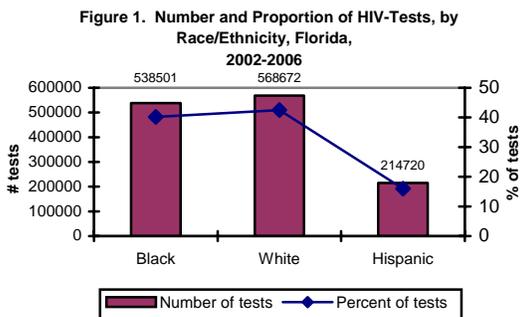


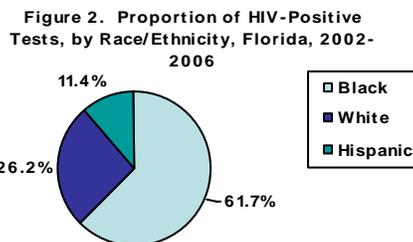
HIV Testing Trends Among Minority Populations in Florida

Although diversity has long been a characteristic of Florida's population, the racial and ethnic composition of the state has changed over time. With these changes have come important consequences for the state's health as many measures of disease differ significantly by race and ethnicity. Since 1994, the HIV/AIDS epidemic has undergone a marked shift toward a greater proportion of new HIV/AIDS cases among blacks, women, members of other racial/ethnic minority populations, and persons exposed through heterosexual contact.

The analysis of routinely collected data from the statewide HIV Counseling, Testing, and Linkage Program in this report focuses on racial/ethnic minority populations for the years 2002-2006. During this time period there were 1,488,856 tests conducted overall, of which 29,048 (1.95%) were positive. **Figure 1** illustrates the number and proportion of HIV tests by race/ethnicity. Of the records reporting race/ethnicity, whites account for the largest share (568,672, 42.5%) of tests conducted. Blacks account for 538,501 (40.2%) tests and Hispanics for 214,720 (16%) tests. These two minority groups account for more than one-half of all tests. American Indian/Alaskan Native and Asian races (not shown) account for less than 2% of all tests. Of positive tests, whites account for only 26.2% (6,836) among those records with race/ethnicity data. Although they represent only 16% of Florida's population, blacks account for the greatest number of positives (16,094, 61.7%)



while Hispanics, who represent approximately 18% of the state's population, account for 11.4% of positives (2,979). Together these two minorities represent nearly three-quarters of all positive tests. **Figure 2** shows the proportion of positive tests among these three groups. American Indian/Alaskan Natives and Asians (not shown) account for less than 1% of all positives.



More white females (352,387) than white males (215,276) were tested; however, the male positivity rate (2.3%) is more than four times that for females (0.5%). More black females (315,655) than black males (221,629) were also tested; the male positivity rate (4.0%) is nearly two times greater than that for females (2.2%). Fewer Hispanic males (116,603) were tested than Hispanic females (140,431), but the positivity rate for Hispanic males (2.0%) is four times that of females (0.5%). Data on 571,679 males tested during 2002-2006 indicate considerably different risk behaviors by race/ethnicity. Men who have sex with men (MSM) account for 68.6% (3,460/5,041) of positive tests among white males, 63.5% (54/85) among Asian males, 57.0% (2,224/3,900) among Hispanic males, 40.8% (20/49) among American Indian/Alaskan native males, and 26.3% (2,348/8,913) among black males. Heterosexual contact accounts for 6.2% (311) of positive white males, 30.7% (2,734) of positive black males, 18.4% (9) of positive American Indian/Alaskan native males, 14.5% (564) of positive Hispanic males, and 14.1% (12) of positive Asian males (data not shown).

During the time period 2002 to 2006, the number of tests among Hispanics has steadily increased. The positivity rate among blacks has decreased each year, although remains much higher than that of whites or Hispanics. **Figures 4 and 5** show these data.

Figure 4. Number of HIV Tests by Year and Race/Ethnicity

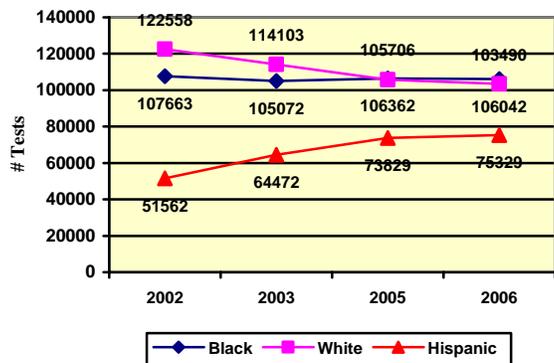


Figure 5. HIV Positivity Rate by Year and Race/Ethnicity

