



HIV TESTING AMONG LOS ANGELES COUNTY ADULTS

Human immunodeficiency virus (HIV) and acquired immunodeficiency syndrome (AIDS) are major causes of illness and death in the United States and in Los Angeles County. Over the past two decades, HIV/AIDS has become a nationwide epidemic disproportionately affecting persons of color, particularly African Americans. In Los Angeles County, African Americans have the highest HIV and AIDS rates. However, Latinos make up the highest percentage and number of new AIDS cases diagnosed annually since 1997,¹ reflecting the county's large Latino population.

Nationally, the epidemic has also shifted to affect a greater proportion of adolescents and heterosexual men and women who frequently are unaware that they are at risk for HIV.² In LA County, however, HIV/AIDS remains concentrated among men who have sex with men, with 80% of new reports occurring in this population.¹

HIV testing is a critical component of HIV prevention and control efforts. The U.S. Centers for Disease Control and Prevention (CDC) estimates that more than one million people in the U.S. now live with HIV, but one quarter of these individuals are unaware of their infection.³ Through testing, public health professionals and clinicians link people at risk for infection with prevention counseling and services, and direct infected individuals toward care and treatment that can increase their lifespan and improve their quality of life. Recently, CDC recommended that all individuals ages 13-64 years be routinely, voluntarily tested for HIV.⁴

Who is Getting Tested for HIV?

Results from the 2005 Los Angeles County Health Survey (LACHS) estimate that nearly 1 out of every 3 adults 18 years or older reported being tested for HIV during the past 2 years. (Participants

TABLE 1 Percent of Adults who Reported Being Tested for HIV in the Past 2 Years

	2002-03	2005
Los Angeles County	31.8%	31.2%
Gender		
Male	31.1%	30.0%
Female	32.5%	32.3%
Age Group		
18-24	41.1%	41.8%
25-29	47.5%	45.8%
30-39	43.8%	40.9%
40-49	29.7%	31.0%
50-59	20.7%	22.8%
60-64	18.3%	17.1%
65 or over	9.8%	9.1%
Race/Ethnicity		
Latino	39.0%	36.6%
White	24.2%	24.2%
African American	45.6%	50.5%
Asian/Pacific Islander	20.1%	18.3%
Federal Poverty Level[§]		
0-99% FPL	38.5%	42.8%
100%-199% FPL	33.5%	30.1%
200%-299% FPL	28.9%	25.9%
300% or above FPL	28.6%	27.8%
Service Planning Area		
Antelope Valley	38.5%	30.7%
San Fernando	28.8%	27.2%
San Gabriel	24.0%	24.4%
Metro	39.7%	36.5%
West	31.7%	25.8%
South	41.9%	44.1%
East	33.1%	33.4%
South Bay	32.6%	33.4%

[§] Based on U.S. Census 2003 Federal Poverty Level (FPL) thresholds which for a family of four (2 adults, 2 dependents) correspond to annual incomes of \$18,700 (100% FPL), \$37,300 (200% FPL) and \$56,500 (300% FPL).

1. Los Angeles County Department of Public Health, HIV Epidemiology Program

2. Institute of Medicine. No time to lose: getting more from HIV prevention. Washington, DC: National Academy Press; 2001.

