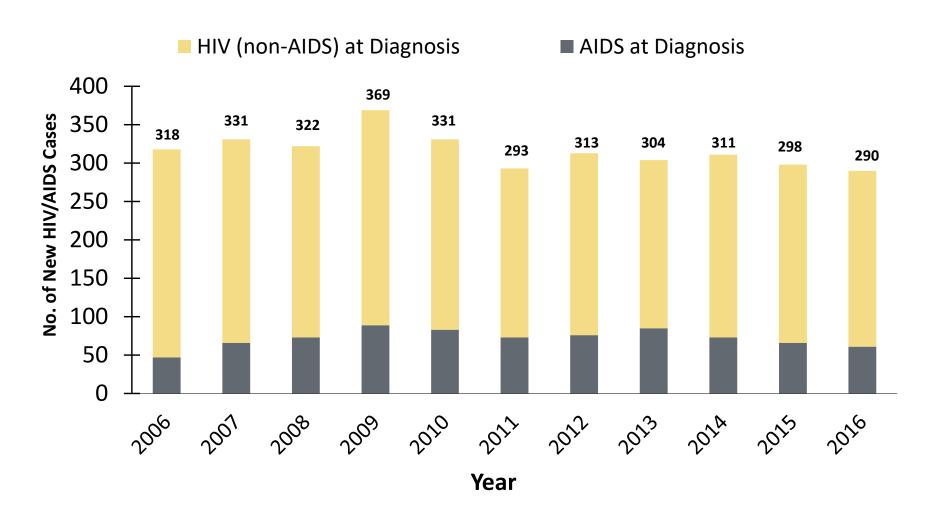


^{*}Includes all new cases of HIV infection (both HIV (non-AIDS) and AIDS at first diagnosis) diagnosed within a given calendar year.

[^]Deaths in Minnesota among people with HIV/AIDS, regardless of location of diagnosis and cause.



HIV (non-AIDS) and AIDS at Diagnosis by Year, 2006-2016



^{*}Includes all new cases of HIV infection (both HIV (non-AIDS) and AIDS at first diagnosis) diagnosed within a given calendar year.

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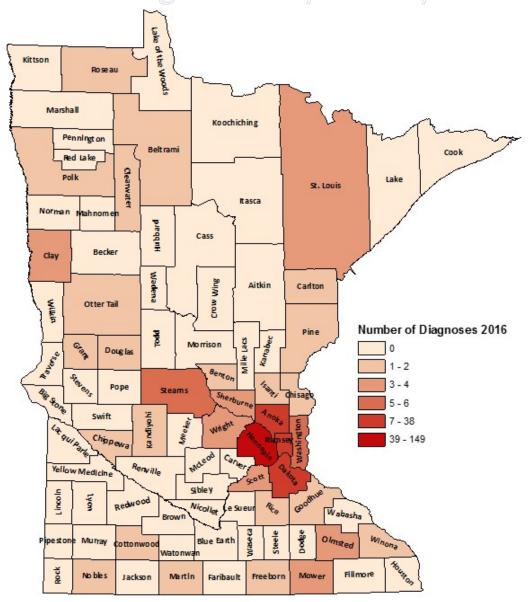
[^]Includes all new cases of AIDS diagnosed within a given calendar year, including AIDS at first diagnosis. This includes refugees in the HIV+ Resettlement Program, as well as, other refugee/immigrants diagnosed with AIDS subsequent to their arrival in the United States.

HIV Diagnoses* in Minnesota by Person, Place, and Time

Place



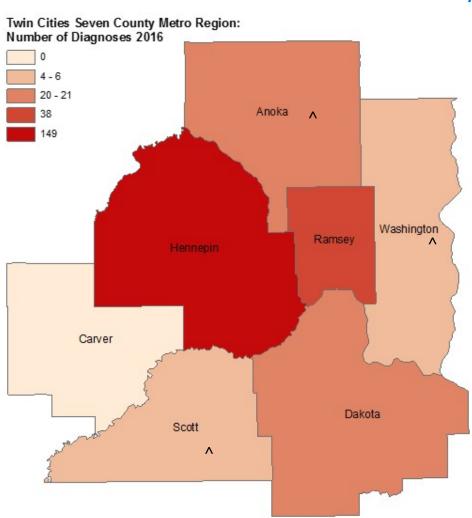
HIV Diagnoses* by County of Residence at Diagnosis, 2016



City of Minneapolis – 92 City of St. Paul – 28 Suburban# – 118 Greater Minnesota – 52 Total number = 290



HIV Diagnoses* by County of Residence at Diagnosis, 2016: Seven-County Metro Area



City of Minneapolis –92

City of St. Paul – 28

Suburban# - 118

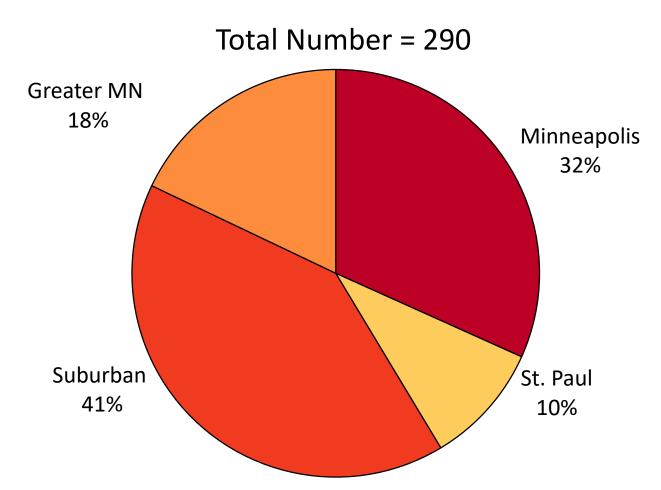
Total number (Metro only) = 238

7-county metro area, excluding the cities of Minneapolis and St. Paul

^Counties in which a state correctional facility is located.



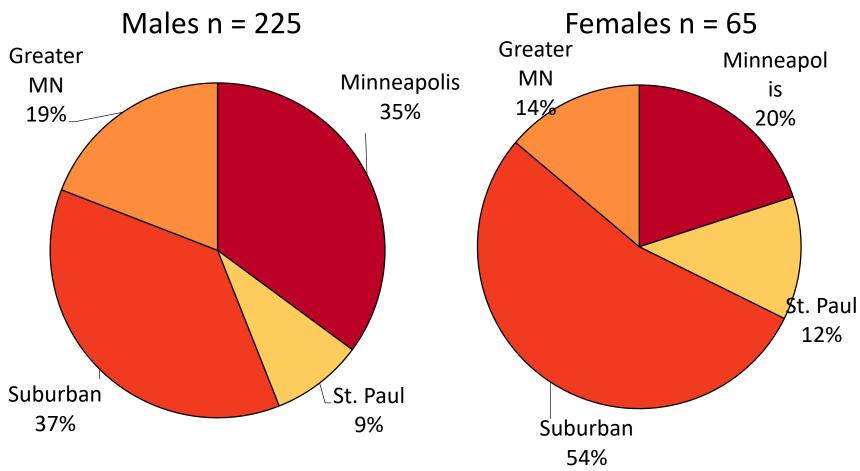
HIV Diagnoses* in Minnesota by Residence at Diagnosis, 2016



Suburban = Seven-county metro area including Anoka, Carver, Dakota, Hennepin (except Minneapolis), Ramsey (except St. Paul), Scott, and Washington counties. Greater MN = All other Minnesota counties, outside the seven-county metro area.



HIV Diagnoses* in Minnesota by Gender and Residence at Diagnosis, 2016



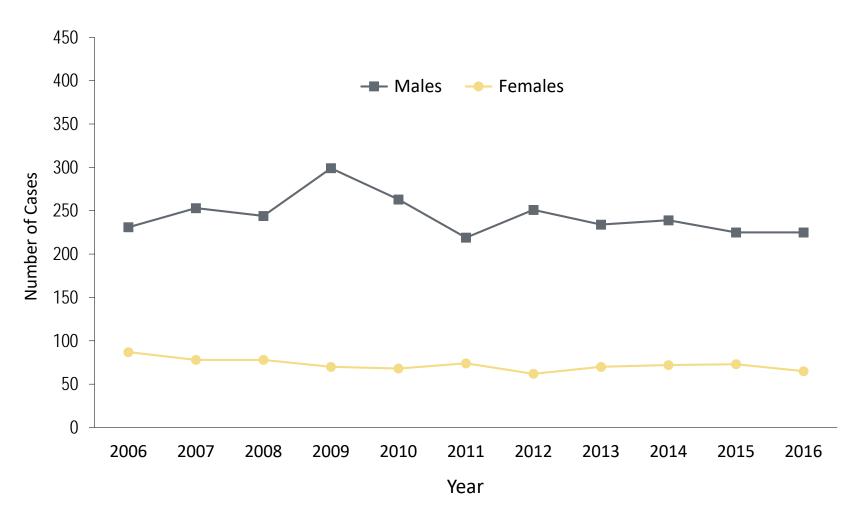
Suburban = Seven-county metro area including Anoka, Carver, Dakota, Hennepin (except Minneapolis), Ramsey (except St. Paul), Scott, and Washington counties. Greater MN = All other Minnesota counties, outside the seven-county metro area.

^{*} HIV or AIDS at first diagnosis

Gender and Race/Ethnicity

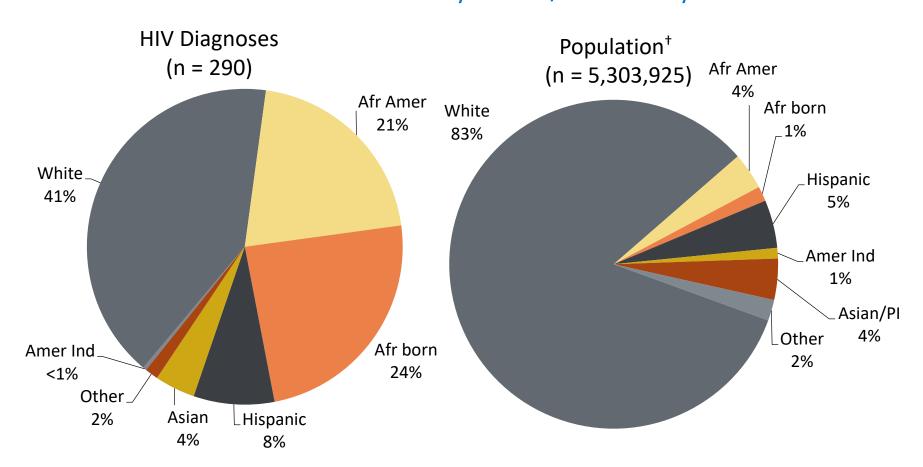


HIV Diagnoses* by Gender and Year of Diagnosis, 2006 - 2016





HIV Diagnoses* in Year 2016 and General Population in Minnesota by Race/Ethnicity



^{*} HIV or AIDS at first diagnosis

n = Number of persons

Amer Ind = American Indian

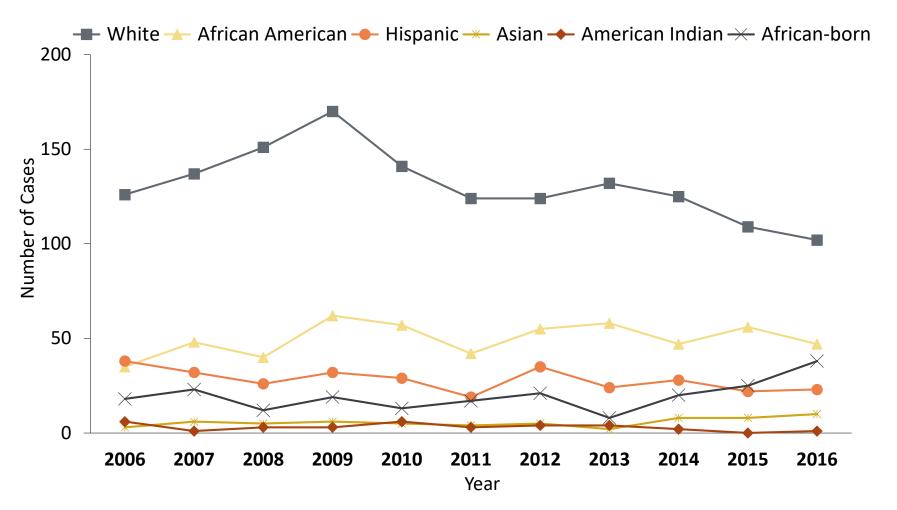
Afr Amer = African American (Black, not African-born persons)

Afr born = African-born (Black, African-born persons)

[†] Population estimates based on 2010 U.S. Census data.



HIV Diagnoses* Among Males by Race/Ethnicity[†] and Year of Diagnosis, 2006 - 2016

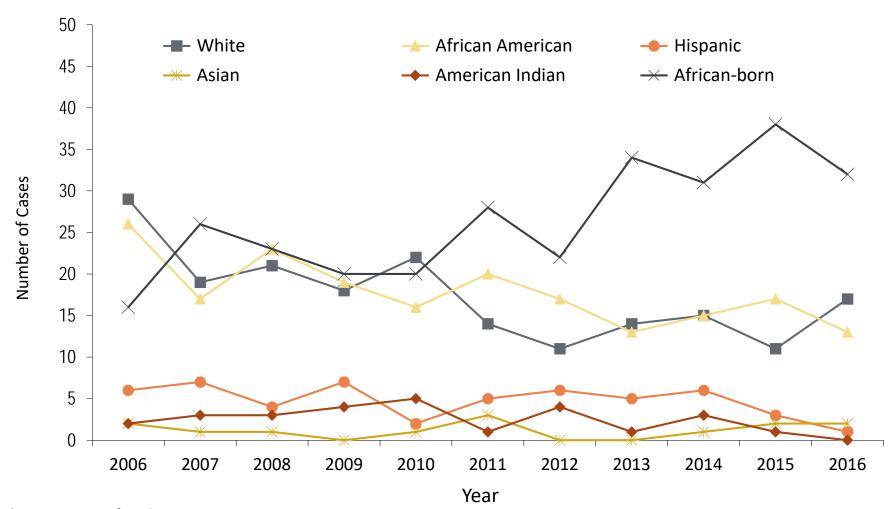


^{*} HIV or AIDS at first diagnosis

[†] "African-born" refers to Blacks who reported an African country of birth; "African American" refers to all other Blacks. Cases with unknown or multiple races are excluded.

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HIV Diagnoses* Among Females by Race/Ethnicity[†] and Year of Diagnosis, 2006 – 2016



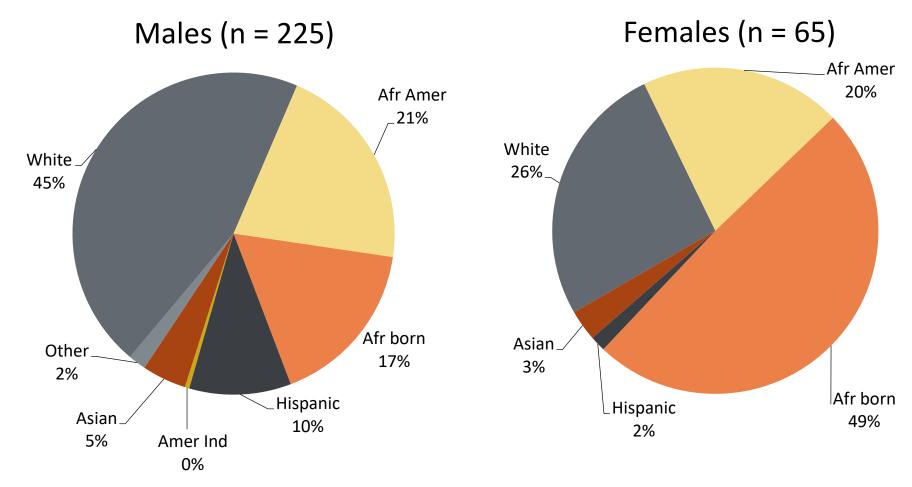
^{*} HIV or AIDS at first diagnosis

[†] "African-born" refers to Blacks who reported an African country of birth; "African American" refers to all other Blacks. Cases with unknown race are excluded.

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HIV Diagnoses* Diagnosed in Year 2016 by Gender and Race/Ethnicity



^{*} HIV or AIDS at first diagnosis

Afr born = African-born (Black, African-born persons) Amer Ind = American Indian

Other = Multi-racial persons or persons with unknown race



Number of Cases and Rates (per 100,000 persons) of HIV Diagnoses* by Race/Ethnicity†– Minnesota, 2016

Race/Ethnicity	Cases	%	Rate
White, non-Hispanic	119	41%	2.7
Black, African-American	60	21%	31.3
Black, African-born	70	24%	90.3**
Hispanic	24	8%	9.6
American Indian	1	0.3%	#
Asian/Pacific Islander	12	4%	5.6
Other^	4	1%	#
Total	290	100%	5.5

^{*} HIV or AIDS at first diagnosis; 2010 U.S. Census Data used for rate calculations.

[†] "African-born" refers to Blacks who reported an African country of birth; "African American" refers to all other Blacks.

^{††} Estimate of 77,557 Source: 2010-2012 American Community Survey. Additional calculations by the State Demographic Center.

