HIV Testing Annual Report 2009



County of Los Angeles Department of Public Health

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Preface

OAPP partners with a broad array of public and private sector providers to deliver HIV prevention programs. These programs include a range of tailored interventions such as HIV antibody testing and counseling designed to help persons learn their HIV status, develop skills to prevent HIV infection or transmission, reinforce behaviors that help mitigate HIV infection and transmission, and provide linkage to HIV and other systems of care consistent with the recommendations and priorities outlined in the Los Angeles County HIV Prevention Plan 2009-2013 (available online at http://publichealth.lacounty.gov/aids/PreventionPlan.htm).

We extend our sincere thanks to our community partners that provided HIV Counseling and Testing services and HIV Testing data in 2009:

AIDS Healthcare Foundation AltaMed Health Services Corporation Asian Pacific Healthcare Venture Bienestar Human Services. Inc. California State University Long Beach Central City Health Charles Drew University Children's Hospital Los Angeles City of Pasadena Clinica Monsenor Oscar A. Romero Common Ground East Valley Community Health Center El Centro del Pueblo El Provecto del Barrio **Hubert Humphrey Comprehensive Health** Center JWCH Institute

Los Angeles County University of Southern California Medical Center Los Angeles Gay & Lesbian Community Center Los Angeles County Sheriff's Department Minority AIDS Project O.A.S.I.S. Clinic Saban Free Clinic Sexually Transmitted Disease Program Special Services for Groups St. John's Well Child and Family Center Tarzana Treatment Center, Inc. The Catalyst Foundation The One in Long Beach To Help Everyone (T.H.E.) Clinic Valley Community Clinic Watts Healthcare Corporation Women Alive Coalition

We look forward to continuing our work together to provide high quality HIV services, and sharing outcomes and best practices with the Los Angeles HIV prevention community and others throughout the County.

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Introduction

Office of AIDS Programs and Policy

The Office of AIDS Programs and Policy (OAPP) coordinates the overall response to HIV/AIDS in Los Angeles County in collaboration with community-based organizations, governmental bodies, advocates and people living with HIV/AIDS. It also sets the standards of care for HIV/AIDS services provided countywide. OAPP articulates and recommends HIV/AIDS-related policies and positions for the consideration of the Department of Public Health and the Los Angeles County Board of Supervisors. It serves as a liaison with policy makers, local and national organizations to achieve policy objectives relevant to services for people with HIV/AIDS. OAPP receives funding from the Health Resources and Services Administration (HRSA), the Centers for Disease Control and Prevention (CDC), the State of California Office of AIDS and the Los Angeles County Department of Public Health. OAPP utilizes funds received from various levels of government (Federal, State, and County) in managing approximately 200 contracts within a network of over 100 community-based organizations and ten County departments in an effort to maximize access to services for persons living with or at risk for infection with HIV/AIDS.

Office of AIDS Programs and Policy Mission

To respond to the HIV/AIDS epidemic in Los Angeles County by preventing its spread, maximizing health and social outcomes, and coordinating effective and efficient targeted services for those at risk for, living with or affected by HIV.

Overview of the Report

This report presents a summary of HIV testing data from all sources reporting data to OAPP from January to December 2009, including testing conducted at the twelve Los Angeles Public Health Sexually Transmitted Disease (STD) Clinics, routine testing sites (HIV testing within the context of all health screenings in a clinic setting), and OAPP-funded HIV counseling and testing (HCT) services. HCT services follow the HIV Counseling Guidelines provided by CDC. Counseling and testing services were provided at a variety of sites throughout Los Angeles County including community and public clinics, non-traditional settings such as community-based organizations, store fronts and mobile testing units, court-ordered testing programs, homeless shelters, correctional facilities, and substance use treatment facilities.

STD clinics reported data to OAPP via quarterly submissions and data were collected from routine testing sites via monthly reports. OAPP-funded HCT sites collected and reported client-level data via OAPP's HIV Information Resources System (HIRS) and Teleform scanning system. This report presents HCT data that span over two contract periods. The previous contract ending June 2009 includes data (as of January 2010) and the new contract beginning July 2009 (as of May 2010).

Demographic profiles of testers are presented by Service Planning Area (SPA) and according to the Los Angeles County HIV Prevention Plan 2009-2013 Priority and Critical Target populations. The report also highlights the Los Angeles County HIV Counseling and Testing Week Initiative, methamphetamine use, and new and completed testing projects within Los Angeles County.

There are two definition changes in the 2009 edition of the HIV Testing Report. The definition of **positives** in this report refers to (rapid and conventional) tests that resulted in a reactive Western Blot or ImmunoFluorescence Assay (IFA) confirmatory test result *and* rapid tests that resulted in a reactive preliminary positive test result without a confirmatory specimen. Secondly, the definitions of **gay-identified men who have sex with men** and **non gay-identified men who have sex with men** have changed. In 2008, self-reported bisexual men were placed in the non gay-identified men who have sex with men category. In 2009, in order to parallel the state definition, self-reported bisexual men are placed in the gay-identified men who have sex with men category.

Limitations

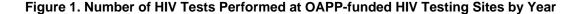
Data presented in this report represent individual HIV tests and not necessarily individuals who tested for HIV. An individual may have tested for HIV multiple times during the reporting period.

Demographic and risk data are not available from all data sources. Therefore, Table 1 is the only comprehensive table presenting all data for 2009. All subsequent tables represent a subset of Table 1. Furthermore, within each major section, each table with a different N (total tests) represents a subset of the previous table.

Data in all pie charts presented within this report do not necessarily add up to 100% due to rounding.

HIV Testing Background

Figure 1 shows the number of HIV tests performed by year. The drop in number of HIV tests performed between 2004 and 2005 was primarily due to a reduction in the number of Los Angeles County Public Health Tuberculosis (TB) and STD clinics reporting HCT data to OAPP. In 2004, 13 TB clinics and 14 STD clinics reported their HCT data to OAPP. In 2005, only 5 STD clinics and no TB clinics reported data to OAPP. By 2006, HCT data from County STD clinics were no longer reported. However, in 2009, 12 STD clinics reported data to OAPP. In addition, OAPP began routine HIV testing which accounts for the large increase in testing volume.



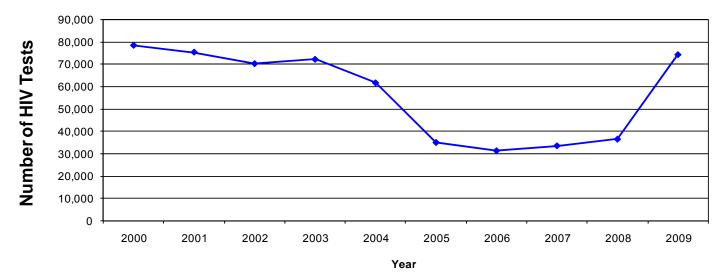
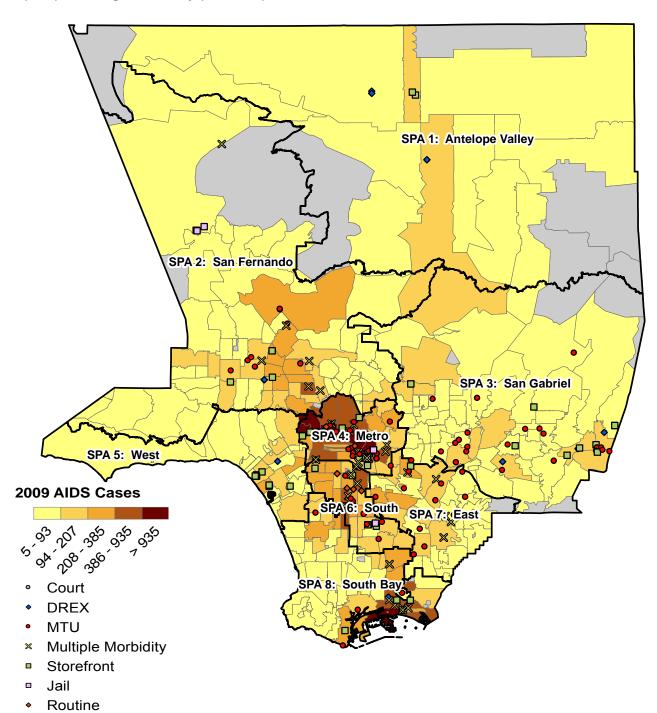


Figure 2 illustrates 2009 HIV/AIDS surveillance data from the Los Angeles County HIV Epidemiology Program, presented by SPA.

Figure 2. Persons Living With HIV/AIDS as of 12/31/2009¹ by Zip Code² and Service Planning Area (SPA), Los Angeles County (N=44,228)



^{*}Data Sources: HIV Epidemiology Program, HIV/AIDS Semi-Annual Surveillance Summary, December 2010

< 5 Cases</p>

HIV Testing Summary Data, 2009

In 2009, HIV testing was provided through four program types: 1) Public Health STD Clinics; 2) routine HIV testing in health care settings; 3) testing within jail settings and 4) targeted testing across seven testing modalities: A) Public Health STD clinics; B) routine HIV testing in health care settings; C) testing within jail settings; D) OAPP subcontracted agencies that provide HCT services via storefront, mobile testing units (MTU), and multiple morbidity mobile testing units; E) Bath houses and sex clubs; F) HIV testing services offered by court-ordered testing programs, substance use treatment settings (i.e., drug expansion testing – DREX and homeless shelters); and G) outpatient HIV testing sites. Table 1 describes the number of tests conducted and HIV incidence and prevalence in 2009 by testing program and modality.

Overall positivity rate is defined as the number of positive HIV tests (numerator) divided by the total number of HIV tests conducted. The **new positivity rate** is defined as the number of new positive HIV tests (numerator) divided by the total number of HIV tests conducted. **New positives** (new positive HIV tests) refer to positive HIV tests where clients self-reported to have never received a prior positive HIV test result.

Table 1. HIV Overall Positivity & New Positivity Rates by OAPP-funded Program Type, 2009

Type of Testing Program	Number of HIV Tests	HIV Positivity Rate		HIV New Positivity Ra	
	N	n	(%)	n	(%)
Grand Total	74,254	785	1.06%	645	0.87%
Public Health STD Clinics	25,171	203	0.81%	164	0.65%
Routine Testing	7,643	86	1.13%	81	1.06%
Testing within Jail Settings	9,631	7	0.07%	4	0.04%
Targeted Testing OAPP Subcontracted Agencies	31,809	489	1.54%	396	1.24%
Storefront	18,471	280	1.52%	227	1.23%
Mobile Testing Unit Program	6,419	73	1.14%	64	1.00%
Multiple Morbidity Mobile Testing Units Programs	2,709	35	1.29%	22	0.81%
Bath Houses and Sex Clubs	1,766	28	1.59%	27	1.53%
Court Ordered & Drug Expansion Testing Programs	1,797	34	1.89%	22	1.22%
Outpatient HIV Clinics	647	39	6.03%	34	5.26%

This HIV testing report is divided into five major sections based on the four testing program types. Not all data presented in Table 1 are included in subsequent sections due to reasons highlighted in the **Limitations** (p. 2) section.

HIV Counseling and Testing at Public Health STD Clinics

This report includes data collected from both the Los Angeles County STD program and from 12 public health STD clinics (Antelope Valley, Simms Mann Health & Wellness Center, Central, Hollywood-Wilshire, Monrovia, North Hollywood, Pomona, South, Ruth Temple, Torrance, Curtis Tucker, and Whittier Health Centers) located throughout the County. Based on testing numbers collected at these clinics, it was determined that HIV ranked third in terms of most commonly diagnosed STD'sⁱ. All tests conducted were standard (non-rapid) and confidential.

There were 25,171 HIV tests conducted in 2009 and 203 positive results. Of the 203 positive HIV tests, 156 testers (76.8%) returned to receive their test results.

Table 2. HCT Summary Data from Public Health STD Sites, 2009

Characteristic	All T	ests
	N	%
Number of HIV Tests	25,171	
Positive	203	0.81%
New Positives	164	0.65%
Previously Positive	39	0.15%
Disclosure of Test Results		
All Tests ²	18,145	72.1%
Positive	156	76.8%
New Positives	125	76.2%
Previously Positive	31	79.5%

^{*}All tests are standard and confidential

¹ Indentation shows that the characteristic is a subset (sample) of the characteristic above it.

