

HOUSTON-AREA RYAN WHITE PROGRAM

2005 Integrated Epidemiological Profile for HIV/AIDS Prevention and Care Planning




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SOCIODEMOGRAPHIC DATA

The Houston-Area EMA is comprised of six counties and the HSDA includes these six plus four others. The population center of the region is Harris County, with over 80% of the EMA population and nearly 79% of the HSDA population. Outside Harris County most counties are rural with three EMA counties and two HSDA counties reporting 60% or more rural residents. The populations of both the EMA and HSDA are projected to grow at a faster rate than Texas overall, 18% compared to 16% for the state. The fastest growing counties are those adjacent to Harris, and include Montgomery (29%), Fort Bend (27%) and Waller (26%).



In Harris and Fort Bend Counties, minorities make up the “majority” of residents. White/Anglo are the majority in all other counties.

-  Hispanics/Latinos make up 30% of the EMA's and HSDA's populations and 32% of the state's.
 - Twenty percent of EMA and HSDA residents were born outside the U.S. This compares to 14% in the state of Texas. These foreign born residents most frequently come from North, Central and South America.
 - Mexico is the most frequent place of foreign birth, accounting for about half of those born outside the U.S.
 - Approximately one-third of EMA and HSDA residents are “linguistically isolated,” meaning they speak English less than “very well.” The predominant second language is Spanish.
-  Non-Hispanic blacks/African-Americans are 17% of the people in the region compared to 11% in Texas.
-  Asians are 5% of the local population and less than 3% of those living in the state. Fort Bend County has the largest percentage of Asian residents.

Both the EMA and the HSDA have higher median incomes than the state overall. Within the EMA, the median income is nearly \$47,000 per year and within the HSDA, the median income is \$42,000. This compares to just under \$40,000 for Texas. Fort Bend (\$64,000 per year) and Montgomery (\$50,000 per year) have the two highest median incomes as well as the highest levels of educational attainment.

The EMA and HSDA have lower poverty rates than Texas overall, but the poverty rate is higher than found throughout the U.S. The region has approximately 14% poverty; the state has 15.4%, and the U.S. has only 12.4%.

As a state, Texas ranked first in the U.S. in 1998 according to percent of population uninsured (24.5%) and second in size of the uninsured population (4,880,000). In the 10-county area, counties ranged between one fifth and one quarter of their populations uninsured. In addition, all of the HSDA counties have full or partial designation as medically underserved areas (MUA). Six entire counties are designated as medically underserved.

-  Liberty County, the county with the highest unemployment in the region, has the highest mortality rate of the 10 HSDA Counties, ranking thirteenth in the state of Texas. They have the highest infant mortality rate in the state, and are in the top 15 for cancer, lower respiratory diseases and accidents.
-  Fort Bend has the lowest death rate of the ten HSDA counties, ranking 197 in the state.


SURVEILLANCE DATA






Surveillance data presented in this report should be considered an accurate reflection of population trends. It should be remembered, however, that HIV reporting did not begin until 1999, so data is incomplete. In addition, 2003 data used in this report may also be incomplete due to possible reporting lag.

Both HIV and AIDS diagnoses demonstrated a steadily increasing trend between 1999 and 2002. In 2003, this trend changed with declines in both HIV and AIDS diagnoses. This change should be further evaluated to determine if it is an actual decrease or due to reporting lag. In 2003, 604 persons in the Houston HSDA were diagnosed with HIV that had not progressed to AIDS, and 591 PLWH received an AIDS diagnosis.

The racial/ethnic profile of the epidemic is stable. Approximately half of those with new diagnoses of both HIV and AIDS are black, non-Hispanic, 27% are white, non-Hispanic and 21% are Hispanic. Blacks have the highest rate of new HIV and new AIDS infections. It is four times higher than the rate of infection for Hispanics and five times higher than that of whites. The 25 to 44 age group has the highest rates of new HIV and AIDS infections. This infection rate is more than twice as high as any other age group.






Populations that should be monitored for increasing infection trends include women, young white/Anglo men who have sex with men (MSM), MSM of color (MCSM), youth and white injecting drug users.

-  Black women make up the largest percentage of newly diagnosed women of childbearing age (13 to 44 years). Infection rates are significantly higher than those of whites and Hispanics. Comparison of HIV and AIDS diagnoses among whites and Hispanics, however, indicate possible increasing trends among these women as well.

-  Young women, age 13 to 24, are a significantly higher percentage of new HIV infections than women overall. Over 45% of new HIV diagnoses in this age group are among women, compared to 30% of all new HIV diagnoses. In addition, females make up 55% of youth living with HIV and AIDS, compared to 26% for the epidemic overall.
-  Comparing HIV and AIDS diagnoses and infection rates an increase among Hispanic women is seen.
-  Among men of color who have sex with men (MCSM), an increase of black, non-Hispanics living with HIV compared to those living with AIDS indicates an increasing trend among this group. In addition, new diagnoses are increasing among black MSM compared with Hispanics.
 - Although prevalence numbers are similar between MCSM and White/Anglo MSM, the number of new diagnoses among MCSM is higher than white/Anglo MSM. Over time, this will result in a larger number of MCSM with HIV disease than white/Anglo MSM in the Houston area.
-  Youth, age 13 to 24, exhibited increasing infections with more than 2.4 times more HIV diagnoses per 100,000 than AIDS diagnoses. Their HIV infection rate is also higher than their AIDS infection rate, which supports the premise that this is an emerging population.
 - Black youth are disproportionately affected by HIV and AIDS, comprising nearly 70% of youth who are living with HIV and AIDS. Comparison of HIV infections with AIDS infections by race reveals possible emerging trends among white youth.
-  Although numbers of newly diagnosed IDU are small, white IDU should be monitored as a potential emerging population.
 - White IDU make up 45% of new HIV diagnoses compared to 19% of AIDS diagnoses.

SERVICE UTILIZATION



Service utilization, other than primary care, is evaluated using the CPCDMS system which includes Ryan White Title I and II data. Support service utilization increased significantly between 2001 and 2003. Case management use increased 25%; dental care use increased 134% and mental health therapy and counseling increased 53%. Primary care utilization is enhanced with Title III and IV, Harris County Jail and Veterans Administration data. Due to data inconsistencies, primary care utilization trends are not available.

-  Primary medical care through these funding sources is used by a disproportionate percentage of blacks and Hispanics. It is also accessed disproportionately by older adults, and use is limited by youth.
-  Case management use increased 25% between 2001 and 2003. Older PLWH (age 45 to 64) are only 16% of people living with HIV disease but are 30% of case management clients. On the other hand, youth (age 13 to 24) are 12% of PLWH but 4% of case management client. Blacks tend to use case management services to a somewhat greater extent than whites.
-  Dental care is used disproportionately by Hispanics, whites and older adults.
-  Mental health therapy and counseling is used by a disproportionate percentage of white PLWH. Thirty three percent of PLWH are white, but 53% of 2003 mental health clients were white. Older adults under-utilize mental health therapy and counseling services.
-  ADAP was used by a disproportionate percentage of Hispanic PLWH in 2003. Hispanics make up 18% of PLWH in the region but were 27% of ADAP clients.

UNMET NEEDS ESTIMATES

Identifying people who are aware of their HIV positive status and who are not receiving HIV medical care is a Health Resources Services Administration (HRSA) mandate, and a central focus of regional and national planning. One of the first steps in designing effective interventions is identifying the number and characteristics of those who are out of care, known as the “unmet need.”

Although it may seem straightforward, the difficulty in estimating unmet need lies in the many data sources that must be brought together. Inconsistent data and inadequate data are problems. In addition, trying to avoid duplication so people are only counted once can be difficult, particularly if their insurance has changed or they have switched providers. With that said, the following represents the current “best” estimates of the unmet need for the Houston EMA:

-  Approximately half of people living with HIV and AIDS in the Houston EMA are outside the medical care system. This includes nearly 52% of men and 47% of women.
-  Considering the race and ethnicity of those with unmet need, whites have the largest percentage outside the medical care system, nearly 55%. Over 52% of blacks are outside the care system, and Hispanics have the lowest unmet need, 40%.

- ⚠ Examining unmet need by age using current data sources, the largest unmet need is among pediatrics, age 0 – 12, with over 63% out-of-care. This result will likely change with additional information from Medicaid. Youth include the largest in-care percentage, with 44.4% out of care. Both the 25 to 44 year group and 45 to 64 year group have 51% out-of-care.

Acquiring additional data to enhance these estimates is necessary. Data needs include: Medicaid data, Medicare data, additional private insurer data, additional private physician data with patient profiles by race and age.

EXECUTIVE SUMMARY	(i)
I. Introduction.....	1
Data Sources	2
1. Sociodemographic Data	2
2. HIV/AIDS Surveillance.....	3
Question 1.1: What are the sociodemographic characteristics of the general population in Houston?	6
Summary.....	7
The Geographic Region	9
Urban vs. Rural and Population Density.....	9
Population Distribution and Growth.....	12
Race/Ethnicity	15
Linguistic Isolation.....	22
Socioeconomic Status	24
Owner Cost and Gross Rent as Percentage of Household Income....	26
Employment Status	30
Educational Attainment	31
Poverty Status	33
Health and Insurance Status	37
Homelessness	45
Question 1.2: What is the scope of the HIV/AIDS epidemic in the Houston region?	47
Summary.....	49
HIV and AIDS 2003 Incidence (New Diagnoses).....	50
HIV and AIDS Prevalence (People Living with HIV and AIDS).....	57
Mortality.....	63
HIV with Tuberculosis Comorbidity	68
Special Populations	69
Men of Color who have sex with men and White/Anglo men who have sex with men	69
Injecting drug users.....	76

Women of child bearing age.....	81
Youth.....	84
Blacks/African-Americans	88
Hispanics	94
 Question 1.3: What are the indicators of risk for HIV/AIDS infection in the Houston area?	 99
Summary.....	101
Infection Drug Users	104
Heterosexuals	107
STD Trends: Gonorrhea.....	108
STD Trends: Syphilis	112
HIV Testing.....	117
 Question 2.1: What are the patterns of utilization of HIV services of people living in the Houston region?	 119
Summary.....	120
Primary Care Services.....	121
Case Management Services	125
Dental Services.....	131
Substance Abuse Treatment.....	137
Mental Health Therapy and Counseling	142
AIDS Drug Assistance Program.....	148
 Question 2.2: What are the number and characteristics of persons who know they are HIV -positive, but who have not receiving primary medical care?..	149
Prevalence.....	150
Service Utilization.....	151
Results	152
Unmet Need Recommendations	155

List of Tables and Figures

	<u>Tables</u>	<u>Page</u>
1.1.1.	Houston EMA/HSDA Counties and Total Urban vs. Rural Areas, 2000	11
1.1.2	Houston EMA/HSDA Counties and Total Population Density, 2000	11
1.1.3	Houston EMA/HSDA Counties and Total Population Growth by County, 2000-2010	13
1.1.4	Houston EMA/HSDA and Texas Total Projected Population Change by Age, 2000 through 2010	14
1.1.5	Houston EMA/HSDA Counties and Total Population by Race and Ethnicity, 2000.....	16
1.1.6	Houston EMA/HSDA Total Population by Race, Ethnicity and Gender, 2000.....	17
1.1.7	Houston EMA/HSDA Counties and Total Hispanic/Latino by Country of Origin, 2000.....	19
1.1.8	Houston EMA/HSDA Counties and Total Foreign Born by Place of Birth, 2000.....	21
1.1.9	Houston EMA/HSDA Counties and Total Linguistic Isolation, 2000	23
1.1.10	Houston EMA/HSDA Counties and Total Median Household Income, 2000.....	25
1.1.11	Houston EMA/HSDA Counties Owner Cost as Percentage of Household Income.....	27
1.1.12	Houston EMA/HSDA Counties Gross Rent as a Percentage of Household Income.....	29
1.1.13	Houston EMA/HSDA Counties Employment Status of Residents Over 16 Years of Age, 2003.....	30
1.1.14	Houston EMA/HSDA Counties 2000 Educational Attainment.....	31
1.1.15	Houston EMA/HSDA Counties Poverty by Race	34
1.1.16	Houston EMA/HSDA Counties Poverty by Age and Gender	35
1.1.17	Houston EMA/HSDA Counties Poverty by Family Level.....	36

Tables (continued)

1.1.18	Houston EMA/HSDA Counties Estimated Percentage of Residents Without Insurance, 1999	37
1.1.19	Houston EMA/HSDA Counties Rates and County Rankings for Natality Characteristics	39
1.1.20	Houston EMA/HSDA Counties Rates and County Rankings for Mortality Characteristics Age-Adjusted Death Rates Per 100,000 Population.....	41
1.1.21	Houston EMA/HSDA Counties Rates and County Rankings for Morbidity Characteristics	42
1.1.22	Houston EMA/HSDA Counties Medically Underserved Areas	44
1.1.23	Available Emergency Shelter Beds and Occupancy	46
1.1.24	Available Emergency Shelter by Type	46
1.2.1-H	HSDA HIV, AIDS and Total Diagnoses in 2003	54
1.2.1-E	EMA HIV, AIDS and Total Diagnoses in 2003.....	55
1.2.2-H	HSDA Prevalence of HIV, AIDS and Total	59
1.2.2-E	EMA Prevalence of HIV, AIDS and Total	61
1.2.3-H	HSDA Deaths of Persons with HIV and AIDS by Race/Ethnicity and Gender, 2002	65
1.2.3-E	EMA Deaths of Persons with HIV and AIDS by Race/Ethnicity and Gender, 2002	65
1.2.4	HSDA Deaths from HIV and AIDS by Gender, Race/Ethnicity Age and Transmission Mode, 2002.....	66
1.2.5-H	HSDA Deaths of Persons with HIV/AIDS, 1999 through 2002	67
1.2.5-E	EMA Deaths of Persons with HIV/AIDS, 1999 through 2002.....	67
1.2.6	Persons diagnosed with HIV and persons diagnosed with AIDS who also have TB.....	69
1.2.7	Houston Area HSDA HIV and AIDS Incidence among MCSM.....	71

Tables (continued)

1.2.8-H	Houston Area HSDA HIV and AIDS Prevalence among MCSM.....	72
1.2.8-E	Houston Area EMA HIV and AIDS Prevalence among MCSM.....	73
1.2.9	Houston Area HSDA HIV and AIDS Incidence among White/Anglo MSM.	74
1.2.10-H	Houston Area HSDA HIV and AIDS Prevalence among White/Anglo MSM	75
1.2.10-E	Houston Area EMA HIV and AIDS Prevalence among White/Anglo MSM	76
1.2.11	Houston Area HSDA HIV and AIDS Incidence among Injecting Drug Users	78
1.2.12-H	Houston Area HSDA HIV and AIDS Prevalence among Injecting Drug Users	79
1.2.12-E	Houston Area EMA HIV and AIDS Prevalence among Injecting Drug Users	80
1.2.13	Houston Area HSDA HIV and AIDS Incidence among Women, 13-44	82
1.2.14-H	Houston Area HSDA HIV and AIDS Prevalence among Women, 13-44	83
1.2.14-E	Houston Area EMA HIV and AIDS Prevalence among Women, 13-44.....	84
1.2.15	Houston Area HSDA HIV and AIDS Incidence among Youth.....	86
1.2.16-H	Houston Area HSDA HIV and AIDS Prevalence among Youth.....	87
1.2.16-E	Houston Area EMA HIV and AIDS Prevalence among Youth	88
1.2.17	Houston Area HSDA HIV and AIDS Incidence among Blacks/ African-Americans	91
1.2.18-H	Houston Area HSDA HIV and AIDS Prevalence among Blacks/ African-Americans	92
1.2.18-E	Houston Area EMA HIV and AIDS Prevalence among Blacks/ African-Americans	93
1.2.19	Houston Area HSDA HIV and AIDS Incidence among Hispanics.....	96
1.2.20-H	Houston Area HSDA HIV and AIDS Prevalence among Hispanics	97
1.2.20-E	Houston Area EMA HIV and AIDS Prevalence among Hispanics	98
2.1.1	Primary Care Utilization by Gender, Race and Age, 2003	123
2.1.2	Houston EMA/HSDA Case Management Utilization by Gender, Race and Age, 2003.....	126

Tables (Continued)

2.1.3	Houston EMA/HSDA Case Management Utilization by Gender, Race and Age, 2001-2003	128
2.1.4	Houston EMA/HSDA Case Management Utilization, Transmission Mode and Subpopulations, 2001-2003	129
2.1.5	Houston EMA/HSDA Dental Service Utilization by Gender, Race and Age, 2003	132
2.1.6	Houston EMA/HSDA Dental Service Utilization by Gender, Race and Age, 2001-2003	134
2.1.7	Houston EMA/HSDA Dental Service Utilization, Transmission Mode and Subpopulations, 2001-2003	135
2.1.8	Houston EMA/HSDA Substance Abuse Treatment Utilization by Gender, Race and Age, 2003	137
2.1.9	Houston EMA/HSDA Substance Abuse Treatment Utilization by Gender, Race and Age, 2001-2003	139
2.1.10	Houston EMA/HSDA Substance Abuse Treatment Utilization, Transmission Mode and Subpopulations, 2001-2003	140
2.1.11	Houston EMA/HSDA Mental Health Therapy and Counseling Utilization by Gender, Race and Age, 2003	143
2.1.12	Houston EMA/HSDA Mental Health Therapy and Counseling Utilization by Gender, Race and Age, 2001-2003	145
2.1.13	Houston EMA/HSDA Mental Health Therapy and Counseling Utilization, Transmission Mode and Subpopulations, 2001-2003	146
2.1.14	2003 ADAP Utilization, Houston HSDA	148
2.2.1	Houston EMA 2003 Unmet Need Estimate Gender Profile	152
2.2.2	Houston EMA 2003 Unmet Need Estimate Racial/Ethnic Profile	153
2.2.3	Houston EMA 2003 Unmet Need Estimates Age Profile	154

Figures

1.1.1	Houston EMA/HSDA Area Map	10
1.1.2	Houston EMA/HSDA and Texas Total Population by Race and Ethnicity, 2000.....	17
1.1.3	Houston EMA/HSDA Counties Population by Race and Ethnicity, 2000....	18
1.1.4	Houston EMA/HSDA and Texas Hispanic/Latino by Country of Origin, 2000.....	20
1.1.5	Houston EMA/HSDA Counties Hispanic/Latino by Country of Origin, 2000.....	20
1.1.6	Houston EMA/HSDA Counties Foreign Born by Place of Birth, 2000	22
1.1.7	Houston EMA/HSDA and Texas Total Median Household Income, 2000 ..	26
1.1.8	Houston EMA/HSDA and Texas Owner Cost as Percentage of Household Income.....	28
1.1.9	Houston EMA/HSDA Counties Owner Cost s Percentage of Household Income.....	28
1.1.10	Houston EMA/HSDA Counties Gross Rent as Percentage of Household Income.....	29
1.1.11	Houston EMA/HSDA and Texas 2000 Educational Attainment.....	32
1.1.12	Houston EMA/HSDA Counties 2000 Educational Attainment.....	32
1.2.1	Trends in Diagnosed HIV Infection and AIDS	56
1.2.2	Persons Living with HIV Infection and Persons Living with AIDS	62
1.2.3	Deaths of Persons with HIV or AIDS Houston HSDA, 1999-2002	68
2.1.1	Primary Care Utilization.....	124
2.1.2	Case Management Service Utilization, Houston, 2003.....	127
2.1.3	Case Management Service Utilization, Houston 2001-2003.....	130
2.1.4	Dental Services Utilization, Houston, 2003	133
2.1.5	Dental Care Services Utilization, Houston, 2001-2003	136
2.1.6	Substance Abuse Services Utilization, Houston, 2003	138
2.1.7	Substance Abuse Services Utilization, Houston, 2001-2003.....	141
2.1.8	Mental Health Services Utilization, Houston, 2003.....	144
2.1.9	Mental Health Services Utilization, Houston, 2001-2003.....	147

In order to effectively plan and implement HIV prevention and care services, local organizations require profiles of individuals who are infected with and at risk for acquiring HIV disease. Information about who is infected, their backgrounds and risk factors lay the foundation for local and regional prevention and care planning. This epidemiological profile provides detailed information about the current HIV/AIDS epidemic in the Houston Eligible Metropolitan Area (EMA) and Health Service Delivery Area (HSDA). The Houston EMA includes a six county area with Harris County/Houston at the center. Other counties comprising the EMA include: Chambers, Fort Bend, Liberty, Montgomery and Waller. The HSDA is composed of these six plus Austin, Colorado, Walker and Wharton counties.

The Health Resources Services Administration (HRSA), the organization that oversees federal funding for care of people living with HIV and AIDS (PLWH) through Ryan White CARE Act Titles I through IV, and the Centers for Disease Control and Prevention (CDC), the organization that is responsible for HIV surveillance and prevention activities, have recently drafted guidelines for epidemiological profiles that bring together information from HIV care, surveillance and prevention. These guidelines identify five key questions that should be answered by the epidemiological profile. These include:

1. What are the sociodemographic characteristics of the general population in your service area?
2. What is the scope of the HIV/AIDS epidemic in your service area?
3. What are the indicators for risk of HIV infection and AIDS in the population covered by your service area?
4. What are the patterns of service utilization of HIV -infected persons in your area?
5. What are the number and characteristics of persons who know they are HIV-positive but who are not receiving HIV primary medical care?

This epidemiological profile is organized around these five questions, with each representing a section of the report.

Data were compiled from a variety of sources to provide the most complete picture of the HIV epidemic in the Houston EMA/HSDA. When interpreting the data, keep in mind that each data source has strengths and limitations. A brief description of each data source follows.

1. SOCIODEMOGRAPHIC DATA

a. U.S. Bureau of the Census (Census Bureau)

The government through the Bureau of the Census collects and provides information about the people and the economy of the United States. The Census Bureau's website (<http://www.census.gov>) includes data on demographic characteristics of the population, such as age, race, Hispanic ethnicity and gender/sex. It also provides information on family structure, educational attainment, income level, housing status and the proportion of people who live at or below poverty level.

Information is available for very small geographic areas, such as block groups, but for this analysis county-level data is used. Totals for the six county EMA and the ten county HSDA are provided. In most cases, statewide information for Texas is provided for comparison.

When collecting data, the Census Bureau collects information on race and ethnicity separately. Therefore, Hispanic ethnicity is collected for people of both white and black races. Within race, however, it is possible to identify members of each race that are non-Hispanic. In order to provide information that is consistent and comparable to the HIV surveillance data, this report differentiates people who are white, non-Hispanic, black non-Hispanic and Hispanic. Some information, such as poverty, is only collected by race (white, black, Asian) with ethnicity (Hispanic or non-Hispanic) included as a separate category. In these cases, direct comparisons from population data cannot be made (e.g. the racial breakdown of the population cannot be compared with the racial breakdown of those living in poverty).

b. Texas Comptroller's Winter 2001-2002 County Forecast

County and state population projections to 2010 are from this source. Projections are based upon the 2000 U.S. Census.

c. Texas Department of Labor

While the Census Bureau provided unemployment data from 2000, more current information is available from the Texas Department of Labor. Average unemployment from 2003 is used.

d. Texas Department of Health

The Texas Department of Health (TDH) collects county-level data for a range of health status indicators. These include natality and morbidity and mortality for a range of diseases. For this profile, TDH's publication, "Selected Demographic and Public Health Measures: Rankings for Texas Counties 1998 – 2000," is used. This report combines data from 1998 through 2000, and provides county rankings from highest to lowest, with identical values given the same rank. Mortality and morbidity measures with 20 or fewer numerator events in the three-year period are not ranked and designated as "NR." Natality measures based on a denominator of 20 or fewer are also not ranked. Mortality data used in this report were age-adjusted using the 2000 standard population. The system for coding of mortality changed between 1998 and 1999. Please refer to the full report for an explanation of these changes.