[^] Other = Multi-racial persons or persons with unknown or missing race

[#] Number of cases too small to calculate reliable rate



Number of Cases of Adult and Adolescent HIV Diagnoses** by Gender Identity and Risk[†], Minnesota, 2016

Gender/Risk	Cases	%	Rate
Men (Total)	(222)	77%	10.3
MSM [†]	139	62%	149.8
Non-MSM	83	38%	4.1
Women	61	22%	2.8
Transgender ^ (Total)	4	1%	Х
Male to Female	2	50%	Х
Female to Male	2	50%	Х
Total	287	100%	6.6

^{**}HIV or AIDS at first diagnosis over the age of 13

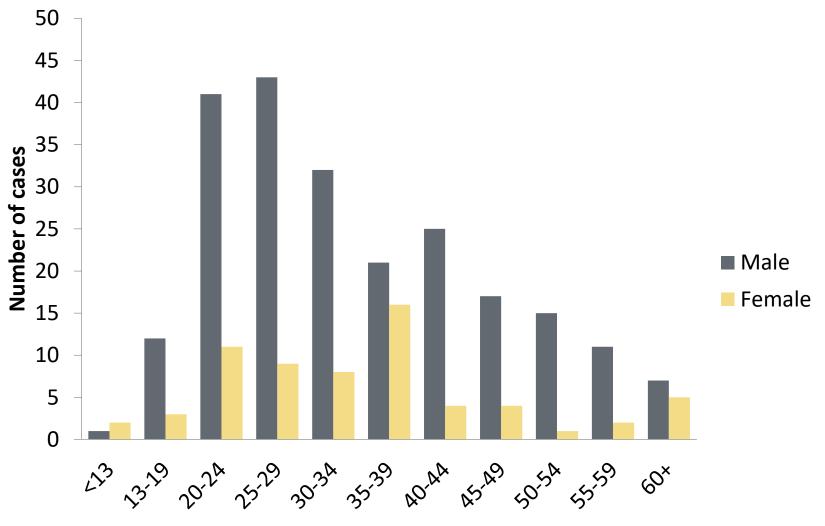
[†] "MSM" refers to both MSM and MSM/IDU. Estimate of 92,788

[^] No current transgender estimate available

Age



Age at HIV Diagnosis* by Sex at Birth, Minnesota, 2016

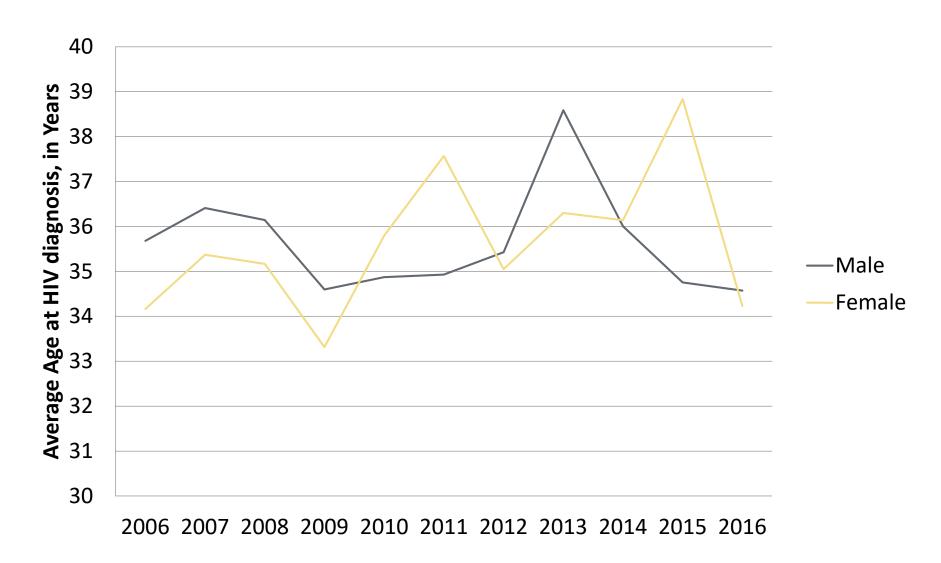


Age at HIV Diagnosis in Years

^{*} HIV or AIDS at first diagnosis



Average Age at HIV Diagnosis* by Sex at Birth, 2006-2016

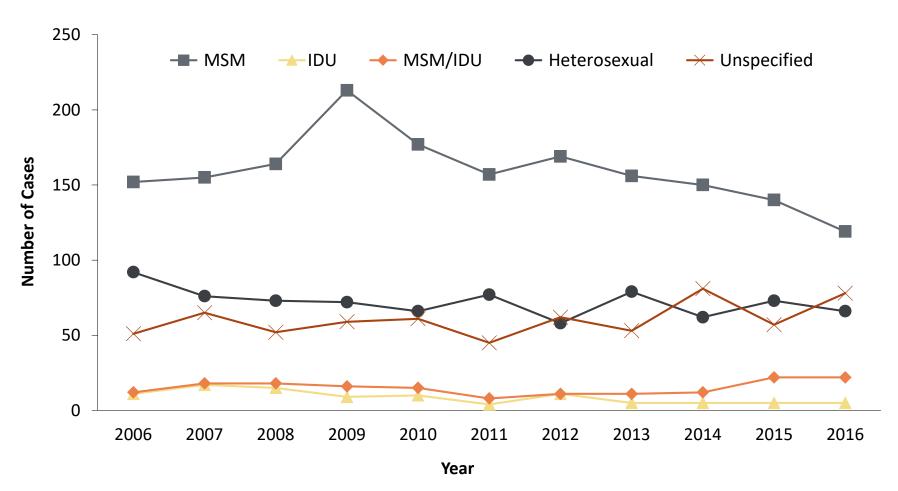




Mode of Exposure



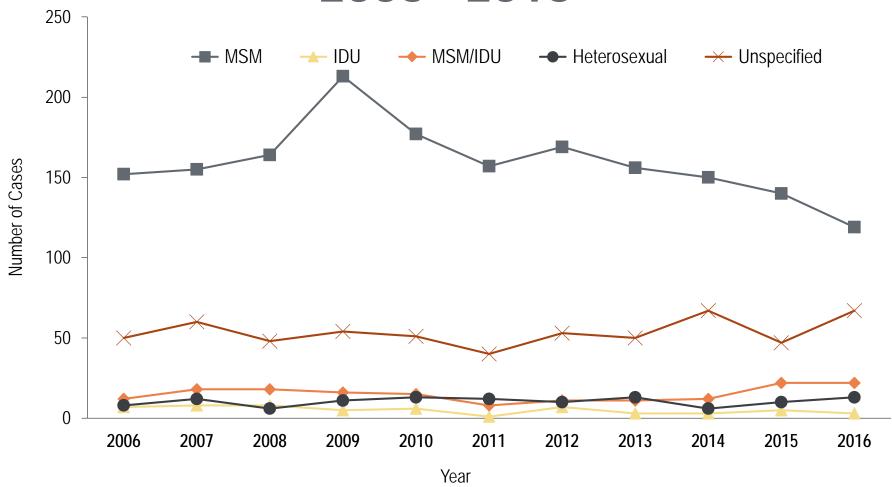
HIV Diagnoses* by Mode of Exposure and Year, 2005 - 2016



^{*}HIV or AIDS at first diagnosis
Unspecified = No mode of exposure ascertained



HIV Diagnoses* Among Males by Mode of Exposure and Year, 2006 - 2016



MSM = Men who have sex with men * HIV or AIDS at first diagnosis

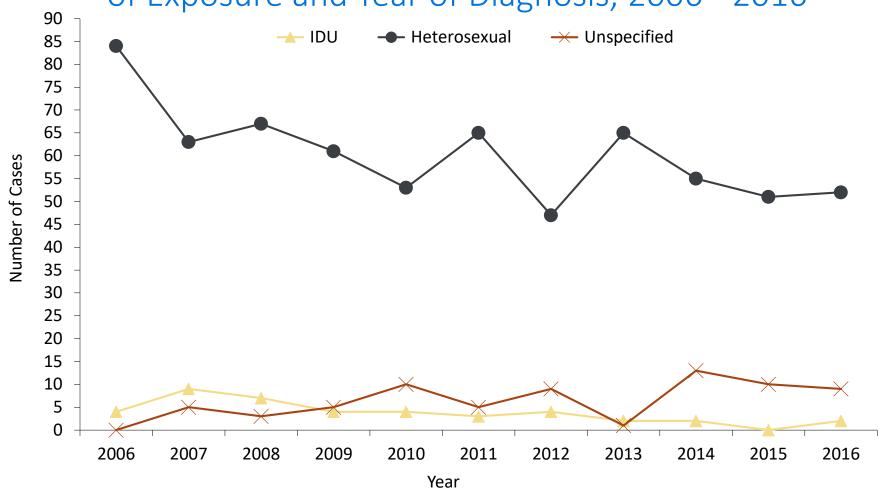
IDU = Injecting drug use Unspecified = No mode of exposure ascertained

Heterosexual = Heterosexual contact

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HIV Diagnoses* Among Females by Mode of Exposure and Year of Diagnosis, 2006 - 2016



IDU = Injecting drug use

Heterosexual = Heterosexual contact with HIV+, bisexual, IDU, hemophiliac/blood project or organ transplant recipient, or with partner with unknown risk

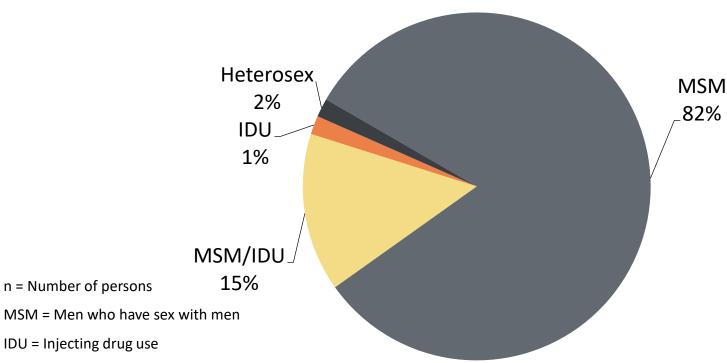
Unspecified = No mode of exposure ascertained

* HIV or AIDS at first diagnosis



HIV Diagnoses* by Estimated Mode of Exposure[†] 2014–2016 combined





Heterosex = Heterosexual contact

Other = Hemophilia, transplant, transfusion, mother w/ HIV or HIV risk

^{*} HIV or AIDS at first diagnosis

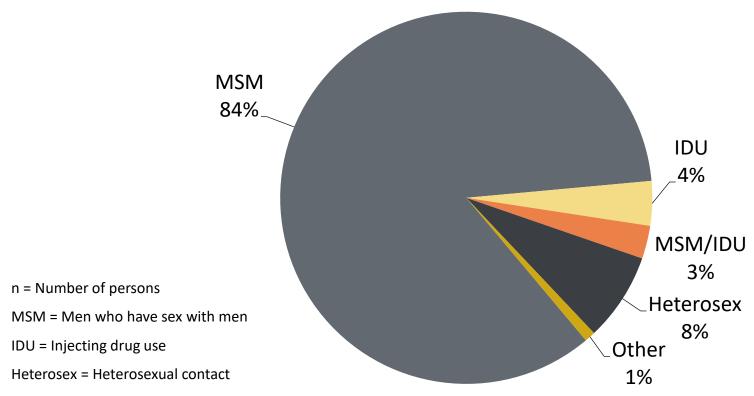
[†] Mode of Exposure proportions have been estimated using cases for 2014-2016 with known risk. For more detail see the HIV Surveillance Technical notes.

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HIV Diagnoses* by Estimated Mode of Exposure[†] 2014 - 2016 combined

African American Males^{††} (n = 150)



Other = Hemophilia, transplant, transfusion, mother w/ HIV or HIV risk

^{*} HIV or AIDS at first diagnosis

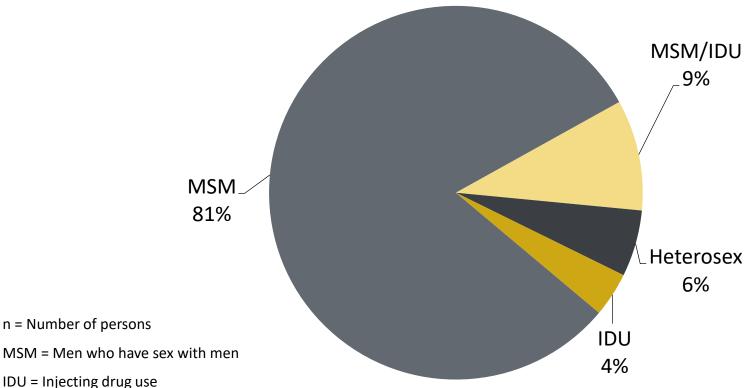
[†] Mode of Exposure proportions have been estimated using cases for 2014-2016 with known risk. For more detail see the HIV Surveillance Technical notes.

^{††} Refers to Black, African American (not African-born) males.



HIV Diagnoses* by Estimated Mode of Exposure[†] 2014 - 2016 combined





Heterosex = Heterosexual contact

^{*} HIV or AIDS at first diagnosis

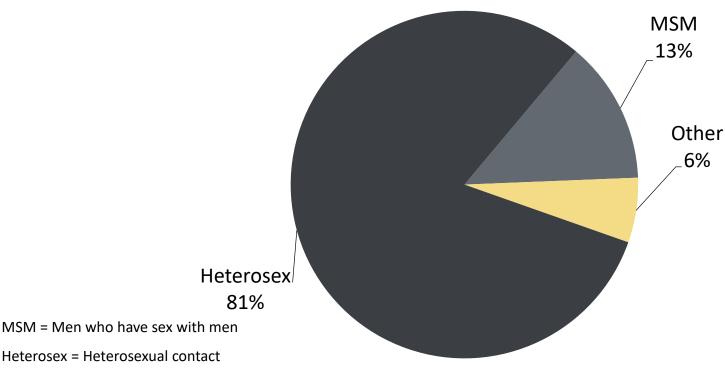
[†] Mode of Exposure proportions have been estimated using cases for 2014-2016 with known risk. For more detail see the HIV Surveillance Technical notes.

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HIV Diagnoses* by Estimated Mode of Exposure[†] 2014 - 2016 combined

African-born Males^{††} (n =83)



Other = Hemophilia, transplant, transfusion, mother w/ HIV or HIV risk

n = number of persons

HIV or AIDS at first diagnosis

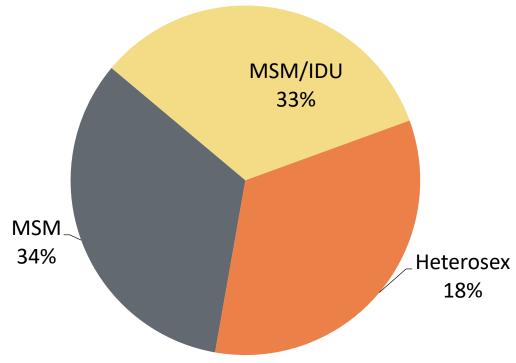
[†] Mode of Exposure has been estimated for cases with unknown risk using the following: 5% - MSM, 90% - Heterosexual, and 5%-Other For more detail see the HIV Surveillance Technical notes.

^{††} Refers to Black, African-born males.



American Indian Males (n = 3)

CAUTION: Small number of cases – interpret carefully.



n = Number of persons

MSM = Men who have sex with men

IDU = Injecting drug use

Heterosex = Heterosexual contact

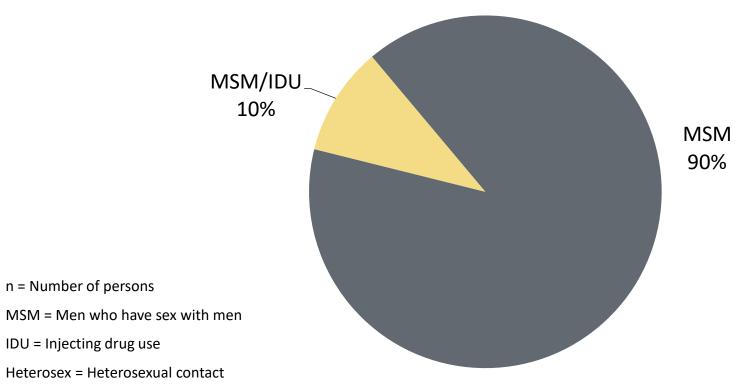
[†] Mode of Exposure proportions have been estimated using cases for 2014-2016 with known risk. For more detail see the HIV Surveillance Technical notes.

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Asian Males (n = 26)

CAUTION: Small number of cases – interpret carefully.



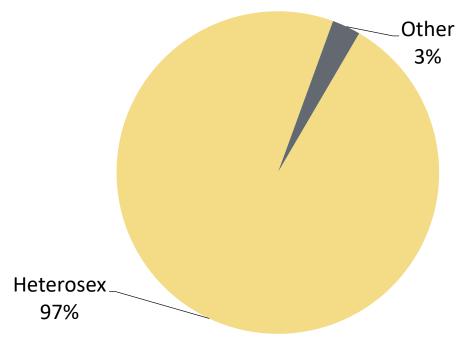
^{*} HIV or AIDS at first diagnosis

[†] Mode of Exposure proportions have been estimated using cases for 2014-2016 with known risk. For more detail see the HIV Surveillance Technical notes.

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n = Number of persons

Other = Hemophilia, transplant, transfusion, mother w/ HIV or HIV risk

Heterosex = Heterosexual contact

For more detail see the HIV Surveillance Technical notes.

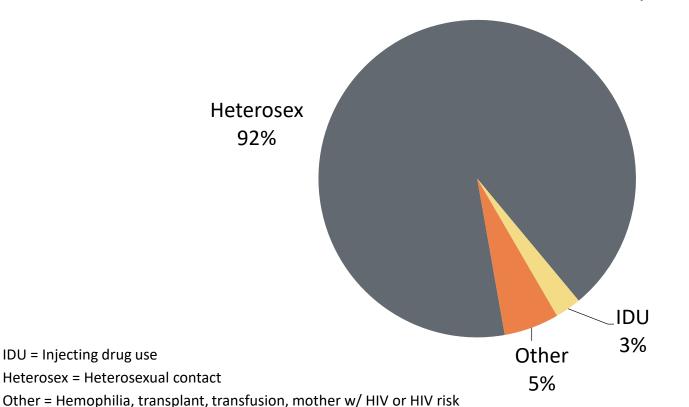
^{*} HIV or AIDS at first diagnosis

[†] Mode of Exposure has been estimated for cases with unknown risk using the following: 95% - Heterosexual and 5%-Other.

^{††} Refers to Black, African-born females.







n = Number of persons

IDU = Injecting drug use

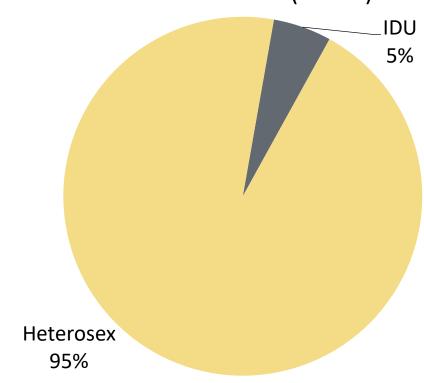
^{*} HIV or AIDS at first diagnosis

[†] Mode of Exposure proportions have been estimated using cases for 2014-2016 with known risk. For more detail see the HIV Surveillance Technical notes.

^{††} Refers to Black, African American (not African-born) females.







n = Number of persons

IDU = Injecting drug use

Heterosex = Heterosexual contact

Other = Other risk, including perinatal

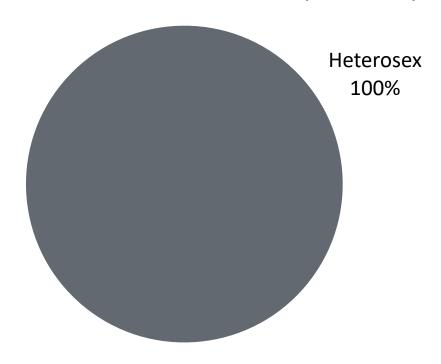
[†] Mode of Exposure proportions have been estimated using cases for 2014-2016 with known risk. For more detail see the HIV Surveillance Technical notes.

