

People Living with HIV Needs Assessment

Statewide Report

Louisiana Department of Health and Hospitals
Office of Public Health

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Introduction

Purpose of the Louisiana State-wide Needs Assessment

This report was prepared by The Policy & Research Group (PRG) for the *Louisiana Office of Public Health STD/HIV Program (OPH SHP)* within the Department of Health and Hospitals. The purpose of the *2015 Needs Assessment* is to gain an understanding of the current care service needs of People Living with HIV (PLWH) in the nine administrative regions of Louisiana. In particular, the *2015 Needs Assessment* aims to provide an estimate of the extent of PLWH's unmet primary care and HIV-related support service needs, their experiences in accessing those services, their perceived barriers to those services, and some insight into their reported knowledge of those services.

Layout of the Report

This report presents the characteristics of survey respondents in the New Orleans Eligible Metropolitan Area (NO EMA), the Baton Rouge Transitional Grant Area (BR TGA), and Louisiana Public Health Regions III through IX, and provides basic aggregate results of responses provided to survey questions. A description of the methods used to conduct the *2015 Needs Assessment* and analyze the data, as well as a copy of the survey instruments, are included as appendices to this report.

Characteristics of Survey Respondents

Table 1 presents the *2015 Needs Assessment* targets by region and the resulting survey response rates. A convenience sample of 1,625 questionnaires was submitted to PRG.¹ This represents 97% of the goal of 1,675 responses as set by the *OPH SHP*. Region V administered 2 additional questionnaires and Region VII administered 2 additional questionnaires to PLWH who requested to be part of the *2015 Needs Assessment*.

Table 1. State-wide Needs Assessment Targets

Region	Target Number of Questionnaires	Number Returned	Percentage of Target
NO EMA	600	582	97.00%
BR TGA	400	375	93.75%
III	75	75	100.00%
IV	125	125	100.00%
V	100	102	102.00%
VI	75	75	100.00%
VII	125	127	101.60%
VIII	100	99	99.00%
IX	75	65	86.67%
TOTAL	1,675	1,625	97.01%

¹ A total of 1,631 PLWH responded to the *2015 Needs Assessment*, but six respondents were excluded because the survey instrument was formatted differently than all other questionnaires submitted, and we were unable to determine the source of the questionnaires.

It is important to emphasize that the data presented in this report may not be representative of or generalizable to all PLWH across the state. There are two reasons for this. The primary reason is that the data are derived from a convenience sample. The PLWH who were surveyed are those who happened to be available and present at the data collection sites during the survey administration. They are also those who selected themselves into the sample (i.e., they were not randomly selected), which means they may systematically differ from those who did not. As a result, we cannot say that those in the sample are representative of any broader population (i.e., one that includes those who select out). Instead, the PLWH included in the sample represent only those persons who responded or who would have responded if they had been similarly available. This limitation applies to the full statewide sample, as well as any regional subsample; the samples cannot be said to be representative of the PLWH population within each region or across Louisiana.

The statewide sample also may not be generalizable to the broader population of PLWH in Louisiana because the regional subsamples differ from the estimated distribution of PLWH across the state. Prior to data collection, the sampling area (Louisiana) was divided based on the *Louisiana Department of Health and Hospitals*' nine administrative regions. The *OPH SHP* chose a target number of respondents for each region; however, the targets (and ultimately the regional samples) were not in proportion to the distribution of PLWH across the state. This is demonstrated in Table 2, which presents the number and percentage of PLWH in each region for the state compared to the number and percentage of PLWH in each region for the sample. As shown in Table 2, Region V is overrepresented in the sample. Region V accounts for 6.3% of the PLWH in the sample but only 5% of the PLWH in the state. By contrast, NO EMA is underrepresented in the statewide sample, since it comprises 39% of PLWH in the state but 36% of this sample.

As a result of both these issues, generalizations and inferences about the needs of PLWH across the state should be made with caution.

Table 2. Number of PLWH in Each Region

Region	2015 State Surveillance Data		2015 Needs Assessment Sample	
	Number of PLWH*	Percentage of PLWH	Number in Sample	Percentage of Sample
NO EMA	7,897	38.96%	582	35.82%
BR TGA	5,163	25.47%	375	23.08%
III	813	4.01%	75	4.62%
IV	1,517	7.48%	125	7.69%
V	1,020	5.03%	102	6.28%
VI	896	4.42%	75	4.62%
VII	1,707	8.42%	127	7.82%
VIII	1,045	5.15%	99	6.09%
IX	1,243	6.13%	65	4.00%
TOTAL	20,272	100.00%	1,625	100.00%

* "Number of PLWH" are as reported by state surveillance data in the June 30, 2015, *Louisiana HIV, AIDS, and Early Syphilis Surveillance Quarterly Report*.

A. Background

HIV/AIDS Status

Figure A1. HIV/AIDS Status of Respondents (n=1559)

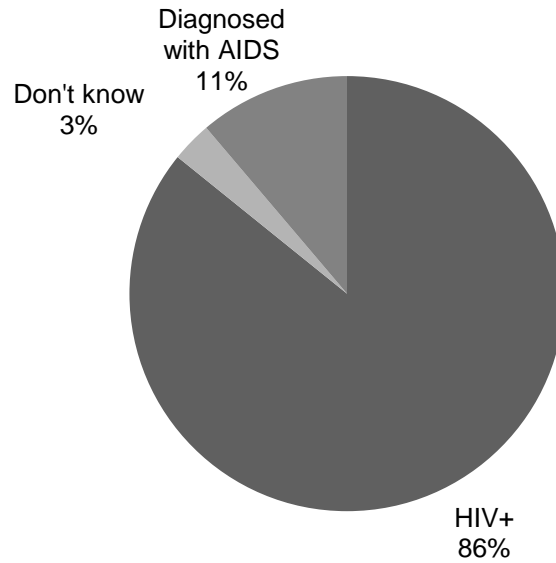
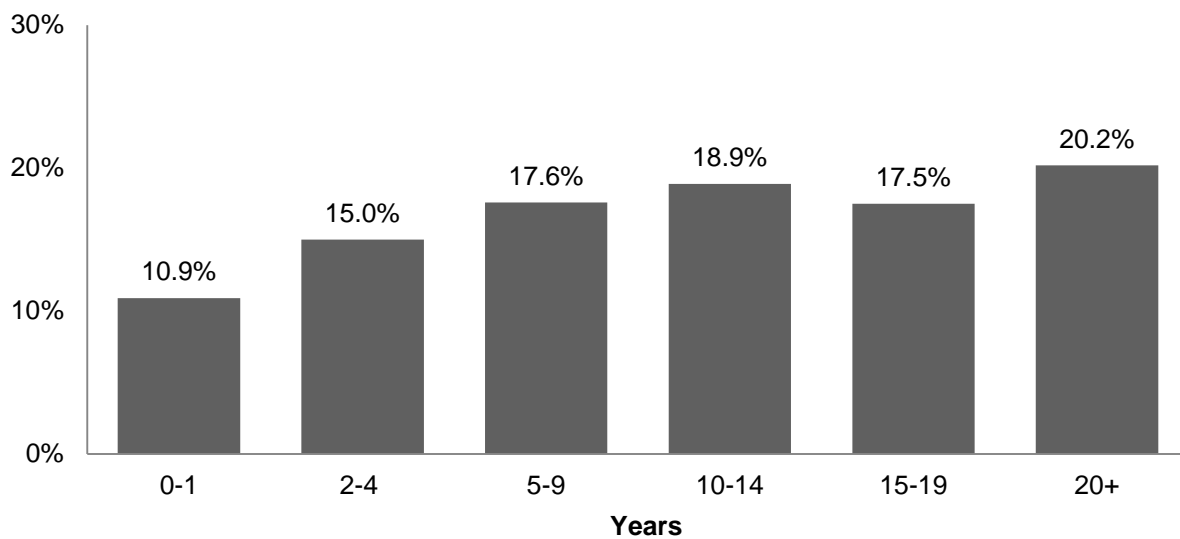
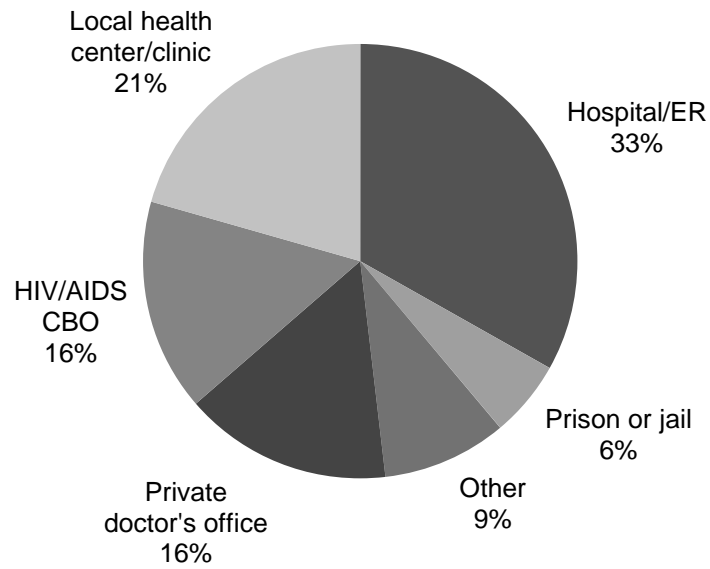


Figure A2. Length of Time Since HIV Diagnosis (n=1437)



- Included in this calculation are 13 respondents who reported finding out about their HIV diagnosis before 1982, when HIV first began being diagnosed. These respondents reported finding out about their HIV diagnosis during the following years: 1980 (7 respondents), 1981 (2 respondents), 1979 (2 respondents), 1977 (1 respondent), and 1975 (1 respondent).

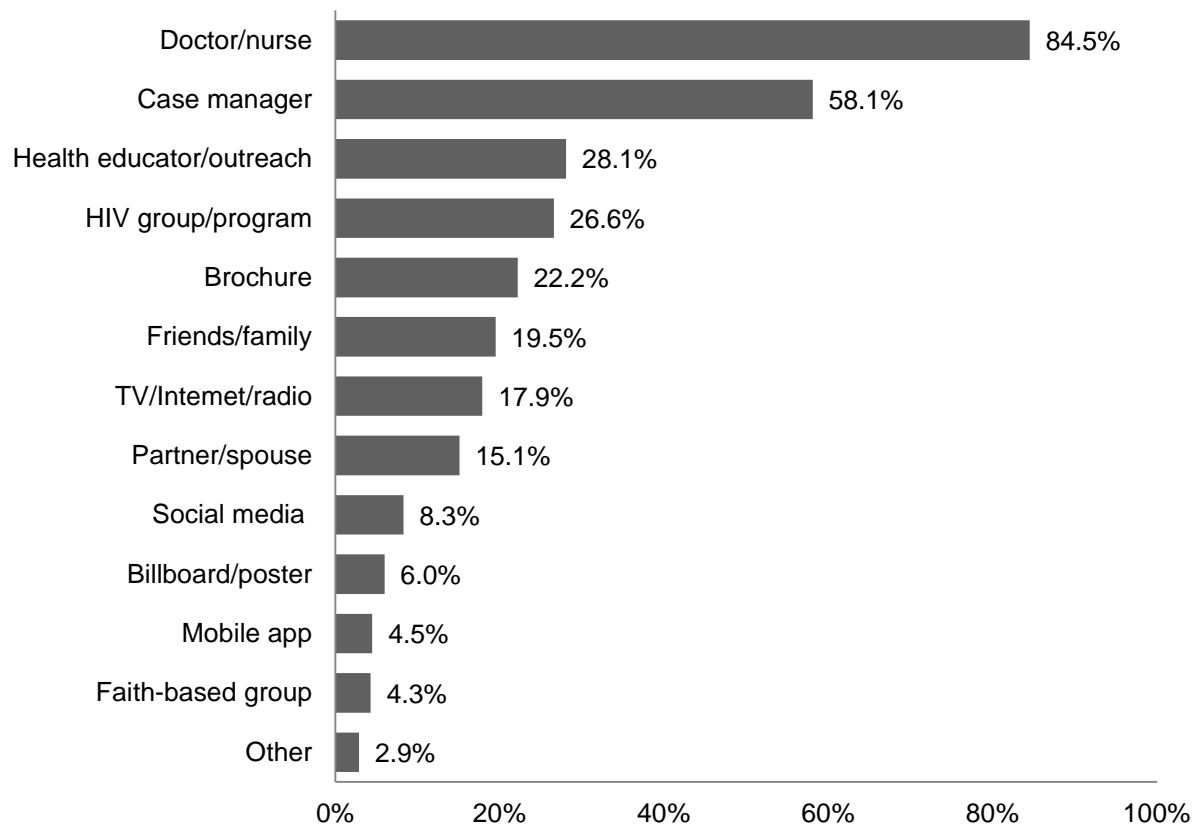
Figure A3. Place Where Respondents Were Told of HIV Diagnosis (n=1521)



- *In jail* and *in prison* are separate response options in the BR TGA instrument, but they are combined in the NO EMA and Regions III through IX instruments (*in jail or prison*). We have combined these responses for this figure.
- The category *other* includes individuals who specifically chose the response option *other* (3.8%) as well as those who chose *organizations providing other services* (5.5%).

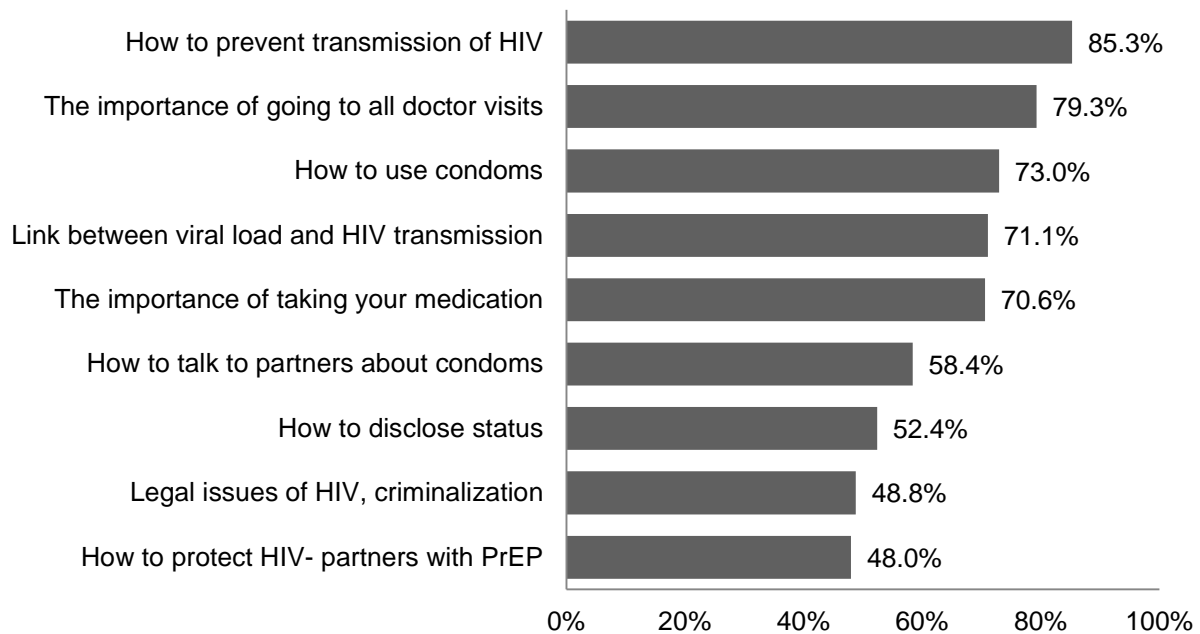
HIV-Related Knowledge

Figure A4. Sources of HIV Information (n=1528)



- Since respondents were permitted to select more than one category or not answer the question at all, the sum of all categories may not meet or may exceed 100%. Out of the 1528 respondents who responded to this question, 1114 (72.9%) reported two or more sources of HIV-related information.

Figure A5. Percent Reporting Knowledge of Issues Related to HIV (n=1434)



- Excluded from this calculation are 53 respondents who indicated that no one had explained any of these things to them and also indicate that someone had explained at least one of these issues related to HIV. Because *no one has ever explained any of these things to me* is only a response option in the instrument for Regions III through IX, these inconsistent responses are only identified in Regions III through IX.
- Since respondents were permitted to select more than one category or not answer the question at all, the sum of all categories may not meet or may exceed 100%. Out of the 1434 respondents who responded to this question, 1251 (87.2%) reported having knowledge of two or more issues related to HIV.

Background Characteristics

Table A1. Current Parish of Residence (n=1502)

Parish	Number Reporting (Percent)
Orleans Parish	455 (30%)
East Baton Rouge Parish	289 (19%)
Caddo Parish	98 (7%)
Lafayette Parish	78 (5%)
Calcasieu Parish	72 (5%)
Jefferson Parish	62 (4%)
Ouachita Parish	62 (4%)
Rapides Parish	51 (3%)
Tangipahoa Parish	47 (3%)
Terrebonne Parish	31 (2%)
Lafourche Parish	16 (1%)
Livingston Parish	16 (1%)
Washington Parish	16 (1%)
Iberia Parish	15 (1%)
St. Landry Parish	13 (1%)
Acadia Parish	11 (1%)
St. Tammany Parish	10 (1%)
Bossier Parish	9 (1%)
Jefferson Davis Parish	9 (1%)
St. Bernard Parish	9 (1%)
Assumption Parish	8 (1%)
Franklin Parish	8 (1%)
Lincoln Parish	8 (1%)
St. Charles Parish	8 (1%)
St. James Parish	8 (1%)
Cameron Parish	7 (1%)

- All respondents were asked to indicate their ZIP code; a total of 1502 respondents provided a response. *The U.S. Department of Housing and Urban Development United States Postal Services* (HUD USPS) 1st quarter 2015 ZIP Code Crosswalk File (Retrieved May 27, 2015 from http://www.huduser.org/portal/datasets/usps_crosswalk.html) was used to determine the parish corresponding to each ZIP code.
- Included in the parish of residence calculations, but not presented in Table A1, are the following: 86 respondents who indicated living in one of 31 parishes, each of which represent less than 1% of respondents and 18 respondents who reported one of 16 ZIP codes (70061, 70102, 70106, 70120, 70136, 70137, 70221, 70366, 70399, 70423, 70604, 71361, 71492, 71701, 77048, and 77104) that did not correspond to any Louisiana parishes as listed in the HUD USPS (two of these zip codes are located in counties in other states).
- In some instances ZIP codes cross parish lines (i.e., the same ZIP code is found in multiple parishes). In order to address this problem, we assigned a parish to a ZIP code if that parish accounted for the majority of the population residing in that ZIP code. Out of the 1502 respondents for whom we designated a parish of residence, 210 provided ZIP codes that were contained in more than one parish; therefore, in these cases, the parish of residence may not be accurate.