TDH data is also used for Medicaid enrollment statistics. These were taken from the TDH website by county.

2. HIV/AIDS SURVEILLANCE

AIDS was made a reportable disease in the State of Texas in March of 1983, while HIV infection became voluntarily reportable in 1987. In February 1994, the Control of Communicable Disease Act of Texas was amended to expand the information that must be reported for an HIV infection. The new regulations required name based reporting for all HIV-infected individuals less than 13 years of age. Laboratories that perform CD4 testing have been required to report suspect AIDS cases (those with a CD4 count below 200 or a CD4 percent below 14%) since January 1994. In January 1999, HIV infection became reportable for all persons who have a diagnostic test performed after 1998. On January 1, 2000, a detectable viral load was added to the reportable diagnostic tests.¹

Texas is one of several states that have unique HIV/AIDS reporting. Whereas most States are responsible for all HIV/AIDS reporting, six Texas cities are designated as independent reporting sites. To ensure complete HIV/AIDS reporting at the state level, Houston transfers its data to the State who then provides this data to the Centers for Disease Control and Prevention. With the initiation of name-based reporting of HIV, and to standardize reporting jurisdictions for all communicable diseases, the Houston Department of Health and Human Services (HDHHS) reporting jurisdiction was modified to include only Houston and Harris County. Since 1989 Houston has received direct funding from the CDC to conduct HIV/AIDS surveillance.

¹ The Houston Department of Health and Human Services (HDHHS) conducts HIV/AIDS surveillance as authorized in the Texas Administrative Code, Title 25, Part 1, Chapter 97. Rule §97.132 of Subchapter F. This requires physicians, dentists, hospitals, clinical laboratories and certain school officials to report HIV and AIDS to the local health authority. The Surveillance Program collects data in accordance with Rule §97.133 of Subchapter F which requires that reports of AIDS, HIV infection, CD4+T lymphocyte cell count below 200 cells/microliter, or CD4+ T-lymphocyte percentage of less than 14% shall be made using all of the information (collected by the reporting entities listed in Rule §97.132) found in the most current version of forms CDC 50.42B, CDC 50.42C, or STD-28.

HIV and AIDS data are systematically collected and entered into the HIV/AIDS Reporting System (HARS) developed by the CDC. A systematic surveillance system has been established to ensure that data is as complete as is possible, and quality assurance procedures are in place.

DATA LIMITATIONS

The data for HIV may not be representative of the epidemic in the population in that some individuals may not know they are positive therefore do not test. In addition, individuals who choose to test anonymously rather than confidentially, will not be reported or contribute to an accurate picture of the epidemic.

HIV data has not been reportable for as many years as has AIDS in Texas, therefore HIV data is not as complete as AIDS data and trend analysis of HIV data cannot be properly performed.

In addition, reporting lag may contribute to underestimations in the data. Although every effort is made to identify sources of AIDS and HIV reports, HIV/AIDS recent data is not complete.

When data reports, encompass two jurisdictional areas, data are affected by reporting schedules. For example, Houston data includes only the City of Houston and Harris County. Any reports that would require Houston data also, would have to come through the Texas HARS system. Reporting delays or data cleaning at the State level would not allow a complete, timely picture.




HIV/AIDS CORE SURVEILLANCE PROJECTS

The HIV/AIDS Core Surveillance Program consists of the following projects: HIV/AIDS Surveillance, Expanded HIV Risk Assessment Project (EHRAP), and Sampling for Transmission Risk (STR). The Program also has the following Supplemental Projects: Enhanced Perinatal Surveillance (EPS), Adult Spectrum of Disease Project (ASD), HIV Testing Survey (HITS), Supplement to HIV/AIDS Surveillance (SHAS), Survey of HIV Disease and Care (SHDC), Behavioral Surveillance, HIV Incidence Surveillance, and the Program Evaluation Project. The special projects are designed to capture information about HIV/AIDS that are beyond the scope of core surveillance. These studies are conducted in select populations and may not be representative of the epidemic in the general population. These studies are also time sensitive and limited in scope.

CENTRALIZED PATIENT CARE DATA MANAGEMENT SYSTEM (CPCDMS)

Houston's Centralized Patient Care Data Management System (CPCDMS) is a computer database application that compiles and tracks health, demographic and service utilization. The system enables Ryan White Title I funded agencies and other users to share client eligibility information and to document services delivered to clients. Records are created, accessed and updated by providers via high-speed Internet connections using each client's unique 11-character code. Client demographic information is collected through a registration process that establishes a client's eligibility for Title I services. Examples of information collected at registration include: race, ethnicity, income, mode of transmission, co-morbidities, insurance status, year of diagnoses, etc. Service providers enter service encounter information for each client. This information, broken out by service contract and funding source into finite units, supports billing and other reporting activities.

Three years of data are included in this report, 2001 through 2003. Each year's data varies slightly, with 2003 representing the largest number of Ryan White titles, service providers and possible clients. Therefore, increasing trends in service utilization should be viewed with that in mind.

-  The 2001 service utilization data is limited to Ryan White Title I only.
-  The 2002 data is complete for Title I and contains some data for other titles.
-  The 2003 data includes all of Title I utilization, the first nine months of the Harris County Hospital District's Title III and Title IV utilization. It also includes Title II data from the Resource Group, with the exception of Texas Children's Hospital (Title IV) and Fort Bend Family Health Center.





QUESTION 1.1:










**WHAT ARE THE SOCIODEMOGRAPHIC
CHARACTERISTICS OF THE GENERAL POPULATION
IN HOUSTON?**

WHAT ARE THE SOCIODEMOGRAPHIC CHARACTERISTICS OF THE GENERAL POPULATION IN HOUSTON?

This section provides information on the demographic and socioeconomic characteristics of the EMA and HSDA.

SUMMARY



-  The EMA is comprised of six counties and the HSDA includes these six plus four others. The population center of the region is Harris County, with over 80% of the EMA population and nearly 79% of the HSDA population. Outside Harris County most counties are rural with three EMA counties and two HSDA counties reporting 60% or more rural residents.
-  The EMA and HSDA are projected to grow at a faster rate than Texas overall, 18% compared to 16% for the state.
 - The fastest growing counties include Montgomery (29%), Fort Bend (27%) and Waller (26%).
 - Age groups with significant projected growth in the EMA and HSDA include 13 to 24, 45 to 64, and 65 and older.
-  In Harris and Fort Bend Counties, minorities make up the “majority” of residents. White/Anglo are the majority in all other counties.
 - White, non-Hispanics are the largest population group in the EMA and the HSDA, comprising 46% of the EMA’s and HSDA’s populations compared to 52% of the state’s.
 - Hispanics/Latinos make up 30% of the EMA’s and HSDA’s populations and 32% of the state’s.
 - Non-Hispanic blacks/African-Americans are 17% of the people in the region compared to 11% in Texas.
 - Asians are 5% of the local population and less than 3% of those living in the state.
-  Twenty percent of EMA and HSDA residents were born outside the U.S. This compares to 14% in the state of Texas. These foreign born residents most frequently come from North, Central and South America. Mexico is the most frequent place of foreign birth, accounting for about half of those born outside the U.S.

-  Approximately one-third of EMA and HSDA residents are “linguistically isolated,” meaning they speak English less than “very well.” The predominant second language is Spanish.
-  Within the EMA, the median income is nearly \$47,000 per year which is \$5,000 higher than in the HSDA and \$7,000 higher than is found in the state.
 - Fort Bend County residents have the highest median household income in the HSDA, nearly \$64,000 per year.
 - Montgomery County is second highest with over \$50,000 per year.
 - These two counties also have the highest level of educational attainment.
-  In 2003, unemployment in the EMA, HSDA and state was in the range of 6.8% to 6.9%.
 - Liberty County had the highest 2003 unemployment rate, 10.4%.
-  Both the EMA and the HSDA have lower rates of poverty than in Texas overall, with 13.9% and 14%, respectively, living in poverty compared to 15.4% for the state.
-  As a state, Texas ranked first in the U.S. in 1998 according to percent of population uninsured (24.5%) and second in size of the uninsured population (4,880,000). In the HSDA, county populations ranged between one fifth and one-quarter uninsured.
-  All of the HSDA counties have full or partial federal designation as medically underserved areas. Six entire counties are designated as medically underserved.
-  Harris County has 18 neighborhoods with medically underserved census tracts. In addition, Harris County has four medically underserved populations. The latter are populations which are medically disadvantaged due to economic, racial or ethnic reasons.
-  Liberty County has the highest mortality rate of the 10 HSDA Counties, ranking thirteenth in the state of Texas. They have the highest infant mortality rate in the state, and are in the top 15 for cancer, lower respiratory diseases and accidents.
-  Fort Bend has the lowest death rate of the ten HSDA counties, ranking 197 in the state.

THE GEOGRAPHIC REGION




The Houston area HSDA, referred to in this document, covers 9,415 square mile of Southeast Texas and makes up 3.5% of the state's area. It is an area roughly the size of the state of New Hampshire.

Ten counties make up the region, and throughout this document they are grouped by the HIV community planning funding sources. Under the Ryan White CARE Act, the Health Resources Services Administration (HRSA) uses the Eligible Metropolitan Area (EMA) for Ryan White Title I funding, and Health Services Delivery Area (HSDA) for funding under Title II.

-  The EMA includes six counties: Chambers, Fort Bend, Harris, Liberty, Montgomery and Waller.
-  The HSDA is composed of these six plus Austin, Colorado, Walker and Wharton. Figure 1.1.1 maps the EMA and identifies the four additional counties that make up the HSDA.

URBAN VS. RURAL AND POPULATION DENSITY

The U.S. Census Bureau identified urban and rural areas within regions. Harris County is home to Houston, the urban center of the region.

-  Over 98% of the Harris County's 3,400,000 residents are considered urban residents.
-  Other counties with large percentages of urban residents include Fort Bend (89.9%), Montgomery (64.0%) and Walker (63.7%).
-  The population of three EMA counties and two HSDA counties have 60% or greater rural residents. These include: Chambers (64.2%), Liberty (64.1%), Waller (63.4%), Austin (62.8%) and Colorado (60.4%). Refer to Table 1.1.1.

Population density considers the number of residents for every square mile of land area.


-  The most rural counties have the lowest population density, and the most urban have the highest. Population density for each county is reflected in Table 1.1.2.

Figure 1.1.1
HOUSTON EMA/HSDA
AREA MAP

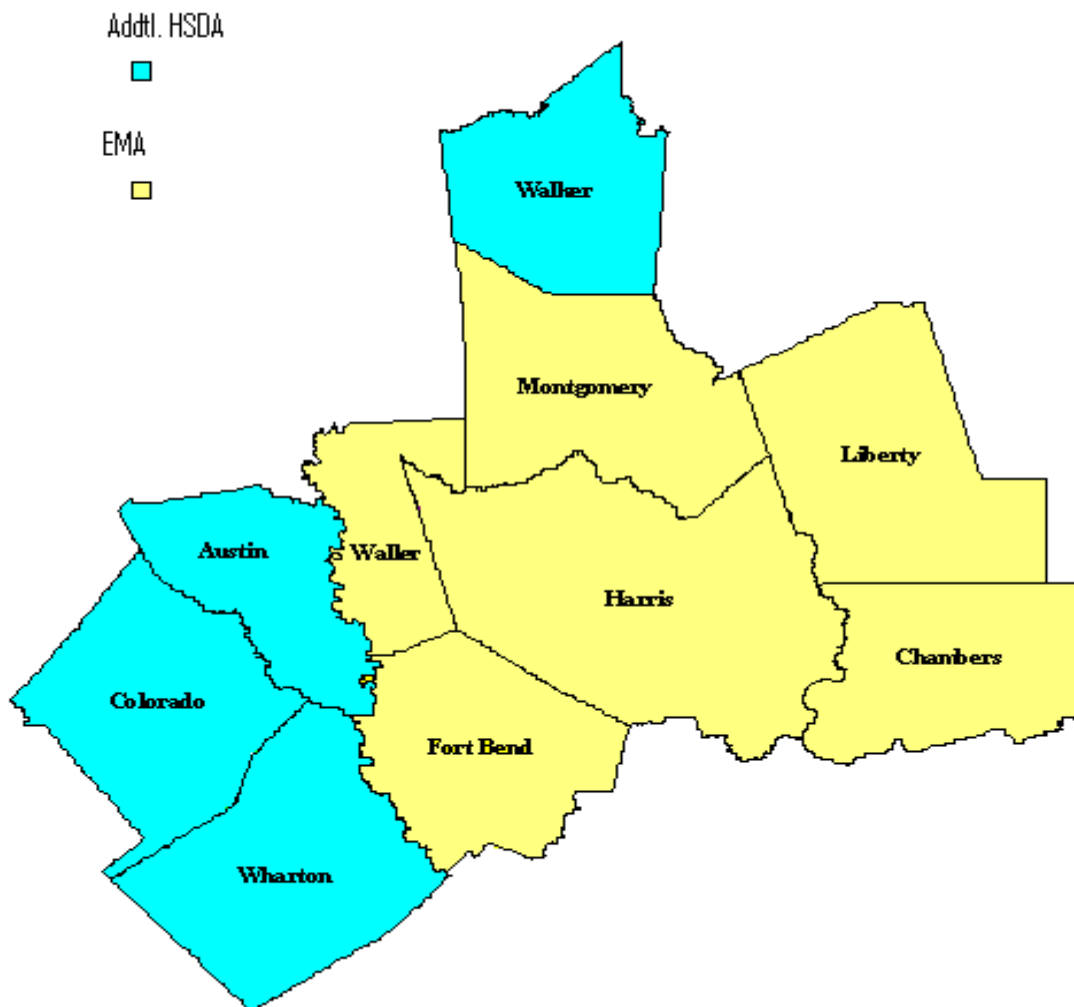


Table 1.1.1
HOUSTON EMA/HSDA COUNTIES AND TOTAL
URBAN VS. RURAL AREAS
2000

COUNTY	TOTAL POPULATION	URBAN POPULATION	RURAL POPULATION
Chambers	26,031	35.8%	64.2%
Fort Bend	354,452	89.9%	10.1%
Harris	3,400,578	98.2%	1.8%
Liberty	70,154	35.9%	64.1%
Montgomery	293,768	64.0%	36.0%
Waller	32,663	36.6%	63.4%
EMA TOTAL	4,177,646	93.2%	6.8%
Austin	23,590	37.2%	62.8%
Colorado	20,390	39.6%	60.4%
Walker	61,758	63.7%	36.3%
Wharton	41,188	50.3%	49.7%
HSDA TOTAL	4,324,572	91.8%	8.2%
TEXAS TOTAL	20,851,820	82.5%	16.6%

Source: U.S. Bureau of the Census, United States 2000 (www.census.gov). Retrieved on March 25, 2004

Table 1.1.2
HOUSTON EMA/HSDA COUNTIES AND TOTAL
POPULATION DENSITY
2000

COUNTY	POPULATION	LAND AREA IN SQUARE MILES	POPULATION DENSITY PER SQUARE MILE OF LAND AREA
Chambers	26,031	599.31	43.4
Fort Bend	354,452	874.64	405.3
Harris	3,400,578	1,728.83	1967.0
Liberty	70,154	1,159.68	60.5
Montgomery	293,768	1,044.03	281.4
Waller County	32,663	513.63	63.6
EMA TOTAL	4,177,646	5,920.12	470.2
Austin	23,590	652.59	36.1
Colorado	20,390	962.95	21.2
Walker	61,758	787.45	78.4
Wharton	41,188	1,090.13	37.8
HSDA TOTAL	4,324,572	9,413.24	299.47
TEXAS TOTAL	20,851,820	261,797.12	79.6

Source: U.S. Bureau of the Census, United States 2000 (www.census.gov). Retrieved on March 25, 2004.

POPULATION DISTRIBUTION AND GROWTH

The 2000 U.S. Census identified 4,177,646 residents of the EMA and 4,324,572 residents of the HSDA.

- ⚠ This is 20% of the population of Texas in the EMA and 20.7% in the HSDA.
- ⚠ Over 81% of the people living in the EMA live in Harris County and nearly 79% of those in the HSDA live in Harris County.
- ⚠ The second largest county is Fort Bend, with 8.5% of people living in the HSDA and Montgomery County with 6.8% of the region's population.
- ⚠ The smallest counties by population include Colorado, Austin, and Chambers, each with less than 30,000 residents.

Both the EMA and the HSDA are projected to grow approximately 18% between 2000 and 2010. This is faster growth than the 16% that is projected for Texas overall.

- ⚠ The fastest growing counties include Montgomery (29%), Fort Bend (27%) and Waller (26%).
- ⚠ The slowest growing counties are the four outside the EMA, Colorado (3.5%), Wharton (5.8%), Austin (8.4%) and Walker (9.6%). Refer to Table 1.1.3.
- ⚠ The 45 to 64 age group is projecting the greatest growth in the EMA, HSDA and state, between 41% and 45%.
- ⚠ This is followed by the 65+ group, but the EMA and HSDA are projected to grow at a faster rate than the state, 37% for the EMA, 35% for the HSDA compared to 22% for Texas.
- ⚠ Youth, those 13 to 24 years, are projected to increase 15% in the EMA and 14% in the HSDA compared to 12% for the state. Refer to Table 1.1.4. Refer to Appendix A for population projections by age, gender and county.
- ⚠ Relatively slow growth, 6.5%, is projected for the 25 to 44 year age group.

Table 1.1.3
HOUSTON EMA/HSDA COUNTIES AND TOTAL
POPULATION GROWTH BY COUNTY
2000 THROUGH 2010

COUNTY	POPULATION 2000		POPULATION 2010		PERCENT CHANGE 2000-2010
	NUMBER	PERCENT*	NUMBER	PERCENT*	
Chambers	26,031	0.6%	31,375	0.6%	20.5%
Fort Bend	354,452	8.2%	449,811	8.8%	26.9%
Harris	3,400,578	78.6%	3,951,682	77.6%	16.2%
Liberty	70,154	1.6%	81,930	1.6%	16.8%
Montgomery	293,768	6.8%	379,363	7.5%	29.1%
Waller	32,663	0.8%	41,137	0.8%	25.9%
EMA Total	4,177,646	96.6%	4,935,298	96.9%	18.1%
Austin	23,590	0.6%	25,582	0.5%	8.4%
Colorado	20,390	0.5%	21,101	0.4%	3.5%
Walker	61,758	1.4%	67,664	1.3%	9.6%
Wharton	41,188	1.0%	43,560	0.9%	5.8%
HSDA Total	4,324,572	100.0%	5,093,205	100.0%	17.8%
Texas Total Population	20,851,820	100.0%	24,178,507	100.0%	16.0%
<p>Source: Texas comptroller's winter 2001-2002 county forecast (www.window.stat.tx.us). Retrieved on March 25, 2004.</p> <p>*Reflects percent of total HSDA population</p>					

Table 1.1.4
HOUSTON EMA/HSDA AND TEXAS TOTAL
PROJECTED POPULATION CHANGE BY AGE
2000 THROUGH 2010

COUNTY	POPULATION 2000		POPULATION 2010		PERCENT CHANGE 2000-2010
	NUMBER	PERCENT	NUMBER	PERCENT	
EMA COUNTIES					
Under 2 years	137,130	3.3%	149,476	3.0%	9.0%
2-12 years	755,031	18.1%	798,633	16.2%	5.8%
13-24 years	744,824	17.8%	857,075	17.4%	15.1%
25-44 years	1,379,256	33.0%	1,468,249	29.7%	6.5%
45-64 years	850,192	20.4%	1,236,403	25.1%	45.4%
65 and older	311,213	7.4%	425,462	8.6%	36.7%
Total	4,177,646	100.0%	4,935,298	100.0%	18.1%
HSDA COUNTIES					
Under 2 years	140,638	3.3%	153,444	3.0%	9.1%
2-12 years	775,471	17.9%	819,610	16.1%	5.7%
13-24 years	777,164	18.0%	889,303	17.5%	14.4%
25-44 years	1,420,468	32.8%	1,512,477	29.7%	6.5%
45-64 years	881,084	20.4%	1,273,478	25.0%	44.5%
65 and older	329,747	7.6%	444,893	8.7%	34.9%
Total	4,324,572	100.0%	5,093,205	100.0%	18.1%
TEXAS					
Under 2 years	652,970	3.1%	730,538	3.0%	11.9%
2-12 years	3,608,917	17.3%	3,868,799	16.0%	7.2%
13-24 years	3,799,040	18.2%	4,256,960	17.6%	12.1%
25-44 years	6,537,409	31.4%	6,915,579	28.6%	5.8%
45-64 years	4,186,017	20.1%	5,892,533	24.4%	40.8%
65 and older	2,067,467	9.9%	2,514,098	10.4%	21.6%
Texas Total Population	20,851,820	100.0%	24,178,507	100.0%	16.0%
Source: Texas comptroller's winter 2001-2002 county forecast (www.window.stat.tx.us). Retrieved on March 25, 2004.					

RACE/ETHNICITY

While the EMA and the HSDA have similar racial and ethnic make ups, they differ from Texas overall.

- ⚡ White, non-Hispanics are the largest population group in the EMA and the HSDA. They make up a smaller percentage in the region when compared to the state, being 46% of the EMA's and HSDA's populations and 52% of the state's.
- ⚡ Hispanics/Latinos are a somewhat smaller percentage in the EMA and HSDA than the state, 30% in the region and 32% in the state.
- ⚡ Non-Hispanic blacks/African-Americans are a larger percentage of the population in the EMA and HSDA than in the state, making up over 17% of the people in the region compared to 11% in Texas.
- ⚡ Larger percentages of Asians also live in the EMA and HSDA than in the state overall. Asians are 5% of the regional population and less than 3% of those living in the state. Refer to Table 1.1.5, and Figure 1.1.2.

In Harris and Fort Bend Counties, minorities make up the "majority" of residents. White/Anglo are the majority in all other counties.

- ⚡ By county, Harris County has the most racially and ethnically diverse population with 33% Hispanic/Latino, 18% black/African-American and 5% Asian.
- ⚡ The counties with the largest percentages of black/African-American residents are Waller (29%), Walker (24%), and Fort Bend (20%).
- ⚡ The counties with the largest percentage of Hispanic/Latino residents are Harris (33%), Wharton (31%) and Fort Bend (21%).
- ⚡ Fort Bend County has the largest percentage of Asian residents with over 11%. Refer to Table 1.1.5 and Figure 1.1.3.
- ⚡ In the EMA and HSDA, women make up a larger percentage of the black/African-American population than men, and men are a larger percentage of the Hispanic/Latino population than women. Refer to Table 1.1.6.
- ⚡ Of the Hispanic/Latino population, the largest percentage is of Mexican heritage. Mexicans comprise 24% of Harris County residents and 22% of Wharton County residents.
- ⚡ Twenty percent of EMA and HSDA residents were born outside the U.S. This compares to 14% in the state of Texas. In both the region and the state, these

foreign born residents most frequently come from North, Central and South America. Mexico is the most frequent place of foreign birth, accounting for about half of those born outside the U.S.


 Approximately 4% of the EMA and HSDA populations were born in Asia.