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Hispanic Females (n = 10)

CAUTION: Small number of cases – interpret carefully.



IDU = Injecting drug use

Heterosex = Heterosexual contact

Other = Hemophilia, transplant, transfusion, mother w/ HIV or HIV risk

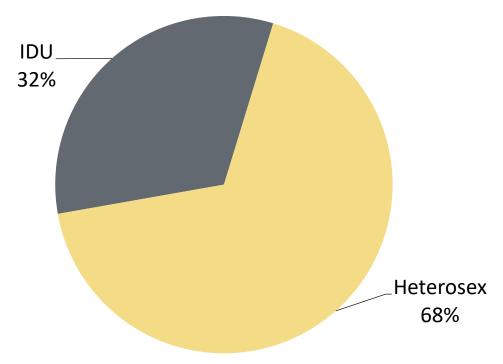
n = Number of persons

[†] Mode of Exposure proportions have been estimated using cases for 2014-2016 with known risk. For more detail see the HIV Surveillance Technical notes.



American Indian Females (n = 4)

CAUTION: Small number of cases – interpret carefully.



IDU = Injecting drug use

Heterosex = Heterosexual contact

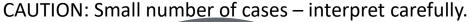
Other = Hemophilia, transplant, transfusion, mother w/ HIV or HIV risk

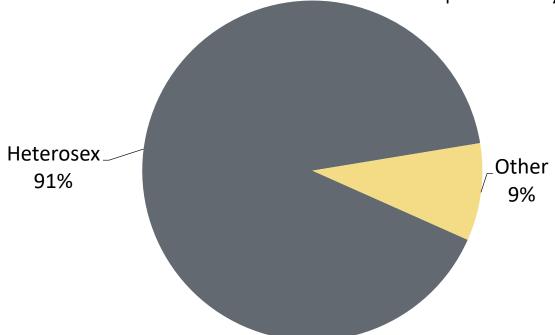
n = Number of persons

[†] Mode of Exposure proportions have been estimated using cases for 2014-2016 with known risk. For more detail see the HIV Surveillance Technical notes.

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Asian Females (n = 5)





n = Number of persons

Other = Hemophilia, transplant, transfusion, mother w/ HIV or HIV risk

Heterosex = Heterosexual contact

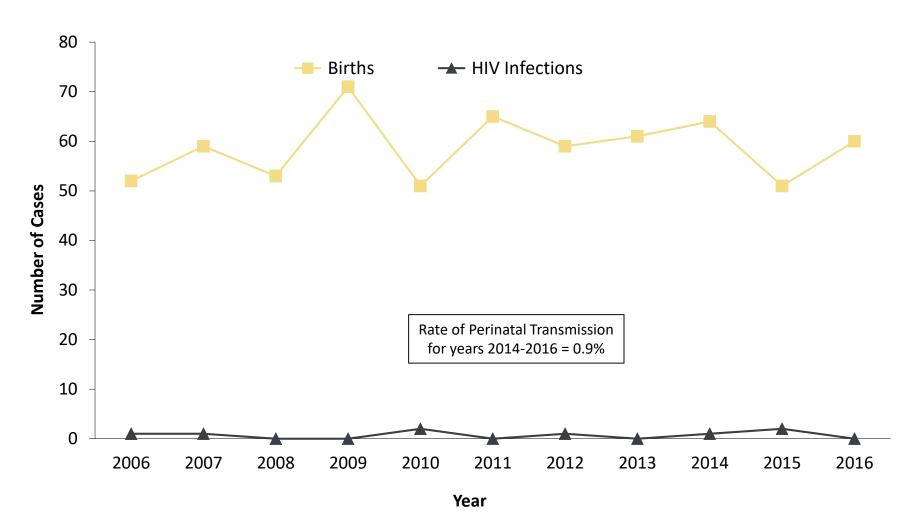
For more detail see the HIV Surveillance Technical notes.

^{*} HIV or AIDS at first diagnosis

[†] Mode of Exposure has been estimated for cases with unknown risk using the following: 95% - Heterosexual and 5%-Other.



Births to HIV-Infected Women and Number of Perinatally Acquired HIV Infections* by Year of Birth, 2006 - 2016

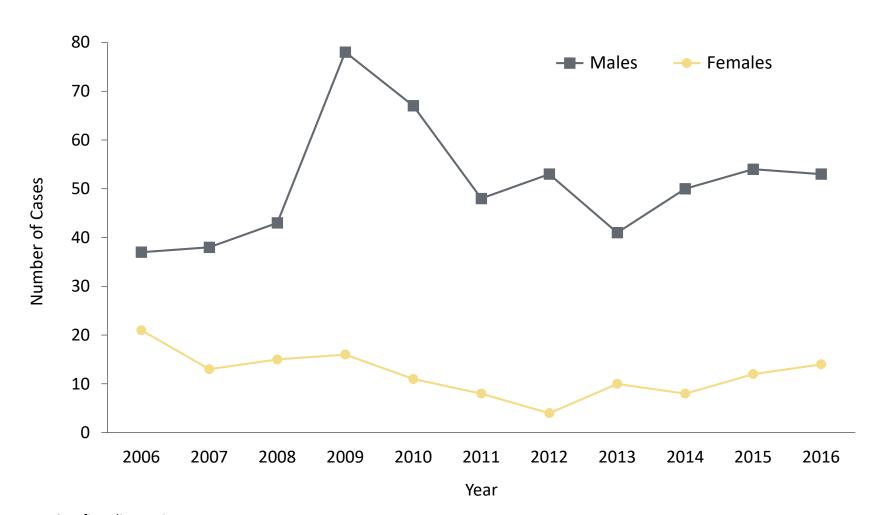


^{*} HIV or AIDS at first diagnosis for a child exposed to HIV during mother's pregnancy, at birth, and/or during breastfeeding.

Adolescents & Young Adults (Ages 13-24)*



HIV Diagnoses* Among Adolescents and Young Adults[†] by Gender and Year, 2006 - 2016

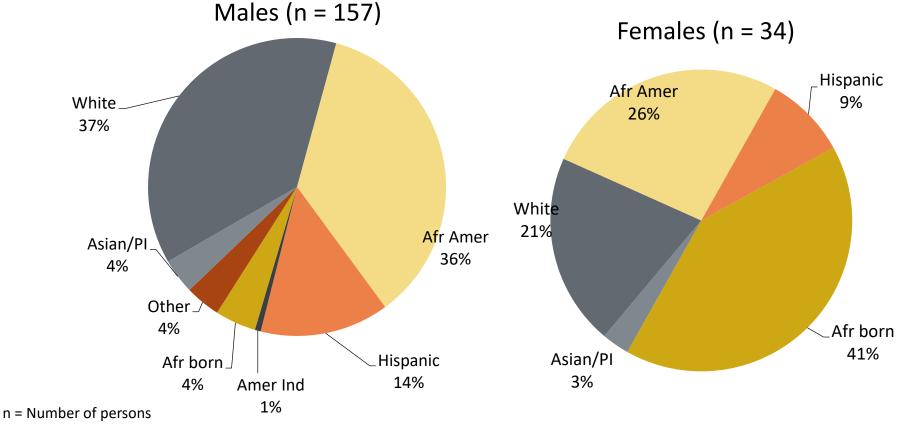


^{*} HIV or AIDS at first diagnosis

[†] Adolescents defined as 13-19 year-olds; Young Adults defined as 20-24 year-olds.



HIV Diagnoses* Among Adolescents and Young Adults[†] by Gender and Race/Ethnicity, 2014 - 2016 Combined



^{*} HIV or AIDS at first diagnosis

Amer Ind = American Indian

Afr Amer = African American (Black, not African-born persons)

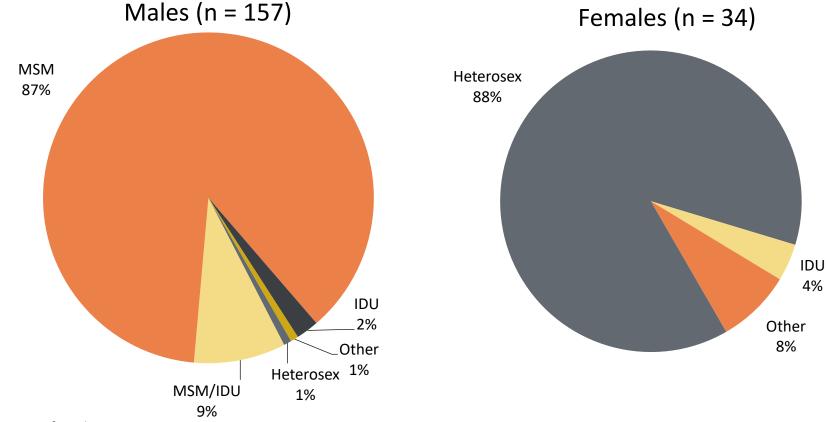
Afr born = African-born (Black, African-born persons)

Other = Multi-racial persons or persons with unknown race

[†] Adolescents defined as 13-19 year-olds; Young Adults defined as 20-24 year-olds.



HIV Diagnoses* Among Adolescents and Young Adults[†] by Gender and Estimated Exposure Group[#], 2014 - 2016 Combined



^{*} HIV or AIDS at first diagnosis

n = Number of persons

MSM = Men who have sex with men

IDU = Injecting drug use

Heterosex = Heterosexual contact

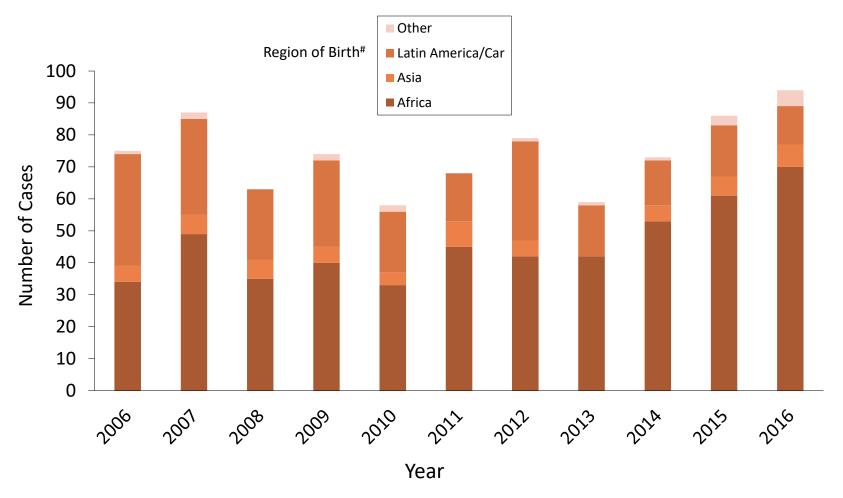
[†] Adolescents defined as 13-19 year-olds; Young Adults defined as 20-24 year-olds.

[#] Mode of Exposure proportions have been estimated using cases for 2014-2016 with known risk. For more detail see the HIV Surveillance Technical notes.

Foreign-born Cases



HIV Diagnoses* among Foreign-Born Persons[†] in Minnesota by Year and Region of Birth, 2006 - 2016



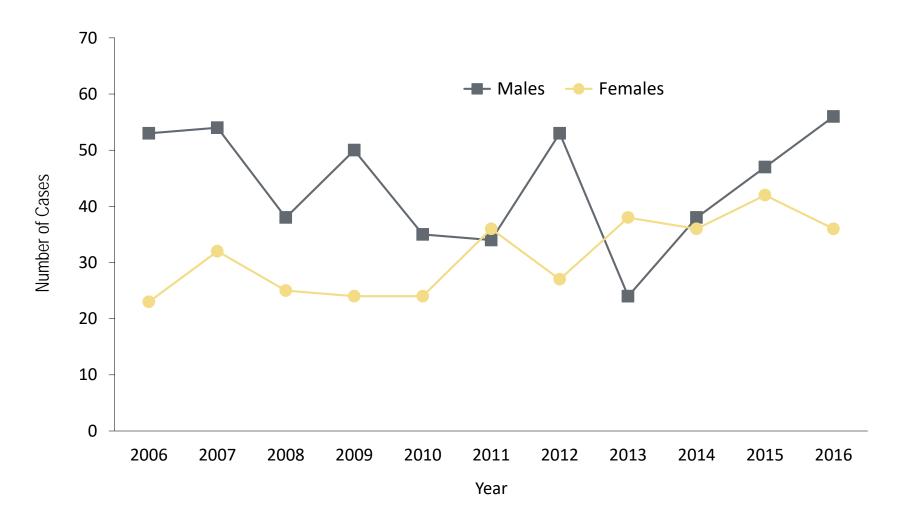
^{*} HIV or AIDS at first diagnosis

[†] Excludes persons arriving to Minnesota through the HIV+ Refugee Resettlement Program, as well as other refugee/immigrants with an HIV diagnosis prior to arrival in Minnesota.

[#]Latin America/Car includes Mexico and all Central, South American, and Caribbean countries.



HIV Diagnoses* Among Foreign-Born Persons[†] by Gender and Year, 2006 – 2016



^{*}HIV or AIDS at first diagnosis

[†] Excludes persons arriving in Minnesota through the HIV+ Refugee Resettlement Program, as well as other refugee/immigrants with an HIV diagnosis prior to arrival in Minnesota.

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Countries of Birth Among Foreign-Born Persons[†] Diagnosed with HIV*, Minnesota, 2016

- Liberia (n=24)
- Ethiopia (n=11)
- Somalia (n=9)
- Mexico (n=8)
- Kenya (n=7)
- Nigeria (n=5)
- Cameroon (n=4)
- Viet Nam (n=3)
- Togo (n=2)
- Tanzania (n=2)
- Other^ (n=19)

^{*} HIV or AIDS at first diagnosis

[†] Excludes persons arriving to Minnesota through the HIV+ Refugee Resettlement Program, as well as other refugee/immigrants with an HIV diagnosis prior to arrival in Minnesota.

[^] Includes 17 additional countries and 2 not specified.

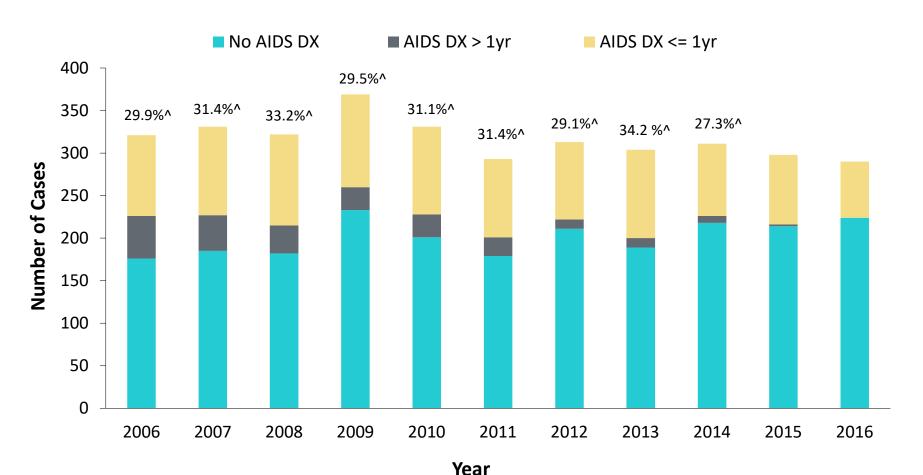


Late Testers

(AIDS Diagnosis within one year of initial HIV Diagnosis)



Time of Progression to AIDS for HIV Diagnoses in Minnesota*,2006 - 2016[†]



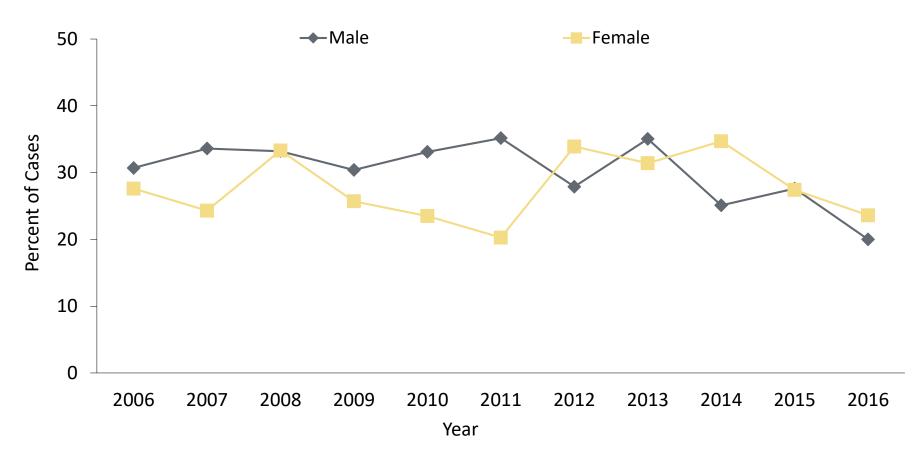
*Numbers include AIDS at 1st report but exclude persons arriving to Minnesota through the HIV+ Refugee Resettlement Program, as well as other refugee/immigrants with an HIV diagnosis prior to arrival in Minnesota.

[^] Percent of cases progressing to AIDS within one year of initial diagnosis with HIV

[†] Numbers/Percent for cases diagnosed in 2016 only represents cases progressing to AIDS through March 20, 2017.



Progression to AIDS within 1 year of initial HIV Diagnosis* by Sex at Birth, 2006 - 2016[†]

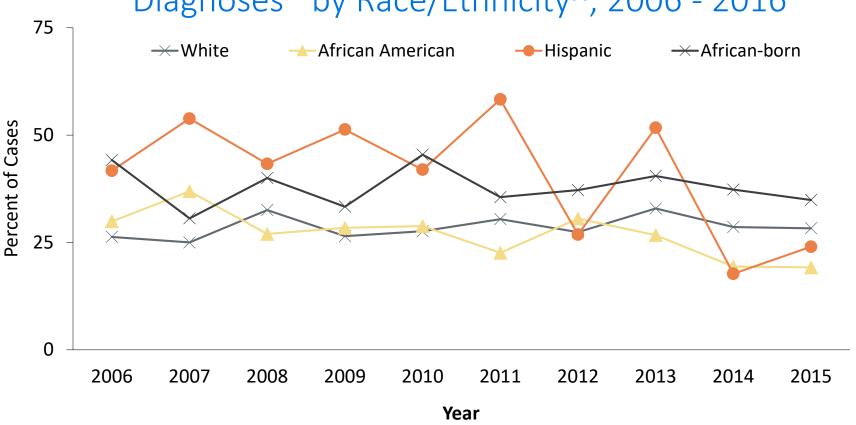


^{*}Numbers include AIDS at 1st report but exclude persons arriving to Minnesota through the HIV+ Refugee Resettlement Program, as well as other refugee/immigrants with an HIV diagnosis prior to arrival in Minnesota.

