Question 2

What is the scope of the HIV/AIDS Epidemic in Indiana?

Overall HIV/AIDS Trends

Throughout this report, unless mentioned otherwise, the time period that is reported on covers the 12-month period from January 1, 2008 to December 31, 2008.

At the end of December 2008, Indiana had a total of 4,105 residents diagnosed with HIV, and 5,177 residents that had developed AIDS. That adds up to a total 9,282 persons living with HIV/AIDS in Indiana by the end of 2008. This number, also called the prevalence number, is the number of all persons that have been diagnosed with the HIV virus sometime in the past, are either HIV positive only, or have developed AIDS, and are still living at the cut-off time for data collection for this report. In comparison, the number of HIV/AIDS diagnosed people at the end of 2007 was 8,851 persons. That is the equivalent of a 4.6% increase in the number of HIV/AIDS diagnosed persons over the past year.

In order to be able to compare the absolute numbers of cases with other entities such as surrounding states or the nation as a whole, the absolute numbers of diagnosed persons will be converted into rates, in this case a prevalence rate per 100,000 persons of the specific population. By dividing the number of diagnosed persons by the total number of the population the HIV prevalence rate per 100,000 comes to 64.4 (63.8), for AIDS it calculates to 81.2 (76.4), and for HIV/AIDS combined it is 145.6 (140.2) per 100,000 persons. The numbers in parenthesis show the prevalence rates at the end of 2007. The overall increase from the previous year is also reflected in the individual rate increases for 2008.

Within the United States, Indiana ranked 26th by number of cumulative AIDS cases reported in 2007, the last year for which state comparison data were available. Compared to its neighboring states, Table 6 shows a pulled-out section of the larger Table 5 on the cumulative number of reported AIDS cases for Indiana.

Table 5: Cumulative Number of AIDS Cases by State, Reported Through December 2007⁽⁴⁾

Rank	State	AIDS Cases	Rank	State	AIDS Cases
	United States	1,030,832	28	Oregon	6,248
1	New York	181,461	29	Nevada	6,124
2	California	148,949	30	Oklahoma	5,105
3	Florida	109,524	31	Minnesota	5,044
4	Texas	72,828	32	Kentucky	4,904
5	New Jersey	50,694	33	Wisconsin	4,749
6	Pennsylvania	35,489	34	Arkansas	4,119
7	Illinois	35,066	35	Delaware	3,741
8	Georgia	33,847	36	Hawaii	3,019
9	Maryland	31,931	37	Kansas	2,933
10	Puerto Rico	30,736	38	New Mexico	2,721
11	Massachusetts	20,037	39	Rhode Island	2,676
12	Louisiana	18,612	40	Utah	2,383
13	District of Columbia	18,196	41	Iowa	1,815
14	Virginia	17,608	42	West Virginia	1,586
15	North Carolina	17,127	43	Nebraska	1,572
16	Ohio	15,838	44	Maine	1,163
17	Michigan	15,672	45	New Hampshire	1,134
18	Connecticut	15,399	46	Alaska	689
19	South Carolina	14,163	47	Virgin Islands	681
20	Tennessee	13,173	48	Idaho	628
21	Washington	12,237	49	Vermont	474
22	Missouri	11,646	50	Montana	404
23	Arizona	10,975	51	South Dakota	275
24	Colorado	9,129	52	Wyoming	244
25	Alabama	9,091	53	North Dakota	153
26	Indiana	8,628	54	Guam	69
27	Mississippi	7,032			

 $^{^4}$ Kaiser Family Foundation, Cumulative Number of AIDS Cases, Reported Through December 2007

Table 6: Cumulative Number of AIDS Cases, Reported Through December 2007, Selected Midwestern States and the U.S. (5)

Rank	State	AIDS Cases	Rate/100,000*
32	Kentucky	4,904	115.76
16	Ohio	15,838	137.99
26	Indiana	8,628	136.17
17	Michigan	15,672	155.94
7	Illinois	35,066	273.40
	United States	1,030,832	341.76

In Table 6 the states were arranged in ascending order according to the rate/100,000 persons of their respective population. Rank refers to the ranking by absolute number of diagnosed people among all states in the nation. There are differences between the ranking by absolute numbers and by rates as shown. For example, Indiana has a similar rate (136.17/100,000) as Ohio (137.99/100,000), even though Ohio has more cases in absolute numbers. Compared to the nation as a whole, Indiana ranks in midfield by absolute numbers (26th in the nation).

⁵ Kaiser Family Foundation, Cumulative Number of HIV/AIDS Cases, Reported Through December 2007

Prevalence (living only) of HIV/AIDS in Indiana

Prevalence numbers describe the number of cases of a disease in a population up to a certain point in time. In the case of this report, prevalence describes the number of persons diagnosed with HIV/AIDS in Indiana that were alive by December 31, 2008 and that were reported in the HIV/AIDS Surveillance Report.

The prevalence rate for HIV/AIDS in Indiana shows some significant details when breaking out the rate by gender, race/ethnicity or age. Figure 13 shows the HIV/AIDS rates by sex.

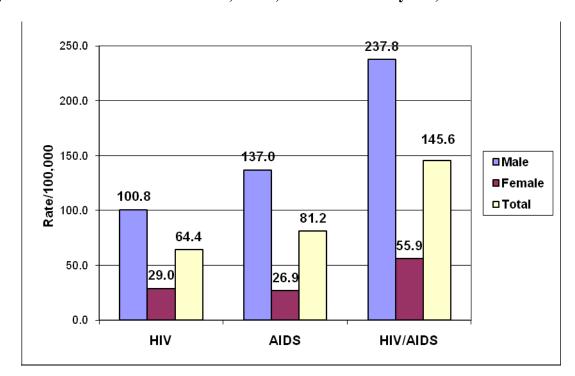


Figure 13: Prevalence Rates for HIV, AIDS, and HIV/AIDS by Sex, Indiana 2008

The rate of diagnosed males per 100,000 people of the overall male population is at 237.8 persons per 100,000, up from 218.2 in 2007 and from 200.5 in 2006. Males have an almost 4.5 times larger HIV/AIDS prevalence rate than females do. The female prevalence rate is at 55.9 persons per 100,000 females of the overall population, up from 51.1 in 2007 and up from 45.9 in 2006. For HIV and AIDS separately, males continue to be affected much more strongly than their female counterparts. HIV/AIDS continues to affect more males than females. Table 7 breaks out the absolute numbers, percentages and rates by sex and disease status.

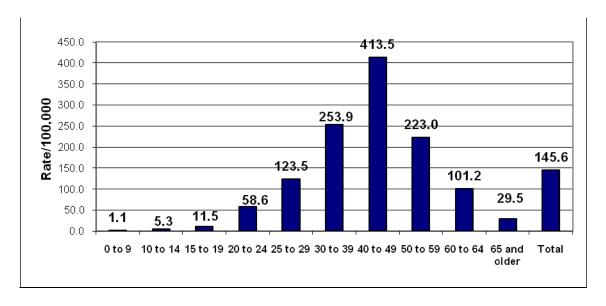
Table 7: Prevalence Numbers, Percentages, and Rates for HIV, AIDS, and HIV/AIDS by Sex, 2008

	HIV				AIDS		HI	HIV/AIDS		
	Number	%	Rate/ 100,000	Number	%	Rate/ 100,000	Number	%	Rate/ 100,000	
Male	3,167	77.1	100.8	4,306	83.2	137.0	7,473	80.5	237.8	
Female	938	22.9	29.0	871	16.8	26.9	1,809	19.5	55.9	
Total	4,105	100.0	64.4	5,177	100.0	81.2	9,282	100.0	145.6	

Prevalence of HIV/AIDS by Age

In order to better understand the dynamics at play with diagnosed persons it is helpful to look at two different age definitions. One is the age of diagnosed persons at the end of December 2008. The other is the age distribution for persons at the time of their diagnosis. Figure 14 shows the age group distribution for diagnosed persons that were living at the end of 2008.

Figure 14: Prevalence Rates for HIV/AIDS by Current Age in December 2008



The majority of diagnosed persons are in the groups between 30 to 59 years of age. In comparison, Figure 15 shows the age group distribution by age at time of diagnosis.

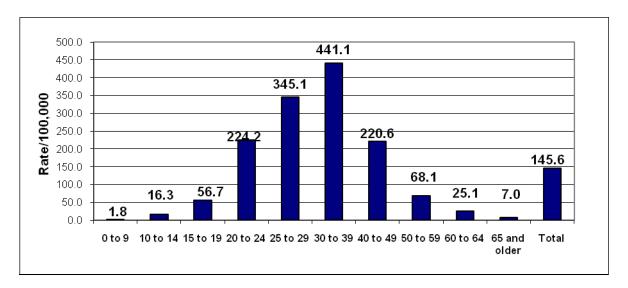


Figure 15: Prevalence Rates for HIV/AIDS by Age at Time of Diagnosis, 2008

It is interesting to note the difference in the age distribution between the two age profiles. Whereas the majority of diagnosed persons living at the end of 2008 were in their forties, a majority of persons were diagnosed in their twenties and thirties. For one, this discrepancy in the age distribution shows the effects of the availability and effectiveness of HIV/AIDS medications that have increased the long-term survival rate of diagnosed persons. In other words, diagnosed persons are living longer because of more effective medications, which are reflected in the greater number of diagnosed persons in the older age groups. As a group, the persons that have been diagnosed longer ago have moved from the age group of their initial diagnosis to their current age group at the end of 2008. In contrast, the majority of new diagnoses still occur in the age groups of 25 to 29 years of age and 30 to 39 years of age. As the group of the "initial" diagnoses is aging, the differences in age at time of diagnosis and age at the time of this study continues to grow.

Similar to this finding is the breakout by HIV and AIDS by age group. Figure 16 shows the corresponding distributions.

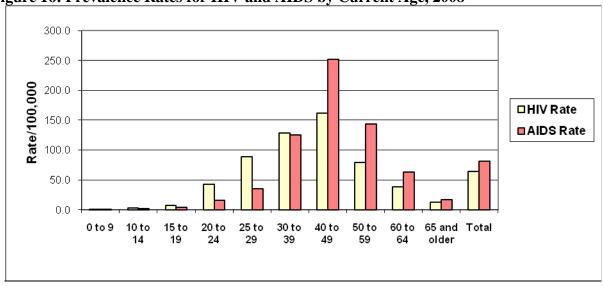


Figure 16: Prevalence Rates for HIV and AIDS by Current Age, 2008

The majority of diagnosed persons are currently living with HIV in their early thirties and forties. The majority of AIDS diagnosis is currently living in their forties and fifties. The figure above gives a snapshot of the age distribution of the diagnosed population at the end of 2008.

The corresponding diagnoses ages for HIV and AIDS are in Figure 17. They show the majority of persons diagnosed with HIV are in their early twenties and thirties. The majority of persons diagnosed with AIDS are in their late twenties and thirties.

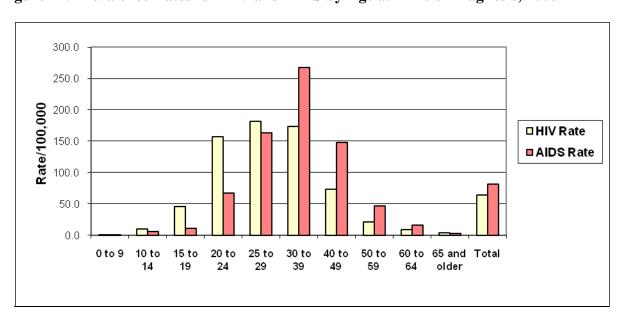


Figure 17: Prevalence Rates for HIV and AIDS by Age at Time of Diagnosis, 2008

The absolute numbers, percentages and rates for HIV, AIDS and HIV/AIDS by age at end of study are presented in Table 8 and for age at time of diagnosis in Table 9.

Table 8: Prevalence Numbers, Percentages, and Rates for HIV, AIDS, and HIV/AIDS by Current Age, 2008

		HIV			AIDS			HIV/AIDS			
Age	Number	%	Rate/ 100,000	Number	%	Rate/ 100,000	Number	%	Rate/ 100,000		
0 to 9	9	0.2	1.0	1	0.0	0.1	10	0.1	1.1		
10 to 14	13	0.3	3.0	10	0.2	2.3	23	0.2	5.3		
15 to 19	32	0.8	7.1	20	0.4	4.4	52	0.6	11.5		
20 to 24	184	4.5	43.1	66	1.3	15.5	250	2.7	58.6		
25 to 29	394	9.6	88.6	155	3.0	34.9	549	5.9	123.5		
30 to 39	1,078	26.3	128.5	1,052	20.3	125.4	2,130	22.9	253.9		
40 to 49	1,491	36.3	162.1	2,313	44.7	251.4	3,804	41.0	413.5		
50 to 59	679	16.5	79.4	1,227	23.7	143.6	1,906	20.5	223.0		
60 to 64	121	2.9	38.5	197	3.8	62.7	318	3.4	101.2		
over 65	104	2.5	12.8	136	2.6	16.7	240	2.6	29.5		
Total	4,105	100.0	64.4	5,177	100.0	81.2	9,282	100.0	145.6		

Note that 10-19 and 20-29 are split into two age groups.

