HIV/AIDS: A Health Disparity in the Hispanic/Latino population as compared to the General Population in Massachusetts

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What is Human Immunodeficiency Virus (HIV) & Acquired Immunodeficiency Syndrome (AIDS)?

- Retrovirus present in sexual body fluids, breast milk, and blood
- Invades the helper T cells (CD4 cells) in the body of the host
- HIV is the virus that causes AIDS
- Diagnosed when a patient shows presence of one of the opportunistic infections or a CD4 cell count less than 250 cells
- Disease limits the body’s ability to fight infection
What is a health disparity?

- The incidence of a health condition or disease that is greater for one group than the general population, or a predominant group.

- National Institute of Health
  - “Health disparities often affect groups of people who have systematically experienced greater obstacles to health based on their racial or ethnic group; religion; socioeconomic status; gender; age; mental health; cognitive, sensory, or physical disability; sexual orientation or gender identity; geographic location; or other characteristics historically linked to discrimination or exclusion.”
People Diagnosed with HIV Infection Within the Years 2008-2010 by Exposure Mode: Massachusetts

General Population

Hispanics/Latinos

Massachusetts Department of Public Health Office of HIV/AIDS 2012 Update
Classification of Hispanic/Latino

- Persons of Cuban, Mexican, Puerto Rican, South American, Central American, or other Spanish culture or origin, regardless of race.

- Hispanic/Latino population is disproportionately affected at all HIV/AIDS disease stages - even though they make up 10% of Massachusetts population, they make up 24% of people living with HIV/AIDS in Massachusetts.
The Disparity

A cumulative total of 19,165 MA residents have been diagnosed and reported with HIV/AIDS.

Hispanic/Latino Population is disproportionately affected at all HIV/AIDS disease stages:

- HIV Infection
- AIDS Diagnosis
- Prevalence HIV/AIDS
- Mortality

Massachusetts Department of Public Health Office of HIV/AIDS 2013 Update
Public Health Factors

Adult Health and Health Care Reports

2012 Massachusetts Behavioral Risk Factors Surveillance System (BRFSS) Data
Health Behavioral Risk Factors

- **Contraceptive Usage & Sexual Activity**

Of 2,659 sexually active respondents to the 2011 BRFSS, sexually active respondents 18-64 years, 25% reported using a condom during their last sexual encounter. A greater proportion of Black (non-Hispanic) respondents (31%), compared to White (non-Hispanic) respondents (25%) and Hispanic/Latino respondents (21%).

- **Substance Abuse & Usage**

Among Hispanic/Latino people living with HIV/AIDS, the predominant risk for HIV infection is injection drug use (32%). A lower proportion of White (non-Hispanic) respondents (27%), compared to Black (non-Hispanic) respondents (16%).
Estimated Rates (per 100,000) HIV Infection & AIDS Diagnosis, by Race/Ethnicity, 2011

<table>
<thead>
<tr>
<th></th>
<th>Hispanic/Latino</th>
<th>White</th>
<th>Overall State Average</th>
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<tbody>
<tr>
<td>Hispanic/Latino</td>
<td>64.5</td>
<td>10.1</td>
<td>22.5</td>
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<tr>
<td>White</td>
<td></td>
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<tr>
<td>Overall State</td>
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<tr>
<td>Average</td>
<td>29.6</td>
<td>5.3</td>
<td>11.9</td>
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The Henry J. Kaiser Family Foundation 2013
Highest HIV Infection: Who & Where?

Locations with the highest proportions of Hispanic/Latino individuals diagnosed with HIV infection between 2009 to 2011:

- Lawrence
- Chelsea
- Holyoke
- Springfield
- Lynn

MDPH HIV/AIDS Surveillance Program, Data as of 1/1/11
The age adjusted rates of HIV/AIDS among the Hispanic/Latino population is 914.3 per 100,000 population which is 7 times greater than that among the White (non-Hispanic) population of 134.7 per 100,000.
The Hispanic population have HIV/AIDS mortality rates at 13.3 deaths per 100,000 population age-adjusted for 2009-2011 which is 7 times greater than the White (non-Hispanic) population.
Treatments

- There is no “cure” for HIV/AIDS
- Anti-Retroviral Therapies (ART) improve lives by dramatically slowing disease progression
- Drug therapy biological research done by John L. Sullivan, M.D.
  - Groundbreaking researcher
  - Conducted some of the earliest research on HIV
  - Developed medication that cured baby born with HIV
- Drug Assistance Program (DAP) helps positive individuals with limited income get medication. For 2012, the income limit is $55,850 for an individual.
# Distribution of HIV/AIDS Drug Assistance Program (DAP) Clients, June 2013

<table>
<thead>
<tr>
<th>Black/African American</th>
<th>Non-Hispanic/White</th>
<th>Hispanic</th>
<th>Asian</th>
<th>Native Hawaiian/Pacific Islander</th>
<th>American Indian/Alaskan Native</th>
<th>Multi-Racial</th>
<th>Other</th>
<th>Unknown</th>
<th>Total # Clients Served, June 2013</th>
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</thead>
<tbody>
<tr>
<td>27%</td>
<td>41%</td>
<td>26%</td>
<td>2%</td>
<td>0.05%</td>
<td>0.1%</td>
<td>1%</td>
<td>2%</td>
<td>1%</td>
<td>4,153</td>
</tr>
</tbody>
</table>

The Henry J. Kaiser Family Foundation 2013
Trends

Figure 4. People Diagnosed with HIV Infection by Race/Ethnicity and Year of Diagnosis: Massachusetts, 2003–2012

Data Source: MDPH HIV/AIDS Surveillance Program; Data as of 1/1/14
Summary

Hispanic/Latino population in Massachusetts is disproportionately affected at all HIV/AIDS disease stages.

What needs to be done:
- Reduce stigma: Increase education on sexual & substance abuse risk behavior
- Increase HIV testing → Early detection → Early treatment → More effective treatment & Better health outcomes
- Education → Income → Health

Programs in Massachusetts
- Community Research Initiative
- AIDS Project Worcester Inc
- Multicultural AIDS Coalition
Questions
References