

## Prevention, Treatment, and Care Program

# 2016: HIV ANNUAL SURVEILLANCE REPORT



## Acknowledgements

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UDOH also recognizes the efforts of other reporting partners including laboratories, healthcare facilities, healthcare providers, and the public, in providing communicable disease data that have contributed to this report.

UDOH's Prevention, Treatment and Care Program compiled this report. HIV/AIDS and other reportable communicable disease data for Utah are published by the UDOH, Bureau of Epidemiology.

## **Data Notes**

Data from multiple data systems was utilized to compile this report, including HIV surveillance data from the enhanced HIV/AIDS Reporting System (eHARS) and UT-NEDSS and population data from IBIS-PH (Utah's Indicator Based Information System for Public Health).

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## **Executive Summary**

This report describes new diagnoses of Human Immunodeficiency Virus (HIV) in 2016 among persons whose primary residence was in Utah at the time of their diagnosis. Data analysis assessed the demographics of new diagnoses (e.g., age, race/ethnicity, etc.) as well the geographic distribution of new cases. A few special topics related to HIV, transmission risk and Stage 3 (AIDS) diagnoses, were also analyzed. Among the findings, the following are of particular note:

- The rate of new HIV infections in Utah in 2016 was the highest since 2009
- The vast majority of new HIV infections were identified in persons living in the Wasatch front, with the great majority of those living in Salt Lake County
- Males continue to be disproportionately affected by HIV in Utah
- Young persons, ages 25 to 34, constitute the age group with the highest number and rate of new HIV infections in Utah
- Male-to-male sexual contact is the single largest transmission risk for new HIV infection in Utah
- The rate of new HIV cases whose transmission risk is unreported has risen dramatically in the last few years, especially among women
- Racial and ethnic minorities experience a heavy HIV burden in Utah
- American Indian/Alaska Native and Hispanics are more likely to progress to Stage 3 infection (AIDS) within one year of diagnosis (this indicates that HIV testing and quality healthcare services may be less accessible to these populations compared to other racial/ethnic groups)
- Overall, the rate of new HIV infections which progress to Stage 3 within one year of diagnosis is falling

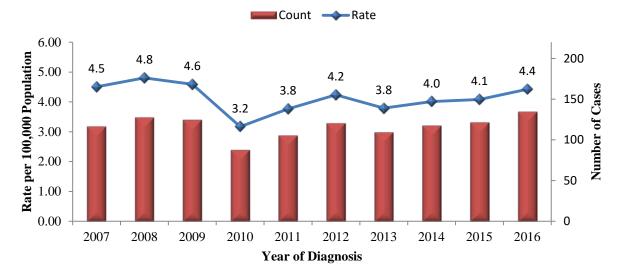
# **HIV Infection in Utah**

## Background

HIV infection continues to affect communities in Utah each year. Identifying individuals early in their HIV infection is integral to reducing the spread of HIV. UDOH collaborates with local health departments, clinical providers, community-based organizations, and laboratories to identify newly diagnosed infections of HIV through testing and disease reporting. When a new HIV diagnosis is detected, local health departments work quickly to obtain basic demographic and risk information. Keeping track of who becomes infected with HIV and how they became infected provides public health programs with the necessary knowledge to direct resources to the individuals and communities most likely to be affected by HIV.

## **New HIV Diagnoses**

In 2016, a total of 135 new infections of HIV were reported in the state of Utah for a rate of 4.4 cases per 100,000 population. Although this is the highest rate of new infection reported since 2009, Utah's burden of the nationwide HIV epidemic remains minimal. The largest number of newly diagnosed HIV infections was reported in 1990 at 293 cases for a rate of 16.9 per 100,000 population. Newly diagnosed infections have decreased in Utah since then. The rate of HIV infections dropped to its lowest level in 2010 at a rate of 3.2 cases per 100,000 population. Since then, rates have continued to slowly climb but have not yet reached pre-2010 levels. It is important to note that individuals can be infected with HIV for years before they are diagnosed. Therefore, counts and rates of new HIV diagnoses may not accurately represent infections newly acquired in a specific year.