Table 9: Prevalence Numbers, Percentages, and Rates for HIV, AIDS, and HIV/AIDS by Age at Time of Diagnosis, 2008

		HIV			AIDS			HIV/AIDS			
Age	Number	%	Rate/ 100,000	Number	%	Rate/ 100,000	Number	%	Rate/ 100,000		
0 to 9	9	0.2	1.0	7	0.1	0.8	16	0.2	1.8		
10 to 14	45	1.1	10.3	26	0.5	6.0	71	0.8	16.3		
15 to 19	205	5.0	45.4	51	1.0	11.3	256	2.8	56.7		
20 to 24	670	16.3	156.9	287	5.5	67.2	957	10.3	224.2		
25 to 29	807	19.7	181.5	727	14.0	163.5	1,534	16.5	345.1		
30 to 39	1,457	35.5	173.7	2,243	43.3	267.4	3,700	39.9	441.1		
40 to 49	673	16.4	73.1	1,357	26.2	147.5	2,030	21.9	220.6		
50 to 59	181	4.4	21.2	401	7.7	46.9	582	6.3	68.1		
60 to 64	27	0.7	8.6	52	1.0	16.5	79	0.9	25.1		
over 65	31	0.8	3.8	26	0.5	3.2	57	0.6	7.0		
Total	4,105	100.0	64.4	5,177	100.0	81.2	9,282	100.0	145.6		

Note that 10-19 and 20-29 are split into two age groups.

Prevalence of HIV/AIDS by Race/Ethnicity

A look at the racial and ethnic make-up provides further details on the composition of the diagnosed population.

Indiana is overwhelmingly white and Non-Hispanic. Figure 18 shows the prevalence rate by race/ethnicity at the end of 2008. The racial and ethnic composition of diagnosed persons in Indiana differs to a great extent from the racial/ethnic distribution of the state's overall population.

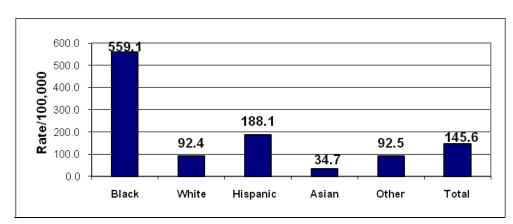


Figure 18: Prevalence Rates of HIV/AIDS by Race/Ethnicity in 2008

The overwhelming majority of diagnosed cases per population are among Blacks, even though Blacks account for only about 9.1% of the overall population. In other words, HIV/AIDS rates are highest among Blacks than any other racial or ethnic group. The separate view of HIV and AIDS reveals further details about racial and ethnic differences among the diagnosed population.

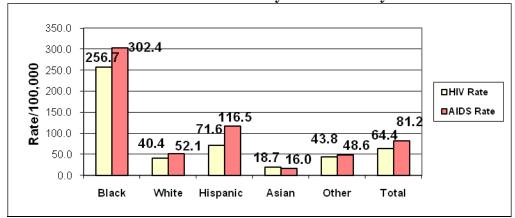


Figure 19: Prevalence Rates of HIV and AIDS by Race/Ethnicity in 2008

All of the racial groups have slightly higher rates of AIDS diagnosis than HIV diagnosis. Table 10 lists the numbers, percentages and rates for HIV, AIDS and HIV/AIDS by race/ethnicity.

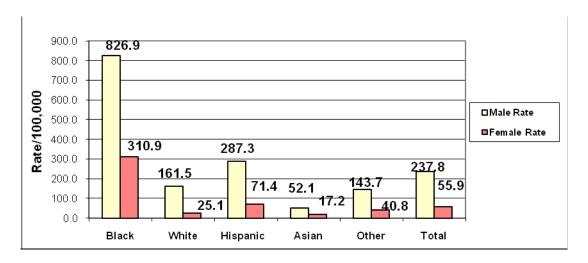
Table 10: Prevalence Numbers, Percentages, and Rates of HIV, AIDS, and HIV/AIDS by Race/Ethnicity in 2008

		HIV			AIDS		HIV/AIDS			
Race/ Ethnicity	Number	%	Rate	Number	%	Rate	Number	%	Rate	
Black	1,484	36.2	256.7	1,748	33.8	302.4	3,232	34.8	559.1	
White	2,266	55.2	40.4	2,921	56.4	52.1	5,187	55.9	92.4	
Hispanic	238	5.8	71.6	387	7.5	116.5	625	6.7	188.1	
Asian	35	0.9	18.7	30	0.6	16.0	65	0.7	34.7	
Other	82	2.0	43.8	91	1.8	48.6	173	1.9	92.5	
Total	4,105	100.0	64.4	5,177	100.0	81.2	9,282	100.0	145.6	

Prevalence of HIV/AIDS by Race/Ethnicity and Sex

Given the large differences between the racial and ethnic groups as well as the sex of diagnosed clients, this profile will take a closer look at the distribution of race and ethnicity by sex.

Figure 20: Prevalence Rates of HIV/AIDS by Race/Ethnicity and Sex, 2008



The highest prevalence rates for HIV/AIDS are found for males among all racial and ethnic population groups. Among the diagnosed male population, Black males continue to be disproportionably represented. Their prevalence rate is five times the rate of White

males, and almost three times the Hispanic male prevalence rate (Figure 20). In absolute numbers Black men are roughly half the number of their White counterparts. The current rates for both males and females are comparable, but slightly higher, to the rates from the previous year.

A similar picture emerges when comparing the female prevalence rates among the racial/ethnic groups. The highest prevalence rates are among Black females. Their HIV/AIDS prevalence rate is more than ten times higher than their White counterparts and still almost four times the rate of Hispanic females. In absolute numbers among the female diagnosed population, half are Black, while a comparable number of diagnosed females are White. Table 11 shows the absolute numbers, percentages and rates per 100,000 by race/ethnicity and sex.

Table 11: Prevalence Numbers, Percentages, and Rates of HIV/AIDS by Race/Ethnicity and Sex in 2008

		Male		Female				
Race/ Ethnicity	Number	%	Rate	Number	%	Rate		
Black	2,299	30.8	826.9	933	51.6	310.9		
White	4,474	59.9	161.5	713	39.4	25.1		
Hispanic	516	6.9	287.3	109	6.0	71.4		
Asian	49	0.7	52.1	16	0.9	17.2		
Other	135	1.8	143.7	38	2.1	40.8		
Total	7,473	100.0	237.8	1,809	100.0	55.9		

Prevalence of HIV/AIDS by Mode of Transmission

Modes of transmission of the virus were first classified and introduced by the Centers for Disease Control and Prevention (CDC). Those transmission categories are Men having Sex with Men (MSM), Injection Drug Users (IDU), Men having Sex with Men and Injection Drug Users (MSM/IDU), Heterosexual Contact, MSM and Heterosexual Contact, Heterosexual Contact and IDU, and Other. The *Other* category was created to encompass risk categories such as hemophilia and coagulation disorders, transfusion of blood or blood components or tissue transplants, diagnosed mothers, no reported risk mode of transmission, or other categories. Due to the small numbers of all those categories, they are grouped into one category.

During each test for HIV, a person reports information about his or her behavior and events which in turn allows for a risk category classification. In case a person falls into multiple risk categories, the priority follows the sequence of transmission modes as outlined above.

The differences between the transmission mode prevalence rates are considerable. The overwhelming majority of HIV transmissions occurred through Men having Sex with Men (MSM). Tables 12a-b shows the prevalence rates for HIV/AIDS by mode of transmission.

Table 12a: Prevalence Rates (Percents) of Males Living with HIV/AIDS per 100,000 Male Population: Mode of Transmission, 2006-2008

Mode	Rate 2008	Rate 2007	Rate 2006
MSM	145.8 (49.4%)	140.6 (49.4%)	123.0 (49.6%)
MSM/IDU	13.8 (4.7%)	13.5 (4.7%)	14.3 (5.8%)
Total Male Pop.*	237.8 (100.0%)	229.7 (100.0%)	200.5 (100.0%)

^{*}Total Male Pop. = Total Male HIV/AIDS Living Population in Indiana

Table 12b: Prevalence Rates (Percents) of Total Persons Living with HIV/AIDS per 100,000 Population: Mode of Transmission, 2006-2008

Mode	Rate 2008	Rate 2007	Rate 2006
IDU	6.7 (4.6%)	6.6 (4.7%)	10.4 (8.5%)
Heterosexual	25.0 (17.2%)	23.8 (17.0%)	20.7 (17.0%)
MSM/ Heterosexual	11.3 (3.8%)	10.7 (3.8%)	NA
IDU/ Heterosexual	5.6 (3.8%)	5.4 (3.9%)	NA
Other	24.1 (16.5%)	23.2 (16.5%)	18.6 (15.2%)
Total Pop.*	145.6 (100.0%)	140.2 (100.0%)	121.9 (100.0%)

^{*}Total Pop. = Total Overall HIV/AIDS Living Population in Indiana

The calculation of the risk category rates differ slightly from the regular rate calculations.

For example, the rate for MSM was calculated by dividing the number of HIV/AIDS cases in Indiana by the number of all men living in Indiana at that time and by multiplying that by 100,000. Given that only males are potentially possible to get diagnosed as MSM (Men Having Sex with Men), the rate calculation is therefore based on only the male part of the general population. The denominator for the calculation of the IDU rate needs to be the entire population of Indiana, since persons of both gender have the potential of becoming IDUs. The rate for MSM/IDU was again calculated with only the male population of Indiana, while Heterosexual Contact and Other included the entire population.

Not all racial and ethnic groups contribute to the risk groups according to their relative size of the general population. Figure 21 breaks out the prevalence rates for transmission modes by race and ethnicity.

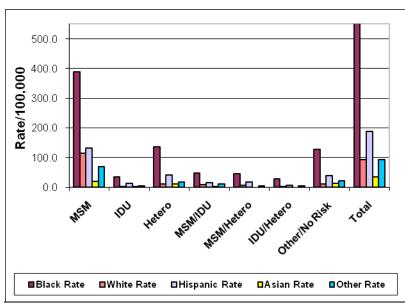


Figure 21: Prevalence Rates for HIV/AIDS by Mode of Transmission and Race/Ethnicity, 2008

Consistent across all racial/ethnic categories, the highest HIV/AIDS prevalence rates are associated with MSM. The prevalence rate is especially high for Black *MSM*, even though *Heterosexual Contacts* and *Other* risk factors register prominently for Blacks as well. Table 12c-d lists the prevalence rates for all racial and ethnic groups.

Table 12c: Prevalence Numbers and Rates of Males Living with HIV/AIDS per 100,000 Male Population: Mode of Transmission and Race/Ethnicity, 2008

	Black		Hispanic		Wh	White		Asian		er
Mode of Transmission	Number	Rate	Number	Rate	Number	Rate	Number	Rate	Number	Rate
MSM	1,082	389.2	237	131.9	3,179	114.7	18	19.2	65	69.2
MSM/IDU	132	47.5	26	14.5	263	9.5	<5	1.1	11	11.7
Total Male Pop.*	2,299	826.9	516	287.3	4,474	161.5	49	52.1	135	143.7

^{*}Total Male Pop. = Total Male HIV/AIDS Living Population in Indiana

Table 12d: Prevalence Numbers and Rates of Total Living with HIV/AIDS per 100,000 Population: Mode of Transmission and Race/Ethnicity, 2008

	Black		Hispa	Hispanic		White		Asian		Other	
Mode of Transmission	Number	Rate	Number	Rate	Number	Rate	Number	Rate	Number	Rate	
IDU Heterosexual	201	34.8	43	12.9	171	3.0	<5	0.0	9	4.8	
Contact	787	136.1	138	41.5	616	11.0	20	10.7	33	17.6	
MSM/Heterosexual	127	45.7	32	17.8	192	6.9	<5	0.0	5	5.3	
IDU/Heterosexual Other/No Risk	160	27.7	21	6.3	166	3.0	<5	0.0	10	5.3	
Identified	743	128.5	128	38.5	600	10.7	24	12.8	40	21.4	
Total*	3,232	559.1	625	188.1	5,187	92.4	65	34.7	173	92.5	

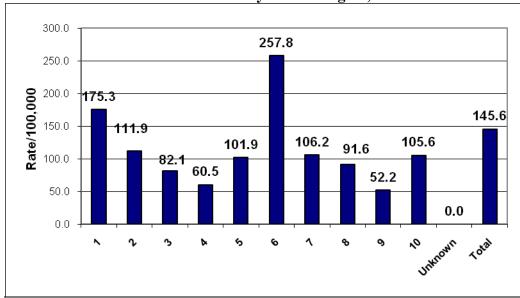
^{*}Total Pop. = Total HIV/AIDS Living Population in Indiana

Prevalence of HIV/AIDS by Health Regions

So far this profile has found that HIV/AIDS is most prevalent among minority men, mainly Blacks in their thirties and forties, whose main risk category is MSM. A look at the regional distribution of the diagnosed population will provide further insight.

