OVERVIEW
At the end of 2014, an estimated 5,610 cases were living with HIV/AIDS in Oklahoma. Of these, 52.9% (2,968) were HIV cases and 47.1% (2,642) were AIDS cases. The rate of cases living with HIV/AIDS was 144.7 cases per 100,000 population. Of the 9,783 cumulative cases diagnosed in Oklahoma, 42.7% (4,173) were known to have died.

BY SEX
Males accounted for 82.5% (4,629) of the HIV/AIDS cases living in Oklahoma, while females only accounted for 17.5% (981). The rate of males (241.1 cases per 100,000 population) living with HIV/AIDS in Oklahoma was 4.8 times higher than the rate of females (50.1 cases per 100,000 population). Almost half of the persons living with HIV/AIDS were White males (2,714; 48.4%) and approximately 20% were Black males (1,085; 19.3%). White females accounted for 8.0% (450) and Black females accounted for 5.7% (320) of the living HIV/AIDS cases. Of the race/sex groups, Black males had the highest rate of living HIV/AIDS (756.7 cases per 100,000), followed by Black females (223.2 cases per 100,000), and White males (212.3 cases per 100,000).

BY AGE
Considering age at time of diagnosis, adults in the 20-29 years age group (1,985; 35.4%) and the 30-39 years age group (1,921; 34.2%) combined to account for nearly 70% of the living HIV/AIDS cases. The 40-49 years age group accounted for 17.6% (985) of the living cases and the 50-59 years age group accounted for 6.3% (354). Approximately 4% (219; 3.9%) of living cases were diagnosed as teenagers (13-19 years), while children 12 years and under (62) only accounted for 1.1% of living cases. Less than 2% (82; 1.5%)...
LIVING HIV/AIDS CASES IN 2014

The rate of living HIV/AIDS cases among Black females was 6.5 times higher than among White females.

Cases currently between 40 and 59 years of age account for 57.5% of the living cases.

White males accounted for 48.4% of the living HIV/AIDS cases.

The rate of living HIV/AIDS cases among Black females was 6.5 times higher than among White females.

Considering current age group of individuals living with HIV/AIDS rather than the age at diagnosis, adults 40-49 years of age (1,641; 29.3%) have the highest burden of living HIV/AIDS cases in Oklahoma, followed by 50-59 years of age (1,584; 28.2%) and 30-39 years of age (1,079; 19.2%). The 20-29 years age group (675) accounted for 12.0% and the 60 years and over (567) accounted for 10.1%.

Teenagers (35; 0.6%) and children 12 years and under (29; 0.5%) accounted for 1.1% of the living HIV/AIDS cases. The 40-49 years age group had the highest rate of 354.8 cases per 100,000, followed by the 50-59 years age group at 306.6 cases per 100,000.

BY RACE/ETHNICITY

Of the 5,610 persons living with HIV/AIDS at the end of 2014:

- 56.4% (3,164) were White,
- 25.0% (1,405) were Black,
- 8.3% (463) were Hispanic,
- 5.9% (332) were American Indian/Alaska Native,
- 1.1% (62) were Asian/Pacific Islander, and
- 3.3% (184) were Multi Race.

At the end of 2014, Blacks had the highest rate of living HIV/AIDS cases (490.0 cases per 100,000) among the racial/ethnic groups in Oklahoma. Whites (121.7 cases per 100,000) had the second highest rate, followed closely by Hispanics (121.4 cases per 100,000). The rate among American Indians/Alaska Natives was 104.2 cases per 100,000 and the rate among Multi Race was 88.4 per 100,000.

Asians/Pacific Islanders had the lowest rate of persons living with HIV/AIDS (74.2 cases per 100,000) in Oklahoma. Blacks are disproportionately affected by HIV/AIDS in Oklahoma as the rate for Blacks living with HIV/AIDS was 3.4 times the rate for the entire state (144.7 cases per 100,000) and 4.0 times the rate of Whites living with HIV/AIDS in Oklahoma.
LIVING HIV/AIDS CASES IN 2014

BY MODE OF TRANSMISSION
Of the 5,610 HIV/AIDS cases living in Oklahoma:
- 54.1% (3,036) were MSM\(^1\),
- 12.1% (679) were heterosexual contact,
- 9.1% (508) were IDU\(^2\),
- 8.5% (475) were MSM and IDU,
- 0.7% (41) were perinatal,
- 0.6% (33) were blood recipients, and
- 14.9% (838) were no reported risk or no identified risk.

Of the 3,036 living HIV/AIDS cases classified as MSM, Whites accounted for 61.1% (1,855), followed by Blacks (672; 22.1%) and Hispanics (212; 7.0%). Of the living cases classified as heterosexual contact, Whites (297; 43.7%) accounted for the most cases, followed by Blacks (226; 33.3%), and Hispanics (74; 10.9%). The majority of cases classified as IDU were White (309; 60.8%), followed by Black (80; 15.7%) and American Indian/Alaska Native (52; 10.2%).

Among males, MSM (3,036; 65.6%) was the most commonly reported risk factor, followed by heterosexual contact (555; 12.0%), and cases who reported both MSM and IDU (475; 10.3%). Among females, heterosexual contact (448; 45.7%) was the most commonly reported risk factor, followed by IDU (217; 22.1%).

BY GEOGRAPHY
Approximately 70% of the living HIV/AIDS cases in Oklahoma reside in three counties: Oklahoma (2,118; 37.8%), Tulsa (1,500; 26.7%), and Cleveland (359; 6.4%). Oklahoma County had the highest rate of cases living with HIV/AIDS (276.4 cases per 100,000), while Tulsa County had the second highest rate of cases living with HIV/AIDS cases (238.2 cases per 100,000).

Almost 85% of the living HIV/AIDS cases (4,552; 84.7%) resided in counties within one of the MSAs in Oklahoma. The Oklahoma City MSA\(^3\) accounted for the largest proportion of cases (2,740; 48.8%) and the largest rate (205.0 cases per 100,000) among the MSAs. The Tulsa MSA accounted for 31.4% (1,760) of living cases and had the second highest rate at 181.6 cases per 100,000 and the Lawton MSA accounted for 3.4% (190) of cases.

Approximately 16% (854; 16.4%) of the living HIV/AIDS cases resided in counties outside of these MSAs in Oklahoma.

80.2% of living cases reside in the Oklahoma City MSA or Tulsa MSA.

Oklahoma County had the highest rate of living HIV/AIDS cases.

\(^1\)Men who have sex with men; \(^2\)Injection drug user; \(^3\)Metropolitan Statistical Area