Figure A6. Map of Current Parish of Residence (n=1502)

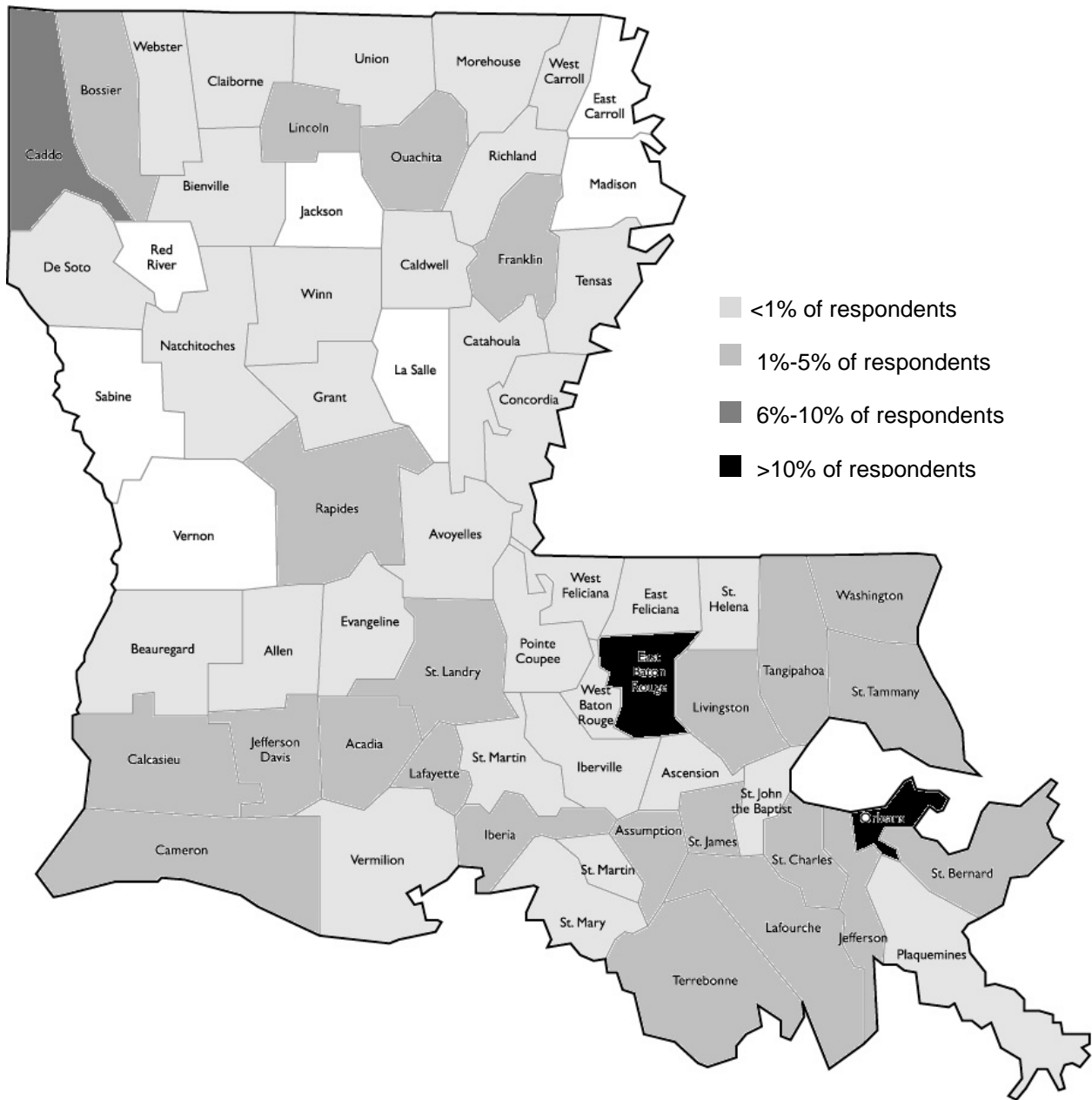
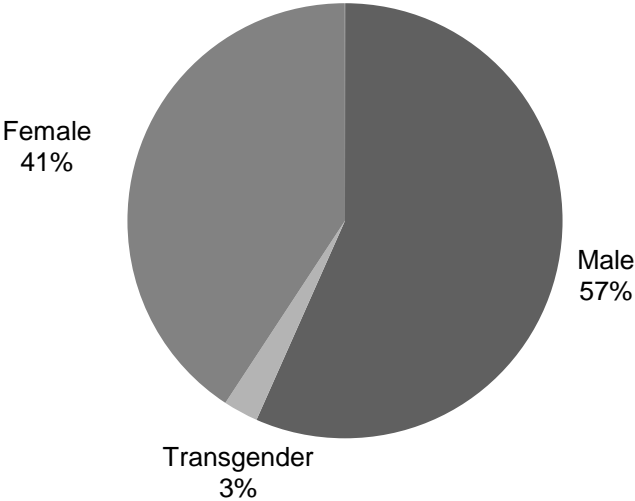


Figure A7. Gender of Respondents (n=1556)



- The category *transgender* includes individuals who chose the response option *transgender: male to female* (2.4%) as well as those who chose *transgender: female to male* (0.3%).

Figure A8. Sexual Orientation (n=1522)

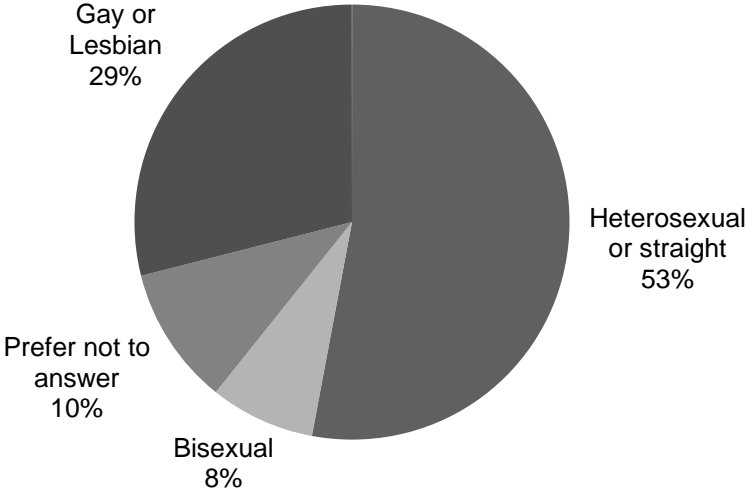
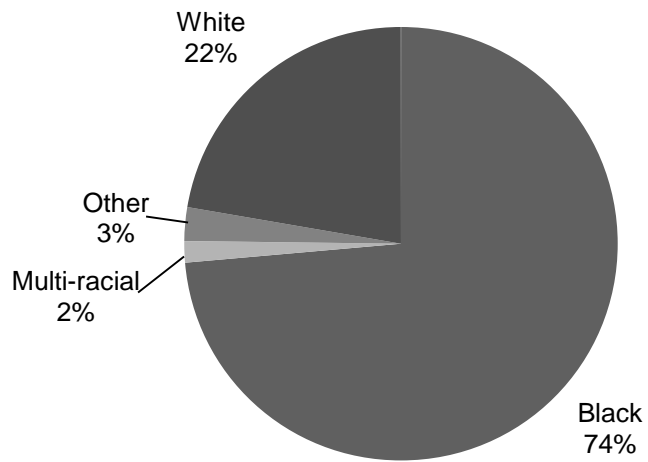


Figure A9. Race of Respondents (n=1550)



- The Regions III through IX instrument asks respondents to mark only one response, while the instruments administered to respondents in the NO EMA and BR TGA do not specify this.

Figure A10. Latino/Hispanic (n=1545)

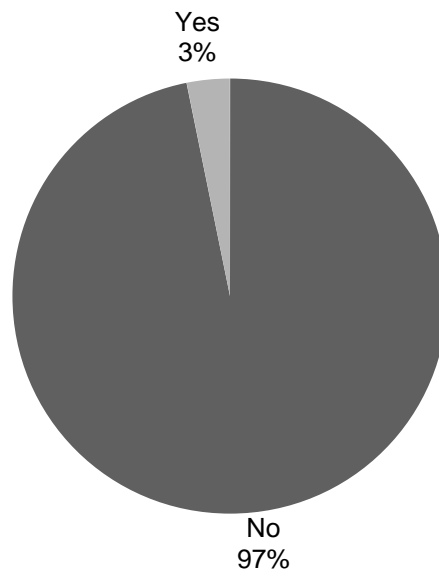
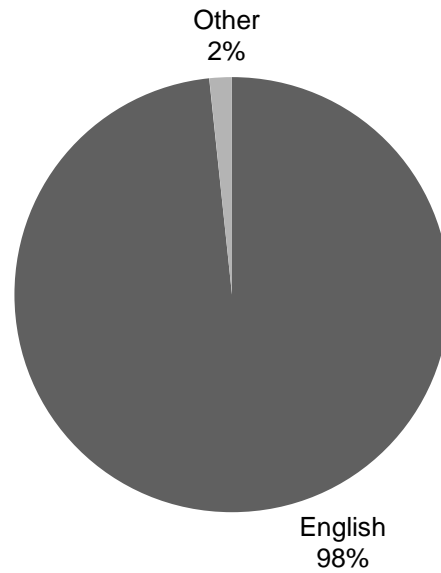
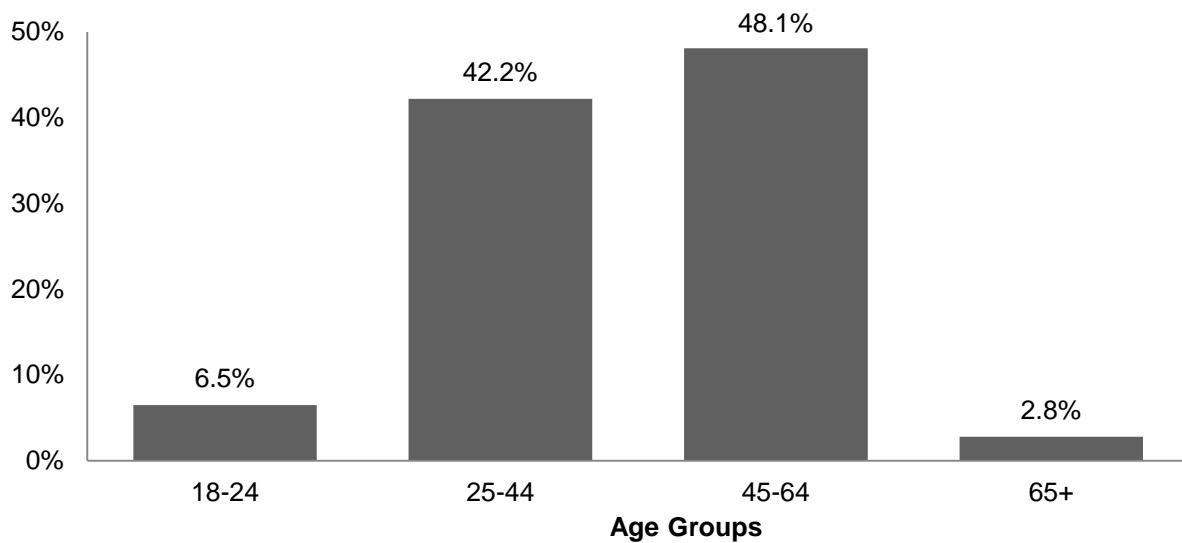


Figure A11. Primary Language of Respondents (n=1554)



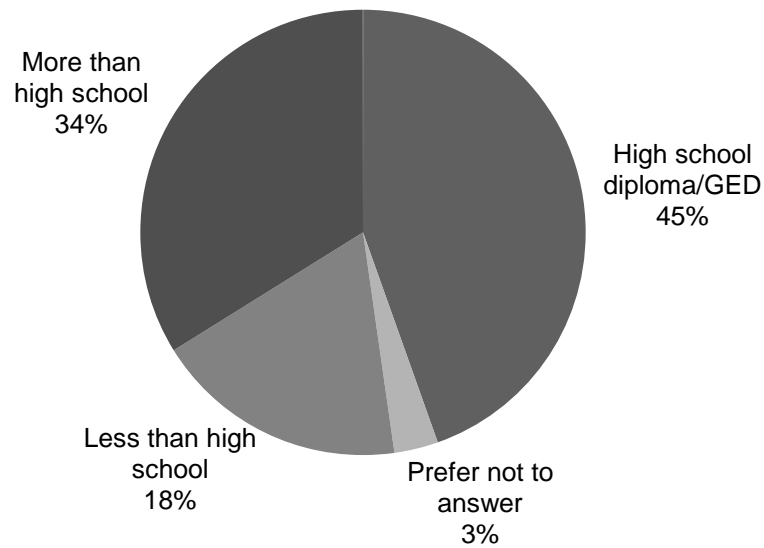
- The category *other* includes individuals who specifically chose the response option *other* (0.4%) as well as those who chose *Spanish* (1.3%).

Figure A12. Age of Respondents (n=1565)



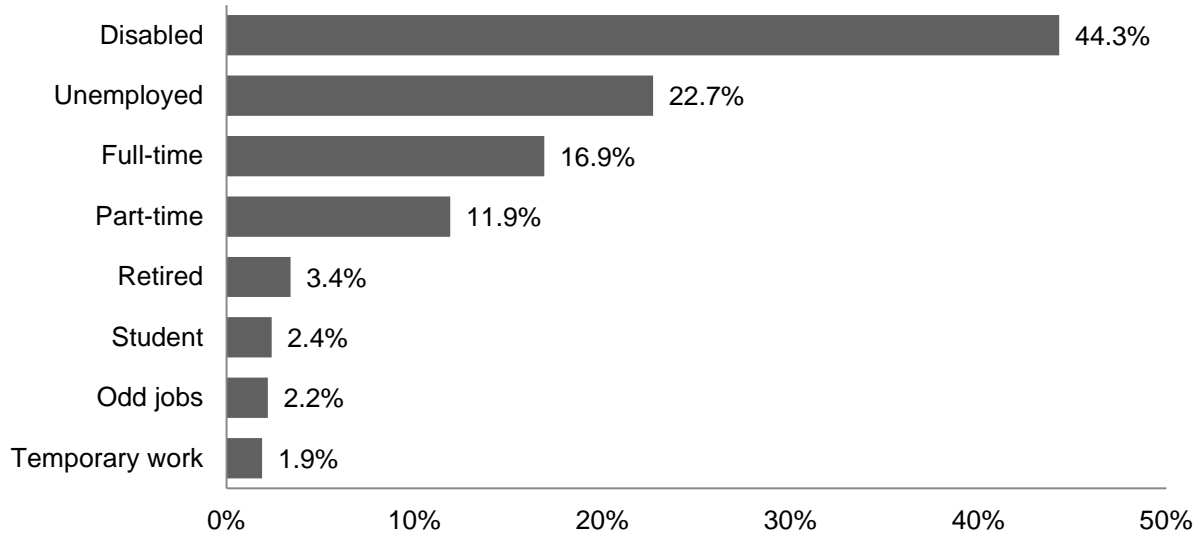
- Included in calculations but not presented in this figure are those persons who reported being younger than 18 years old (0.3%).

Figure A13. Highest Level of Education Completed by Respondents (n=1550)



Employment

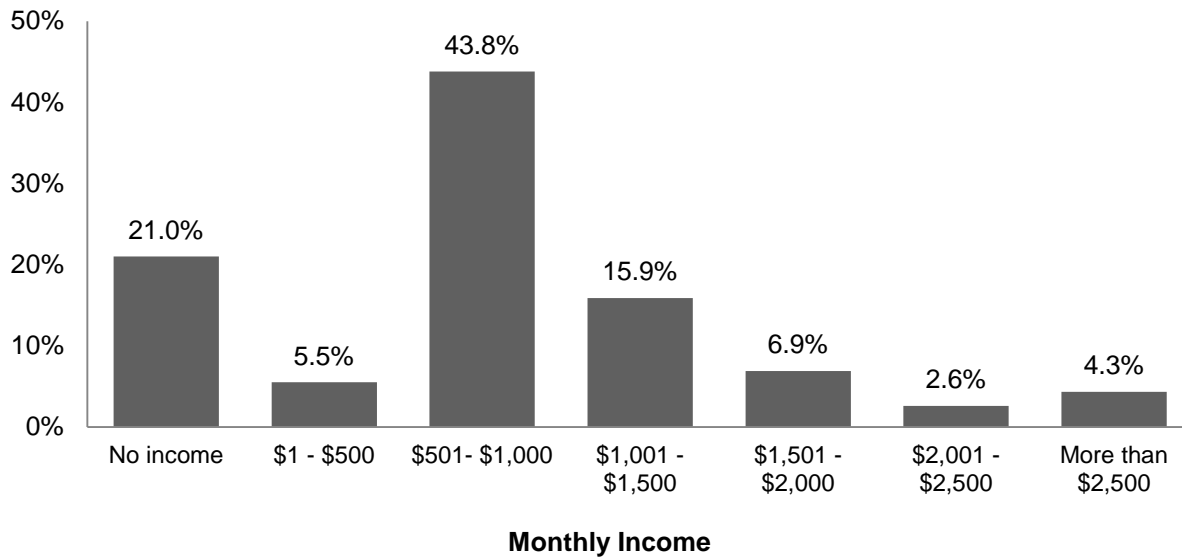
Figure A14. Employment Status in the Last Six Months (n=1554)



- The instruments administered to participants in the NO EMA and BR TGA specifies that respondents should mark all applicable responses for this category; the instrument administered to participants in Regions III through IX does not. The BR TGA and NO EMA instruments also do not have an option for *other*. However, the instrument from Regions III through IX does have an *other* response option; 2.2% of respondents from Regions III through IX chose *other* when reporting their employment status within the last six months.
- Since respondents were permitted to select more than one category or not answer the question at all, the sum of all categories may not meet or may exceed 100%. Out of the 1554 respondents who responded to this question, 96 (6%) reported two or more employment situations in the last six months.

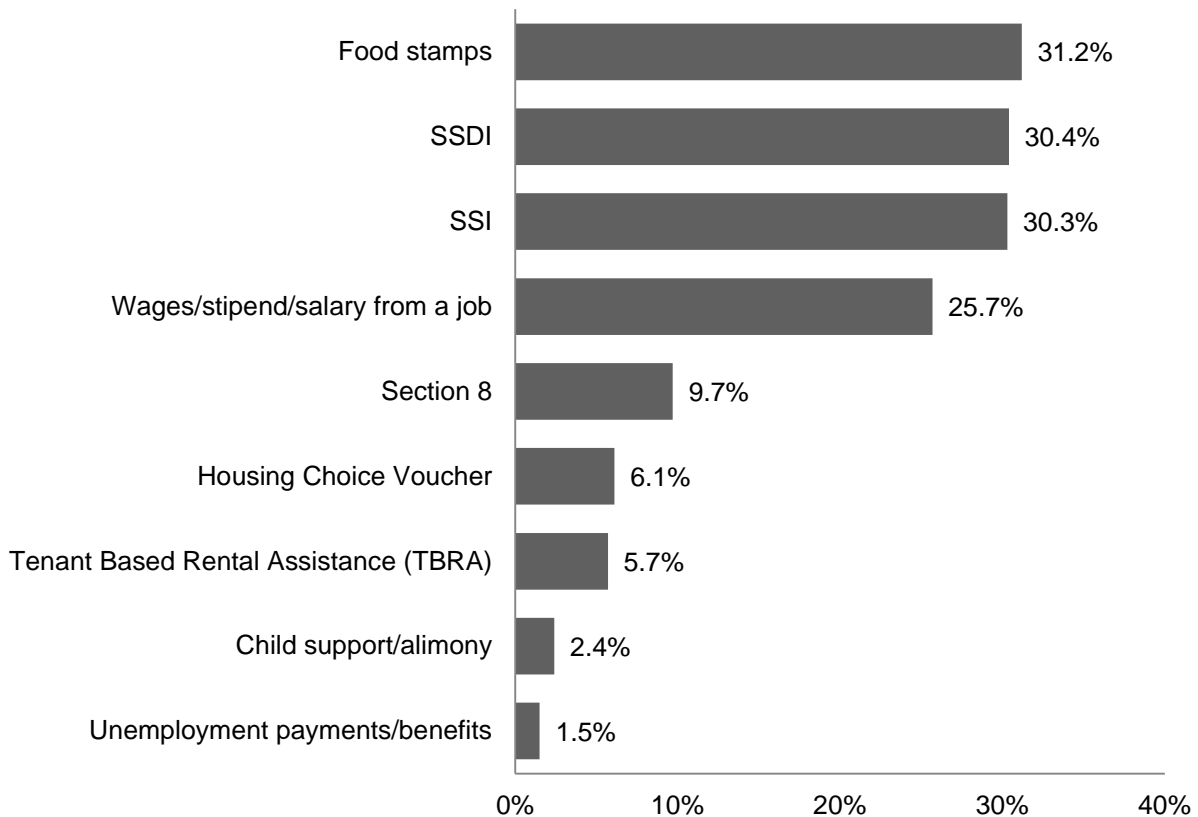
Income

Figure A15. Household Income in Month Prior to Survey (n=1386)



- The category *more than \$2,500* includes individuals who reported an income of \$2,501-\$3,000 (0.9%), individuals who reported an income of \$3,001-\$3,500 (0.3%), and individuals who reported an income of *more than \$3,500* (3.1%).
- The following outliers (extreme values) are retained in calculations: \$4,000 (6 respondents), \$30,000 (3 respondents), \$10,000 (3 respondents), \$6,000 (3 respondents), \$20,000 (2 respondents), \$9,000 (2 respondents), \$8,400 (2 respondents), \$5,000 (2 respondents), \$3,500 (2 respondents), \$71,300 (1 respondent), \$60,000 (1 respondent), \$50,000 (1 respondent), \$40,000 (1 respondent), \$28,000 (1 respondent), \$24,000 (1 respondent), \$18,000 (1 respondent), \$17,702 (1 respondent), \$14,536 (1 respondent), \$14,000 (1 respondent), \$13,000 (1 respondent), \$12,012 (1 respondent), \$12,000 (1 respondent), \$11,040 (1 respondent), \$9,132 (1 respondent), \$8,880 (1 respondent), \$4,150 (1 respondent), \$4,113 (1 respondent), \$3,800 (1 respondent) and \$3,600 (1 respondent).
- Excluded from calculations are eight respondents who reported that they had no income and indicated a dollar amount of income in the month prior to the survey. The amount of income these respondents reported are: \$300 (2 respondents), \$600 (1 respondent), \$700 (1 respondent), \$733 (1 respondent), \$753 (1 respondent), \$1,000 (1 respondent), and \$1,200 (1 respondent).