Figure 22 shows the prevalence rates per 100,000 people of the population of HIV/AIDS by Indiana's Health Regions. The rates per health region were calculated using the population estimates 2008.

Figure 22: Prevalence Rates for HIV/AIDS by Health Region, 2008



Indiana shows very distinct regional differences in its prevalence rate for HIV/AIDS. Health Region 6, which covers Indianapolis and the surrounding counties, shows the highest prevalence rate of the entire state, with a rate of 257.8 per 100,000 persons. The next highest rates are in Regions 1 and 2 which includes Lake, Porter and La Porte Counties in northern Indiana and north central Indiana such as St. Joseph and Elkhart in Region 2, with a rate of 175.3 and 111.9 per 100,000 people respectively.

Similar to the Indianapolis metro area, the proximity of the Chicago metro area is influencing the number of diagnosed persons in that region. The highest prevalence rates are all associated with Indiana's larger cities, such as Muncie/Anderson in Region 5 and Bloomington in south-central Indiana in Region 8.

Figure 23 breaks out the prevalence rate by HIV and AIDS separately for each Health Region. Most of the Health Regions show no large differences between their HIV and AIDS prevalence rates.

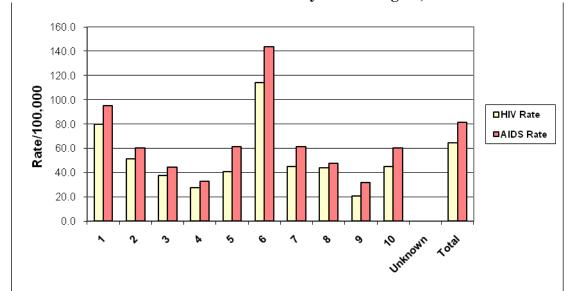


Figure 23: Prevalence Rates for HIV and AIDS by Health Region, 2008

The corresponding rates for HIV and AIDS by Health Region are listed in Table 13.

Table 13: Prevalence Numbers, Percentages, and Rates per 100,000 Population for HIV, AIDS, and HIV/AIDS by Health Region, 2008

		HIV			AIDS			HIV/AIDS			
Region	Number	%	Rate	Number	%	Rate	Number	%	Rate		
1	613	14.9	79.9	731	14.1	95.3	1,344	14.5	175.3		
2	294	7.2	51.6	344	6.6	60.3	638	6.9	111.9		
3	283	6.9	37.6	334	6.5	44.4	617	6.6	82.1		
4	99	2.4	27.5	119	2.3	33.0	218	2.3	60.5		
5	224	5.5	40.7	336	6.5	61.1	560	6.0	101.9		
6	1,897	46.2	114.0	2,392	46.2	143.8	4,289	46.2	257.8		
7	322	7.8	44.8	442	8.5	61.4	764	8.2	106.2		
8	126	3.1	43.9	137	2.6	47.7	263	2.8	91.6		
9	61	1.5	20.7	93	1.8	31.5	154	1.7	52.2		
10	186	4.5	45.1	249	4.8	60.4	435	4.7	105.6		
Unknown	<5	NA	0.0	<5	NA	0.0	<5	NA	0.0		
Total	4,105	100.0	64.4	5,177	100.0	81.2	9,282	100.0	145.6		

Please note that in order to calculate the rate for each region, the number of HIV positive and AIDS diagnosed persons is divided by the total number of people living in each region and multiplied by 100,000.

Prevalence of HIV/AIDS by Current State of Residence

At the time of this report, the vast majority of diagnosed persons that are eligible for the programs and services provided by ISDH also reside in the state. Some of the diagnosed persons that had been diagnosed with HIV/AIDS in Indiana have either moved out of the state since their diagnosis, or they lived outside the state of Indiana and were only diagnosed here. Table 14 lists, in descending order, the states of residence of diagnosed persons.

Table 14: Number of Current Indiana Residents with HIV/AIDS by State of Diagnosis, 2008

State of Residence	Number of Diagnosed	State of Residence	Number of Diagnosed
Indiana	7,618	District of Columbia	17
Illinois	230	Arkansas	16
Florida	205	Kansas	16
California	128	Maryland	15
Kentucky	107	Oklahoma	11
Ohio	99	Iowa	10
Texas	92	Connecticut	8
Michigan	68	Foreign Country	6
Missouri	54	Massachusetts	6
Georgia	49	New Mexico	6
New York	49	West Virginia	6
Tennessee	42	Oregon	5
Wisconsin	42	Utah	5
Arizona	34	Missing	5
Alabama	31	Delaware	<5
Minnesota	29	Alaska	<5
Colorado	28	New Hampshire	<5
Louisiana	28	Maine	<5
Virginia	28	Nebraska	<5
Mississippi	27	Wyoming	<5
New Jersey	27	Hawaii	<5
South Carolina	25	Montana	<5
Nevada	24	Rhode Island	<5
North Carolina	23	Vermont	<5
Pennsylvania	23		
Washington	20	Total	9,282

Within the state of Indiana most diagnosed persons resided in Marion County. Table 15 lists the number of diagnosed persons by Indiana counties, ranked in descending order.

Table 15: Number and Rate per 100,000 Population of Diagnosed Persons with HIV/AIDS by Indiana County of Residence at Time of Report, 2008

County of Residence	Number of Diagnosed	HIV/AIDS Rate	County of Residence	Number of Diagnosed	HIV/AIDS Rate
Marion	3,796	431.2	Perry	17	89.8
Lake	1,037	210.0	Shelby	17	38.5
Allen	461	131.5	Clay	17	63.7
St. Joseph	457	171.4	Wabash	17	52.0
Vanderburgh	276	158.0	Sullivan	16	75.0
Madison	198	150.6	Huntington	16	42.6
Clark	189	177.2	Scott	16	67.7
Vigo	187	176.5	Dearborn	15	60.0
Monroe	180	139.5	Steuben	14	42.0
LaPorte	178	160.5	Dubois	14	33.8
Hamilton	148	54.9	Marshall	14	30.0
Elkhart	147	73.8	Noble	14	29.4
Porter	129	79.5	Brown	12	82.5
Tippecanoe	121	73.7	Posey	12	46.0
Hendricks	117	85.3	Wells	12	42.9
Johnson	110	79.0	Greene	11	33.8
Floyd	104	141.0	Jay	10	46.7
Delaware	102	88.9	Vermillion	10	61.6
Howard	93	111.5	Starke	10	42.3
Wayne	72	106.2	Adams	9	26.5
Putnam	57	153.3	Fulton	8	39.4
Grant	56	81.6	Jasper	8	24.6
Miami	45	124.2	Blackford	8	61.1
Bartholomew	44	58.4	Decatur	8	19.1
Morgan	40	56.6	Jennings	8	28.5
Kosciusko	39	51.1	LaGrange	8	21.5
Henry	37	78.5	Switzerland	8	82.5
Hancock	34	50.5	Whitley	8	24.5
Harrison	30	80.9	Carroll	8	40.3
Knox	30	78.8	Orange	8	40.9
Cass	29	74.1	Spencer	7	34.8
Lawrence	29 27	58.8	Newton	7	50.2
Boone	27	49.1		7	28.8
	25	59.3	Fayette Martin	6	60.2
Jackson	23 24	39.3 41.6	Benton		57.0
Warrick Washington	23	82.3	Franklin	5 <5	17.1
ū					
Montgomery	23	60.8	Ripley	<5	14.6
Clinton Jefferson	22 22	64.6	Fountain	<5	17.6
		67.0	Rush	<5	17.3
Parke	21	122.4	Crawford	<5	18.8
Owen	21	93.9	Pike	<5	15.9
White	20	84.0	Pulaski	<5	14.6
De Kalb	19	38.0	Union	<5	27.9
Gibson	19	58.2	Ohio	<5	34.6
Randolph	18	69.8	Tipton	<5	6.3
Daviess	17	56.4	Warren	<5	11.7
			Unknown	<5	44# <
			Total	9,282	145.6

New Diagnosis of HIV/AIDS in Indiana

New Diagnosis describes the number and rates of new cases of a disease in a population in a certain amount of time, usually a year. In the case of this report, new diagnosis describes the number of new cases of HIV/AIDS that were treated or reported in Indiana between January 1, 2008 and December 31, 2008 and that were reported in the HIV/AIDS Surveillance Report.

New Diagnosis Rates for Indiana 2008

0

Indiana started collecting data on HIV and AIDS diagnoses in 1982. Figure 24 shows the development of HIV/AIDS and AIDS over more than two decades, from 1982 up until the end of 2008.

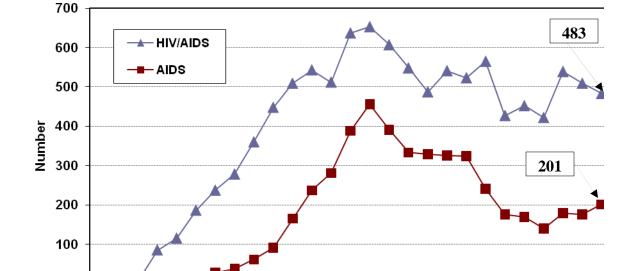


Figure 24: New Diagnosis Numbers of AIDS and HIV/AIDS for Indiana, 1982 to 2008

In the first decade after the recording of diagnosed persons in Indiana began, the numbers steadily climbed, until they reached a peak in the mid-nineties (1996). At that point, the availability and effectiveness of antiviral drugs that, at least temporarily, slowed the progression from HIV infection to AIDS, as well as educational campaigns to stop the spread of the virus brought the rise in the number of diagnosed persons to a halt and, in fact, reversed them for the next four to five years.

Year

Beginning in or around the year 2000, however, the number of new HIV/AIDS and AIDS diagnoses started to plateau and did not change much over the course of three years. The numbers did rise in 2006, however, they slightly decreased in 2007 and 2008. Delays in reporting may affect this slight decrease.

In 2008, the number of newly diagnosed persons with HIV/AIDS was 483, a fairly small decrease from 2007 (509) and 2006 (540). The new diagnosis rate is calculated at 7.6 per 100,000 persons, compared to a new diagnosis rate of 8.1 in 2007 and 8.7 in 2006.

Similar to the prevalence numbers, the group of newly diagnosed persons is predominantly male.

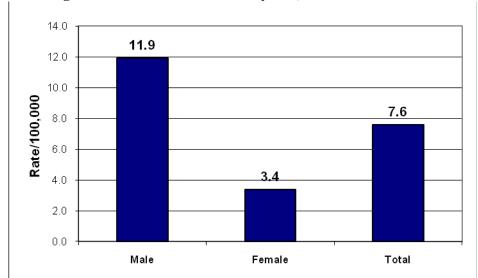


Figure 25: New Diagnosis Rates for HIV/AIDS by Sex, 2008

Males continue to have a more than three times higher new diagnosis rate than females. They contributed more than three quarters to the new diagnosis rate in 2008.

A more detailed look at the new diagnosis rates for HIV and AIDS separately is provided in Figure 26, which shows the difference in new diagnosis rates by sex for HIV and AIDS separately.



Figure 26: New Diagnosis Rates for HIV and AIDS by Sex, 2008

Table 16 shows the absolute number for HIV, AIDS and HIV/AIDS New Diagnosis in Indiana for 2008.

Table 16: New Diagnosis Numbers, Percentages, and Rates per 100,000 Population for HIV, AIDS, and HIV/AIDS by Sex, 2008

		HIV		A	AIDS		HI	V/AIDS	
Sex	Number	%	Rate	Number	%	Rate	Number	%	Rate
Male	218	77.3	6.9	156	77.6	5.0	374	77.4	11.9
Female	64	22.7	2.0	45	22.4	1.4	109	22.6	3.4
Total	282	100.0	4.4	201	100.0	3.2	483	100.0	7.6

New Diagnosis of HIV/AIDS by Age

In 2007, the new diagnosis rate for HIV/AIDS peaked among 30 to 39 year olds (17.6 per 100,000). However, in 2008 HIV/AIDS peaked highest among 25 to 29 year olds (16.9 per 100,000).

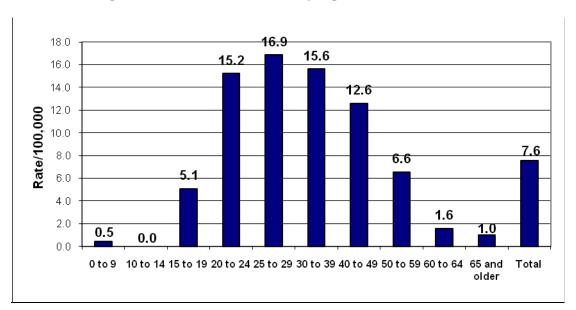


Figure 27: New Diagnosis Rates for HIV/AIDS by Age, 2008

A more detailed look at the HIV and AIDS new diagnosis rates by age for 2008 reveal a more detailed picture of the age distribution among newly diagnosed persons.