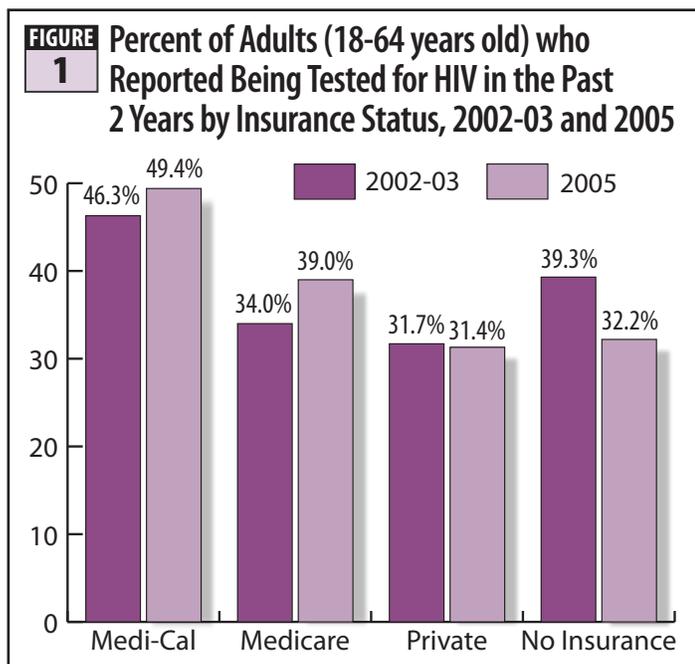
3. Glynn M, Rhodes P. Estimated HIV prevalence in the United States at the end of 2003 [Abstract]. Presented at the National HIV Prevention Conference, June 12-15, 2005; Atlanta, Georgia.

4. Branson BM, Handsfield HH, Lampe MA, Janssen RS, Taylor AW, Lys SB, Clark JE. Revised Recommendations for HIV Testing of Adults, Adolescents, and Pregnant Women in Health-Care Settings. MMWR 2006;55:1-17.

were asked not to count HIV tests that were done as part of a blood donation.)

HIV Testing Varies among Demographic Groups

- The percentage of surveyed adults who reported being tested for HIV in the past 2 years was highest among young adults between the ages of 25 and 29 (46%) (Table 1).
- A higher percentage of African Americans (51%) reported being tested for HIV in the past 2 years compared to Latinos (37%), Whites (24%) and Asians/Pacific Islanders (18%).
- A higher percentage of African Americans reported being tested in 2005 than in 2002-03, while reported testing decreased among Latinos in the same time period.
- Between 2002-03 and 2005, reported HIV testing increased among those with household incomes below the Federal Poverty Level (0-99% FPL), but decreased in all other income groups.
- The percentage of adults tested for HIV in the past 2 years ranged from a high of 44% in the South Service Planning Area (SPA) to a low of 24% in the San Gabriel SPA.
- Among adults ages 18-64 years, HIV testing varied by insurance status, and was highest for those on Medi-Cal (Figure 1). Among the uninsured, reported testing rates declined between 2002-03 and 2005.

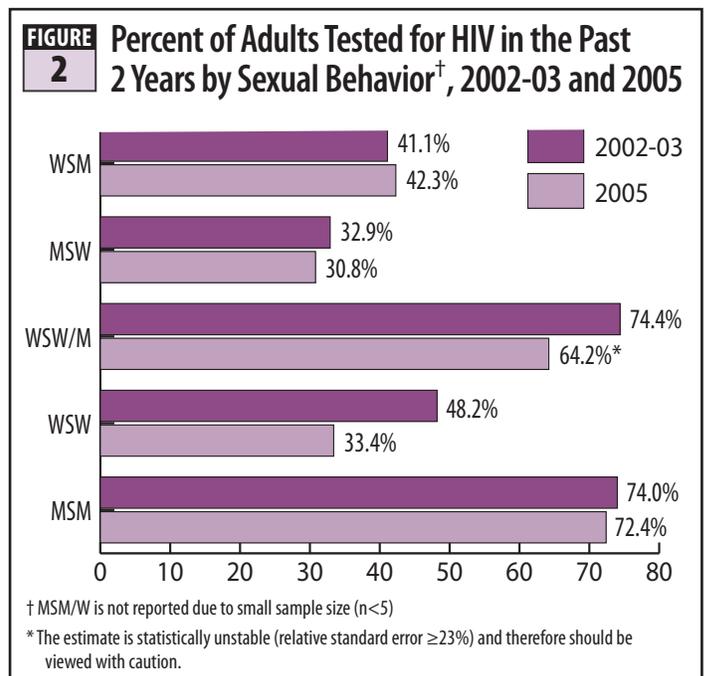


HIV Testing and Sexual Behavior

HIV testing among LA County adults varied by reported sexual behavior (Figure 2).