Table 1.1.5
HOUSTON EMA/HSDA COUNTIES AND TOTAL
POPULATION BY RACE AND ETHNICITY
2000

COUNTY	TOTAL POP	WHITE, NON- HISPANIC	BLACK/AFR AMERICAN, NON-HISPANIC	HISPANIC/LATINO	ASIAN, NON-HISPANIC	OTHER, NON- HISPANIC
N	%	%	%	%	%	%
Chambers	26,031	77.6%	9.7%	10.8%	0.7%	1.2%
Fort Bend	354,355	46.2%	19.6%	21.1%	11.2%	1.9%
Harris	3,399,186	42.1%	18.2%	32.9%	5.1%	1.6%
Liberty	70,136	74.6%	12.8%	10.9%	0.3%	1.5%
Montgomery	293,688	81.4%	3.4%	12.6%	1.1%	1.4%
Waller	32,660	49.9%	29.1%	19.4%	0.4%	1.3%
EMA TOTAL	4,176,056	46.1%	17.2%	29.9%	5.2%	1.6%
Austin	23,589	71.9%	10.5%	16.1%	0.3%	1.2%
Colorado	20,387	64.6%	14.5%	19.7%	0.2%	1.0%
Walker	61,733	60.1%	23.8%	14.1%	0.8%	1.3%
Wharton	41,170	53.0%	14.7%	31.3%	0.3%	0.7%
HSDA TOTAL	4,322,935	46.6%	17.3%	29.6%	5.0%	1.6%
TEXAS TOTAL	20,851,820	52.4%	11.3%	32.0%	2.7%	1.6%
Source: U.S. Bureau of the Census, United States 2000 (www.census.gov). Retrieved on March 25, 2004.						
Percentage calculations are based on the total population of each gender						

Table 1.1.6
HOUSTON EMA/HSDA TOTAL
POPULATION BY RACE, ETHNICITY AND GENDER
2000

COUNTY	TOTAL POP	WHITE, NON-HISPANIC	BLACK/AFR AMERICAN, NON-HISPANIC	HISPANIC/LATINO	ASIAN, NON-HISPANIC	OTHER, NON-HISPANIC
	N	%	%	%	%	%
EMA FEMALE	2,098,020	46.5%	18.3%	28.5%	5.2%	1.6%
EMA MALE	2,079,626	45.6%	16.2%	31.3%	5.2%	1.7%
HSDA FEMALE	2,165,988	47.0%	18.2%	28.2%	5.0%	1.6%
HSDA MALE	2,158,584	46.1%	16.3%	31.0%	5.0%	1.7%

Source: U.S. Bureau of the Census, United States 2000 (www.census.gov). Retrieved on March 25, 2004.

Percentage calculations are based on the total population of each gender

Figure 1.1.2
HOUSTON EMA/HSDA AND TEXAS TOTAL
POPULATION BY RACE AND ETHNICITY
2000

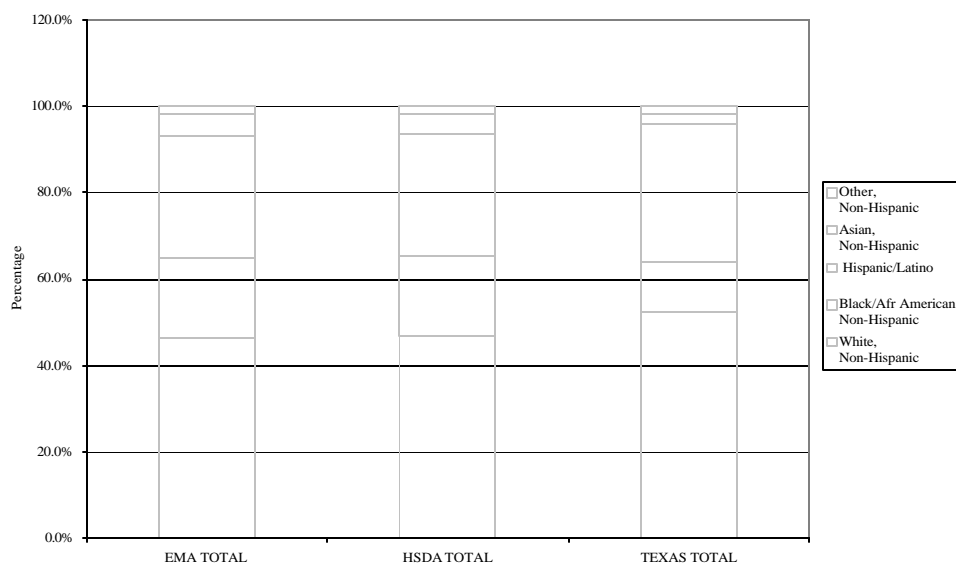


Figure 1.1.3
HOUSTON EMA/HSDA COUNTIES
POPULATION BY RACE AND ETHNICITY
2000

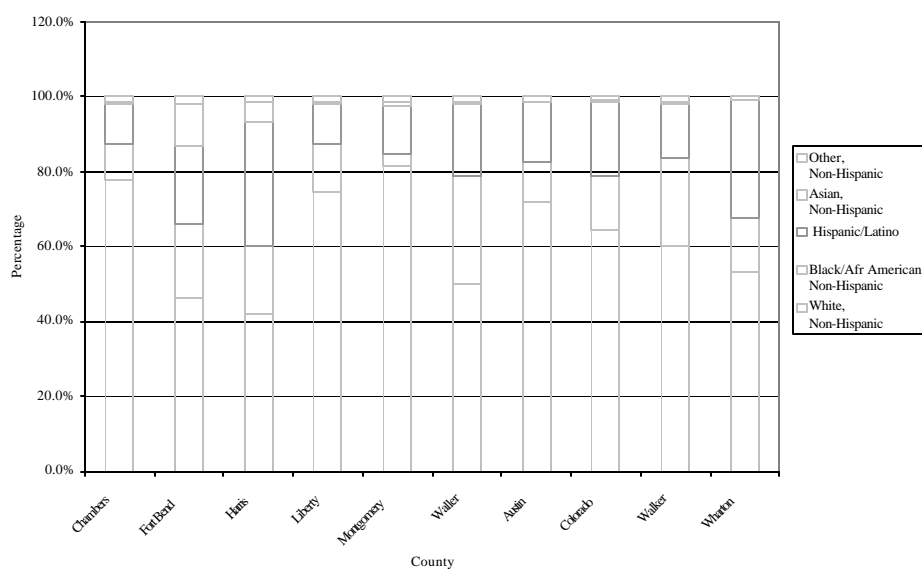


Table 1.1.7
HOUSTON EMA/HSDA COUNTIES AND TOTAL
HISPANIC/LATINO BY COUNTRY OF ORIGIN
2000

County	Total Pop	Hispanic or Latino	Mexican	Puerto Rican	Cuban	Central American	South American	Other Hispanic or Latino
Chambers	26,031	10.8%	9.2%	0.1%	0.1%	0.1%	0.0%	1.3%
Fort Bend	354,452	21.1%	14.5%	0.3%	0.3%	1.0%	0.7%	4.3%
Harris	3,400,578	32.9%	24.0%	0.4%	0.2%	2.3%	0.7%	5.3%
Liberty	70,154	10.9%	9.2%	0.1%	0.0%	0.1%	0.0%	1.4%
Montgomery	293,768	12.6%	9.5%	0.2%	0.1%	0.7%	0.3%	1.9%
Waller	32,663	19.4%	16.0%	0.2%	0.1%	0.2%	0.1%	2.8%
EMA TOTAL	4,177,646	29.9%	21.7%	0.3%	0.2%	2.0%	0.6%	4.9%
Austin	23,590	16.1%	13.4%	0.1%	0.2%	0.2%	0.1%	2.2%
Colorado	20,390	19.7%	15.4%	0.1%	0.2%	0.1%	0.1%	4.0%
Walker	61,758	14.1%	11.7%	0.1%	0.0%	0.8%	0.1%	1.4%
Wharton	41,188	31.3%	22.1%	0.1%	0.1%	0.1%	0.0%	8.9%
HSDA TOTAL	4,324,572	29.6%	21.5%	0.3%	0.2%	2.0%	0.6%	4.9%
TEXAS TOTAL	20,851,820	32.0%	24.3%	0.3%	0.1%	0.7%	0.2%	6.2%

Source: U.S. Bureau of the Census, United States 2000 (www.census.gov). Retrieved on March 25, 2004.

Percentage calculations are based on the total population of each gender

Figure 1.1.4
HOUSTON EMA/HSDA AND TEXAS
HISPANIC/LATINO BY COUNTRY OF ORIGIN
2000

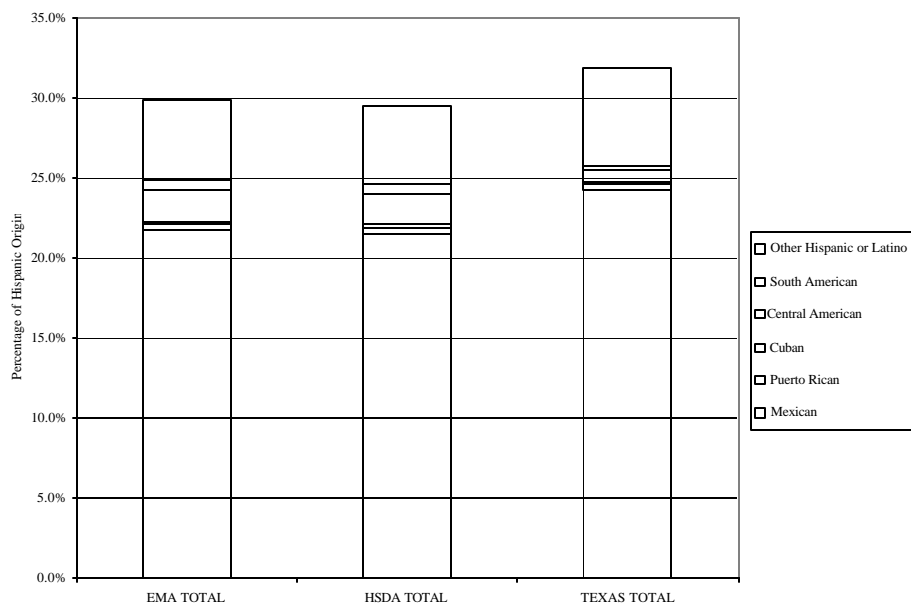


Figure 1.1.5
HOUSTON EMA/HSDA COUNTIES
HISPANIC/LATINO BY COUNTRY OF ORIGIN
2000

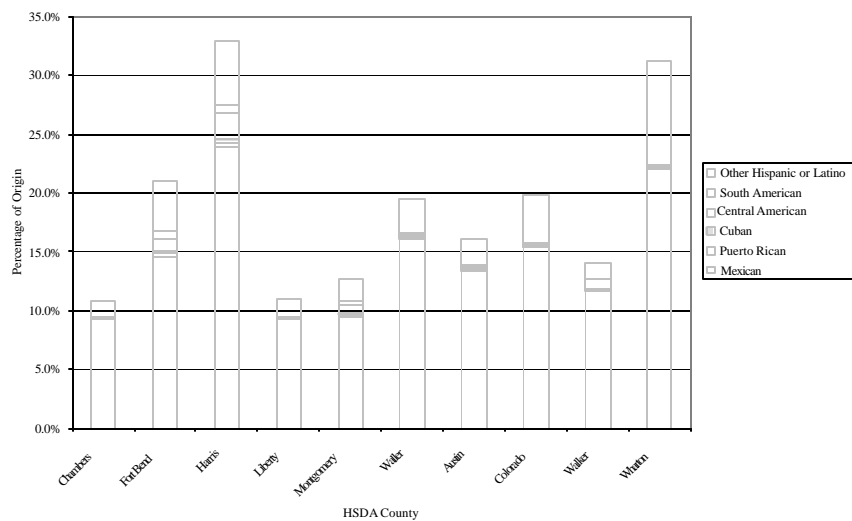
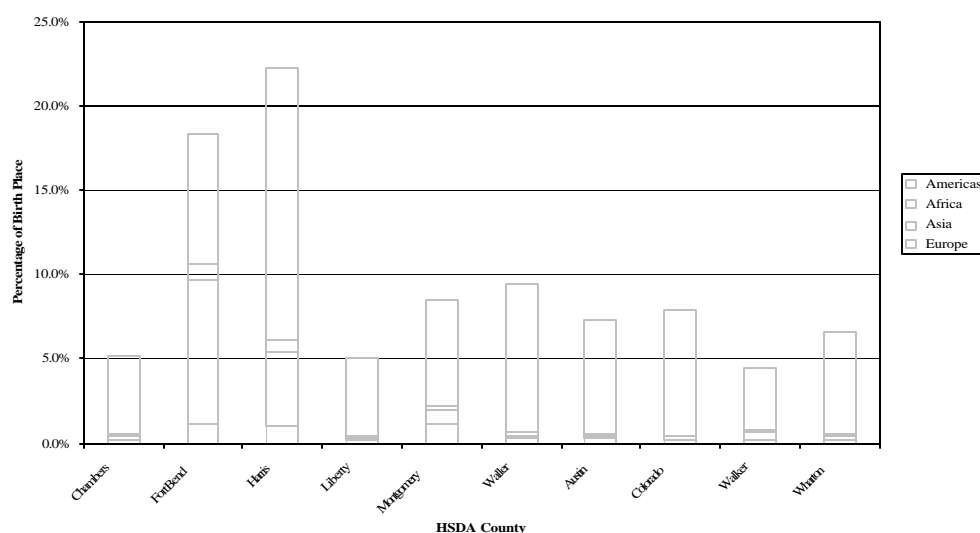


Table 1.1.8
HOUSTON EMA/HSDA COUNTIES AND TOTAL
FOREIGN BORN BY PLACE OF BIRTH
2000

COUNTY	TOTAL POPULATION	TOTAL FOREIGN BORN	BIRTH PLACE FOR FOREIGN BORN				
			EUROPE	ASIA	AFRICA	AMERICAS	MEXICO
Chambers	26,031	5.1%	0.1%	0.3%	0.0%	4.6%	4.4%
Fort Bend	354,452	18.3%	1.2%	8.4%	1.0%	7.6%	4.5%
Harris	3,400,578	22.2%	1.1%	4.3%	0.7%	16.1%	11.6%
Liberty	70,154	5.1%	0.1%	0.2%	0.1%	4.7%	4.3%
Montgomery	293,768	8.6%	1.1%	0.9%	0.2%	6.4%	4.7%
Waller	32,663	9.4%	0.3%	0.2%	0.2%	8.8%	8.0%
EMA TOTAL	4,177,646	20.5%	1.1%	4.3%	0.6%	14.4%	10.3%
Austin	23,590	7.3%	0.3%	0.1%	0.0%	6.8%	6.1%
Colorado	20,390	7.9%	0.2%	0.2%	0.0%	7.5%	7.1%
Walker	61,758	4.5%	0.2%	0.4%	0.1%	3.7%	2.8%
Wharton	41,188	6.6%	0.1%	0.3%	0.1%	6.1%	5.7%
HSDA TOTAL	4,324,572	20.0%	1.0%	4.2%	0.6%	14.1%	10.2%
TEXAS TOTAL	20,851,820	13.9%	3.5%	10.8%	1.5%		
Source: U.S. Bureau of the Census, United States 2000 (www.census.gov). Retrieved on March 25, 2004.							
Percentage calculations are based on the total population of each gender							

Figure 1.1.6
HOUSTON EMA/HSDA COUNTIES
FOREIGN BORN BY PLACE OF BIRTH
2000



Linguistic Isolation

Approximately one-third of EMA and HSDA residents are “linguistically isolated,” meaning they speak English less than “very well.”

- More than one-third of the people living in Harris County and 30% of the people living in Fort Bend speak English less than “very well.”
- The largest percentages of linguistically isolated people are Spanish speaking.
- More than one-quarter of those who speak Indo-European languages are linguistically isolated.
- Very few of those speaking Asian and Pacific Islander languages report being linguistically isolated. Refer to Table 1.1.9.

Table 1.1.9
HOUSTON EMA/HSDA COUNTIES AND TOTAL
LINGUISTIC ISOLATION
2000

COUNTY	TOTAL 5+ POP	ENGLISH ONLY POP	SPEAK OTHER THAN ENGLISH						
			TOTAL POP	SPANISH		INDO-EUROPEAN		SPEAK ASIAN AND PACIFIC ISLAND	
				TOTAL POP	LI	TOTAL POP	LI	TOTAL POP	LI
Chambers	24,205	88.3%	2,834	2,265	43.9 %	460	29.1 %	87	8.0 %
Fort Bend	327,666	69.3%	100,596	57,612	40.0 %	16,603	24.8 %	22,409	4.4 %
Harris	3,121,999	63.8%	1,129,856	898,885	52.9 %	87,470	28.2 %	116,285	4.5 %
Liberty	65,425	87.7%	8,030	7,042	44.4 %	733	13.4 %	129	0.0 %
Montgomery	271,298	86.2%	37,552	31,077	49.4 %	4,258	18.3 %	1,854	6.0 %
Waller	30,397	81.9%	5,513	4,994	52.9 %	364	25.0 %	74	13.5 %
EMA TOTAL	3,840,990	66.6%	1,284,381	1,001,875	52.0 %	109,888	27.2 %	140,838	4.5 %
Austin	22,056	82.9%	3,770	2,967	46.6 %	795	29.1 %	87	8.0 %
Colorado	19,150	80.1%	3,818	3,130	49.1 %	626	26.0 %	24	54.2 %
Walker	58,854	85.7%	8,390	7,586	44.4 %	455	18.2 %	285	1.1 %
Wharton	38,401	73.3%	10,239	9,145	35.7 %	989	19.3 %	74	5.4 %
HSDA TOTAL	3,979,451	67.1%	1,310,598	1,024,703	51.8 %	112,753	27.1 %	141,308	4.5 %
TEXAS TOTAL	19,241,518	68.8%	6,010,753	5,195,182	45.6 %	358,019	25.8 %	374,330	4.6 %

Source: U.S. Bureau of the Census, United States 2000 (www.census.gov). Retrieved on March 25, 2004.

Linguistic Isolation = speaks English less than "very well."

Total Pop reflects all speaking that language.

LI = Percentage of those speaking the language who are linguistically isolated/speak English less than "very well."

Socioeconomic Status

Median household income helps explain how much money people in the region earn. Since it is for “household, it is the combined amount of money earned by everyone living in a household. The “median income” means that half the people living in the region/county earn less than that amount and half earn more. While the higher median income is better for the region, it has to be considered against the cost of living in an area and the number of people in each household. Typically, the cost of living in urban areas is higher than in rural areas.

People living in the EMA and HSDA have higher median household incomes than people throughout the entire state of Texas. Within the EMA, the median income is nearly \$47,000 per year which is \$5,000 higher than in the HSDA and \$7,000 higher than is found in the state.




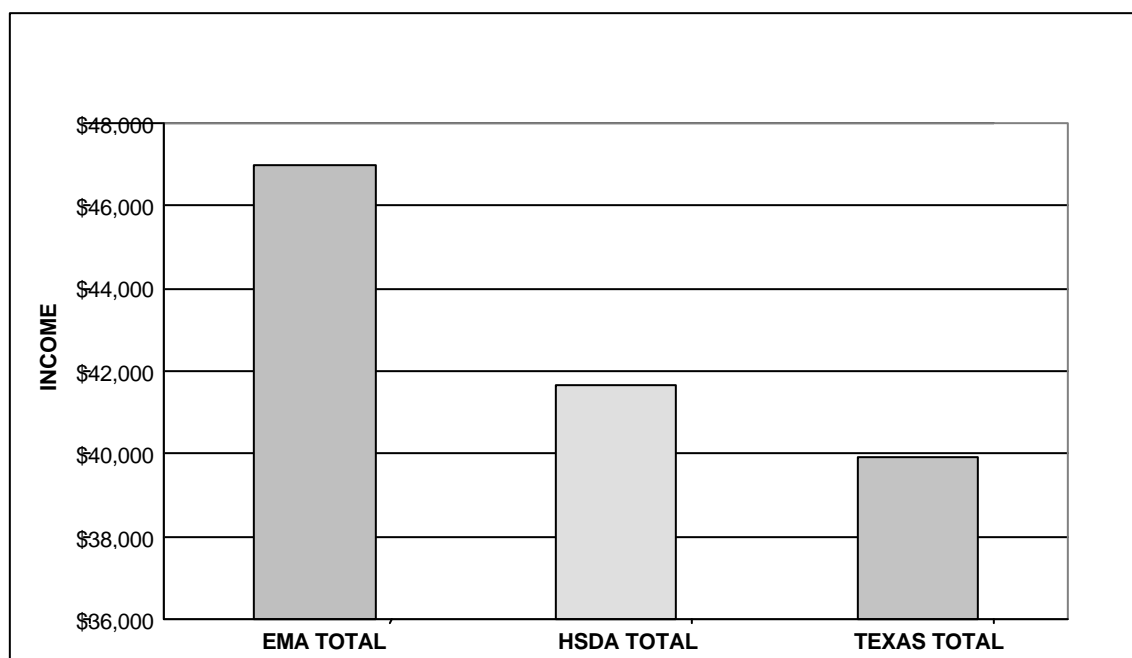
-  Fort Bend County residents have the highest median household income of all the counties in the HSDA with nearly \$64,000 per year.
-  The area with the second highest median income is Montgomery County with over \$50,000 per year.
-  Counties with the lowest median household income are three of the four HSDA counties outside the EMA—Colorado, Wharton and Walker. Refer to Table 1.1.10 and Figure 1.1.7.

Table 1.1.10
HOUSTON EMA/HSDA COUNTIES AND TOTAL
MEDIAN HOUSEHOLD INCOME
2000

COUNTY	MEDIAN HOUSEHOLD INCOME
Chambers	\$47,964
Fort Bend	\$63,831
Harris	\$42,598
Liberty	\$38,361
Montgomery	\$50,864
Waller	\$38,136
EMA TOTAL	\$46,959
Austin	\$38,615
Colorado	\$32,425
Walker	\$31,468
Wharton	\$32,208
HSDA TOTAL	\$41,647
TEXAS TOTAL	\$39,927
Source: U.S. Bureau of the Census, United States 2000 (www.census.gov). Retrieved on March 25, 2004.	

Figure 1.1.7
HOUSTON EMA/HSDA AND TEXAS TOTAL
MEDIAN HOUSEHOLD INCOME
2000



OWNER COST AND GROSS RENT AS A PERCENTAGE OF HOUSEHOLD INCOME

The U. S. Census Bureau tracks the percentage of household income that is spent on housing. For people that own their homes, owner cost includes all expenses required to own a home such as mortgage payments, real estate taxes, homeowners' insurance, utilities, condominium and association fees, etc. For people that rent their home or apartment, this includes rent, utilities and other associated costs. These costs are reported as a percentage of household income. Unfortunately, the same percentages are not used for owner cost and renter cost, so direct comparisons are not possible. (Table 1.1.11 and Table 1.1.12)

- ⚠ Considering owner cost, five HSDA counties have approximately two-thirds of residents whose owner cost is less than 20% of household income. These are generally rural counties.
- ⚠ The counties with the most residents with owner costs more than 20% of household income are the most urban counties, including Fort Bend (54.1%), Harris (59.1%) and Montgomery (60.3%).