² Received a disclosure of a negative or confirmed positive result.

ⁱ LA County STD Clinic Morbidity Report, 2009. Los Angeles County Department of Public Health, Sexually Transmitted Disease Program, May 2010.

Demographic Characteristics of STD Testers

This section gives an overview of the demographic characteristics of testers at Public Health STD clinics in 2009. New positivity rates for Transgender individuals were more than three times as high as they were for males. Individuals with an unknown gender had the highest new positivity rate (8.30%) however the sample size was very small. Data collection instrument did not offer 'Asian/Pacific Islander' as an option for race/ethnicity.

Figure 3. Total Number of STD Tests by Race/ Ethnicity, 2009 (N=25,171)*

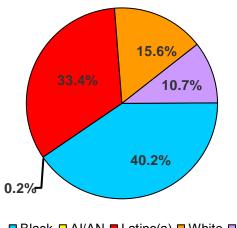
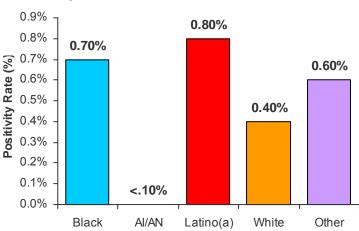
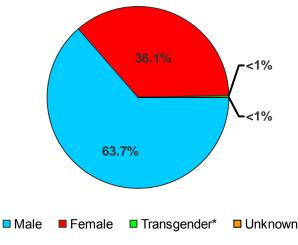


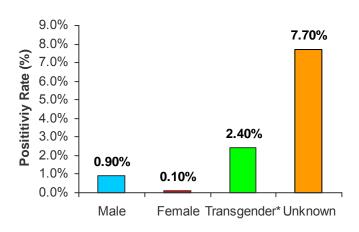
Figure 4. New Positivity Rate by Race/ Ethnicity, 2009*



[■] Black ■ Al/AN ■ Latino(a) ■ White ■ Other

Figure 5. Total Number of STD Tests by Gender, Figure 6. New Positivity Rate by Gender, 2009* 2009 (N=25,171)*



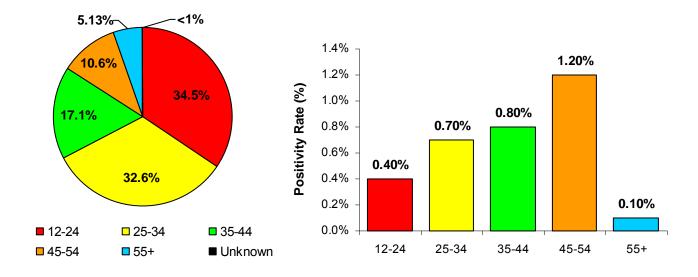


^{*} Transgender includes both male-to-female and female-to-male.

^{*}Data collection instrument unable to collect data for Asian/PI

Figure 7. Total Number of STD Tests by Age Group, 2009 (N=25,171)

Figure 8. New Positivity Rate by Age Group, 2009



Routine Testing

OAPP continues to undertake new programmatic actions to identify new HIV positive individuals by working with 1) OAPP-funded prevention providers, 2) local, State, and federal partners, and 3) healthcare clinics. OAPP is continuing its efforts to increase the number of healthcare clinics that provide routine HIV testing, thus increasing the capacity to reduce the number of undiagnosed HIV infections.

OAPP has adopted CDC's revised recommendations to provide HIV screening in an opt-out fashion to all adults and adolescents aged 13-64 in health care settings. This includes, but is not limited to clinical settings such as inpatient services, substance abuse treatment clinics, community clinics, correctional health care facilities, prenatal care clinics and other primary care settings. With the support of the CDC's Expanded Testing Initiative, OAPP has partnered with a range of health care facilities to implement routine opt-out HIV testing. Between January and June 2009, routine testing was conducted at five clinical testing sites through two contracted agencies: Clinica Monsenor Oscar A. Romero (Clínica Romero), and Los Angeles County University of Southern California Medical Center (LAC/USC). In the new contract year starting in July 2009, OAPP funded Central City Health Center, Los Angeles Gay & Lesbian Center (LAGLC), To Help Everyone (T.H.E.) Clinic, and Clínica Romero to expand routine testing models within community clinic settings in high HIV/AIDS burden areas within Los Angeles County. Additionally, OAPP has implemented two demonstration projects at St. John's Well Child and Family Center and Hubert Humphrey Comprehensive Health Center with the goal of identifying the optimal routine testing models in community clinics.

Routine Testing In Health Care Clinics

In 2009, there were a total of 7,643 rapid HIV tests conducted at routine testing sites within health care clinics. There were 86 tests that were confirmed positive, and 81 were newly identified. Tests were conducted at five health care clinics (T.H.E. Clinic, Central City Health Center, Clínica Romero, LAC/USC, and LAGLC).

Table 3. HCT Summary Data from Routine Testing Sites, 2009

Characteristic	All T	Tests -	
	N	%	
Number of HIV Tests	7,643		
Positive	86	1.13%	
New Positives	81	1.06%	
Previously Positive	5	0.07%	
Disclosure of Test Results			
All Tests ²	7,178	93.9%	
Positive	86	100%	
New Positives	81	100%	
Previously Positive	5	100%	

^{*}All tests are rapid and confidential.

¹ Indentation shows that the characteristic is a subset (sample) of the characteristic above it.

² Received a disclosure of a negative or preliminary positive result.

Demographic Characteristics of Routine Testers

This section gives an overview of the demographic characteristics of testers at Routine Testing sites in 2009. A total of 2,359 tests (from the Table 3) were excluded from the analysis below due to data collection limitations.

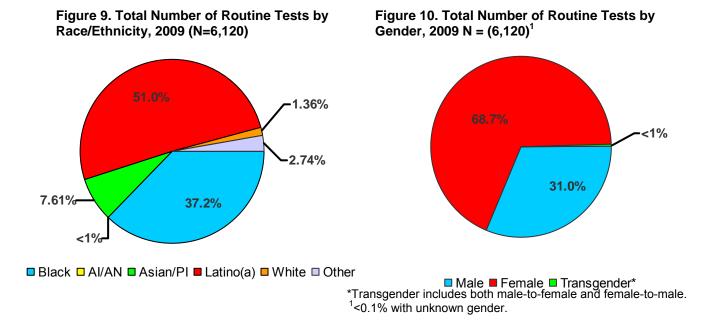
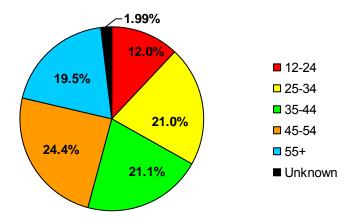


Figure 11. Total Number of Routine Tests by Age Group, 2009 (N=6,120)



Testing in Jail Settings

The County of Los Angeles, Department of Public Health, OAPP enhanced collaboration with the STD program and the Los Angeles County Sheriff's Department (LASD) to implement an expanded HIV/STD screening program within one of the largest jail systems in the world. Routinely rapid HIV testing was offered to inmates who may have an elevated risk for HIV through predictors established by a recent HIV testing research study. LASD processes between 500-1,000 inmates daily and approximately 185,000 inmates annually. The average inmate population is an estimated 18,750-19,500 each day, 89% of which are male. Among the male inmates, 34% are African-American; however they make up a disproportionate 46% of HIV-positive inmates.

In 2009, there were a total of 9,631 rapid HIV tests conducted in jail settings. There were seven positive testers.

Table 4. HCT Summary Data from Testing in Jail Settings, 2009

Characteristic	All 1	Γests
	N	%
Number of HIV Tests	9,631	
Positive	7	0.07%
New Positives	4	0.04%
Previously Positive	3	0.03%
Disclosure of Test Results		
All Tests ²	9,276	96.3%
Positive	6	85.7%
New Positives	3	75.0%
Previously Positive	3	100%

^{*}All tests are rapid and confidential.

¹ Indentation shows that the characteristic is a subset (sample) of the characteristic above it.

² Received a disclosure of a negative or preliminary positive result.

Demographic Characteristics of Testers in Jail Settings

This section gives an overview of the demographic characteristics of testers in jail settings. The majority of testers were either Latino(a) (45.7%) or African American (36.3%), male (72.1%), and under the age of 35, 12-24 (29.4%) and 25-34 (34.3%).

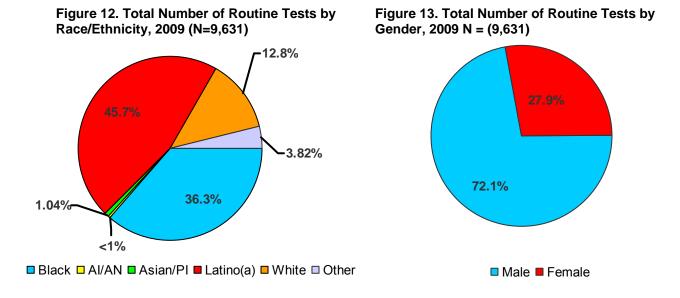
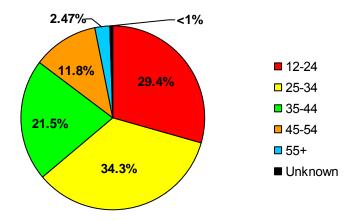


Figure 14. Total Number of Routine Tests by Age Group, 2009 (N=9,631)



Targeted HIV Counseling and Testing

In 2009, a total of 31,809 HIV tests were performed at OAPP-funded targeted testing sites throughout Los Angeles County. There were 898 tests (from Table 1) excluded from this section due to reporting delays of testing disclosure information. Rapid HIV tests represented 81.8% of all tests (Table 5). Among rapid and non-rapid (conventional) tests, the majority were administered confidentially. Overall, 387 tests were identified as newly HIV positive.

Table 5. HCT Summary Data from OAPP-funded Sites, 2009

Characteristic	All T	All Tests Rapid HIV Tests Conventional Tests		All Tests		Rapid HIV Tests		
	N	%	n	%	n	%		
Number of HIV Tests	30,911		25,290	81.8%	5,621	18.2%		
Test Election								
Confidential	25,269	81.7%	20,036	79.2%	5,233	93.1%		
Anonymous	5,642	18.3%	5,254	20.8%	388	6.9%		
Positive	478	1.55%	366	1.45%	112	1.99%		
New Positives	387	1.25%	302	1.19%	85	1.51%		
Previously Positive	91	0.29%	64	0.25%	27	0.48%		
Disclosure of Test Results								
All Tests ²	29,635	95.9%	25,132	99.4%	4,503	80.1%		

¹ Indentation shows that the characteristic is a subset (sample) of the characteristic above it.

Table 6 illustrates the proportion of positive rapid and conventional tests that received their results by positive status (new positive vs. previously positive). Of the 302 new positive rapid HIV tests, 294 testers (97.4%) returned to receive their preliminary positive test results and 239 testers (79.1%) provided an additional specimen for laboratory-based confirmatory testing. Of those 239 tests, 168 (70.3%) returned at least one week later to receive their confirmed positive test result.

Table 6. Disclosure of Positive Results Among Rapid HIV and Conventional Tests

Characteristic		New Positives		ly Positive
	n	%	n	%
Rapid HIV Positive Tests (N = 302)	302		64	
Received initial reactive rapid HIV test result	294	97.4%	64	100.0%
Provided a specimen for laboratory-based confirmatory testing	239	79.1%	36	56.3%
Received confirmed positive result	168	70.3%	27	75.0%
Conventional HIV Positive Tests (N = 85)	85		27	
Received confirmed positive result	83	97.6%	25	92.6%

¹ Indentation shows that the characteristic is a subset (sample) of the characteristic above it.

² Received a disclosure of a negative, preliminary positive, or confirmed positive result.

Demographic Characteristics of Testers

This section gives an overview of the demographic characteristics of testers at targeted testing sites in 2009. A total of 1,991 tests (among 30,911 tests) were excluded from the analysis in this section due to reporting delays.