[†]Numbers/Percent for cases diagnosed in 2016 only represents cases progressing to AIDS through March 20, 2017.



Progression to AIDS within 1 year of initial HIV Diagnoses* by Race/Ethnicity^, 2006 - 2016[†]



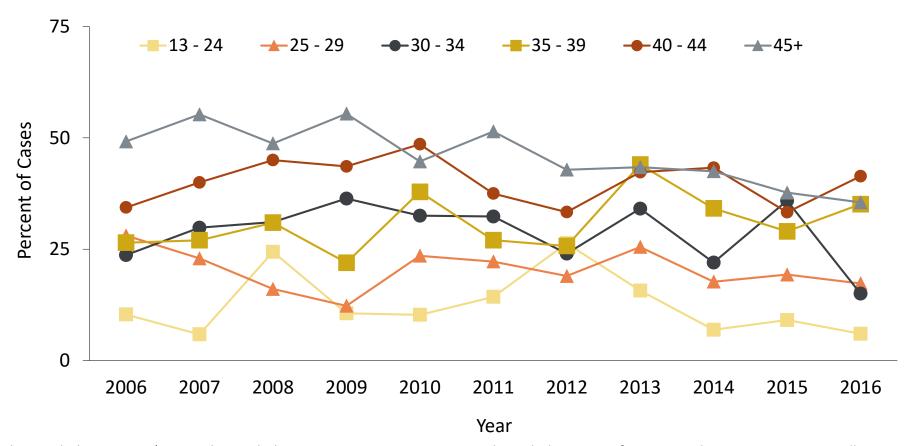
^{*}Numbers include AIDS at 1st report but exclude persons arriving to Minnesota through the HIV+ Refugee Resettlement Program, as well as other refugee/immigrants with an HIV diagnosis prior to arrival in Minnesota.

[†] Numbers/Percent for cases diagnosed in 2015 only represents cases progressing to AIDS through March 20, 2017.

[^]Percentage not calculated if less than 10 cases diagnosed per year



Progression to AIDS within 1 year of initial HIV Diagnosis* by Age, 2006 - 2016[†]



^{*}Numbers include AIDS at 1st report but exclude persons arriving to Minnesota through the HIV+ Refugee Resettlement Program, as well as other refugee/immigrants with an HIV diagnosis prior to arrival in Minnesota.

[†] Numbers/Percent for cases diagnosed in 2015 only represents cases progressing to AIDS through April 6, 2016.



Progression to AIDS within 1 year of initial HIV Diagnosis* by Mode of Transmission, 2005 - 2015[†]



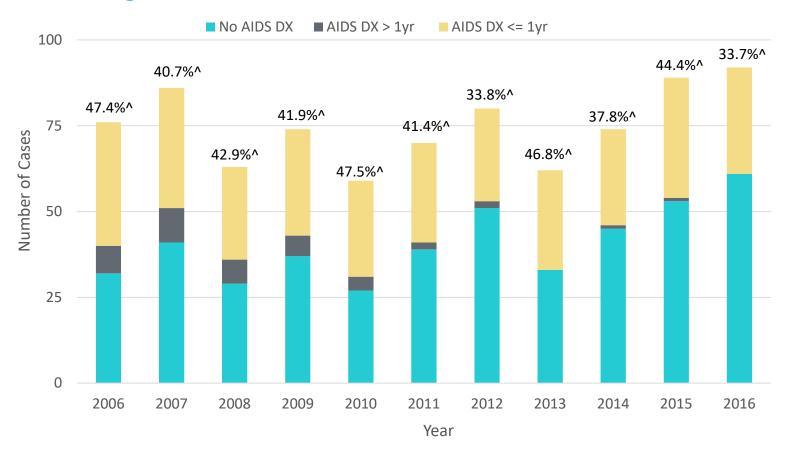
^{*}Numbers include AIDS at 1st report but exclude persons arriving to Minnesota through the HIV+ Refugee Resettlement Program, as well as other refugee/immigrants with an HIV diagnosis prior to arrival in Minnesota.

[†] Numbers/Percent for cases diagnosed in 2016 only represents cases progressing to AIDS through March 20, 2017.

[^]Includes MSM/IDU HIV/AIDS in Minnesota: Annual Review



Time of Progression to AIDS for HIV Diagnoses* Among Foreign-Born Persons, Minnesota 2006 - 2016[†]



^{*}Numbers include AIDS at 1st report but exclude persons arriving to Minnesota through the HIV+ Refugee Resettlement Program, as well as other refugee/immigrants with an HIV diagnosis prior to arrival in Minnesota.

[^] Percent of cases progressing to AIDS within one year of initial diagnosis with HIV

[†] Numbers/Percent for cases diagnosed in 2015 only represents cases progressing to AIDS through April 6, 2016.

HIV/AIDS Prevalence and Mortality Report, 2016

HIV/AIDS Surveillance System

Introduction (I)

- These three introduction slides provide a general context for the data used to create this slide set. If you have questions about any of the slides please refer to the Companion Text to the Minnesota HIV/AIDS Prevalence & Mortality Report, 2016 or HIV/AIDS Prevalence & Mortality Technical Notes.
- This slide set displays estimates of the number of persons living with HIV/AIDS (prevalence) and mortality in Minnesota by person, place, and time.
- The slides rely on data from HIV/AIDS cases diagnosed through 2016 and reported to the Minnesota Department of Health (MDH) HIV/AIDS Surveillance System.

Data Source: Minnesota HIV/AIDS Surveillance System

HIV/AIDS in

Introduction (II)

- Data analyses exclude persons diagnosed in federal or private correctional facilities, but include state prisoners (number of state prisoners believed to be living with HIV/AIDS = 102).
- Data analyses for new infections exclude persons arriving to Minnesota through the HIV+ Refugee Resettlement Program (number of primary HIV+ refugees in this program living in MN as of December 31, 2016=168), as well as, other refugees/immigrants reporting a positive test prior to their arrival in Minnesota (n=171).
- Some limitations of surveillance data:
 - Data do not include HIV-infected persons who have not been tested for HIV
 - Data do not include persons whose positive test results have not been reported to the MDH
 - Data do not include HIV-infected persons who have <u>only</u> tested anonymously
 - Case numbers for the most recent years may be undercounted due to delays in reporting
 - Reporting of living cases that were not initially diagnosed in Minnesota is known to be incomplete

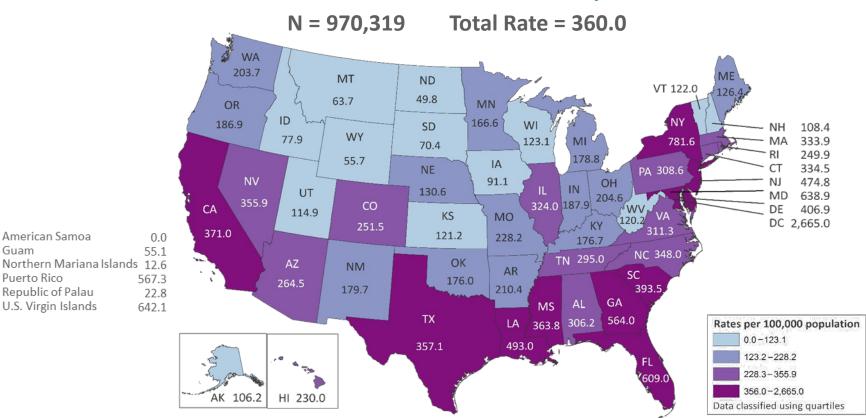
Introduction (III)

- Persons are assumed to be alive unless the MDH has knowledge of their death.
- Persons whose most recently reported state of residence was Minnesota are assumed to be currently residing in Minnesota unless the MDH has knowledge of their relocation. Our ability to track changes of residence, including within the state, is limited.
- Vital status and current residence are updated through one or more of the following methods:
 - Standard case reporting
 - Correspondence with other health departments
 - Active surveillance (monthly)
 - Death certificate reviews (annually)
 - Birth certificate reviews (annually, women only)

National Context



Rates of Adults and Adolescents Living with Diagnosed HIV Infection **Year-end 2014—United States and 6 Dependent Areas**



Note. Data include persons with a diagnosis of HIV infection regardless of stage of disease at diagnosis. Data are based on address of residence as of December 31, 2014 (i.e., most recent known address).



American Samoa

Republic of Palau

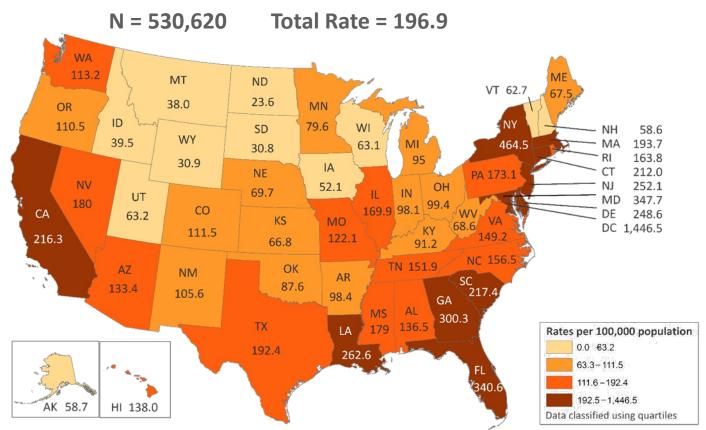
U.S. Virgin Islands

Guam

Puerto Rico



Rates of Adults and Adolescents Living with Diagnosed HIV Infection Ever Classified as Stage 3 (AIDS), Year-end 2014—United States and 6 Dependent Areas







American Samoa

Republic of Palau

U.S. Virgin Islands

Northern Mariana Islands

Guam

Puerto Rico

0.0

21.5

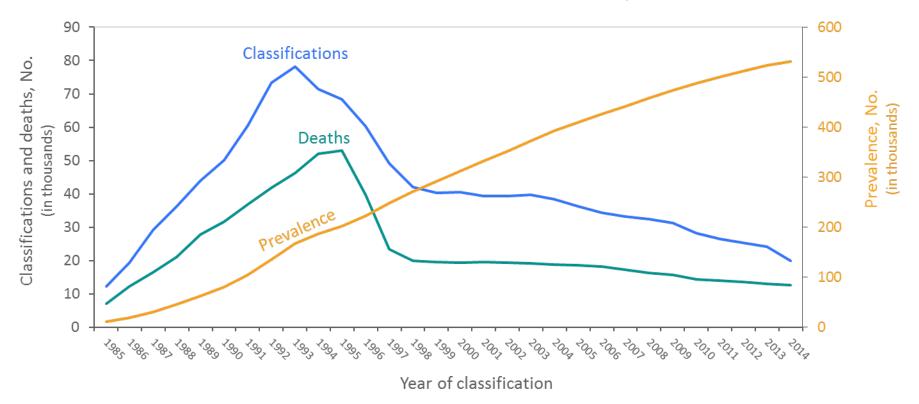
0.0

318.6

17.1

350.0

Stage 3 (AIDS) Classifications, Deaths, and Persons Living with Diagnosed HIV Infection Ever Classified as Stage 3 (AIDS) 1985–2014--United States and 6 Dependent Areas

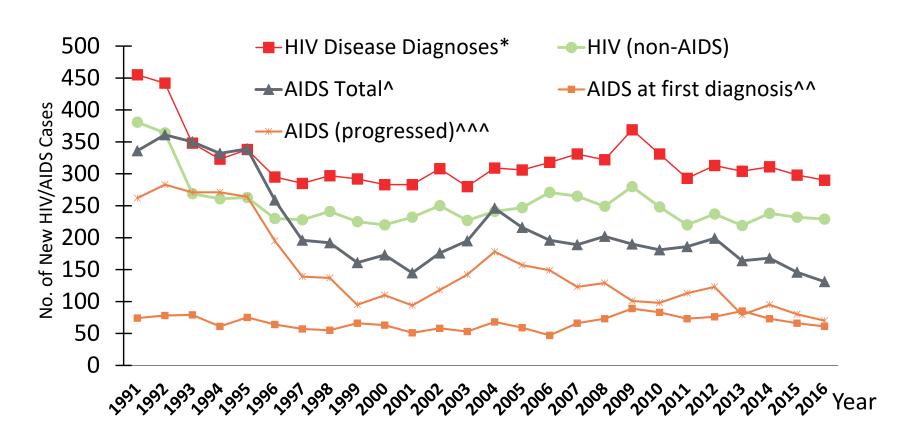


Note. Deaths of persons with HIV infection, stage 3 (AIDS) may be due to any cause.





New HIV Disease Diagnoses, HIV (non-AIDS) and AIDS Cases by Year, 1990-2016



^{*}Includes all new cases of HIV infection (both HIV (non-AIDS) and AIDS at first diagnosis) diagnosed within a given calendar year.

This includes refugees in the HIV+ Resettlement Program, as well as, other refugee/immigrants diagnosed with AIDS subsequent to their arrival in the United States.

HIV/AIDS in Minnesota: Annual Review

[^]Includes all new cases of AIDS diagnosed within a given calendar year, including AIDS at first diagnosis^^ and AIDS ((progressed)^^^ previous diagnosis of HIV).

Persons Living with HIV/AIDS in Minnesota

Estimated Number of Persons Living with HIV/AIDS in Minnesota

- As of December 31, 2016, 8,554* persons are assumed alive and living in Minnesota with HIV/AIDS
 - 4,575 living with HIV infection (non-AIDS)
 - 3,979 living with AIDS
- This number includes 2,064 persons who were first reported with HIV or AIDS elsewhere and subsequently moved to Minnesota
- This number excludes 1,332 persons who were first reported with HIV or AIDS in Minnesota and subsequently moved out of the state

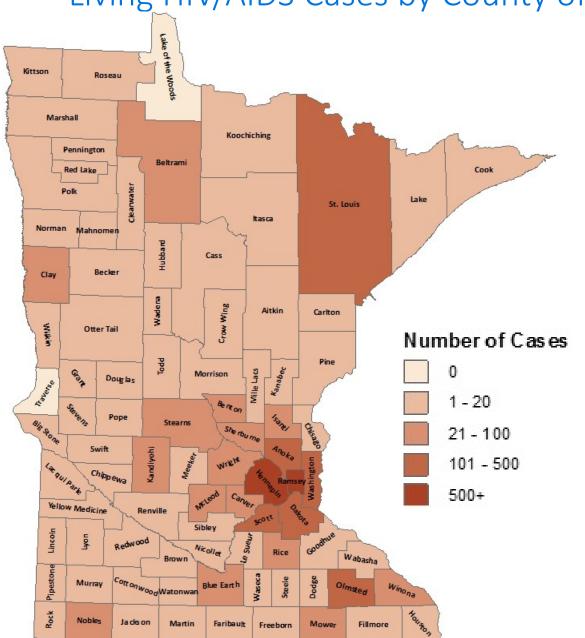
Data Source: Minnesota HIV/AIDS Surveillance System

^{*} This number includes persons who reported Minnesota as their current state of residence, regardless of residence at time of diagnosis. Includes state prisoners and refugees arriving through the HIV+ Refugee Resettlement Program, as well as HIV+ refugee/immigrants arriving through other programs.

Place



Living HIV/AIDS Cases by County of Residence, 2016

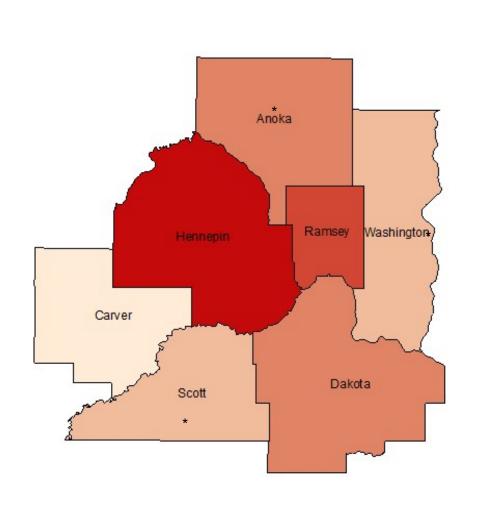


City of Minneapolis – 3,134
City of St. Paul – 1,108
Suburban* – 2,699
Greater Minnesota – 1,598
Total number = 8,554
(15 people missing residence information)

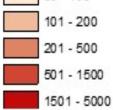
* 7-county metro area, excluding the cities of Minneapolis and St. Paul



Map of Metro Area: Living HIV/AIDS Cases by County of Residence, 2016



Twin Cities Seven County Metro Region Number of Cases 60 - 100



City of Minneapolis - 3,134

City of St. Paul – 1,108

Suburban# – 2,699

Total number (Metro only) = 6,941

7-county metro area,

excluding the cities of Minneapolis and St. Paul

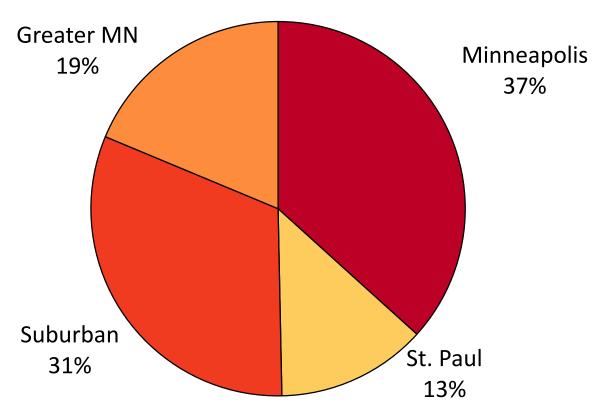
* Counties in which a state correctional facility is located.



