

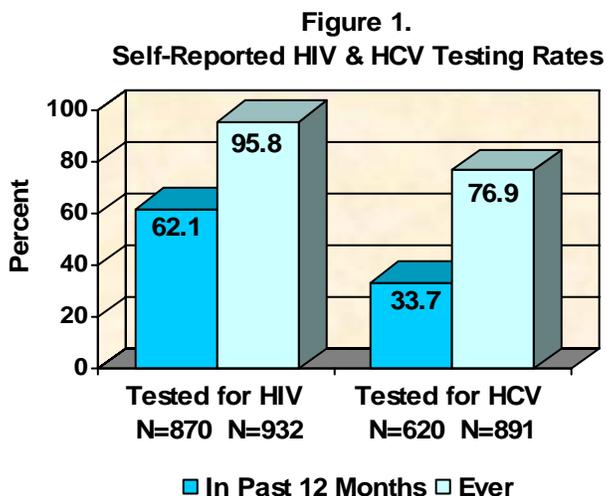
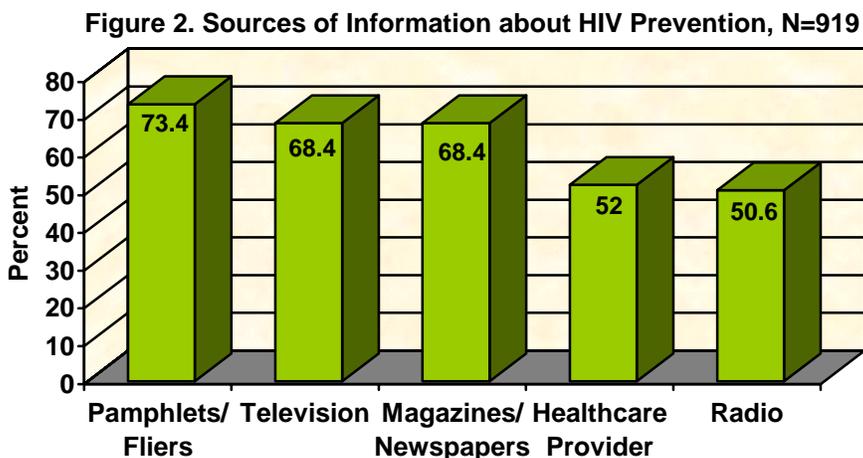
National HIV Behavioral Surveillance (NHBS) Preliminary Findings on Injection Drug Users

The Florida Department of Health, Bureau of HIV/AIDS is collaborating with the University of Miami and the CDC to conduct National HIV Behavioral Surveillance (NHBS) in South 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 HIV test and are paid for their time. NHBS is conducted in over 20 US metropolitan areas with high AIDS prevalence rates. The overarching goal of NHBS is to help evaluate and direct local and national prevention efforts.

The second cycle of data collection (May 2005 - February 2006) focused on IDUs. The sampling method used for NHBS-IDU was respondent-driven sampling (respondents refer others to participate). In Miami-Dade and Broward counties, 934 IDUs (defined as persons who injected drugs in the past 12 months) participated in NHBS-IDU. Of the 934 participants, 665 (71.2%) were male and 269 (28.8%) were female. The mean age was 43 years. The race/ethnicity of participants was as follows: 469 (50.2%) black, 275 (29.4%) white, 159 (17%) Hispanic, and 31 (3.3%) another racial/ethnic group or multiracial. Of the 934 participants, 142 (16%) reported an HIV-positive diagnosis and 297 (32.4%) reported being diagnosed with hepatitis C (HCV). A majority of the sample reported depression (according to the CES-D 10), 680 (72.8%); having no health insurance, 672 (72.1%); and being homeless in the past 12 months, 532 (57%). Almost half (443, 47.5%) reported being incarcerated in the past 12 months.

As shown in Figure 1, nearly two-thirds (540, 62.1%) of IDUs reported testing for HIV in the past 12 months (analysis excludes persons diagnosed with HIV infection over 12 months ago), and almost all (893, 95.8%) reported ever testing for HIV. In contrast, approximately one-third (209, 33.7%) of participants reported testing for HCV in the past 12 months (analysis excludes persons diagnosed with HCV infection over 12 months ago), and over three-fourths (685, 76.9%) reported ever testing for HCV.

Participants received a list of items and were asked to indicate whether each was a source where they get information about HIV prevention. The most commonly reported sources of information about HIV prevention (Figure 2) were pamphlets/fliers, 676 (73.5%); television, 629 (68.4%); magazines/newspapers, 630 (68.6%); a healthcare provider, 479 (52.1%); and radio, 465 (50.6%).



Other reported sources were friends/ family/ partners, 436 (47.4%); a county health department, 372 (40.4%); an AIDS service organization, 317 (34.5%); a church/temple/ mosque, 232 (25.2%); other, 90 (9.9%); the Internet, 86 (9.3%); hotlines, 71 (7.7%); and work, 66 (7.1%).

These data stress the importance of providing interventions that address sexual and drug-use risk behaviors, promoting regular HIV and HCV testing, and building strong linkage systems to meet the various psychosocial and healthcare needs among IDUs.