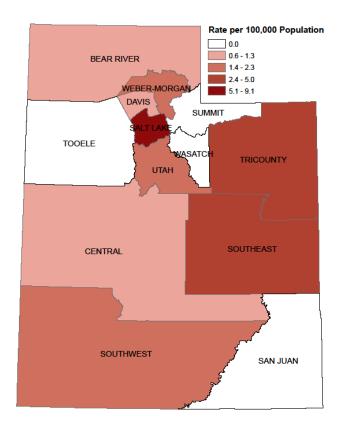


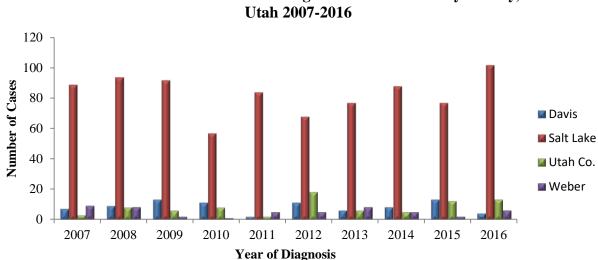
Cases and Rates of New HIV Diagnoses, Utah, 2007-2016

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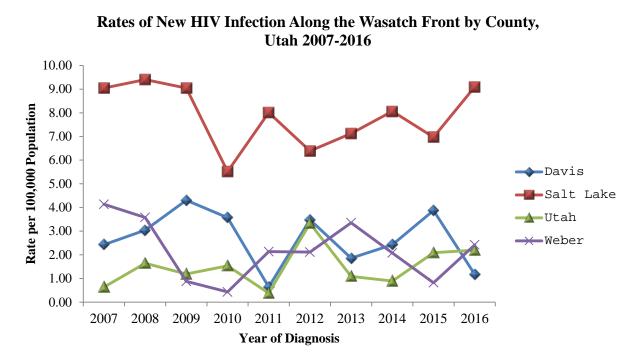
## **Geographic Distribution**

Most newly diagnosed HIV cases are reported along the Wasatch Front (Weber, Davis, Salt Lake, and Utah counties), with the majority reported in Salt Lake County. In 2016, 93% of newly diagnosed HIV cases were reported along the Wasatch Front; 76% were reported in Salt Lake County alone. The large proportion of cases in Salt Lake County drives overall state trends in new HIV diagnoses. In 2016, the largest increase in new diagnoses was experienced by Salt Lake County. Over the past 5 years, rates in Salt Lake County have increased from 6.4 to 9.4 cases per 100,000 population (68 to 102 cases reported per year). Outside the Wasatch Front, Washington County in southwestern Utah reported the most new HIV infections with 3 cases for a rate of 1.9 cases per 100,000 population. Many counties in Utah typically experience low numbers of cases without consistent trends. When the number of HIV cases is low in a county, differences in annual rates may be unreliable due to instability in the rates.



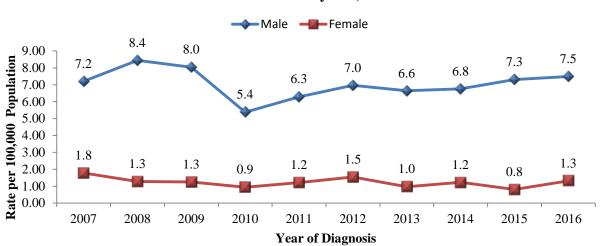


Cases of New HIV Infection Along the Wasatch Front by County,



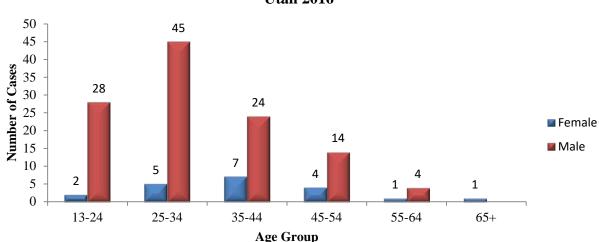
### Age and Sex

New diagnoses of HIV disproportionately affect males in Utah. From 2007-2016, cumulatively, males accounted for 85% of new HIV diagnoses and this proportion remained relatively stable during this period. Over the past 10 years, reports of newly diagnosed HIV cases in males have fluctuated. The highest rate for males was reported in 2008 with 8.4 cases per 100,000 population reported. The lowest rate during this time period was reported in 2010 at 5.4 cases per 100,000 population. In 2016, a rate of 7.5 cases per 100,000 population was reported. Although much lower, reports of newly diagnosed HIV cases among females have remained relatively stable over the past 10 years with a high of 1.8 cases per 100,000 population reported in 2007 and a low of 0.8 cases per 100,000 reported in 2015.