The LACHS categorizes adults based on the reported gender(s) of their sex partners, where:

- **WSM** = women who have sex with men
- **MSW** = men who have sex with women
- **WSW/M** = women who have sex with women and men
- **MSM/W** = men who have sex with men and women
- **WSW** = women who have sex with women
- **MSM** = men who have sex with men



The percentage of adults tested for HIV in the past 2 years was highest among MSM and WSW/M in 2002-03. In 2005, the testing percentage was highest among MSM. From 2002-03 to 2005, there was a decrease in the percent tested among all groups except WSM.

The LACHS defines adults “at higher risk” for HIV as those who are at increased risk for acquiring the virus because they reported having two or more sexual partners in the past year and did not always use a condom.

- In 2005, an estimated 7% of LA County adults answering the survey were considered at higher risk for HIV. In 2002-03, the percentage of adults in LA County considered higher risk was 6%.

- 50% of higher risk adults who answered the survey reported being tested for HIV in the past two years. This result is similar to findings from the 2002-03 LACHS.
- 17% of MSM, 12% of MSW, and 5% of WSM were considered higher risk in 2005.
- In 2005, 67% of higher risk MSM reported being tested for HIV during the past two years, compared to 45% of higher risk MSW and 59% of higher risk WSM.

- Similar to 2002-03, in 2005, almost half (48%) of the adults who had received an HIV test reported that HIV testing was done as part of a routine medical check-up.

Reason for and Location of Most Recent HIV test

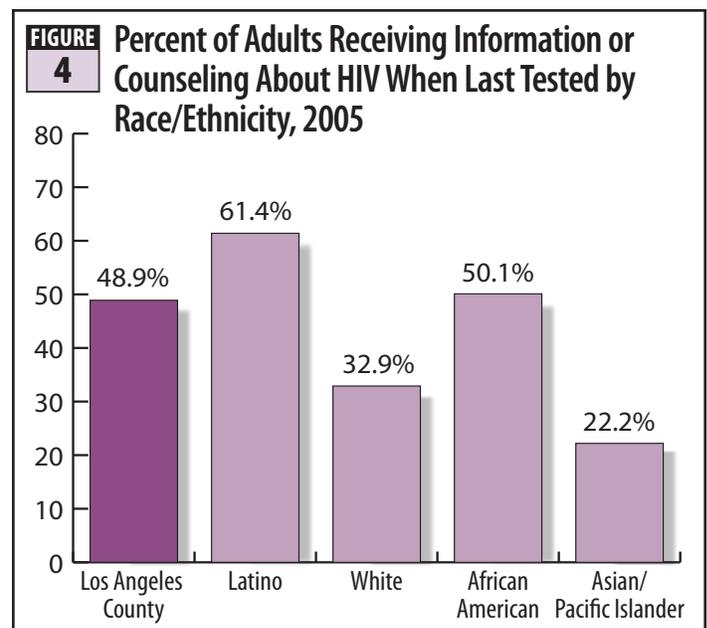
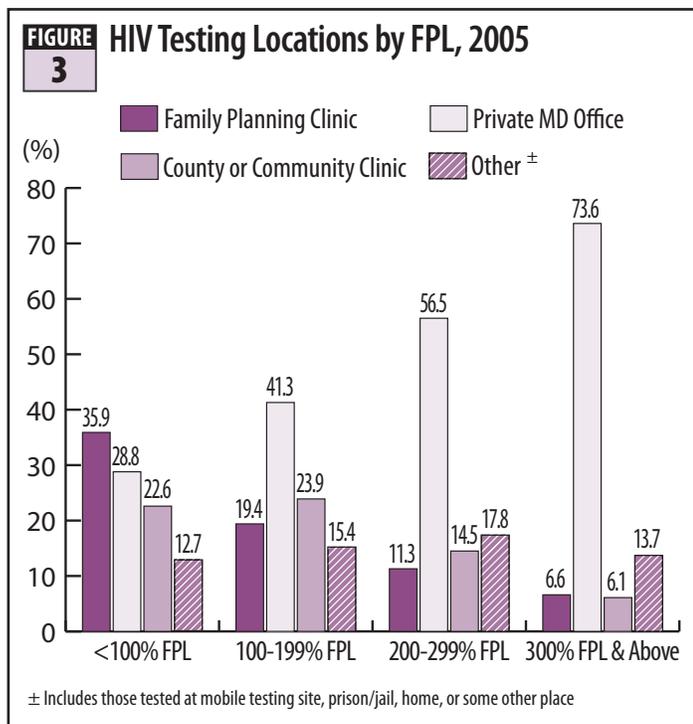
HIV testing can be performed in a variety of locations. In LA County, the Department of Public Health and Department of Health Services offer free HIV testing in public clinics and mobile testing units.