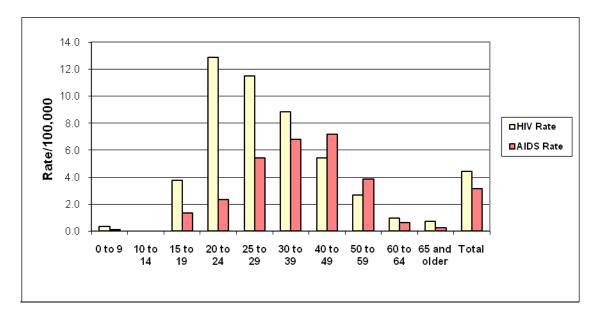


Figure 28: New Diagnosis Rates for HIV and AIDS by Age, 2008

For the most part, the HIV new diagnosis rate exceeds the rate of newly diagnosed AIDS cases. The vast majority of newly diagnosed HIV cases in 2008 were in the age ranges of 20 to 24, while the majority of new AIDS diagnoses occurred for persons in the age ranges of 40 to 49 years of age.

Table 17 shows the absolute numbers, percentages and rates for the combined disease as well as the separate diagnoses for 2008.

Table 17: New Diagnosis Numbers, Percentages, and Rates for HIV, AIDS, and HIV/AIDS by Age, 2008

		HIV			AIDS		HIV/AIDS		
Age	Number	%	Rate/ 100,000	Number	%	Rate/ 100,000	Number	%	Rate/ 100,000
0 to 9	<5	NA	0.3	<5	NA	0.1	<5	NA	0.5
10 to 14	<5	NA	0.0	<5	NA	0.0	<5	NA	0.0
15 to 19	17	6.0	3.8	<5	NA	1.3	23	4.8	5.1
20 to 24	55	19.5	12.9	10	5.0	2.3	65	13.5	15.2
25 to 29	51	18.1	11.5	24	11.9	5.4	75	15.5	16.9
30 to 39	74	26.2	8.8	57	28.4	6.8	131	27.1	15.6
40 to 49	50	17.7	5.4	66	32.8	7.2	116	24.0	12.6
50 to 59	23	8.2	2.7	33	16.4	3.9	56	11.6	6.6
60 to 64	<5	NA	1.0	<5	NA	0.6	5	1.0	1.6
over 65	6	2.1	0.7	<5	NA	0.2	8	1.7	1.0
Total	282	100.0	4.4	201	100.0	3.2	483	100.0	7.6

New Diagnosis Rate of HIV/AIDS by Race/Ethnicity

In Figure 29 the new diagnosis rates are shown by race and ethnicity. In order to calculate the rate per 100,000 persons, the number of diagnosed persons for each race and ethnicity was divided by the number of the entire Indiana population that were identified in the 2008 Census Estimates as belonging to that particular racial and ethnic category.

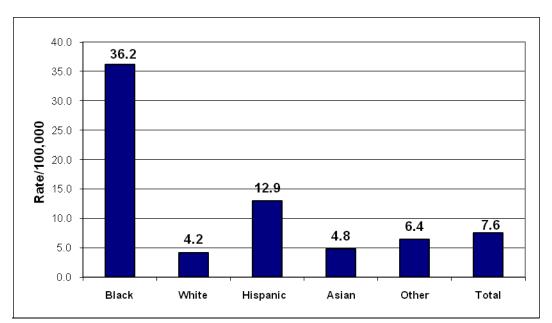


Figure 29: New Diagnosis Rates of HIV/AIDS by Race/Ethnicity, 2008

The highest rates of disease are among persons identified as Black. They had a new diagnosis rate of 36.2 per 100,000 people of the population, nearly twice as large as the next largest group of Hispanics (12.9 per 100,000). It is interesting to note that Blacks make up a minority of the general population of about 9.1%, yet they account for 43.3% of all new cases of HIV/AIDS in 2008.

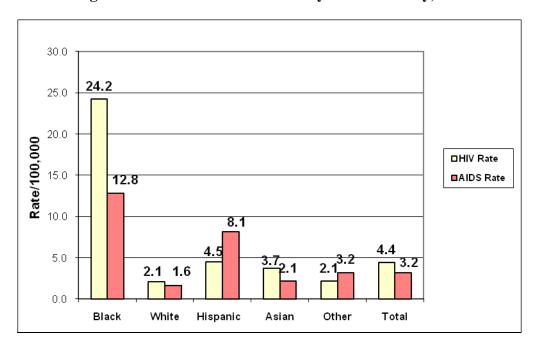
The New Diagnosis numbers for HIV/AIDS for absolute numbers, percentages and rates per 100,000 are listed in Table 18.

Table 18: New Diagnosis Numbers, Percentages, and Rates per 100,000 Population for HIV/AIDS by Race/Ethnicity, 2008

	Number	Percent	Rate
Black	209	43.3	36.2
White	236	48.9	4.2
Hispanic	43	8.9	12.9
Asian	9	1.9	4.8
Other	12	2.5	6.4
Total	483	105.4	7.6

The absolute numbers for the combined disease as well as the percentage numbers show that all Black and Hispanic groups are over-represented in the number of newly diagnosed persons, when compared to their part of the overall population.

Figure 30: New Diagnosis Rates for HIV and AIDS by Race/Ethnicity, 2008



The separate view of HIV and AIDS by race and ethnicity reveals further information about the different behavior of new diagnoses. Displayed in Figure 32 is the new HIV diagnosis and newly diagnosed cases of AIDS by race and ethnicity. Blacks show the highest rate of new HIV diagnosis as well as new AIDS diagnoses among all racial and ethnic groups in Indiana. The

second largest minority population group, Hispanics, have also the second largest new diagnosis rates for both HIV and AIDS. In other words, the results in Figure 29 and Figure 30 show that new diagnosis of HIV and AIDS are spreading much more rapidly among minority population groups than among Whites, a finding that is consistent with the status of the prevalence ratings. However, by absolute numbers, the new diagnosis for Whites outnumbers all other racial and ethnic groups.

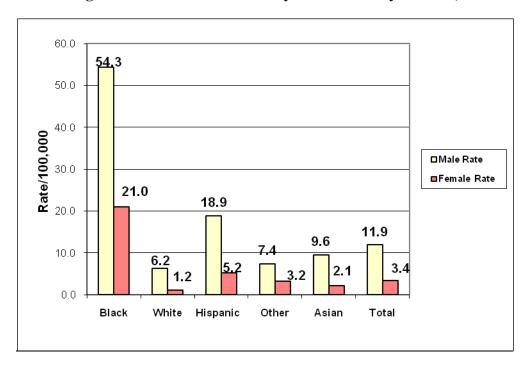
Table 19 lists the absolute numbers of newly diagnosed persons by race/ethnicity, as well as the percentage of the overall diagnosis and the rates per 100,000 people of the population.

Table 19: New Diagnosis Numbers, Percentages, and Rates per 100,000 Population for HIV and AIDS by Race/Ethnicity, 2008

		HIV			AIDS		
Race/ Ethnicity	Total	Percent	Rate	Total	Percent	Rate	
Black	140	49.6	24.2	74	36.8	12.8	
White	116	41.1	2.1	90	44.8	1.6	
Hispanic	15	5.3	4.5	27	13.4	8.1	
Asian	7	2.5	3.7	<5	NA	2.1	
Other	<5	NA	2.1	6	3.0	3.2	
Total	282	100.0	4.4	201	100.0	3.2	

In addition to racial and ethnic differences in the new diagnosis rates, there are also differences in the number of male and female new diagnosis among racial and ethnic groups. Figure 31 shows the new diagnosis rate breakout by race/ethnicity and sex.

Figure 31: New Diagnosis Rates for HIV/AIDS by Race/Ethnicity and Sex, 2008



The new diagnosis rate results for males and females mirror the earlier assessments, in which new diagnoses rates are highest among the male groups of racial and ethnic minorities. The rates for Black and Hispanic males are three to six times the White male new diagnosis rate (see Figure 31 and Table 19).

Comparing the female new diagnosis rates among these racial/ethnic groups shows a similar result. HIV/AIDS new diagnosis rates are lowest among White females and highest among Black females. In absolute numbers, among females Blacks make up the majority of new diagnosis with HIV. The results for all racial and ethnic groups for the combined disease HIV/AIDS are summarized in Table 20.

Table 20: New Diagnosis Numbers, Rates per 100,000 Population and Percentages for HIV/AIDS by Race/Ethnicity and Sex, 2008

	Male				Female		
Race/ Ethnicity	Total	Rate	Percent	Total	Rate	Percent	
Black	151	40.4	54.3	63	57.8	21.0	
White	173	46.3	6.2	33	30.3	1.2	
Hispanic	34	9.1	18.9	8	7.3	5.2	
Other	7	1.9	7.4	<5	NA	3.2	
Asian	9	2.4	9.6	<5	NA	2.1	
Total	374	100.0	11.9	109	100.0	3.4	

The rates in Table 20 were calculated by dividing the absolute number of new cases of HIV/AIDS by the number of the racial and ethnic male or female population respectively, and multiplying that number by 100,000. The reduction of the absolute numbers to the rates per 100,000 allows for direct comparison of rates between the different racial and ethnic groups as well as between the sex categories.

New Diagnosis of HIV/AIDS by Mode of Transmission

The New Diagnosis rates of HIV/AIDS vary widely by mode of transmission for 2006-2008, as shown in Table 21a-b.

Table 21a: New Diagnosis Rates (Percents) of Males Reported with HIV/AIDS per 100,000 Male Population: Mode of Transmission, 2006-2008

Mode	Rate 2008	Rate 2007	Rate 2006
MSM	7.2 (46.6%)	6.7 (40.7%)	8.0 (45.4%)
MSM/IDU	0.2 (1.2%)	0.3 (1.8%)	0.3 (3.0%)
Total Male Pop.*	11.9 (100.0%)	12.5 (100.0%)	13.4 (100.0%)

^{*}Total Male Pop. = Total Male HIV/AIDS New Diagnosis in Indiana

Table 21b: New Diagnosis Rates (Percents) of Total Persons Reported with HIV/AIDS per 100,000 Population: Mode of Transmission, 2006-2008

Mode	Rate 2008	Rate 2007	Rate 2006
IDU	0.2 (2.3%)	0.2 (2.6%)	0.2 (1.9%)
Heterosexual	1.3 (16.8%)	1.3 (15.5%)	1.1 (12.6%)
MSM/ Heterosexual	0.1 (0.4%)	0.3 (2.0%)	NA
IDU/ Heterosexual	0.2 (2.1%)	0.2 (2.0%)	NA
Other	2.3 (30.6%)	2.9 (35.6%)	2.8 (32.6%)
Total Pop.*	7.6 (100.0%)	8.1 (100.0%)	8.7 (100.0%)

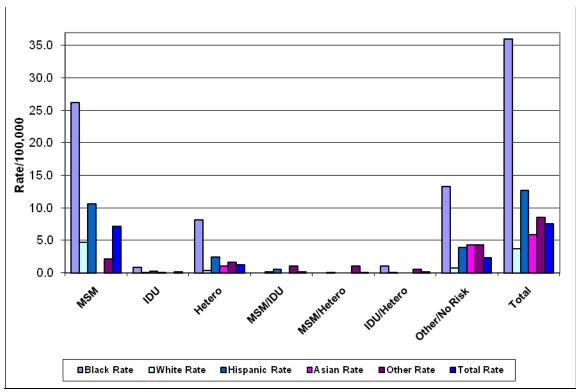
^{*}Total Pop. = Total HIV/AIDS New Diagnosis in Indiana NA= Not Applicable

<u>Note:</u> For categories MSM and MSM/IDU rates are relative to the number of men, not the overall population. Thus, comparisons across transmissions should not be made.

The vast majority of new cases registered in 2008 are in the category of Men having Sexual Contact with Men (MSM). The *MSM* rate (7.6/100,000) decreased from the previous year (8.1/100,000).

In Figure 32, HIV/AIDS New Diagnosis rates are computed separately by race/ethnicity categories and mode of transmission.

Figure 32: New Diagnosis Rates of HIV/AIDS by Mode of Transmission and Race/Ethnicity, 2008



<u>Note:</u> For categories MSM, and MSM/IDU rates are relative to the number of men Not the overall population. Thus, comparisons across transmissions should not be made. However, comparisons by Race/Ethnicity for each transmission category can be made.

Consistent across all race/ethnic categories, the highest HIV/AIDS new diagnosis rates are associated with *MSM*. For nearly all race/ethnic categories, the *Heterosexual contact* risk category accounts for the second highest HIV/AIDS new diagnosis rates. The new diagnosis numbers and rates per 100,000 for all racial and ethnic groups by mode of transmission are listed in Tables 22a-b.

