



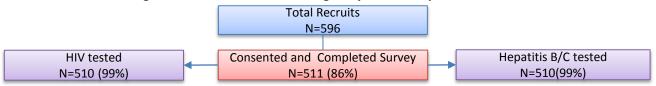
National HIV Behavioral Surveillance among People Who Inject Drugs NHBS-IDU5, 2018

NHBS is a CDC-funded behavioral surveillance system that has been implemented each year since 2004 in 20 cities nationwide to help state and local health departments monitor HIV risk behaviors among groups at highest risk for HIV infection. NHBS-IDU in Los Angeles County (LAC) is designed to generate estimates that are representative of the overall population of people who inject drugs (PWID) in LAC. In 2018, the LAC Division of HIV and STD Programs (DHSP) completed the fourth cycle of NHBS among people who inject drugs in LAC.

Respondent-driven sampling, a peer-referral sampling method was used to recruit PWID. Participants had to be LAC residents, at least 18 years of age and report injecting drugs without a prescription in the past 12 months.

Participants completed an interviewer-administered, anonymous standardized questionnaire about HIV-related behaviors. All participants were offered anonymous rapid HIV and standard Hepatitis B and C testing. All testers received HIV counseling and referrals for social and medical services as needed.

Figure 1. NHBS-IDU5 Recruits, Eligibility and Participation



Demographics and Other Characteristics

Between July and November 2018, 596 recruits were screened for NHBS. 511 were eligible and completed the survey. Of these 67% were male, 22% were aged 30 years or younger and 62% reported a high school education or less. Whites, Latinos and Blacks represented 42%, 40% and 10% of the sample, respectively. Seventy-five percent reported a household income below the federal poverty level, 12% had no health insurance, 64% were currently homeless and 46% had been incarcerated in the past 12 months. The majority identified as heterosexual (82%), 12% identified as bisexual and 6% as homosexual.

Table 1. Injection drug use history by race/ethnicity

	Total	Black	Latino	White
Median age in years (range)	42 (18-74)	59 (21-71)	46(19-74)	36(20-64)
Median age in years at first injection (range)	21(7-55)	22(10-53)	21(8-55)	21(9-53)
Median years since first injection (range)	16 (0-55)	35(1-53)	20(0-55)	11(0-49)

Injection Drug Use (IDU)

- Participants reported an average of 19 years of IDU and a median age of 21 years at first injection drug use (Table 1). Black respondents were older (59 years), compared with Latinos (46 years) and Whites (36 years).
- Eighty–four percent of participants reported injecting heroin in the past 12 months, and 70% reported injecting heroin daily (Figure 2). Proportionally, injection of methamphetamines during the past 12 months increased from 59% in IDU4 (2015) to 68% in IDU5(2018).

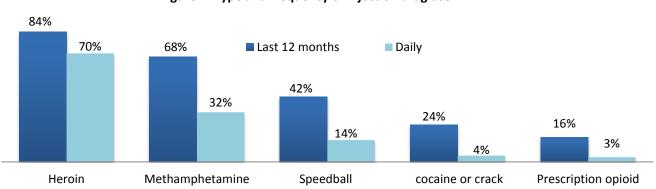


Figure 2. Type and frequency of injection drug use

Table 2. Injection drug use and sexual behaviors by gender and age

Behavior in the past 12 months	Overall	Gender		Age (years)	
	(N = 511)	Men (n=342)	Women (n=169)	18–29 (n=110)	30+ (n=401)
Shared syringes receptively	36%	36%	36%	50%	32%
Shared injection equipment receptively	60%	61%	59%	74%	56%
Exchanged sex for money or drugs	14%	13%	14%	10%	15%

Syringe Sharing (Table 2)

Receptive sharing of syringes or injection equipment refers to using a syringe or injective equipment that has already been used by someone else. Overall, 36% reported receptive sharing of syringes while 60% reported receptive sharing of other injection equipment (e.g., cookers, cotton, or water). Among those who shared syringes, the average number of sharing partners was 4 (data not shown). Compared with ≥ 30 years olds, proportionally more participants aged 18–29 years reported receptive syringe sharing (50% vs 32%) and injection equipment sharing (74% vs 56%).

Sexual Behavior (Table 2)

• Fourteen percent of participants reported having had sex in exchange for money or drugs in the past 12 months (Table 2). Fifteen percent of male participants reported male-to-male sex and 10% reported having sex with both men and women in the past 12 months (data not shown).

Overdose Prevalence and Prevention

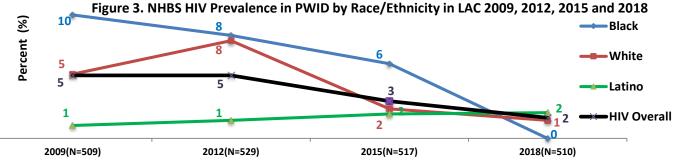
• Twenty-four percent had overdosed in the past 12 months and 70% had witnessed an overdose. 42% currently owned Narcan, a medication that can reverse overdoses and 37% had received training to help someone survive an overdose.

HIV and HCV Testing History and Prevalence

- Of the 511 participants, 90% (462) reported testing for HIV in their lifetime and 54% (277) reported testing for HIV in the previous 12 months. HIV prevalence was 1.6% (8/510). Of the 8 HIV-positive PWID, 3 were unaware of their HIV infection.
- Of 510 participants screened for HCV, 295(58%) were anti-HCV positive, meaning their body had previously been exposed to the hepatitis C virus. Of those aware of their HCV infection, 22% had never received treatment for HCV. The prevalence of HIV and HCV coinfection was 1%.

Syringe Sources and Prevention Services

- Sixty-nine percent of participants had obtained sterile syringes from LAC syringe exchange programs within the previous 12 months. Other syringe sources reported by participants included pharmacies (47%) and friends (32%). 26% of people reported always disposing of used syringes safely.
- During the previous 12 months, 75% had received clean injection equipment, 52% had received free condoms, and 27% had participated in an HIV behavioral intervention. 55% had taken medicines including methadone, buprenorphine, Suboxone or Subutex, to treat opioid use disorder.
- Sixteen percent had heard of Pre-exposure Prophylaxis (PrEP), 3% discussed PrEP with a healthcare provider and 1% had used PrEP.



Among PWID in LAC, HIV prevalence and HCV prevalence has decreased modestly

- Overall HIV prevalence was 5% in 2009, 5% in 2012,3% in 2015 and 1.6% in 2018. (Figure 3)
- Overall HCV antibody prevalence was 77% in 2012, 65% in 2015 and 58% in 2018.

Syringe sharing is greater among young PWID as compared with older PWID.