- Similar to findings from the 2002-03 LACHS, around 38% of people tested for HIV were tested at a family planning clinic, county or community clinic, or mobile testing site. Over half (51%) were tested at a private doctor's office, lab or HMO.
- The location where adults had their most recent HIV test varied greatly by household income (Figure 3). The percentage of adults who reported being tested at a private doctor's office increased along with income.

Receipt of Test Results and Information or Counseling about HIV

HIV testing provides an important opportunity for education about HIV prevention. For testing to be most effective at controlling the spread of HIV, patients must receive their test results.

- 90% of adults who obtained an HIV test reported that they received their most recent HIV test result, compared to 91% in 2002-03.
- 87% of higher risk adults received their most recent HIV test result.
- Receipt of last HIV test results varied depending on the reason for having the test. Those most likely to get results had an HIV test because they were in a new relationship (98% received results), were pregnant (92%), or were concerned about personal risk (92%). People who had been tested as part of a routine medical check up and those for whom testing was required were less likely to receive their test results (89% and 87%, respectively).
- 49% of tested adults in LA County reported receiving information or counseling about HIV risks during their last test. Results varied by race/ethnicity (Figure 4), but are consistent with results from the 2002-03 survey.



HIV Testing & Prenatal Care

Since 2001, CDC has recommended that HIV testing be included as a routine part of prenatal care for all pregnant women. California statute requires that medical care providers screen every pregnant woman for HIV.⁵ The 2005 LACHS found that most women in LA County reported being tested for HIV during pregnancy.

- 88% of mothers with a child between the ages of 0 and 5 reported being tested for HIV as part of their prenatal care.
- 94% of African American mothers with a child between the ages of 0 and 5 reported being tested compared to 90% of Latinas, 81% of Asians/Pacific Islanders and 81% of Whites.
- 60% of women not tested reported that they were not offered an HIV test and 22% declined HIV testing.

Limitations of Survey Data

It is important to note that the survey has several limitations. First, only 49% of persons contacted by the survey chose to participate (a response rate consistent with other national and state telephone surveys.) Also, respondents may not have fully disclosed personal information about their sexual behavior and past HIV testing, may have given responses they perceived to be socially desirable, and may have inaccurately reported their HIV testing history. The survey did not include specific questions about types of sexual partners (e.g., spouse, other primary partner, or casual partner) or questions about condom use in relation to specific sexual practices (e.g., vaginal, oral, or anal intercourse). Finally, the survey only included individuals living in households with telephones. Information was not collected on other important groups that are at increased risk for HIV infection, such as persons who are homeless or incarcerated. Therefore, LACHS data may underestimate individuals at increased risk for HIV, and may overestimate HIV testing among the LA County population.