Table 22a: New Diagnosis Numbers and Rates of Males Reported with HIV/AIDS per 100,000 Male Population: Mode of Transmission and Race/Ethnicity, 2008

	Blac	k	Hispa	nic	Whit	te	Othe	er
Mode of Transmission	Number	Rate	Number	Rate	Number	Rate	Number	Rate
MSM	73	26.3	19	10.6	131	4.7	2	2.1
MSM/IDU	<5	NA	<5	NA	<5	NA	<5	NA
Total Male Pop.*	151	54.3	34	18.9	173	6.2	16	17.0

*Total Male Pop. = Total Male HIV/AIDS Newly Diagnosed in Indiana NA= Not Applicable

Table 22b: New Diagnosis Numbers and Rates of Total Reported with HIV/AIDS per 100,000 Population: Mode of Transmission and Race/Ethnicity, 2008

	Blac	<u>k</u>	Hispa	nic	Whit	te	Othe	er
Mode of Transmission	Number	Rate	Number	Rate	Number	Rate	Number	Rate
IDU	5	0.9	<5	NA	<5	NA	<5	NA
Heterosexual								
Contact	47	8.1	8	2.4	21	0.4	5	2.7
MSM/Heterosexual	<5	NA	<5	NA	<5	NA	<5	NA
IDU/Heterosexual	6	1.0	<5	NA	<5	NA	<5	NA
Other/No Risk								
Identified	77	13.3	13	3.9	42	0.7	16	8.6
Total*	208	36.0	42	12.6	206	3.7	27	14.4

*Total Pop. = Total HIV/AIDS Newly Diagnosed in Indiana

NA= Not Applicable

In order to calculate the rate/100,000 people of the general population, the absolute number of people per risk category was divided by the number of the corresponding general population. However, the rate for MSM and MSM/IDU was calculated using the corresponding number of males of that particular racial and ethnic group.

New Diagnosis Rate for HIV/AIDS by Health Regions and Counties

The geographic distribution of new diagnosis cases in Indiana shows regional differences. For the most part the highest new diagnosis rates are corresponding to the population size and proximity of the health region to large urban areas in the state. The distribution of new diagnosis rates for all ten Indiana Health Regions is provided in Figure 33.

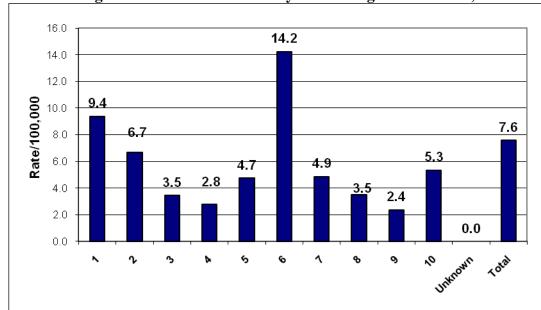


Figure 33: New Diagnosis Rates of HIV/AIDS by Health Region in Indiana, 2008

Region 6, which corresponds to the Greater Indianapolis area, shows by far the largest share in the number of newly diagnosed people. Their rate of 14.2 persons per 100,000 people of the population far exceeds the rates of the next closest regions (1, 2, and 10), which correspond to the areas around Indiana's northern and southern regions respectively.

The New Diagnosis details of the combined disease HIV/AIDS for Indiana Health Regions are listed in Table 23.

Table 23: New Diagnosis Numbers, Percentages, and Rates per 100,000 Population for HIV/AIDS by Health Region, 2008

	HIV/AIDS							
Health Region	Total	Percent	Rate					
1	72	14.9	9.4					
2	38	7.9	6.7					
3	26	5.4	3.5					
4	10	2.1	2.8					
5	26	5.4	4.7					
6	237	49.1	14.2					
7	35	7.2	4.9					
8	10	2.1	3.5					
9	7	1.4	2.4					
10	22	4.6	5.3					
Unknown	<5	NA	0.0					
Total	483	100.0	7.6					

The New Diagnosis rate distribution with HIV and AIDS for each Health Region is displayed in Figure 34 below.

10.0 9.0 8.0 7.0 Rate/100,000 6.0 □HIV Rate 5.0 ■AIDS Rate 4.0 3.0 2.0 1.0 0.0 JUKUOM, ^ r 6 ზ 9

Figure 34: New Diagnosis Rates for HIV and AIDS by Health Region, 2008

Consistent with the numbers for the combined disease the majority of newly diagnosed cases of HIV and AIDS occur in Region 6, the greater Indianapolis area.

The separate HIV and AIDS New Diagnosis numbers are listed in Table 24 by Health Region.

Table 24: New Diagnosis Numbers, Percentages, and Rates per 100,000 Population for HIV and AIDS by Health Region, 2008

		HIV		AIDS			
Health Region	Number	Percent	Rate	Number	Percent	Rate	
1	41	14.5	5.3	31	15.4	4.0	
2	20	7.1	3.5	18	9.0	3.2	
3	18	6.4	2.4	8	4.0	1.1	
4	6	2.1	1.7	<5	NA	1.1	
5	14	5.0	2.5	12	6.0	2.2	
6	143	50.7	8.6	94	46.8	5.6	
7	19	6.7	2.6	16	8.0	2.2	
8	7	NA	2.4	<5	NA	1.0	
9	<5	1.1	1.0	<5	NA	1.4	
10	11	3.9	2.7	11	5.5	2.7	
Unknown	<5	NA	0.0	<5	NA	0.0	
Total	282	100.0	4.4	201	100.0	3.2	

In order to refine the geographic distribution of the newly diagnosed cases this profile also takes a look at the number of cases per county. Table 25 below is listing the new diagnosis numbers for HIV/AIDS by the counties of residence, in declining order of magnitude for the combined disease. For reasons of confidentiality, no new diagnosis numbers smaller than 5 are reported. All counties with fewer than five diagnosed persons are combined into an *Other* category.

Table 25: New Diagnosis Numbers for HIV/AIDS by County, 2008

	HIV/AIDS
County	Number
Marion	211
Lake	58
Other	57
St. Joseph	28
Allen	19
Hendricks	12
Vanderburgh	12
Elkhart	10
Clark	9
Monroe	9
Madison	8
LaPorte	7
Porter	7
Vigo	7
Floyd	6
Tippecanoe	6
Delaware	6
Morgan	<5
Howard	<5
Hamilton	<5
Total	483

Pediatric Classification and HIV Status of Mothers

All infants born to an HIV positive mother should be reported to the state health department, even though the final HIV status of the child is not known until later. By the end of 2008, a total of 698 children had been born to HIV positive mothers since the beginning of record keeping. During the year 2008, three new cases of pediatric infection were recorded. All children recorded in the eHARS database are classified in one of four categories:

• Exposed: Children that are born to HIV+ women, but their laboratory testing

has not yet determined their HIV status

• HIV: Children that are born to HIV+ women and their laboratory has

confirmed their HIV+ status

• AIDS: Children that are born to HIV+ women and they meet the

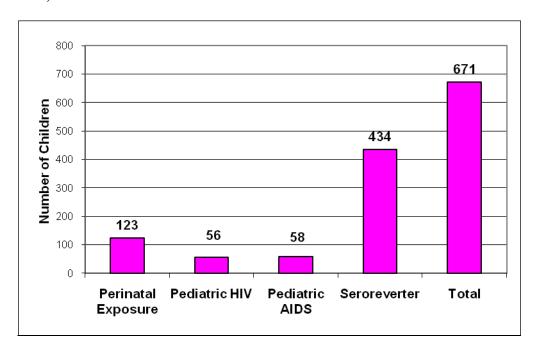
definition for pediatric AIDS

• Seroreverter: Definitely Not Diagnosed, the laboratory testing has confirmed that child

is definitely not diagnosed

In Figure 35 the distribution of children among these four categories is shown. The numbers are cumulative.

Figure 35: Cumulative Number of Children Born to HIV+ Mothers up until December 31, 2008



Note: A total of 27 cases did not reveal status at the time of this report.

Table 26 shows the number of children that were born to HIV positive mothers by the time of the mother's diagnosis.

Table 26: Cumulative Numbers and Percentages of Children Born to HIV+ Mothers, 2008

HIV Status of Mother	Perinatal Exposure	Pediatric HIV	Pediatric AIDS	Seroreverter	Total	Percent	
Refused HIV						0.001	
Testing	0	0	1	1	2	0.30%	
HIV+ before Pregnancy	75	10	9	235	329	49.03%	
HIV+ during Pregnancy	18	8	5	106	137	20.42%	
HIV+ at Delivery	3	3	0	6	12	1.79%	
HIV+ sometime							
before Birth	21	8	3	50	82	12.22%	
HIV+ after Birth	2	19	28	30	79	11.77%	
HIV+ Time	_	- /	20	23	, ,	1111110	
Unknown	3	6	6	4	19	2.83%	
Unknown	1	2	6	2	11	1.64%	
Total	123	56	58	434	671	100%	

Note: A total of 27 cases did not reveal status at the time of this report.

The majority of children were born to mothers whose HIV positive status was determined either before (49.03%) or during (20.42%) a pregnancy. The time of detection of the HIV positive status of the mother is important in estimating the risk to the children of diagnosed mothers. Early detection of the mother's status improves the chances of preventing the spread of the virus from the mother to the child, either during birth or after the child is born. Accordingly, the number of children that were diagnosed as HIV positive or meeting the criteria for pediatric AIDS was about two times larger if the status of the mother was diagnosed as HIV positive after the child was born, or where the time of infection in regards to the diagnosis was unknown.

Three new pediatric cases of HIV or AIDS were diagnosed in 2008.

The ethnic and racial distribution of the group of children that were born to diagnosed mothers is presented in Figure 36. The figure includes those children that are currently in the *Exposed* category, pending the outcome of their laboratory results, as well as those that were diagnosed as either *HIV* positive, *AIDS*, or *Seroreverter*.

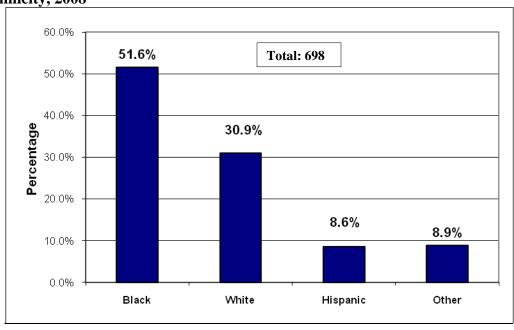


Figure 36: Cumulative Percentages of Children born to HIV+ Mothers by Race/Ethnicity, 2008

More than half of all children born to diagnosed mothers were Black. Table 27 shows the absolute numbers and corresponding percentages for all four categories by race and ethnicity. The different percentages of children in each category are consistent with the overall distribution of children by category and race/ethnicity.

Table 27: Cumulative Numbers and Percentages of Children born to HIV+ Mothers by Race/Ethnicity, 2008

Race/ Ethnicity	Exposure	%	HIV	%	AIDS	%	Seroreverter	%	Total	%
Black	86	68.8	31	51.7	29	38.2	214	49.0	360	51.6
White	21	16.8	20	33.3	38	50.0	137	31.4	216	30.9
Hispanic	13	10.4	4	6.7	2	2.6	41	9.4	60	8.6
Other	5	4.0	5	8.3	7	9.2	45	10.3	62	8.9
Total	125	100.0	60	100.0	76	100.0	437	100.0	698	100.0

Indiana law requires the primary prenatal care provider to offer the pregnant women HIV information, counseling and voluntary testing. Medical studies have shown that pregnant women who are HIV positive can reduce the risk of passing the virus on to their children by two-thirds with proper perinatal care and antiviral treatment during pregnancy, labor, delivery and to the

child after birth. Table 28 shows the number of children by their infection status broken out by the time the mother received drug treatment to lower her viral load.

Table 28: Cumulative Number of Children by their Infection Status and by the Availability of Drugs, 2008

Mother received drug	prior to Pregnancy	during Pregnancy	during Delivery	Child received drugs
Exposure	31	73	84	97
Pediatric HIV	1	13	15	19
Pediatric AIDS	0	5	0	2
Seroreverter	104	274	276	326

In case of the mother receiving antiviral drugs before the pregnancy, no case of pediatric HIV or AIDS has been diagnosed. When taking the drugs during pregnancy the number of diagnosed children is still very low compared to the not diagnosed children of that same group.

Table 29: Numbers and Percentages of Children by the Mother's Mode of Transmission and by the Child's Infection Status, 2008

Mode of Transmission of Mother	Perinatal Exposure	Pediatric HIV	Pediatric AIDS	Seroreverter	Total	Percent
IDU	10	11	13	50	84	14.58%
Sexual contact with IDU	15	9	16	81	121	21.01%
Sexual contact with Bisexual Male	12	3	5	40	60	10.42%
Sexual contact with Male with Hemophilia	1	1	0	8	10	1.74%
Sexual contact with HIV+ Transfusion Recipient	1	0	0	2	3	0.52%
Sexual Contact with Male with HIV or AIDS	36	20	22	212	290	50.35%
Received Blood Transfusion	0	2	2	4	8	1.39%
Total	75	46	58	397	576	100.0%

^{*}Does not equal the total number of pediatric cases because some cases did not reveal the mode of transmission, and some cases include more than one mode of transmission.