- ⚠ Waller County has the highest percentage with owner cost greater than 35% of income (17.1%). This is followed by Fort Bend County (14.3%) and Harris County (14.3%). Refer to Table 1.1.11
- ⚠ Chambers, Liberty and Austin Counties have the lowest renter costs, including the largest percentages of their populations with renter costs below 15% of income.
- ⚠ Walker County has the highest renter cost, with 42% of the population spending 35% or more of their incomes on rent. This is followed by Waller County with 29% of their residents at that level. Harris, Liberty and Montgomery all have approximately 27% of their residents dedicating 35% or more of their incomes to rent. (Table 1.1.12)

Table 1.1.11
HOUSTON EMA/HSDA COUNTIES
OWNER COST AS PERCENTAGE OF HOUSEHOLD INCOME
2000

COUNTY	TOTAL	<20%	20-24%	25-34%	>35%
	N ¹	%	%	%	%
Chambers	5,320	68.1%	11.7%	9.4%	10.7%
Fort Bend	81,296	54.1%	15.6%	15.6%	14.7%
Harris	592,221	59.1%	13.4%	13.2%	14.3%
Liberty	10,097	66.5%	10.4%	11.3%	11.8%
Montgomery	59,089	60.3%	14.3%	12.8%	12.5%
Waller	4,125	61.0%	11.2%	10.7%	17.1%
EMA TOTAL	752,148	58.8%	13.7%	13.4%	14.1%
Austin	3,956	68.0%	10.0%	10.9%	11.1%
Colorado	3,742	69.6%	6.9%	10.1%	13.4%
Walker	6,165	64.2%	12.5%	11.3%	12.0%
Wharton	7,592	68.2%	9.9%	10.2%	11.7%
HSDA TOTAL	773,603	59.0%	13.6%	13.3%	14.1%
TEXAS TOTAL	3,809,005	59.6%	13.4%	13.3%	13.7%
Source: U.S. Bureau of the Census, United States 2000 (www.census.gov). Retrieved on March 25, 2004.					
Note ¹ : Includes only households that monthly cost was computed.					

Figure 1.1.8
HOUSTON EMA/HSDA AND TEXAS
OWNER COST AS PERCENTAGE OF HOUSEHOLD INCOME
2000

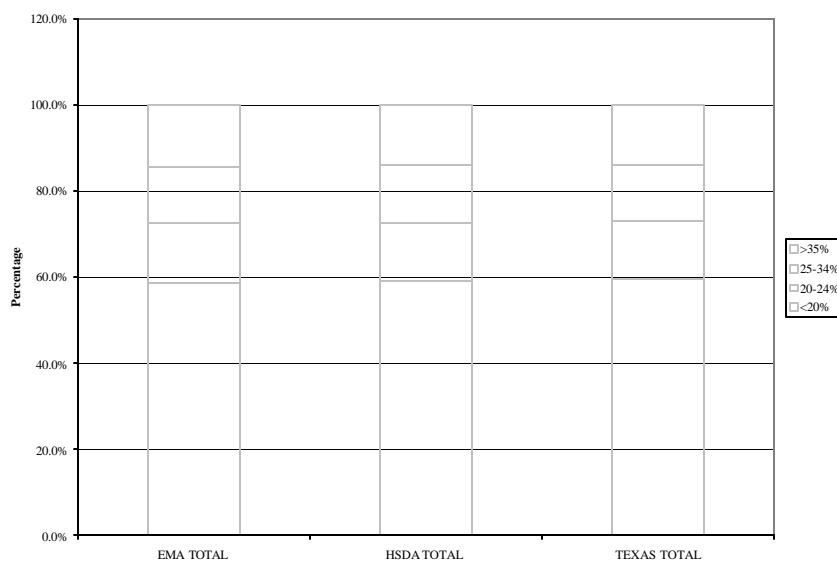


Figure 1.1.9
HOUSTON EMA/HSDA COUNTIES
OWNER COST AS PERCENTAGE OF HOUSEHOLD INCOME
2000

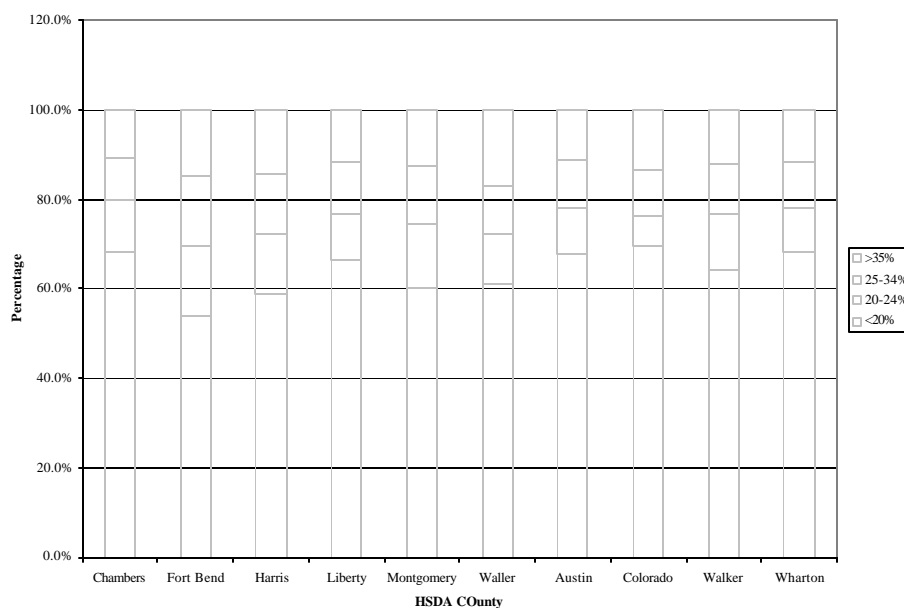
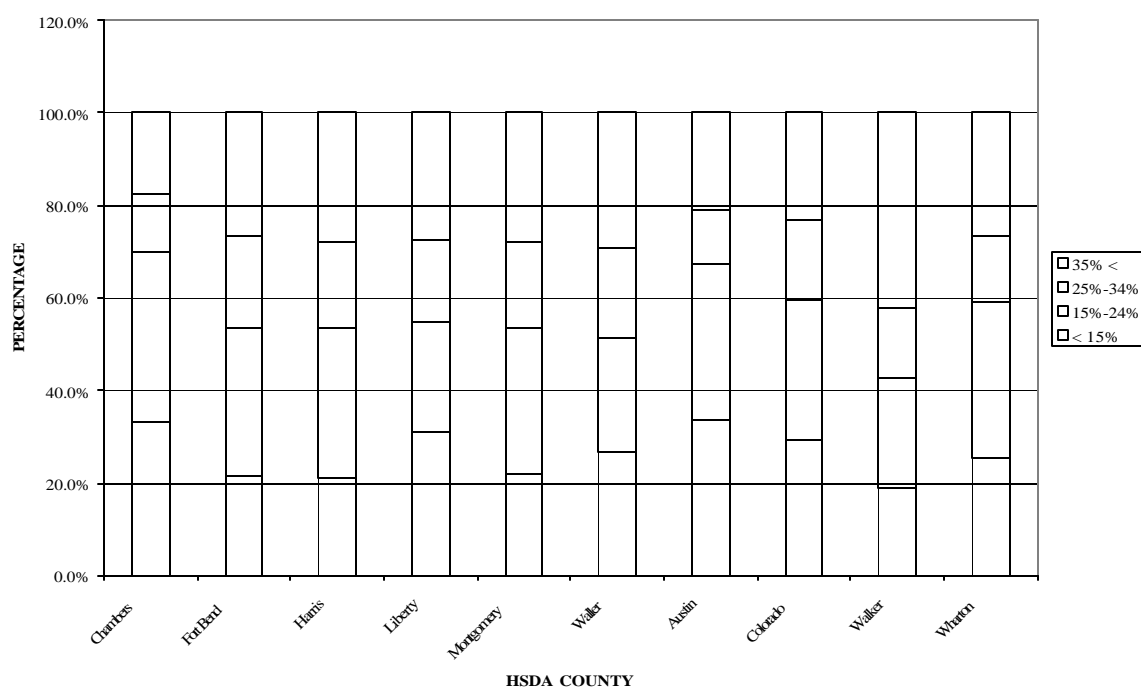


Table 1.1.12
HOUSTON EMA/HSDA COUNTIES
GROSS RENT AS A PERCENTAGE OF HOUSEHOLD INCOME
2000

County	Total households *	< 15%	15%-24%	25%-34%	>35%
Chambers	1,238	33.5%	36.3%	12.4%	17.7%
Fort Bend	19,652	21.8%	31.9%	19.8%	26.5%
Harris	507,029	21.3%	32.3%	18.6%	27.8%
Liberty	4,136	31.1%	23.8%	17.8%	27.2%
Montgomery	20,397	22.1%	31.6%	18.6%	27.7%
Waller	2,341	27.0%	24.5%	19.2%	29.3%
EMA TOTAL	554,793	21.5%	32.1%	18.7%	27.7%
Austin	1,581	33.6%	33.5%	12.0%	20.8%
Colorado	1,305	29.6%	30.2%	17.2%	23.0%
Walker	6,423	18.9%	23.9%	15.3%	41.9%
Wharton	3,769	25.4%	33.9%	14.3%	26.4%
HSDA TOTAL	567,871	21.5%	32.1%	18.6%	27.8%

Note*: Total households of which rental statistics are calculated. Source: U.S. Bureau of the Census, United States 2000 (www.census.gov). Retrieved on March 25, 2004.

Figure 1.1.10
HOUSTON EMA/HSDA COUNTIES
GROSS RENT AS PERCENTAGE OF HOUSEHOLD INCOME



EMPLOYMENT STATUS

Information on unemployment is available from the state of Texas. In 2003, unemployment in the EMA, HSDA and state was 6.8% to 6.9%. Refer to Table 1.1.13.

- ⚠ The county with the highest unemployment was Liberty, with 10.4% unemployment.
- ⚠ Those with the lowest were Walker (3.3%), Austin and Colorado (both with 4.8%).
- ⚠ It should be noted that although employment is high in Walker and Colorado Counties, median household income is among the lowest in the region.

Table 1.1.13
HOUSTON EMA/HSDA COUNTIES
EMPLOYMENT STATUS OF RESIDENTS OVER 16 YEARS OF AGE
2003

COUNTY	POP 16+	IN LABOR FORCE	UNEMPLOYED	UNEMPLOYED
Chambers	21,033	13,010	810	6.2%
Fort Bend	282,690	208,885	12,291	5.9%
Harris	2,654,562	1,891,103	132,911	7.0%
Liberty	56,120	31,972	3,341	10.4%
Montgomery	238,131	160,205	8,577	5.4%
Waller	27,222	15,177	1,033	6.8%
EMA TOTAL	3,279,758	2,320,352	158,963	6.9%
Austin	18,726	14,341	692	4.8%
Colorado	16,186	8,446	409	4.8%
Walker	53,685	23,973	803	3.3%
Wharton	31,688	19,695	1,353	6.9%
HSDA TOTAL	3,400,043	2,386,807	162,220	6.8%
TEXAS TOTAL	16,454,277	10,910,344	737,516	6.8%

Source: Texas Workforce Commission's Labor Market Information Department (www.tracer2.com). Retrieved on March 25, 2004.

Unemployed % is based on the number of in labor force.

EDUCATIONAL ATTAINMENT

Educational attainment reflects each person in an area's highest grade in school. The EMA, HSDA and state are similar with 11% going through eighth grade or less, 13% going to high school, but not graduating, approximately half graduating from high school and possibly attending some college, and roughly one quarter receiving a bachelor's degree in college or higher. Refer to Table 1.1.14 and Figures 1.1.11 and 1.1.12.



-  Counties with the highest percentage getting their high school diploma or more include: Fort Bend (84.3%), Montgomery (81.6%), Chambers (77.0%), Harris (74.6%), and Waller (73.9%).
-  Counties with the highest percentage of residents who did not go beyond eighth grade include: Colorado, Wharton, Austin and Harris.

Table 1.1.14
HOUSTON EMA/HSDA COUNTIES
EDUCATIONAL ATTAINMENT
2000

COUNTY	TOTAL POP >25	LESS THAN 9TH GRADE	9TH-12TH GRADE, NO DIPLOMA	HIGH SCHOOL GRADUATE, SOME COLLEGE, ASSOCIATE	BACHELOR OR HIGHER
Chambers	16,348	8.5%	14.5%	64.9%	12.1%
Fort Bend	214,461	7.2%	8.5%	47.4%	36.9%
Harris	2,067,399	12.1%	13.3%	47.7%	26.9%
Liberty	44,206	10.5%	19.9%	61.5%	8.1%
Montgomery	183,743	6.3%	12.1%	56.3%	25.3%
Waller	18,395	11.1%	15.1%	57.1%	16.8%
EMA TOTAL	2,544,552	11.2%	12.9%	48.7%	27.2%
Austin	15,280	12.2%	13.2%	57.2%	17.3%
Colorado	13,383	15.6%	15.3%	54.6%	14.4%
Walker	36,678	10.4%	16.6%	54.7%	18.3%
Wharton	25,567	15.5%	14.7%	55.4%	14.3%
HSDA TOTAL	2,635,460	11.3%	13.0%	48.9%	26.8%
TEXAS TOTAL	12,790,893	11.5%	12.9%	52.4%	23.2%
Source: U.S. Bureau of the Census, United States 2000 (www.census.gov). Retrieved on March 25, 2004.					
Note ¹ is based on 25+ total population.					

Figure 1.1.11
HOUSTON EMA/HSDA AND TEXAS
2000 EDUCATIONAL ATTAINMENT
2000

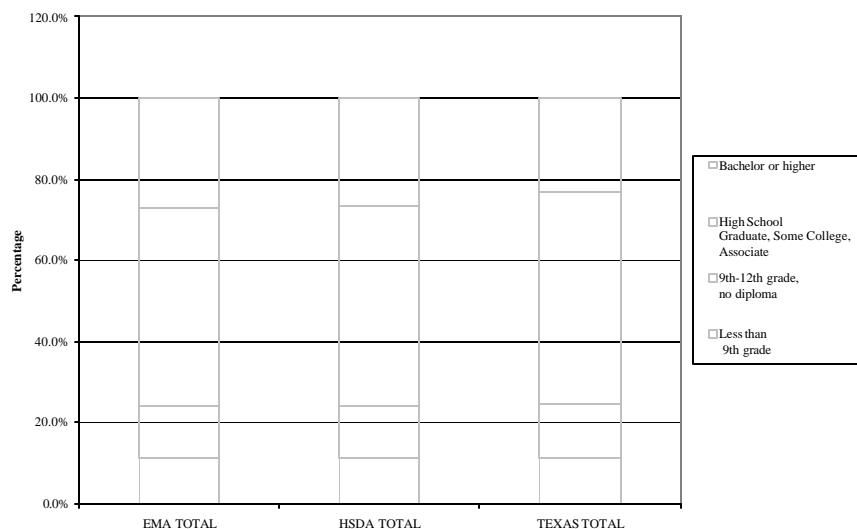
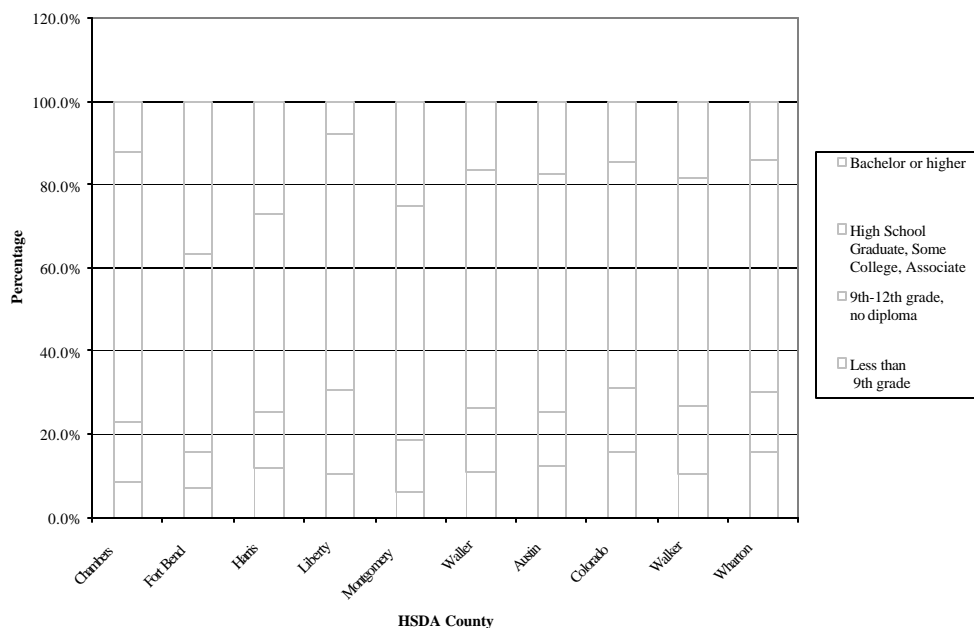


Figure 1.1.12
HOUSTON EMA/HSDA COUNTIES
2000 EDUCATIONAL ATTAINMENT
2000



POVERTY STATUS

Both the EMA and the HSDA have lower rates of poverty than in Texas overall, with 13.9% and 14%, respectively, living in poverty compared to 15.4% for the state. Both the local and statewide percentages are larger than the 12.4% nationally who are living in poverty.





-  Counties with the highest levels of poverty include Walker, Colorado and Wharton which are three of the four counties that are only part of the HSDA, and Waller and Harris in the EMA.
-  Blacks in the EMA and HSDA make up a higher percentage of those living in poverty than is found throughout the state. Whites and Hispanics in the EMA and HSDA represent smaller percentages of those living in poverty when compared with the state overall. (Table 1.1.15)
-  Children and others under 25 years of age are a large percentage of those living in poverty throughout the EMA, HSDA and state. (Table 1.1.16)
-  Families with single females as head of household comprise a large percentage of families in poverty. (Table 1.1.17)

Table 1.1.15
HOUSTON EMA/HSDA COUNTIES
POVERTY BY RACE
2000

POVERTY LEVEL BY RACE								
COUNTY	TOTAL N	POPULATION FOR WHOM POVERTY STATUS IS DETERMINED: BELOW POVERTY LEVEL			WHITE %*	BLACK %*	OTHER* %*	HISPANI C* %*
		N	%					
Chambers	25,719	2,833	11.0%		6.5%	2.5%	2.1%	2.6%
Fort Bend	349,010	24,953	7.1%		2.9%	1.7%	2.6%	3.3%
Harris	3,360,536	503,234	15.0%		6.0%	4.2%	4.8%	7.5%
Liberty	64,878	9,296	14.3%		9.5%	3.0%	1.8%	2.8%
Montgomery	291,519	27,376	9.4%		7.0%	0.9%	1.5%	2.4%
Waller	29,487	4,718	16.0%		6.0%	6.5%	3.5%	5.4%
EMA TOTAL	4,121,149	572,410	13.9%		5.9%	3.7%	4.3%	6.7%
Austin	23,345	2,814	12.1%		6.5%	2.6%	3.0%	4.7%
Colorado	19,543	3,171	16.2%		8.0%	4.9%	3.3%	5.0%
Walker	44,904	8,253	18.4%		10.6%	6.1%	1.6%	2.6%
Wharton	40,519	6,703	16.5%		8.1%	4.4%	4.0%	7.9%
HSDA TOTAL	4,249,460	593,351	14.0%		6.0%	3.8%	4.2%	6.6%
TEXAS TOTAL	20,287,300	3,117,609	15.4%		8.9%	2.6%	3.9%	8.2%
Source: U.S. Bureau of the Census, United States 2000 (www.census.gov). Retrieved on March 25, 2004.								
*** Hispanic and other races are not mutually exclusive.								
*** All the percentages are based on total population of whom population status is determined.								

Table 1.1.16
HOUSTON EMA/HSDA COUNTIES
POVERTY BY AGE AND GENDER
2000

POVERTY BY AGE								
	MALE							
	TOTAL POPULATION	INCOME BELOW POVERTY LEVEL ;			<25	25-44	45-64	65 =
	N	N	%		%	%	%	%
Chambers	25,719	1,213	4.7%		2.5%	0.8%	1.0%	0.3%
Fort Bend	349,010	11,438	3.3%		1.8%	0.8%	0.5%	0.2%
Harris	3,360,536	233,388	6.9%		3.9%	1.9%	0.8%	0.3%
Liberty	64,878	3,991	6.2%		3.5%	1.3%	1.0%	0.4%
Montgomery	291,519	12,091	4.1%		2.2%	1.1%	0.6%	0.3%
Waller	29,487	2,391	8.1%		4.6%	2.0%	1.2%	0.3%
EMA TOTAL	4,121,149	264,512	6.4%		3.6%	1.8%	0.8%	0.3%
Austin	23,345	1,200	5.1%		2.5%	1.1%	1.0%	0.5%
Colorado	19,543	1,285	6.6%		3.4%	1.3%	1.0%	0.8%
Walker	44,904	3,672	8.2%		5.7%	1.3%	0.8%	0.5%
Wharton	40,519	3,024	7.5%		3.7%	1.6%	1.5%	0.7%
HSDA TOTAL	4,249,460	273,693	6.4%		3.6%	1.8%	0.8%	0.3%
TEXAS POPULATION	20,287,300	1,406,608	6.9%		4.0%	1.7%	0.9%	0.4%
	FEMALE							
	TOTAL POPULATION	INCOME BELOW POVERTY LEVEL ;			<25	25-44	45-64	65 =
	N	N	%		%	%	%	%
Chambers	25,719	1,620	6.3%		2.5%	1.7%	1.3%	0.7%
Fort Bend	349,010	13,515	3.9%		1.8%	1.2%	0.6%	0.4%
Harris	3,360,536	269,846	8.0%		4.0%	2.5%	1.0%	0.6%
Liberty	64,878	5,305	8.2%		3.4%	2.3%	1.2%	1.2%
Montgomery	291,519	15,285	5.2%		2.3%	1.5%	0.9%	0.6%
Waller	29,487	2,327	7.9%		3.7%	2.3%	1.0%	0.9%
EMA TOTAL	4,121,149	307,898	7.5%		3.6%	2.3%	1.0%	0.6%
Austin	23,345	1,614	6.9%		2.7%	1.6%	1.1%	1.5%
Colorado	19,543	1,886	9.7%		4.1%	2.1%	1.4%	2.1%
Walker	44,904	4,581	10.2%		6.3%	2.1%	0.8%	1.1%
Wharton	40,519	3,679	9.1%		3.8%	2.0%	1.6%	1.7%
HSDA TOTAL	4,249,460	319,658	7.5%		3.7%	2.3%	1.0%	0.6%
TEXAS POPULATION	20,287,300	1,711,001	8.4%		4.2%	2.3%	1.7%	0.8%
Source: U.S. Bureau of the Census, United States 2000 (www.census.gov). Retrieved on March 25, 2004.								
*** All the percentages are based on total population of each gender.								

Table 1.1.17
HOUSTON EMA/HSDA COUNTIES
POVERTY BY FAMILY LEVEL
2000

COUNTY	FAMILIES: TOTAL	FAMILIES: INCOME IN 1999 BELOW POVERTY LEVEL		MARRIED- COUPLE FAMILY	MALE HOUSEHOLDER; NO WIFE PRESENT	FEMALE HOUSEHOLDER; NO HUSBAND PRESENT
	N	N	%	%	%	%
Chambers	7,221	601	8.3%	4.4%	0.5%	3.4%
Fort Bend	93,808	5,139	5.5%	2.8%	0.5%	2.2%
Harris	840,630	101,693	12.1%	5.8%	1.1%	5.2%
Liberty	17,937	1,998	11.1%	5.5%	0.8%	4.8%
Montgomery	80,723	5,766	7.1%	3.8%	0.5%	2.9%
Waller	7,837	901	11.5%	6.2%	1.3%	4.1%
EMA TOTAL	1,048,156	116,098	11.1%	5.4%	1.0%	4.7%
Austin	6,493	570	8.8%	5.5%	0.5%	2.8%
Colorado	5,385	660	12.3%	6.2%	0.9%	5.2%
Walker	11,533	1,225	10.6%	5.1%	0.9%	4.6%
Wharton	10,774	1,430	13.3%	6.7%	1.5%	5.0%
HSDA TOTAL	1,082,341	119,983	11.1%	5.4%	1.0%	4.7%
TEXAS POP	5,283,474	632,676	12.0%	6.0%	1.0%	5.1%

HEALTH AND INSURANCE STATUS

As a state, Texas ranked first in the U.S. in 1998 according to percent of population uninsured (24.5%) and second in size of the uninsured population (4,880,000). In the HSDA, county populations ranged between one fifth and one-quarter uninsured.