RECOMMENDATIONS

The CDC now recommends that HIV testing be included with routine medical care for everyone in the U.S. ages 13-64.⁴ The goals of these recommendations are to:

- 1)** increase HIV screening of patients, including pregnant women, in health-care settings
- 2)** improve early detection of HIV infection
- 3)** identify and counsel persons with unrecognized HIV infection and link them to clinical and prevention services
- 4)** further reduce perinatal (mother-to-child) transmission of HIV in the United States

Healthcare providers do not need to obtain a separate, written consent for HIV testing, but should notify their patients that they plan to do an HIV test and allow the patient to decline testing if he or she chooses.

People at high risk for HIV infection should be screened for HIV at least annually. These people include:⁶

- Anyone who has injected drugs or steroids or shared equipment (such as needles, syringes, cotton, cookers, water) with others
- Anyone who has had unprotected vaginal, anal, or oral sex with men who have sex with men
- Anyone who has had unprotected vaginal, anal, or oral sex with multiple partners or anonymous partners
- Anyone who has exchanged sex for drugs or money
- Anyone who has been diagnosed with or treated for hepatitis, tuberculosis (TB), or a sexually transmitted disease (STD)
- Anyone who received a blood transfusion or clotting factor between 1978 and 1985
- Anyone who has had unprotected sex with someone who has any of the above risk factors

6. Centers for Disease Control and Prevention. National HIV Testing Resources. www.hivtest.org.

5. http://www.dhs.ca.gov/AIDS/Resources/PDF/IntroductionPerinatalMaterialConsentForm12_9_0.pdf.



on the web



Los Angeles County Department of Public Health, Office of AIDS Programs and Policy (OAPP) supports agencies that provide free HIV testing throughout LA County. The office directs the overall response to the HIV/AIDS epidemic in Los Angeles County.

<http://lapublichealth.org/aids/hivtestsites/Sites0503.pdf>

HIV L.A. Consumer Directory, offered by OAPP and AIDS Project Los Angeles (APLA), is a comprehensive directory serving people living with HIV/AIDS and persons at risk for HIV infection in Los Angeles County. HIV L.A. includes more than 1,500 distinct listings of services across 33 different service categories, including Medical Resources, Support Groups, Drug Treatment, Women's Services, Prevention Education, HIV/AIDS Testing and Youth Assistance. In addition to the printed directory and the website, a toll-free hotline is available for clients and service providers seeking answers to questions about services, benefits, and the directory:

(866) 772-2365

<http://www.hivla.org/>

Los Angeles County Department of Public Health, HIV Epidemiology Program collects, analyzes and disseminates HIV/AIDS surveillance and epidemiologic study data essential for the planning, implementation, and evaluation of programs and policies involving HIV and AIDS care, prevention, education, and research in Los Angeles County.

<http://lapublichealth.org/hiv>

The California AIDS Hotline provides HIV/AIDS information, education, and referral services, with an extensive searchable database of hundreds of organizations providing HIV/AIDS services in California. A toll free telephone and TTY support line is offered:

(800) 367-AIDS

<http://www.aidshotline.org>

National HIV Testing Resources, a service of Centers for Disease Control and Prevention (CDC), provides resources on HIV testing including a national database of HIV testing sites and answers to many questions about HIV/AIDS and testing.

<http://www.hivtest.org/>

**NATIONAL
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The Los Angeles County Health Survey is a periodic, population-based telephone survey that collects information on sociodemographic characteristics, health status, health behaviors, and access to health services among adults and children in the county. The most recent survey was conducted in 2005 for the Los Angeles County Department of Public Health by Field Research Corporation and was supported by grants from First 5 LA, the California Department of Health Services, and the Public Health Response and Bioterrorism Preparedness federal grant.

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For additional information about the L.A. County
Health Survey, visit: www.lapublichealth.org/ha