The majority of mothers (50.35%) were exposed to HIV or AIDS through sexual contact with a HIV+ male. Another 35.6% of mothers were exposed due to IDU, either by using personally using intravenous drugs or through sexual contact with someone who was an IDU.

Department of Correction

The Indiana Department of Correction (DOC) started conducting mandatory HIV tests as part of the general intake process for every inmate at the beginning of their corrections term on July 1, 2002. Currently, no such test is administered when an inmate is released.

There are currently 306 inmates in Indiana Department of Correction facilities. The vast majority is male (275 or 89.9%). The majority of HIV-positive inmates are Black (59.5%), followed by White (36.9%), and Hispanics (3.6%). The number of those diagnosed decreased from the previous year.

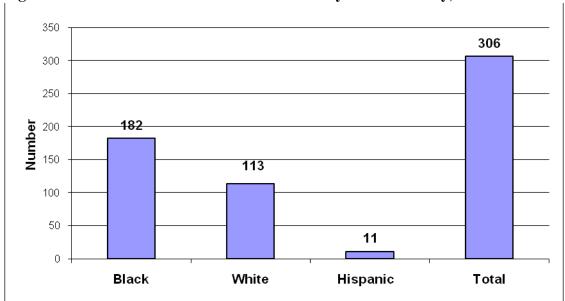
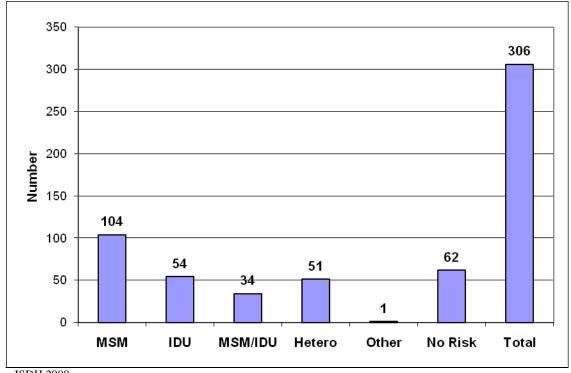


Figure 37: Number of Inmates with HIV/AIDS by Race/Ethnicity, 2008

Source: ISDH 2008

The risk category distribution for the inmates is shown in Figure 38.

Figure 38: Number of Inmates with HIV/AIDS by Mode of Transmission, 2008



Source: ISDH 2008

The majority of inmates self-identify their risk category as MSM.

The age distribution if diagnosed inmates is shown in Figure 39.

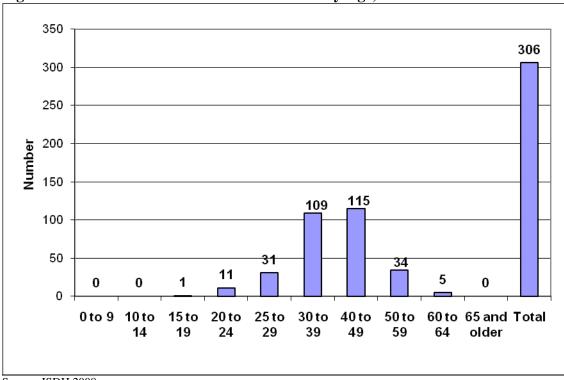


Figure 39: Number of Inmates with HIV/AIDS by Age, 2008

Source: ISDH 2008

The majority of Inmates with HIV/AIDS fall between the 30 to 49 age group.

Mortality

There is a difference between the number of deaths of persons with HIV/AIDS and the number of deaths due to HIV or AIDS. Deaths reported by the HIV/AIDS Surveillance program include all deaths of persons who were diagnosed with HIV or diagnosed with AIDS. The deaths reported by Vital Records (death certificates) include only those who died as a result of AIDS and such was identified on the death certificate. The deaths reported here are deaths of persons who were diagnosed with HIV or diagnosed with AIDS regardless of the cause of death. For example, the death may have been due to an automobile accident. Even though the person did not die due to the presence of HIV, the person is no longer living in Indiana and, therefore, not contributing to understanding and planning for HIV prevention or medical services.

Figure 40 shows the number of deaths of persons with HIV/AIDS since 1982. Shown in the figure are the absolute numbers of deaths in 1995 at the peak of annual mortality of diagnosed persons and in 2008. The decline in annual death numbers in 1995 was due to the availability and effectiveness of antiretroviral drugs.

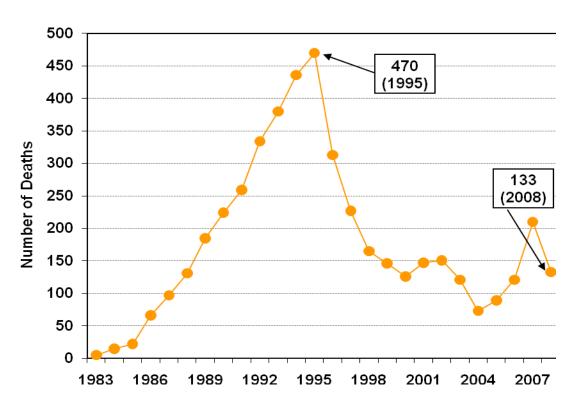


Figure 40: Number of HIV/AIDS Deaths by Year in Indiana, 1982 to 2008

In 2008, 133 persons that were diagnosed with HIV/AIDS died, down from 210 in 2007. That equates to a rate of 1.4 per 100 persons compared to a rate of 2.4 per 100 persons in 2007. The rate saw a small decline in 2008 potentially due to the timed efforts of this report and the availability of death records. Vital records recently changed data systems to include receiving records electronically. Many submitters will not be caught up until 2010.

The mortality rate is calculated by dividing the number of persons that died by the number of the diagnosed population and multiplying that by 100. The trend of recent years of declining mortality numbers was reversed in 2005. Table 30 shows the absolute number, percentages and rates broken out by sex for 2008.

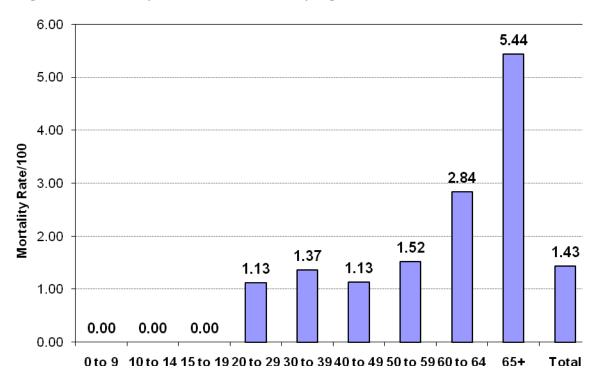
Table 30: Mortality Numbers, Percentages, and Rates of HIV/AIDS by Sex, 2008

Sex	Number	Percentage	Rate/100
Male	102	76.7%	1.10
Female	31	23.3%	0.33
Total	133	100.0%	1.43

Diagnosed males were about four times more likely than females to have died in 2008. The mortality rates reflect the gender composition of the diagnosed population, where males have a higher prevalence rate than females do.

Figure 41 shows the breakout of the mortality rate by age groups.

Figure 41: Mortality Rates of HIV/AIDS by Age of Death in Indiana, 2008



The absolute numbers, percentages and rates by age group are listed in Table 31. Also included in Table 31 are the total numbers of diagnosed persons by age group that was used to calculate the mortality rates.

Table 31: Mortality Numbers, Percentages, and Rates of HIV/AIDS by Age of Death, 2008

Age Group in Years	Number of Deaths	Percent	Mortality Rate/100	Total Number of Diagnosed Persons
0 to 9	0	0.0%	0.00	24
10 to 14	0	0.0%	0.00	24
15 to 19	1	0.8%	0.00	25
20 to 29	9	6.8%	1.13	799
30 to 39	29	21.8%	1.37	2,121
40 to 49	43	32.3%	1.13	3,799
50 to 59	29	21.8%	1.52	1,903
60 to 64	9	6.8%	2.84	317
65+	13	9.8%	5.44	239
Total	133	100.0%	1.43	9,282

Figure 42 presents further detail on the racial and ethnic characteristics of the deceased persons in 2008.

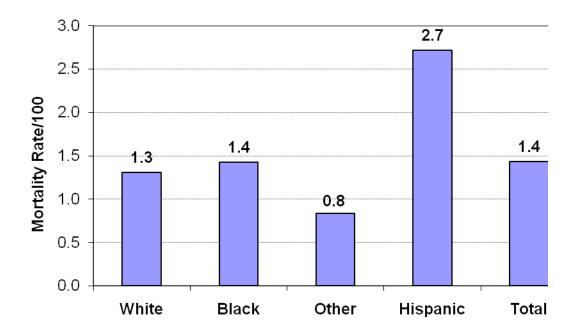


Figure 42: Mortality Rates of HIV/AIDS by Race and Ethnicity, 2008

Table 32 lists the absolute mortality numbers, percentages and rates for the different racial and ethnic groups for 2008.

Table 32: Mortality Numbers, Percentages, and Rates of HIV/AIDS by Race/Ethnicity, 2008

Race/Ethnicity	Number	Percent	Rate/100	Number of HIV/AIDS Living Persons by Race/Ethnicity
White	68	51.1%	1.3	5,187
Black	46	34.6%	1.4	3,232
Other	2	1.5%	0.8	238
Hispanic	17	12.8%	2.7	625
Total	133	100.0%	1.4	9,282

The distribution of numbers of transmission modes associated with those persons that died in 2008 in Figure 43 shows mostly a similar picture to the prevalence and new diagnosis rates earlier.

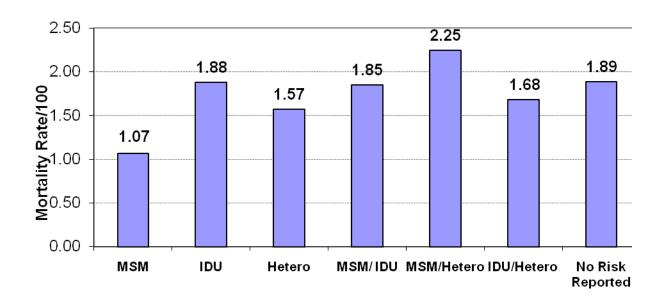


Figure 43: Mortality Rates of HIV/AIDS by Mode of Transmission for Indiana, 2008

Persons identified as IDU, MSM/IDU and MSM/Hetero show to have the highest mortality rates. Those reported as MSM only have the lowest mortality rate. Table 33 shows the corresponding numbers, rates and percentages for the risk categories.

Table 33: Mortality Numbers, Rates, and Percentages of HIV/AIDS by Mode of Transmission, 2008

Mode of Transmission/ Risk Category	Number of Deaths	Rate/100	Percent
MSM	49	1.07	36.8%
\mathbf{IDU}	8	1.88	6.0%
Heterosexual Contact	25	1.57	18.8%
MSM/ IDU	8	1.85	6.0%
MSM/ Heterosexual			
Contact	8	2.25	6.0%
IDU/ Heterosexual			
Contact	6	1.68	4.5%
No Risk Reported	29	1.89	21.8%
Total	133	1.43	100.0%

^{*}One participant was listed in the "other" category

Finally, the distribution of deaths among the diagnosed population in 2008 in Indiana shows large differences. The mortality rate distribution by Health Region is shown in Figure 44.

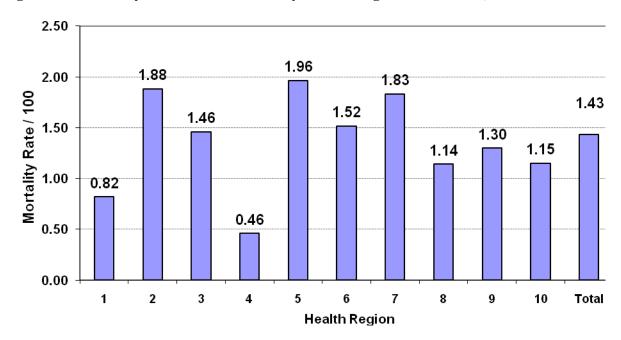


Figure 44: Mortality Rates of HIV/AIDS by Health Region for Indiana, 2008

The mortality rate for each region was calculated by dividing the number of diagnosed people that died in that region by the number of diagnosed people that lived in that region in 2008.

* Health Region Key					
Region	Area				
1	Northwest Indiana - Lake Region				
2	Northcentral Indiana - Elkhart				
3	Northeast Indiana - Fort Wayne				
4	West central Indiana - Lafayette				
5	East central Indiana - Marion				
6	Central Indiana - Indianapolis				
7	Southwestern Indiana - Evansville/Terre Haute				
8	Bloomington Area				
9	Southeastern Indiana - Cincinnati Area				
10	Southern Indiana - Louisville Area				

The corresponding numbers, percentages and rates by Health Region are in Table 34.