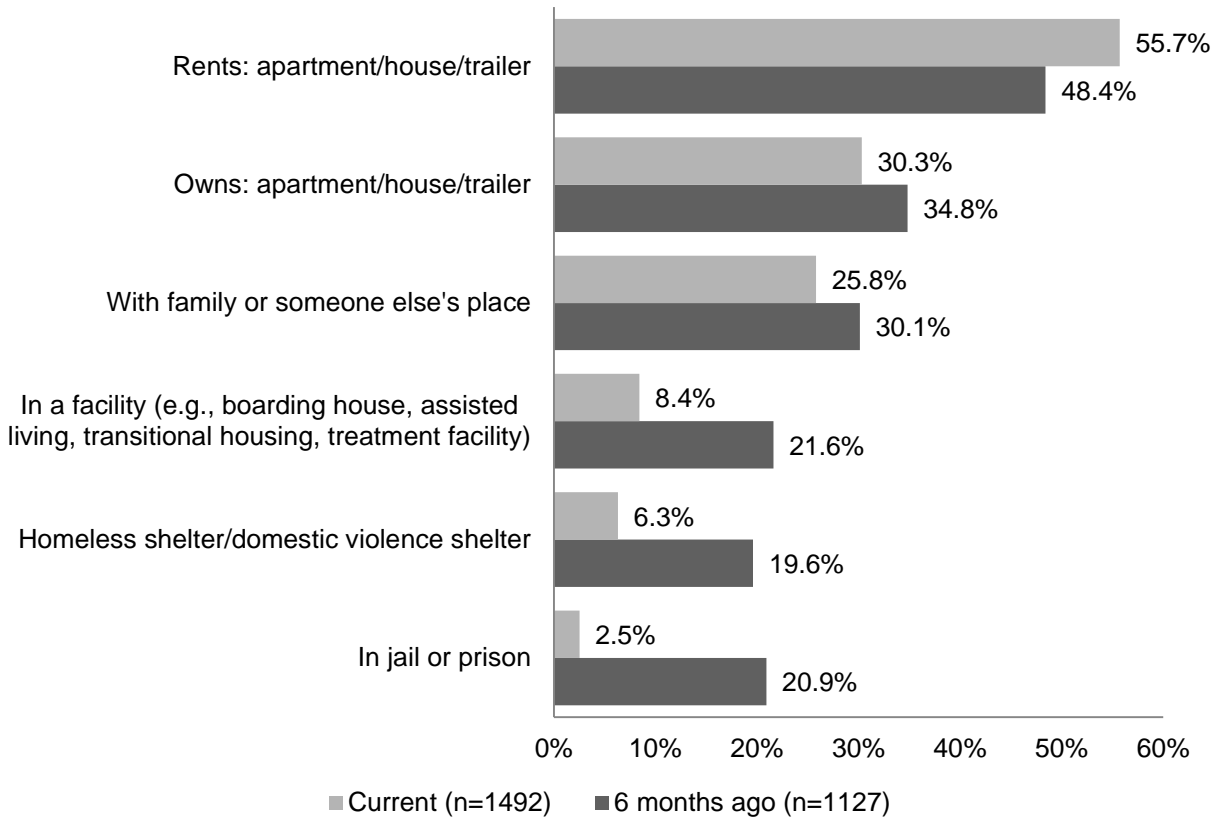
Figure A16. Sources of Income and Assistance (n=1356)



- Abbreviations: SSI = Supplemental Security Income; SSDI = Social Security Disability Income
- The instruments administered to respondents in the NO EMA and BR TGA areas had *none of these* response options that were specifically tied to the financial assistance and housing assistance categories. For the instrument administered to respondents in Regions III through IX, there was only one *none of these* response option that applied to the entire list of categories. 66.7% of respondents from the NO EMA and BR TGA indicated they do not receive housing assistance, and 22.7% indicated they do not receive financial assistance from the NO EMA and BR TGA. From Regions III through IX, 27.2% reported receiving *none of these* response options.
- Less than one percent of respondents indicated they receive Veteran's Housing (0.4%) and Aid to Families with Dependent Children/Temporary Assistance to Needy Families (0.7%).
- Excluded from calculations are 19 respondents from the NO EMA and BR TGA who indicated they receive at least one form of financial or housing assistance and that they do not receive any financial or housing assistance respectively. Also excluded from calculations are 178 respondents from Regions III through IX who indicated that they have at least one source of income or assistance and that they have *none of these*. The sources of income and assistance these respondents indicated they have are: *food stamps* (95 respondents), *SSDI* (76 respondents), *SSI* (70 respondents), *wages* (14 respondents), *child support/alimony* (7 respondents), *unemployment benefits* (5 respondents), *received section 8* (4 respondents), *received a Housing Choice Voucher* (4 respondents), *ADFC/TANF* (1 respondent) and *TBRA* (1 respondent).
- Out of the 1,356 respondents who reported at least one source of income or assistance, 965 (71.2%) reported two or more sources.

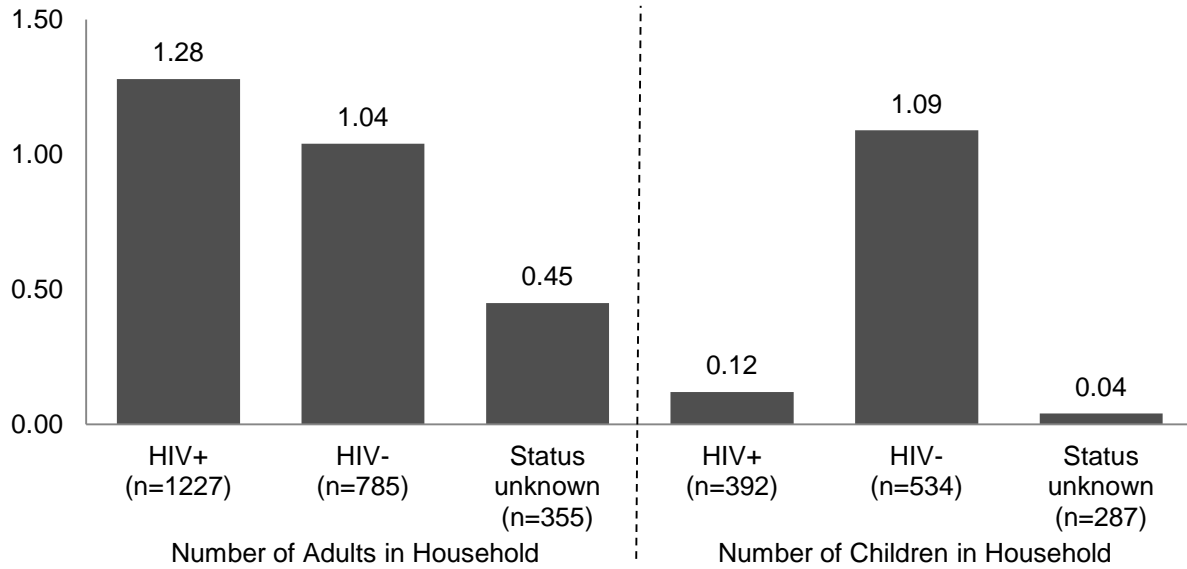
Housing

Figure A17. Housing at the Time of Survey and 6 Months Prior to Survey



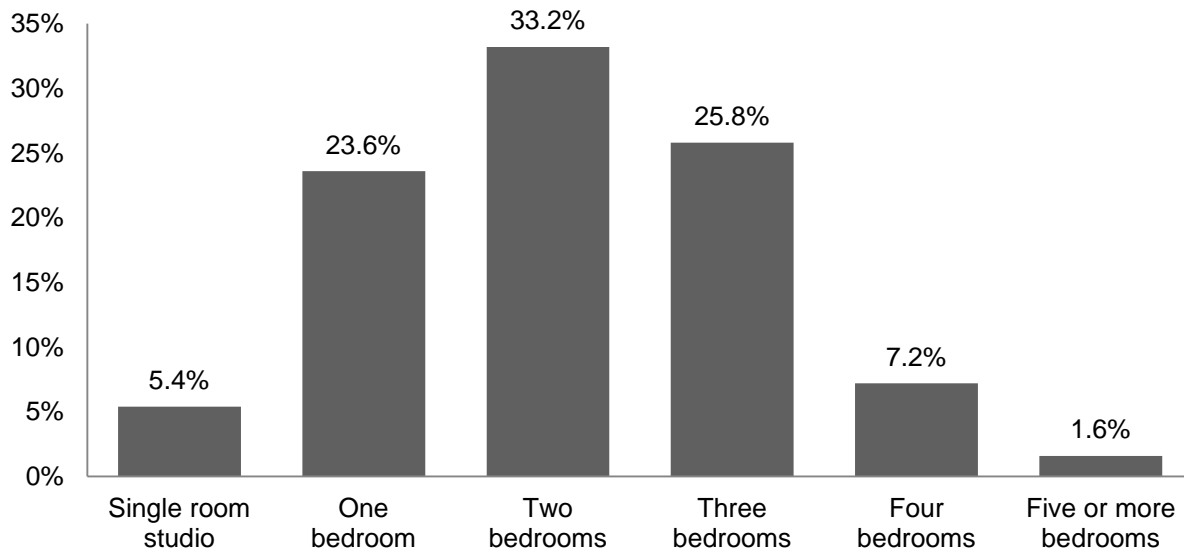
- *In jail* and *in prison* are separate options in the BR TGA instrument. They are combined in the NO EMA and Regions III through IX instruments. *In jail* and *in prison* have been combined in this calculation.
- Since respondents were permitted to select more than one category or not answer the question at all, the sum of all categories may not meet or may exceed 100%. Out of the 1492 respondents who responded to the question of where they currently live, 303 (20.3%) reported two or more types of housing. Out of the 1127 respondents who responded to the question of where they lived six months ago, 334 (29.6%) reported two or more types of housing.
- It is important to note that the questionnaires administered to respondents in the NO EMA and BR TGA did not indicate what respondents should do in the case that they lived in more than one place; therefore, respondents may not have chosen all responses that applied to their living situation. The questionnaire administered in Regions III through IX asked respondents to only select one housing option for each time point. In Regions III through IX, if respondents lived in more than one place during either of these time periods, they were instructed to select the housing type where they lived most often.

Figure A18. Average Number of Adults and Children in Household by HIV Status



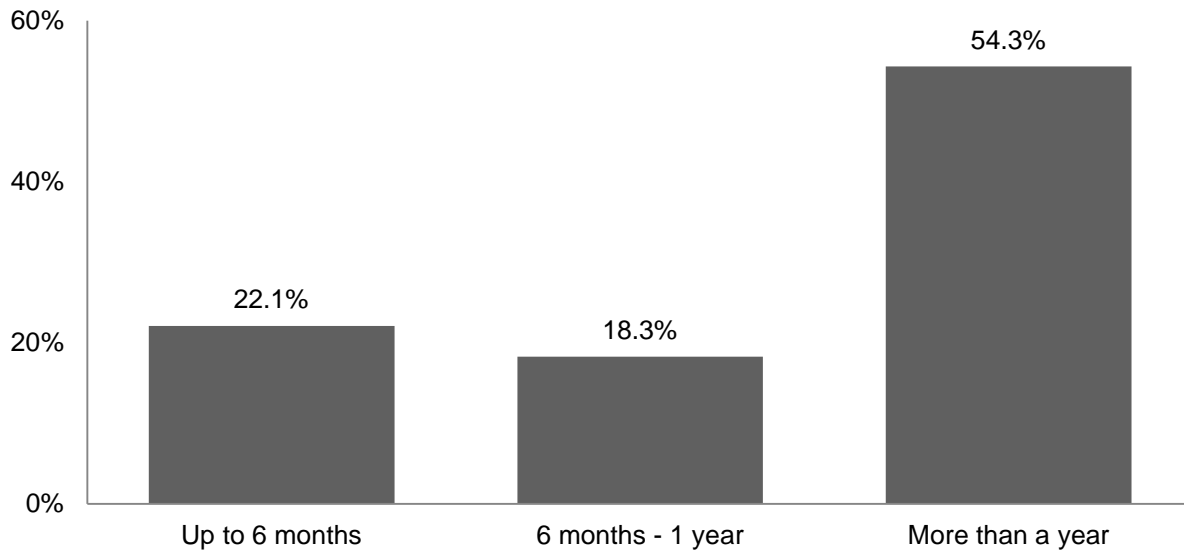
- The wording and response options differ slightly between the NO EMA and BR TGA instruments and the Regions III through IX instrument. Because the Regions III through IX questionnaire did not inquire about the number of adults and children in the household who are HIV-, we calculated the number of adults and children who are HIV- by subtracting the number of adults and children who are HIV+ from the total number of adults and children in the household. Six respondents were excluded from calculations because the number of children who are HIV+ or HIV- did not match the total number of children in the household.
- The following outliers are included in these calculations: *number of HIV- adults in household*: 4 (13 respondents), 5 (12 respondents), 10 (2 respondents), 6 (1 respondent), 7 (1 respondent), 9 (1 respondent), 11 (1 respondent), 15 (1 respondent), and 16 (1 respondent); *number of HIV- children*: 8 (1 respondent), 9 (1 respondent), and 11 (1 respondent).

Figure A19. Number of Bedrooms in Respondents' Residences (n=1490)



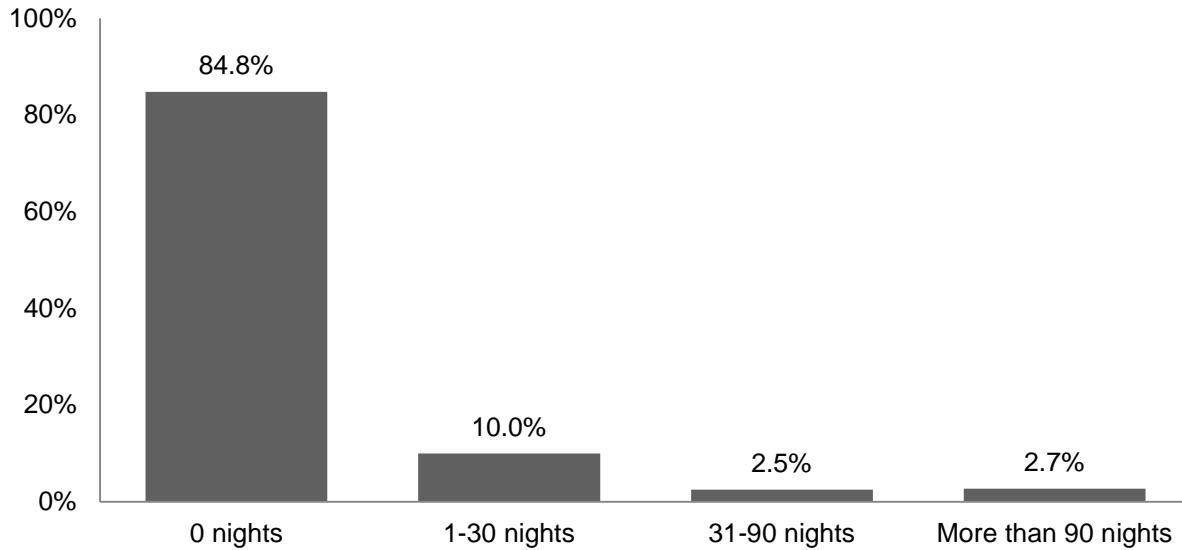
- The response options differ slightly between the NO EMA and BR TGA instruments and the Regions III through IX instrument. The NO EMA and BR TGA instruments included the response option *none, I'm homeless*, while the Regions III through IX instrument included the response option *not applicable, I don't live in an apartment, house, or trailer*. Of the 907 respondents in the NO EMA and BR TGA, 5.2% reported being homeless. Of the 583 respondents in Regions III through IX, 9.9% reported N/A.

Figure A20. Length of Time at Current Residence (n=1541)



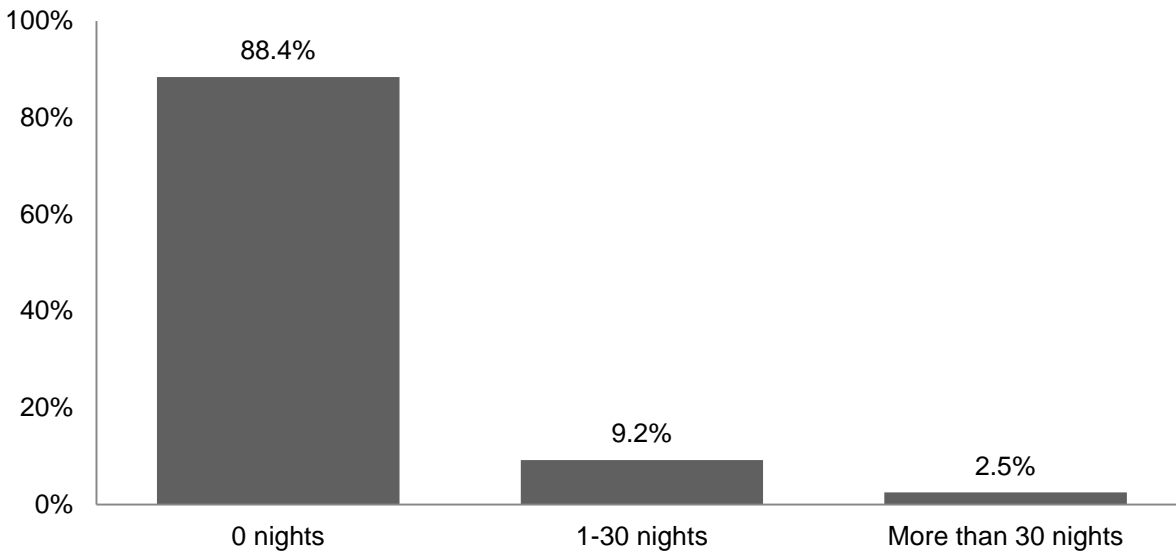
- In addition to what is reported here, 5.3% of respondents reported being homeless.

Figure A21a. NO EMA and Regions III through IX: Nights Spent Homeless or Without a Place to Sleep in the Last Year (n=1045)



- For the NO EMA and Regions III through IX, this question asked about nights spent homeless or without a place to sleep in the past year. For the BR TGA, this question asked about nights spent homeless or without a place to sleep in the last 6 months.

Figure A21b. BR TGA: Nights Spent Homeless or Without a Place to Sleep in the Last 6 Months (n=284)



- For the NO EMA and Regions III through IX, this question asked about nights spent homeless or without a place to sleep in the past year. For the BR TGA, this question asked about nights spent homeless or without a place to sleep in the last 6 months.
- The category *more than 30 nights* includes individuals who specifically chose the response option *31-90 nights* (0.7%) as well as those who chose *more than 90 nights* (1.8%).

