



National HIV Behavioral Surveillance Among Heterosexuals at Increased Risk for Infection (NHBS-HET2)



The Florida Department of Health, HIV/AIDS & Hepatitis Section in partnership with the University of Miami and the CDC continues to conduct National HIV Behavioral Surveillance (NHBS) in Miami-Dade County, Florida. NHBS involves a repeated, cross-sectional survey and HIV testing of populations at high risk for HIV infection: men who have sex with men (MSM), injection drug users (IDU), and heterosexuals at risk for HIV infection (HET). NHBS activities are implemented in one-year cycles so that data are collected from each risk group every three years; these study cycles are referred to as NHBS-MSM, NHBS-IDU, and NHBS-HET. Individuals who consent to participate undergo an anonymous interview and are paid for their time. NHBS is conducted in over 20 US metropolitan statistical areas with high AIDS prevalence rates. The overarching goal of NHBS is to help evaluate and direct local and national prevention efforts.

The second round of data collection with heterosexuals at increased risk for HIV infection occurred July – November 2010. Formative research and sampling was concentrated in high-risk areas (HRAs). HRAs were defined as geographic areas with high rates of poverty. To identify these areas, staff used U.S. Census Bureau poverty data. In contrast to HET1 sampling methodology, HET2 employed respondent driving sampling (participants refer their associates, friends, etc.) within the selected HRAs to obtain a sample of 577 eligible participants. Consenting participants completed an anonymous interview consisting of the core NHBS questionnaire and a local questionnaire tailored to Miami-Dade County, Florida. NHBS-HET2 participants were offered anonymous HIV counseling and testing, as well as referrals to psychosocial and healthcare services.

◆ NHBS-HET2 Sample

- 577 interviews and 576 HIV tests conducted between July and November 2010.
- Eligibility was limited to persons who: reported residence in Miami-Dade County; 18-60 years of age; having at least one opposite-sex partner in the previous 12 months; male or female (not transgender); not previously participating in the NHBS-HET2 study cycle; and ability to complete the interview in English or Spanish

◆ Demographic Characteristics of the Sample (excludes self-reported HIV positives, N=537)

- A majority (74%) were black; 23% were Hispanic, 3% white, and <1% other
- 58% were male and 42% were female
- The mean age was 39 years
- 82% self-identified as heterosexual; 17% as bisexual
- A majority (82%) were born in the US; 8% identified Cuba as their country of origin
- Nearly 2/3 (63%) were without health insurance at the time of their interview
- 3/4 (76%) reported annual income under \$10,000
- A majority (63%) were unemployed at the time of their interview
- 52% were depressed (according to the CES-D 10)
- 38% have less than a high school education
- 1/4 (25%) were incarcerated in the past 12 months
- 5% self-reported being diagnosed with hepatitis C (HCV)
- 1/4 (25%) were currently homeless

◆ HIV Prevalence

- 1 in 12 (8.7%) tested positive for HIV: 6.2% of males; 11.8% of females
 - Of participants reporting only heterosexual risk in their lifetime (N=466)¹, 1 in 13 (7.5%) tested HIV positive: 4% male; 11% female
- 1 in 3 (36%) participants testing positive were unaware of their HIV status: 55% male; 24% female
- Variables associated with HIV positive status: homelessness; HCV positive; crack cocaine use

◆ HIV Testing

- 4/5 (83%) have tested for HIV in their lifetime
- 41% tested for HIV in the past 12 months²
- Variable associated with not testing for HIV in past 12 months: Hispanic ethnicity
- Variables associated with testing for HIV in past 12 months: female, aged 23 – 29 yrs, alcohol/drug treatment in past 12 months, injection drug use, having health insurance, higher income
- The most frequently reported facilities administering participants' most recent HIV test include: HIV street outreach program (24%), doctor's office (private) (11%), community health center/public health clinic (10%) and correctional facility (7%)

◆ Sexual Risk Behaviors among Males in the Past 12 Months

- Nearly 2/3 (61%) reported unprotected vaginal or anal sex with a main partner
- Almost 1/2 (46%) reported unprotected vaginal or anal sex with a casual partner
- 1/4 (25%) reported unprotected vaginal or anal sex with an exchange partner (exchanging sex for money, drugs, etc.)
- Over 3/4 (78%) reported more than 1 sex partner
- 12% reported unprotected vaginal or anal sex with male and female partners: 9% among black men; 20% among Hispanic men

◆ Sexual Risk Behaviors among Females in the Past 12 Months

- 3/4 (74%) reported unprotected vaginal or anal sex with a main partner
- 1/4 (26%) reported unprotected vaginal or anal sex with a casual partner
- 16% reported unprotected vaginal or anal sex with an exchange partner
- 2/3 (63%) reported more than 1 sex partner

◆ Receipt of Prevention Services in the Past 12 Months & Healthcare Experiences

- Over 1/4 (29%) received free condoms, 3/5 (60%) stated use of these free condoms
- Only 2% reported participation in either an individual-level³ or group-level⁴ intervention
- Half (53%) visited a healthcare provider in the past 12 months; of these², 45% were offered an HIV test
- Of participants who self-reported being HIV positive, nearly 2/3 (60%) reported currently taking HIV medication

◆ Drug Use in the Past 12 months

- Almost half (48%) reported marijuana use
- 30% reported cocaine use; 17% reported crack cocaine use
- Less than 2% reported injection of illicit drugs; 4% reported ever injecting drugs
- Over 2/5 (45%) reported heavy alcohol use⁵ in the past 30 days: 1/2 (52%) males; 1/3 (36%) of females
- Of cocaine users, nearly 2/3 (62%) reported use at least once a week; of crack cocaine users, 3/4 (75%) reported use at least once a week and 8% reported use more than once a day

◆ Beliefs on How HIV Can Be Transmitted

Participants received the following list and stated whether or not they believed that each item represents a means by which HIV can be spread. The percentages represent "yes" responses.

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| • Sharing needles/syringes to inject drugs (100%) | • Receiving a blood transfusion (86%) | • Using public toilets (12%) |
| • Vaginal sex (99%) | • Donating blood (73%) | • Food (10%) |
| • Anal sex (95%) | • Mosquitoes (50%) | • Drinking fountains (6%) |
| • Oral sex (89%) | | |

¹Analysis excludes persons reporting IDU or MSM risk behavior (ever)

²Analysis excludes persons diagnosed with HIV over 12 months ago

³A one-on-one conversation with an outreach worker, counselor, etc. about HIV prevention

⁴A structured session involving group participation about HIV prevention

⁵5 or more drinks in one sitting for males; 4 or more drinks in sitting for females