Figure 15. Total Number of Targeted Tests by Race/Ethnicity, 2009 (N=28,920)

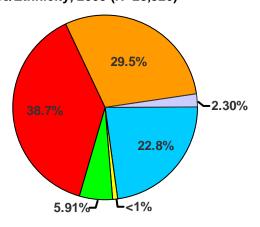
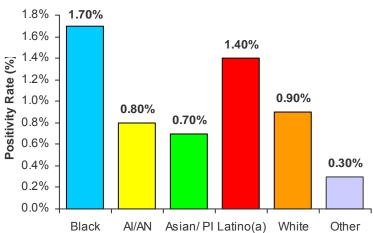


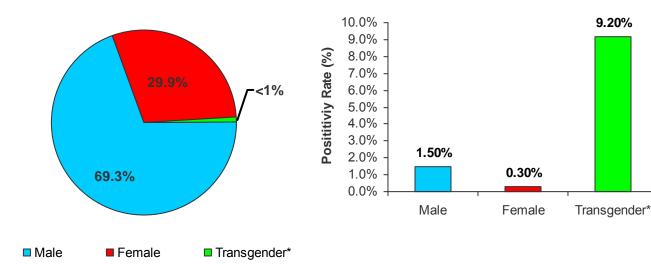
Figure 16. New Positivity Rate by Race/ Ethnicity, 2009



■ Black ■ Al/AN ■ Asian/Pl ■ Latino(a) ■ White ■ Other

Figure 17. Total Number of Targeted Tests by Gender, 2009 (N=28,920)¹

Figure 18. New Positivity Rate by Gender, 2009

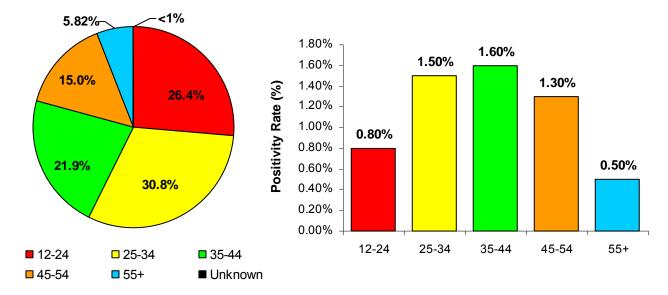


* Transgender includes both male-to-female and female-to-male.

1<0.1% with unknown gender.

Figure 19. Total Number of Tests by Age Group, 2009 (N=28,920)

Figure 20. New Positivity Rate by Age Group, 2009



Tests by Target Populations

New positivity rates for transgender individuals were more than six times as high as they were for males. With a new positivity rate of 9.13%, transgender individuals were included as a priority population (priority and critical target populations are defined in the Los Angeles County Department of Public Health HIV Prevention Plan 2009-2013). A total of 558 tests (among 28,920 tests included in the previous section), were excluded from this section due to limitations in the data reporting system used by some medical outpatient sites.

Table 7. Priority & Critical Target Population HCT Summary Data from Targeted Testing Sites, 2009

Table 7. Priority & Critical Target Population HCT Summ	iary Data i	rrom Targeted	resting Sites, 200
Characteristic		New	New Positivity
		Positives(n)	Rate (%)
Number of HIV Tests ¹	28,362	327	1.15%
Target Populations ²			
HIV Positive Individuals ³	412	327	
Gay men	303	251	
Non- gay identified men who have sex with Men⁴	7	6	
Transgender Individuals	28	21	
Women	33	21	
Youth (12-24 years)	7,582	57	0.75%
Gay men	2,569	48	1.87%
Non- gay identified men who have sex with men⁴	265	<5	-
Transgender Individuals	76	5	6.58%
Sex Workers	808	15	1.86%
Women who have sex partners of unknown HIV Status	2,629	<5	-
Male	19,685	285	1.45%
Gay men	10,417	251	2.41%
Non- gay identified men who have sex with men⁴	913	6	0.66%
Female	8,447	21	0.25%
Women who have sex partners of unknown HIV status	8,176	18	0.22%
Transgender Individuals	230	21	9.13%
People who Share Needles/Works	1,849	22	1.19%

^{*}Indentation shows that the characteristic is a subset (sample) of the characteristic above it.

Tables 8-13 describes the total number of tests and new positivity rates by race/ethnicity and target population. The highest number of testers were among Latino(a)s with 10,782 tests. African Americans provided the third highest number of tests but had the highest new positivity rate of 1.64%. By target population, African American gay men and transgender individuals had the highest new positivity rates of 4.60% and 16.4%, respectively, compared to their counterparts of different race/ethnicity. Latino(a) transgender individuals demonstrated the

¹ 558 of targeted tests from previous section (Figures 15-20) excluded due to limitations in data reporting system.

² Priority and critical target populations as identified in Table 4.6 in the Los Angeles County Department of Public Health HIV Prevention Plan 2009-2013 http://publichealth.lacounty.gov/aids/PreventionPlan.htm

³ Includes newly identified positive individual <u>and</u> individuals who previously tested positive.

⁴ Includes males who did not self-identify as homosexual or bisexual and reported having sex with men.

second highest new positivity rate (6.14%). Among African Americans, youth demonstrated the highest new positivity rate at 1.63%, compared to Latino(a) youth at 0.59% and White youth at 0.37%.

Table 8. Priority & Critical Target Population HCT Summary Data among African Americans/Black, 2009

Race/Ethnicity	Number o	of Testers	New	New
Target Population ¹	N	%	Positives n	Positivity Rate %
African American/Black	6,456		106	1.64%
HIV Positive Individuals ²	132	2.04%	106	
Gay men	<i>7</i> 8	59.1%	68	
Non- gay identified men who have sex with men ³	<5	-	-	
Transgender Individuals	15	11.4%	11	
Female	18	13.6%	13	
Youth (12-24 years)	1,782	27.6%	29	1.63%
Gay men	485	27.2%	24	4.95%
Non- gay identified men who have sex with men ³	58	3.25%	<5	-
Transgender Individuals	31	1.74%	<5	-
Sex Workers	269	15.1%	10	3.72%
Women with sex partners of unknown HIV status	809	45.4%	<5	-
Male	3,695	57.2%	82	2.22%
Gay men	1,477	40.0%	68	4.60%
Non- gay identified men who have sex with men ³	216	5.85%	<5	-
Female	2,694	41.7%	13	0.48%
Women with sex partners of unknown HIV status	2,586	96.0%	11	0.43%
Transgender Individuals	67	1.04%	11	16.4%
People who Share Needles/Works	185	2.87%	7	3.78%

^{*}Indentation shows that the characteristic is a subset (sample) of the characteristic above it.

Table 9. Priority & Critical Target Population HCT Summary Data among Al/AN, 2009

Race/Ethnicity		Number of Testers		New Positivity	
Target Population ¹	N	%	Positives n	Rate %	
American Indian/Alaskan Native	236		<5	-	
HIV Positive Individuals ²	<5	=	-		
Gay men	<5	-	-		
Non- gay identified men who have sex with men ³	<5	-	-		
Transgender Individuals	<5	-	-		
Female	<5	-	-		
Youth (12-24 years)	57	24.2%	<5	-	
Gay men	23	40.4%	<5	-	
Non- gay identified men who have sex with men ³	<5	-	-	-	
Transgender Individuals	<5	-	-	-	

¹ Priority and critical target populations as identified in Table 4.6 in the Los Angeles County Department of Public Health HIV Prevention Plan 2009-2013 http://publichealth.lacounty.gov/aids/PreventionPlan.htm

² Includes newly identified positive individual <u>and</u> individuals who previously tested positive.

³ Includes males who did not self-identify as homosexual or bisexual and reported having sex with men.

Sex Workers	7	12.3%	<5	-
Women with sex partners of unknown HIV status	18	31.6%	<5	-
Male	155	65.7%	<5	-
Gay men	76	49.0%	<5	-
Non- gay identified men who have sex with men ³	<5	-	-	-
Female	80	33.9%	<5	-
Women with sex partners of unknown HIV status	76	95.0%	<5	-
Transgender Individuals	<5	-	-	-
People who Share Needles/Works	20	8.47%	<5	-

^{1,2,3,4} Refer to table 8.

Table 10. Priority & Critical Target Population HCT Summary Data among Asian/PI/NH, 2009

Race/Ethnicity	Number	of Testers	New Positives	New Positivity
Target Population ¹	N	%	n	Rate %
Asian/Pacific Islander/Native Hawaiian	1,673		11	0.66%
HIV Positive Individuals ²	16	0.96%	11	
Gay men	13	81.3%	8	
Non- gay identified men who have sex with men ³	<5	-	-	
Transgender Individuals	<5	-	-	
Female	<5	-	-	
Youth (12-24 years)	453	27.1%	<5	-
Gay men	181	40.0%	<5	-
Non- gay identified men who have sex with men ³	16	3.53%	<5	-
Transgender Individuals	8	1.77%	<5	-
Sex Workers	14	3.09%	<5	-
Women with sex partners of unknown HIV status	145	32.0%	<5	-
Male	1,250	74.7%	9	0.72%
Gay men	812	65.0%	8	0.99%
Non- gay identified men who have sex with men ³	47	3.76%	<5	-
Female	409	24.5%	<5	-
Women with sex partners of unknown HIV status	402	98.3%	<5	-
Transgender Individuals	14	0.84%	<5	-
People who Share Needles/Works	30	1.79%	<5	-

^{1,2,3,4} Refer to table 8.

Table 11. Priority & Critical Target Population HCT Summary Data among Latino(a), 2009

Race/Ethnicity	Number	of Testers	New Positives	New Positivity
Target Population ¹	N	%	n	Rate %
Latino(a)	10,782		129	1.20%
HIV Positive Individuals ²	154	1.43%	129	
Gay men	120	77.9%	105	
Non- gay identified men who have sex with men ³	<5	-	-	
Transgender Individuals	9	5.84%	7	
Female	8	5.19%	<5	

Youth (12-24 years)	3,414	31.7%	20	0.59%
Gay men	1,187	34.8%	17	1.43%
Non- gay identified men who have sex with men ³	<5	-	-	-
Transgender Individuals	24	0.70%	<5	-
Sex Workers	368	10.8%	<5	-
Women with sex partners of unknown HIV status	1,059	31.0%	<5	-
Male	7,673	71.2%	120	1.56%
Gay men	3,829	49.9%	105	2.74%
Non- gay identified men who have sex with men ³	436	5.68%	<5	-
Female	2,995	27.8%	<5	-
Women with sex partners of unknown HIV status	2,919	97.5%	<5	-
Transgender Individuals	114	1.06%	7	6.14%
People who Share Needles/Works	765	7.10%	7	0.92%

^{1,2,3,4} Refer to table 8.

Table 12. Priority & Critical Target Population HCT Summary Data among White, 2009

Race/Ethnicity	Number	of Testers	New Positives	New Positivity
Target Population ¹	N	%	n	Rate %
White	8,376		70	0.84%
HIV Positive Individuals ²	90	1.07%	70	
Gay men	78	86.7%	61	
Non- gay identified men who have sex with men ³	<5	-	-	
Transgender Individuals	<5	-	-	
Female	<5	-	-	
Youth (12-24 years)	1,629	19.5%	5	0.37%
Gay men	615	37.8%	5	0.81%
Non- gay identified men who have sex with men ³	46	2.82%	<5	-
Transgender Individuals	9	0.55%	<5	-
Sex Workers	129	7.92%	<5	-
Women with sex partners of unknown HIV status	522	32.0%	<5	-
Male	6,319	75.4%	65	1.03%
Gay men	3,937	62.3%	61	1.55%
Non- gay identified men who have sex with men ³	182	2.88%	<5	-
Female	2,030	24.2%	<5	-
Women with sex partners of unknown HIV status	1,962	96.7%	<5	-
Transgender Individuals	27	0.32%	<5	-
People who Share Needles/Works	799	9.54%	8	1.00%

^{1,2,3,4} Refer to table 8.