HIV infection can affect individuals of all ages. Nationwide, a small number of cases are reported each year in children (defined by the Centers for Disease Control and Prevention [CDC] as <13 years of age) and those 65 or older. In 2016, the age groups with the largest burden of disease in Utah included 13-24, 25-34, and 35-44. For males, the age group with the largest number of reported cases was the 25-34 age group. The number of cases in this age group has been steadily growing over the last 10 years with a drop in 2010. A low of 7.0 cases per 100,000 population was reported for this age group in 2010. This has increased to 19.8 cases per 100,000 population reported in 2016. Other age groups among males have either decreased or remained relatively stable with the exception of the 13-24 age group. At a rate of 9.2, this age group experienced the largest increase in rate from 2015 to 2016. Females are diagnosed at an older age than males on average. In 2016, the age group with the highest burden of new HIV infections for females was the 35-44 age group.

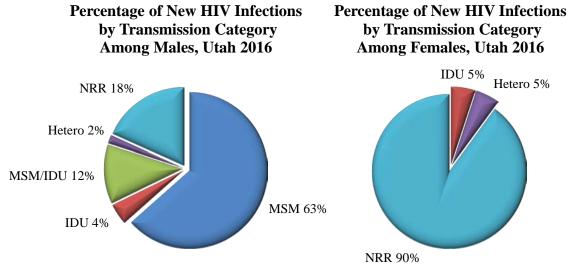


Cases of New HIV Infection Among Females and Males by Age Group, Utah 2016

### **Transmission Category**

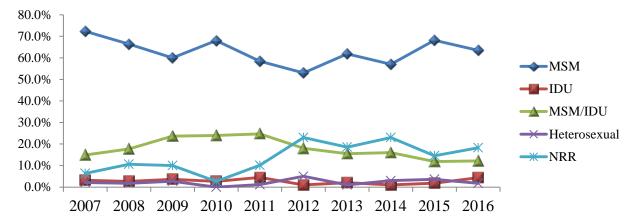
Each newly identified case of HIV is routinely interviewed to identify risk. A transmission category is then assigned to the case. The transmission category is the most likely way the person in question acquired HIV. Transmission categories are defined by the CDC, and the six transmission categories include: male-to-male sexual contact, heterosexual contact, injection drug use (IDU), male-to-male sexual contact and injection drug use, perinatal (mother-to-child transmission), and other (includes persons who received a transfusion or plasma product). Heterosexual contact is defined as sexual contact with a person known to have, or to be at high risk for, HIV infection. Risk and transmission category can be difficult to ascertain as individuals may not know how they acquired HIV or be unwilling to divulge sensitive information. However, this information is important as it enables programs to direct interventions to address how HIV is being transmitted in Utah. Cases who do not report a risk or are not thoroughly interviewed are categorized as no reported risk (NRR).

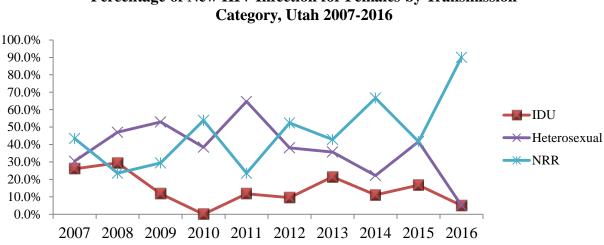
Due to how HIV is acquired, transmission category varies significantly by sex. Men who have sex with men (MSM) continue to be disproportionately affected by HIV in Utah. In 2016, 63% of males with HIV in Utah were categorized as male-to-male sexual contact, followed by NRR at 18%, male-to-male sexual contact and injection drug use at 12%, IDU at 4%, and heterosexual contact at 3%. For females, 90% were categorized as NRR, 5% heterosexual contact, and 5% IDU.