Figure A22. Had Difficulty Obtaining Housing in the Last 6 months (n=1462)

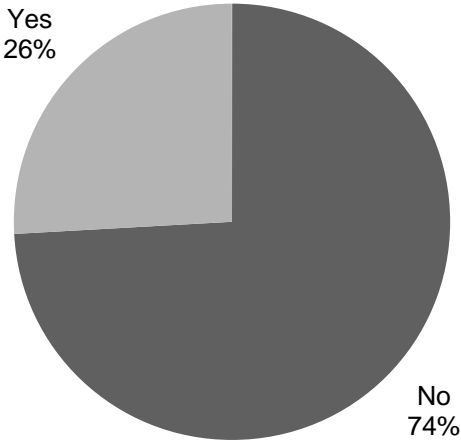
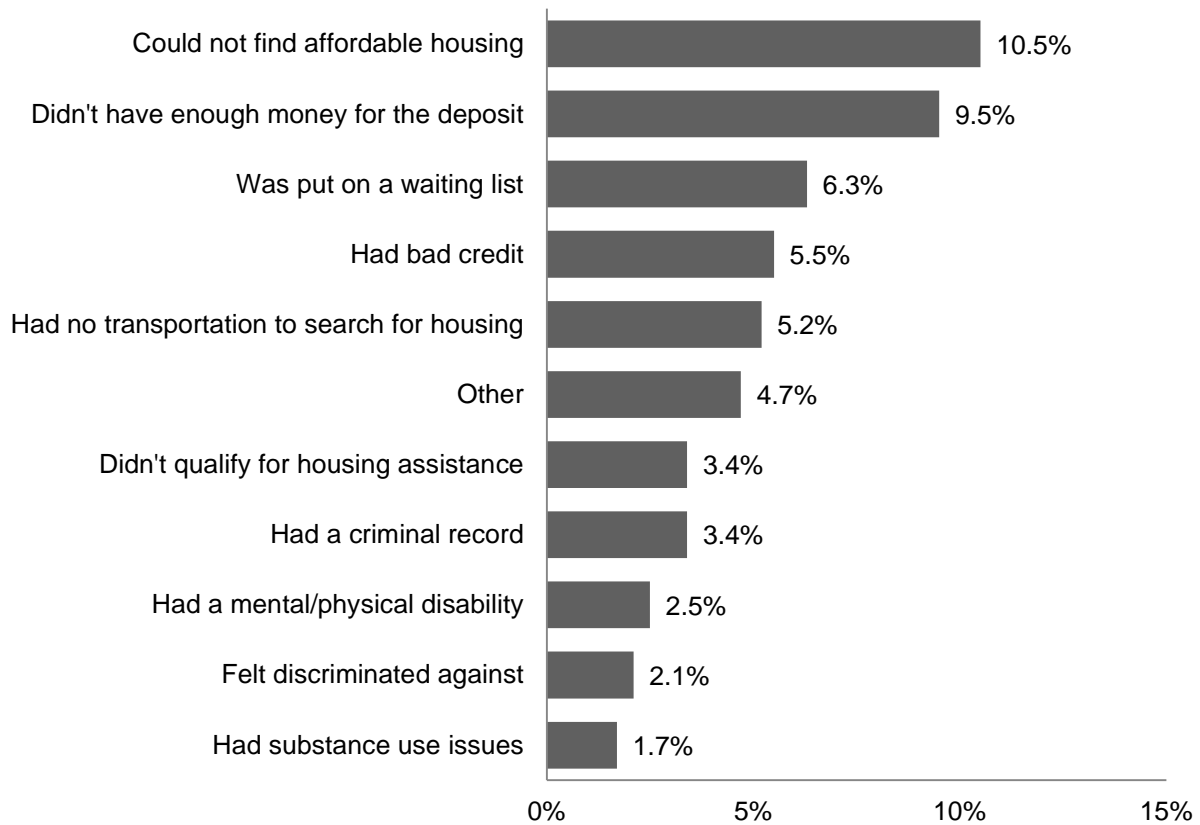
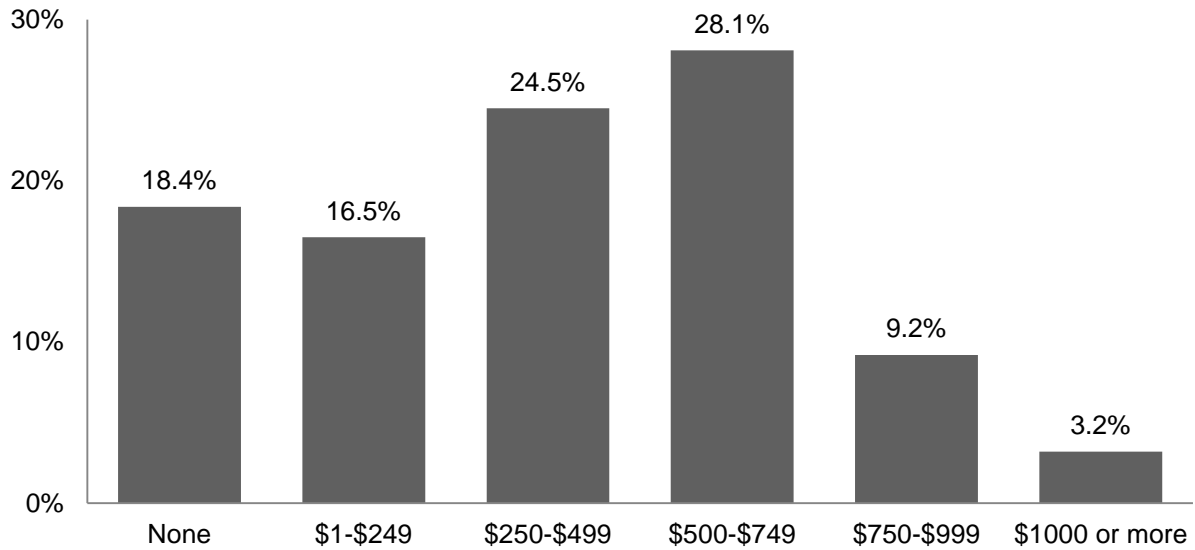


Figure A23. Barriers to Obtaining Housing (n=1462)



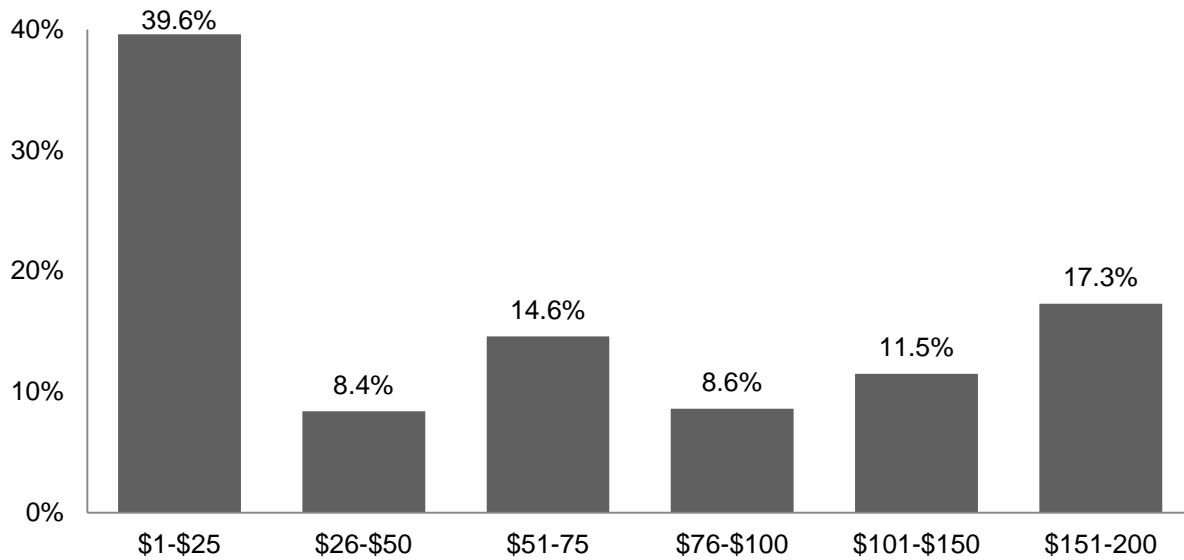
- In addition to what is reported here, 74.1% of respondents indicated they did not have problems finding housing.
- Since respondents were permitted to select more than one category or not answer the question at all, the sum of all categories may not meet or may exceed 100%. Out of the 378 respondents who reported at least one barrier to obtaining housing, 175 (46.3%) reported two or more barriers.
- Excluded from calculations are 12 respondents who indicated they experienced at least one barrier in obtaining housing in the last six months and that they did not have any problems obtaining housing. The barriers these respondents indicated they have are: *had a criminal record* (5 respondents), *put on a waiting list* (4 respondents), *didn't qualify for housing assistance* (3 respondents), *other trouble with housing* (3 respondents), *didn't have enough money for a deposit* (2 respondents), *had bad credit* (2 respondents), *could not find affordable housing* (2 respondents), *had a mental/physical disability* (2 respondents), *no transportation to search for housing* (1 respondent), *felt discriminated against* (1 respondent), and *had substance use issues* (1 respondent).

Figure A24. Rent/Mortgage Contribution Paid “Out of Pocket” (n=1391)



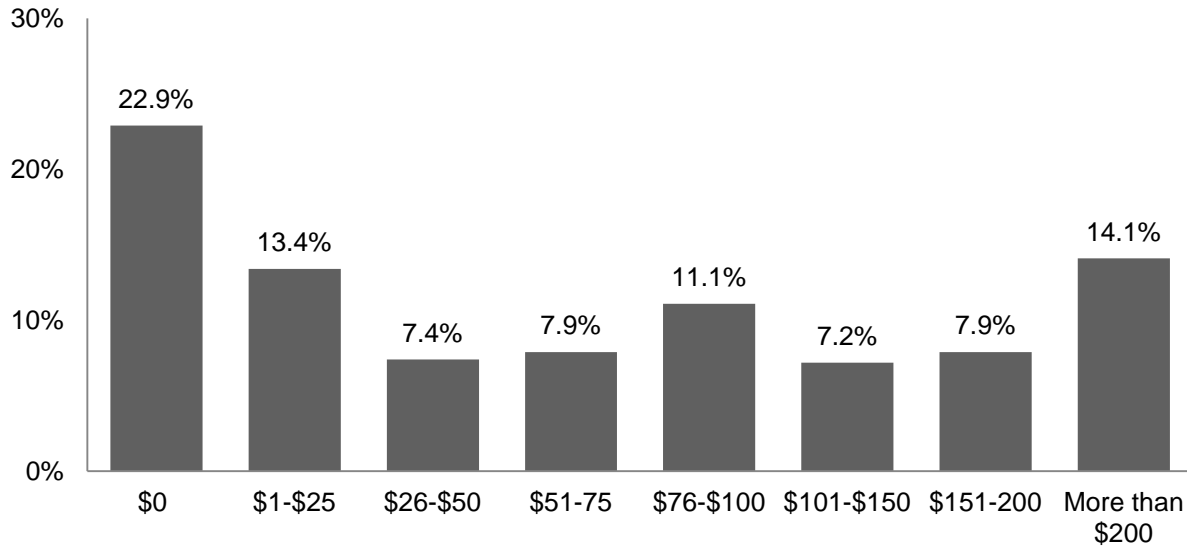
- Of the 1135 individuals who reported that they do contribute to their rent/mortgage, 536 (47.2%) indicate that their rent/mortgage contribution includes utilities.
- The following outliers (extreme values) are retained in calculations: \$2,100 (1 respondent), \$2,400 (1 respondent), and \$2,800 (1 respondent).

Figure A25a. NO EMA and BR TGA: Increase per Month in Rent/Mortgage That Would Cause Respondents to Move (n=608)



- Regions III through IX included the following additional options: *Not applicable, I'm homeless/don't have to pay monthly rent/mortgage; none; and more than \$200.*

Figure A25b. Regions III through IX: Increase per Month in Rent/Mortgage That Would Cause Respondents to Move (n=433)

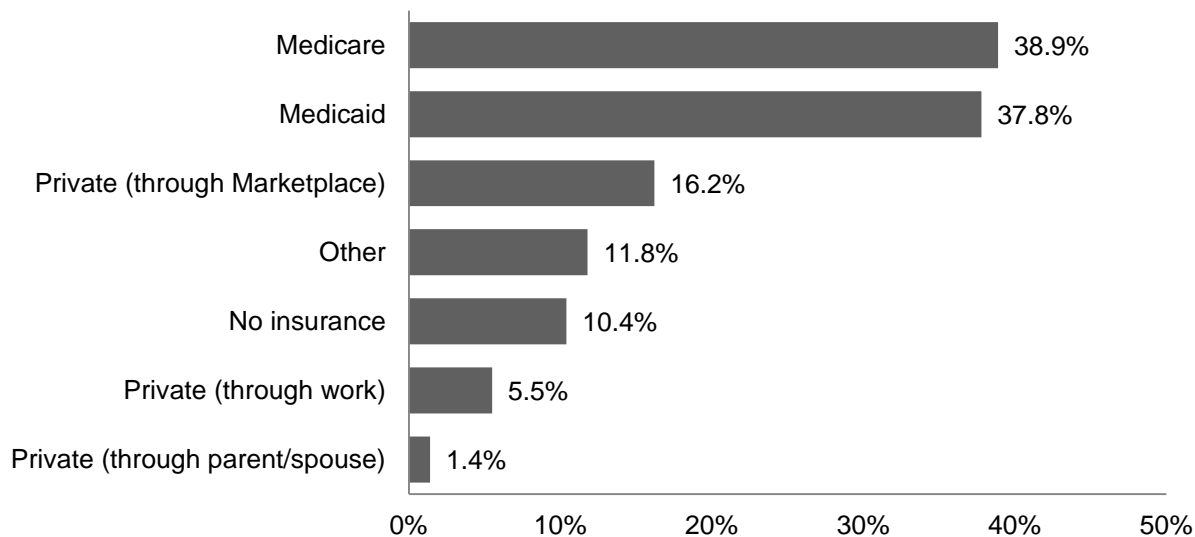


- Regions III through IX included the following additional options: *Not applicable, I'm homeless/don't have to pay monthly rent/mortgage; none; and more than \$200.* In addition to what is reported in this figure, 8.3% of individuals chose the response option *not applicable, I'm homeless/don't have to pay monthly rent/mortgage.*

B. Medical Care

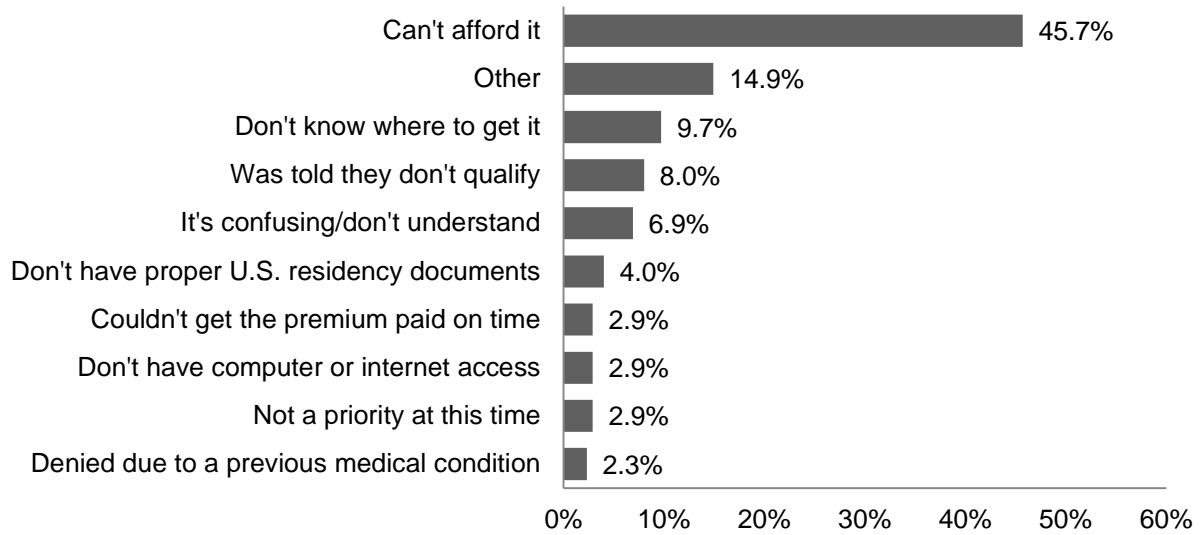
Health Insurance and Medical Coverage

Figure B1. Sources of Health Insurance for HIV-related Medical Care (n=1589)



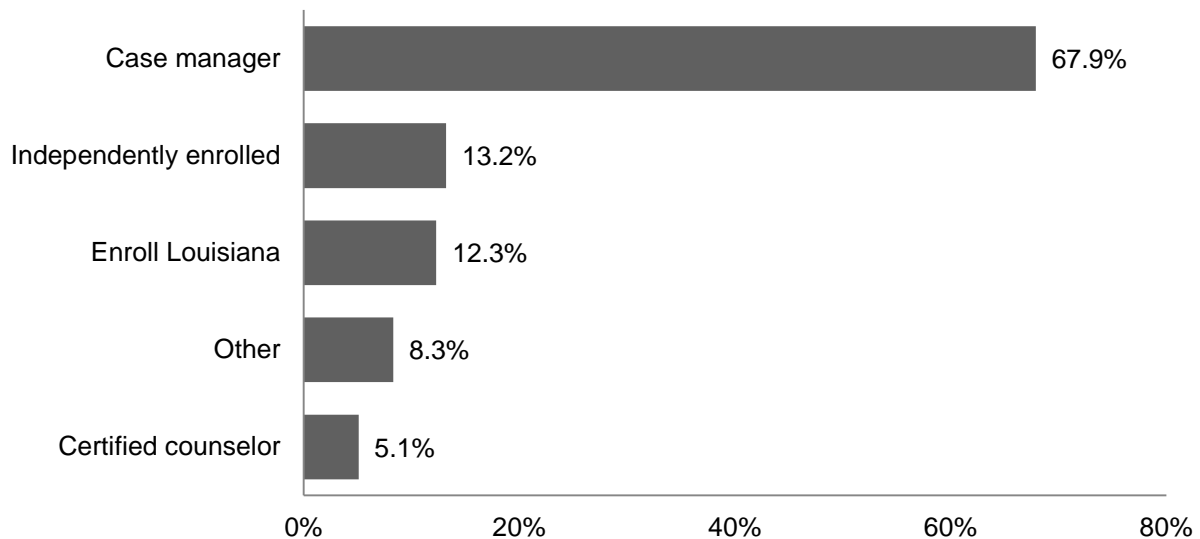
- In the questionnaires administered in the NO EMA and BR TGA, respondents were instructed to mark all responses that applied to their current situation. The questionnaire used in Regions III through IX did not specify this.
- Since respondents were permitted to select more than one category or not answer the question at all, the sum of all categories may not meet or may exceed 100%. Out of the 1423 respondents who reported having at least one type of health insurance, 364 (25.6%) reported having two or more sources of health insurance for their HIV/AIDS medical care.
- Included in calculations but not presented in this figure are those persons who reported *Veterans' Administration* (0.9%) and *COBRA* (0.3%) as sources of health insurance for HIV-related medical care.
- Excluded from calculations are 13 respondents who reported that they do not have health insurance that covers HIV-related medical care as well as at least one source of health insurance for HIV-related medical care. The sources of health insurance that these respondents reported are: *Medicare* (6 respondents), *other* (5 respondents), *Medicaid* (3 respondents), and *private insurance through the marketplace* (1 respondent).

Figure B2. Barriers to Obtaining Health Insurance Coverage (n=175)



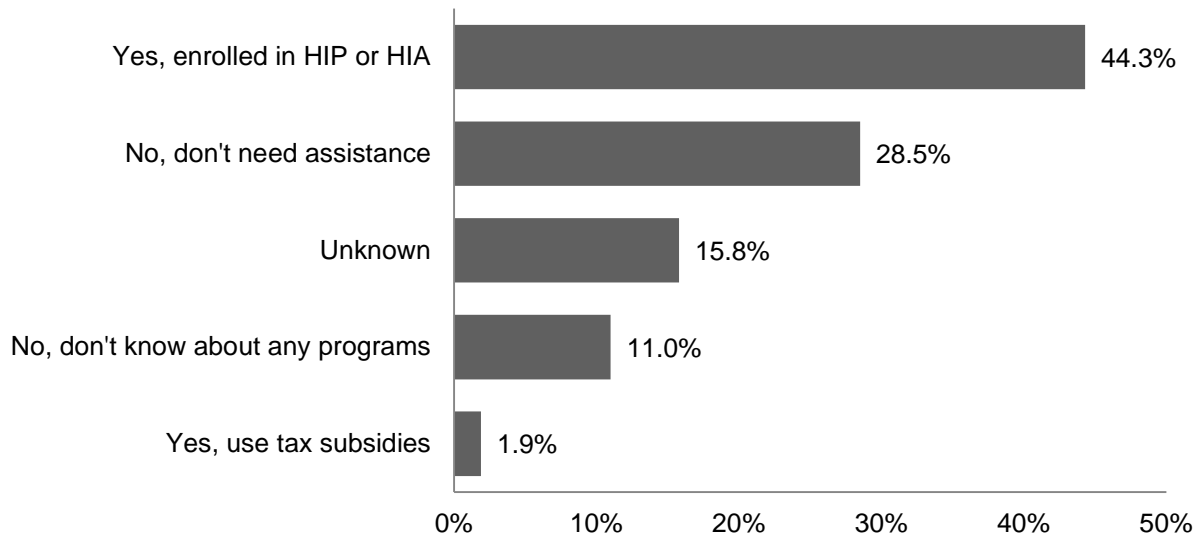
- In addition to what is reported here, 27 respondents (15.4%) report having insurance and that the question does not apply.
- Since respondents were permitted to select more than one category or not answer the question at all, the sum of all categories may not meet or may exceed 100%. Out of the 148 respondents who reported at least one barrier to obtaining health insurance coverage, 19 (12.8%) reported having two or more barriers to obtaining health insurance coverage.