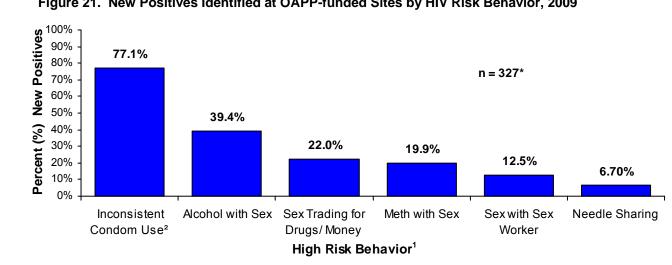
Table 13. Priority & Critical Target Population HCT Summary Data among Other, 2009

Race/Ethnicity	Number	of Testers	New	New	
Target Population ¹	N	%	Positives n	Positivity Rate %	
Other	665		<5	-	
HIV Positive Individuals ²	6	0.90%	<5		
Gay men	5	83.3%	<5		
Non- gay identified men who have sex with men ³	<5	-	-		
Transgender Individuals	<5	-	-		
Female	<5	-	-		
Youth (12-24 years)	217	32.6%	<5	-	
Gay men	76	35.0%	<5	-	
Non- gay identified men who have sex with men ³	8	3.69%	<5	-	
Transgender Individuals	<5	-	-	-	
Sex Workers	9	4.15%	-	-	
Women with sex partners of unknown HIV status	29	13.36%	<5	-	
Male	505	75.9%	<5	-	
Gay men	267	52.9%	<5	-	
Non- gay identified men who have sex with men ³	26	5.15%	<5	-	
Female	157	23.6%	<5	-	
Women with sex partners of unknown HIV status	152	96.8%	<5	-	
Transgender Individuals	<5	-	-	-	
People who Share Needles/Works	28	4.21%	<5	-	

^{1,2,3,4} Refer to table 8.

Sexual behavior continues to be the primary method of HIV transmission among clients who were recently diagnosed with HIV in Los Angeles County. The majority of new positive clients (77.1%) reported to have sometimes or never used condoms when having vaginal or anal sex.

Figure 21. New Positives Identified at OAPP-funded Sites by HIV Risk Behavior, 2009



^{* 32} New positives excluded due to insufficient risk information reported from data source.

¹High risk behaviors are not mutually exclusive. Individuals may have engaged in more than one high risk behavior ² Inconsistent condom use includes those individuals who reported never or sometimes using condoms during vaginal or anal sex during last two years or since last test result.

Linkage to Care

In 2009, OAPP partnered with the HIV Epidemiology Program to evaluate linkage to care among OAPP-funded testing sites conducting rapid testing as part of the Rapid Testing Algorithm Project. Testing records from 2006 to 2008 were matched against laboratory data to determine which testers were linked to care within 12 months of a new HIV positive test. Among individuals who tested at OAPP-funded targeted testing sites between 2006 and 2008, 65.4% were linked to care within the first year of a new HIV positive test. There were key differences among some target populations. While women were the most likely to be linked to care (71.1%), transgenders (45.8%) and the homeless (37.5%) were least likely to be linked.

Table 14: Linkage to Care, Jan 2006 - Dec 2008¹ (n = 807)

Characteristic	No.	%
Linked to Care ²	528	65.4%
Male (n=707)	463	65.5%
Female (n=76)	54	71.1%
Transgender (n=24)	11	45.8%
African-American (n=183)	99	54.1%
Hispanic/Latino(a) (n=400)	266	66.5%
White (n=165)	123	74.5%
Homeless (n=72)	27	37.5%
MSM (n=463)	309	66.7%
Injection Substance Users (n=85)	43	50.6%
Drug Users ³ (n=193)	120	62.2%

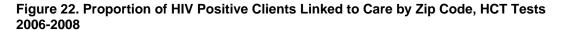
Note: Column percentages may not add up to 100% due to rounding, missing, refused, or skipped values.

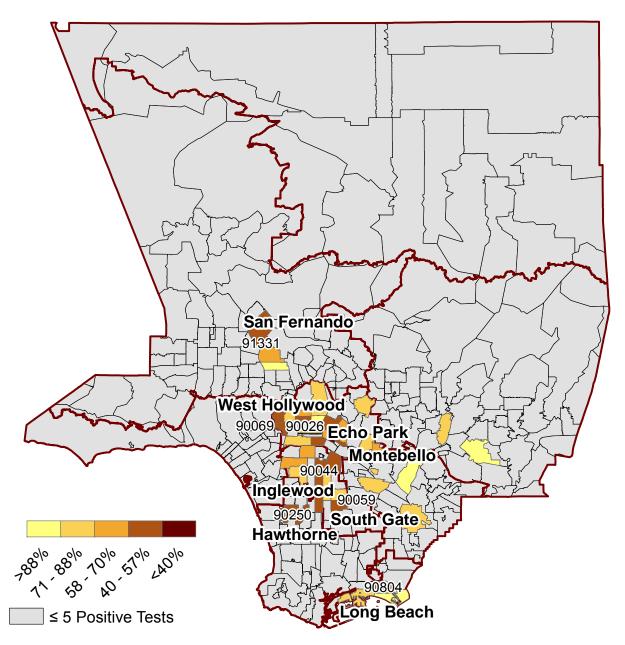
¹ Individuals who tested confidentially at OAPP-funded sites using a rapid test

² Linked to care defined as having one viral load or CD4 lab test completed within one year of positive test result. Represents lab data collected through December 31, 2009

³ Self-reported to have used crack, cocaine, heroin, or amphetamines

Source: HIV Epidemiology 2006-2008





*Source: HIV Counseling and Testing, 2006-08, HIV Surveillance 2006-09

Methamphetamine Use

Methamphetamine (meth) is a highly addictive stimulant that affects the central nervous system and has a high potential for abuse and dependence. In Los Angeles County, meth is second only to marijuana in admissions for substance abuse treatment, accounting for 20.2% of all treatment admissions in 2009ii.

The association between meth use and HIV transmission is related to: 1) the tendency among gay, bisexual and other men who have sex with men to engage in unprotected sex while under the influence of meth and 2) the risks associated with injection drug use for those who inject meth. This section describes meth use in the last year among testers at OAPP-funded sites in 2009.

Among HIV positive individuals, 23.8% reported using meth compared to 14.6% among total tests (Table 15). Transgender individuals reported the highest meth use at 27.4% as compared to other genders. Additionally, 18.4% of non-gay identified men who had sex with men reported using meth, compared to 14.0% of men overall.

Table 15. Methamphetamine (Meth) Use Among Critical Target Populations, HCT Summary Data from OAPP-funded Sites, 2009

Characteristic	N	Reported Meth Use		
		'n	%	
Number of HIV Tests ¹	28,362	4,143	14.6%	
Target Populations ²				
HIV Positive Individuals ³	412	98	23.8%	
Youth (12-24 years)	7,552	1,098	14.5%	
Gay men	2,569	319	12.4%	
Non- gay identified men who have sex with men ⁴	265	47	17.7%	
Transgender Individuals	76	18	23.7%	
Sex Workers	808	260	32.2%	
Women who have sex partners of unknown HIV status	2,629	336	12.8%	
Male	19,685	2,759	14.0%	
Gay men	10,417	1,186	11.4%	
Non- gay identified men who have sex with men ⁴	913	168	18.4%	
Female	8,447	1,321	15.6%	
Women who have sex partners of unknown HIV status	8,176	1,284	15.7%	
Transgender Individuals	230	63	27.4%	
People who Share Needles/Works	1,849	955	51.7%	

^{*}Indentation shows that the characteristic is a subset (sample) of the characteristic above it.

¹ 558 of targeted tests from Targeted Testing section (Figures 15-20) excluded due to limitations in data reporting

system.

2 Target populations as identified in Table 4.6 in the Los Angeles County HIV Prevention Plan 2009-2013 http://publichealth.lacounty.gov/aids/PreventionPlan.htm

Includes newly identified positive individual and individuals who previously tested positive.

⁴ Includes males who self-identified as bisexual or heterosexual and males who responded "didn't know/refused" and reported having sex with men.

ii Los Angeles County Department of Public Health, Substance Abuse Prevention and Control, August 2010

Figure 23 illustrates the proportion of reported meth use among testers at targeted testing sites by race/ethnicity and by age group. American Indian/Alaskan Native testers (21.3%) and persons in the 25 to 34 age group (15.8%) and 35 to 44 year age group (16.0%) reported the highest meth use.

Figure 23. Meth use among HIV Testers at Targeted Testing Sites by Race/Ethnicity and Age Group, 2009 (N = 28,362)

Demographic Characteristic	n	% Reported Meth Use
Race/Ethnicity		
African American/Black	6,548	8.26%
American Indian/Alaskan Native	235	21.3%
Asian/Pacific Islander	1,676	6.62%
Latino(a)	10,837	18.7%
White	8,401	16.1%
Other	665	8.42%
Age Group (years)		
12 to 24	7,582	14.5%
25 to 34	8,833	15.8%
35 to 44	6,258	16.0%
45 to 54	4,187	12.7%
55+	1,474	7.67%
Unknown	28	14.3%

Figure 24 illustrates meth use among testers by residence SPA. The highest meth use was reported among SPA 1 testers (25.9%) followed by SPA 3 testers (22.9%).

Figure 24. Meth use among HIV Testers at Targeted Testing Sites by Residence Service Planning Area (SPA), 2009 (N = 28,362)

Residence Service Planning Area (SPA)	n	% Reported Meth Use	•
SPA 1	467		25.9%
SPA 2	2,852		19.0%
SPA 3	3,882		22.9%
SPA 4	7,990		13.2%
SPA 5	2,450	9.55	%
SPA 6	3,915	6.82%	
SPA 7	1,928		19.9%
SPA 8	2,891		14.3%
Unknown SPA	1,987		12.0%

Table 16 and 17 present the proportion of self-reported meth use among priority and critical target populations within each race/ethnicity category. (The top four race/ethnicity categories, in terms of total number of testers who reported meth use, were included). Latino(a)s, followed closely by Whites, reported the highest percentage of meth use. American Indian/Alaskan Native and Other were not presented in these tables due to insufficient overall numbers.

Table 16. Methamphetamine (Meth) Use Among Critical Target Populations by Race/Ethnicity (African American/Black and Asian/PI/NH), HCT Summary Data from OAPP-funded Sites, 2009

			Reported	Meth Use	е	
	African	Americ	an/Black	Α	sian/PI/	NH
Characteristic	N	n	%	N	n	%
Number of HIV Tests	6,548	541	8.26%	1,676	111	6.62%
Target Populations ²						
HIV Positive Individuals ³	132	31	23.5%	16	5	31.3%
Youth (12-24 years)	1,782	129	7.24%	453	34	7.51%
Gay men	<i>4</i> 85	55	11.3%	181	7	3.87%
Non- gay identified men who have sex with men⁴	58	<5	-	16	<5	-
Transgender Individuals	31	6	19.5%	8	<5	-
Sex Workers	269	54	20.1%	14	<5	-
Women who have sex partners of unknown HIV status	809	36	4.45%	145	<5	-
Male	3,695	361	9.77%	1,250	80	6.40%
Gay men	1,477	199	13.5%	812	36	4.43%
Non- gay identified men who have sex with men⁴	216	25	11.6%	47	<5	-
Female	2,694	161	5.98%	409	29	7.09%
Women who have sex partners of unknown HIV status	2,586	155	5.99%	402	28	6.97%
Transgender Individuals	67	19	28.4%	14	9	64.3%
People who Share Needles/Works	185	87	47.0%	30	5	16.7%

^{*} Indentation shows that the characteristic is a subset (sample) of the characteristic above it.

¹ 558 of targeted tests excluded due to insufficient risk information reported from data source.

² Target populations as identified in Table 4.6 in the Los Angeles County HIV Prevention Plan 2009-2013 http://publichealth.lacounty.gov/aids/PreventionPlan.htm

³ Includes newly identified positive individual <u>and</u> individuals who previously tested positive.

⁴ Includes males who self-identified as bisexual or heterosexual and males who responded "didn't know/refused" and reported having sex with men.