- ⚠ Overall, Austin County had the lowest percentage of uninsured, 19.9%, and Harris County had the highest, 25.5%.
- ⚠ Chambers County had the lowest percentage of uninsured children (20.8%) and Harris County had the highest (25.5%).
- ⚠ Montgomery County had the lowest percentage of uninsured adults (22.6%) and Waller County had the highest (30.1%).
- ⚠ A demographic breakdown of those living without insurance was not available by county. Statewide, the majority was male (53.6%) and Hispanic (48.3%).

Table 1.1.18
HOUSTON EMA/HSDA COUNTIES
ESTIMATED PERCENTAGE OF RESIDENTS WITHOUT INSURANCE
1999

	ALL PEOPLE	0-18 YEARS OLD	19-64 YEARS OLD
	%	%	%
CHAMBERS	20.3	20.8	23.7
FORT BEND	22.7	22.4	24.6
HARRIS	25.5	25.5	28.1
LIBERTY	22.4	22.8	26.2
MONTGOMERY	20.1	21.0	22.6
WALLER	25.4	25.1	30.1
AUSTIN	19.9	22.7	24.4
COLORADO	20.8	24.0	26.7
WALKER	25.4	22.9	29.5
WHARTON	23.1	25.0	27.5
TEXAS	24.5		
Source: "Houston-Area 2002 Epidemiological Profile," page 10. Texas Health and Human Services Commission			

Natality Characteristics

Natality statistics provide information about births in the region. These include general information such as birth rate and fertility rate as well as risk information that reflect risk to either the mother or baby.








-  Harris County has the highest birth rate and fertility rate in both the EMA and the HSDA. The birth rate ranks seventeenth out of all counties in the state, and the fertility rate is thirty-ninth. High birth and fertility rates result in a growing county population.
-  The nine other EMA and HSDA counties have birth rates and fertility rates that are lower than the state of Texas overall.
-  Wharton County demonstrates the highest risk in the percentage of adolescent mothers and lack of prenatal care in the first trimester, but their percentage of low birth weight infants is one of the lowest in the region.
-  Liberty, Austin, Colorado and Wharton counties have higher percentages of adolescent mothers than found in the state.
-  Chambers, Liberty, Austin and Wharton counties have higher percentages of mothers who do not receive prenatal care in the first trimester than found in the state.
-  Harris, Waller and Colorado counties have higher percentages of low birth weight infants than found in Texas overall. Refer to Table 1.1.19.
-  Infant mortality is presented in Table 1.1.19 with other mortality statistics. Chambers, Liberty, Montgomery, Colorado and Walker counties have higher infant death rates than found in the state overall.

Table 1.1.19
HOUSTON EMA/HSDA COUNTIES
RATES AND COUNTY RANKINGS FOR NATALITY CHARACTERISTICS
1998 - 2000

	CRUDE BIRTH RATE		FERTILITY RATE	
	RATE	RANK	RATE	RANK
CHAMBERS	12.1	171	53.2	232
FORT BEND	14.2	104	58.7	202
HARRIS	18.7	17	81.3	39
LIBERTY	15.2	71	70.6	88
MONTGOMERY	15.5	63	67.6	119
WALLER	16.1	50	65.5	147
AUSTIN	14.8	86	73	72
COLORADO	13	145	67.6	119
WALKER	10.3	225	50	242
WHARTON	14.9	80	71.5	83
TEXAS	17.4		76.7	
Rates reflect averages for 1998 – 2000 values and are per 100,000 population Source: "Selected Demographic and Public Health Measures: Rankings for Texas Counties 1998 – 2000"				

	ADOLESCENT MOTHERS		NO PRENATAL CARE FIRST TRIMESTER		LOW BIRTH WEIGHT	
	PERCENT	RANK	PERCENT	RANK	PERCENT	RANK
CHAMBERS	4.9	218	22.3	83	6.9	163
FORT BEND	3.4	239	13.4	222	7.3	133
HARRIS	5.3	207	18.0	144	7.5	113
LIBERTY	6.5	170	22.3	83	7.3	133
MONTGOMERY	4.4	232	17.8	147	6.5	191
WALLER	7.8	111	19.6	123	7.6	108
AUSTIN	6.2	180	22.6	77	6.7	176
COLORADO	7.8	111	20.0	114	7.8	87
WALKER	5.6	197	15.4	194	7.3	133
WHARTON	9.4	53	35.1	15	6.4	197
TEXAS	6.0		20.8		7.4	
Rates reflect averages for 1998 – 2000 values and are per 100,000 population Source: "Selected Demographic and Public Health Measures: Rankings for Texas Counties 1998 – 2000"						

MORTALITY CHARACTERISTICS

Mortality characteristics present death rates overall and for specific disease processes. These rates include deaths occurring over three years, 1998 through 2000. The 254 counties throughout Texas are ranked, and these rankings are also presented. (Refer to Table 1.1.20)




-  Liberty County has the highest mortality rate of the 10 HSDA Counties, ranking thirteenth in the state of Texas. They have the highest infant mortality rate in the state, and are in the top 15 for cancer, lower respiratory diseases and accidents.
-  Fort Bend has the lowest death rate of the ten HSDA counties, ranking 197 in the state.
-  Comparing the number of county deaths to overall deaths in the state for specific disease processes, reveals the following:
 - Liberty, Montgomery, Waller, Austin and Colorado counties have higher death rates from heart disease than the state.
 - Fort Bend, Harris, Liberty, Montgomery, Colorado and Walker counties have higher death rates from stroke than found in the state overall.
 - All EMA and HSDA counties except Fort Bend County and Austin County have higher death rates from cancer than Texas overall.
 - Chambers, Liberty, Montgomery, Waller and Walker counties have higher death rates from lower respiratory disease than Texas overall.
 - Chambers, Montgomery, Austin, Colorado and Wharton counties have higher death rates from diabetes than the state overall.
 - All EMA and HSDA counties except Fort Bend County and Harris County have higher death rates from accidents than found in the state.

Table 1.1.20
HOUSTON EMA/HSDA COUNTIES
RATES AND COUNTY RANKINGS FOR MORTALITY CHARACTERISTICS
AGE ADJUSTED DEATH RATES PER 100,000 POPULATION
1998 - 2000

	ALL DEATHS		HEART		STROKE		CANCER	
	RATE	RANK	RATE	RANK	RATE	RANK	RATE	RANK
CHAMBERS	888.2	149	237.7	186	138.7	145	227.0	48
FORT BEND	834.5	197	259.1	155	148.2	109	194.6	148
HARRIS	880.3	161	267.9	147	144.4	124	200.7	128
LIBERTY	1,092.9	13	323.3	42	147.4	113	265.0	11
MONTGOMERY	981.6	77	295.0	94	155.0	89	225.0	56
WALLER	910.2	141	301.0	82	138.9	144	211.0	99
AUSTIN	890	147	331.3	31	131.1	167	188.1	174
COLORADO	1,015.5	48	318.6	50	163.0	60	214.3	86
WALKER	983.6	74	269.5	143	155.3	87	222.1	69
WHARTON	852.9	183	239.4	181	119.9	184	208.3	106
TEXAS	891.2		269.7		141.4		198.8	

Rates reflect averages for 1998 – 2000 values
Source: "Selected Demographic and Public Health Measures: Rankings for Texas Counties 1998 – 2000"

	LOWER RESPIRATORY		DIABETES		ACCIDENTS		INFANT MORTALITY	
	RATE	RANK	RATE	RANK	RATE	RANK	RATE	RANK
CHAMBERS	52.5	58	37.4	36	49.5	85	7.4	NR
FORT BEND	34.5	135	24.5	99	25.7	150	4.9	34
HARRIS	35.5	133	27.0	84	33.9	139	5.7	29
LIBERTY	69.9	14	25.7	88	78.1	14	11.3	1
MONTGOMERY	56.6	46	31.5	59	47.4	90	6.5	21
WALLER	46.4	93	26.4	NR	60.9	43	4.1	NR
AUSTIN	28.8	144	35.5	41	57.5	51	4.8	NR
COLORADO	29.7	142	42.6	26	82.4	13	11.6	NR
WALKER	40.9	111	30.0	69	51.2	77	8.3	NR
WHARTON	21.7	149	43.7	21	42.4	110	2.2	NR
TEXAS	44.8		30.7		38.6		6.1	

Rates reflect averages for 1998 – 2000 values
Source: "Selected Demographic and Public Health Measures: Rankings for Texas Counties 1998 – 2000"
NR = 20 or fewer numerator events in the three year period are not ranked

MORBIDITY CHARACTERISTICS

Morbidity characteristics reflect the impact of an illness that does not result in death. The following presents the morbidity for two sexually transmitted diseases (STD), Chlamydia and gonorrhea and for AIDS. (Refer to Table 1.1.21)




-  Waller County has among the highest rates of both chlamydia and gonorrhea infection in the state, ranking sixth for the former and seventh for the latter.
-  Harris County is second in the state for AIDS morbidity, and also ranks highly for both STDs.
-  In the HSDA, both Walker and Wharton counties are in the top 50 counties in Texas for chlamydia and gonorrhea, with Wharton ranking 34 for the former and 28 for the latter, and Walker ranking 42 and 48, respectively.

Table 1.1.21
HOUSTON EMA/HSDA COUNTIES
RATES AND COUNTY RANKINGS FOR MORBIDITY CHARACTERISTICS
1998 - 2000

	REPORTED CASES: CHLAMYDIA		REPORTED CASES: GONORRHEA		REPORTED CASES: AIDS	
	RATE	RANK	RATE	RANK	PERCENT	RANK
CHAMBERS	69.3	196	18.0	NR	5.1	NR
FORT BEND	137.1	167	62.0	97	7.8	24
HARRIS	347.6	41	193.4	23	30.5	2
LIBERTY	170.7	141	77.3	87	10.3	16
MONTGOMERY	108.6	181	43.6	120	6.5	32
WALLER	611.8	6	325.8	7	6.7	NR
AUSTIN	142	158	80.9	84	5.7	NR
COLORADO	175.3	138	84.3	80	0	NR
WALKER	340.5	42	131.8	48	2.9	NR
WHARTON	363.5	34	183.3	28	4.8	NR
TEXAS	316.4		162.4		16.2	

Rates reflect averages for 1998 – 2000 values and are per 100,000 population

Source: "Selected Demographic and Public Health Measures: Rankings for Texas Counties 1998 – 2000"




NR = 20 or fewer numerator events in the three year period are not ranked

MEDICALLY UNDERSERVED



Medically underserved status is designated to areas or populations having a shortage of personal health care services according to U.S. Department of Health and Human Services' rules. Designations are based on weighted values assigned to the following four health care demand and resource indicators:

- Percentage of elderly population (over 65 years)
- Poverty rate
- Infant mortality rate
- Ratio of primary care physicians per 1,000 population

In order to be considered medically underserved the index score of these indicators will be less than or equal to the national average of 62.

-  Medically Underserved Areas (MUAs) are based on the demographics of the entire population in an area and the overall index scores are less than or equal to 62.
-  Medically Underserved Populations (MUPs) focus on specific populations and represent only a portion of an area's population. These specific populations encounter barriers to primary care access. The barriers may be economic (e.g. low income or Medicaid-eligible populations) or sociologic (e.g. cultural or linguistic). For only these populations the index score is less than or equal to 62. Other populations may have higher scores.
-  Exceptional MUPs (MUP-GOV) have index scores above the designated 62, but unusual local conditions that serve as barriers to access or availability of personal health services. The governor makes the MUP designation.

Nationally MUAs and MUPs are designated over five to ten years ago and are not regularly reviewed. Within the Houston-area HSDA, however, most have been designated within the last two to four years, indicating a more current shortage.

-  All of the HSDA counties have full or partial designation as MUA. Six entire counties are designated as medically underserved.
-  Harris County has 18 neighborhoods with MUA designated census tracts. In addition, Harris County has four MUPs, one of which was designated by the governor.



Montgomery, Fort Bend and Colorado counties have MUA designated census tracts.

Table 1.1.22
HOUSTON EMA/HSDA COUNTIES
MEDICALLY UNDERSERVED AREAS
2004




COUNTY	DESIGNATION	AREA DESCRIPTION
Chambers	MUA	Whole County
Fort Bend	MUA	Census Tracts 704-706, 707.02-707.03, 707.11, 707.21, 711-714
Harris	MUA	<p>Acres Home Census Tracts 524, 525.02-525.04, 530.02, 531.01, 531.03, 530.03</p> <p>Aldine, Census Tracts 222.01, 222.02, 223.01, 223.02, 223.03, 224.01, 240.02</p> <p>Baytown Census Tracts 264, 264.99, 265, 266, 270, 271, 272, 273</p> <p>Casa de Amigo Census Tracts 503.01, 503.02, 505.01, 505.02, 506.01, 506.02, 507.01, 507.02, 508, 509.02, 509.03, 512, 514.01, 514.02, 515.02</p> <p>Central Harris, Census Tracts 201.01, 201.02, 204.00, 205.03, 502.00, 504.00</p> <p>East-Central Houston Census Tracts 202.10, 202.20, 203.01, 203.02, 203.03, 208.02, 208.03, 209, 210.01, 214.01</p> <p>Galena Park/Jacinto City Census Tracts 210.22, 211, 211.99, 212, 232, 232.99</p> <p>ID 03465 Census Tracts 400.25, 400.26, 401.01, 401.02, 402.01, 402.02</p> <p>Independence Heights, Census Tracts 509.01, 510.00, 519.02, 520.01, 520.03, 520.02, 521.01-521.03</p> <p>North Central, Census Tracts 240.01, 240.03, 532.02, 533.01-533.03, 535.20</p> <p>Northeast Central, Census Tracts 311.00, 311.99, 312.00</p> <p>Ripley Census Tracts 300.22, 300.23, 301.01, 301.02, 302, 308.2, 309.01, 309.02, 309.03, 310, 313.01, 313.02, 314.02, 319.01, 321.01, 321.02</p> <p>Settegast Census Tracts 207.01, 207.02, 208.01, 215.01, 215.02, 215.03, 216.01, 216.02, 217.01, 217.02, 218.01, 218.02, 218.03, 218.04, 219.00, 225.03, 225.04, 227.00</p> <p>South Central Census Tracts 318.02, 318.03, 319.02, 325.01, 325.02, 327.01, 327.02, 328.01, 328.02, 328.03, 339.03, 340, 342, 343.01, 343.02</p> <p>South Service Area, Census Tracts 329.02, 329.03</p> <p>Southern Third Ward, Census Tracts 3122-3124, 3127-3130, 3132-3138</p> <p>Trinity Gardens, Census Tracts 205.01, 205.98, 206.01, 206.98, 207.03, 207.04</p> <p>West Pasadena, Census Tracts 350.01, 350.02, 350.03, 350.04, 351, 353.01, 356.01, 356.02, 356.03</p>
	MUP	<p>Alief Low Income Census Tracts 424.01, 435.01, 435.02</p> <p>Spring Branch, Low Income, Census Tracts 5201-5207, 5210-5224</p> <p>Third Ward, Low Income, Census Tracts 300.24, 303.00, 304.01, 304.02, 305.01, 305.02</p>

	MUP-GOV	S.W. Houston, Spanish-speaking, Poverty: Census Tracts 416.01, 419.01, 419.04-419.06, 423.05, 423.07, 424.02, 424.03, 425.04
Liberty	MUA	Whole County
Montgomery	MUA	Census Tracts 904, 905, 910.10, 910.20, 911.02, 912.01
Waller	MUA	Whole County
Austin	MUA	Whole County
Colorado	MUA	Census tracts 1501, 1502
Wharton	MUA	Whole County
Walker	MUA	Whole County
Data Source: U.S. Department of Health and Human Services, Public Health Service, Health Resources and Services Administration (HRSA), Bureau of Primary Health Care, Shortage Designation Branch, 4350 East-West Highway, 9th Floor, Bethesda, MD 20814 Prepared by: Texas Department of Health, Center for Health Statistics, Health Professions Resource Center Designations as of 6/4/04. http://www.tdh.state.tx.us/dpa/01mua-wc.htm		

(Table Continues)

HOMELESSNESS

In March 2003, the Coalition for the Homeless of Houston/Harris County, Inc. published their report, "Homeless Service Demands 2003, An Analysis of Trends, Services, Demographics." This report, while not specific to people living with HIV disease, provides background information on homelessness nationally and in the Houston area. It includes results of a survey of homeless individuals and homeless shelter providers. Key points to consider include:

-  Recent studies reveal that men continue to be the most represented group among the homeless, but families with children are increasing at rapid rate. A 2001 U.S. Conference of Mayors Survey projects 40% of homeless are families.
-  This same study states the homeless population is 50% African-American, 35% white/Anglo, 12% Hispanic, 2% Native American and 1% Asian.
-  According to the National Coalition for the Homeless, as many as 22% of single adult homeless have some form of "severe and persistent mental illness;" 34% have addiction disorders; approximately half of homeless women and children have experienced recent domestic violence.

- One of the main reasons for homelessness is an increasing lack of affordable housing, due to increasing rents.

The survey of 18 emergency shelter providers, conducted in January 2003, found an overall average of over 100% occupancy in Houston and Harris County. Occupancy rates ranged from 14% for a shelter in Humble to 149% for a large shelter in Houston.

- Shelters by type of clients served are presented in Table 1.1.24.
- Providers reported that of their 1663 clients, 81.5% were male and 19.5% were female. In addition, 58% were African-American, 23% white/Anglo, 14% Hispanic, 4% Native American and 1% Asian.

Table 1.1.23
AVAILABLE EMERGENCY SHELTER BEDS AND OCCUPANCY
HOUSTON AND HARRIS COUNTY
2003

AREA	AVAILABLE BEDS	EMERGENCY SHELTER CLIENTS	PERCENT OCCUPANCY
Harris County	1,996	2,068	103.6%
Houston	1,680	1,818	108.2%

Source: "Homeless Service Demands 2003, An Analysis of Trends, Services, Demographics"

Table 1.1.24
AVAILABLE EMERGENCY SHELTER BY TYPE
HARRIS COUNTY
2003

Type of Shelter	Number	Percent
Family	5	15.6%
Men	8	25.0%
Women	6	18.8%
Women with Children	9	28.1%
Men with Children	2	6.3%
Youth	1	3.1%
Other	1	3.1%
Total	32	100.0%

Source: "Homeless Service Demands 2003, An Analysis of Trends, Services, Demographics"
Based on survey of 18 shelters. Shelters may provide services to multiple populations

QUESTION 1.2:

**WHAT IS THE SCOPE OF THE HIV/AIDS EPIDEMIC IN
THE HOUSTON REGION?**

WHAT IS THE SCOPE OF THE HIV/AIDS EPIDEMIC IN THE HOUSTON REGION?

The HIV/AIDS epidemic has affected people of all gender, age and racial/ethnic groups in the Houston EMA and HSDA. This effect, however, has not been the same for all groups. In the beginning of the epidemic, HIV disease was most often found among white men who have sex with men (MSM). Although these men are still disproportionately affected by the epidemic, recent trends identify an increase among African-Americans and women.

This section provides detailed information about demographic and risk characteristics of HIV-infected people. It describes cases reported through December 31, 2003. Mortality (deaths) reporting lags, so 2002 is considered the most recent complete year of data and is used in this report.








This report uses Texas Department of Health (TDH) HIV/AIDS surveillance data from December 31, 2003. Although this is the most current data available, the incidence (newly diagnosed cases) and prevalence (people living with HIV/AIDS) are likely incomplete due to delays in data reporting and processing. It is felt, however, that the data presented here provides an accurate picture of the epidemic and its current trends.

In addition to reporting delays, HIV data is incomplete since reporting was not begun until 1999. People who were diagnosed with HIV before 1999 who have not had another HIV diagnostic test and who have not converted to AIDS are not included in this data.


Cases of HIV diagnosed in 2003 (incidence) and people living with HIV, not AIDS (prevalence) can generally be thought of as people that became infected more recently than new AIDS diagnoses and people living with AIDS. This analysis will compare people diagnosed with HIV to those diagnosed with AIDS and people living with HIV to those living with AIDS to identify trends in the epidemic in the EMA and HSDA.

In this section, data is presented for both the EMA and the HSDA. Although tables appear similar, and differences between the two are small, please be aware that EMA-specific tables follow HSDA tables. It should be noted that differences in incidence between the EMA and HSDA are very small, totaling only six cases for HIV and seven cases for AIDS. Furthermore, the difference in prevalence totals 99 cases, 40 for HIV and 59 for AIDS.

SUMMARY


-  Both HIV and AIDS diagnoses demonstrated steadily increasing trends between 1999 and 2002. In 2003, this changed abruptly and a significant decline in both HIV and AIDS diagnoses was seen. This may be due to delays in data reporting (described above) and should be monitored as more complete data become available.
-  In 2003, 604 persons in the Houston HSDA were diagnosed with HIV that had not progressed to AIDS, and 591 PLWH received an AIDS diagnosis.
-  Comparing HIV and AIDS diagnoses reveals increasing new infections among women.
-  The race/ethnic profile of the epidemic is stable. Approximately half of those with new diagnoses of both HIV and AIDS are black, non-Hispanic, 27% are white, non-Hispanic and 21% are Hispanic.
 - Among men of color who have sex with men (MCSM), an increase of black, non-Hispanics living with HIV compared to those living with AIDS indicates an increasing trend among this group.
 - Although prevalence numbers are similar between MCSM and White/Anglo MSM, the number of new diagnoses among MCSM is higher than white/Anglo MSM. Over time, this will result in a larger number of MCSM with HIV disease than white/Anglo MSM in the Houston area.
 - Among MCSM, new diagnoses are increasing among blacks, compared with Hispanics
 - MCSM had a higher proportion of MSM/IDU-related AIDS cases (13%) than white MSM (7%).
-  Blacks have the highest rate of new HIV and new AIDS infections. It is four times higher than the rate of infection for Hispanics and five times higher than that of whites.
-  The 25 to 44 age group has the highest rates of new HIV and AIDS infections. This infection rate is more than twice as high as any other age group.
-  Youth, age 13 to 24, exhibited increasing infections with more than 2.4 times more HIV diagnoses per 100,000 than AIDS diagnoses. Their HIV infection rate is also higher than their AIDS infection rate, which supports this as an emerging population.


- Black youth are disproportionately affected by HIV and AIDS, but comparison of HIV infections with AIDS infections by race reveals possible emerging trends among white youth.


 Although numbers of newly diagnosed IDU are small, white IDU should be monitored as a potential emerging population.


- White IDU make up 45% of new HIV diagnoses compared to 19% of AIDS diagnoses.

- Hispanics also exhibit increasing HIV diagnoses relative to AIDS with 24% of the HIV diagnoses and 15% of AIDS.

 Black women make up the largest percentage of newly diagnosed women of childbearing age. The rates are significantly higher than those of whites and Hispanics. Comparison of HIV and AIDS diagnoses among whites and Hispanics, however, indicate possible increasing trends among these women.

 Young women, age 13 to 24, are a significantly higher percentage of new HIV infections than women overall. Over 45% of new HIV diagnoses in this age group are among women, compared to 30% of all new HIV diagnoses.





 Comparing HIV and AIDS diagnoses and infection rates indicate an increase among Hispanic women, but Hispanic men are infected with HIV at a rate three times that of women, and their AIDS infection was 4.3 times higher.