 $\begin{tabular}{ll} Table 34: Mortality Numbers, Percentages, and Rates of HIV/AIDS by Health Regions for Indiana, 2008 \end{tabular}$

Health Region	Number of Deaths	Percent	Rate/100	Number of Diagnosed Persons by Region
1	11	5.2%	0.82	1,344
2	12	5.7%	1.88	638
3	9	4.3%	1.46	617
4	1	0.5%	0.46	218
5	11	5.2%	1.96	560
6	65	31.0%	1.52	4,289
7	14	6.7%	1.83	764
8	3	1.4%	1.14	263
9	2	1.0%	1.30	154
10	5	2.4%	1.15	435
Total	133	63.3%	1.43	9,282

Finally, when ranked among the other states of the U.S., Indiana ranks 25th (up from 33rd in 2003) in the number of HIV related deaths in 2005, the last year that national data was available for comparisons.⁶

⁶ Kaiser Family Foundation, (<u>http://www.statehealthfacts.kff.org</u>), 2005

Migration Patterns

By the end of 2008, a total of 632 persons that were diagnosed in Indiana with either HIV or AIDS or HIV/AIDS and were not known to have died, had moved out of the state (Out-Migration) as compared with 478 in 2007. At the same time, 1,664 persons that were diagnosed with either HIV or AIDS or HIV/AIDS in a state other than Indiana, had moved here by the end of 2008 (In-Migration) as compared with 1,455 in 2007. Table 36 lists the cumulative numbers of Out-Migrants by the state to which they moved, while Table 35 lists the cumulative number of In-Migrants by the state in which they were diagnosed with HIV or AIDS.

Table 35: Numbers and Percentages of Persons Diagnosed with HIV or AIDS in Indiana and Currently Living Outside the State, 2008 (Out-Migration)

Current State of Residence	Number	Percent	Current State of Residence	Number	Percent
Florida	88	13.92%	Mississippi	6	0.95%
Illinois	84	13.29%	New York	6	0.95%
Kentucky	57	9.02%	Maryland	5	0.79%
Texas	41	6.49%	North Carolina	4	0.63%
California	37	5.85%	New Mexico	4	0.63%
Michigan	36	5.70%	Oklahoma	4	0.63%
Ohio	26	4.11%	South Carolina	4	0.63%
Arizona	23	3.64%	Foreign Country	3	0.47%
Georgia	18	2.85%	Hawaii	3	0.47%
Wisconsin	18	2.85%	Maine	3	0.47%
Tennessee	17	2.69%	Oregon	3	0.47%
Colorado	13	2.06%	Utah	3	0.47%
Missouri	13	2.06%	West Virginia	3	0.47%
Louisiana	12	1.90%	Wyoming District of	3	0.47%
Minnesota	12	1.90%	Columbia	2	0.32%
Nevada	11	1.74%	North Dakota	2	0.32%
Pennsylvania	11	1.74%	Nebraska	2	0.32%
Kansas	9	1.42%	New Jersey	2	0.32%
Washington	9	1.42%	Rhode Island	2	0.32%
Iowa	8	1.27%	Arkansas	1	0.16%
Virginia	8	1.27%	Connecticut	1	0.16%
Massachusetts	7	1.11%	Alaska	1	0.16%
Alabama	6	0.95%	Montana	1	0.16%
			Total	632	100.00%

Table 36: Numbers and Percentages of Persons Diagnosed with HIV or AIDS Outside of Indiana and Migrated to Indiana, 2008 (In-Migration)

State of Diagnosis	HIV/AIDS	Percent HIV/AIDS
Illinois	230	2.48%
Florida	205	2.21%
California	128	1.38%
Kentucky	107	1.15%
Ohio	99	1.07%
Texas	92	0.99%
Michigan	68	0.73%
Missouri	54	0.58%
Georgia	49	0.53%
New York	49	0.53%
Tennessee	42	0.45%
Wisconsin	42	0.45%
Arizona	34	0.37%
Alabama	31	0.33%
Minnesota	29	0.31%
Colorado	28	0.30%
Louisiana	28	0.30%
Virginia	28	0.30%
Mississippi	27	0.29%
New Jersey	27	0.29%
South Carolina	25	0.27%
Nevada	24	0.26%
North Carolina	23	0.25%
Pennsylvania	23	0.25%
Washington	20	0.22%
District of Columbia	17	0.18%
Arkansas	16	0.17%
Kansas	16	0.17%
Maryland	15	0.16%
Oklahoma	11	0.12%
Iowa	10	0.11%
Connecticut	8	0.09%
Foreign Country	6	0.05%
Massachusetts	6	0.06%
New Mexico	6	0.06%
West Virginia	6	0.06%
Oregon	5	0.05%
Utah		0.05%
Missing	5 5	0.05%
Delaware	4	0.03%
Alaska	3	0.04%
New Hampshire	3	0.03%
Maine	2	0.03%
Nebraska		
	2 2	0.02% 0.02%
Wyoming		
Hawaii Montone	1	0.01%
Montana Phodo Island	1	0.01%
Rhode Island	1	0.01%
Vermont	1	0.01%
Total	1664	100.00%

A look at the sex distribution of diagnosed people reveals a large difference between male and female migrant numbers. Figure 45 shows the cumulative numbers of diagnosed persons migrating to and from Indiana by sex. The numbers for both the migration to Indiana and out of the state reflect the total number of diagnosed persons that have been recorded since 1982 up until 2008.

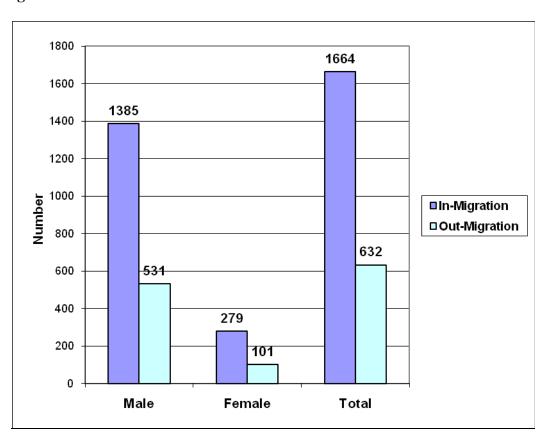


Figure 45: Cumulative Number of Migrants Diagnosed with HIV or AIDS by Sex, including 2008

For both migration directions, males outnumber females by four to five times. They make up roughly 83% of the migrants. There is virtually no difference between the gender distribution of diagnosed people that move to Indiana or of those that are leaving the state, after they have been diagnosed here, other than the difference in absolute numbers.

There are, however, differences when considering the racial and ethnic composition of both migrating groups. Figure 46 shows the number of migrating persons that were alive at the time of this report by their race and ethnicity.

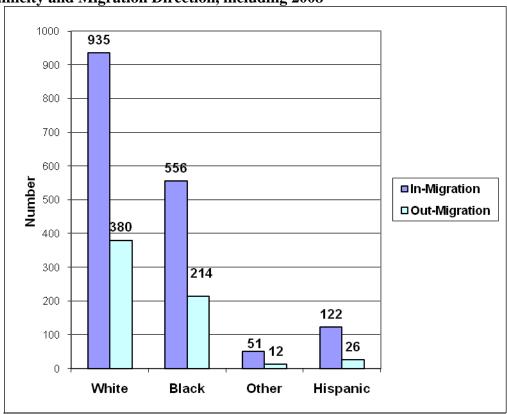


Figure 46: Cumulative Number of Migrants Diagnosed with HIV or AIDS by Race/Ethnicity and Migration Direction, including 2008

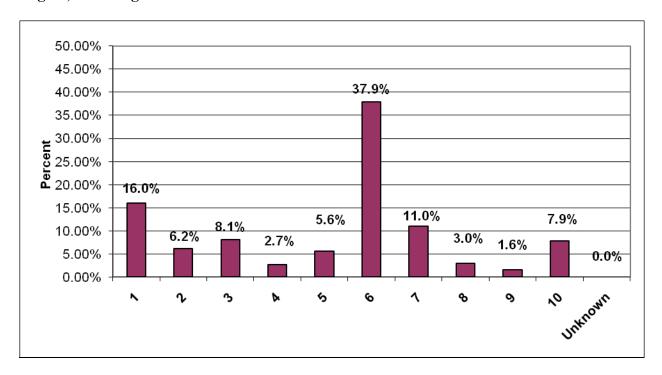
In absolute numbers, the "In-Migrants" outnumber "Out-Migrants". However, in terms of percentages about the same share of diagnosed persons of minority backgrounds have left the state when compared to those that have moved to Indiana. The same is true for diagnosed White persons. About the same percentage of White and minority background migrants have moved to Indiana when compared to those that have left it. However, in terms of absolute numbers, the number of in-migrants exceeds that of persons leaving the state. In other words, since 1982 Indiana's population of HIV/AIDS diagnosed people has seen a net growth because of migration. The absolute numbers and corresponding percentages are listed in Table 37.

Table 37: Cumulative Numbers and Percentages of Migrants Diagnosed with HIV or AIDS by Race/Ethnicity and Migration Direction, including 2008

Race/Ethnicity	In-Migration	Percent	Out-Migration	Percent
White	935	56.19%	380	60.13%
Black	556	33.41%	214	33.86%
Other	51	3.06%	12	1.90%
Hispanic	122	7.33%	26	4.11%
Total	1,664	100.00%	632	100.00%

The group of migrants that moved to Indiana after they were diagnosed with HIV/AIDS did settle in various parts of the state. Figure 47 shows the distribution of in-migrants by Health Region in Indiana.

Figure 47: Cumulative Percentages of In-Migrants Diagnosed with HIV or AIDS by Health Region, including 2008

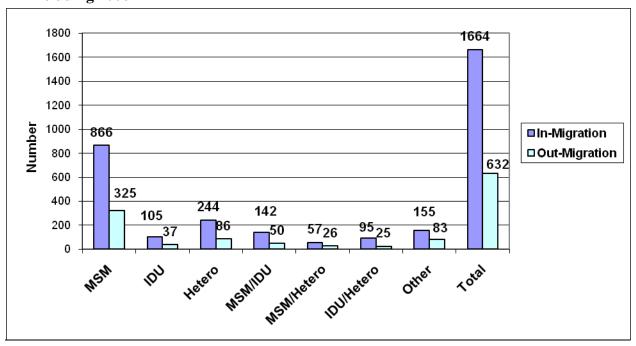


Region Key:

Region	Area
1	Northwest Indiana - Lake Region
2	North central Indiana - Elkhart
3	Northeast Indiana - Fort Wayne
4	West central Indiana - Lafayette
5	East central Indiana - Marion
6	Central Indiana - Indianapolis
7	Southwestern Indiana - Evansville/Terre Haute
8	Bloomington Area
9	Southeastern Indiana - Cincinnati Area
10	Southern Indiana - Louisville Area

The Health Regions surrounding the urban centers of the state attracted the largest number of people coming to Indiana. Health Region 6, the greater Indianapolis area, attracted almost four out of ten migrants (38%) of all in-migrants alone. The distribution of risk categories among migrants is shown in Figure 48.

Figure 48: Number of Migrants Diagnosed with HIV or AIDS by Mode of Transmission, including 2008



Similar to Indiana's resident diagnosed population, *MSM* is the dominant transmission mode among the migrant population. Over half of persons moving to Indiana (52%) were associated with the *MSM* risk category. This ratio is also consistent with the overall diagnosed population, where about 50% were associated with *MSM*. The same is true for *MSM/IDU* and *Heterosexual Contacts*, which both are represented among the migrant population in nearly the same ratios as the current diagnosed population at large.

Counseling and Testing Data

Counseling, Testing, and Referral (CTR) data are collected and used (1) to assess the behavioral risks for sex and needle-sharing partners of HIV-diagnosed persons; (2) to evaluate the effectiveness of the CTR program as part of the overall HIV prevention effort; and (3) to improve how other HIV prevention activities, interventions, and services are implemented.

Accurate and consistent data collection is a critical component for evaluating how effective the CTR program is, as well as enabling providers to better focus prevention efforts on those persons most at risk. The data reveal information of the dynamics of HIV transmission in general, and it allows for more intensive prevention and education efforts to be applied for specific high-risk groups. To do all this, however, the collected data must be relevant to behavioral risks, HIV/AIDS prevalence and the demographics of affected communities.

The following numbers represent all tests that were administered from CTR services during the year 2008.

By the end of 2008, a total of 30,503 tests had been administered. Of those tests, 212 had positive results, which equates to a positive rate of 7.0 per 1,000 tested persons.

The group of tested persons included more males (55.2%) than females (44.7%). Table 38 lists the number of tests and the results, as well as the corresponding rates by sex.