Over the last several years, the percentage of cases reporting NRR has increased significantly. In 2011, only 10% of cases reported NRR; this increased in 2012 to 23%. In 2016, 29% of cases were categorized as NRR, including the highest proportion among females in the 10 year time frame. It is worth noting that CDC only considers heterosexual contact with a person known to have, or to be at high risk for, HIV infection as a transmission category. In 2016, 25% of female cases reported heterosexual sexual contact which did not fall into the CDC definition of heterosexual contact as the sexual partner was not known to have, or to be at high risk for, HIV infection. Among males, the percentage was 17%. For the other 'NRR' cases, there was no available transmission risk information in Utah's disease surveillance system.

Percentage of New HIV Infection Among Males by Transmission Category, Utah 2007-2016

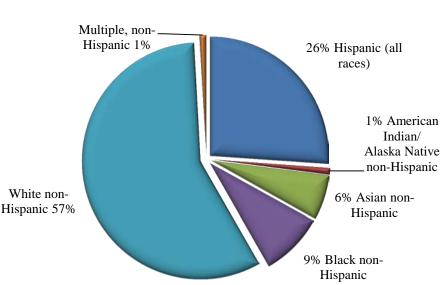




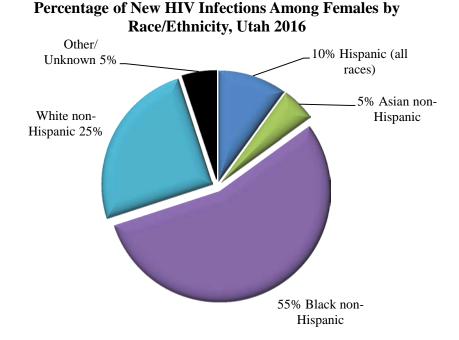
# Percentage of New HIV Infection for Females by Transmission

## **Race and Ethnicity**

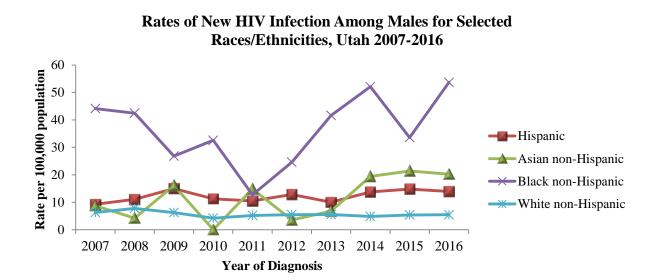
In 2016, 53% (71 cases) of new HIV diagnoses reported in Utah were among White non-Hispanic individuals. Looking only at males, 57% (66 cases) of new HIV cases were reported in White non-Hispanics, followed by Hispanics at 26% (30 cases), Black non-Hispanics at 9% (10 cases), and Asian non-Hispanics at 6% (7 cases). Compared with males, a higher percentage of cases were reported in Black non-Hispanic females (55%, 11 cases). A lower percentage of cases were reported in White non-Hispanic females (25%, 5 cases), Hispanic females (10%, 2 cases) and Asian non-Hispanic females (5%, 1 case). It is worth noting that the number of cases among Black non-Hispanic females in 2016 is more than twice the previous 5-year average (2011-2015).

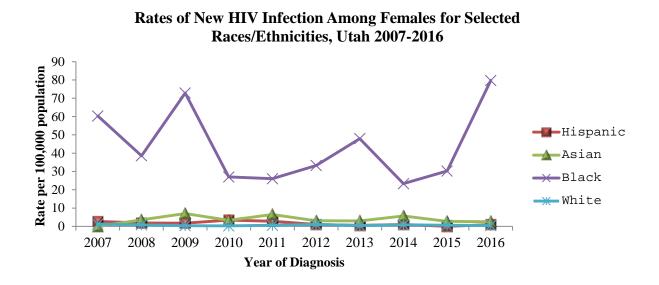


#### Percentage of New HIV Infections Among Males by Race/Ethnicity, Utah 2016



While the majority of cases were reported in White non-Hispanics, Black non-Hispanics are disproportionately affected. In 2016, the rate among Black non-Hispanic males was 53.7 cases per 100,000 population and the rate for Black non-Hispanic females was 79.7 cases per 100,000 population. In comparison, the rate for white non-Hispanic males was 5.5 cases per 100,000 population and for white non-Hispanic females the rate was 0.4 cases per 100,000 population. Most racial/ethnic groups had rates comparable to past years. The increases among the Black non-Hispanic population (particularly women) are alarming.