Figure B3. Enrollment in a Marketplace Plan (n=627)



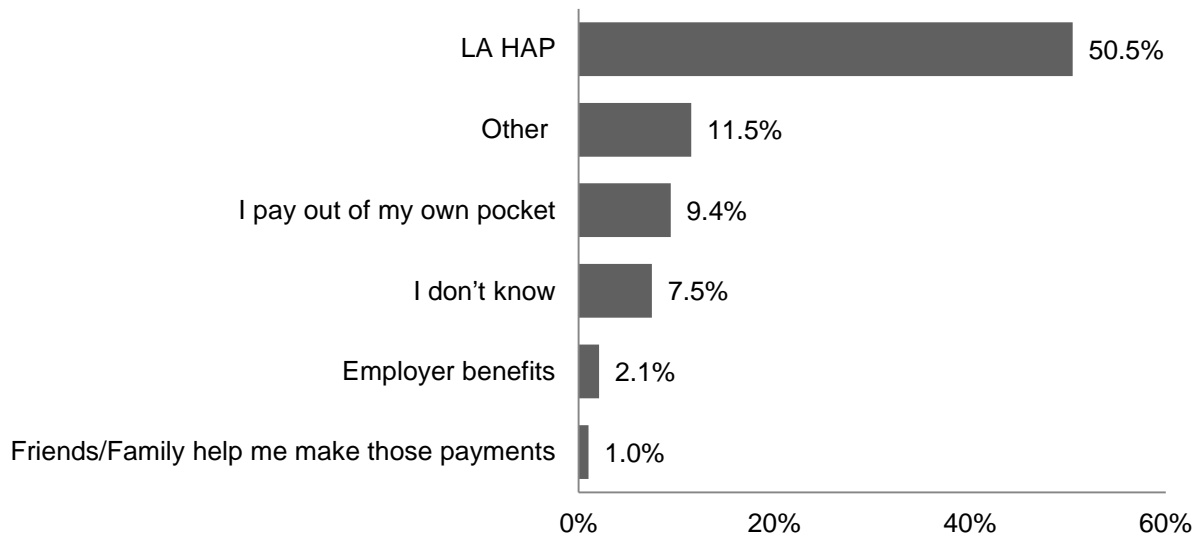
- Excluded from this calculation are 853 individuals who responded that they are not on a Marketplace plan. Five respondents were excluded from calculations because they indicated that they did not have a Marketplace plan and reported at least one way that they enrolled in a Marketplace plan. These respondents reported the following ways of enrolling into a Marketplace plan: *case manager* (2 respondents), *other* (2 respondents), *certified counselor* (1 respondent), *Enroll Louisiana* (1 respondent).
- Since respondents were permitted to select more than one category or not answer the question at all, the sum of all categories may not meet or may exceed 100%. Out of the 627 respondents who reported at least one way that they enrolled in a Marketplace plan, 39 (6.2%) reported having two or more ways that they enrolled in a Marketplace plan.

Figure B4a. NO EMA and BR TGA: Receives Help with Insurance Premiums (n=906)



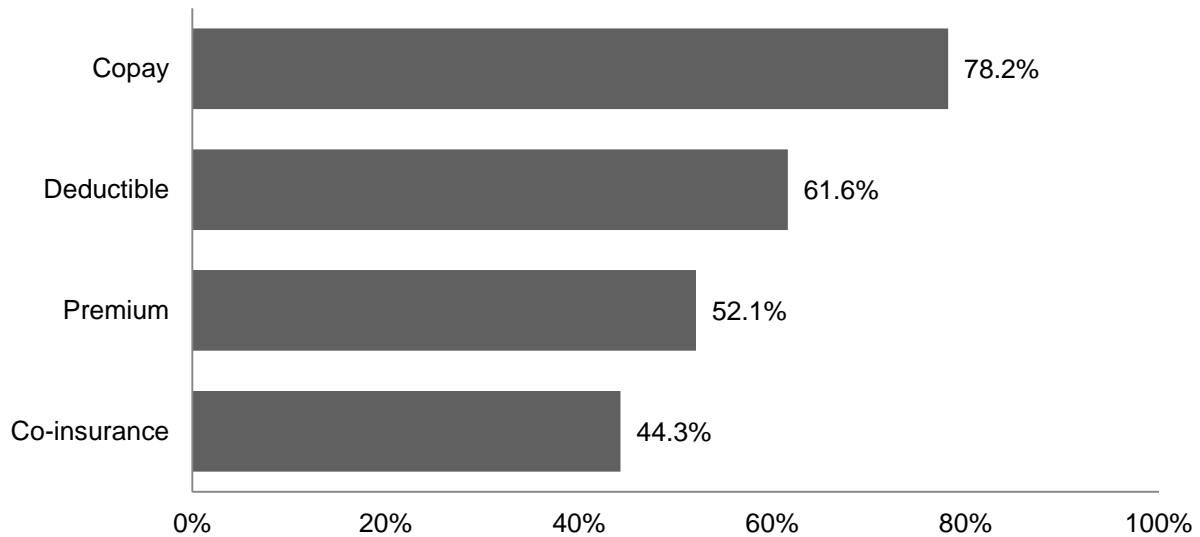
- We are not able to report all regions together due to differences in the questions and response options that appear in the instruments for the NO EMA and BR TGA compared to the instrument for Regions III through IX.
- Since respondents were permitted to select more than one category or not answer the question at all, the sum of all categories may not meet or may exceed 100%. Out of the 906 respondents who reported one type of health insurance coverage, 12 (1.3%) reported having two or more sources of help with insurance premiums.

Figure B4b. Regions III through IX: Receives Help with Insurance Premiums (n=626)



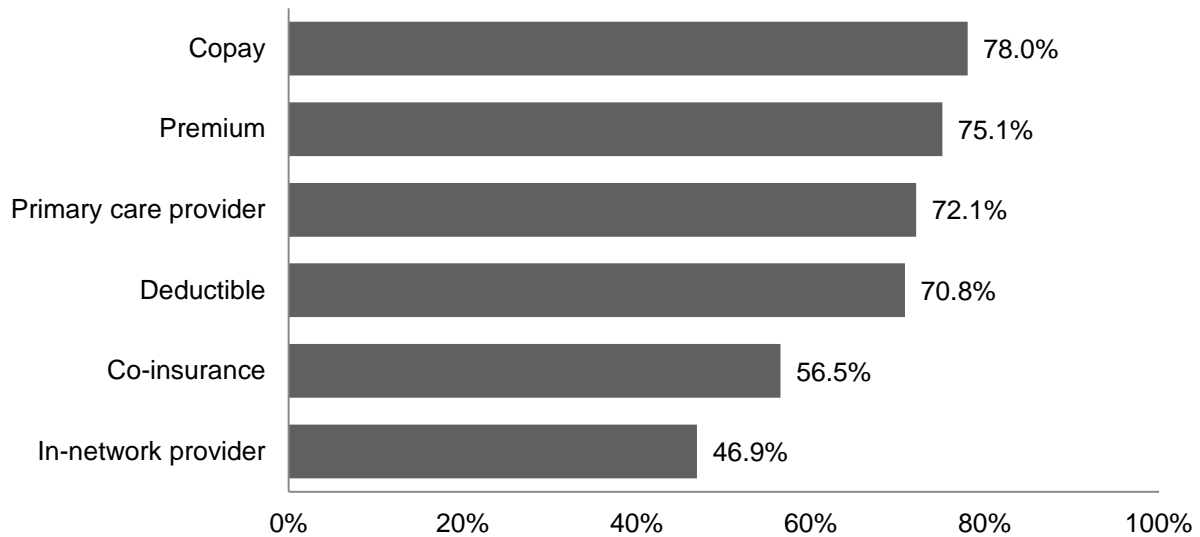
- We are not able to report all regions together due to differences in the questions and response options that appear in the instruments for the NO EMA and BR TGA compared to the instrument for Regions III through IX.
- Since respondents were permitted to select more than one category or not answer the question at all, the sum of all categories may not meet or may exceed 100%. Out of the 496 respondents who reported at least one source of help with insurance premiums, 20 (4.0%) reported having two or more sources of help with insurance premiums.
- In addition to what is reported in this figure, 20.8% of individuals chose the response option *not applicable, I don't have health insurance that covers my HIV-related medical care and medications*. Also, 0.6% of individuals reported receiving tax subsidies to help with insurance premiums.
- Excluded from calculations are 3 individuals who indicated that they don't have health insurance that covers HIV-related medical care and reported receiving help with paying premiums from LA HAP.

Figure B5a. NO EMA and BR TGA: Percent of Respondents Who Report Understanding Common Insurance Terms (n=909)



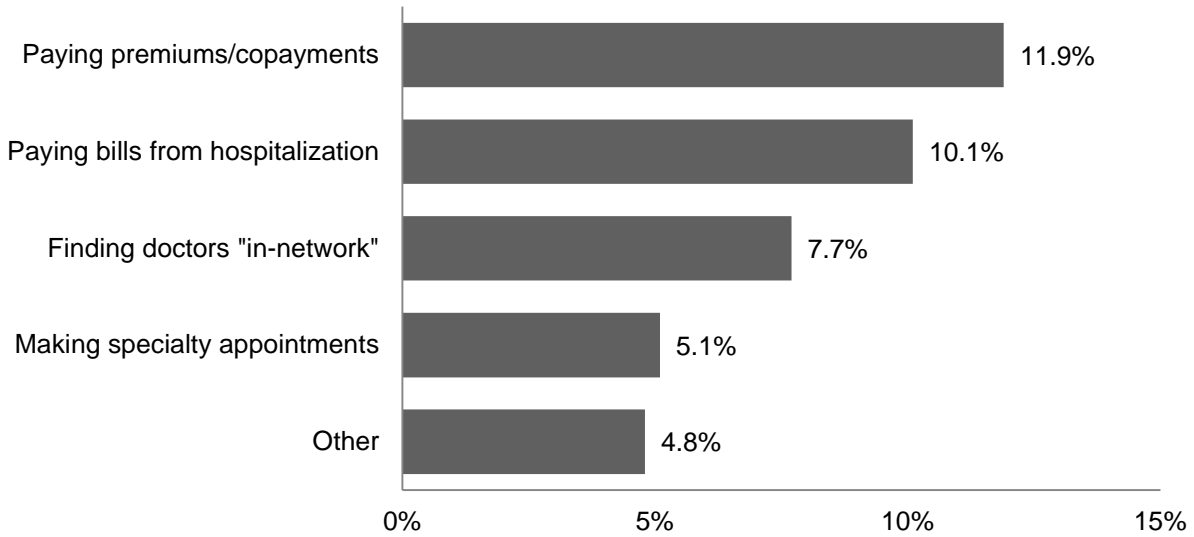
- We are not able to report all regions together due to differences in the questions and response options that appear in the instruments for the NO EMA and BR TGA compared to the instrument for Regions III through IX.
- In addition to what is reported here, 15.7% of respondents indicated that they understood *none of these* terms.
- Since respondents were permitted to select more than one category or not answer the question at all, the sum of all categories may not meet or may exceed 100%. Out of the 766 respondents who indicated they understood at least one of these terms, 616 (80.4 %) reported understanding two or more of these insurance terms.
- Excluded from calculations are 13 respondents who indicated that they understood all of these terms, but also indicated that they understood *none of these* terms.

Figure B5b. Regions III through IX: Percent of Respondents Who Report Understanding Common Insurance Terms (n=623)



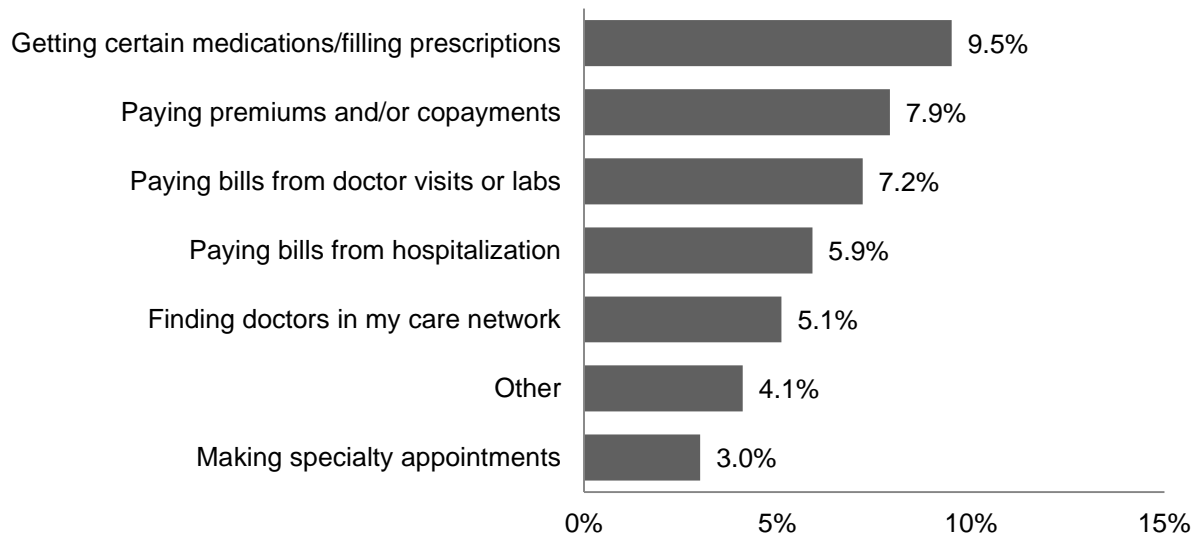
- We are not able to report all regions together due to differences in the questions and response options that appear in the instruments for the NO EMA and BR TGA compared to the instrument for Regions III through IX.
- In addition to what is reported here, 8.5% of respondents indicated that they understood *none of these* terms.
- Since respondents were permitted to select more than one category or not answer the question at all, the sum of all categories may not meet or may exceed 100%. Out of the 570 respondents who indicated they understood at least one of these terms, 484 (84.9 %) reported understanding two or more of these insurance terms.
- Excluded from calculations are 24 respondents who indicated that they understood at least one of these terms, but also indicated that they understood *none of these* terms. The terms these respondents reported understanding included: *co-insurance* (24 respondents), *in-network provider* (23 respondents), *deductible* (23 respondents), *primary care provider* (23 respondents), *premium* (23 respondents), and *copay* (23 respondents).

Figure B6a. NO EMA and BR TGA: Problems Encountered with Health Insurance (n=918)



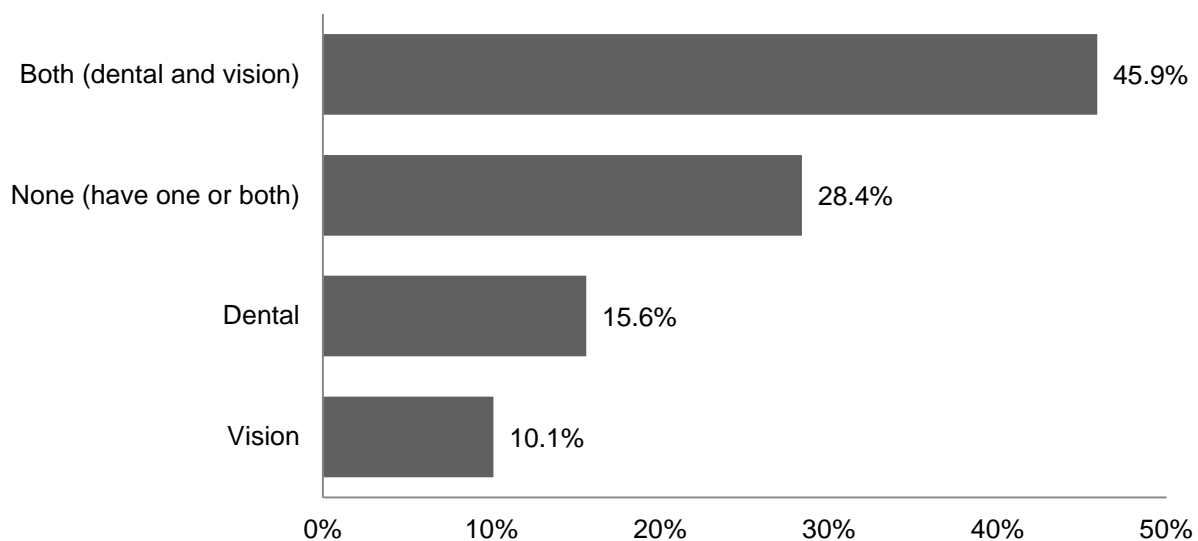
- We are not able to report all regions together due to differences in the questions and response options that appear in the instruments for the NO EMA and BR TGA compared to the instrument for Regions III through IX.
- In addition to what is reported here, 70.0% of respondents indicated that they encountered *none* of these problems.
- Since respondents were permitted to select more than one category or not answer the question at all, the sum of all categories may not meet or may exceed 100%. Out of the 275 respondents who reported encountering at least one problem with health insurance, 62 (22.5%) reported two or more problems.
- Excluded from calculations is one respondent who indicated that he/she encountered no problems with health insurance, but also indicated that he/she had trouble finding doctors in his/her network.

Figure B6b. Regions III through IX: Problems Encountered with Health Insurance (n=609)



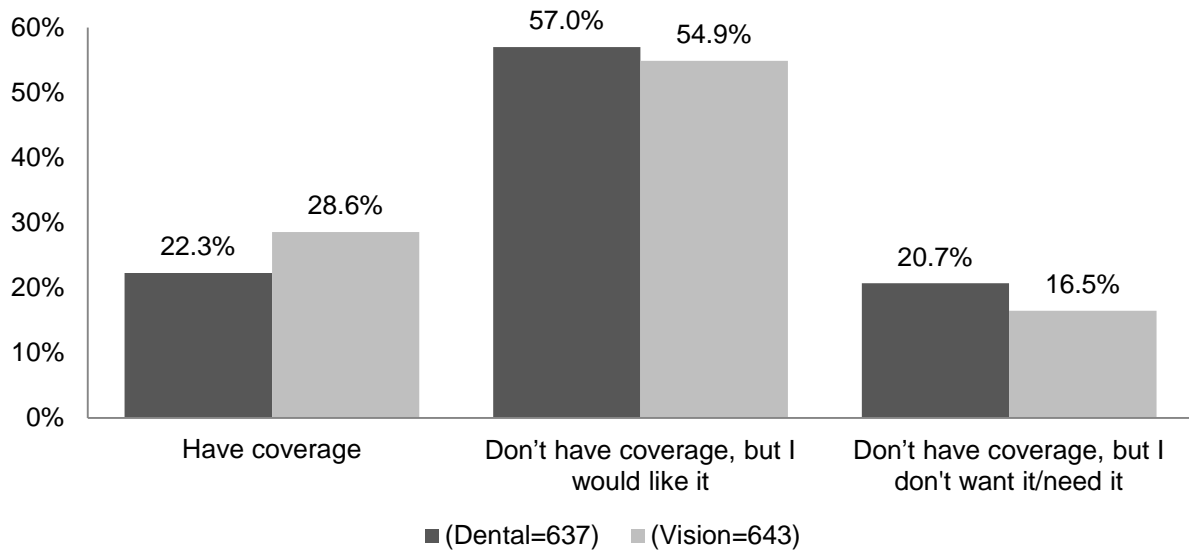
- We are not able to report all regions together due to differences in the questions and response options that appear in the instruments for the NO EMA and BR TGA compared to the instrument for Regions III through IX.
- In addition to what is reported here, 74.9% of respondents chose the response *not applicable, I have not experienced any problems with health insurance*.
- Since respondents were permitted to select more than one category or not answer the question at all, the sum of all categories may not meet or may exceed 100%. Out of the 153 respondents who reported encountering at least one problem with health insurance, 56 (36.6%) reported two or more problems.
- Excluded from calculations are three respondents who indicated that they encountered no problems with health insurance, but also indicated that they experienced at least one problem with health insurance. The problems these respondents reported experiencing are: *getting certain medications/filling prescriptions* (1 respondent), *paying premiums and/or copayments* (1 respondent), *paying bills from doctor visits or labs* (1 respondents), *paying bills from hospitalizations* (1 respondent), *finding doctors in my care network* (1 respondent), and *making specialty appointments* (1 respondents).

Figure B7a. NO EMA and BR TGA: Other Coverage Needed (n=915)



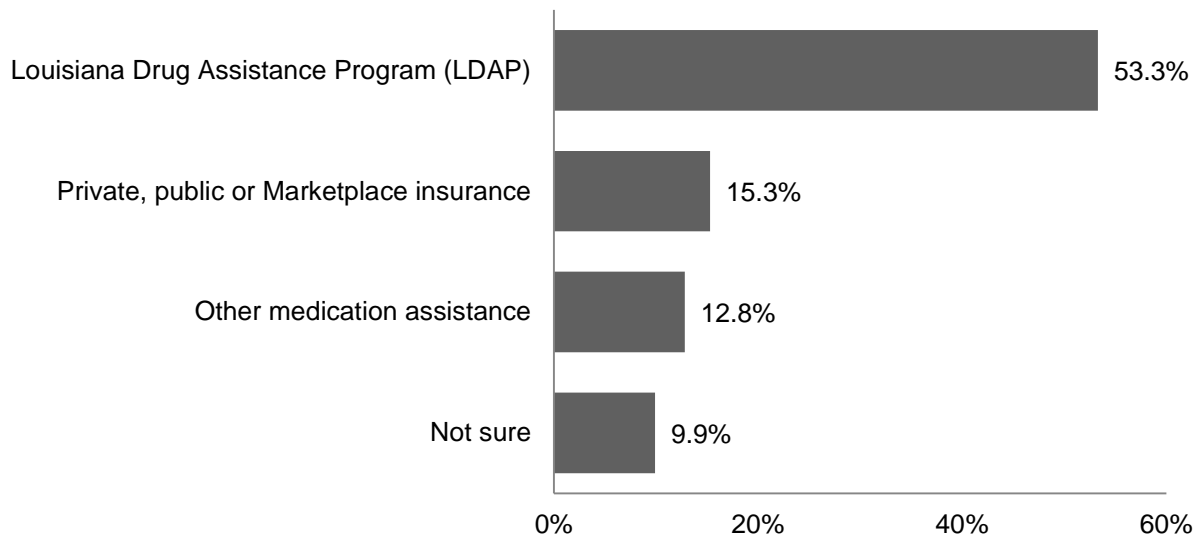
- We are not able to report all regions together due to differences in the questions and response options that appear in the instruments for the NO EMA and BR TGA compared to the instrument for Regions III through IX.