Table 17. Methamphetamine (Meth) Use Among Critical Target Populations by Race/Ethnicity (Latino(a) and White), HCT Summary Data from OAPP-funded Sites, 2009

			Reported	Meth Use	е	
		Latino(a)		White	
Characteristic	N	n	%	N	n	%
Number of HIV Tests	10,837	2,031	18.7%	8,401	1,354	16.1%
Target Populations ²						
HIV Positive Individuals ³	154	35	22.7%	90	29	32.2%
Youth (12-24 years)	3,414	643	18.8%	1,629	268	16.5%
Gay men	1,187	181	15.3%	615	66	10.7%
Non- gay identified men who have sex with men ⁴	137	34	24.8%	46	8	17.4%
Transgender Individuals	24	7	29.2%	9	<5	-
Sex Workers	368	169	45.9%	129	61	47.3%
Women who have sex partners of unknown HIV status	1,059	189	17.9%	522	98	18.8%
Male	7,673	1,363	17.8%	6,319	871	13.8%
Gay men	3,829	565	14.8%	3,937	348	8.84%
Non- gay identified men who have sex with men⁴	436	92	21.1%	182	44	24.2%
Female	2,995	635	21.2%	2,030	474	23.4%
Women who have sex partners of unknown HIV status	2,919	625	21.4%	1,962	454	23.1%
Transgender Individuals	114	33	29.0%	27	9	33.3%
People who Share Needles/Works	765	325	42.5%	799	500	62.6%

^{1,2,3,4} Refer to table 16.

Among testers that reported that they had used meth in the last year, a greater proportion were conventional (30.3%) and confidential (90.9%) compared to **all** targeted testers at 18.2% and 81.7%, respectively.

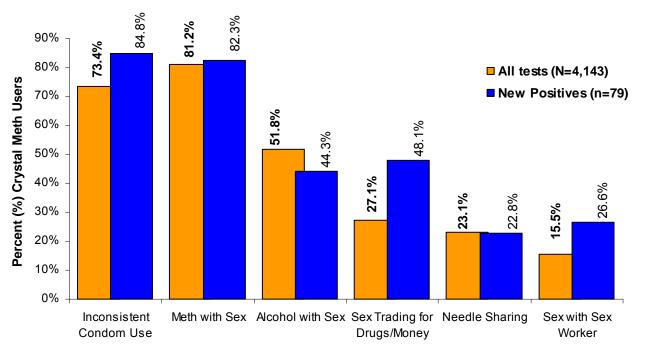
Table 18. Summary Data among Testers Reporting Meth Use at Targeted Testing Sites, 2009

Characteristic	Testers Reporting Meth Use							
	All Tests		Rapid H	HIV Tests	Conventional HIV Tests			
	N	%	n	%	n	%		
Number of HIV Tests	4,143		2,888	69.7%	1,255	30.3%		
Test Election								
Confidential	3,766	90.9%	2,575	89.2%	1,191	94.9%		
Anonymous	377	9.10%	313	10.84%	64	5.10%		
Positive	98	2.37%	73	2.53%	25	1.99%		
New Positives	79	1.91%	61	2.11%	18	1.43%		
Previously Positive	19	0.46%	12	0.42%	7	0.56%		
Disclosure of Test Results								
All Tests ²	4,014	96.9%	2,864	99.2%	1,150	91.6%		
New Positives	74	93.7%	58	95.1%	14	77.8%		

^{*}Indentation shows that the characteristic is a subset (sample) of the characteristic above it.

¹ Received a disclosure of a negative, preliminary positive, or confirmed positive result.

Figure. 25 High Risk Behavior among Testers Reporting Meth Use at Targeted Testing Sites, 2009



High Risk Behaviors*

^{*} High risk behaviors are not mutually exclusive. Individuals may have engaged in more than one high risk behavior.

¹ Inconsistent condom use includes those individuals who reported never or sometimes using condoms during vaginal or anal sex during last two years or since last test result.

Special Events

HIV Counseling and Testing Week Initiative, 2009

CDC estimates that one out of five people living with HIV in the U.S. is unaware of their HIV status. In Los Angeles County an estimated 13,500 people are unaware that they have HIV or AIDSⁱⁱⁱ. The goal of National Testing Day is to provide a further opportunity for people to learn their HIV status and to gain knowledge to take control of their health and their lives.

Given the large geographic area that Los Angeles County encompasses, it was necessary to expand this to a week- long series of events. In 2009, HIV Counseling and Testing Week (HCTW) activities were conducted from June 23 to June 28 by OAPP-funded HCT contractors. The goals of HCTW were to 1) promote and encourage early detection and treatment of HIV; 2) promote awareness of risk behavior by those at risk for HIV infection; 3) encourage counseling and testing services for individuals at risk for HIV; 4) link high-risk individuals with education and prevention programs and assist HIV positive individuals to receive treatment, support, and prevention services; 5) conduct 1,700 tests; and 6) achieve an overall disclosure rate of 95%. HIV testing was provided at storefront locations, clinics, mobile testing units, bars, parks, clubs and special events. In 2009, the HCTW Initiative prioritized testing in geographic areas highly impacted by HIV/AIDS as outlined in the 2009-2013 HIV Prevention Plan, specifically focused on African-American and Latino men ages 18-44.

During HCTW 2009, a total of 1,145 HIV tests were performed at targeted testing OAPP-funded testing sites or events throughout Los Angeles County. One major shift between 2008 and 2009 is in the classification of target populations. The new 2009-2013 HIV Prevention Plan no longer supported the behavioral risk group model for prioritizing populations. The new model focuses on target populations (male, female, HIV positive individuals, youth, transgender individuals, and individuals who share injection paraphernalia), critical populations, and cofactors.

Across the country, National HIV Testing Day is observed on June 27th. Collaborators for this event included the Cities of Long Beach, Los Angeles, Pasadena, and West Hollywood; Los Angeles County Sexually Transmitted Disease Program; HIV/AIDS service provider networks; HIV Prevention Planning Committee; the Commission on HIV; Kaiser Permanente; California AIDS Hotline; California Office of AIDS; Orasure Technologies; HIV Epidemiology Program; and community based organizations.

Of all tests performed during HCTW, 920 were rapid tests and 83.9% of these tests were confidential (Table 19). Among those that provided a reactive confirmatory specimen, 58.3% received their confirmatory test result (Table 20).

The Epidemiology of HIV and AIDS in LAC Presentation to HIV Commission 2010, Los Angeles County Department of Public Health, HIV Epidemiology, 2010

Table 19. Summary Data from OAPP-funded Sites, HCT Week 2009

Characteristic	All Tests		Rapid HIV Tests		Convention	onal HIV Tests
	N	%	n	%	n	%
Number of HIV Tests	1,145		920	80.3%	225	19.7%
Test Election						
Confidential	961	83.9%	749	77.9%	212	22.1%
Anonymous	184	16.1%	171	92.9%	13	7.07%
New Positives	16	1.40%	13	1.41%	3	1.33%
Disclosure of Test Results						
All Tests ²	1,081	94.4%	917	99.7%	164	72.9%

Indentation shows that the characteristic is a subset (sample) of the characteristic above it.

Table 20. Disclosure of New Positive Results Among Rapid HIV and Conventional Tests

Characteristic	New P	Positives
	n	%
Rapid HIV New Positive Tests	13	
Received initial reactive rapid HIV test result	12	92.3%
Provided a specimen for laboratory-based confirmatory testing	12	92.3%
Received confirmed positive result ²		7 58.3%
Conventional HIV New Positive Tests	3	
Received confirmed positive result	2	66.7%

Indentation shows that the characteristic is a subset (sample) of the characteristic above it.

Compared to an average testing week in 2009, there were more than twice the number of tests performed during HCTW (Table 21). New positivity rates were higher (1.37%) than they were for an average week in 2009 (1.14%).

Table 21. Comparison of 2009 Counseling & Testing Data: HCTW Compared to Average Week

Characteristic	N		Average Week 2009 ²			HCT Week 2009	
		%	n		$%^{3}$	n	%
Number of HIV Tests	28,362		533			1,145	
New Positives	327	1.15%	6		1.14%	16	1.37%
Disclosures of Test Results							
All Tests	27,092	95.5%	510		95.6%	1,081	94.4%
New Positives	318	97.2%	6		97.7%	14	87.5%
Received confirmed positive ⁴	198	60.6%		4	60.8%	9	56.3%
results (among all new positives)							

¹ Indentation shows that the characteristic is a subset (sample) of the characteristic above it.

² Received a disclosure of a negative, preliminary positive, or confirmed positive result.

² Individuals who returned one week later to receive a confirmed positive test result through Western Blot or IFA testing.

²Average week calculated by subtracting HCTW total tests from 2009 total tests (table 7) and dividing by 51 weeks.

³Percentages have been calculated before totals (n) rounded to nearest whole number.

⁴ Confirmed positive results refers to individuals who returned at least one week later to receive their positive test result (conventional testing) or their positive laboratory-based confirmatory test result (for rapid tests).

Figure 26 shows the distribution of tests and new positives during HCTW by priority and HCTW target populations. Approximately one third of individuals tested during HCTW were Latino men ages 18-44 (33.9%). Incorporating the "Hot Spot" zip codes listed in the 2009-2013 HIV Prevention Plan to determine HCTW sites was an effective strategy in reaching the HCTW target populations.

In 2009, there was only one specific coordinated HCTW event for transgender individuals thus the total number of tests was lower. However, transgender individuals had the highest positivity rate (22.2%) compared to other target populations. Both persons sharing needles/works and youth had positivity rates above the jurisdictional average (4.11% and 1.70% respectively).

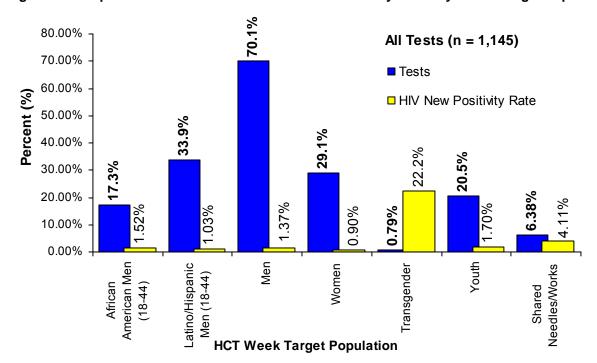


Figure 26. Proportion of 2009 HCTW Tests and HIV Positivity Rates by HCTW Target Populations*

HCTW First Time Testers

HCTW has traditionally encouraged individuals to test for the first time. A total of 366 (32.0%) clients were first time testers. New positivity rate among first time testers was 1.37% compared to an overall new positivity rate of 1.41%. Among the target groups, youth (clients ages 12-24) and Latino men (ages 18-44) demonstrated the highest proportion of first time testers at 39.3% and 45.1%, respectively.

^{*} HCTW Target Populations African American and Latino men 18 – 44 years are not mutually exclusive from the Behavioral Risk Groups (BRG)

The resident and testing SPA was similar for HCTW testers as shown in Figure 27. The only significant difference is in SPA 4. Approximately 36.4% tested in SPA4 compared to 27.1% of HCTW testers who lived in SPA4.

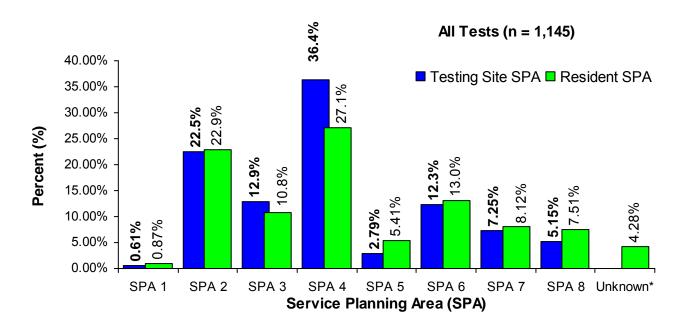


Figure 27. Number of HCTW Tests by Resident SPA vs. Testing Site SPA, 2009

*Unknown Resident SPA – includes testers with missing zip codes and residents from outside LA County

Test Fest 2009, South Los Angeles

To complement HCTW activities, OAPP coordinated a Test Fest event. The Test Fest event took place at Ted Watkins County Park in South Los Angeles on July 25, 2009. The goal of this event was to promote health, increase linkages to health services, increase awareness of HIV/AIDS, and encourage African-Americans to "Erase Doubt" about their HIV status. This event was co-sponsored by the Magic Johnson Foundation, Supervisor Mark Ridley-Thomas, the County of Los Angeles Department of Parks and Recreation, Sheriff's and Fire Department, and several Public Health programs and community based organizations.

HIV testing was provided by AIDS Healthcare Foundation, AltaMed Health Services, Bienestar Human Services, Cal State University of Long Beach, East Valley Community Health Center, and Tarzana Treatment Center, Inc. A total of 134 tests were conducted. The testing event reached its target population where 41.8% of testers were African-American and 49.2% of testers were male. The average age of testers was 36 years (range 13-73). 12.7% of testers reported using drugs (not including alcohol) in the past year, 28.4% had unprotected sex in the past year, and 32.8% were first time testers.

