

Indicator: HIV infection rate per 100,000 population

Overview

Why is this indicator important?

Human Immunodeficiency Virus (HIV) infects the cells of the immune system, destroying them and weakening the body's ability to fight other infections or diseases. The most advanced stage of HIV infection is *Acquired Immunodeficiency Syndrome (AIDS)*. Without proper medical treatment, AIDS is a fatal condition.

How are we doing?

- In 2017 the majority of *new HIV infections* were found in *young adults* 20-24 years old and adults 25-29 and 45-49 years old.
- HIV infection is disproportionately found in minority populations, especially the *Black/African American* population.
- *Men who have sex with men (MSM)* are at the greatest risk for acquiring HIV infection. The MSM risk factor for acquiring HIV infection accounted for 55% of new HIV cases in 2017. Persons who were both injection drug users (IDU) and MSM accounted for 9% of new cases; heterosexual contact accounted for another 6% of new cases.

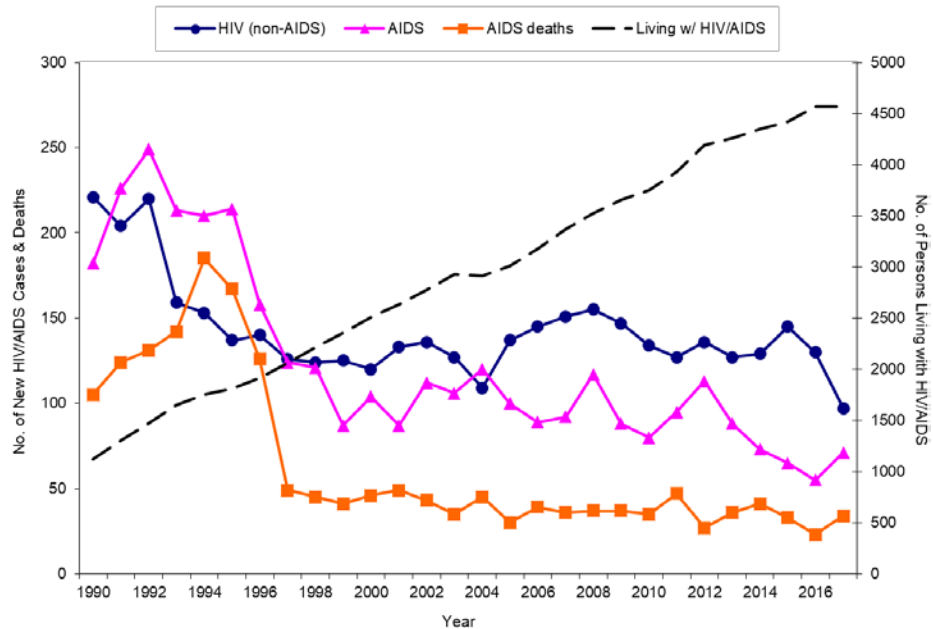
Data Source: Minnesota Department of Health – HIV/AIDS Annual Surveillance Data, 2017

Population		Rate per 100,000	Number of Cases*
Hennepin County population overall		11	130
Race/Ethnicity	American Indian	19	2
	Asian/Pacific Islander	2	2
	Black/African American	35	61
	White	5	45
	Hispanic/Latino	17	15
Age Groups	Under 10 years	0	0
	10-14 years	0	0
	15-19 years	3	2
	20-24 years	28	24
	25-29 years	25	25
	30-34 years	17	15
	35-39 years	18	14
	40-44 years	15	12
	45-49 years	21	18
	50-54 years	11	9
	55-59 years	8	6
60 years or over	3	5	
Risk Behaviors	MSM*	---	72
	Intravenous drug user (IDU) & MSM*	---	12

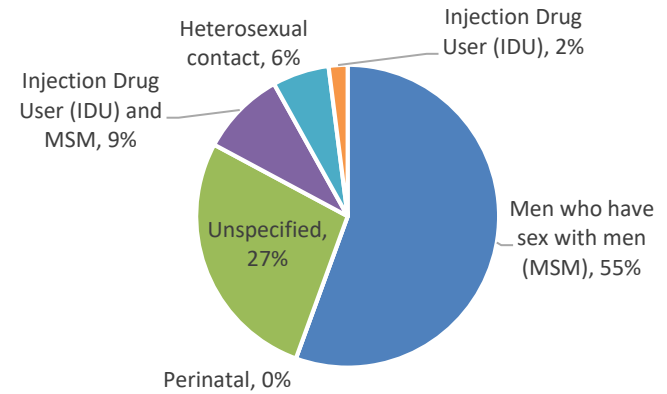
*See Technical Notes for information on the data source, limitations on reporting, and the definitions of the variables.