Figure B7b. Regions III through IX: Other Coverage Needed



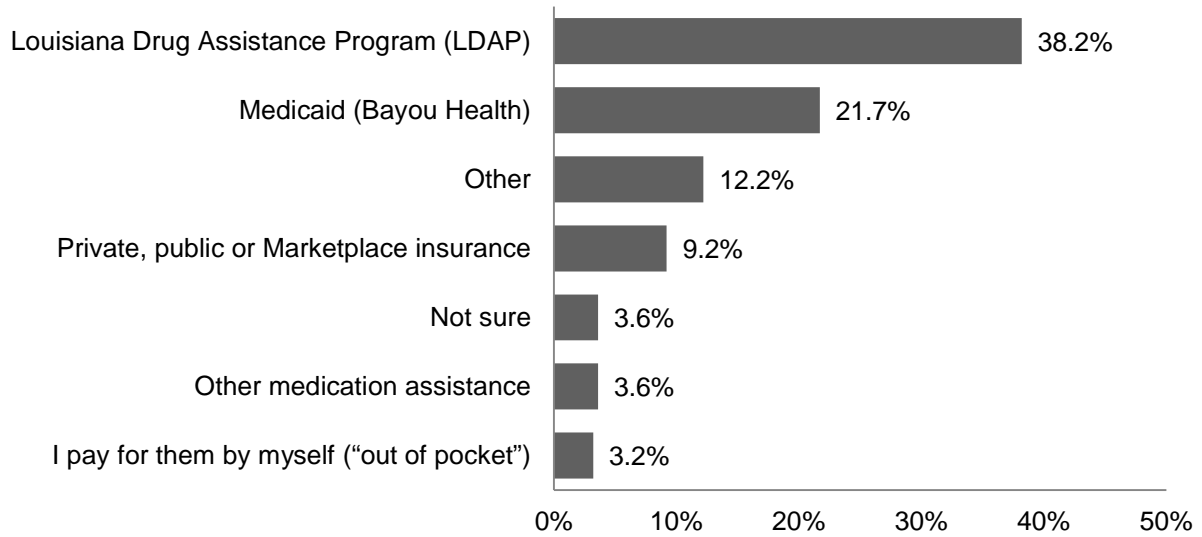
- We are not able to report all regions together due to differences in the questions and response options that appear in the instruments for the NO EMA and BR TGA compared to the instrument for Regions III through IX.

Figure B8a. NO EMA and BR TGA: Method of Payment for Medications (n=861)



- We are not able to report all regions together due to differences in the questions and response options that appear in the instruments for the NO EMA and BR TGA compared to the instrument for Regions III through IX.
- In addition to what is presented here, 8.7% of respondents indicated the question *does not apply*.

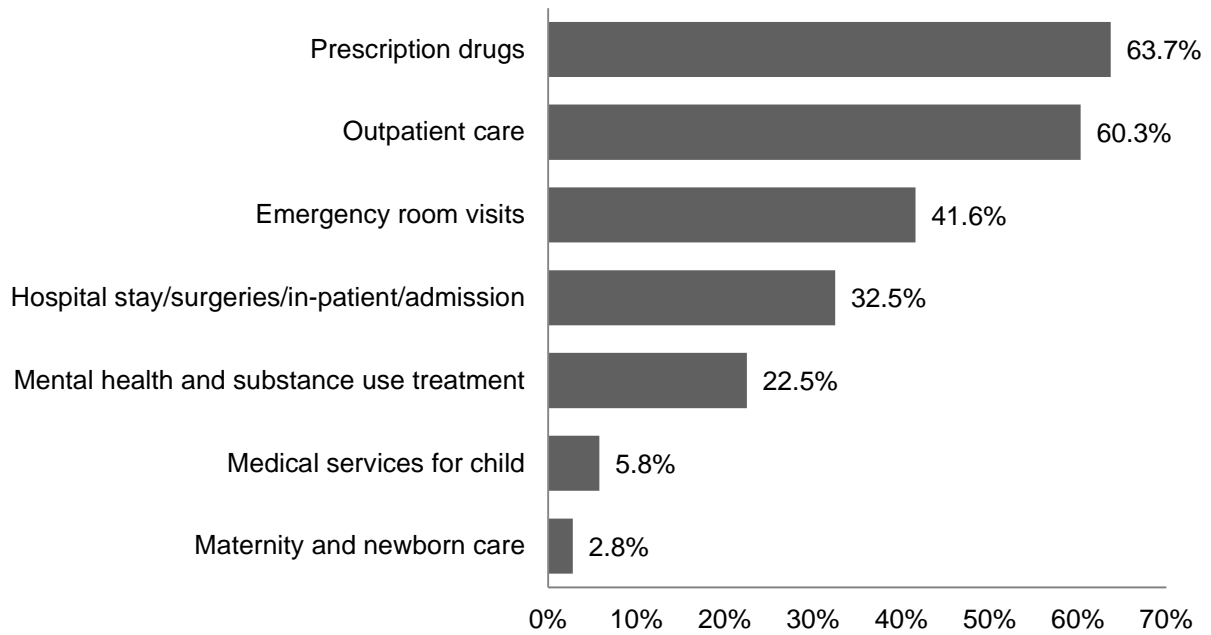
Figure B8b. Regions III through IX: Method of Payment for Medications (n=557)



- We are not able to report all regions together due to differences in the questions and response options that appear in the instruments for the NO EMA and BR TGA compared to the instrument for Regions III through IX. *Not applicable, I have not been prescribed any medications, Medicaid (Bayou Health), I pay for them by myself ("out of pocket"), and other* are only response options in the Regions III through IX instrument.
- In addition to what is presented here, 8.3% of respondents chose the response *not applicable, I have not been prescribed any medications.*

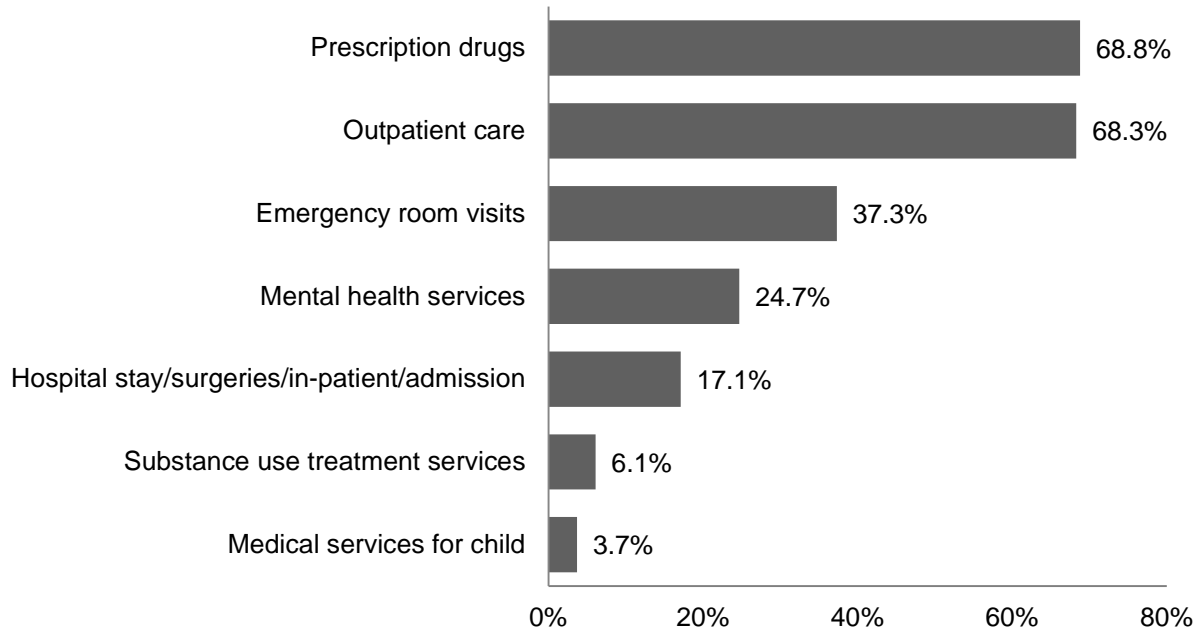
Medical Services

Figure B9a. NO EMA and BR TGA: Non-HIV Related Medical Services Needed (n=721)



- We are not able to report all regions together due to differences in the questions and response options that appear in the instruments for the NO EMA and BR TGA compared to the instrument for Regions III through IX.
- Since respondents were permitted to select more than one category or not answer the question at all, the sum of all categories may not meet or may exceed 100%. Out of the 721 respondents who indicated they needed at least one of the listed services for non-HIV-related reasons, 410 (56.9%) reported that they needed two or more of these services.

Figure B9b. Regions III through IX: Medical Services Needed (n=644)

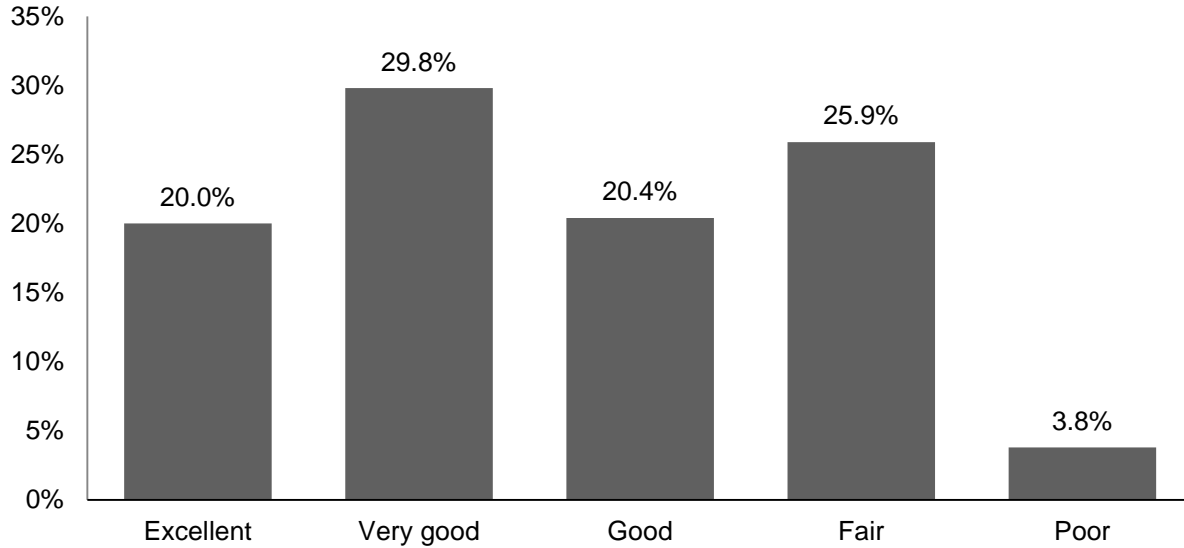


- We are not able to report all regions together due to differences in the questions and response options that appear in the instruments for the NO EMA and BR TGA compared to the instrument for Regions III through IX.
- In addition to what is reported here, 0.9% of respondents selected *maternity and newborn care*, and 14.9% selected that they did not need any of these services.
- Since respondents were permitted to select more than one category or not answer the question at all, the sum of all categories may not meet or may exceed 100%. Out of the 548 respondents who indicated they needed at least one of the listed services for non-HIV-related reasons, 436 (79.6%) reported that they needed two or more of these services.

C. Health and Health Behaviors

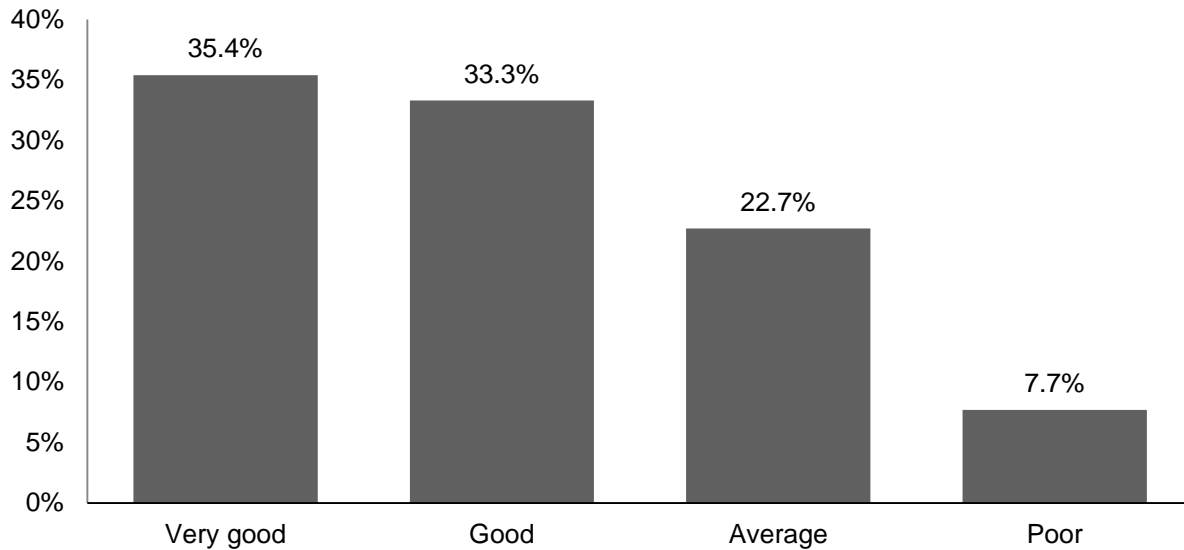
Overall Health

Figure C1a. NO EMA and BR TGA: Self-Reported Overall Health Status (n=939)



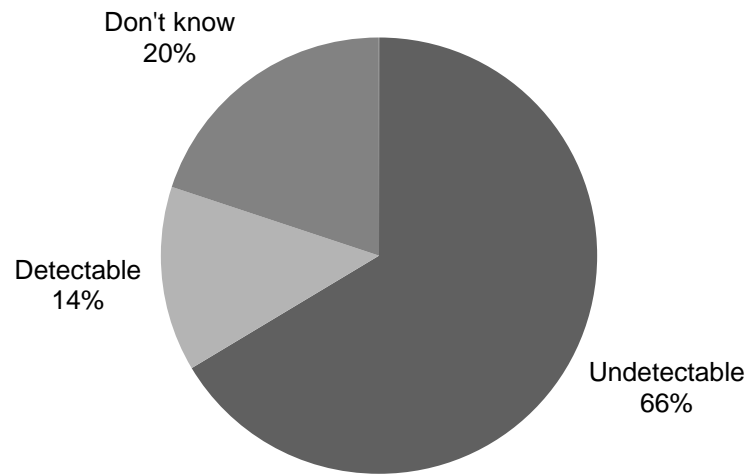
- We are not able to report all regions together due to differences in the questions and response options that appear in the instruments for the NO EMA and BR TGA compared to the instrument for Regions III through IX.

Figure C1b. Regions III through IX: Self-Reported Overall Health Status (n=652)



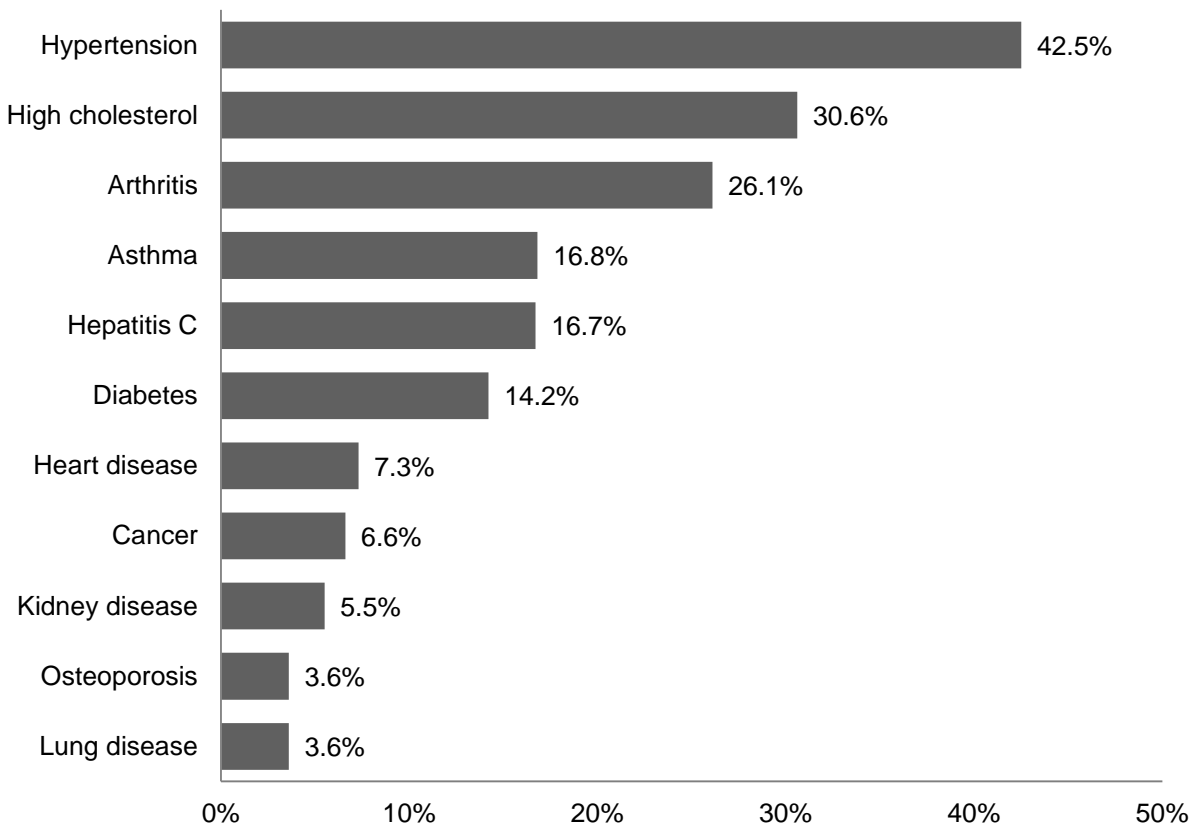
- We are not able to report all regions together due to differences in the questions and response options that appear in the instruments for the NO EMA and BR TGA compared to the instrument for Regions III through IX.
- In addition to what is reported here, 0.9% of respondents reported that their overall health status was *very poor*.

Figure C2. Current Viral Load (n=1522)



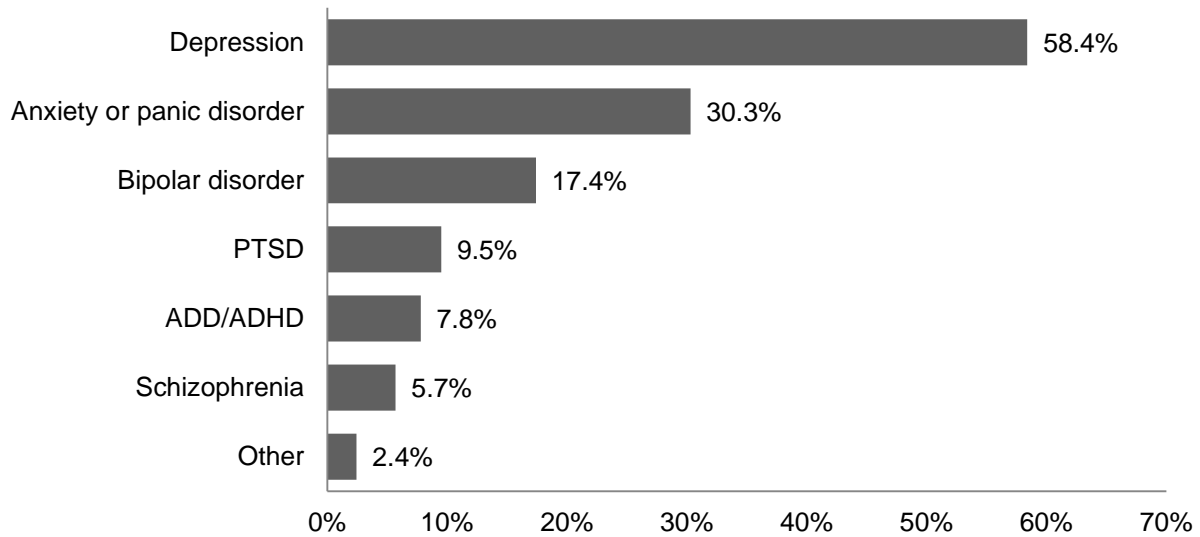
- The response option *Undetectable* includes the range “below 200 copies/mL” in the BR TGA instrument, but this range is not included in the NO EMA or Regions III through IX instruments.