New HIV Testing Projects

Opt-In/Opt-Out HIV Testing Project

The Opt-In/Opt-Out HIV Testing Project, which was implemented in October 2009, builds the capacity of two outpatient safety-net clinics to perform rapid HIV testing and pilot test opt-out HIV screening based on the new CDC recommendations. Data generated by this project are providing the first theory-based assessment of patient acceptability of opt-out HIV screening. By virtue of collaboration between community health partners (Humphrey Comprehensive Health Center (Humphrey) and St. John's Well Child & Family Center), policy OAPP, and academic UCLA partners, the findings of the project are likely to inform design and implementation of HIV screening programs in Los Angeles County.

The objectives of this study were to evaluate and describe different models of HIV screening in safety-net outpatient clinics serving a high HIV risk area and vulnerable minority population. Models vary by type of screening (opt-in versus opt-out) and by personnel initiating the screening process (nurse-initiated versus provider-initiated testing). Additionally, a goal of this project is to compare effectiveness and patient acceptability of the opt-out HIV screening method to the conventional opt-in HIV screening method.

Between October 2009 and December 2009, there were 287 rapid HIV tests conducted. Eighty-three tests were conducted at Humphrey while 204 tests were conducted at St. John's. No positives were identified in that timeframe.

Table 22. Opt-In/Opt-Out Testing Sites Oct - Dec 2009

Characteristic	N	%
Number of HIV Tests	287	
Gender		
Male	135	47.1%
Female	152	52.9%
Race/Ethnicity		
African American/Black	53	18.5%
American Indian/Alaskan Native	<5	-
Asian/Pacific Islander	<5	-
Latino(a)	229	80.0%
White	<5	-
Mixed/Missing/Other	<5	-
Age Group (years)		
unknown	<5	-
18 to 24	31	10.8%
25 to 34	65	22.6%
35 to 44	79	27.5%
45 to 54	69	24.0%
55+	41	14.3%

2009 Data are provisional, numbers are based on tests not necessarily individuals.

Social Network Testing Project (SNTP):

Approximately 21% of people infected with HIV are unaware of their infection^{iv}and account for greater than 54% of incident infections nationwide^v. The percentage of undiagnosed infection increases when focusing on adolescents and young adults. In 2006, 48% of adolescents and young adults (ages 13-24) living with HIV were unaware of their status^{vi}.

Locally, Los Angeles County (LAC) is home to an estimated 13,500 people living with undiagnosed HIV. The vast majority of HIV transmission in LAC occurs via male-to-male sexual (MSM) contact, while African-American males continue to be disproportionately impacted by the disease. Given that young MSM are at high risk for HIV compared to other populations, effective testing strategies that reduce the rates of undiagnosed infections must be evaluated so that affected individuals receive proper HIV care and take necessary action to prevent transmitting HIV to others.

Social network testing is a peer-recruitment strategy that identifies individuals at high risk for HIV and provides them with HCT services. From April to December 2009, a social network testing pilot project was implemented at three Los Angeles County agencies funded by OAPP to provide HCT services: Los Angeles Gay and Lesbian Center, Minority AIDS Project, and O.A.S.I.S. Clinic. Young MSM at high-risk for either becoming infected with or transmitting HIV to others were identified and trained as recruiters to refer members of their social/sexual networks to test for HIV at one of the participating agencies. Subsequent recruiters were identified and trained from the previous pool of network associates that tested.

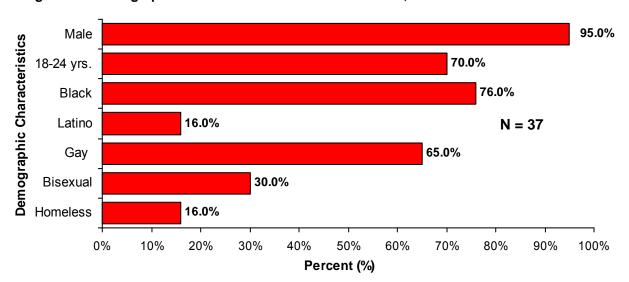


Figure 28. Demographic Characteristics of SNTP Recruiters, 2009

 $^{^{\}mathrm{iv}}$ CDC HIV and AIDS in the United States Fact Sheet, July 2010

^v Cleveland J. Future of HIV prevention; Presented at: National Alliance of State and Territorial AIDS Directors; Washington, DC., 2005.

vi CDC HIV/AIDS Fact Sheet, September 2008. MMWR Analysis Provides New Details on HIV Incidence in U.S. Populations.

Figure 29. Risk Behaviors of SNTP Recruiters, 2009

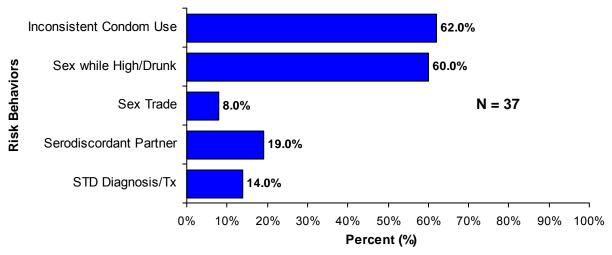


Figure 30. Demographic Characteristics of SNTP Testers, 2009

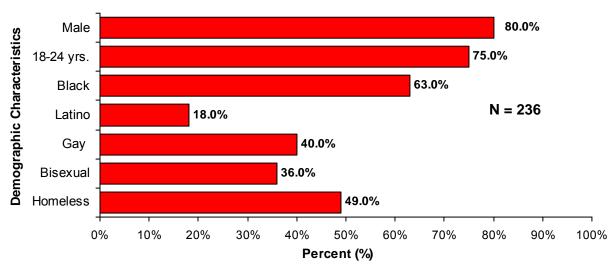


Figure 31. Risk Behaviors of SNTP Testers, 2009

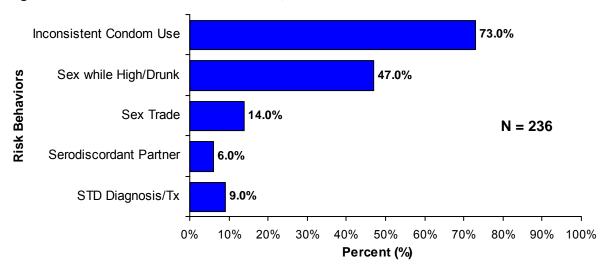


Table 23. HIV Test Results from SNTP Testers, 2009 (N = 236)

HIV Testing/Disclosure	N	%
HIV Test Results		
Overall Positive	17	7.20%
Overall disclosure	16	94.1%
Confirmatory Positive	10	4.24%
Confirmatory Disclosure	7	70.0%
HIV Positive Results		
Newly Diagnosed	15	88.2%
Previously Diagnosed	2	11.85
Number of Prior HIV Tests		
First Time Tester (no previous tests)	61	25.8%
Repeat Testers (at least 1 previous test)	175	74.2%

A total of 236 testers were recruited by 37 SNTP project recruiters, yielding a network index of 6.4 testers per recruiter. An overall positivity rate of 7.2% (17 positive tests) and a new positivity rate of 6.4% (15 newly diagnosed positive tests) was achieved utilizing this strategy.

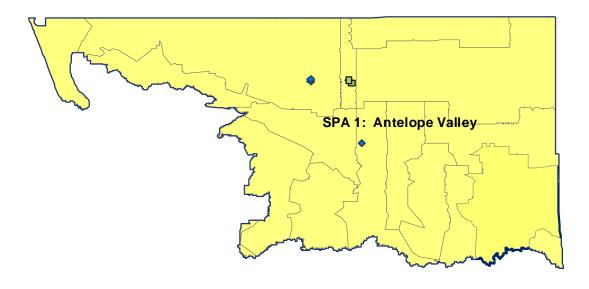
Social network testing is an efficient and effective strategy to reduce undiagnosed infection among young MSM. In Los Angeles County, SNTP resulted in a new HIV positivity rate five times greater than the jurisdictional rate (1.18%) found at OAPP-funded HCT agencies in 2009. This testing strategy has proven successful in reducing the rates of undiagnosed infection in other regions of the US. Further investigation into the feasibility of implementation and generalizability to other high-risk populations must be assessed before this testing strategy becomes a staple within the array of standard prevention services.

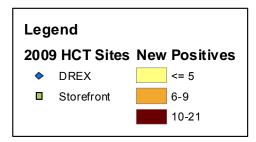
Service Planning Areas (SPA) Overview

The Los Angeles County Board of Supervisors (Chief Elected Officials) divided the County into eight SPAs in order to make public health services more responsive to the local needs. The following section provides a summary of testers from each SPA that received HIV counseling and testing services from OAPP-funded targeted testing sites. Due to unavailable risk information from some data reporting systems, data presented in this section matches the data presented in the *targeted testing - test by target population* section.

SPA 1: Antelope Valley

Figure 32. New Positive Tests by Zip Code of Residence and HCT Sites, SPA 1, January to December, 2009





Data Sources: OAPP HIV Counseling and Testing Data, January – December 2009 *HCT Site Type:

DREX = Drug Expansion Program,

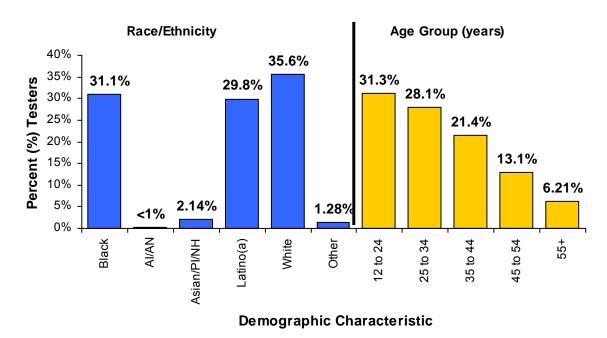
Storefront = agency supported stationary testing site

Table 24. Priority & Critical Target Population Overview of SPA 1 Testers, 2009

Characteristic	n	%
Number of HIV Tests	467	_
New Positives	<5	-
Target Populations ²		
HIV Positive Individuals ³	<5	-
Gay men	-	-
Non- gay identified men who have sex with men⁴	-	-
Transgender Individuals	-	-
Women	-	-
Youth (12-24 years)	146	31.3%
Gay men	22	15.1%
Non- gay identified men who have sex with men ⁴	<5	-
Transgender Individuals	<5	-
Sex Workers	7	4.79%
Women who have sex partners of unknown HIV status	52	35.6%
Male	270	67.8%
Gay men	43	15.9%
Non- gay identified men who have sex with men ⁴	13	4.81%
Female	197	42.2%
Women who have sex partners of unknown HIV status	185	93.9%
Transgender Individuals	<5	-
People who Share Needles/Works	47	10.1%

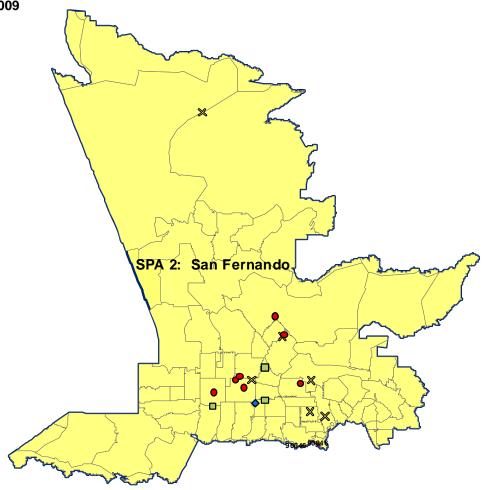
^{1,2,3,4} Refer to table 32.