 Unreported risk among those with HIV accounts for approximately 42% of new HIV diagnoses and 30% of AIDS diagnoses.

HIV AND AIDS 2003 INCIDENCE (NEW DIAGNOSES)

Incidence is a term commonly used in epidemiology in referring to newly diagnosed cases. Incidence may be designated over a period of time that the new cases were diagnosed. For this report, incidence reflects cases diagnosed throughout 2003. As mentioned above, it is believed that the data presented in this report is reflective of trends in the epidemic, but totals may be incomplete due to reporting delays.

In 2003, the EMA had six fewer diagnosed cases of HIV and seven fewer diagnosed cases of AIDS than the HSDA. In both cases the EMA comprises 99% of the total HSDA cases. The discussion below identifies differences between the EMA and HSDA

-  In 2003, 604 persons in the Houston HSDA were diagnosed with HIV that had not progressed to AIDS, and 591 PLWH received an AIDS diagnosis. In the EMA, these numbers were 598 for HIV and 584 for AIDS. The latter include both people who have not been diagnosed with HIV disease before (new diagnoses) and people who had previously been diagnosed as HIV positive and their disease progressed from HIV to AIDS. Since the numbers are similar, the 2003 HIV infection rate is 14 per 100,000 for both HIV and AIDS.
-  Examining HIV and AIDS diagnoses by gender reveals a trend toward increasing HIV disease among women. This holds true for both the EMA and HSDA.
 - Of those diagnosed with HIV, 70% were male and 30% were female. AIDS diagnoses include a higher percentage of male (75%) than female (25%).
 - Similarly, the rate of new HIV infections among women (8/100,000) was higher than the rate of new AIDS cases (7/100,000) during 2003.
 - With more infections among women, the difference in infection rates between men and women is declining. The rate of new HIV infections among males was 2.3 times the rate for females (19.5 per 100,000 for men and 8.4 per 100,000 for women). The rate of new AIDS diagnoses among males, however, was more than three times higher than among females (20.7 per 100,000 for men and 6.7 per 100,000 for women).
-  The race/ethnicity profiles of those newly diagnosed with HIV and AIDS are almost identical in both the EMA and HSDA.
 - Half of new HIV diagnoses were among black, non-Hispanics compared to 51% of AIDS diagnoses.
 - Twenty seven percent of HIV diagnoses were among white, non-Hispanics, compared to 26% for AIDS diagnoses.
 - The percentage of HIV and AIDS diagnoses were the same for Hispanic, 21%.
-  Blacks had the highest rate of new HIV and new AIDS infections (40/100,000 for both HIV and AIDS). This is four times greater than that of Hispanics (10/100,000) and five times that of Whites (8/100,000).

Although the 25 to 44 age group has the highest rate of new HIV and AIDS infections, the rates are similar for both HIV and AIDS. Youth (age 13 to 24), however, exhibited increasing infections with more 2.4 times more HIV diagnoses per 100,000 than AIDS diagnoses.

- The HIV infection rate in the 25 to 44 group was twice as high as the rate in any other age group.

Generalizing about transmission mode is difficult since unreported risk is very high among newly diagnosed. Unreported risk among those with HIV accounts for approximately 42% of new diagnoses and 30% of those with AIDS diagnoses.

- In the Houston HSDA, all transmission modes demonstrated declining percentages from AIDS to HIV due to the increase in unreported risk.
- 179 (30%) new HIV infections were attributed to male-to-male sex, and 142 (24%) were attributed to heterosexual contact. These two transmission modes accounted for the highest proportion of newly diagnosed HIV infections during 2003 compared to intravenous drugs users (17; 3%) and MSM/IDU (12; 2%).

Harris County is clearly the epicenter of the epidemic with 92% of 2003 newly diagnosed HIV and AIDS cases. It was home to the highest proportion of new HIV and AIDS infections during 2003.

- Among all newly diagnosed HIV infections in the Houston HSDA, 552 (91%) were in Harris County, compared to 20 (3%) in Montgomery, 17 (3%) in Fort Bend and 8 (1%) in Liberty. Five hundred forty-six (92%) new AIDS cases were in Harris County, compared to 18 (3%) in Fort Bend, and 17 (3%) in Montgomery.
- A potential increase in future HIV disease may be emerging in the rural areas of the HSDA. While there were no new AIDS diagnoses in Liberty County during 2003, there were 8 new HIV infections at a rate of 11 per 100,000 persons. Likewise, the rate of new HIV infections in Montgomery County (7 per 100,000) was slightly higher than the rate of new AIDS cases (6 per 100,000).

Both HIV and AIDS diagnoses demonstrated a steadily increasing trend between 1999 and 2002. In 2003, this trend changed abruptly and a significant decline in both HIV and AIDS diagnoses was seen. A portion of this change may be attributed to reporting delays and should be further monitored.

- Between 1999 and 2002, HIV diagnoses in the EMA increased 9.6%, but between 2002 and 2003, these diagnoses declined 36.5%. In the HSDA, HIV

diagnoses increased 12.8% between 1999 and 2002 with a decline of 36.5% between 2002 and 2003.

- AIDS diagnoses in the EMA increased 8.5% between 1999 and 2002 but declined 35.8% between 2002 and 2003. Numbers were similar the HSDA.

Table 1.2.1-H
HSDA HIV, AIDS and Total Diagnoses, 2003

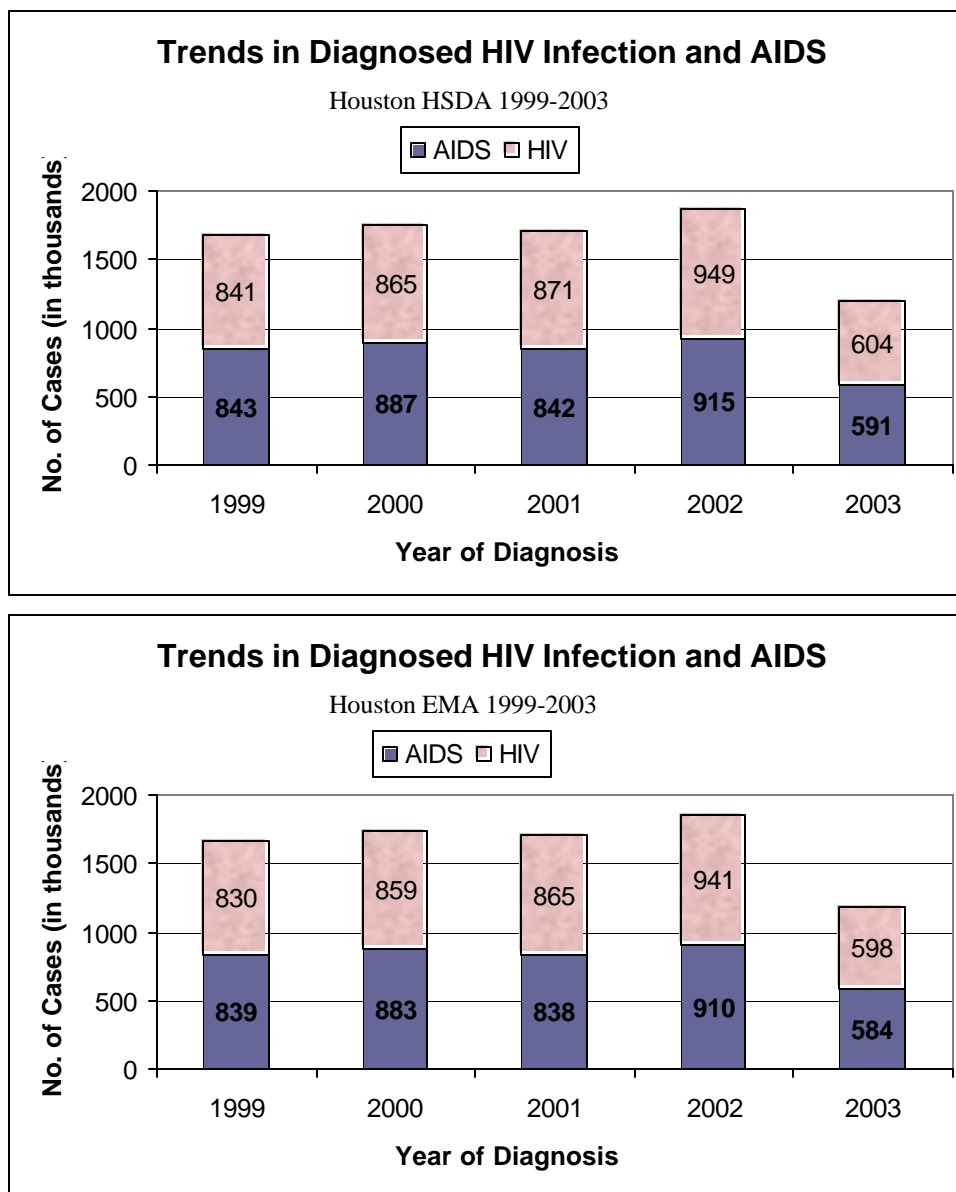
HSDA	2003 NEW HIV			2003 NEW AIDS			2003 NEW HIV/AIDS*		
	No.	%	Rate	No.	%	Rate	No.	%	Rate
Total	604	100	14.0	591	100	13.7	1,204	100	27.8
Sex									
Male	421	69.7	19.5	446	75.5	20.7	876	72.8	40.6
Female	183	30.3	8.4	145	24.5	6.7	328	27.2	15.1
Race/ethnicity									
White, not Hispanic	160	26.5	7.8	153	25.9	7.5	317	26.3	15.5
Black, not Hispanic	303	50.2	39.9	304	51.4	40.0	610	50.7	80.3
Hispanic	128	21.2	10.0	126	21.3	9.9	256	21.3	20.0
Other/Unknown	13	2.2	5.3	8	1.4	3.3	21	1.7	8.6
Age (yrs)									
0-1	<5	na	na	0	0	0.0	<5	na	na
2-12	<5	na	na	0	0	0.0	<5	na	na
13-24	108	17.9	13.9	45	7.6	5.8	153	13	19.7
25-44	381	63.1	26.8	384	65	27.0	765	64	53.9
45-64	108	17.9	12.3	148	25	16.8	256	21	29.1
65+	<5	na	na	14	2.4	4.2	na	na	na
Transmission Mode									
MSM	179	29.6		194	32.8		380	31.6	
IDU	17	2.8		56	9.5		74	6.1	
MSM/IDU	12	2		23	3.9		35	2.9	
Hetero	142	23.5		140	23.7		282	23.4	
Mother at Risk	<5	na		<5	na		5	0.4	
Ten-Counties									
AUSTIN CO.	0	0	0.0	<5	na	na	<5	Na	na
CHAMBERS CO.	0	0	0.0	0	0	0.0	0	0.0	0.0
COLORADO CO.	<5	na	na	0	0	0.0	<5	na	na
FORT BEND CO.	17	2.8	4.8	18	3	5.1	35	2.9	9.9
HARRIS CO.	552	91.4	16.2	546	92.4	16.1	1,107	91.9	32.6
LIBERTY CO.	8	1.3	11.4	0	0	0.0	8	0.7	11.4
MONTGOMERY CO.	20	3.3	6.8	17	2.9	5.8	37	3.1	12.6
WALKER CO.	<5	na	na	<5	na	na	<5	na	na
WALLER CO.	<5	na	na	<5	na	na	<5	na	na
WHARTON CO.	<5	na	na	<5	na	na	6	0.5	14.6
Source: Texas Department of Health Rates are calculated per 100,000 population based upon 2000 U.S. Census. Cell sizes <5 are suppressed (not reported) to ensure client confidentiality. *HIV and AIDS may not sum to total due to PLWH changes in county of residence.									

Table 1.2.1-E
EMA HIV, AIDS AND TOTAL DIAGNOSES
2003

EMA	2003 NEW HIV			2003 NEW AIDS			2003 NEW HIV/AIDS*		
	No.	%	Rate	No.	%	Rate	No.	%	Rate
Total	598	100.0	14.3	584	100.0	14.0	1,191	100.0	28.5
Sex									
Male	417	69.7	20.1	441	75.5	21.2	867	72.8	41.7
Female	181	30.3	8.6	143	24.5	6.8	324	27.2	15.4
Race/Ethnicity									
White, not Hispanic	157	26.3	8.0	150	25.7	7.7	311	26.1	15.9
Black, not Hispanic	300	50.2	40.9	300	51.4	40.9	603	50.6	82.3
Hispanic	128	21.4	10.3	126	21.6	10.1	256	21.5	20.5
Other/Unknown	13	2.2	5.4	8	1.4	3.3	21	1.8	8.7
Age (yrs)									
0-1	<5	na	na	0	0.0	0.0	na	na	na
2-12	<5	na	na	0	0.0	0.0	na	na	na
13-24	106	17.7	14.2	45	7.7	6.0	151	13	20.3
25-44	378	63.2	27.4	381	65.2	27.6	759	64	55.0
45-64	107	17.9	12.6	145	24.8	17.1	252	21	29.6
65+	<5	na	na	13	2.2	4.2	na	na	na
Transmission Mode									
MSM	179	29.9	na	193	33	na	379	31.8	na
IDU	17	2.8	na	54	9.2	na	72	6	na
MSM/IDU	12	2.0	na	23	3.9	na	35	2.9	na
Hetero	140	23.4	na	139	23.8	na	279	23.4	na
Mother at Risk	<5	na	na	<5	na	na	5	0.4	na
Source: Texas Department of Health Rates are calculated per 100,000 population based upon 2000 U.S. Census. Cell sizes <5 are suppressed (not reported) to ensure client confidentiality. *HIV and AIDS may not sum to total due to PLWH changes in county of residence.									

Figure 1.2.1




TRENDS IN DIAGNOSED HIV INFECTION AND AIDS
1999 – 2003




It should be noted that reporting lag may increase the 2003 totals.

HIV AND AIDS PREVALENCE (PEOPLE LIVING WITH HIV AND AIDS)


While incidence, described above, looks at newly diagnosed cases of HIV and AIDS, prevalence identifies the total number of people living with the disease. The data presented here includes all reported cases of living people diagnosed with HIV and diagnosed with AIDS. Texas' system of HIV reporting began in 1999. Since that time, records of HIV prevalence have improved every year, but it cannot be assumed that the 2003 numbers for people living with HIV reflect everyone in the region who is HIV positive and knows their status. People who were diagnosed with HIV disease before 1999, who have not progressed to AIDS and who have not had an HIV test after 1999 will not be included. The following statistics should be considered with that in mind.

-  The difference in the number of people living with HIV or AIDS does not vary significantly between the EMA and HSDA. In 2003, a total of 15,690 people were living with either HIV or AIDS in the HSDA. This compares to 15,591 in the EMA. For those living with HIV or AIDS, the EMA includes 99.4% of people with HIV or AIDS in the HSDA. All trends reported are the same in the EMA and the HSDA.
 - A total of 6,258 people are living with an HIV diagnosis in the HSDA, and 6,218 are living in the EMA.
 - Similarly, 9,432 are living with AIDS in the HSDA, and 9,373 in the EMA are living with AIDS.
-  Comparing people living with HIV to people living with AIDS reveals an increase in HIV disease among women in both the EMA and HSDA.
 - In both the EMA and HSDA, women were 34% of people living with HIV in 2003, but were only 21% of people living with AIDS, an indication of increasing new infections among women.
 - The prevalence rate for HIV among males was nearly twice that for females. Males' AIDS prevalence rate, however, was almost four times that of females.
-  Blacks in both the EMA and HSDA are disproportionately affected by HIV and AIDS with the rate of HIV prevalence significantly higher among blacks than other racial or ethnic groups.
 - Comparing HIV and AIDS infection rates, blacks have an overall infection rate that is nearly four times higher than whites, and the HIV (not AIDS) infection rate among blacks is 5.3 times higher than whites.


- The overall infection rate is 4.5 times higher among blacks than Hispanics, and the HIV (not AIDS) infection rate is nearly six times higher for blacks than Hispanics.

 Compared to other age groups, 25 to 44 year olds had the highest proportion (60%) and rate (662/100,000) of HIV and AIDS prevalence. However, HIV prevalence is significantly higher than AIDS prevalence among the younger age groups, indicating possible emerging trends.

- Despite treatment advances, 119 newborns are living with HIV with a prevalence rate of 84.6 per 100,000.
- Among youth age 13 to 24 year olds, the HIV prevalence rate was more than three that for AIDS ((73.7 per 100,000 for HIV and 22.9 per 100,000 for AIDS).

 Comparing HIV and AIDS percentages for transmission mode identifies changes in the epidemic. It should be noted that the number of people with unreported risk must be considered when evaluating this information.

- In the Houston HSDA, the most frequent mode of HIV transmission is male to male sex, with one third of people living with HIV reporting this as their mode of infection and nearly 47% of those with AIDS identifying it.
- Heterosexual transmission is increasing, with nearly one-quarter (24.2%) of those living with HIV reporting it compared to one fifth (19.8%) of those with AIDS.

 Harris County is home to nearly 95% of people living with both HIV and AIDS. Fort Bend County has over 350 residents with HIV or AIDS, and Montgomery has 264. Most other counties have less than 50 people living with HIV or AIDS.

Trends in the number of people living with HIV and AIDS between 1999 and 2003 are presented in Figure 1.2.2. Since 1999 was the first year that Texas had HIV reporting, the HIV numbers only reflect people who were tested for HIV that year and are incomplete. Over the five years since HIV reporting began, the reported number of people living with HIV has become more complete with each passing year, but cannot be assumed to be all-inclusive. Therefore, the review of trends must be considered with that information in mind.

- Between 1999 and 2003, people living with AIDS increased 44% in both the EMA and the HSDA.
- During this time period, reported HIV cases increased 109% in both the EMA and HSDA.

Table 1.2.2-H
HSDA Prevalence of HIV, AIDS and Total, 2003

HSDA 2003	2003 LIVING WITH HIV			2003 LIVING AIDS			2003 LIVING WITH HIV/AIDS*		
	No.	%	Rate	No.	%	Rate	No.	%	Rate
Total	6,258	100	144.7	9,432	100	218.1	15,690	100	362.8
Sex									
Male	4,155	66.4	192.5	7,477	79.3	346.4	11,632	74.1	538.9
Female	2,103	33.6	97.1	1,955	20.7	90.3	4,058	25.9	187.4
Race/Ethnicity									
White, not Hispanic	1,745	27.9	85.4	3,453	36.6	168.9	5,198	33.1	254.3
Black, not Hispanic	3,445	55.0	453.7	4,081	43.3	537.5	7,526	48.0	991.2
Hispanic	987	15.8	77.2	1,820	19.3	142.4	2,807	17.9	219.6
Other/Unknown	81	1.3	33.3	78	0.8	32.1	159	1.0	65.3
Age (yrs)									
0-1	8	0.1	5.7	0	0	0.0	8	0.1	5.7
2-12	122	1.9	15.7	44	0.5	5.7	166	1.1	21.4
13-24	573	9.2	73.7	178	1.9	22.9	751	4.8	96.6
25-44	4,060	64.9	285.8	5,341	56.6	376.0	9,401	59.9	661.8
45-64	1,430	22.9	162.3	3,646	38.7	413.8	5,076	32.4	576.1
65+	65	1	19.7	223	2.4	67.6	288	1.8	87.3
Transmission Mode									
MSM	2,086	33.3	na	4,427	46.9	na	6,513	41.5	na
IDU	617	9.9	na	1,241	13.2	na	1,858	11.8	na
MSM/IDU	260	4.2	na	672	7.1	na	932	5.9	na
Hetero	1,516	24.2	na	1,867	19.8	na	3,383	21.6	na
Mother at Risk	148	2.4	na	74	0.8	na	222	1.4	na
Risk not Reported	1,631	26.1	na	1,151	12.2	na	2,782	17.7	na
Ten-Counties									
AUSTIN CO.	9	0.1	38.2	14	0.1	59.3	23	0.1	97.5
CHAMBERS CO.	<5	na	na	<5	na	na	6	0	23.0
COLORADO CO.	<5	na	na	<5	na	na	11	0	53.9
FORT BEND CO.	132	2.1	37.2	219	2.3	61.8	351	2.2	99.0
HARRIS CO.	5,920	94.6	174.1	8,938	94.8	262.8	14,858	94.7	436.9
LIBERTY CO.	29	0.5	41.3	42	0.4	59.9	71	0.5	101.2
MONTGOMERY CO.	123	2	41.9	141	1.5	48.0	264	1.7	89.9
WALKER CO.	12	0.2	19.4	20	0.2	32.4	32	0.2	51.8
WALLER CO.	11	0.2	33.7	30	0.3	91.8	41	0.3	125.5
WHARTON CO.	11	0.2	26.7	22	0.2	53.4	33	0.2	80.1
Source: Texas Department of Health Rates are calculated per 100,000 population based upon 2000 U.S. Census. Cell sizes <5 are									

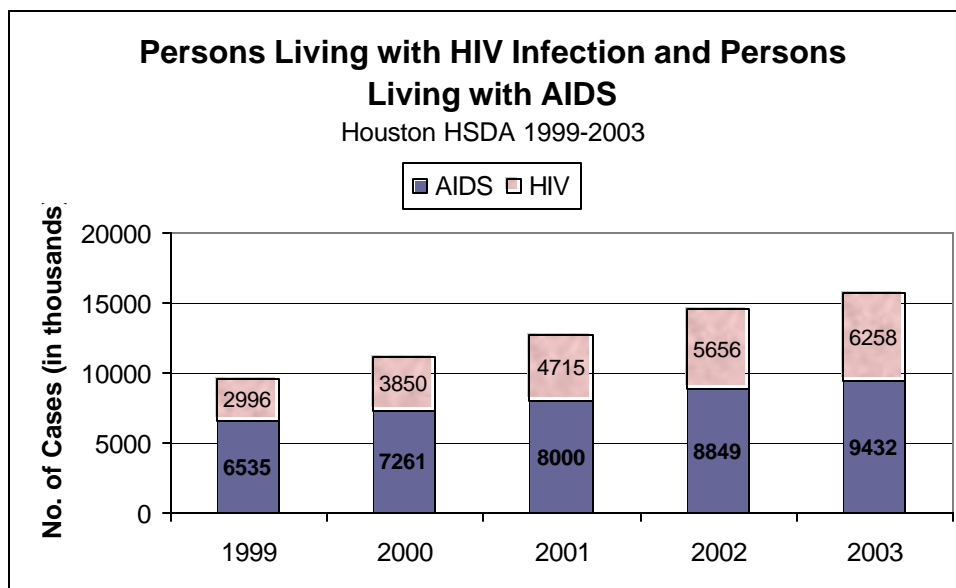
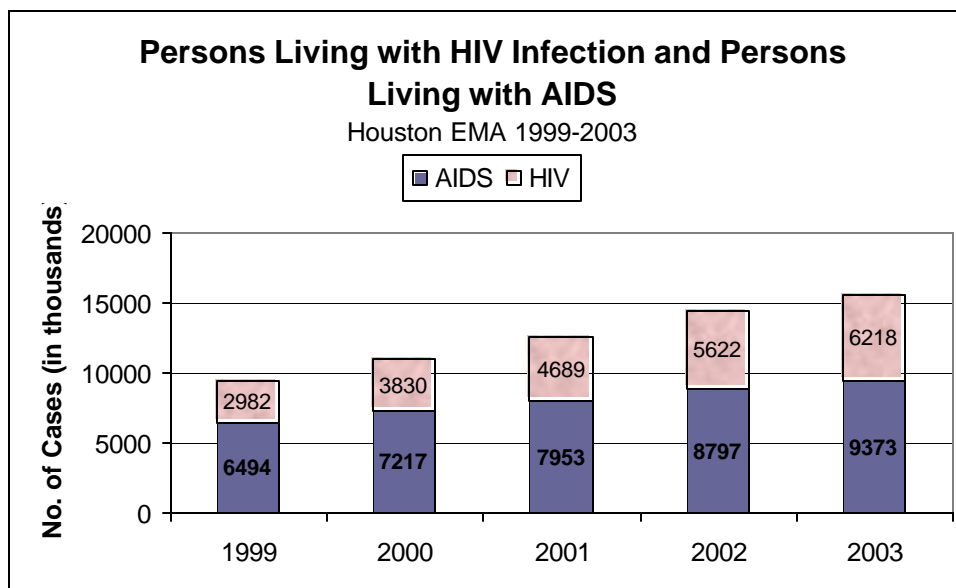
suppressed (not reported) to ensure client confidentiality.
 *HIV and AIDS may not sum to total due to PLWH changes in county of residence.