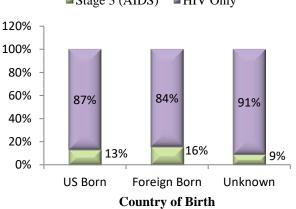


### Stage 3 Infection (AIDS) at HIV Diagnosis

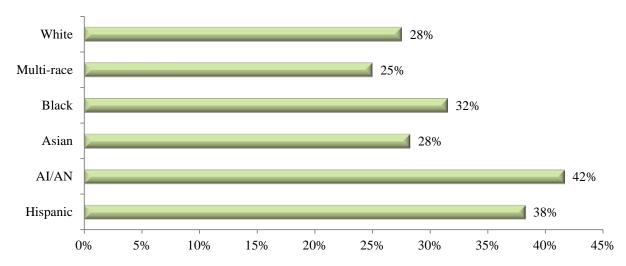
Due to the development of anti-retroviral medications, many people who have been diagnosed with "AIDS" are actually no more immunocompromised than any other person living with HIV. The term Stage 3 infection is now used to refer to persons who have ever met the criteria for AIDS regardless of their current immune-status. Having a Stage 3 infection at the time of HIV diagnosis is an indication of late testing. Ideally, individuals who become infected with HIV should be tested and notified of their infection status shortly after infection. People infected with HIV who progress to stage 3 prior to HIV diagnosis are considered to have prolonged infection without being tested. People unaware of their HIV infection status are more likely to continue to spread HIV and have poor health outcomes.

In 2016, a slightly higher percentage (16%) of foreign-born people had Stage 3 infection at diagnosis compared with native-born people (13%). This disparity is less than what was seen in 2014, when 43% of foreign-born persons had stage 3 infection at diagnosis. Hispanics and Native Americans both experienced a proportionately high percentage (38% and 42% respectively) of cases reported with AIDS at HIV diagnosis.

#### Percentage of Cases in Stage 3 (AIDS) at Time of Diagnosis by Foreign-Born Status, Utah 2016

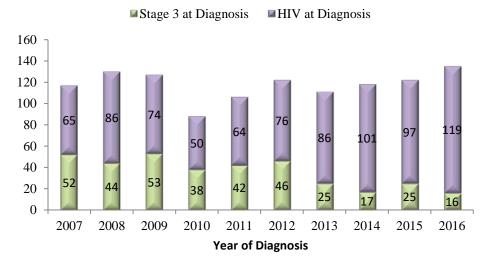


## Stage 3 (AIDS) HIV Only



Percent of New Cases with Stage 3 Infection (AIDS) at Diagnosis by Race/Ethnicity, Utah 2007-2016

The percentage of new cases with stage 3 infection at diagnosis in 2016 was the lowest it has been in the ten year period analyzed in this report (2007-2016). Although CDC defines "AIDS at diagnosis" as having an AIDS defining condition or CD4+ T-lymphocyte laboratory result within 30 days of HIV diagnosis, this analysis also includes persons who qualify as Stage 3 within the first year of diagnosis. The reason for this modification is that many individuals who are diagnosed with HIV do not return to see their doctor within the 30 day time period. A period of one year was chosen to capture these individuals in the analysis and was considered appropriate considering the very low likelihood of a new HIV infection progressing to Stage 3 in less than three years.