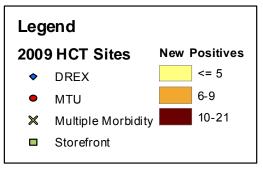
Figure 33. Demographic Characteristics of SPA 1 Testers, 2009



SPA 2: San Fernando Valley







Data Sources: OAPP HIV Counseling and Testing Data, January – December 2009

*HCT Site Type:

DREX = Drug Expansion Program

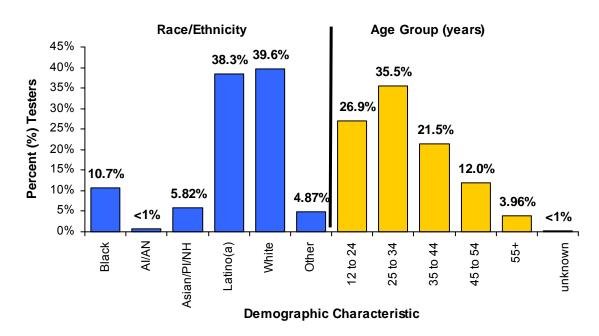
MTU = mobile testing unit

Multiple Morbidity = mobile multiple morbidity testing unit Storefront = agency supported stationary testing site Table 25. Priority & Critical Target Population Overview of SPA 2 Testers, 2009

Characteristic	n	%
Number of HIV Tests	2,852	
New Positives	25	0.88%
Target Populations ²		
HIV Positive Individuals ³	33	1.16%
Gay men	27	81.8%
Non- gay identified men who have sex with men ⁴	<5	-
Transgender Individuals	<5	-
Women	<5	-
Youth (12-24 years)	768	26.93%
Gay men	261	34.0%
Non- gay identified men who have sex with men ⁴	28	3.65%
Transgender Individuals	7	0.91%
Sex Workers	68	8.85%
Women who have sex partners of unknown HIV status	209	27.21%
Male	2,140	75.0%
Gay men	1,029	48.1%
Non- gay identified men who have sex with men ⁴	129	6.03%
Female	696	24.4%
Women who have sex partners of unknown HIV status	680	97.7%
Transgender Individuals	16	0.56%
People who Share Needles/Works	270	9.47%

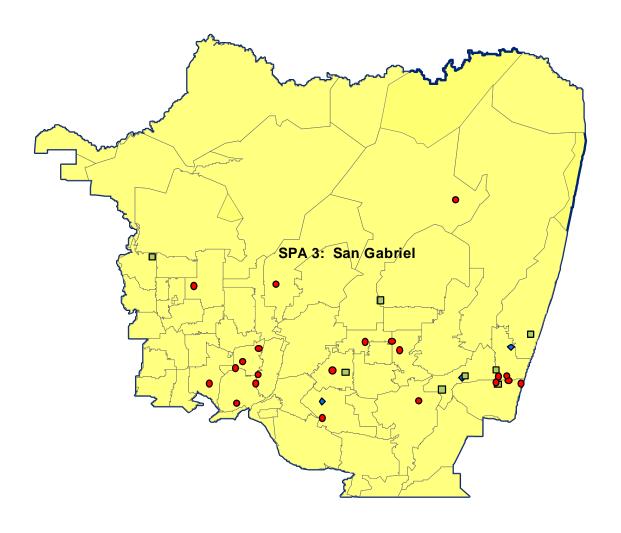
^{1,2,3,4}Refer to table 32.

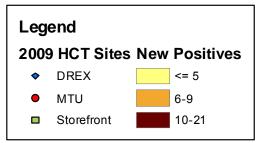
Figure 35. Demographic Characteristics of SPA 2 Testers, 2009



SPA 3: San Gabriel Valley

Figure 36. New Positive Tests by Zip Code of Residence and HCT Sites, SPA 3, January to December, 2009





Data Sources: OAPP HIV Counseling and Testing Data, January – December 2009

**HCT Site Type:

DREX = Drug Expansion Program,

MTU = mobile testing unit

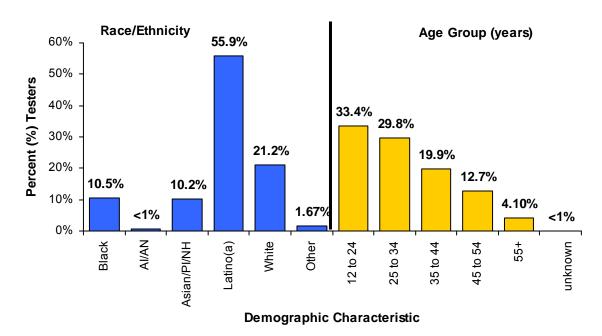
Storefront = agency supported stationary testing site

Table 26. Priority & Critical Target Population Overview of SPA 3 Testers, 2009

Characteristic	n	%
Number of HIV Tests	3,882	
New Positives	28	0.72%
Target Populations ²		
HIV Positive Individuals ³	40	1.03%
Gay men	28	70.0%
Non- gay identified men who have sex with men⁴	<5	-
Transgender Individuals	<5	-
Women	<5	-
Youth (12-24 years)	1,297	33.4%
Gay men	375	28.9%
Non- gay identified men who have sex with men ⁴	68	5.24%
Transgender Individuals	6	0.46%
Sex Workers	56	4.32%
Women who have sex partners of unknown HIV status	471	36.3%
Male	2,435	62.7%
Gay men	1,008	41.4%
Non- gay identified men who have sex with men ⁴	169	6.94%
Female	1,423	36.7%
Women who have sex partners of unknown HIV status	1,391	97.8%
Transgender Individuals	24	0.62%
People who Share Needles/Works	445	11.5%

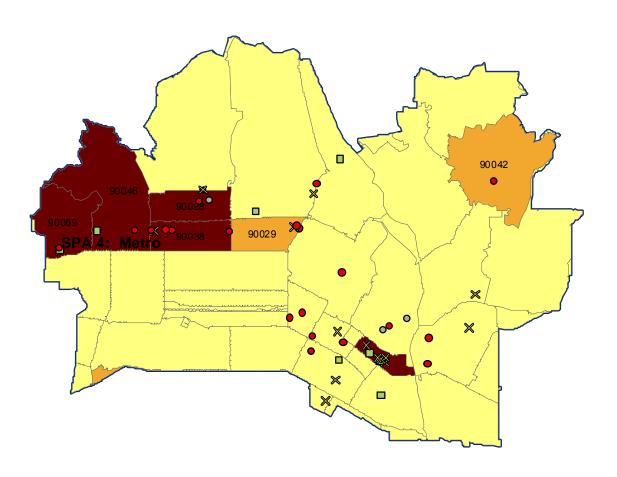
^{1,2,3,4}Refer to table 32.

Figure 37. Demographic Characteristics of SPA 3 Testers, 2009



SPA 4: Metro

Figure 38. New Positive Tests by Zip Code of Residence and HCT Sites, SPA 4, January to December, 2009



Lege	end		
2009	HCT Sites	New	Positives
•	Court		<= 5
♦	DREX		6-9
•	MTU		10-21
×	Multiple Morbidity		
	Storefront		

Data Sources: OAPP HIV Counseling and Testing Data, January – December 2009
*HCT Site Type:
Court = court-order (mandatory) testing
DREX = Drug Expansion Program,
MTU = mobile testing unit

Multiple Morbidity = multiple morbidity mobile testing unit

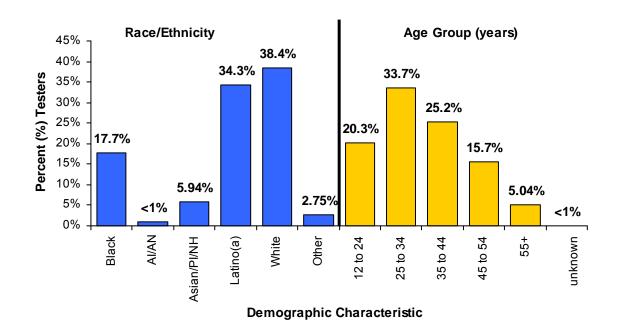
Storefront = agency supported stationary testing site

Table 27. Priority & Critical Target Population Overview of SPA 4 Testers, 2009

Characteristic	n	%
Number of HIV Tests	7,990	
New Positives	126	1.58%
Target Populations ²		
HIV Positive Individuals ³	149	1.86%
Gay men	121	81.2%
Non- gay identified men who have sex with men ⁴	<5	-
Transgender Individuals	13	8.72%
Women	7	4.70%
Youth (12-24 years)	1,621	20.3%
Gay men	804	49.6%
Non- gay identified men who have sex with men ⁴	38	2.34%
Transgender Individuals	35	2.16%
Sex Workers	364	22.5%
Women who have sex partners of unknown HIV status	428	26.4%
Male	6,267	78.4%
Gay men	4,460	71.2%
Non- gay identified men who have sex with men ⁴	171	2.73%
Female	1,620	20.3%
Women who have sex partners of unknown HIV status	1,574	97.2%
Transgender Individuals	103	1.29%
People who Share Needles/Works	292	3.65%

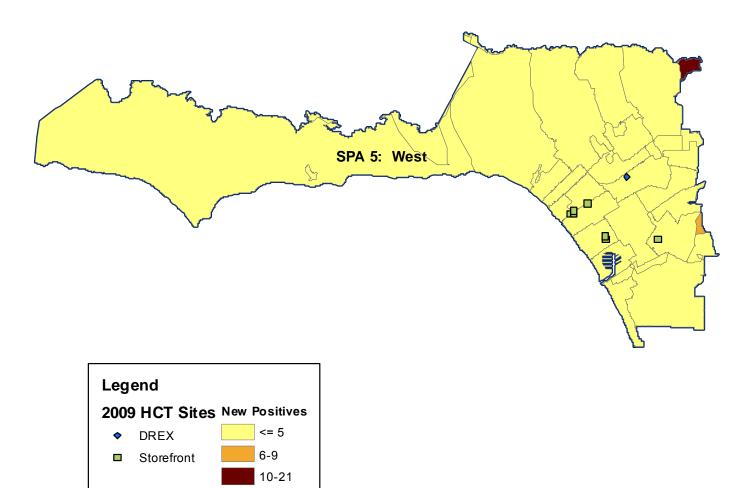
^{1,2,3,4}Refer to table 32.

Figure 39. Demographic Characteristics of SPA 4 Testers, 2009



SPA 5: West

Figure 40. New Positive Tests by Zip Code of Residence and HCT Sites, SPA 5, January to December, 2009



Data Sources: OAPP HIV Counseling and Testing Data, January – December 2009 ***HCT Site Type:**

DREX = Drug Expansion Program

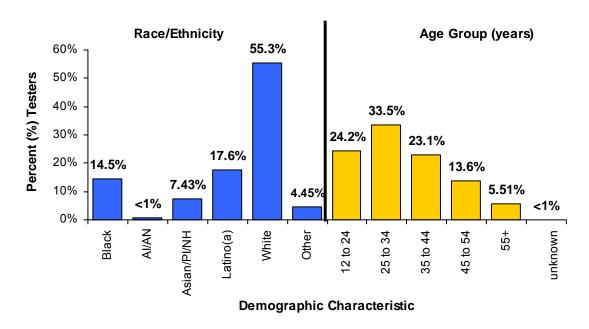
Storefront = agency supported stationary testing site

Table 28. Priority & Critical Target Population Overview of SPA 5 Testers, 2009

Characteristic	n	%
Number of HIV Tests	2,468	
New Positives	13	0.53%
Target Populations ²		
HIV Positive Individuals ³	18	0.73%
Gay men	15	83.3%
Non- gay identified men who have sex with men ⁴	<5	-
Transgender Individuals	<5	-
Women	<5	-
Youth (12-24 years)	593	24.2%
Gay men	170	28.7%
Non- gay identified men who have sex with men ⁴	7	1.18%
Transgender Individuals	1	0.17%
Sex Workers	23	3.88%
Women who have sex partners of unknown HIV status	236	39.8%
Male	1,762	71.9%
Gay men	877	49.8%
Non- gay identified men who have sex with men ⁴	46	2.61%
Female	680	27.8%
Women who have sex partners of unknown HIV status	657	96.6%
Transgender Individuals	8	0.33%
People who Share Needles/Works	134	5.47%

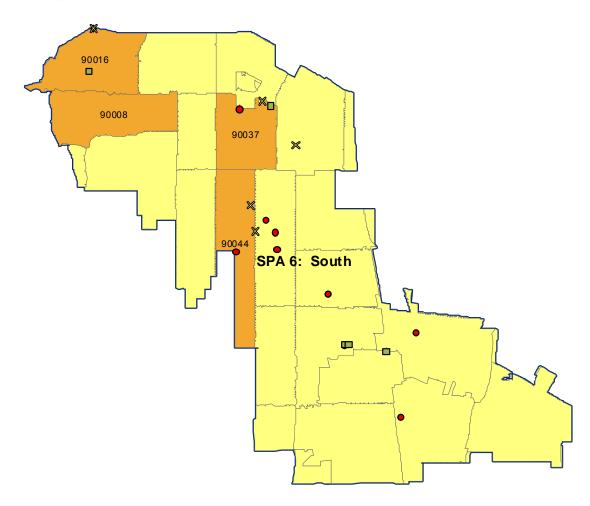
^{1,2,3,4}Refer to table 32.