Persons Living with HIV/AIDS in Minnesota by Current Residence, 2016

Total Number = 8,554

(61 persons missing residence information)

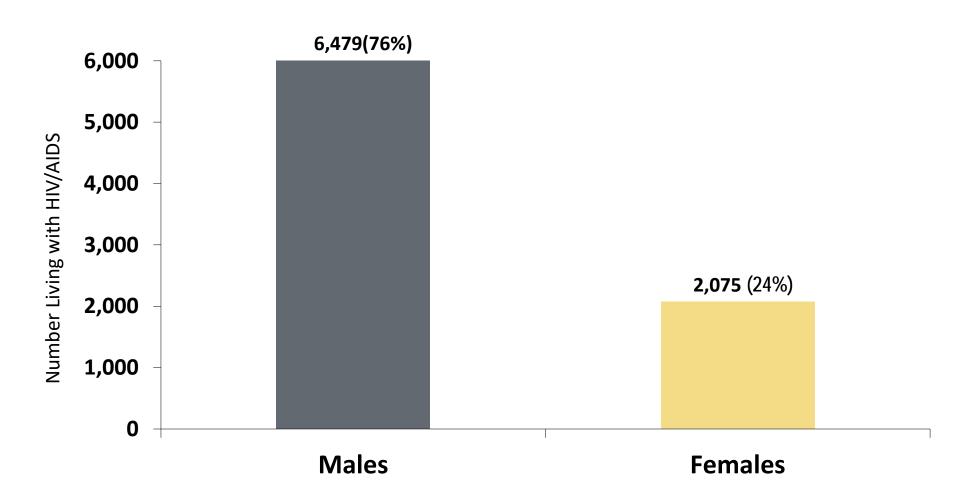


Suburban = Seven-county metro area including Anoka, Carver, Dakota, Hennepin (except Minneapolis), Ramsey (except St. Paul), Scott, and Washington counties. Greater MN = All other Minnesota counties, outside the seven-county metro area.

Gender and Race/Ethnicity

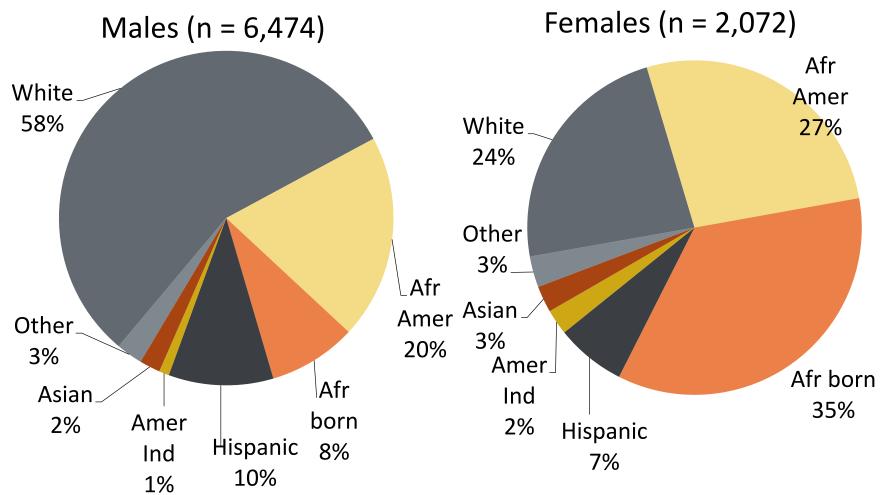


Persons Living with HIV/AIDS in Minnesota by Gender, 2016





Persons Living with HIV/AIDS in Minnesota by Gender and Race/Ethnicity, 2016



n = Number of persons

Afr Amer = African American (Black, not African-born persons)

Afr born = African-born (Black, African-born persons)

Amer Ind = American Indian

Other = Multi-racial persons or persons with unknown race



Number of Cases and Rates (per 100,000 persons) of Persons Living with HIV/AIDS by Race/Ethnicity[†] – Minnesota, 2016

Race/Ethnicity	Cases	%	Rate
White, non-Hispanic	4,107	48%	93.2
Black, African-American	1,836	21%	958.3
Black, African-born	1,283	15%	1654.3 ^{††}
Hispanic	796	9%	318.1
American Indian	114	1%	205.7
Asian/Pacific Islander	183	2%	85.2
Other^	227	3%	X
Total	8,546	100%	161.1

HIV/AIDS in Minnesota: Annual Review

th Estimate of 77,557 Source: 2010-2012 American Community Survey. Additional calculations by the State Demographic Center.

[^] Other = Multi-racial persons or persons with unknown race

Census Data used for rate calculations.

^{† &}quot;African-born" refers to Blacks who reported an African country of birth; "African American" refers to all other Blacks...



Number of Cases and Rates (per 100,000 persons) of Adults and Adolescents* Living with HIV/AIDS by Gender/Risk[†], Minnesota, 2016

Gender/Risk	Cases	%	Rate
Men (Total)	(6,408)	76%	246.2
MSM [†]	4,687	73%	5,051.3 ⁺⁺
Non-MSM	1,721	27%	83.2
Women	1,995	24%	89.8
Total	8,403	100%	191.7

2010 U.S. Census Data for persons age 13 and over used for rate calculations.

^{*}HIV or AIDS at first diagnosis age 13 and older;

[†] "MSM" refers to both MSM and MSM/IDU.

^{††} Estimate of 92,788



Number of Cases of Adults and Adolescents* Living with HIV/AIDS by Gender Identity and Risk[†], Minnesota, 2016

Gender/Risk	Cases	%
Men (Total)	(6,354)	76%
MSM [†]	4,637	73%
Non-MSM	1,717	27%
Women	1,980	24%
Transgender (Total)	69	0.8%
Male to Female	54	78%
Female to Male	15	22%
Total	8,403	100%

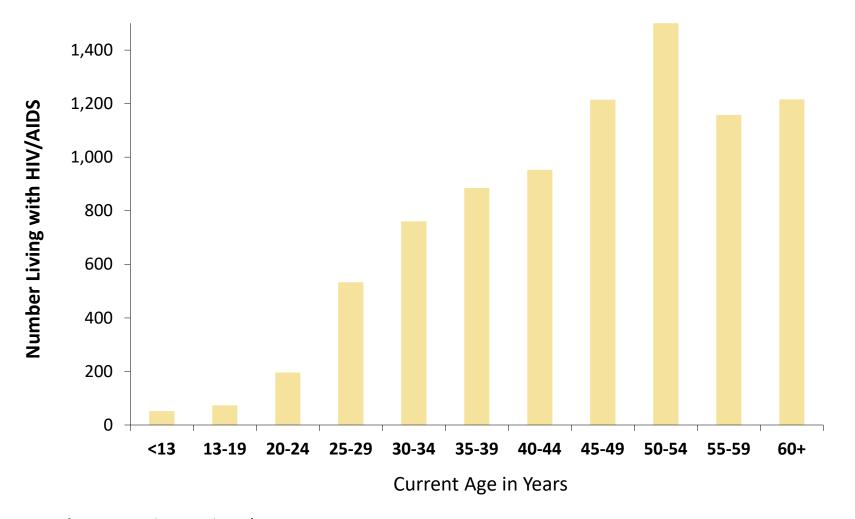
^{*}HIV or AIDS at first diagnosis age 13 and older;

[†] "MSM" refers to both MSM and MSM/IDU.

Age



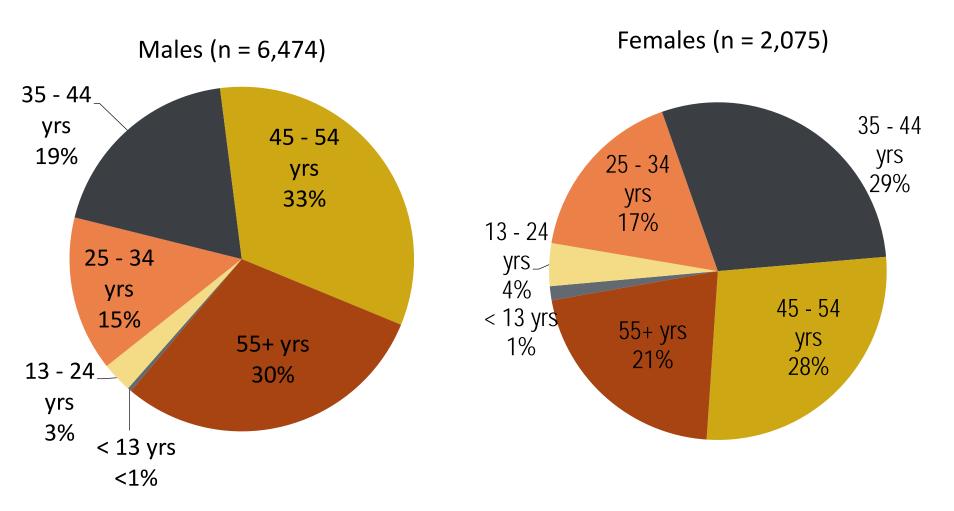
Persons Living with HIV/AIDS in Minnesota by Age Group[†], 2016



[†]Age missing for 5 persons living with HIV/AIDS



Persons Living with HIV/AIDS in Minnesota by Age[†] and Gender, 2016



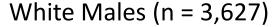
n = Number of persons

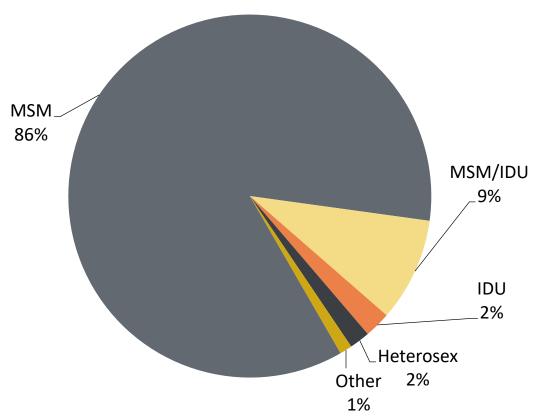
[†] Age missing for 5 people.



Mode of Exposure







n = Number of persons

Other = Hemophilia, transplant, transfusion, mother w/ HIV or HIV risk

IDU = Injecting drug use

Heterosex = Heterosexual contact

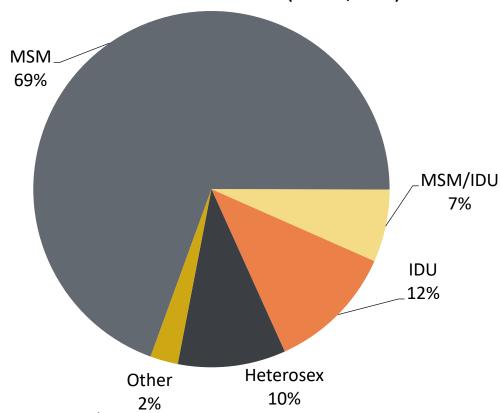
[†] Mode of Exposure has been estimated using prevalent cases with known risk. For additional detail see the HIV Surveillance Technical Notes.

Data Source: Minnesota HIV/AIDS Surveillance System

HIV/AIDS in Minnesota: Annual Review



African American Males⁺⁺ (n = 1,281)



n = Number of persons

Other = Hemophilia, transplant, transfusion, mother w/ HIV or HIV risk

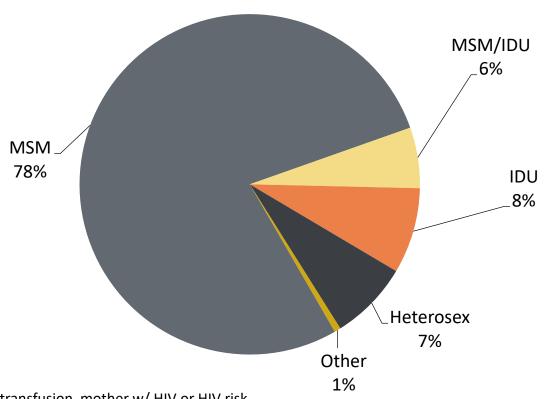
IDU = Injecting drug use

Heterosex = Heterosexual contact

[†] Mode of Exposure has been estimated using prevalent cases with known risk. For additional detail see the HIV Surveillance Technical Notes.







n = Number of persons

Other = Hemophilia, transplant, transfusion, mother w/ HIV or HIV risk

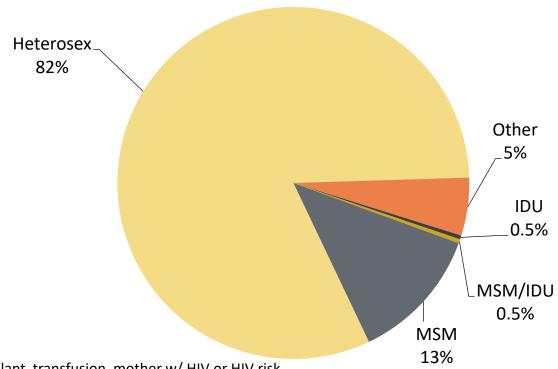
IDU = Injecting drug use

Heterosex = Heterosexual contact

[†] Mode of Exposure has been estimated using prevalent cases with known risk. For additional detail see the HIV Surveillance Technical Notes.



African-born Males⁺⁺ (n = 552)



n = Number of persons

Other = Hemophilia, transplant, transfusion, mother w/ HIV or HIV risk

IDU = Injecting drug use

Heterosex = Heterosexual contact

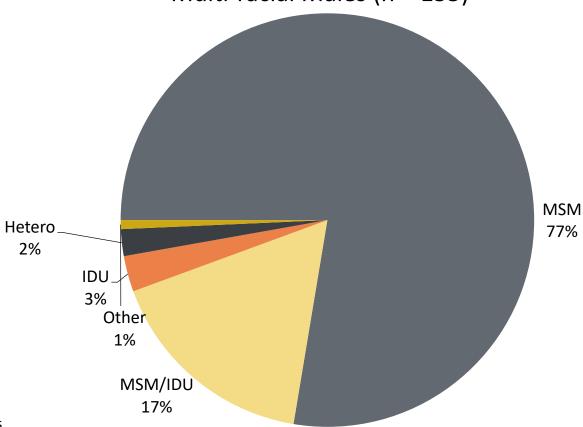
For additional detail see the HIV Surveillance Technical Notes.

[†] Mode of Exposure has been estimated using the following proportions: 95% - Heterosexual, 5% - Other.

^{††} Refers to Black, African-born males.







n = Number of persons

Other = Hemophilia, transplant, transfusion, mother w/ HIV or HIV risk

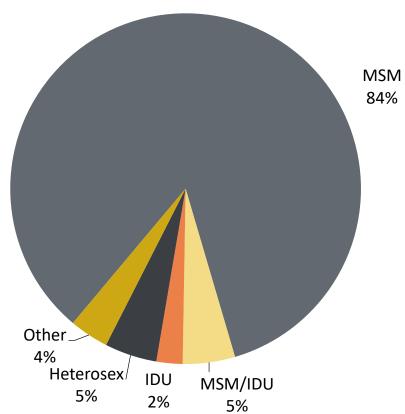
IDU = Injecting drug use

Heterosex = Heterosexual contact

[†] Mode of Exposure has been estimated using prevalent cases with known risk. For additional detail see the HIV Surveillance Technical Notes.







n = Number of persons

Other = Hemophilia, transplant, transfusion, mother w/ HIV or HIV risk

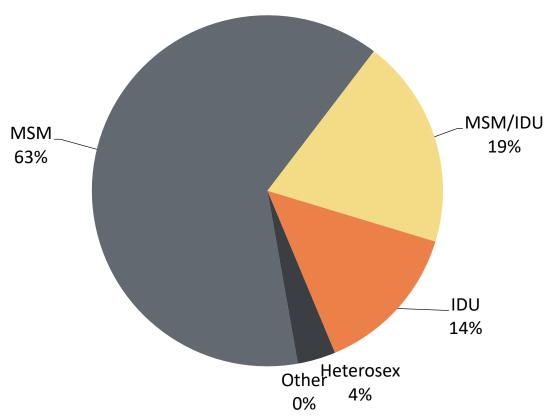
IDU = Injecting drug use

Heterosex = Heterosexual contact

[†] Mode of Exposure has been estimated using prevalent cases with known risk. For additional detail see the HIV Surveillance Technical Notes.







n = Number of persons

Other = Hemophilia, transplant, transfusion, mother w/ HIV or HIV risk

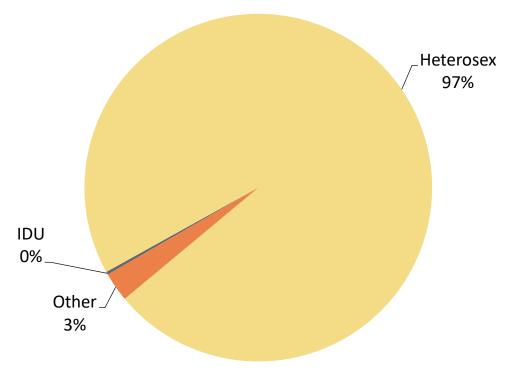
IDU = Injecting drug use

Heterosex = Heterosexual contact

[†] Mode of Exposure has been estimated using prevalent cases with known risk. For additional detail see the HIV Surveillance Technical Notes.



African-born Females^{††} (n = 731)



n = Number of persons

Other = Hemophilia, transplant, transfusion, mother w/ HIV or HIV risk

IDU = Injecting drug use

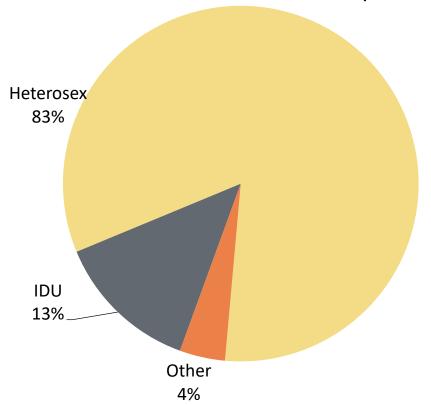
Heterosex = Heterosexual contact

[†] Mode of Exposure has been estimated using prevalent cases with known risk. For additional detail see the HIV Surveillance Technical Notes.

^{††} Refers to Black, African-born females.







n = Number of persons

Other = Hemophilia, transplant, transfusion, mother w/ HIV or HIV risk

IDU = Injecting drug use

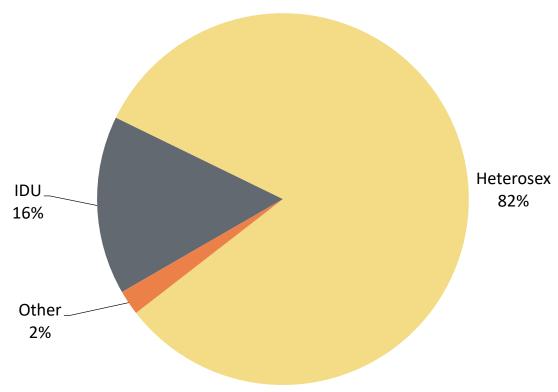
Heterosex = Heterosexual contact

[†] Mode of Exposure has been estimated using prevalent cases with known risk. For additional detail see the HIV Surveillance Technical Notes.