#### Number of Cases Diagnosed with State 3 (AIDS) and HIV, Utah 2007-2016

	20	07	20		20		20		20		20	12	20	13	20	14	20	15	20	16
County	Cases	Rate																		
Beaver	_	_	_	_	_	_	_	_	_	—	_	_	_	_	_	—	_	-	_	—
Box Elder	1	2.1	1	2.1	1	2.0	2	4.0	-	—	3	6.0	-	_	_	—	1	1.9	_	—
Cache	1	1.0	-	_	4	3.6	2	1.8	2	1.7	1	0.9	4	3.4	1	0.8	1	0.8	1	0.8
Carbon	_	_	_	_	1	4.7	_	—	_	_	_	_	1	4.8	_	_	2	9.8	2	9.8
Daggett	_	_	-	_	_	_	_	_	-	_	-	_	-	_	_	_	_	_	_	_
Davis	7	2.4	9	3.0	13	4.3	11	3.6	2	0.6	11	3.5	6	1.9	8	2.4	13	3.9	4	1.2
Duchesne	_	_	-	_	_	_	_	_	1	5.4	1	5.3	-	_	_	_	1	4.8	_	_
Emery	_	_	-	_	_	_	_	—	_	—	_	_	_	_	_	_	-	_	_	_
Garfield	_	_	-	_	_	_	1	19.3	-	—	_	_	_	_	_	—	_	_	_	-
Grand	2	22.6	_	_	_	_	_	_	-	—	_	_	_	_	1	10.6	1	10.5	_	_
Iron	_	_	1	2.2	_	_	_	_	-	_	_	_	1	2.1	2	4.2	1	2.1	_	-
Juab	_	_	_	_	_	_	_	_	-	—	1	9.7	_	_	_	_	_	_	_	_
Kane	_	_	_	_	1	14.3	_	_	-	_	_	_	_	_	_	_	_	_	1	13.6
Millard	_	_	-	—	_	_	1	8.0	-	—	_	—	_	_	1	8.0	_	_	1	7.9
Morgan	_	_	1	11.0	-	_	-	_	-	—	-	—	-	_	-	—	-	-	-	-
Piute	_	_	-	_	_	_	_	_	-	—	_	—	_	_	_	—	_	_	_	_
Rich	_	_	-	_	-	-	-	_	-	_	-	_	-	_	-	_	-	_	-	-
Salt Lake	89	9.0	94	9.4	92	9.0	57	5.5	84	8.0	68	6.4	77	7.1	88	8.1	77	7.0	102	9.1
San Juan	_	—	1	6.9	_	-	_	_	-	_	1	6.7	1	6.7	_	_	-	-	_	-
Sanpete	-	—	1	3.7	_	—	_	—	-	—	-	- 1	-	—	-	—	1	3.5	_	-
Sevier	-	_	-	_	_	-	_	_	1	4.8	-	-	-	_	_	_	-	_	-	-
Summit	-	—	1	2.8	-	—	1	2.7	2	5.3	-	-	1	2.6	1	2.6	1	2.5	-	-
Tooele	1	1.9	2	3.6	2	3.5	2	3.4	4	6.7	3	5.0	1	1.6	2	3.2	1	1.6	_	-
Uintah	1	3.3	-	-	1	3.0	-	—	-	—	1	2.9	3	8.4	-	_	-	_	2	5.5
Utah	3	0.6	8	1.6	6	1.2	8	1.5	2	0.4	18	3.3	6	1.1	5	0.9	12	2.1	13	2.2
Wasatch	-	—	-	—	-	—	-	—	-	—	-	-	-	—	-	—	-	—	-	-
Washington	3	2.3	1	0.7	2	1.5	2	1.4	3	2.1	7	4.8	1	0.7	4	2.6	8	5.1	3	1.9
Wayne	-	—	-	-	-	—	-	—	-	—	1	36.7	-	—	-	_	-	—	-	-
Weber	9	4.1	8	3.6	2	0.9	1	0.4	5	2.1	5	2.1	8	3.4	5	2.1	2	0.8	6	2.4
Unknown	_	_	2	n/a	2	n/a	_		-	_	1	n/a	1	n/a	_		_		_	
Utah State Total	117	4.5	130	4.9	127	4.7	88	3.2	106	3.8	122	4.3	111	3.8	118	4.0	122	4.1	135	4.4