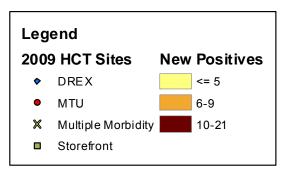
Figure 41. Demographic Characteristics of SPA 5 Testers, 2009



SPA 6: South

Figure 42. New Positive Tests by Zip Code of Residence and HCT Sites, SPA 6, January to December, 2009





Data Sources: OAPP HIV Counseling and Testing Data, January – December 2009 *HCT Site Type:

DREX = Drug Expansion Program

MTU = mobile testing unit

Multiple Morbidity = multiple morbidity mobile testing unit Storefront = agency supported stationary testing site

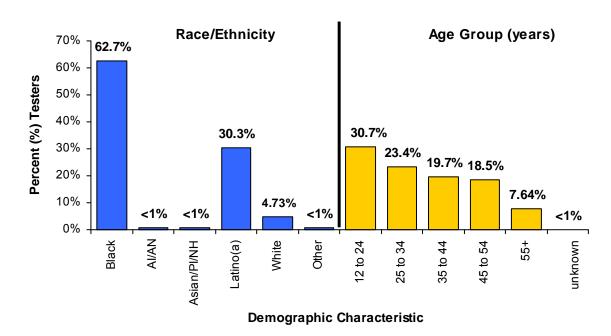
45

Table 29. Priority & Critical Target Population Overview of SPA 6 Testers, 2009

Characteristic	n	%
Number of HIV Tests	3,915	
New Positives	57	1.46%
Target Populations ²		
HIV Positive Individuals ³	72	1.84%
Gay men	39	54.2%
Non- gay identified men who have sex with men ⁴	<5	-
Transgender Individuals	7	9.72%
Women	10	13.9%
Youth (12-24 years)	1,200	30.7%
Gay men	277	23.1%
Non- gay identified men who have sex with men ⁴	33	2.75%
Transgender Individuals	10	0.83%
Sex Workers	121	10.1%
Women who have sex partners of unknown HIV status	567	47.3%
Male	2,162	55.2%
Gay men	736	34.1%
Non- gay identified men who have sex with men ⁴	123	5.69%
Female	1,725	44.1%
Women who have sex partners of unknown HIV status	1,640	95.1%
Transgender Individuals	28	0.72%
People who Share Needles/Works	88	2.25%

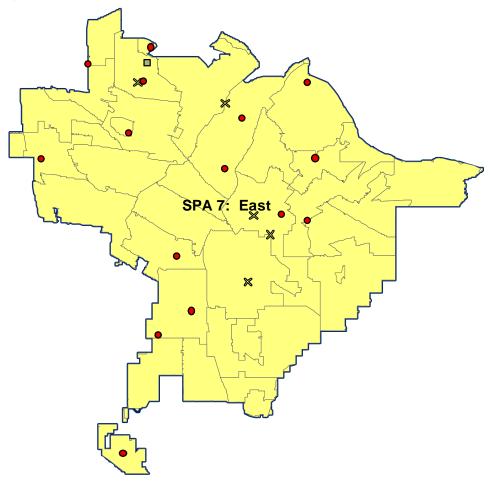
^{1,2,3,4} Refer to table32

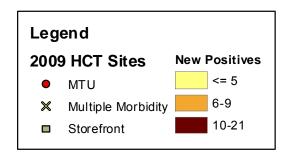
Figure 43. Demographic Characteristics of SPA 6 Testers, 2009



SPA 7: East

Figure 44. New Positive Tests by Zip Code of Residence and HCT Sites, SPA 7, January to December, 2009





Data Sources: OAPP HIV Counseling and Testing Data, January – December 2009

*HCT Site Type:

MTU = mobile testing unit

Multiple Morbidity = multiple morbidity mobile testing unit

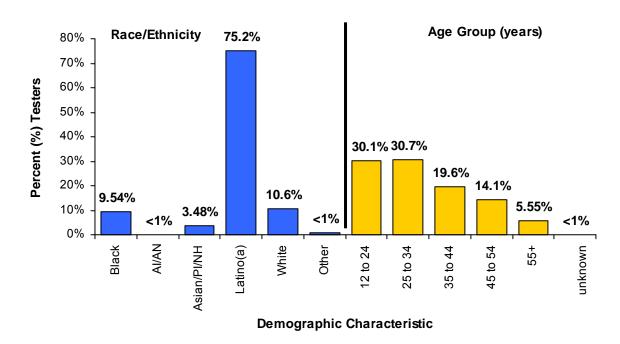
Store front = agency supported stationary testing site

Table 30. Priority & Critical Target Population Overview of SPA 7 Testers, 2009

Characteristic	n	%
Number of HIV Tests	1,928	_
New Positives	24	1.24%
Target Populations ²		
HIV Positive Individuals ³	27	1.40%
Gay men	19	70.4%
Non- gay identified men who have sex with men ⁴	<5	-
Transgender Individuals	<5	-
Women	<5	-
Youth (12-24 years)	580	30.1%
Gay men	165	28.5%
Non- gay identified men who have sex with men ⁴	27	4.66%
Transgender Individuals	<5	-
Sex Workers	21	3.62%
Women who have sex partners of unknown HIV status	188	32.4%
Male	1,297	67.3%
Gay men	503	38.8%
Non- gay identified men who have sex with men ⁴	74	5.71%
Female	622	32.3%
Women who have sex partners of unknown HIV status	605	97.3%
Transgender Individuals	9	0.47%
People who Share Needles/Works	198	10.3%

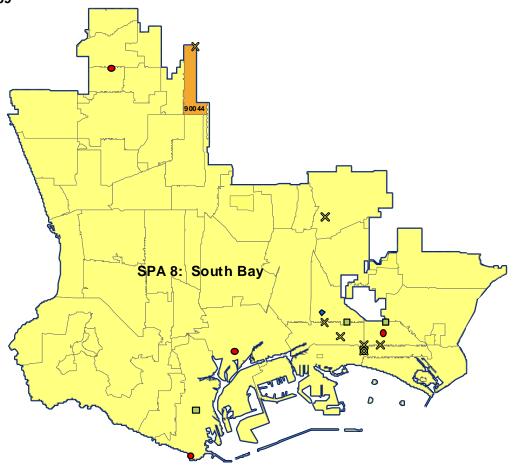
^{1,2,3,4} Refer to table 32.

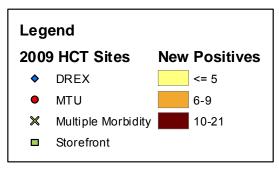
Figure 45. Demographic Characteristics of SPA 7 Testers, 2009



SPA 8: South Bay

Figure 46. New Positive Tests by Zip Code of Residence and HCT Sites, SPA 8, January to December, 2009





Data Sources: OAPP HIV Counseling and Testing Data, January - December 2009 *HCT Site Type:

DREX = Drug Expansion Program, Mobile = mobile testing unit (MTU)

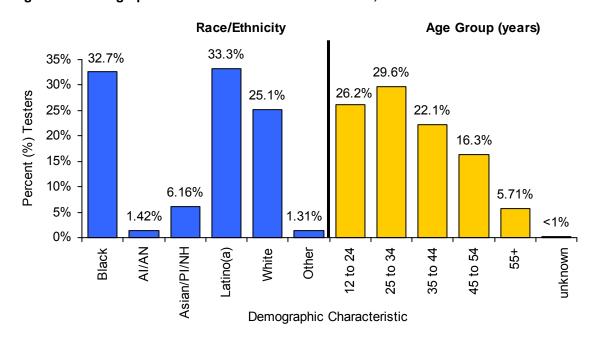
Multiple Morbidity = multiple morbidity mobile testing unit Storefront = agency supported stationary testing site

Table 31. Priority & Critical Target Population Overview of SPA 8 Testers, 2009

Characteristic	n	%
Number of HIV Tests	2,891	
New Positives	34	1.18%
Target Populations ²		
HIV Positive Individuals ³	46	1.59%
Gay men	31	67.4%
Non- gay identified men who have sex with men ⁴	<5	-
Transgender Individuals	<5	-
Women	<5	-
Youth (12-24 years)	756	26.2%
Gay men	230	30.4%
Non- gay identified men who have sex with men ⁴	41	5.42%
Transgender Individuals	<5	-
Sex Workers	68	8.99%
Women who have sex partners of unknown HIV status	275	36.4%
Male	1,944	67.2%
Gay men	907	46.7%
Non- gay identified men who have sex with men ⁴	139	7.15%
Female	927	32.1%
Women who have sex partners of unknown HIV status	900	97.1%
Transgender Individuals	20	0.69%
People who Share Needles/Works	217	7.51%

^{1,2,3,4}Refer to table 32.

Figure 47. Demographic Characteristics of SPA 8 Testers, 2009



Residence SPA Unknown

In 2009, 7.0% of testers (n = 1,987) did not provide a residence zip code or did not live in Los Angeles County and were therefore defined as Residence SPA Unknown in this report.

Table 32. Priority & Critical Target Population Overview of unknown SPA Testers, 2009

Characteristic	n	%
Number of HIV Tests	1,987	
New Positives	18	0.91%
Target Populations ²		
HIV Positive Individuals ³	23	1.16%
Gay men	21	91.3%
Non- gay identified men who have sex with men ⁴	<5	-
Transgender Individuals	<5	-
Women	<5	-
Youth (12-24 years)	621	31.3%
Gay men	265	42.7%
Non- gay identified men who have sex with men ⁴	19	3.06%
Transgender Individuals	11	1.77%
Sex Workers	80	12.9%
Women who have sex partners of unknown HIV status	203	32.7%
Male	1,408	70.9%
Gay men	854	60.7%
Non- gay identified men who have sex with men ⁴	49	3.48%
Female	557	28.0%
Women who have sex partners of unknown HIV status	544	97.7%
Transgender Individuals	22	1.11%
People who Share Needles/Works	158	7.95%

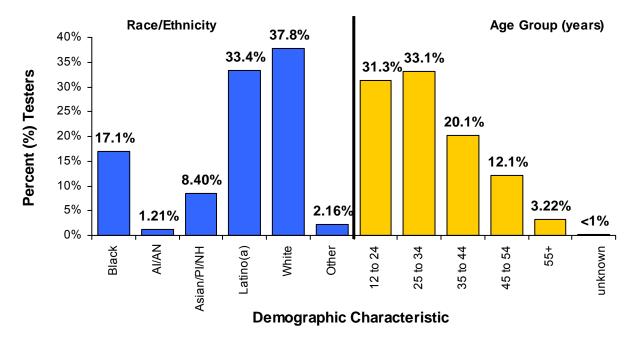
¹ Indentation shows that the characteristic is a subset (sample) of the characteristic above it.

²Priority and critical target populations as identified in Table 4.6 in the Los Angeles County Department of Public Health HIV Prevention Plan 2009-2013 http://publichealth.lacounty.gov/aids/PreventionPlan.htm

³ Includes newly identified positive individual <u>and</u> individuals who previously tested positive.

⁴ Includes males who did not self-identify as homosexual or bisexual and reported having sex with men.

Figure 48. Demographic Characteristics of Testers with Unknown Residence SPA, 2009



Resources

OAPP website: http://publichealth.lacounty.gov/index.htm

HIV Epidemiology website: http://publichealth.lacounty.gov/hiv/index.htm

Los Angeles County HIV Prevention Plan 2009-2013 http://publichealth.lacounty.gov/aids/PreventionPlan.htm

HIV/AIDS Resources: http://publichealth.lacounty.gov/aids/hotlinewebsite.htm

List of **FREE** HIV/AIDS Testing and Care Services in Los Angeles County http://www.hivla.org/search.cfm