^{††} Refers to Black, African American (not African-born) females.







n = Number of persons

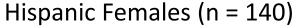
Other = Hemophilia, transplant, transfusion, mother w/ HIV or HIV risk

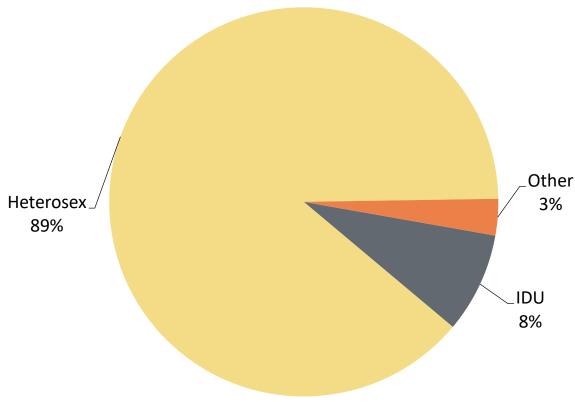
IDU = Injecting drug use

Heterosex = Heterosexual contact

[†] Mode of Exposure has been estimated using prevalent cases with known risk. For additional detail see the HIV Surveillance Technical Notes.







n = Number of persons

Other = Hemophilia, transplant, transfusion, mother w/ HIV or HIV risk

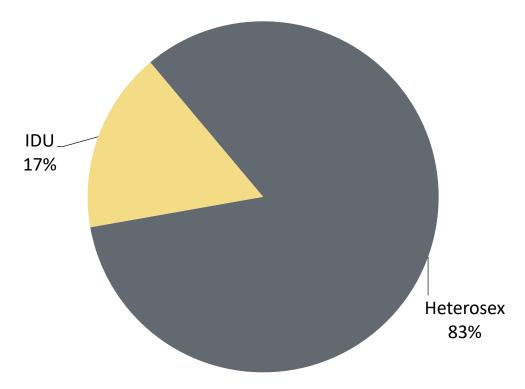
IDU = Injecting drug use

Heterosex = Heterosexual contact

[†] Mode of Exposure has been estimated using prevalent cases with known risk. For additional detail see the HIV Surveillance Technical Notes.



American Indian Females (n = 51)



n = Number of persons

Other = Hemophilia, transplant, transfusion, mother w/ HIV or HIV risk

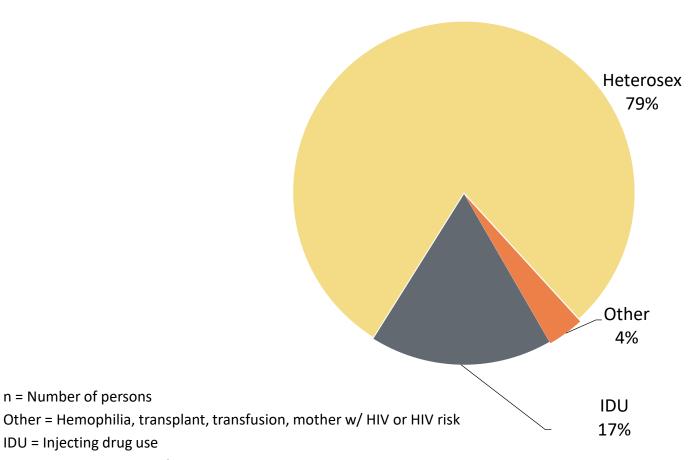
IDU = Injecting drug use

Heterosex = Heterosexual contact

[†] Mode of Exposure has been estimated using prevalent cases with known risk. For additional detail see the HIV Surveillance Technical Notes.



Multi-racial Females (n = 59)



Heterosex = Heterosexual contact

n = Number of persons

IDU = Injecting drug use

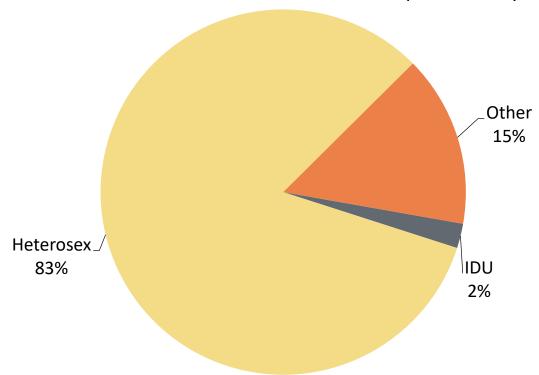
For additional detail see the HIV Surveillance Technical Notes.

[†] Mode of Exposure has been estimated using the following proportions: 95% - Heterosexual, 5% - Other.



Asian Females (n = 53)

CAUTION: Small number of cases – interpret carefully.



n = Number of persons

Other = Hemophilia, transplant, transfusion, mother w/ HIV or HIV risk

IDU = Injecting drug use

Heterosex = Heterosexual contact

For additional detail see the HIV Surveillance Technical Notes.

[†] Mode of Exposure has been estimated using the following proportions: 95% - Heterosexual, 5% - Other.

Populations of Interest

HIV and Hepatitis B, C co-infection

HIV and Hepatitis B and C

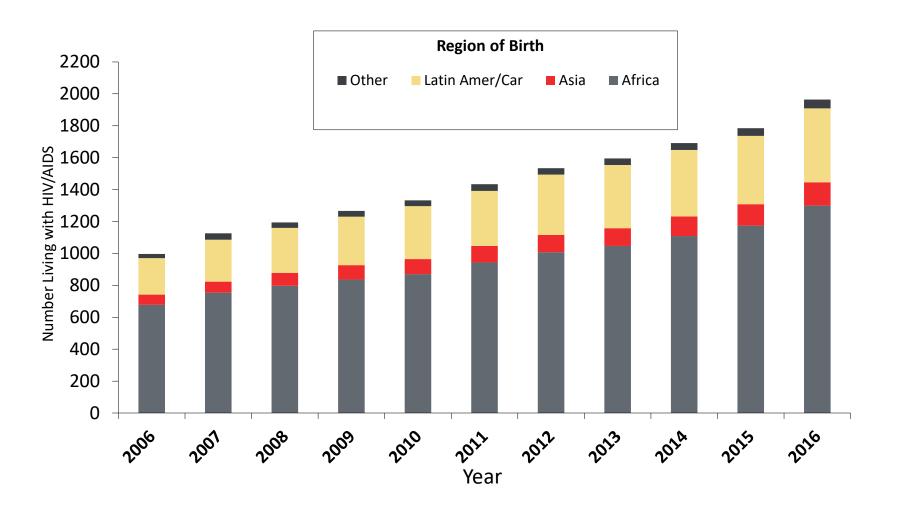
- As of December 31, 2016*, 8,554 persons are assumed alive and living in Minnesota with HIV/AIDS
 - Of these 8,554 persons, 776 (9%) are co-infected with either Hepatitis B, C or both
 - Of the 776, 316 (41%) are living with HIV and Hep B
 - Of the 776, 416 (53%) are living with HIV and Hep C
 - Of the 776, 44 (6%) are living with HIV and Hep B/Hep C

Data Sources: Minnesota HIV/AIDS Surveillance System and Minnesota Hepatitis Surveillance System

^{*} This number includes persons who reported Minnesota as their current state of residence, regardless of residence at time of diagnosis. Includes state prisoners and refugees arriving through the HIV+ Refugee Resettlement Program, as well as, HIV+ refugee/immigrants arriving through other programs.

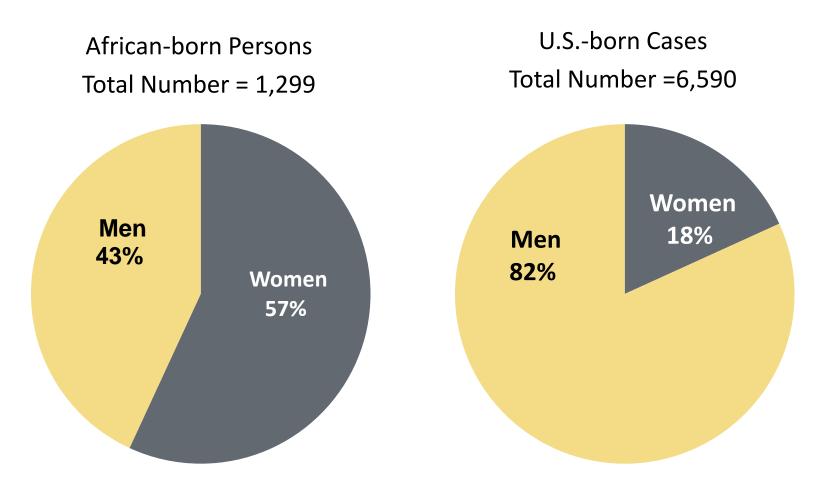


Foreign-Born Persons Living with HIV/AIDS in Minnesota by Region of Birth, 2006-2016





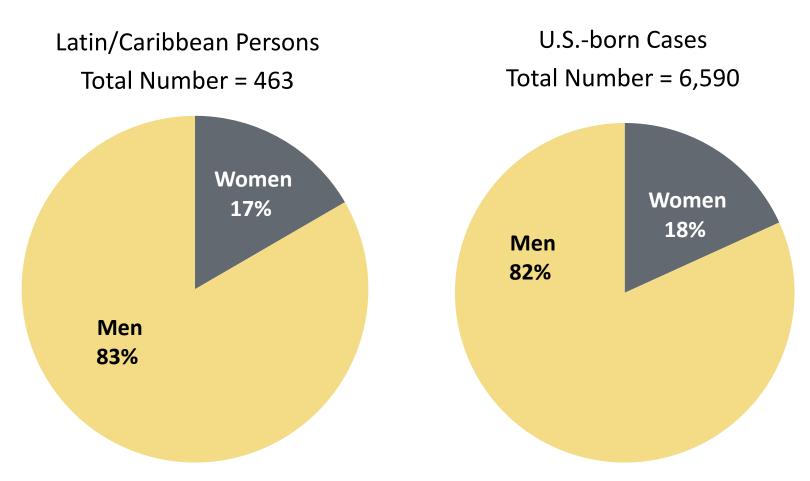
African-Born[†] Persons Living with HIV/AIDS Compared to Other Minnesota Cases by Gender, 2016



[†] Includes persons arriving to Minnesota through the HIV+ Refugee Resettlement Program and other refugee/immigrant programs. Also includes 1 White African-born persons and 2 multi-racial African-born person.



Persons Living with HIV/AIDS born in Latin America/Caribbean[†] Countries Compared to Other Minnesota Cases by Gender, 2016



Includes Mexico and all Central/South American and Caribbean countries.



Countries of Birth Among Foreign-Born Persons[†] Living with HIV/AIDS, Minnesota, 2016

- Ethiopia/Oromia (n=291)
- Mexico (n=267)
- Liberia (n=219)
- Kenya (n=166)
- Somalia (n=132)
- Cameroon (n=101)
- Sudan (n=73)
- Other^ (n=748)

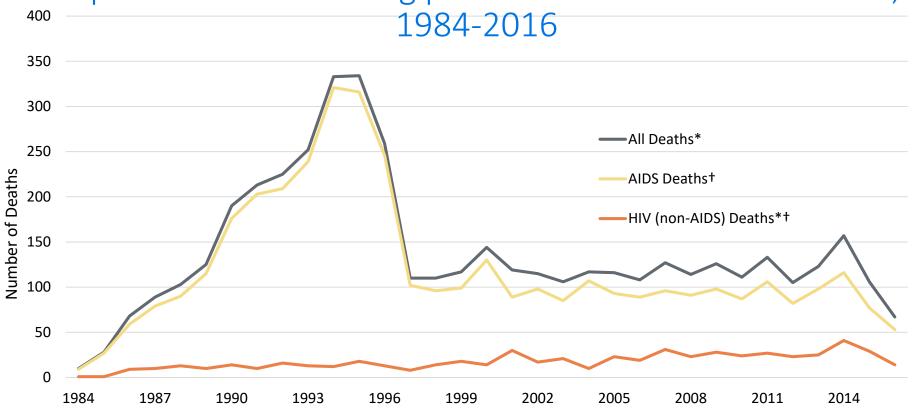
[†] Includes persons arriving to Minnesota through the HIV+ Refugee Resettlement Program, as well as other refugee/immigrants with an HIV diagnosis prior to arrival in Minnesota.

[^] Includes 100 additional countries.

Mortality



Reported Deaths among persons with HIV in Minnesota, 1984-2016



^{*} Number of deaths known to have occurred among all people living with all vinfection in Minnesota, regardless of location of diagnosis and cause of death.

[†] Number of deaths known to have occurred among people living with AIDS in Minnesota in a given calendar year, regardless of location of diagnosis and cause of death

^{*†} Number of deaths known to have occurred among people living with HIV (non-AIDS) in Minnesota in a given calendar year, regardless of location of diagnosis and cause of death

HIV Surveillance Technical Notes

Surveillance of HIV/AIDS

The Minnesota Department of Health (MDH) collects case reports of HIV infection and AIDS diagnoses through a passive and active HIV/AIDS surveillance system. Passive surveillance relies on physicians and laboratories to report new cases of HIV infection or AIDS directly to MDH in compliance with state rules1. Active surveillance conducted by MDH staff involves routine visits and correspondence with select HIV clinical facilities to ensure completeness of reporting and accuracy of the data.

Factors that impact the completeness and accuracy of HIV/AIDS surveillance data include: availability and targeting of HIV testing services, test-seeking behaviors of HIV-infected individuals, compliance with case reporting, and timeliness of case reporting. Certain events have also impacted trends in HIV/AIDS surveillance data. For example changes over time in the surveillance case definition (most notably the 1993 expansion of the case definition for adults and adolescents2) have resulted in artificial jumps in AIDS case counts at the time the new definition went into effect or in the preceding year because changes in case definition allowed for retrospective diagnoses. Additionally, on January 4, 2010, the U.S. travel ban on HIV+ visitors and immigrants was lifted. Persons now testing positive for the first time in Minnesota after arriving from their native country will no longer be assigned the status of 'immigrant', as compared to those who were diagnosed pre-2010 during obligatory immigrant physical examinations. Finally, an amendment to the communicable disease reporting rule was passed in June 2011, requiring the report of all CD4 and Viral Load test results.

¹ Minnesota Rule 4605.7040

² MMWR 1992;41[no.RR-17]:1-19

New HIV Diagnoses

New HIV diagnoses refer to persons who are diagnosed with HIV infection and newly reported to MDH. This includes case-patients that meet the CDC surveillance definition for AIDS at the time they are initially diagnosed with HIV infection (AIDS at first diagnosis). Cases of new HIV diagnosis are displayed by year of earliest HIV diagnosis. The number of new HIV diagnoses in Minnesota includes only persons who were first reported with HIV infection while residents of Minnesota. Persons moving to Minnesota already infected with HIV are excluded if they were previously reported in another state.

Vital Status of HIV/AIDS Cases

Persons are assumed alive unless MDH has knowledge of their death. Vital status information is updated by monthly visits to select reporting facilities, correspondence with other health departments, annual death certificate reviews, and periodic matches with the National Death Index and Social Security Death Master File. "AIDS deaths" refers to all deaths among AIDS cases regardless of the cause of death. "All deaths" refers to all deaths among HIV/AIDS cases regardless of the cause of death.

Place of Residence for HIV/AIDS Cases

Persons are assumed to be residing in Minnesota if their most recently reported state of residence was Minnesota and MDH has not received notice of relocation outside of the state. Likewise, a person's county or city of residence is assumed to be the most recently reported value unless MDH is otherwise notified. Residence information is updated through standard case reporting, monthly visits to select reporting facilities and/or correspondence with other state health departments. Persons diagnosed with HIV infection while imprisoned in a state correctional facility are included in the data presented unless otherwise noted (federal and private prisoners are excluded). Residential relocation, including release from state prison, is difficult to track and therefore data presented by *current* residence must be interpreted in this light. Data on residence *at time of diagnosis* are considered more accurate, limited only by the accuracy of self-reported residence location.

Data Tabulation and Presentation

The data displayed are not adjusted to correct for reporting delays, case definition changes, or other factors.

MDH surveillance reports published before 2000 displayed data by year of report while subsequent reports display the data by earliest date of HIV diagnosis. The report date is a function of reporting practices and may be months or years after the date of diagnosis and the date of infection. The date of diagnosis is temporally closer to the date of infection. Displaying data by year of diagnosis more closely approximates when infection occurred. Readers should bear in mind that diagnosis date is also an approximation for infection date. Many years may pass between time of infection and diagnosis; the incubation period3 for HIV/AIDS is approximately 10 years. It should also be noted that because of delays in reporting, the annual number of cases reportedly diagnosed in recent years is slightly lower than actual. This discrepancy corrects itself over time. The number of cases diagnosed within a calendar year changes relatively little after two years have passed.

Unless otherwise noted, data analyses exclude persons diagnosed in federal or private correctional facilities (inmates generally are not Minnesota residents before incarceration and do not stay in Minnesota upon their release), infants with unknown or negative HIV status who were born to HIV positive mothers, HIV-infected refugees who resettled in Minnesota as part of the HIV-Positive Refugee Resettlement Program, and other refugees/immigrants with an HIV diagnosis prior to their arrival in Minnesota. However, refugees in the HIV-Positive Refugee Resettlement Program, as well as, other refugees/immigrants diagnosed with AIDS subsequent to their arrival in the U.S. are included in the number of new AIDS cases.

-

³ Incubation period is the time between initial infection with the virus and the development of disease symptoms.

Mode of Exposure Hierarchy

All state and city HIV/AIDS surveillance systems funded by the Centers for Disease Control and Prevention use a standardized hierarchy of mode of exposure categories. HIV and AIDS cases with more than one reported mode of exposure to HIV are classified in the exposure category listed first in the hierarchy. In this way, each case is counted as having only one mode of exposure. The only exception to this rule is the joint risk of male-to-male sex (MSM) and injection drug use (IDU), which makes up a separate exposure category in the hierarchy. The following is a list of the hierarchy for adolescent/adult HIV/AIDS cases:

- 1. MSM
- 2. IDU
- 3. MSM/IDU
- 4. Hemophilia patient
- 5. Heterosexual contact
- 6. Receipt of blood transfusion or tissue/organ transplant
- 7. Other (e.g. needle stick in a health care setting)
- 8. Risk not specified.

The following is the list of the hierarchy for pediatric HIV/AIDS cases:

- 1. Hemophilia patient
- 2. Mother with HIV or HIV risk
- 3. Receipt of blood transfusion or tissue/organ transplant
- 4. Other
- 5. Risk not specified.