(Table continued)

Table 1.2.2-E
EMA Prevalence of HIV, AIDS and Total
2003







EMA 2003	LIVING W/ HIV INFECTION			LIVING W/ AIDS			LIVING WITH HIV/AIDS COMBINED (NOT EQUAL TO SUM OF HIV & AIDS)		
	No.	%	Rate	No.	%	Rate	No.	%	Rate
Total	6,218	100.0	148.8	9,373	100.0	224.4	15,591	100.0	373.2
Sex									
Male	4,136	66.5	198.9	7,433	79.3	357.4	11,569	74.2	556.3
Female	2,082	33.5	99.2	1,940	20.7	92.5	4,022	25.8	191.7
Race/Ethnicity									
White, not Hispanic	1,737	27.9	88.9	3,421	36.5	175.1	5,158	33.1	263.9
Black, not Hispanic	3,420	55	466.7	4,061	43.3	554.2	7,481	48.0	1020.9
Hispanic	981	15.8	78.6	1,813	19.3	145.2	2,794	17.9	223.8
Other/Unknown	80	1.3	33.1	78	0.8	32.2	158	1.0	65.3
Age (yrs)									
0-1	8	0.1	5.8	0	0	0.0	8	0.1	5.8
2-12	122	2	16.2	43	0.5	5.7	165	1.1	21.9
13-24	563	9.1	75.6	176	1.9	23.6	739	4.7	99.2
25-44	4,036	64.9	292.6	5,310	56.7	385.0	9,346	59.9	677.6
45-64	1,424	22.9	167.5	3,625	38.7	426.4	5,049	32.4	593.9
65+	65	1	20.9	219	2.3	70.4	284	1.8	91.3
Transmission Mode									
MSM	2,079	33.4	na	4,409	47	na	6,488	41.6	na
IDU	617	9.9	na	1,230	13.1	na	1,847	11.8	na
MSM/IDU	259	4.2	na	669	7.1	na	928	6	na
Hetero	1,508	24.3	na	1,858	19.8	na	3,366	21.6	na
Mother at Risk	148	2.4	na	72	0.8	na	220	1.4	na
Source: Texas Department of Health Rates are calculated per 100,000 population based upon 2000 U.S. Census. Cell sizes <5 are suppressed (not reported) to ensure client confidentiality. *HIV and AIDS may not sum to total due to PLWH changes in county of residence.									

Figure 1.2.2
PERSONS LIVING WITH HIV INFECTION AND PERSONS LIVING WITH AIDS
1999 - 2003



MORTALITY

Since reporting of deaths (mortality) of people living with HIV and AIDS is often delayed due to the confirmation and checking that is required, 2002 mortality data is the most recent year that is considered complete and will be presented in this report. It should be noted that deaths may be due to HIV disease as well as other causes. In 2002, a total of 310 people with HIV/AIDS died in the HSDA and 309 died in the EMA. Differences between the two are minimal since the difference is only one case.

-  In the HSDA, 19 of those who died had HIV and 291 had AIDS.
-  Overall, the rates of death among persons with HIV or AIDS were higher among Blacks compared to all other racial/ethnic groups.
 - The overall mortality rate among Blacks (20/100,000) was almost four times that of Whites (5/100,000) and almost six times that of Hispanics (4/100,000).
 - Black males with HIV or AIDS died at a rate three times that of white males, and almost six times that of Hispanic males.
 - Black females had a mortality rate nine times that of white females and almost seven times that of Hispanic females. (Table 1.2.3)
-  Overall death rates among people with HIV or AIDS were higher among men than women.
 - Among the HIV-related deaths, 14 (74%) were male, and 5 (26%) were female.
 - For deaths from AIDS, 215 (74%) were male and 76 (26%) were female. The rate of death among males was three times that of females for HIV, and almost three times that for AIDS.
-  The combined HIV and AIDS mortality rate is highest among persons aged 25 to 44 (15/100,000). The AIDS mortality rate for 25-44 year olds (14/100,000) was almost twice that of 45-64 year olds (9/100,000) and approximately nine times that of 13 to 24 year olds (2/100,000).
-  In the Houston HSDA, the highest combined HIV and AIDS mortality was among MSM. In 2002 deaths from AIDS was highest among MSM cases (39%) followed by cases related to heterosexual contact (23%), IDU (18%) and MSM/IDU (9%). (Table 1.2.4)
-  For both HIV and AIDS deaths, numbers increased slightly between 1999 and 2000, remained relatively constant through 2001, and decreased sharply in

2002. (Table 1.2.5 and Figure 1.2.3) The decline in 2002 is encouraging but should not be considered a trend. Future years' mortality should be monitored.

Table 1.2.3-H
HSDA DEATHS OF PERSONS WITH HIV/AIDS
BY RACE/ETHNICITY AND GENDER
2002

Race/Ethnicity	Male			Female			Total		
	No.	%	Rate	No.	%	Rate	No.	%	Rate
White, not Hispanic	94	30.3	9.6	15	4.8	1.5	109	35.2	5.3
Black, not Hispanic	101	32.6	28.2	54	17.4	13.5	155	50.0	20.4
Hispanic	33	10.6	4.9	12	3.9	2.0	45	14.5	3.5
Other/Unknown	<5	*	*	<5	*	*	<5	*	*
Total	228+			81+			309+		

Source: Texas Department of Health
Percentages calculated as percentage of total cases.

Table 1.2.3-E
EMA DEATHS OF PERSONS WITH HIV/AIDS
BY RACE/ETHNICITY AND GENDER
2002

Race/Ethnicity	Male			Female			Total		
	No.	%	Rate	No.	%	Rate	No.	%	Rate
White, not Hispanic	93	30.0	9.6	15	4.9	1.5	108	35.0	5.5
Black, not Hispanic	101	32.7	29.5	54	17.5	13.8	155	50.2	21.2
Hispanic	33	10.7	5.1	12	3.9	2.0	45	14.6	3.6
Other/Unknown	<5	*	*	<5	*	*	<5	*	*
Total	227			81+			308+		

Source: Texas Department of Health
Percentages calculated as percentage of total cases.

Table 1.2.4
HSDA Deaths from HIV and from AIDS
BY GENDER, RACE/ETHNICITY, AGE AND TRANSMISSION MODE
2002

HSDA	2002 DEATHS FROM HIV			2002 DEATHS FROM AIDS			2002 NEW HIV/AIDS COMBINED		
	No.	%	Rate	No.	%	Rate	No.	%	Rate
Total	19	100.0	0.4	291	100.0	6.7	310	100.0	7.2
Sex									
Male	14	73.7	0.6	215	73.9	10.0	229	73.9	10.6
Female	5	26.3	0.2	76	26.1	3.5	81	26.1	3.7
Race/Ethnicity									
White, not Hispanic	9	47.4	0.4	100	25.9	4.9	109	35.2	5.3
Black, not Hispanic	8	42.1	1.1	147	51.4	19.4	155	50.0	20.4
Hispanic	<5	na	na	43	21.3	3.4	na	na	na
Age (yrs)									
0-1	0	0	0.0	0	0	0.0	0	0	0.0
2-12	0	0	0.0	0	0	0.0	0	0	0.0
13-24	0	0	0.0	<5	na	na	<5	na	na
25-44	8	42.1	0.6	164	56.4	11.5	172	55.5	12.1
45-64	10	52.6	1.1	118	40.5	13.4	128	41.3	14.5
65+	<5	na	na	6	1.4	1.8	7	2.3	2.1
Transmission Mode									
MSM	6	31.6	Na	114	39.2	na	120	38.7	na
IDU	<5	na	Na	51	17.5	na	na	na	na
MSM/IDU	0	0	Na	26	8.9	na	26	8.4	na
Hetero	<5	na	Na	66	22.7	na	na	na	na
Mother at Risk	0	0	Na	<5	na	na	<5	na	na
Source: Texas Department of Health Cell sizes <5 are suppressed (not reported) to ensure client confidentiality.									

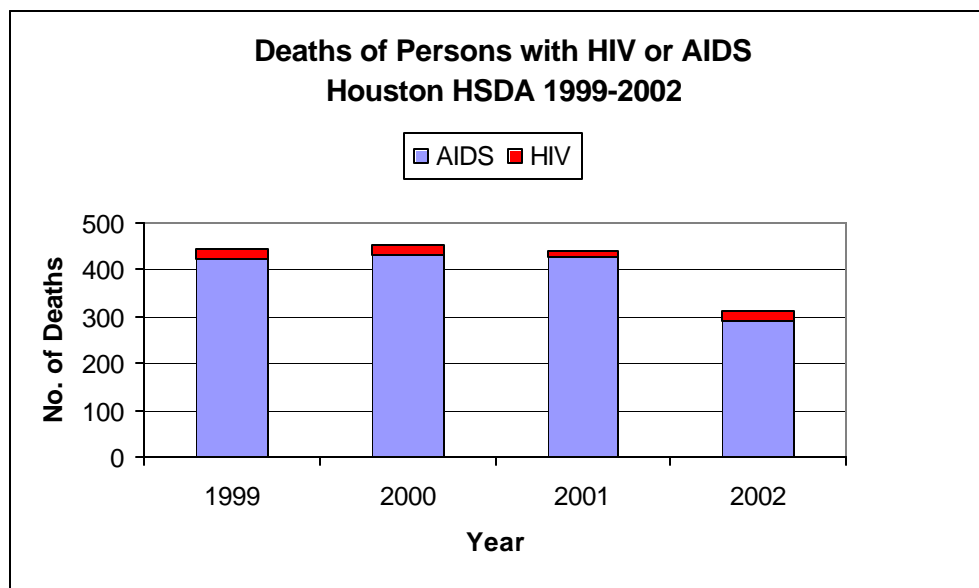
Table 1.2.5-H
HSDA DEATHS OF PERSONS WITH HIV/AIDS
1999 - 2002

Year	HIV	AIDS	HIV/AIDS
1999	22	422	444
2000	18	433	451
2001	11	428	439
2002	19	291	310
Source: Texas Department of Health			

Table 1.2.5-E
EMA DEATHS OF PERSONS WITH HIV/AIDS
1999 - 2002



Year	HIV	AIDS	HIV/AIDS
1999	21	418	439
2000	17	432	449
2001	11	426	437
2002	19	290	309
Source: Texas Department of Health			

Figure 1.2.3
HSDA DEATHS OF PERSONS WITH HIV/AIDS
1999 - 2002



HIV WITH TUBERCULOSIS COMORBIDITY

Tuberculosis (TB) may present as a comorbid condition with AIDS. People with HIV are more susceptible to TB, and it can be more difficult to treat in people with AIDS. Two data sources help us understand the number of people who are co-infected with HIV, the City of Houston and the Texas Department of Health (TDH).

-  The City of Houston maintains records of all TB diagnoses, and categorizes them with and without HIV. Reporting of TB is generally on a timely basis, but information on HIV testing is, at times, delayed.
-  The Texas Department of Health (TDH) maintains information on TB diagnoses for all people diagnosed with HIV or AIDS. The advantage of TDH data is that the entire HSDA is included. The disadvantage is that the data does not include date of TB diagnosis. Therefore, TDH data on TB is best considered only for those newly diagnosed, since those are the only cases that can be confirmed during the current year. In addition, reporting delay is evident in the TDH data when compared to the Houston data.

Based upon City of Houston data, the number of people living with AIDS who have TB is relatively stable. TDH data indicates a decline in cases, but this must be attributed to reporting delays.

Table 1.2.6
HOUSTON AND HSDA
PERSONS DIAGNOSED WITH AIDS WHO ALSO HAVE TB
1999 - 2003

HSDA NEW HIV/AIDS DIAGNOSES WITH TB*				HOUSTON	
Year	AIDS	w/TB	%	TB/AIDS*	% AIDS among new TB
1999	843	71	8.4%	72	19.2%
2000	887	50	5.6%	49	15.7%
2001	842	57	6.8%	61	18.4%
2002	915	39	4.3%	52	15.9%
2003	591	12	2.0%	59	17.3%
Source: Texas Department of Health and Houston Department of Health and Human Services					
*Not all diagnosed with TB received HIV test					

SPECIAL POPULATIONS


HRSA has identified special populations that are disproportionately impacted by the HIV epidemic. Both nationally and in the Houston region, these populations demonstrate increased risk, incidence and/or prevalence. These include men of color who have sex with men, white/Anglo men who have sex with men, injecting drug users, women of childbearing age, youth, African-Americans and Hispanics/Latinos. This section outlines these populations, examining both incidence and prevalence in the EMA and HSDA.


In this section, incidence (new diagnoses) is only reported for the HSDA. This is because differences between EMA and HSDA populations are typically less than 5 cases, which is not reportable due to confidentiality. Prevalence (those living with HIV/AIDS) is presented for both the EMA and the HSDA.


Men of Color who have Sex with Men **White/Anglo Men who have Sex with Men**



This population is defined by race and mode of transmission. HRSA has designated men of color who have sex with men (MCSM) include all men who are not white/Anglo. The mode of transmission is either male sex with men (MSM) or MSM combined with injecting drug use (IDU). Totals may be underrepresented to the extent that MSM are included among those who have not reported their risk.

Over 3,700 MCSM live in the HSDA, and the EMA has only 13 fewer. A similar number of white/Anglo MSM live in the HSDA, 3,743. This compares to 3,702 in the EMA. Percentages among the HSDA and EMA are nearly identical.

-  Although prevalence numbers are similar between MCSM and White/Anglo MSM, the number of new diagnoses among MCSM is higher than white/Anglo MSM. Over time, this will result in a larger number of MCSM with HIV disease than white/Anglo MSM in the Houston area.

 - A total of 112 MCSM were diagnosed with HIV in 2003, and 79 white/Anglo MSM were diagnosed.
 - In addition, 132 MCSM were diagnosed with AIDS in 2003 and 85 white/Anglos MSM received this diagnosis.
-  Among MCSM, new diagnoses are increasing among blacks, compared with Hispanics.

 - Of MCSM diagnosed with HIV, 59% are black and 37% are Hispanic. Of those diagnosed with AIDS, 56% are black and 42% are Hispanic. (Table 1.2.7)
 - Comparing MCSM living with HIV and those living with AIDS, the percentages of blacks is greater for HIV than AIDS. Sixty three percent of MCSM with HIV are black, while 58% of those with AIDS are black.
-  The 25 to 44 age group is the largest, but HIV diagnoses among those 13 to 24 years old reveal a possible increase in infections in this younger age group.

 - Comparing new HIV infections with new AIDS infections among MCSM by age, the largest group of which both HIV and AIDS diagnoses were 25 to 44 years with 70% of HIV diagnoses and 73% of AIDS diagnoses.
 - Nearly one quarter of new HIV infections were among MCSM age 13 to 24 years, and nearly 10% of new AIDS infections were diagnosed in MCSM in this age group.
 - Youth were a smaller percentage of new diagnoses among White/Anglo MSM, 14%.
 - Only 2% percent of white/Anglo MSM living with HIV are 13 to 24 years, and 9% of MCSM are in this age group.
-  Among MCSM, the majority of new HIV infections (95%) and diagnosed AIDS cases (87%) were attributed to MSM-related behaviors – however, MSM of color had a higher proportion of MSM/IDU-related AIDS cases (13%) than white MSM (7%).
-  Harris County is the residence for almost all MCSM and MSM.

- Between 95% and 96% of MCSM and white/Anglo MSM with HIV or AIDS live in Harris County.
- Ninety eight percent of MCSM diagnosed in 2003 live in Harris County, including over 99% of MCSM diagnosed with AIDS.

Table 1.2.7
HOUSTON-AREA HSDA
HIV AND AIDS INCIDENCE AMONG MCSM
2003

HSDA 2003	NEW HIV INFECTION		NEW AIDS		NEW HIV/AIDS*	
	No.	%	No.	%	No.	%
Total	112	100.0	132	100.0	248	100.0
Race/Ethnicity						
Black, not Hispanic	66	58.9	74	56.1	142	57.3
Hispanic	41	36.6	56	42.4	99	39.9
Other/Unknown	<5	na	<5	na	7	2.8
Age (yrs)						
0-1	---	---	---	---	---	---
2-12	---	---	---	---	---	---
13-24	26	23.2	13	9.8	39	15.7
25-44	78	69.6	96	72.7	174	70.2
45-64	8	7.1	21	15.9	29	11.7
65+	<5	na	<5	na	6	2.4
Transmission Mode						
MSM	106	94.6	115	87.1	225	90.7
MSM/IDU	6	5.4	17	12.9	23	9.3
Ten-Counties						
AUSTIN CO.	0	0	0	0	0	0
CHAMBERS CO.	0	0	0	0	0	0
COLORADO CO.	0	0	0	0	0	0
FORT BEND CO.	<5	na	<5	na	<5	na
HARRIS CO.	108	96.4	131	99.2	243	98
LIBERTY CO.	<5	na	0	0	<5	na
MONTGOMERY CO.	<5	na	<5	na	<5	na
WALKER CO.	0	0	0	0	0	0
WALLER CO.	0	0	0	0	0	0
WHARTON CO.	0	0	0	0	0	0
Source: Texas Department of Health						
Cell sizes <5 are suppressed (not reported) to ensure client confidentiality.						
*HIV and AIDS may not sum to total due to PLWH changes in county of residence.						
Rates not calculated since MSM population unknown						

Table 1.2.8-H
HOUSTON-AREA HSDA
HIV AND AIDS PREVALENCE AMONG MCSM
2003

HSDA 2003	LIVING W/HIV		LIVING W/AIDS		LIVING W/ HIV/AIDS	
	No.	%	No.	%	No.	%
Total	1,252	100.0	2,450	100.0	3,702	100.0
Race/Ethnicity						
Black, not Hispanic	794	63.4	1,417	57.8	2,211	59.7
Hispanic	429	34.3	997	40.7	1,426	38.5
Other/Unknown	29	2.3	36	1.5	65	1.8
Age (yrs)						
13-24	117	9.3	36	1.5	153	4.1
25-44	912	72.8	1,598	65.2	2,510	67.8
45-64	216	17.3	794	32.4	1,010	27.3
65+	8	7.1	21	15.9	29	11.7
Transmission Mode						
MSM	1,099	87.8	2,107	86	3,206	86.6
MSM/IDU	153	12.2	343	14	496	13.4
Ten-Counties						
AUSTIN CO.	<5	*	<5	*	<5	*
CHAMBERS CO.	0	0	0	0	0	0
COLORADO CO.	<5	*	0	0	<5	*
FORT BEND CO.	26	2.1	66	2.7	92	2.5
HARRIS CO.	1,211	96.7	2,357	96.2	3,568	96.4
LIBERTY CO.	<5	*	<5	*	<5	*
MONTGOMERY CO.	8	0.6	10	0.4	18	0.5
WALKER CO.	<5	*	<5	*	<5	*
WALLER CO.	<5	*	6	0.2	*	*
WHARTON CO.	<5	*	<5	*	6	0.2
Source: Texas Department of Health Cell sizes <5 are suppressed (not reported) to ensure client confidentiality. *HIV and AIDS may not sum to total due to PLWH changes in county of residence. Rates not calculated since MSM population unknown						

Table 1.2.8-E
HOUSTON-AREA EMA
HIV AND AIDS PREVALENCE AMONG MCSM
2003

EMA 2003	LIVING W/HIV		LIVING W/AIDS		LIVING W/ HIV/AIDS*	
	No.	%	No.	%	No.	%
Total	1,247	100.0	2,442	100.0	3,689	100.0
Race/Ethnicity						
Black, not Hispanic	791	63.4	1,411	57.8	2,202	59.7
Hispanic	427	34.2	995	40.7	1,422	38.5
Other/Unknown	29	2.3	36	1.5	65	1.8
Age (yrs)						
13-24	115	9.2	36	1.5	151	4.1
25-44	909	72.9	1,592	65.2	2,501	67.8
45-64	216	17.3	792	32.4	1,008	27.3
65+	7	0.6	22	0.9	29	0.8
Transmission Mode						
MSM	1,095	87.8	2,102	86.1	3,197	86.7
MSM/IDU	152	12.2	340	13.9	492	13.3
Source: Texas Department of Health Cell sizes <5 are suppressed (not reported) to ensure client confidentiality. *HIV and AIDS may not sum to total due to PLWH changes in county of residence. Rates not calculated since MSM population unknown						

Table 1.2.9
HOUSTON-AREA HSDA
HIV AND AIDS INCIDENCE AMONG WHITE/ANGLO MSM
2003

HSDA 2003	NEW HIV INFECTION		NEW AIDS		NEW HIV/AIDS COMBINED*	
	No.	%	No.	%	No.	%
Total	79	100.0	85	100.0	167	100.0
Age (yrs)						
0-1	---	---	---	---	---	---
2-12	---	---	---	---	---	---
13-24	11	13.9	<5	na	na	na
25-44	54	68.4	64	75.3	118	70.7
45-64	14	17.7	17	20	31	18.6
65+	0	0	<5	na	na	na
Transmission Mode						
MSM	73	92.4	79	92.9	155	92.8
MSM/IDU	6	7.6	6	7.1	12	7.2
Ten-Counties						
AUSTIN CO.	0	0	<5	na	<5	na
CHAMBERS CO.	0	0	0	0	0	0
COLORADO CO.	0	0	0	0	0	0
FORT BEND CO.	0	0	<5		0	0
HARRIS CO.	74	93.7	79	92.9	156	93.4
LIBERTY CO.	<5	na	0	0	<5	na
MONTGOMERY CO.	<5	na	5	5.9	9	5.4
WALKER CO.	0	0	0	0	0	0
WALLER CO.	0	0	0	0	0	0
WHARTON CO.	0	0	0	0	0	0
Source: Texas Department of Health Cell sizes <5 are suppressed (not reported) to ensure client confidentiality. *HIV and AIDS may not sum to total due to PLWH changes in county of residence. Rates not calculated since MSM population unknown						

Table 1.2.10-H
HOUSTON-AREA HSDA
HIV AND AIDS PREVALENCE AMONG WHITE/ANGLO MSM
2003

HSDA 2003	LIVING W/HIV		LIVING W/AIDS		LIVING W/ HIV/AIDS*	
	No.	%	No.	%	No.	%
Total	1,094	100.0	2,649	100.0	3,743	100.0
Age (yrs)						
13-24	22	2.0	5	0.2	27	0.7
25-44	733	67.0	1,293	48.8	2,026	54.1
45-64	326	29.8	1,287	48.6	1,613	43.1
65+	13	1.2	62	2.4	75	2.0
Transmission Mode						
MSM	987	90.2	2,320	87.6	3,307	88.4
MSM/IDU	107	9.8	329	12.4	436	11.6
Ten-Counties						
AUSTIN CO.	0	0	5	0.2	5	0.1
CHAMBERS CO.	0	0	0	0	0	0
COLORADO CO.	0	0	<5	na	<5	na
FORT BEND CO.	<5	na	45	1.7	na	na
HARRIS CO.	1,050	96	2,519	95.1	3,569	95.4
LIBERTY CO.	5	0.5	12	0.5	17	0.5
MONTGOMERY CO.	32	2.9	52	2	84	2.2
WALKER CO.	<5	na	5	0.2	na	na
WALLER CO.	0	0	8	0.3	8	0.2
WHARTON CO.	0	0	<5	na	<5	na
Source: Texas Department of Health						
Cell sizes <5 are suppressed (not reported) to ensure client confidentiality.						
*HIV and AIDS may not sum to total due to PLWH changes in county of residence.						
Rates not calculated since MSM population unknown						

Table 1.2.10-E
HOUSTON-AREA EMA
HIV AND AIDS PREVALENCE AMONG WHITE/ANGLO MSM
2003

EMA 2003	LIVING W/HIV		LIVING W/AIDS		LIVING W/ HIV/AIDS *	
	No.	%	No.	%	No.	%
Total	1,091	100.0	2,636	100.0	3,727	100.0
Age (yrs)						
13-24	22	2.0	5	0.2	27	0.7
25-44	731	67.0	1,289	48.9	2,020	54.2
45-64	325	29.8	1,280	48.6	1,605	43.1
Transmission Mode						
MSM	984	90.2	2,307	87.5	3,291	88.3
MSM/IDU	107	9.8	329	12.5	436	11.7
Source: Texas Department of Health Cell sizes <5 are suppressed (not reported) to ensure client confidentiality. *HIV and AIDS may not sum to total due to PLWH changes in county of residence. Rates not calculated since MSM population unknown						

INJECTING DRUG USERS

Injecting drug users (IDU) include those whose specified transmission modes are either IDU or MSM/IDU. The EMA has 2,775 people living with either HIV or AIDS who contracted the disease via injecting drug use. The HSDA has 15 more than the EMA.