Figure C3. Medical Diagnoses (n=1378)



- These questions are formatted differently with more detailed questions in the Regions III through IX instrument than in the NO EMA and BR TGA instruments. In Regions III through IX, 5.0% of respondents reported having a *Neurocognitive (memory loss, difficulty moving body parts)* diagnosis and 1.9% of respondents reported having *Tuberculosis*. These diagnoses were not response options in the NO EMA and BR TGA instruments. Also, the instrument used in the NO EMA and BR TGA did not include *other* options; Regions III through IX had three *other* options. Seven percent of respondents from Regions III through IX chose at least one *other* response.
- In the NO EMA and BR TGA, 35.1% of respondents indicated they have *none* of the listed diagnoses.
- Since respondents were permitted to select more than one category or not answer the question at all, the sum of all categories may not meet or may exceed 100%. Out of the 1056 respondents who indicated they have at least one of these diagnoses, 688 (65.2%) reported two or more medical diagnoses.
- Excluded from analysis are five respondents from the NO EMA and BR TGA who indicated that they had at least one diagnosis and indicated that he/she had *none* of the listed diagnoses. The diagnoses these respondents reported included: *arthritis* (2 respondents), *asthma* (1 respondent), *tuberculosis* (1 respondent), and *hepatitis C* (1 respondent).

Figure C4. Mental Health Diagnoses (n=1268)



- Abbreviations: PTSD = Post-Traumatic Stress Disorder; ADD/ADHD= Attention Deficit Disorder/ Attention Deficit Hyperactivity Disorder
- These questions are formatted differently with more detailed questions in the Regions III through IX instrument than in the NO EMA and BR TGA instruments. NO EMA and BR TGA instruments only have one *other* response option, and Regions III through IX has three *other* options. Since respondents from Regions III through IX only selected one *other* response, the *other* category in this figure is calculated using the number of respondents who selected *other* from Regions III through IX and from NO EMA and BR TGA.
- In the NO EMA and BR TGA, 44.2% of respondents indicated they have *none* of the listed diagnoses. Excluded from this calculation are two respondents who indicated that they had at least one diagnosis in addition to reporting *none* of the listed diagnoses. The diagnoses these respondents reported having include: *bipolar disorder* (2 respondents), *depression* (1 respondent), *anxiety or panic disorder* (1 respondent), and *schizophrenia* (1 respondent).
- Since respondents were permitted to select more than one category or not answer the question at all, the sum of all categories may not meet or may exceed 100%. Out of the 863 respondents who indicated they have at least one of these diagnoses, 451 (52.3%) reported two or more mental health diagnoses.

Figure C5. Self-Reported Depressive Symptoms Over the Last Two Weeks

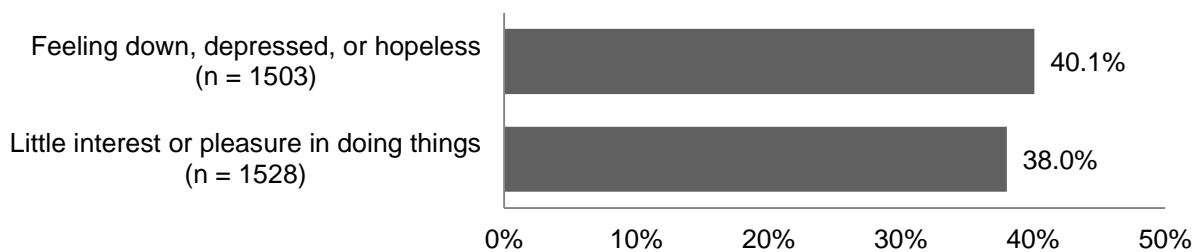
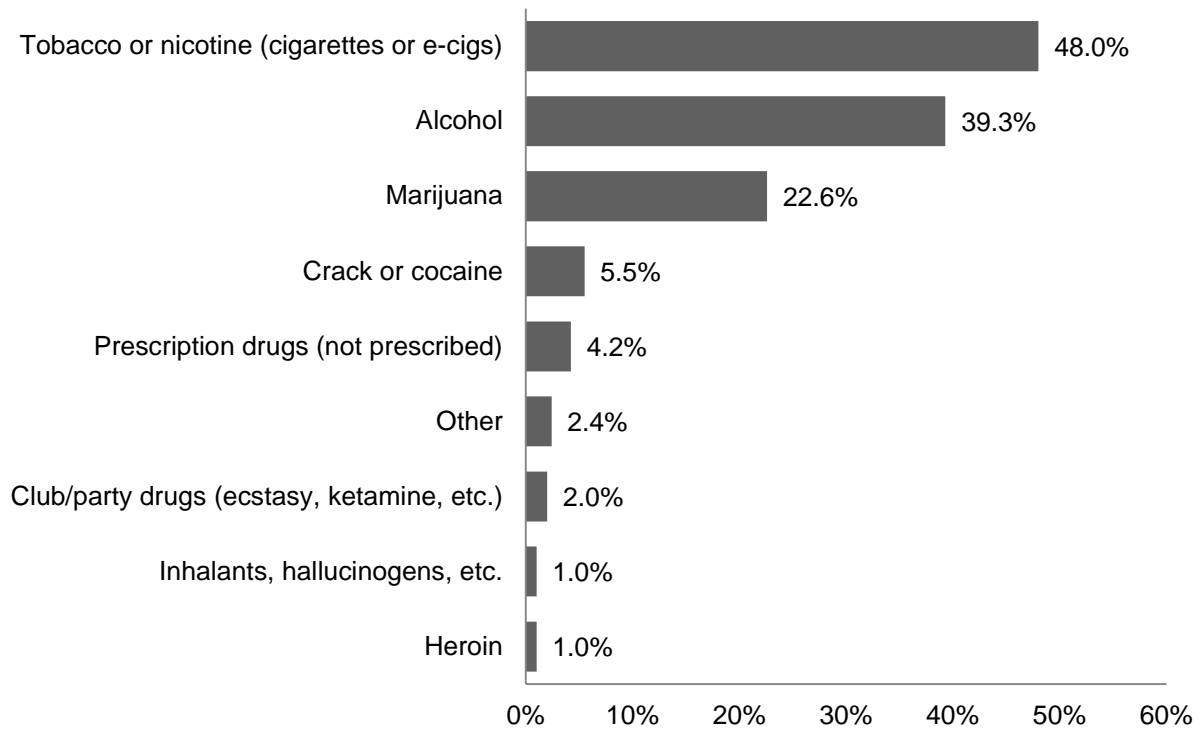


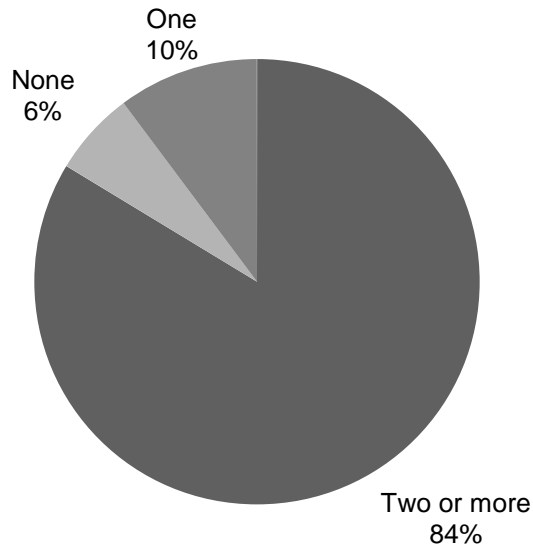
Figure C6. Self-Reported Substance Use in the Past 12 Months (n=1563)



- *Meth* is only a response option in the instrument from Regions III through IX; 2.3% of respondents from Regions III through IX reported using *meth*.
- In addition to what is reported here, 34.9% of respondents indicated they used *none* of the listed substances.
- Since respondents were permitted to select more than one category or not answer the question at all, the sum of all categories may not meet or may exceed 100%. Out of the 1018 respondents who indicated they used at least one of these substances, 571 (56.1%) reported using two or more substances.
- Excluded from calculations are five respondents who indicated using at least one substance and indicated using *none* of the listed substances. The substances these respondents reported using included: *tobacco or nicotine* (3 respondents), *prescription drugs* (1 respondent), and *other* (1 respondent).

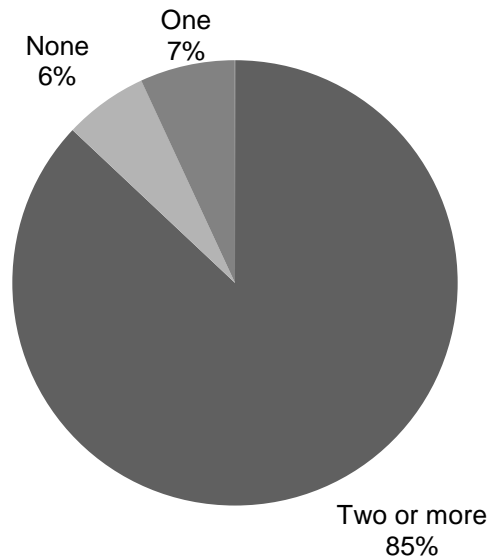
Health Seeking Behavior

Figure C7a. NO EMA and BR TGA: HIV-Specific Primary Medical Care Visits in Past Year (n=928)



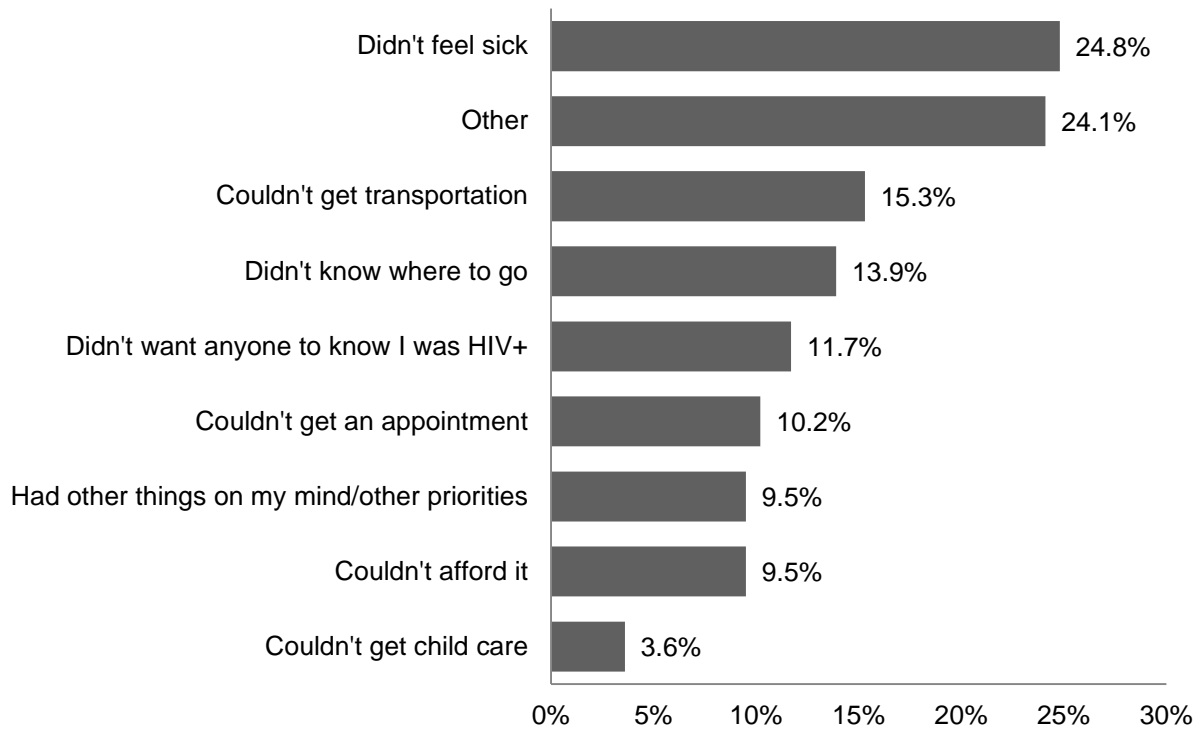
- We are not able to report all regions together due to differences in the questions and response options that appear in the instruments for the NO EMA and BR TGA compared to the instrument for Regions III through IX.

Figure C7b. Regions III through IX: Medical Care Visits with Primary Provider in Past Year (n=645)



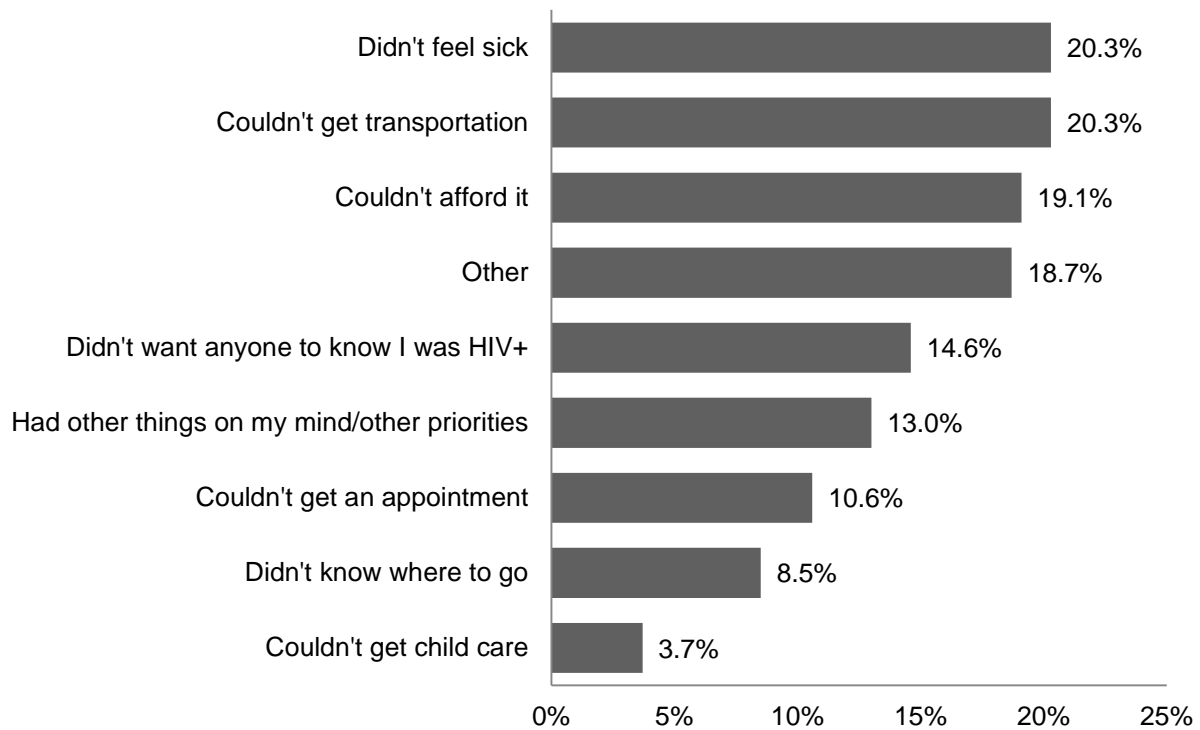
- We are not able to report all regions together due to differences in the questions and response options that appear in the instruments for the NO EMA and BR TGA compared to the instrument for Regions III through IX.
- In addition to what is reported in this figure, 2.9% of respondents chose the response *not applicable, I don't have a primary care provider*.

Figure C8a. NO EMA and BR TGA: Reasons for Not Having an HIV-Related Primary Care Visit in the Last Year (n=137)



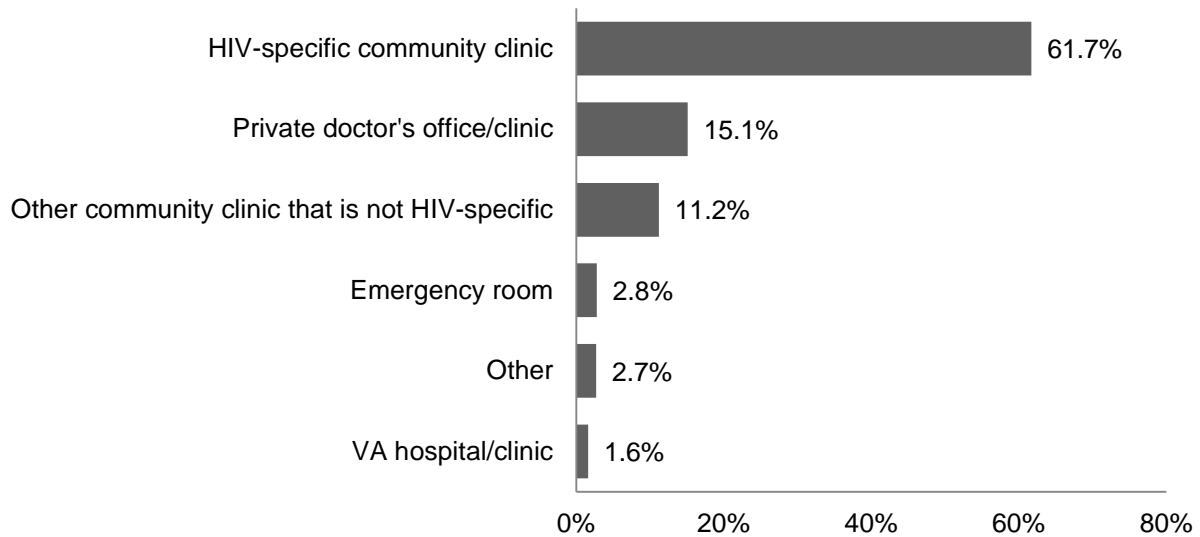
- We are not able to report all regions together due to differences in the questions and response options that appear in the instruments for the NO EMA and BR TGA compared to the instrument for Regions III through IX.
- Excluded from this calculation are 727 individuals who responded that they had a HIV-related primary care visit in the last year.
- Since respondents were permitted to select more than one category or not answer the question at all, the sum of all categories may not meet or may exceed 100%. Out of the 137 respondents who indicated at least one reason for not having an HIV-related primary care visit in the last year, 15 (10.9%) reported two or more reasons.
- Respondents were able to identify reasons other than those given for not having an HIV-related primary care visit in the last year. Out of the 33 respondents who chose *other*, 19 provided written responses. None of the written-in responses for *other* were reported by more than one respondent.

Figure C8b. Regions III through IX: Reasons for Going without Medical Care (n=246)



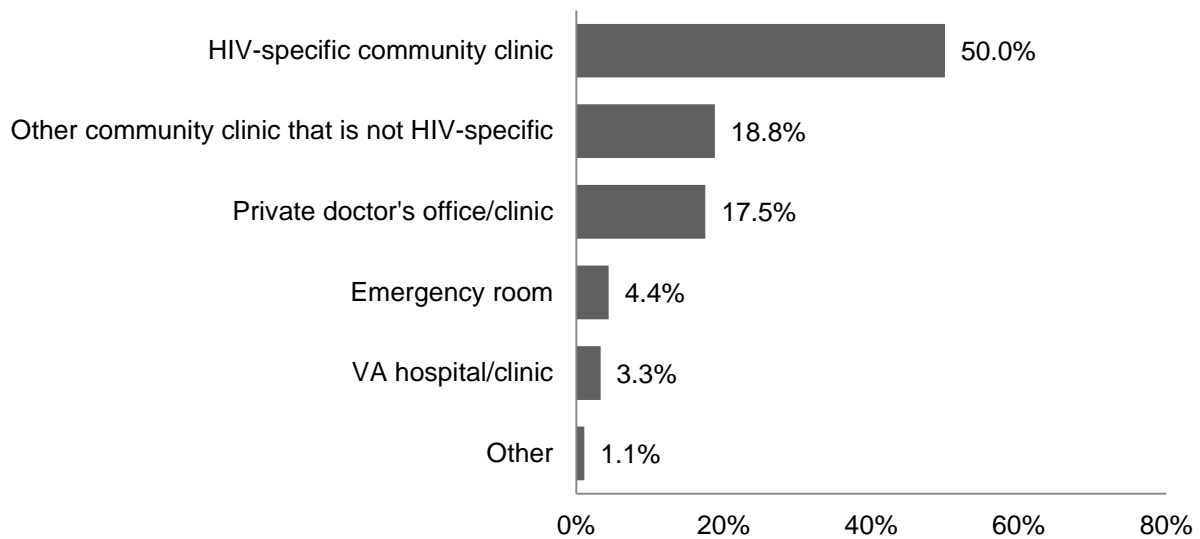
- We are not able to report all regions together due to differences in the questions and response options that appear in the instruments for the NO EMA and BR TGA compared to the instrument for Regions III through IX.
- Excluded from this calculation are 378 individuals who responded that they did not have to go without any needed medical care.
- Since respondents were permitted to select more than one category or not answer the question at all, the sum of all categories may not meet or may exceed 100%. Out of the 246 respondents who indicated at least one reason for going without medical care, 53 (21.5%) reported two or more reasons. Out of the 46 respondents who chose *other*, 38 provided written responses. None of the written-in responses for *other* were reported by more than one respondent.