Heterosexual contact is only designated if a male or female can report specific heterosexual contact with a partner who has, or is at increased risk for, HIV infection (e.g. an injection drug user). For females this includes heterosexual contact with a bisexual male (mainly due to the elevated prevalence of HIV infection among men who have sex with men).

"Risk not specified" refers to cases with no reported history of exposure to HIV through any of the routes listed in the hierarchy of exposure categories. These cases include persons who have not yet been interviewed by MDH staff; persons whose exposure history is incomplete because they died, declined to be interviewed, or were lost to follow-up; and persons who were interviewed or for whom follow-up information was available but no exposure was identified/acknowledged.

The growing number of cases with unspecified risk in recent years is, in part, artificial and due to interviews that have not yet been completed. In time, a number of these will be assigned a mode of exposure category. However, part of the observed increase is real. As stated above, a person must have intimate knowledge about his/her partner to meet the criteria for heterosexual mode of exposure. Often cases will not be certain about their partners' HIV status or risk. Additionally, the perception of social stigma presumably decreases the likelihood that a person will acknowledge certain risk behaviors, particularly male-to-male sex or injection drug use. Thus, if the *true* numbers of cases due to heterosexual contact, MSM, and/or IDU increase, a larger number of cases without a specified risk would be expected.

A study by the Centers for Disease Control and Prevention used statistical methods to redistribute risk among female HIV/AIDS cases with unspecified risk4. The results are helpful but are based on national data and are not necessarily applicable at the state or local level. Speculation regarding the distribution of risk behaviors among those with unspecified risk is difficult, especially in men, for who even a national study is not available.

Re-distribution of Mode of Exposure

In 2004 MDH began estimating mode of exposure for cases with unspecified risk in its annual summary slides. Each year, estimation is done by using the risk distribution for cases diagnosed in the most recent three-year period with known risk by race and gender and applying it to those with unspecified risk of the same race and gender, for example to estimate risk in 2016, we would use cases diagnosed between 2014 and 2016. For females an additional step was added to the process. If females reported sex with males but did not report injecting drug use or receipt of blood products, then she was placed in a new category named "Heterosexual – with unknown risk". The same was not done for males given the high level of stigma associated with male-to-male sex in certain communities.

When applying the proportions from those with known risk to those with unspecified risk there were two exceptions to the method, African-born cases and Asian/Pacific Islander women. For

⁴ MMWR 2001; 50(RR-6):31-40.

both African-born and Asian/Pacific Islander women a breakdown of 95% heterosexual risk and 5% other risk was used. For African-born males a breakdown of 5% male-to-male sex, 90% heterosexual risk, and 5% other risk was used. These percentages are based on epidemiological literature and/or community experience.

MSM Estimate

In 2012, MDH began estimating the population of MSM in Minnesota. This estimate generates a denominator for the most commonly reported risk factor in Minnesota and allows for the calculation of a rate of infection and rate of prevalence among those in the risk group. Estimation is done each year using the most recently available census data for men over the age of 13 and using the model by on Laumann et als where 9% of the urban population, 4% of the suburban population and 1% of the rural population are estimated to be MSM.

MSM state i = (rural pop state i x0:01%) + (suburban pop state i x 0:04%) + (urban pop state i x0:09%)

After consulting with stakeholders, it was agreed that it was appropriate to assign urban/suburban/rural designation based on the unique geography of Minnesota. The counties of Hennepin and Ramsey are assigned as urban, the counties of Anoka, Carver, Dakota, Scott and Washington along with the cities of Rochester, St. Cloud and Duluth are assigned as suburban, and the remaining areas were are assigned as rural. In 2016, this method utilized 2010 census data and produced an estimate of the MSM population in Minnesota to be 92,788. Overall, this represents 4.3% of the adolescent and adult male population in Minnesota.

Definitions Related to Race/Ethnicity

When data are stratified by race, black race is broken down into African-born and African American (not African-born) based on reported country of birth.

⁵ Laumann EO, Gagnon JH, Michael RT, et al. The social organization of sexuality: sexual practices in the United States, chapter 8. Chicago: University of Chicago Press; 1994

The terms "persons of color" and "non-whites" refer to all race/ethnicity categories other than white (black, Hispanic, American Indian, and Asian/Pacific Islander).

Routine Interstate Duplicate Review (RIDR)

MDH continues to participate in RIDR. RIDR is a CDC project aimed at eliminating duplicate reports of HIV and AIDS cases among states. Each case of HIV and AIDS is assigned to the state (or states when the diagnosis of HIV and AIDS occurs in two different states) where a person was first diagnosed. RIDR was the second such de-duplication initiative by CDC. The first initiative, IDEP, looked at cases reported through December 31, 2001. RIDR is now an ongoing activity that all states are expected to undertake. CDC will release a RIDR report every 6 months which will affect the ownership of Minnesota cases. While the Surveillance staff will always inquire about previous diagnosis and will check with CDC to determine if the case has been previously reported, it is possible that cases we believe to have been initially diagnosed in Minnesota were in fact diagnosed in another state. Ongoing participation in this initiative will allow for proper attribution of incident and prevalent cases in Minnesota.

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04/17/2017



Table 1. Number of New Cases and Rates (per 100,000 persons) of HIV Diagnoses, HIV (non-AIDS), & AIDS (New Diagnosis AIDS, Progressed to AIDS)^I Minnesota, 1982-2016

Year	HIV Diag	gnosis ^{III}		IV AIDS) ^{III}	New Diag		Progre to A		Total	AIDSIV
	Cases	Rate	Cases	Rate	Cases	Rate	Cases	Rate	Cases	Rate
1982-1999	6,060		5,056	1	1004		2529	1	3,533	
2000	283	5.8	220	4.5	63	1.3	110	2.2	173	3.5
2001	283	5.7	232	4.7	51	1.0	94	1.9	145	2.9
2002	308	6.1	250	5.0	58	1.2	118	2.4	176	3.5
2003	280	5.5	227	4.5	53	1.0	142	2.8	195	3.9
2004	309	6.1	241	4.7	68	1.3	178	3.5	246	4.8
2005	306	6.0	247	4.8	59	1.2	157	3.1	216	4.2
2006	318	6.2	271	5.2	47	0.9	149	2.9	196	3.8
2007	331	6.4	265	5.1	66	1.3	123	2.4	189	3.6
2008	322	6.1	249	4.7	73	1.4	129	2.5	202	3.8
2009	369	7.0	280	5.3	89	1.7	101	1.9	190	3.6
2010	331	6.2	248	4.7	83	1.6	98	1.8	181	3.4
2011	293	5.5	220	4.1	73	1.4	113	2.1	186	3.5
2012	313	5.9	237	4.5	76	1.4	123	2.3	199	3.8
2013	304	5.7	219	4.1	85	1.6	79	1.5	164	3.1
2014	311	5.9	238	4.5	73	1.4	95	1.8	168	3.2
2015	298	5.6	232	4.4	66	1.2	80	1.5	146	2.8
2016	290	5.5	229	4.3	61	1.2	70	1.3	131	2.5
Cumulative Total ^{II}	11,309	213.2	9,161	172.7	2148	40.5	4488	84.6	6,636	125.1

¹ HIV Diagnosis = New cases of HIV diagnosis (both HIV (non-AIDS) and AIDS at first diagnosis) diagnosed within a given calendar year. HIV (non-AIDS) = New cases of HIV diagnosis (excluding AIDS at first diagnosis) diagnosed within a given calendar year. New AIDS Diagnosis = AIDS at first diagnosis. Progressed to AIDS = diagnosis of HIV (non-AIDS) in a previous year with a diagnosis of AIDS in given calendar year. Total AIDS = All new cases of AIDS diagnosed within a given calendar year, including AIDS at first diagnosis.

^{II} The cumulative rate is calculated by dividing the cumulative number of cases by the estimated current state population and multiplying by 100,000. Rates for individual calendar years were calculated using 2010 U.S. Census population data (2010-2013), 2000 U.S. Census population data for 2000, and U.S. Census intercensal population estimates released in September 2011 were used for years 2001-2009.

^{III}Numbers and rates exclude federal and private prisoners and refugees in the HIV-Positive Refugee Resettlement Program, as well as refugee/immigrants with an HIV diagnosis prior to arrival in Minnesota

^{IV} Numbers and rates include refugees in the HIV-Positive Refugee Resettlement Program, as well as other refugee/immigrants diagnosed with AIDS subsequent to their arrival in the U.S.

The sum of HIV (non-AIDS) cases and AIDS cases will be greater than the number of cases of HIV Infection in a given year. The difference occurs because, unlike the HIV Infection category, the AIDS category includes both cases that are AIDS at first diagnosis as well as those cases that progress from HIV (non-AIDS) to AIDS during the year (see above definitions).

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04/19/2017



Table 2. Number of Cases and Rates (per 100,000 persons) of HIV Diagnosis by Residence, Age, and Gender¹ Minnesota, 2016

	Ma	les	Fem	ales	То	tal	HIV
Group	Cases	%	Cases	%	Cases	%	Infection Rate
Residence ^{II}							
Minneapolis	79	35%	13	20%	92	32%	24.0
St. Paul	20	9%	8	12%	28	10%	9.8
Suburban	83	37%	35	54%	118	41%	5.4
Greater Minnesota	43	19%	9	14%	52	18%	2.1
Total	225	100%	65	100%	290	100%	5.5
Age							
<13 yrs	1	0%	2	3%	3	1%	0.3
13-19 yrs	12	5%	3	5%	15	5%	2.9
20-24 yrs	41	18%	11	17%	52	18%	14.6
25-29 yrs	43	19%	9	14%	52	18%	14.0
30-34 yrs	32	14%	8	12%	40	14%	11.7
35-39 yrs	21	9%	16	25%	37	13%	11.3
40-44 yrs	25	11%	4	6%	29	10%	8.2
45-49 yrs	17	8%	4	6%	21	7%	5.2
50-54 yrs	15	7%	1	2%	16	6%	4.0
55-59 yrs	11	5%	2	3%	13	4%	3.7
60+ yrs	7	3%	5	8%	12	4%	1.2
Total	225	100%	65	100%	290	100%	5.5
State Totals	225		65		29	90	5.5

¹HIV Diagnosis includes all new cases of HIV diagnosis (both HIV (non-AIDS) and AIDS at first diagnosis) among Minnesota residents in 2016.

Suburban = Seven-county metropolitan area except Minneapolis & St. Paul (Anoka, Carver, Dakota, Hennepin (except Minneapolis), Ramsey (except St. Paul), Scott, and Washington

[&]quot;Residence at time of HIV diagnosis (both HIV (non-AIDS) and AIDS at first diagnosis).

counties). Greater Minnesota = Remaining 80 counties outside of the seven-county metropolitan area.

Numbers and rates exclude federal and private prisoners and refugees in the HIV-Positive Refugee Resettlement Program, as well as refugee/immigrants with an HIV diagnosis prior to arrival in Minnesota. State prisoners are included (1 diagnosis in 2016).

Rates calculated using U.S. Census 2010 data. Percentages may not add to 100 due to rounding.

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04/19/2017



Table 3. Number of Cases and Rates (per 100,000 persons) of HIV Diagnosis by Race/Ethnicity & Mode of Exposure^I Minnesota, 2016

		Males			Females	3		Total	
Group	Cases % Rate ^{IV} (Cases	%	Rate ^{IV}	Cases	%	Rate ^{III}
Race/Ethnicity		•			•				
White, non-Hispanic	102	45%	4.7	17	26%	0.8	119	41%	2.7
Black ^{II} , African-American, non-Hispanic	47	21%	Х	13	20%	Х	60	21%	31.3
Black ^{II} , African-born ^{III} , non-Hispanic	38	17%	Х	32	49%	Х	70	24%	90.3
Hispanic, any race	23	10%	17.4	1	2%	0.8	24	8%	9.6
American Indian, non-Hispanic	1	0%	#	0	0%	#	1	0%	#
Asian/PI, non-Hispanic	10	4%	9.5	2	3%	#	12	4%	5.6
Other ^{II} , non-Hispanic	4	2%	Х	0	0%	Х	4	1%	Х
Total	225	100%	8.5	65	100%	2.4	290	100%	5.5
Mode of Exposure									
MSM	119	53%	Х			Х	119	41%	Х
IDU	3	1%	Х	2	3%	Х	5	2%	Х
MSM/IDU	22	10%	Х			Х	22	8%	Х
Heterosexual (Total)	(13)	6%	Х	(52)	80%	Х	(65)	22%	Х
with IDU	2		Х	1		Х	3		Х
with Bisexual Male	0		Х	1		Х	1		Х
with Hemophiliac/other	0		Х	0		Х	0		Х

with HIV+	11		Х	18		Х	29		Х
Hetero, unknown risk ^v	0		Х	32		Х	32		Х
Perinatal	1	0%	Х	2	3%	Х	3	1%	Х
Other	0	0%	Χ	0	0%	Х	0	0%	Χ
Unspecified	67	30%	Χ	9	14%	Х	76	26%	Χ
No Interview, Unspecified	0	0%	Х	0	0%	Х	0	0%	Х
Total	225	100%	8.5	65	100%	2.4	290	100%	5.5

^{IV} U.S. Census 2010 data necessary to calculate race-specific rates by gender are not available for all subpopulations, and/or numbers are too small to calculate reliable rates.

Numbers exclude federal and private prisoners and refugees in the HIV-Positive Refugee Resettlement Program, as well as, refugee/immigrants with an HIV diagnosis prior to arrival in Minnesota.

^V Hetero, unknown risk - Females who were interviewed and whose only risk is heterosexual contact but who were not able to provide information on the sexual partner's risk.

MSM = Men who have sex with men. IDU = Injecting drug use. Heterosexual = For males: heterosexual contact with a female known to be HIV+, an injecting drug user, or a hemophiliac/blood product or organ transplant recipient. For females: heterosexual contact with a male

¹ HIV Diagnosis includes all new cases of HIV diagnosis (both HIV (non-AIDS) and AIDS at first diagnosis) among Minnesota residents in 2016.

^{II} African-born Blacks are reported separately from other Blacks (born in the U.S. or elsewhere). The Black, African-American population is non-Hispanic. "Other" includes multi-racial persons and persons with unknown race

Rates calculated using U.S. Census 2010 data. The population estimate for African-born persons was calculated by the Minnesota State Demographic Center. The population estimate for Black, African-American persons (191,584) was calculated by subtracting the U.S. Census estimate for African-born persons (77,557) from the total Black population (269,141). Note that this assumes that all African-born persons are Black (as opposed to another race).

known to be HIV+, bisexual, an injecting drug user, or a hemophiliac/blood product or organ transplant recipient. Perinatal = Mother to child HIV transmission; birth may have occurred in a previous year. Unspecified = Cases who did not acknowledge any of the risks listed above. No Interview, Unspecified = Cases who refused to be, could not be or have not yet been interviewed.

Percentages may not add to 100 due to rounding.

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04/19/2017



Table 4. Number of Cases and Rates (per 100,000 persons) of HIV Diagnosis by County of Residencel -- Minnesota, 2016

County	HIV Diagnosis Cases	HIV Diagnosis Rate ^{III}
Aitkin	0	-
Anoka	20	6.0
Becker	0	-
Beltrami	2	-
Benton	2	-
Big Stone	0	-
Blue Earth	0	-
Brown	0	-
Carlton	1	-
Carver	0	-
Cass	0	-
Chippewa	1	-
Chisago	1	-
Clay	3	-
Clearwater	1	-
Cook	0	-
Cottonwood	1	-
Crow Wing	0	-
Dakota	21	5.3
Dodge	0	-
Douglas	2	-
Faribault	0	-
Fillmore	0	-
Freeborn	1	-
Goodhue	1	-
Grant	1	-
Hennepin	149	12.9
Houston	0	-
Hubbard	0	-
Isanti	1	-
Itasca	0	-
Jackson	0	-
Kanabec	0	-

County	HIV Diagnosis Cases	HIV Diagnosis Rate ^{III}
Kandiyohi	1	-
Kittson	0	-
Koochiching	0	-
Lac Qui Parle	0	-
Lake	0	-
Lake of the Woods	0	-
Le Sueur	0	-
Lincoln	0	-
Lyon	0	-
McLeod	0	-
Mahnomen	0	-
Marshall	0	-
Martin	1	-
Meeker	0	-
Mille Lacs	0	-
Morrison	0	-
Mower	4	-
Murray	0	-
Nicollet	0	-
Nobles	1	-
Norman	0	-
Olmsted	3	-
Otter Tail	1	-
Pennington	0	-
Pine	1	-
Pipestone	0	-
Polk	2	-
Pope	0	-
Ramsey	38	7.5
Red Lake	0	-
Redwood	0	-
Renville	0	-
Rice	1	-
Rock	0	-
Roseau	2	-
St. Louis	3	-
Scott	4	-
Sherburne	4	-
Sibley	0	-
Stearns	5	3.3

County	HIV Diagnosis Cases	HIV Diagnosis Rate ^{III}
Steele	0	-
Stevens	0	-
Swift	0	-
Todd	0	-
Traverse	0	-
Wabasha	0	-
Wadena	0	-
Waseca	0	-
Washington	6	2.5
Watonwan	0	-
Wilkin	0	-
Winona	1	-
Wright	4	-
Yellow Medicine	0	-
State Total	290	5.5

¹HIV Diagnosis includes all new cases of HIV diagnosis (both HIV (non-AIDS) and AIDS at first diagnosis) among Minnesota residents in 2016.

"Residence at time of HIV diagnosis (both HIV (non-AIDS) and AIDS at first diagnosis

III Rates calculated using U.S. Census 2010 data. Rates not calculated for counties with fewer than 5 cases.

Numbers and rates exclude federal and private prisoners and refugees in the HIV-Positive Refugee Resettlement Program, as well as, refugee/immigrants with an HIV diagnosis prior to arrival in Minnesota. HIV infection was diagnosed among one state prisoner during 2016 (State correctional facilities are located in the following counties: Anoka, Carlton, Chisago, Goodhue, Itasca, Rice, Scott, Sherburne, and Washington).