 Table 1. Counts and Rates of New HIV Diagnoses by County, Utah, 2007-2016

							0		0		•	0								
	20	07	20	08	20	09	20	10	20	11	20	12	20	13	20	14	20	15	20	16
Age Group	Cases	Rate																		
<13	1	0.3	1	0.3	-	-	2	0.6	-	-	-	_	2	0.6	-	-	-	-	-	-
13 - 24	12	4.5	16	5.9	16	5.9	16	5.9	21	7.6	15	5.3	16	5.5	18	6.1	13	4.4	28	9.2
25 - 34	27	12.7	34	15.5	37	16.4	16	7.0	24	10.5	37	16.5	41	18.4	43	19.3	44	19.7	45	19.8
35 - 44	30	18.9	33	20.4	30	18.1	26	15.2	22	12.5	14	7.6	19	10.0	22	11.2	31	15.3	24	11.5
45 - 54	18	12.1	22	14.6	18	11.8	11	7.2	18	11.8	23	15.0	13	8.5	9	5.9	16	10.3	14	8.8
55 - 64	5	4.8	6	5.5	7	6.2	3	2.5	3	2.4	11	8.6	5	3.8	6	4.4	5	3.6	4	2.8
65+	1	1.0	1	0.9	2	1.8	1	0.9	1	0.8	-	_	1	0.8	2	1.5	1	0.7	-	—
Male Total	94	7.2	113	8.4	110	8.0	75	5.4	89	6.3	100	7.0	97	6.6	100	6.8	110	7.3	115	7.5

Table 2a. Counts and Rates of New HIV Diagnoses Among Males by Age Group, Utah, 2007-2016

 Table 2b. Counts and Rates of New HIV Diagnoses Among Females by Age Group, Utah, 2007-2016

	20	07	20	08	20	09	20	10	20	11	20	12	20	13	20	14	20	15	20	16
Age Group	Cases	Rate																		
<13	-	-	-	-	1	0.3	1	0.3	1	0.3	-	-	-	-	1	0.3	-	-	1	-
13 - 24	3	1.2	1	0.4	1	0.4	0	0.0	2	0.7	2	0.7	3	1.1	2	0.7	1	0.4	2	0.7
25 - 34	9	4.4	8	3.8	7	3.3	4	1.8	7	3.2	6	2.8	3	1.4	5	2.3	3	1.4	5	2.3
35 - 44	7	4.6	4	2.6	6	3.8	6	3.6	2	1.2	10	5.7	5	2.7	7	3.7	4	2.0	7	3.5
45 - 54	2	1.3	2	1.3	2	1.3	1	0.6	2	1.3	2	1.3	2	1.3	2	1.3	3	2.0	4	2.6
55 - 64	2	1.9	2	1.8	-	_	1	0.8	3	2.3	1	0.8	1	0.7	1	0.7	1	0.7	1	0.7
65+	_	—	_	—	-	_	-	_	-	_	1	0.7	-	_	-	—	-	_	1	0.6
Female Total	23	1.8	17	1.3	17	1.3	13	0.9	17	1.2	22	1.5	14	1.0	18	1.2	12	0.8	20	1.3

	20	07	20	08	20	09	20	10	20	11	20	12	20	13	20	14	20	15	20	16
Transmission Category	Cases	Rate																		
MSM	68	5.2	75	5.6	66	4.8	51	3.7	52	3.7	53	3.7	60	4.1	57	3.9	75	5.0	73	4.8
IDU	3	0.2	3	0.2	4	0.3	2	0.1	4	0.3	1	0.1	2	0.1	1	0.1	2	0.1	5	0.3
MSM/IDU	14	1.1	20	1.5	26	1.9	18	1.3	22	1.6	18	1.3	15	1.0	16	1.1	13	0.9	14	0.9
Heterosexual	2	0.2	2	0.1	3	0.2	_	_	1	0.1	5	0.3	1	0.1	3	0.2	4	0.3	2	0.1
NIR	6	0.5	12	0.9	11	0.8	2	0.1	9	0.6	23	1.6	18	1.2	23	1.6	16	1.1	21	1.4
Perinatal	1	0.1	1	0.1	_	_	2	0.1	1	0.1	_	-	1	0.1	_	-	-	-	-	—
Total	94	7.2	113	8.4	110	8.0	75	5.4	89	6.3	100	7.0	97	6.6	100	6.8	110	7.3	115	7.5

Table 3a. Counts and Rates of New HIV Diagnoses Among Males by Transmission Category, Utah, 2007-2016