Figure C9a. NO EMA and BR TGA: Places Where Respondent Regularly Receives HIV/AIDS-Related Medical Care (n=914)



- We are not able to report all regions together due to differences in the questions and response options that appear in the instruments for the NO EMA and BR TGA compared to the instrument for Regions III through IX.
- In addition to what is reported here, 44 respondents (4.8%) indicated they *don't receive any HIV-related medical care*.

Figure C9b. Regions III through IX: Places Where Respondent Regularly Receives HIV/AIDS-Related Medical Care (n=612)



- We are not able to report all regions together due to differences in the questions and response options that appear in the instruments for the NO EMA and BR TGA compared to the instrument for Regions III through IX.
- In addition to what is reported here, 30 respondents (4.9%) indicated that they *don't regularly receive medical care*.

HIV Medication and Medical Adherence

Figure C10. Currently Taking HIV Medications Prescribed by a Doctor (n=1575)

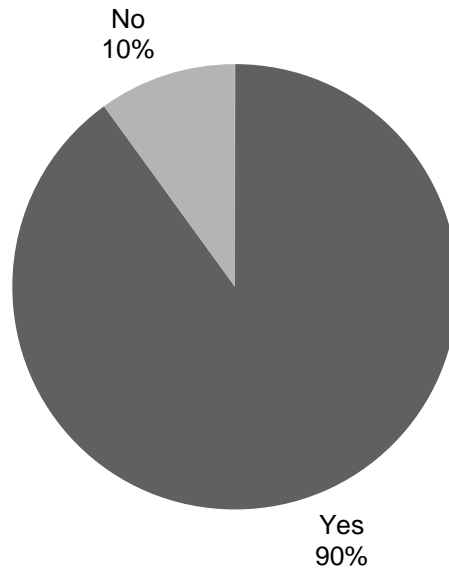
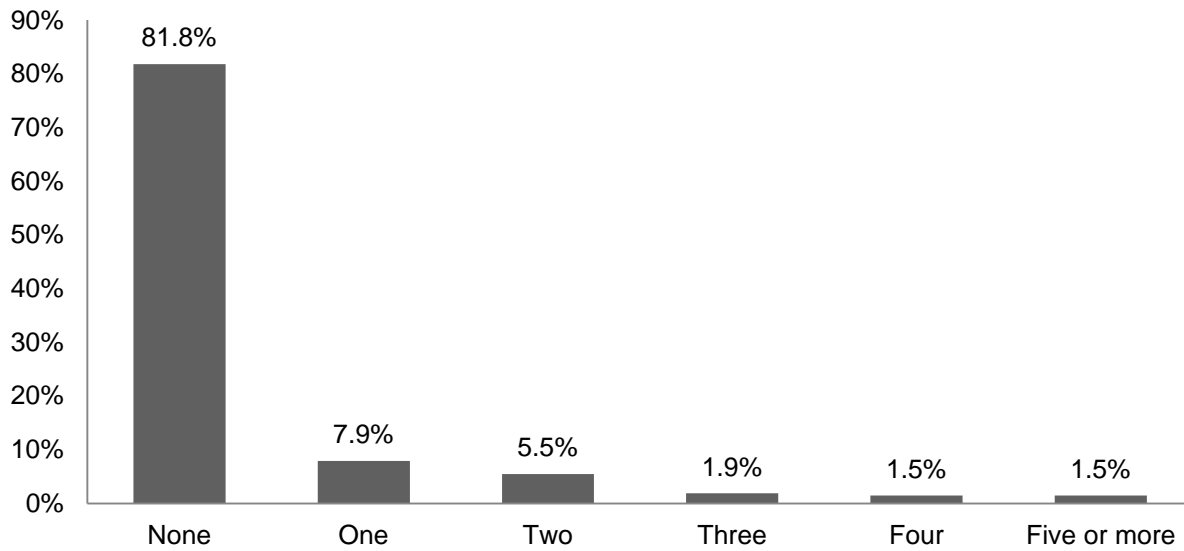
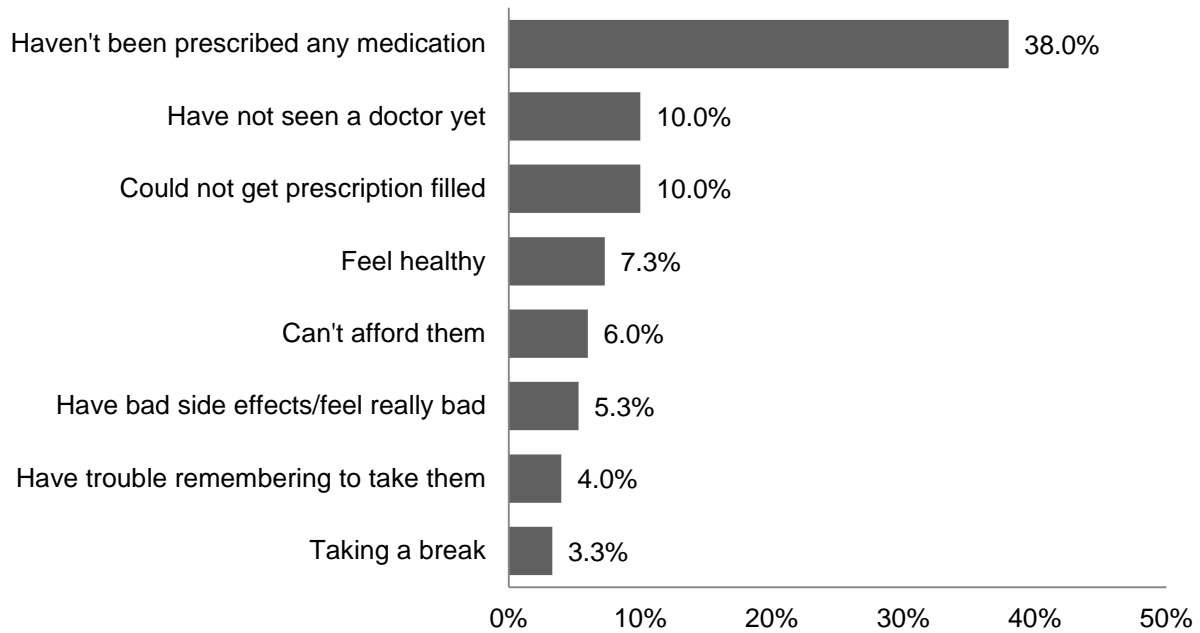


Figure C11. Number of Doses Missed in Last Three Days (n=823)



- *Not applicable, I am not currently taking any HIV medications* is not a response option in the instruments for the NO EMA and BR TGA. Of the 652 respondents from Regions III through IX who responded to this question, 10.4% chose this response option.

Figure C12. Reasons for Not Taking HIV/AIDS Medication (n=150)



- In addition to what is reported here, 26.7% of respondents indicated *N/A: I am taking HIV medications as prescribed*. Also, 8 respondents out of 40 respondents from the BR TGA who responded to this question chose the response option *need prescription refilled*. This response option did not appear in the instruments administered to the NO EMA and Regions III through IX. Finally, 12 out of the 110 respondents from the NO EMA and Regions III through IX chose the response option *other*. The *other* response option does not appear in the instrument administered in the BR TGA.
- Excluded from calculations is one respondent who indicated that he/she was taking his/her HIV medications as prescribed and also indicated that he/she had not been prescribed medication.
- Since respondents were permitted to select more than one category or not answer the question at all, the sum of all categories may not meet or may exceed 100%. Out of the 110 respondents who indicated at least one reason for not taking their HIV/AIDS medication, 24 (21.8%) reported two or more reasons.

Appendix A – Methods

To collect data for the *2015 Needs Assessment*, a convenience sample survey on the current care service needs of PLWH was conducted with consumers of HIV/AIDS services in the NO EMA, BR TGA and Regions III through IX. The survey was conducted at 18 agencies that provide HIV/AIDS-related medical care and services using a self-administered questionnaire. The survey instruments, data collection period, data collection methods, and incentives offered to clients varied between the NO EMA, BR TGA, and Regions III through IX.

Consumers from the NO EMA were eligible to take the survey over a 5½ week period, from March 9 to April 17, 2015. Survey administration was managed by the *New Orleans Regional AIDS Planning Council (NORAPC)*. As an incentive for their participation, consumers who participated in the survey were entered into a raffle to win one of five Kindle Fire HD tablets. Peer coordinators promoted the *2015 Needs Assessment* at their local agencies and in the community, assisted consumers in completing the questionnaire, and distributed and documented raffle tickets.

Consumers from the BR TGA were eligible to take the survey over a 7½ week period, from May 18, 2015 to July 10, 2015. Survey administration was managed by the *Baton Rouge Ryan White Program Office*. As incentives for their participation, consumers from the BR TGA who participated in the survey were entered into a raffle to win one of five \$100 Walmart gift cards. Peer coordinators promoted the *2015 Needs Assessment* at their local agencies and in the community, assisted consumers in completing the questionnaire, and distributed and documented raffle tickets.

Consumers from Regions III through IX were eligible to take the survey over an eight-week period, from June 1 to July 22, 2015. Survey administration was managed by the *OPH SHP*. As incentives for their participation, consumers from Regions III through IX were given a \$10 Subway gift card. Site representatives promoted the *2015 Needs Assessment* at their local agencies and in the community, assisted consumers in completing the questionnaire, and distributed and documented gift cards.

Below we describe the instrument, sample, and procedures used in this needs assessment.

Instrument

The *2015 Needs Assessment Questionnaire* comprised the following six sections: Health Insurance, Medical Care, HIV Medication, Housing, General Information, and Income. The Medical Care section in the questionnaires administered in the NO EMA and BR TGA specifically addressed HIV-specific primary medical care, while the questionnaire administered in Regions III through IX addressed overall medical care. Questions are mostly closed-ended and included multiple-selection, dichotomous, and select-all-that-apply response options. Some questions include an “other” category so that consumers can write in a unique response if the available categorical response options are not comprehensive. Each questionnaire is expected to take between 30 and 45 minutes to complete.

There are variations between the instruments administered to consumers in the NO EMA, BR TGA, and Regions III through IX.

The questionnaire administered to consumers in the NO EMA was created at *NORAPC* with feedback from *OPH SHP*, *City of New Orleans Office of Health Policy and AIDS Funding*, *Collaborative Solutions, Inc.*, and clients in the EMA. The questionnaire was available in both English and Spanish; the *Louisiana Latino Health Coalition (LLHC)* assisted in developing the Spanish translation. The instrument has a total of 40 primary questions, three sub-questions to account for skip patterns and questions not

applicable to certain individuals, and seven multiple-category questions with 45 total categories. Thus, the instrument contains 88 total questions within seven pages.

The questionnaire administered to consumers in the BR TGA was created by the *Baton Rouge Ryan White Program* in conjunction with the *OPH SHP* and the NO EMA. The instrument was only available in English. The instrument has a total of 35 primary questions, five sub-questions to account for skip patterns and questions not applicable to certain individuals, and 10 multiple-category questions with 54 total categories. Thus, the instrument contains 94 total questions within six pages.

The questionnaire administered to consumers in Regions III through IX was created by the *OPH SHP* in conjunction with the NO EMA and BR TGA. *Collaborative Solutions, Inc.* also provided input on questions related to housing issues. The instrument was only available in English. The instrument has a total of 28 primary questions, 15 sub-questions to account for skip patterns and questions not applicable to certain individuals, and six multiple-category questions with 41 total categories. Thus, the instrument contains 84 total questions within eight pages.

Sample

The Louisiana Public Health Regions (Figure A.1) and *Ryan White* funding structures were used to organize administration of the *2015 Needs Assessment*. In the NO EMA, *NORAPC* determined that the desired sample size would be 600 people, stratified by agency. The NO EMA includes all parishes in Region I (Orleans, St. Bernard, Plaquemines, and Jefferson), and several additional parishes from Region III (St. Charles, St. John the Baptist, and St. James) and Region IX (St. Tammany). In the BR TGA, the *Baton Rouge Ryan White Program Office* determined that the desired sample size would be 400 people, stratified by agency. The BR TGA includes all parishes in Region II (East Baton Rouge, West Baton Rouge, Pointe Coupee, West Feliciana, East Feliciana, and Iberville), one parish from Region III (Ascension), and two parishes from Region IX (Livingston and St. Helena). In Regions III through IX, *OPH SHP* determined that the desired sample size would be 675 people, stratified by region. Figure A.1 provides a map of these regions.

Figure A.1. Map of Louisiana Administrative Regions



The survey used convenience sampling, which means that the sample is not considered representative of all PLWH in Louisiana but, rather, a subset of that population that shares the characteristics – observed and unobserved – with those who were asked and responded to the questionnaire. Because the survey was additionally stratified by region, the resulting sample is weighted according to the proportions of the subsamples. Any PLWH who walked into any one of the participating agencies and was at least 13 years old during the administration period was eligible to complete the *2015 Needs Assessment Survey*.^{2, 3} The *Baton Rouge Ryan White Program Office, OPH SHP*, and *NORAPC* staff were in regular communication with each local agency during survey administration to ensure that the sampling size target was being met.

Partners

The *2015 Needs Assessment* was conducted with the cooperation of 18 agencies across the state. Partner agencies were responsible for distributing the questionnaires and raffle tickets or gift cards (depending on the incentive method being used at the agency) to consumers and tracking the distribution of incentives. A partner list is provided in Appendix B.

² The age for participation was determined by *OPH SHP* based on the minimum age to consent for HIV treatment.

³ In the *NO EMA*, the questionnaires were offered to consumers ages 18 years old and older, but one mother filled out surveys for her two children with HIV who were under the age of eighteen.

During the NO EMA survey administration period, peer coordinators were assigned to work in each partner agency. Their role was to manage administration of questionnaires and distribution of raffle tickets as well as to serve as the point of contact during data collection for *NORAPC*. Peer coordinators were selected based on responses to applications submitted. Preference was given to those with previous experience administering surveys as well as their ability to reach consumers. The peer coordinators' responsibilities included promoting the *2015 Needs Assessment* at their local agency and in the community, helping consumers complete the survey, collecting all surveys, and distributing and documenting raffle tickets.

During the BR TGA survey administration period, peer coordinators were assigned to work at each partner agency. Their role was to manage administration of questionnaires and distribution of raffle tickets as well as to serve as the point of contact during data collection for the *Baton Rouge Ryan White Program*. Peer coordinators were employees of each agency that routinely conducts Peer-Based Early Intervention Services. The peer coordinators' responsibilities included promoting the *2015 Needs Assessment* at their local agency and in the community, helping consumers complete the survey, collecting all surveys, distributing and documenting raffle tickets, and mailing completed questionnaires to PRG on a weekly basis.

During the Regions III through IX survey administration period, site representatives were designated at each partner agency to serve as the primary contacts for the *2015 Needs Assessment*; their role was to manage administration of questionnaires and distribution of gift cards. The site representatives' responsibilities included promoting the *2015 Needs Assessment* at their local agency and in the community, helping consumers complete the survey, collecting all surveys, distributing and documenting raffle tickets or gift cards, and mailing completed questionnaires to PRG on a weekly basis.

Training

Staff from the *OPH SHP* provided training for all participating agencies during a statewide conference call held on May 20, 2015. The training covered survey administration, an overview of the questionnaire, management of incentives, and logistics.

Administration

For the NO EMA, all of the materials necessary to begin collecting data, including questionnaires and raffle tickets, were provided by *NORAPC* to the partner agencies. For the BR TGA, all of these materials were provided by *Baton Rouge Ryan White Program* to the partner agencies. For Regions III through IX, *OPH SHP* provided data collection materials, including questionnaires and incentives, to the participating agencies. Data were collected from March 9 to April 17, 2015 in the NO EMA, from May 18, 2015 to July 10, 2015 in the BR TGA, and from June 1 to July 22, 2015 in Regions III through IX. Each agency had a target for the number of questionnaires it aimed to administer to consumers. Agencies were provided with the specific number of questionnaires needed to reach their target.

During data collection in all regions, each consumer who visited a participating agency was offered the chance to take the *2015 Needs Assessment Survey*. Site representatives and peer coordinators were involved in recruiting participants for the survey. Participation was completely voluntary, and consumers had to verbally consent to participate in the survey. Each consumer who agreed to participate was given survey materials, including the paper version of the questionnaire, instructions, a clipboard, and a pen. The instruction sheet explained the purpose of the *2015 Needs Assessment*, how long it would take to complete the questionnaire, that participation was completely voluntary, details about the raffle or gift card (depending on the region of administration), and a reminder that consumers could only complete one questionnaire.

The questionnaire was completed by clients within the designated sites. Consumers were assured that the survey was completely confidential and anonymous, that their responses would not be used to identify them, and that the information collected would be used only for planning purposes. Consumers were also instructed not to write any identifying information on the questionnaire itself. Peer coordinators (in the NO EMA and BR TGA) and site representatives (in Regions III through IX) were available to assist consumers as needed.

When the consumer completed the questionnaire, he/she either (1) folded up the finished questionnaire and placed it in a locked survey drop box, or (2) sealed the questionnaire in an envelope and gave it to the site representative at the agency who was the primary contact for the *2015 Needs Assessment*. As a gesture of appreciation for their time and participation, consumers from the NO EMA received raffle tickets for entry into a drawing for one of five Kindle Fire HD tablets; consumers from the BR TGA received raffle tickets for entry into a drawing for one of five \$100 Walmart gift cards; and consumers in Regions III through IX received \$10 Subway gift cards.

For the NO EMA, completed questionnaires were kept in a secure place and delivered to *NORAPC* by the peer coordinators on a regular basis during the data collection period. In May 2015, *NORAPC* delivered all completed questionnaires to PRG. For the BR TGA and Regions III through IX, peer coordinators and site representatives kept completed questionnaires in a secure place and mailed them to PRG on a weekly basis during the data collection period.

Data Entry and Cleaning

Data entry began as soon as the questionnaires were received by PRG. Questionnaires were counted, marked with a unique ID number, and grouped into stacks of 50. Each group of questionnaires was entered into an online *Remark Web Survey* data form that was created by PRG. Once a stack of 50 questionnaires was entered, 10% of the questionnaires from the stack were randomly chosen, and responses on the paper instruments were compared with the corresponding data in the data set. If any errors were found in the first 10% data check, a subsequent 10% data check was completed. This process continued until no errors were found in a 10% data check, or all 50 questionnaires in a stack were checked. This was done to ensure data entry accuracy. Once all questionnaires were entered and cleaned, they were converted to Stata 12.1.

Data Preparation

Responses to all questions were tabulated, and corresponding figures and tables were created to depict distribution of responses. The total number of people who responded to each question (“*n*”) was reported for each figure. However, the reported “*n*” varies throughout the report. Some respondents chose not to answer certain questions. Furthermore, respondents were excluded from analyses if (1) they did not provide an answer to a particular question, (2) they provided multiple responses to a question in which only one response was permitted, (3) they did not belong to the subpopulation of respondents to which the question pertained, or (4) they provided conflicting information (e.g., indicated they had not used drugs and also named drugs they had used).

As previously mentioned, some questions allowed respondents to provide “other” responses if they felt that their situation was not represented by the given answers. PRG reviewed responses to all questions with an “other” category. For each particular question, if over 20% of respondents selected the “other” category, we report any response written in by more than one respondent below the appropriate figure. The responses are presented from most common to least common. It should be noted that not all persons who responded “other” provided written-in responses.

For pie charts and bar charts, if the response percentage to a category was less than one percent, the category was still retained in the calculation, but it was either omitted from the figure or included in the “other” category percentage. In all of these cases, a note was included below the appropriate figure describing the distribution. For all questions, any category with zero responses was omitted from figures and was noted below the figure.

Appendix B – List of Partners

New Orleans Eligible Metropolitan Area:

Crescent Care including NO/AIDS Task Force and the Family Advocacy, Care & Education Services Program of Children’s Hospital (FACES)
HIV Outpatient Program at the Interim LSU Hospital
Priority Health Care, Inc.
Southeast Louisiana Area Health Education Center

Region II:

Capitol City Family Health Center
Early Intervention Clinic at Our Lady of the Lake
Family Services of Greater Baton Rouge
HIV Alliance for Region II (HAART)
NOAIDS Taskforce
Volunteers of America Greater Baton Rouge

Region III:

Exchange Support Services

Region IV:

Acadiana Cares

Region V:

Southwest Louisiana AIDS Council (SLAC)

Region VI:

Central Louisiana AIDS Support Services (CLASS)

Region VII:

The Philadelphia Center

Region VIII:

Greater Ouachita Coalition Providing AIDS Resources and Education (GO CARE)

Region IX:

Volunteers of America IX

Appendix C – Survey Instruments