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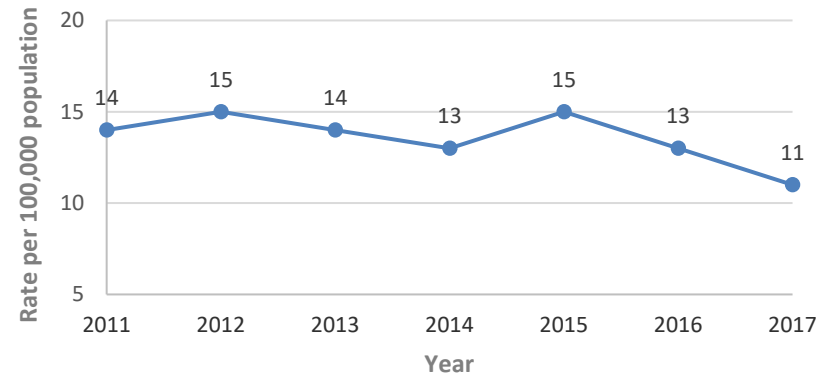
**Chart 1: HIV/AIDS in Hennepin County:
Number of New Cases, Prevalent Cases, and Deaths by Year, 1990-2017**



2017 Mode of Transmission for New HIV Infections in Hennepin County



HIV Incidence Rates in Hennepin County, 2011-2017



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Technical Notes

Definition of indicator: Hennepin County's HIV infection rate per 100,000 population includes people newly diagnosed with HIV or AIDS within a given calendar year. The infection rate does not count existing cases of people diagnosed with HIV or AIDS or people whose HIV status has changed into a diagnosis of AIDS.

Data source: Doctors, clinics, and other health services providers are required to report all laboratory-confirmed cases of HIV/AIDS to the Minnesota Department of Health (MDH). Annually, the Epidemiology unit of Hennepin County's Department of Human Services and Public Health (HSPHD) receives a database with demographic information about the reported cases. The Epidemiology unit reviews these data and produces case counts and population rates using 2010 US Census Bureau population estimates, except for rates by race. Rates by race are calculated using the US Census Bureau's Bridged Population Estimates as the base for the rates per 100,000 population. This information is reported in the Hennepin County Annual HIV/AIDS Surveillance Report. Additional information about HIV/AIDS in Hennepin County can be found at <http://www.hennepin.us/epiupdates>.

Importance of this indicator: HIV infects the cells of the immune system, destroying them (or impairing their function) and weakening the body's ability to fight other infections or diseases. The most advanced stage of HIV infection is AIDS. Without proper medical treatment, AIDS is a fatal condition. Forty five percent of the new HIV/AIDS cases reported in Minnesota in 2017 were among Hennepin County residents.

Health disparities: Men who have sex with men (MSM) are at the greatest risk for acquiring HIV infection. The MSM risk factor for acquiring HIV infection accounted for 55% of new HIV cases in 2017. Persons who were both injection drug users (IDU) and MSM accounted for 9% of new cases; heterosexual contact accounted for another 6% of new cases. HIV infection is disproportionately found in minority populations, especially the Black/African American population.

Special notes on reporting rates by race/ethnicity: The rate reported for Black/African Americans combines members from both the US-born and African-born communities; rates would be expected to be different for these two sub-groups.

Special notes on location of residence: The number of cases and rates per 100,000 population reported for new HIV infections differs notably by location of residence. For new cases of HIV, the rate for Minneapolis was 21 cases per 100,000 population compared to 11 cases per 100,000 population for Hennepin County overall. Minneapolis residents comprised 81 of the 130 cases of new HIV reported in Hennepin County in 2017.

Special notes on calculating population rates for HIV/AIDS for risk behaviors: Currently, Hennepin County HSPHD is not reporting rates per population for groups engaging in practices or behaviors that are known to be risk factors for HIV. The estimates for the base populations are not considered "robust" enough to provide an accurate or consistent basis for calculating the population rates. Hennepin County HSPHD will continue to work with MDH to develop more consist sources for building population estimates for creating and reporting these rates.

Special notes on reporting population rates versus numbers of cases for relatively small populations: Both the rate and the actual number of cases have been reported in the table appearing in this fact sheet. Given the actual size of a particular community or sub-group, the magnitude of the rate reported may be very high, where the actual number of cases is relatively small. Both of these statistics (rate and number of cases) should be compared and taken into consideration in determining the scope of the problem for smaller communities or sub-group.