Table 3b. Counts and Rates of New HIV Diagnoses Among Females by Transmission Category, Utah, 2007-2016

								0	1	-							1		1	
	200		20	08	20	09	20	10	20	11	20	12	20	13	20	14	20	15	20	16
Transmission Category	Cases	Rate																		
IDU	6	0.5	5	0.4	2	0.1	0	0.0	2	0.1	2	0.1	3	0.2	2	0.1	2	0.1	1	0.1
Heterosexual	7	0.5	8	0.6	9	0.7	5	0.4	11	0.8	8	0.6	5	0.3	4	0.3	5	0.3	1	0.1
NIR	10	0.8	4	0.3	5	0.4	7	0.5	4	0.3	11	0.8	6	0.4	12	0.8	5	0.3	18	1.2
Perinatal	-	-	-	-	1	0.1	1	0.1	_	_	_	_	_	_	_	_	_	-	_	-
Total	23	1.8	17	1.3	17	1.3	13	0.9	17	1.2	21	1.5	14	1.0	18	1.2	12	0.8	20	1.3

	20	07	20	08	20	09	20	10	20	11	20	12	20	13	20	14	20	)15	20	16
Race/Ethnicity	Cases	Rate																		
Hispanic (all races)	15	9.3	19	11.1	27	15.0	21	11.3	20	10.5	25	12.8	20	10.0	28	13.8	31	14.8	30	13.9
American Indian/Alaska Native	3	22.8	-	-	1	7.5	-	-	-	-	4	29.7	-	-	-	-	2	14.1	1	6.7
Asian	2	8.8	1	4.2	4	16.1	-	-	4	14.9	1	3.6	2	6.8	6	19.4	7	21.4	7	20.2
Black	6	44.1	6	42.4	4	26.8	5	32.6	2	12.7	4	24.6	7	41.6	9	52.1	6	33.6	10	53.7
Native Hawaiian/Pacific Islander	-	-	1	8.6	-	_	_	_	1	7.8	1	7.6	_	-	-	-	_	-	-	-
White	67	6.3	84	7.8	69	6.3	47	4.2	59	5.2	63	5.5	64	5.5	57	4.9	64	5.4	66	5.5
Multiple	1	5.0	-	-	4	17.8	2	8.4	3	12.1	2	7.8	4	14.9	-	-	-	-	1	3.2
Other/Unknown	_	_	2	_	1	_	_	_	-	-	_		_	-	-	_	_	_	-	-
Total	94	7.2	113	8.4	110	8.0	75	5.4	89	6.3	100	7.0	97	6.6	100	6.8	110	7.3	115	7.5

Table 4a. Counts and Rates of New HIV Diagnoses Among Males by Race/Ethnicity, Utah, 2007-2016

Table 4b. Counts and Rates of New HIV Diagnoses Among Females by Race/Ethnicity, Utah, 2007-2016

	20	07	20	08	20	09	20	10	20	11	20	12	20	13	20	14	20	015	20	16
Race/Ethnicity	Cases	Rate																		
Hispanic (all races)	4	2.7	3	1.9	3	1.8	6	3.4	5	2.8	2	1.1	1	0.5	2	1.0	_	_	2	1.0
American Indian/Alaska Native	-	-	-	-	-	—	-	_	-	_	1	0.1	-	_	-	-	-	_	-	_
Asian	-	-	1	3.6	2	7.0	1	3.4	2	6.4	1	3.1	1	3.0	2	5.7	1	2.7	1	2.6
Black	6	60.3	4	38.6	8	72.9	3	27.0	3	26.0	4	33.2	6	47.9	3	23.3	4	30.2	11	79.7
Native Hawaiian/Pacific Islander	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
White	13	1.2	9	0.8	4	0.4	3	0.3	7	0.6	12	1.1	5	0.4	10	0.9	7	0.6	5	0.4
Multiple	-	-	-	-	-	-	-	-	-	-	2	7.9	1	3.8	-	-	-	-	-	-
Other/Unknown	_	_	-	_	-	_	_		-	_	_		_	_	1	_	_	_	1	-
Total	23	1.8	17	1.3	17	1.3	13	0.9	17	1.2	22	1.5	14	1.0	18	1.2	12	0.8	20	1.3