Table 38: Number, Percentage, and Rate of CTR Tests Performed by Sex in Indiana in 2008

Sex	Number of Tests	Number of Positives	New Positives	Positive Rate /1,000
Male	16,837 (55.2%)	162 (76.4%)	102 (77.9%)	9.6
Female	13,628 (44.7%)	47 (22.2%)	28 (21.4%)	3.4
Transgendered- FTM	5 (0.0%)	0 (0.0%)	0 (0.0%)	0
Transgendered- MTF	33 (0.1%)	3 (1.4%)	(0.7%)	90.9
Total	30,503	212	131	7.0

The rate for males and females is calculated by dividing the number of male and female positives by their respective total tested population times 1,000.

Consistent with the results from the Surveillance Report, males have a higher number of positive results than females. Still, the male positivity rate is about two times the female rate. New Positives represent those that tested that were not repeat testers. Persons often repeat test because of loss to follow-up or denial in accepting the disease.

The racial and ethnic distribution of the CTR results is shown in Table 39 for 2008.

Table 39: Number, Percentage, and Rate of CTR Tests Performed by Race/Ethnicity in Indiana, 2008

Category	Number of Tests	Positives	New Positives	Positive Rate/1,000
White	16,704 (54.8%)	93 (43.9%)	58	5.6
Black	11,989 (39.3%)	111 (52.3%)	68	9.2
Other	1,810 (5.9%)	8 (3.8%)	5	4.4
Total	30,503 (100.0%)	212 (100%)	131	7.0
Hispanic*	3,025 (9.9%)	16 (7.5%)	8	5.3

^{*} Please note that persons of Hispanic ethnicity can be of any race and are therefore not treated as a race in the Table 40.

Among the tested population, Blacks have the highest positivity rate of 9.2 per 1,000 tested persons, followed by Whites with 5.6 per 1,000. Whites make up more than half of the tested persons but less than half of all positive test results. In the last Census of the general population about 4% of Indiana's population identified themselves as Hispanic/Latino. In the group of tested persons 9.9% identified as Hispanic.

Age wise, the majority of positive results were found in the 20 to 29 year old group (85, 40.1%). Figure 49 shows the positive rates by all age groups.

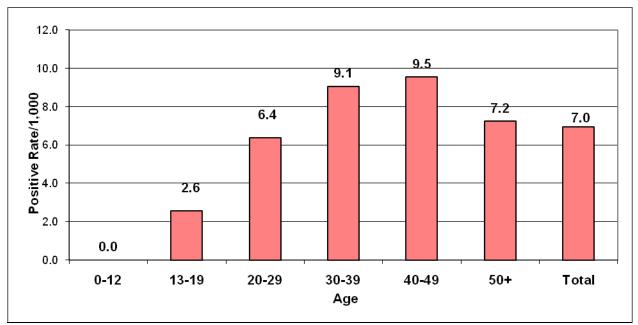


Figure 49: CTR New Positivity Rates per 1,000 by Age Group in Indiana, 2008

Table 40 lists the number of tested persons, the number of positive results and the positivity rate by age group.

Table 40: Number, Percentage, and Rate of CTR Tests Performed by Age Group in Indiana, 2008

			Number			
Age			of			
Group in	Number of		Positive		New	Positive
Years	Tests	Percent	Results	Percent	Positives	Rate/1,000
0-12	42	0.40%	0	0.0%	0	0.0
13-19	3,888	12.80%	10	4.7%	6	2.6
20-29	13,353	42.90%	85	40.1%	48	6.4
30-39	6,403	21.50%	58	27.4%	42	9.1
40-49	4,192	14.60%	40	18.9%	25	9.5
50+	2,625	7.80%	19	9.0%	10	7.2
Total	30,503	100.00%	212	100.00%	131	7.0

The majority of tests were performed among the group of 20 to 29 year olds (40.1%). The largest number of positive results occurred among the 20-29 age group of all positive results. The 40-49 age group had the highest positivity rate of all age groups with 9.5 per 1,000 tested persons.

An extended set of risk category variables was collected for each person tested. The results are shown in Table 41.

Table 41: Number and Percentage of CTR Tests Performed by Mode of Transmission in Indiana, 2008

	Incarcerated	Percent	Sex Worker	Percent
Yes	2,520	8.3%	380	1.2%
No	27,007	88.5%	29,140	95.5%
Don't Know	87	0.3%	88	0.3%
Not Asked	846	2.8%	844	2.8%
No Response	43	0.1%	51	0.2%
Blank	0	0.0%	0	0.0%
Total	30,503	100.0%	30,503	100.0%

Table 41: Number and Percentage of CTR Tests Performed by Mode of Transmission in Indiana, 2008 - continued

	IDU	Percent	Sex w/ Female	Percent	Sex w/ hemophilia	Percent	Sex while on Drugs	Percent
Within 30 Days	69	0.2%	2,241	7.4%	11	0.0%	818	2.7%
Within 60 Days	19	0.1%	212	0.7%	2	0.0%	154	0.5%
Within 90 Days	20	0.1%	155	0.5%	1	0.0%	134	0.4%
Don't Know	112	0.4%	90	0.3%	1,309	4.3%	200	0.7%
More than 90 Days	133	0.4%	614	2.0%	31	0.1%	574	1.9%
< 12mnths	580	1.9%	10,453	34.3%	85	0.3%	5,618	18.4%
> than 12mnths	350	1.2%	1,294	4.2%	90	0.3%	1,072	3.5%
No	28,372	93.0%	14,578	47.8%	28,125	92.2%	21,088	69.1%
No Response	848	2.8%	866	2.8%	849	2.7%	845	2.8%
Total	30,503	100.0%	30,503	100.0%	30,503	100.0%	30,503	100.0%

 $\begin{tabular}{ll} Table 41: Number and Percentage of CTR Tests Performed by Mode of Transmission in Indiana, 2008 - continued \\ \end{tabular}$

	Sex while on Heroin	Percent	Sex while on Crack	Percent	Sex while on Cocaine	Percent
Within 30 Days	45	0.2%	139	0.5%	132	0.4%
Within 60 Days	12	0.0%	46	0.2%	42	0.1%
Within 90 Days	20	0.1%	30	0.1%	37	0.1%
Don't Know	95	0.3%	21	0.1%	209	0.7%
More than 90 Days	82	0.3%	203	0.7%	300	1.0%
< 12mnths	393	1.3%	0	0.0%	1,547	5.1%
> than 12mnths	212	0.7%	203	0.7%	773	2.5%
No	28,798	94.4%	5,765	18.9%	26,617	87.3%
No Response	846	2.8%	24,299	79.7%	846	2.8%
Total	30,503	100.0%	30,503	100.0%	30,503	100.0%

 $\begin{tabular}{ll} Table 41: Number and Percentage of CTR Tests Performed by Mode of Transmission in Indiana, 2008 - continued \\ \end{tabular}$

	Sex while on Crystal Meth	Percent	Sex while on Ecstasy	Percent	Sex while on Ketamine	Percent
Within 30 Days	33	0.1%	35	0.1%	2	0.0%
Within 60 Days	11	0.0%	16	0.1%	1	0.0%
Within 90 Days	13	0.0%	25	0.1%	2	0.0%
Don't Know	95	0.3%	113	0.4%	14	0.1%
More than 90 Days	122	0.4%	124	0.4%	33	0.1%
< 12mnths	384	1.3%	529	1.7%	0	0.0%
> than 12mnths	361	1.2%	400	1.3%	0	0.0%
No	28,639	93.9%	28,416	93.2%	6,152	20.2%
No Response	845	2.8%	845	2.8%	24,299	79.7%
Total	30,503	100.0%	30,503	100.0%	30,503	100.0%

Table 41: Number and Percentage of CTR Tests Performed by Mode of Transmission in Indiana, 2008 - continued

	Sex w/ Transgender	Percent	Sex w/ Male	Percent	Sex for Drugs/ Money	Percent
Within 30 Days	9	0.0%	2,429	8.0%	102	0.3%
Within 60 Days	1	0.0%	224	0.7%	44	0.1%
Within 90 Days	2	0.0%	206	0.7%	20	0.1%
Don't Know	130	0.4%	39	0.1%	113	0.4%
More than 90 Days	12	0.0%	478	1.6%	105	0.3%
< 12mnths	114	0.4%	12,257	40.2%	796	2.6%
> than 12mnths	60	0.2%	710	2.3%	336	1.1%
No	29,322	96.1%	13,306	43.6%	28,139	92.3%
No Response	853	2.8%	854	2.8%	848	2.8%
Total	30,503	100.0%	30,503	100.0%	30,503	100.0%

Table 41: Number and Percentage of CTR Tests Performed by Mode of Transmission in Indiana, 2008 - continued

Response	Sex w/ IDU	Percent	Sex w/ HIV unknown	Percent	Sex w/ MSM	Percent	Sex w/ met from Internet	Percent
Within 30 Days	56	0.2%	2,213	7.3%	430	1.4%	142	0.5%
Within 60 Days	11	0.0%	216	0.7%	60	0.2%	41	0.1%
Within 90 Days	25	0.1%	173	0.6%	37	0.1%	34	0.1%
Do not know	1,121	3.7%	1,853	6.1%	785	2.6%	147	0.5%
More than 90 Days	158	0.5%	674	2.2%	151	0.5%	163	0.5%
< 12mnths	568	1.9%	11,239	36.9%	2,469	8.1%	1,189	3.9%
> than 12mnths	355	1.2%	1,063	3.5%	274	0.9%	359	1.2%
No	27,361	89.7%	12,219	40.1%	25,448	83.4%	27,579	90.4%
No Response	848	2.8%	853	2.8%	849	2.8%	849	2.8%
Total	30,503	100.0%	30,503	100.0%	30,503	100.0%	30,503	100.0%

Table 41: Number and Percentage of CTR Tests Performed by Mode of Transmission in Indiana, 2008 - continued

	Sex w/ HIV+	Percent	Sex w/ person who exchanges sex for drugs/money	Percent	Sex w/ Anonymous Partner	Percent	Other	Percent
Within 30 Days	108	0.4%	117	0.4%	413	1.4%	505	1.7%
Within 60 Days	20	0.1%	33	0.1%	127	0.4%	59	0.2%
Within 90 Days	21	0.1%	29	0.1%	108	0.4%	39	0.1%
Do not know	4,633	15.2%	823	2.7%	271	0.9%	467	1.5%
More than 90 Days	86	0.3%	123	0.4%	271	0.9%	207	0.7%
< 12mnths	668	2.2%	832	2.7%	3,447	11.3%	1,309	4.3%
> than 12mnths	268	0.9%	318	1.0%	1,392	4.6%	183	0.6%
No	23,848	78.2%	27,377	89.8%	23,316	76.4%	26,874	88.1%
No Response	851	2.8%	851	2.8%	850	2.8%	860	2.8%
Total	30,503	100.0%	30,503	100.0%	30,503	100.0%	30,503	100.0%

Table 42: Number and Percentage of Confirmed STD Status of Clients, 2008

Response	Frequency	Percent
Do not know	131	0.4%
No	24,495	80.3%
No Response	22	0.1%
Not Asked	839	2.8%
Yes- Lab Confirmed	3,248	10.7%
Yes- Self Report	1,768	5.8%
Total	30,503	100.0

The majority of tested clients showed that they did not have an STD (80.3%). A total of 16.4% of the clients tested showed that they had an STD, either self-reported or laboratory confirmed compared to 4.9% in 2007. This coincides with the overall jump in STDs for 2008.

Throughout the state of Indiana HIV tests are performed at various different sites. Table 43 lists the number of tests and the different types of sites at which they were performed.

Table 43: Number and Percentage of CTR Tests Performed by Site Type in Indiana, 2008

Test Site	Number of Tests	Percent
Community Setting	394	1.3%
Community Setting – AIDS Service Organization		
(Non-clinical)	1,440	4.7%
Community Setting –		
Church/Mosque/Synagogue/Temple	70	0.2%
Community Setting – Community Center	149	0.5%
Community Setting - Bar/Club/Adult entertainment	673	2.2%
Community Setting – Other	954	3.1%
Community Setting – Residential	9	0.0%
Community Setting – School/Educational facility	52	0.2%
Community Setting - Shelter/Transitional housing	123	0.4%
Correctional Facility	371	1.2%
Facility Other	123	0.4%
HIV Counseling & Testing Site	1,944	6.4%
Inpatient - Drug/Alcohol Treatment	281	0.9%
Inpatient Facility	4	0.0%
No Location/Response	1,635	5.4%
Outpatient - Community Health Clinic	1,057	3.5%
Outpatient - Community Mental Health	148	0.5%
Outpatient – Drug/Alcohol Treatment Clinic	52	0.2%
Outpatient - Family Planning	851	2.8%
Outpatient - Health Department/Public Health		
Clinic	16,639	54.5%
Outpatient – Prenatal/OBGYN Clinic	12	0.0%
Outpatient - School/University Clinic	100	0.3%
Outpatient - TB Clinic	5	0.0%
Outpatient – Other or Unknown	2,139	7.0%
No Label	1,278	4.2%
Total	30,503	100.0%

The majority of tests (54.5%) were performed at Health Departments/Public Health Clinics throughout the state.