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04/19/2017



Table 5a. Perinatal HIV Exposure¹: Number of Births to HIV-Infected Women¹¹ by Year of Child's Birth and Mother's Race/Ethnicity, Minnesota 1982-2016

			Race/Et	hnicity of I	Mother				Foreign	-born Mothers ^{IV}
Year(s)	White	Black, African- American ^{III}	Black, African- born ^{III}	Hispanic	American Indian	Asian/PI	Multi- racial	Total	Number	(% of total in time period)
1982-1999	84	66	10	9	14	4	3	190	20	11%
2000	12	10	7	2	1	1	0	33	9	27%
2001	1	20	11	1	2	0	1	36	14	39%
2002	9	6	13	3	2	0	3	36	14	39%
2003	5	14	18	6	1	1	2	47	21	45%
2004	7	13	22	3	2	1	1	49	24	49%
2005	7	8	20	3	0	2	1	41	25	61%
2006	7	14	21	6	1	1	2	52	27	52%
2007^	16	12	24	2	2	1	2	59	29	49%
2008	3	12	26	6	0	3	3	53	34	64%
2009	16	13	34	4	1	2	1	71	39	55%
2010^	7	14	22	2	2	1	3	51	23	45%
2011^	10	10	28	9	4	1	3	65	35	54%
2012^	14	11	26	3	2	0	3	59	32	54%
2013^	8	11	31	5	4	1	1	61	34	56%
2014^	5	7	41	4	1	2	4	64	45	70%
2015^	3	10	30	3	0	0	5	51	32	63%
2016^	6	8	32	5	0	3	6	60	38	63%
Cumulative Total	220	259	416	76	39	24	44	1,078	495	46%

A birth to an HIV-infected woman was only included in the table if her residence at the time of child's birth was reported as Minnesota.

¹ Exposure of child to HIV during pregnancy, at birth, and/or during breastfeeding.

^{II} HIV-infected women may or may not have progressed to an AIDS diagnosis.

III African-born Blacks are reported separately from other Blacks (born in the U.S. or elsewhere).

^{IV} Mothers' places of birth include: Africa (392), Asia/Pacific Islands (20), Central America/Caribbean (17), Europe (4), Mexico (16), and South America (8).

^ Mother's race was missing for 1 birth in 2007, 3 births in 2011, 1 birth in 2012, 1 birth in 2013, 1 birth in 2014, and 3 in 2016. Country of mother's birth was missing for 1 birth in 2010, 1 birth in 2011, 1 birth in 2012, 1 birth in 2013, 3 births in 2014, 2 birth in 2015 and 3 births in 2016.

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04/19/2017



Table 5b. Perinatal HIV Transmission¹: Number of Perinatally-Acquired HIV/AIDS Cases by Year of Child's Birth and Mother's Race/Ethnicity, Minnesota 1982-2016

			Race/Et	thnicity of	Mother				Fore	ign-born Mothers ^{III}
Year(s)	White	Black, African- American ^{II}	Black, African- born ^{II}	Hispanic	American Indian	Asian/PI	Multi- racial	Total	Number	(% of total in time period)
1982-1999	18	5	3	3	2	2	0	33	6	18%
2000	0	1	0	0	0	0	0	1	0	0%
2001	0	0	0	0	0	0	0	0	0	-
2002	0	0	0	1	0	0	0	1	1	100%
2003	0	0	1	0	0	0	0	1	1	100%
2004	0	0	0	0	0	0	0	0	0	-
2005	0	0	0	0	0	0	0	0	0	-
2006	0	0	1	0	0	0	0	1	1	100%
2007	0	0	1	0	0	0	0	1	1	100%
2008	0	0	0	0	0	0	0	0	0	-
2009	0	0	0	0	0	0	0	0	0	-
2010	0	0	2	0	0	0	0	2	2	100%
2011	0	0	0	0	0	0	0	0	0	-
2012	1	0	0	0	0	0	0	1	1	100%
2013	0	0	0	0	0	0	0	0	0	-
2014	0	1	0	0	0	0	0	1	0	0%
2015	0	1	1	0	0	0	0	2	1	50%
2016	0	0	0	0	0	0	0	0	0	-

			Race/Et	hnicity of I	Mother				Foreign-born Mothers ^{III}		
Year(s)	White	Black, African- American ^{II}	Black, African- born ^{II}	Hispanic	American Indian	Asian/PI	Multi- racial	Total	Number	(% of total in time period)	
Cumulative Total	19	8	9	4	2	2	0	44	14	32%	
Rate of Transmission 2014 - 2016	0.0%	8.0%	1.0%	0.0%	0.0%	0.0%	0.0%	1.7%	0.9%		
Cumulative Rate of Transmission ^{IV}	8.6%	3.1%	2.2%	5.3%	5.1%	1		4.1%	2.8%		

Cases of perinatally-acquired HIV/AIDS were only included in the table if the child's residence at the time of birth was reported as Minnesota.

¹Transmission of HIV from mother to child during pregnancy, at birth, and/or during breastfeeding.

^{II} African-born Blacks are reported separately from other Blacks (born in the U.S. or elsewhere).

III Mothers' places of birth include: Africa (9), Asia/Pacific Islands (2), Central America/Caribbean (1), Europe (1), Mexico (1).

^{IV}The cumulative rate of HIV transmission is calculated by dividing the total number of perinatally-acquired HIV infections by the total number of births in a category and multiplying by 100. Rates calculated only for categories where the cumulative number of births is 30 or greater.

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04/19/2017



Table 1. Number and Rate (per 100,000 persons) of Persons Living with HIV (non-AIDS) and AIDS by Residence, Age, and Gender Minnesota, 2016

	HIV (nor	n-AIDS)	AID	os	Tot	al	HIV/AIDS
Group	Cases	%	Cases	%	Cases	%	Prevalence Rate
Residence ^{III}							
Minneapolis	1,732	38%	1,402	35%	3,134	37%	819.2
St. Paul	590	13%	518	13%	1,108	13%	388.7
Suburban	1,341	29%	1,358	34%	2,699	32%	123.7
Greater Minnesota	900	20%	698	18%	1,598	19%	65.1
Total	4,563	100%	3,976	100%	8,539	100%	161.0
Age ^{IV}							
<13 yrs	49	1%	3	<1%	52	1%	5.6
13-19 yrs	61	1%	13	<1%	74	1%	14.5
20-24 yrs	161	4%	35	1%	196	2%	55.1
25-29 yrs	416	9%	117	3%	533	6%	143.0
30-34 yrs	508	11%	253	6%	761	9%	221.9
35-39 yrs	514	11%	371	9%	885	10%	269.7
40-44 yrs	510	11%	443	11%	953	11%	270.0
45-49 yrs	640	14%	575	14%	1,215	14%	299.1
50-54 yrs	665	15%	841	21%	1,506	18%	374.9
55-59 yrs	494	11%	664	17%	1,158	14%	331.2
60+ yrs	552	12%	664	17%	1,216	14%	126.3
Total	4,570	100%	3,979	100%	8,549	100%	161.2
Gender							
Male	3,428	75%	3,051	77%	6,479	76%	246.2
Female	1,147	25%	928	23%	2,075	24%	77.7
Total	4,575	100%	3,979	100%	8,554	100%	161.3
StateTotals	4,5	75	3,9	79	8,5	54	161.3

¹Cases reported to MDH, assumed to be alive, and currently residing in Minnesota as of December 31, 2015.

"HIV/AIDS prevalence rate calculated by dividing the total number of prevalent cases in a stratum (e.g persons aged 20-24 years) by the estimated population for that stratum and multiplying by 100,000. Population estimates are based on 2010 U.S. Census data.

III Residence information missing for 61 persons living with HIV and 5 persons living with AIDS.

Suburban = Seven-county metropolitan area except Minneapolis & St. Paul (Anoka, Carver, Dakota, Hennepin (except Minneapolis), Ramsey (except St. Paul), Scott, and Washington counties). Greater Minnesota = Remaining 80 counties outside of the seven-county metropolitan area.

Numbers exclude federal and private prisoners, but include 134 state prisoners, 167 refugees in the HIV-Positive Refugee Resettlement Program, and 175 additional refugees/immigrants with HIV infection prior to resettling in Minnesota.

Percentages may not add to 100 due to rounding.

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^{IV} Age missing for 5 persons living with HIV and 0 persons living with AIDS.

Table 2. Number of Males & Females and Rates (per 100,000) Living with HIV (non-AIDS) and AIDS by Race/Ethnicity and Mode of Exposure^I - Minnesota, 2016

		Ma	iles			Fem	ales				Total			
	HIV	AIDS	Tot	al	HIV	AIDS	Tot	tal	HIV	AIDS	Gr	Grand Total		
Group	(non- AIDS)		Cases	%	(non- AIDS)		Cases	%	(non- AIDS)		Cases	%	Rate ^{III}	
Race/Ethnicity														
White, non-Hispanic	2,024	1,603	3,627	56%	271	209	480	23%	2,295	1,812	4,107	48%	93.2	
Black ^{II} , African-	660	621	1,281	20%	294	261	555	27%	954	882	1,836	21%	958.3	
American, non- Hispanic														
Black ^{II} , African-born, non-Hispanic	262	290	552	9%	421	310	731	35%	683	600	1,283	15%	1654.3	
Hispanic, any race	293	363	656	10%	73	67	140	7%	366	430	796	9%	318.1	
American Indian, non- Hispanic	27	36	63	1%	24	27	51	2%	51	63	114	1%	205.7	
Asian/PI, non-Hispanic	70	60	130	2%	29	24	53	3%	99	84	183	2%	85.2	
Other ^{II} , non-Hispanic	88	77	165	3%	32	30	62	3%	120	107	227	3%	Х	
Total	3,424	3,050	6,474	100%	1,144	928	2,072	100%	4,568	3,978	8,546	100%	161.1	
Mode of Exposure														
MSM	2,371	1,869	4,240	65%					2,371	1,869	4,240	50%	Х	
IDU	106	150	256	4%	77	64	141	7%	183	214	397	5%	Х	
MSM/IDU	224	223	447	7%					224	223	447	5%	Х	
Heterosexual (Total)	(113)	(160)	(273)	4%	(914)	(760)	(1674)	82%	(1027)	(920)	(1947)	23%	Х	
With IDU	25	38	63		67	91	158		92	129	221		X	
with Bisexual Male	-	-	-		47	46	93		47	46	93		Х	
with Hemophiliac/other	4	1	5		5	2	7		9	3	12		Х	

	Males				Females			Total					
	HIV AIDS Total			al	HIV AIDS Total		HIV	V AIDS Grand Total					
Group	(non- AIDS)		Cases	%	(non- AIDS)		Cases	%	(non- AIDS)		Cases	%	Rate ^{III}
With HIV +	84	121	205		297	210	507		381	331	712		Χ
Hetero, unknown risk ^{IV}	0	0	0		498	411	909		498	411	909		
Perinatal	45	25	70	1%	64	20	84	4%	109	45	154	2%	Х
Other	5	17	22	0%	3	3	6	0%	8	20	28	0%	Χ
Unspecified	382	413	795	12%	62	37	99	5%	444	450	894	11%	Χ
No Interview, Unspecified	179	192	371	6%	24	12	36	2%	203	204	407	5%	Х
Total	3,425	3,049	6,474	100%	1,144	896	2,040	100%	4,569	3,945	8,514	100%	160.5

- MSM = Men who have sex with men.
- IDU = Injecting drug use.
- Heterosexual:

¹ Cases reported to MDH, assumed to be alive and currently residing in Minnesota as of December 31, 2015.

^{II} African-born Blacks are reported separately from other Blacks (born in the U.S. or elsewhere). "Other" includes multi-racial persons and persons with unknown or missing race.

Rates calculated using U.S. Census 2010 data. The population estimate for African-born persons was calculated by the Minnesota State Demographic Center. The population estimate for Black, African-American persons (191,584) was calculated by subtracting the U.S. Census estimate for African-born persons (77,557) from the total Black population (269,141). Note that this assumes that all African-born persons are Black (as opposed to another race).

^{IV} Hetero, unknown risk - Females who were interviewed and whose only risk is heterosexual contact but who were not able to provide information on the sexual partner's risk.

- For males: heterosexual contact with a female known to be HIV+, an injecting drug user, or a hemophiliac/blood product or organ transplant recipient.
- For females: heterosexual contact with a male known to be HIV+, bisexual, an injecting drug user, or a hemophiliac/blood product or organ transplant recipient.
- Perinatal = Mother to child HIV transmission.
- Other = Hemophilia patient/blood product or organ transplant recipient.
- Unspecified = Cases who did not acknowledge any of the risks listed above.
- No Interview, Unspecified = Cases who refused to be, could not be or have not yet been interviewed.

Numbers exclude federal and private prisoners, but include 134 state prisoners, 167 refugees in the HIV-Positive Refugee Resettlement Program, and 175 additional refugees/immigrants with HIV infection prior to resettling in Minnesota.

Percentages may not add to 100 due to rounding.

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Table 3. Number and Rate (per 100,000) of Persons Living with HIV (non-AIDS) and AIDS by County of Residence^I -- Minnesota, 2016

County ^{II}	HIV (non-AIDS)	AIDS	Total	Rate ^{III}		
Aitkin	4	3	7	43.2		
Anoka	224	198	422	127.6		
Becker	8	6	14	43.1		
Beltrami	13	14	27	60.8		
Benton	22	20	42	109.2		
Big Stone	0	1	1	-		
Blue Earth	18	21	39	60.9		
Brown	4	6	10	38.6		
Carlton	9	7	16	45.2		
Carver	29	31	60	65.9		
Cass	8	11	19	66.5		
Chippewa	4	6	10	80.4		
Chisago	11	8	19	35.3		
Clay	21	18	39	66.1		
Clearwater	2	1	3	-		
Cook	1	3	4	-		
Cottonwood	2	6	8	68.5		
Crow Wing	8	8	16	25.6		
Dakota	231	198	429	107.6		
Dodge	3	3	6	29.9		
Douglas	8	7	15	41.7		
Faribault	1	6	7	48.1		
Fillmore	8	1	9	43.1		
Freeborn	6	6	12	38.4		
Goodhue	8	10	18	39.0		
Grant	4	4	8	132.9		
Hennepin	2,524	2,043	4,567	396.3		
Houston	3	5	8	42.0		
Hubbard	3	5	8	39.2		
Isanti	13	11	24	63.5		
Itasca	8	9	17	37.7		
Jackson	3	11	14	136.4		
Kanabec	2	6	8	49.3		
Kandiyohi	23	14	37	87.6		

County ^{II}	HIV (non-AIDS)	AIDS	Total	Rate ^{III}
Kittson	1	1	2	-
Koochiching	0	1	1	-
Lac Qui Parle	1	2	3	-
Lake	2	1	3	-
Lake of the Woods	0	0	0	-
Le Sueur	7	6	13	46.9
Lincoln	3	1	4	-
Lyon	8	2	10	38.7
McLeod	12	12	24	65.5
Mahnomen	0	1	1	-
Marshall	1	0	1	-
Martin	9	6	15	72.0
Meeker	6	3	9	38.6
Mille Lacs	3	10	13	49.8
Morrison	4	8	12	36.1
Mower	28	37	65	166.0
Murray	3	0	3	-
Nicollet	7	9	16	48.9
Nobles	11	11	22	102.9
Norman	2	0	2	-
Olmsted	76	84	160	110.9
Otter Tail	11	4	15	26.2
Pennington	3	2	5	35.9
Pine	8	6	14	47.1
Pipestone	2	0	2	-
Polk	6	12	18	57.0
Pope	3	4	7	63.7
Ramsey	709	672	1,381	271.5
Red Lake	0	1	1	-
Redwood	2	1	3	-
Renville	2	6	8	50.9
Rice	35	29	64	99.8
Rock	3	3	6	61.9
Roseau	2	0	2	-
St. Louis	75	82	157	78.4
Scott	50	59	109	83.9
Sherburne	23	19	42	47.5
Sibley	1	2	3	-
Stearns	29	40	69	45.8
Steele	5	6	11	30.1

County ^{II}	HIV (non-AIDS)	AIDS	Total	Rate ^{III}
Stevens	1	1	2	-
Swift	1	2	3	-
Todd	1	0	1	-
Traverse	0	0	0	-
Wabasha	2	5	7	32.3
Wadena	2	1	3	-
Waseca	5	4	9	47.0
Washington	117	77	194	81.5
Watonwan	1	1	2	-
Wilkin	1	3	4	-
Winona	19	8	27	52.5
Wright	25	22	47	37.7
Yellow Medicine	0	2	2	-
State Total ^{II}	4,564	3,976	8,540	173.6

Numbers by county exclude federal, and private prisoners, but include 168 refugees in the HIV-Positive Refugee Resettlement Program and 171 additional refugees/immigrants with HIV infection prior to resettling in Minnesota. Numbers for counties in which a state correctional facility is located exclude those inmates. The total number of state prisioners is 157. State correctional facilities are located in the following counties: Anoka, Carlton, Chisago, Goodhue, Itasca, Rice, Scott, Sherburne, and Washington.

¹ Cases reported to the MDH, assumed to be alive and currently residing in a Minnesota county as of December 31, 2016.

^{II} Residence information missing for 12 persons living with HIV and 3 persons living with AIDS. Total rate is based on all cases in the state (n=8,554)

III HIV/AIDS prevalence rate calculated by dividing the total number of prevalent cases in a stratum (e.g persons living in Hennepin county) by the estimated population for that stratum and multiplying by 100,000. Population estimates are based on 2010 U.S. Census data. Rates not calculated for counties with fewer than 5 cases.

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Table 4. Number of HIV (non-AIDS) Cases, AIDS Cases, AIDS Deaths, People Living with HIV/AIDS (PLWHA), and All Deaths¹ Minnesota 2005-2016

	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
HIV (non-AIDS)	247	271	265	249	280	248	220	237	219	238	232	229
AIDSII	216	196	189	202	190	181	186	199	164	168	146	131
PLWHA	5,233	5,566	5,950	6,221	6,552	6,814	7,136	7,516	7,723	7,988	8,215	8,554
All deaths	116	108	127	114	126	111	133	105	123	157	106	67

I HIV (non-AIDS) = New cases of HIV infection (excluding AIDS at first diagnosis) diagnosed within a given calendar year. AIDS = All new cases of AIDS diagnosed within a given calendar year, including AIDS at first diagnosis. All deaths = Number of deaths known to have occurred among all people living with HIV infection in Minnesota, regardless of location of diagnosis and cause of death.

IINumbers include refugees in the HIV-Positive Refugee Resettlement Program and other refugees/immigrants diagnosed with AIDS subsequent to their arrival in the U.S.

These numbers refer to events, not individuals. For example, a person diagnosed as an HIV (non-AIDS) case in 2003 and then diagnosed as an AIDS case in 2008 will be counted twice in Table 4, once for each event. Thus, the numbers of HIV (non-AIDS) and AIDS cases cannot be summed over years to obtain cumulative totals. Please refer to the Minnesota HIV Surveillance Report, 2015 New HIV Infections, Table 1 for cumulative totals.

Case numbers exclude federal and private prisoners.

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