Transmission via injecting drug use may be declining.

- Twenty-nine IDU in the HSDA were diagnosed with HIV and 79 were diagnosed with AIDS in 2003.
- The number living with HIV who were infected via injecting drugs is less than half of those living with AIDS.



For both HIV and AIDS diagnoses, nearly three-quarters are among men and one-quarter are women.







-  Although numbers of newly diagnosed IDU are small, white IDU should be monitored as a potential emerging population.
 - White IDU make up 45% of new HIV diagnoses compared to 19% of AIDS diagnoses.
 - Hispanics also exhibit increasing HIV diagnoses relative to AIDS with 24% of the HIV diagnoses and 15% and AIDS.
 - Black IDU are approximately one-third of new HIV diagnoses but two-thirds of those diagnosed with AIDS.
-  Among those living with HIV and AIDS, 30% are white, 58% are black and 11% are Hispanic.
-  Nearly three quarters of IDU living with HIV or AIDS are in the 25 to 44 age group. Sixteen percent are older than this and 10% are younger.
-  The majority (60%) of IDU-related HIV and AIDS diagnoses were among 25-44 year olds, and this is the largest age group of people living with HIV and AIDS infected through injecting drug use. The number of youth (age 13 to 24) infected via injecting drug use is small, and youth make up 2% of those infected via this mode.
-  Approximately two thirds of those living with HIV or AIDS were infected via injecting drug use alone, and one third was infected by a combination of injecting drug use and MSM.
-  Harris County is home to almost all newly diagnosed IDU.
 - Four IDU living outside Harris County were diagnosed with HIV and four were diagnosed with AIDS. These are 14% and 5% of total people diagnosed, respectively.
 - Ninety six percent of people living with HIV or AIDS who were infected via injecting drug use live in Harris County.
 - The HSDA is home to only one person living with HIV infected via injecting drug use and 14 people with AIDS.

Table 1.2.11
HOUSTON-AREA HSDA
HIV AND AIDS INCIDENCE AMONG INJECTING DRUG USERS, 2003

HSDA 2003	NEW HIV INFECTION		NEW AIDS		NEW HIV/AIDS COMBINED*	
	No.	%	No.	%	No.	%
Total	29	100.0	79	100.0	109	100.0
Sex						
Male	22	75.9	58	73.4	81	74.3
Female	7	24.1	21	26.6	28	25.7
Race/Ethnicity						
White, not Hispanic	13	44.8	15	19	28	25.7
Black, not Hispanic	9	31	52	65.8	62	56.9
Hispanic	7	24.1	12	15.2	19	17.4
Other/Unknown	0	0	0	0	0	0
Age (yrs)						
0-1	---	---	---	---	---	---
2-12	---	---	---	---	---	---
13-24	6	20.7	<5	na	na	na
25-44	17	58.6	48	60.8	65	59.6
45-64	6	20.7	27	34.2	33	30.3
65+	0	0	<5	na	na	na
Transmission Mode						
IDU	17	58.6	56	70.9	74	67.9
MSM/IDU	12	41.4	23	29.1	35	32.1
Ten-Counties						
AUSTIN CO.	0	0	<5	na	<5	na
CHAMBERS CO.	0	0	0	0	0	0
COLORADO CO.	0	0	0	0	0	0
FORT BEND CO.	<5	na	0	0	<5	na
HARRIS CO.	25	86.2	75	94.9	101	92.7
LIBERTY CO.	0	0	0	0	0	0
MONTGOMERY CO.	<5	na	<5	na	5	4.6
WALKER CO.	0	0	0	0	0	0
WALLER CO.	0	0	0	0	0	0
WHARTON CO.	0	0	0	0	0	0
Source: Texas Department of Health Cell sizes <5 are suppressed (not reported) to ensure client confidentiality. *HIV and AIDS may not sum to total due to PLWH changes in county of residence. Rates not calculated since IDU population unknown						

Table 1.2.12-H
HOUSTON-AREA HSDA
HIV AND AIDS PREVALENCE AMONG INJECTING DRUG USERS
2003

HSDA 2003	LIVING W/HIV		LIVING W/AIDS		LIVING W/ HIV/AIDS*	
	No.	%	No.	%	No.	%
Total	877	100.0	1,913	100.0	2,790	100.0
Sex						
Male	570	65	1,411	73.8	1,981	71
Female	307	35	502	26.2	809	29
Race/Ethnicity						
White, not Hispanic	244	27.8	601	31.4	845	30.3
Black, not Hispanic	548	62.5	1,078	56.4	1,626	58.3
Hispanic	82	9.4	225	11.8	307	11
Other/Unknown	<5		9	0.5	12	0.5
Age (yrs)						
13-24	41	4.7	12	0.6	53	1.9
25-44	543	61.9	1,012	52.9	1,555	55.7
45-64	288	32.8	856	44.7	1,144	41.0
65+	5	0.6	33	1.7	38	1.4
Transmission Mode						
IDU	617	70.4	1,241	64.9	1,858	66.6
MSM/IDU	260	29.6	672	35.1	932	33.4
Ten-Counties						
AUSTIN CO.	0	0	<5	*	<5	*
CHAMBERS CO.	0	0	0	0	0	0
COLORADO CO.	0	0	<5		<5	*
FORT BEND CO.	18	2.1	33	1.7	51	1.8
HARRIS CO.	844	96.2	1,826	95.5	2,670	95.7
LIBERTY CO.	<5	na	9	0.5	na	na
MONTGOMERY CO.	11	1.3	26	1.4	37	1.3
WALKER CO.	<5	na	5	0.3	na	na
WALLER CO.	0	0	5	0.3	5	0.2
WHARTON CO.	0	0	5	0.3	5	0.2

Source: Texas Department of Health

Cell sizes <5 are suppressed (not reported) to ensure client confidentiality.

*HIV and AIDS may not sum to total due to PLWH changes in county of residence.


Rates not calculated since IDU population unknown

Table 1.2.12-E
HOUSTON-AREA EMA
HIV AND AIDS PREVALENCE AMONG INJECTING DRUG USERS
2003


EMA 2003	LIVING W/HIV		LIVING W/AIDS		LIVING W/ HIV/AIDS*	
	No.	%	No.	%	No.	%
Total	876	100.0	1,899	100.0	2,775	100.0
Sex						
Male	569	65	1,401	73.8	1,970	71
Female	307	35	498	26.2	805	29
Race/Ethnicity						
White, not Hispanic	244	27.9	598	31.5	842	30.3
Black, not Hispanic	548	62.6	1,067	56.2	1,615	58.2
Hispanic	81	9.2	225	11.8	306	11
Other/Unknown	<5		9	0.5	12	0.5
Age (yrs)						
13-24	41	4.7	12	0.6	53	1.9
25-44	542	61.9	1,002	52.8	1,544	55.6
45-64	288	32.9	852	44.9	1,140	41.1
65+	5	0.6	33	1.7	38	1.4
Transmission Mode						
IDU	617	70.4	1,230	64.8	1,847	66.6
MSM/IDU	259	29.6	669	35.2	928	33.4
Source: Texas Department of Health Cell sizes <5 are suppressed (not reported) to ensure client confidentiality. *HIV and AIDS may not sum to total due to PLWH changes in county of residence. Rates not calculated since MSM population unknown						

WOMEN OF CHILD BEARING AGE

HRSA has defined women of childbearing age as those between the ages of 13 and 44. In this population, new HIV and AIDS infections totaled 251 in 2003 in the HSDA. The number of women of childbearing age living with HIV or AIDS in the EMA is 2,957, and the HSDA is 25 cases higher with 2,982. Percentages are similar, but infection rates are somewhat higher for the EMA due to population differences.

 Black women comprise the largest percentage of newly diagnosed women of childbearing age and of women living with HIV or AIDS. The rates per 100,000 are significantly higher than those of whites and Hispanics. Comparison of HIV and AIDS diagnoses among other groups, however, indicate potential increasing trends among these women.

- Sixty-three percent of new HIV diagnoses and 77% of new AIDS diagnoses were among black women of childbearing age.
- Black women's rates of HIV infection were nine times higher than white women's and five times higher than Hispanic women's.
- White women make up a higher percentage of HIV cases (14.4%) than AIDS cases (13.0%), and these percentages correspond to higher infection rates for HIV than for AIDS.
- The EMA prevalence rate for HIV and AIDS is 1,051 per 100,000 for black women of childbearing age. This compares to 122 for Hispanic women and 91 for white women. In the HSDA, the prevalence rates are 1,031 per 100,000 for black women of childbearing age, 121 for Hispanic women and 88 for white women.

 Most of these women are infected through heterosexual contact. In addition, according to the CDC and other experts, for those without reported risk, the transmission mode is most often heterosexual sex. These women may not know how they were infected if they were not aware of the HIV status of their partner(s).

- Over 40% of women newly diagnosed with HIV or AIDS do not have reported risk. Eight percent report injecting drug use and 51% report heterosexual risk. For those newly diagnosed with HIV, 4% report injecting drug use, 48% report heterosexual risk and almost half do not have identified risk.
- Twenty one percent of women living with either HIV or AIDS in the EMA report injecting drug use as their mode of transmission, and 56% report heterosexual contact. Twenty three percent do not have reported risk. Within the HSDA, the percentage infected via heterosexual contact is similar, but injecting drug use is lower (17.6%).


 While Harris County has the majority of new HIV and AIDS infections and AIDS among women of childbearing age, other counties report diagnoses. Fort Bend County is home to 5% of both HIV and AIDS diagnoses among these women.

Table 1.2.13
HOUSTON-AREA HSDA
HIV AND AIDS INCIDENCE AMONG WOMEN 13-44
2003

HSDA 2003	NEW HIV INFECTION			NEW AIDS			NEW HIV/AIDS COMBINED*		
	No.	%	Rate	No.	%	Rate	No.	%	Rate
Total	147	100.0	13.6	104	100.0	9.6	251	100.0	23.2
Race/Ethnicity									
White, not Hispanic	23	15.6	4.9	7	6.7	1.5	30	12.0	6.4
Black, not Hispanic	93	63.3	44.9	80	76.9	38.6	173	68.9	83.6
Hispanic	29	19.7	8.5	15	14.4	4.4	44	17.5	13.0
Other/Unknown	<5	na	na	<5	na	na	<5	na	na
Transmission Mode									
IDU	6	4.1	na	14	13.5	na	20	8.0	na
Hetero	71	48.3	na	58	55.8	na	129	51.4	na
No Risk Reported	70	47.6	na	32	30.8	na	102	40.6	na
Ten-Counties									
AUSTIN CO.	0	0	0.0	0	0	0.0	0	0	0.0
CHAMBERS CO.	0	0	0.0	0	0	0.0	0	0	0.0
COLORADO CO.	<5	na	na	0	0	0.0	<5	na	na
FORT BEND CO.	8	5.4	9.1	5	4.8	5.7	13	5.2	14.7
HARRIS CO.	132	89.8	15.3	98	94.2	11.4	230	91.6	26.7
LIBERTY CO.	<5	na	na	0	0	0.0	<5	na	na
MONTGOMERY CO.	<5	na	na	<5	na	na	<5	na	na
WALKER CO.	<5	na	na	<5	na	na	<5	na	na
WALLER CO.	0	0	0.0	0	0	0.0	0	0	0.0
WHARTON CO.	0	0	0.0	0	0	0.0	0	0	0.0
Source: Texas Department of Health									
Cell sizes <5 are suppressed (not reported) to ensure client confidentiality.									
*HIV and AIDS may not sum to total due to PLWH changes in county of residence.									
Rates per 100,000 based upon 2000 U.S. census									

Table 1.2.14-H
HOUSTON-AREA HSDA
HIV AND AIDS PREVALENCE AMONG WOMEN 13-44
2003



HSDA 2003	LIVING w/ HIV			LIVING w/AIDS			LIVING w/ HIV/AIDS*		
	No.	%	Rate	No.	%	Rate	No.	%	Rate
Total	1,654	100.0	153.0	1,328	100	122.9	2,982	100	275.9
Race/Ethnicity									
White, not Hispanic	239	14.4	50.9	173	13	36.9	412	13.8	87.8
Black, not Hispanic	1,187	71.8	573.4	947	71.3	457.5	2,134	71.6	1,030.9
Hispanic	205	12.4	60.4	205	15.4	60.4	410	13.7	120.8
Other/Unknown	23	1.4	35.3	<5					
Transmission Mode									
IDU	217	13.1	na	309	23.3	na	526	17.6	na
Hetero	917	55.4	na	783	59	na	1,700	57.0	na
Mother at Risk	12	0.7	na	22	1.7	na	34	1.1	na
Ten-Counties									
AUSTIN CO.	<5		0.0	<5		0.0	6	0.2	118.4
CHAMBERS CO.	0	0	0.0	<5		0.0	<5	na	na
COLORADO CO.	5	0.3	120.1	0	0.0	0.0	5	0.1	
FORT BEND CO.	46	2.8	52.1	25	1.9	31.7	79	2.3	89.5
HARRIS CO.	1,552	93.8	180.4	1,269	95.6	147.5	2,821	94.6	327.9
LIBERTY CO.	5	0.3	28.7	8	0.6	45.9	13	0.4	74.6
MONTGOMERY CO.	26	1.6	37.7	15	1.1	21.7	41	1.4	59.4
WALKER CO.	<5	na	na	<5	na	na	7	0.2	54.0
WALLER CO.	7	0.4	83.6	<5	na	na	na	na	na
WHARTON CO.	6	0.4	65.7	<5	na	na	na	na	na
Source: Texas Department of Health									
Cell sizes <5 are suppressed (not reported) to ensure client confidentiality.									
*HIV and AIDS may not sum to total due to PLWH changes in county of residence.									
Rates per 100,000 based upon 2000 U.S. census									

Table 1.2.14-E
HOUSTON-AREA EMA
HIV AND AIDS PREVALENCE AMONG WOMEN 13-44
2003

EMA 2003	LIVING W/ HIV			LIVING W/AIDS			LIVING W/ HIV/AIDS*		
	No.	%	Rate	No.	%	Rate	No.	%	Rate
Total	1,636	100	155.9	1,321	100	125.9	2,957	100	281.8
Race/Ethnicity									
White, not Hispanic	238	14.5	52.8	171	12.9	37.9	409	13.8	90.8
Black, not Hispanic	1,173	71.7	582.6	943	71.4	468.4	2,116	71.6	1051.0
Hispanic	203	12.4	61.0	204	15.4	61.3	407	13.8	122.3
Other/Unknown	22	1.3	33.9	<5			25	0.8	38.5
Transmission Mode									
IDU	271	15.2	na	428	26.8	na	699	20.7	na
Hetero	983	55.2	na	910	57	na	1,893	56.1	na
Mother at Risk	0	0	na	7	0.4	na	7	0.2	na
Source: Texas Department of Health									
Cell sizes <5 are suppressed (not reported) to ensure client confidentiality.									
*HIV and AIDS may not sum to total due to PLWH changes in county of residence.									
Rates per 100,000 based upon 2000 U.S. census									

YOUTH

HRSA has defined youth as young people between the ages of 13 and 24 years. The HSDA has 16 more youth living with HIV disease than the EMA, so information presented applies to youth in both geographic regions.

-  In 2003, a total of 153 youth between the ages of 13 and 24 were newly diagnosed with HIV or AIDS in the Houston HSDA at a rate of 20 per 100,000. The HIV infection rate was 14 per 100,000.
-  Young women are a significantly higher percentage of new HIV infections and those living with HIV than women overall, a noteworthy trend.
 - Over 45% of new HIV diagnoses are among young women. This is much higher than the 30% of total new HIV infections that are among women.
 - Young men comprise 55% of new HIV infections and 64% of new AIDS diagnoses.
 - HIV infection rates are similar for young men and women (14.7 per 100,000 for men and 13 per 100,000 for women), but AIDS infection rates are higher for young men than for young women (7.2 per 100,000 vs. 4.3 per 100,000)

- Young women comprise 55% of those living with either HIV or AIDS in this age group, and they are 56% of those living with HIV.



Black youth are disproportionately affected by HIV and AIDS, but comparison of HIV infections and AIDS infections by race reveals possible emerging trends among white youth.

- Nearly 60% of new HIV infections are among black youth, with an infection rate that is six times higher than whites and seven times higher than Hispanics.
- While less than five AIDS diagnoses are among white youth, twenty (18.5%) new diagnoses of HIV are among whites. In addition, whites are a somewhat higher percentage of those living with HIV than with AIDS. White youth are 14.5% of those living with HIV compared to 13% of those with AIDS.
- Black youth are, by far, the largest group infected with HIV disease, comprising nearly 70% of those living with either HIV or AIDS. This compares to 12% for white youth and 18% for Hispanic youth.



Among youth 13 to 24 years, sexual contact is the typical transmission mode.

- Thirty-five (32%) new HIV infections were attributed to male-to-male sex, and 32 (30%) were attributed to heterosexual contact. These two transmission modes accounted for the highest proportion of newly diagnosed HIV infections during 2003 compared to intravenous drugs users (<5) and MSM/IDU (<5).
- Among newly diagnosed AIDS cases, 40% were attributed to heterosexual contact, and 31% to male-to-male sex.
- For those living with HIV disease, 35% report heterosexual risk, and 23% report MSM as their risk category. Another 5% report MSM/IDU and nine percent report IDU.



Over 92% of HIV diagnoses and 94% of AIDS diagnoses were among Harris County youth. Five other counties, however, had a small number of new HIV diagnoses among youth.



The prevalence rate for HIV is nearly triple that for AIDS in both the EMA and HSDA, with 563 HIV cases for a rate of 75.6 per 100,000 youth and 176 AIDS cases for a rate of 23.6 per 100,000 in the EMA. Rates in the HSDA are 73.3 per 100,000 for HIV and 22.9 per 100,000 for AIDS.

Table 1.2.15
HOUSTON-AREA HSDA
HIV AND AIDS INCIDENCE AMONG YOUTH 13-24
2003

HSDA 2003	NEW HIV INFECTION			NEW AIDS			NEW HIV/AIDS COMBINED*		
	No.	%	Rate	No.	%	Rate	No.	%	Rate
Total	108	100.0	13.9	45	100.0	5.8	153	100.0	19.7
Sex									
Male	59	54.6	14.7	29	64.4	7.2	88	57.5	21.9
Female	49	45.4	13.0	16	35.6	4.3	65	42.5	17.3
Race/Ethnicity									
White, not Hispanic	20	18.5	6.8	<5	na	na	23	15.0	7.8
Black, not Hispanic	64	59.3	43.3	33	73.3	22.3	97	63.4	65.6
Hispanic	23	21.3	7.9	9	20	3.1	32	20.9	11.0
Other/Unknown	<5	na	na	<5	na	na	<5	na	na
Transmission Mode									
MSM	35	32.4	na	14	31.1	na	49	32	na
IDU	<5	na	na	<5	na	na	6	3.9	na
MSM/IDU	<5	na	na	<5	na	na	<5	na	na
Hetero	32	29.6	na	18	40	na	50	32.7	na
Mother at Risk	0	0	na	<5	na	na	<5	na	na
Ten-Counties									
AUSTIN CO.	0	0	0.0	0	0	0.0	0	0	0.0
CHAMBERS CO.	0	0	0.0	0	0	0.0	0	0	0.0
COLORADO CO.	<5	na	na	0	0	0.0	<5	na	na
FORT BEND CO.	<5	na	na	<5	na	na	<5	na	na
HARRIS CO.	100	92.6	16.4	44	97.8	7.2	144	94.1	23.6
LIBERTY CO.	<5	na	na	0	0	0.0	<5	na	na
MONTGOMERY CO.	<5	na	na	<5	na	na	<5	na	na
WALKER CO.	<5	na	na	0	0	0.0	<5	na	na
WALLER CO.	0	0	0.0	0	0	0.0	0	0	0.0
WHARTON CO.	0	0	0.0	0	0	0.0	0	0	0.0
Source: Texas Department of Health Cell sizes <5 are suppressed (not reported) to ensure client confidentiality. *HIV and AIDS may not sum to total due to PLWH changes in county of residence. Rates per 100,000 based upon 2000 U.S. census									

Table 1.2.16-H
HOUSTON-AREA HSDA
HIV AND AIDS PREVALENCE AMONG YOUTH 13-24
2003

HSDA 2003	LIVING W/HIV			LIVING W/AIDS			LIVING W/ HIV/AIDS*		
	No.	%	Rate	No.	%	Rate	No.	%	Rate
Total	573	100	73.73	178	100	22.90	751	100	96.63
Sex									
Male	250	43.6	62.31	87	48.9	21.68	337	44.9	83.99
Female	323	56.4	85.92	91	51.1	24.21	414	55.1	110.12
Race/Ethnicity									
White, not Hispanic	73	12.7	24.65	14	7.9	4.73	87	11.6	29.37
Black, not Hispanic	393	68.6	265.78	130	73	87.92	523	69.6	353.69
Hispanic	97	16.9	33.30	34	19.1	11.67	131	17.4	44.97
Other/Unknown	10	1.7	23.91	0	0		10	1.3	
Transmission Mode									
MSM	133	23.2	na	38	21.3	na	171	22.8	na
IDU	35	6.1	na	9	5.1	na	44	5.9	na
MSM/IDU	6	1	na	<5	na	na	9	1.2	na
Hetero	203	35.4	na	61	34.3	na	264	35.2	na
Mother at Risk	26	4.5	na	31	17.4	na	57	7.6	na
Ten-Counties									
AUSTIN CO.	<5	*	0.0	0	0	0.0	<5	*	0.0
CHAMBERS CO.	0	0	0.0	0	0	0.0	0	0	0.0
COLORADO CO.	5	0.9	142.5	<5	na	na	na	na	na
FORT BEND CO.	12	2.1	19.7	<5	na	na	na	na	na
HARRIS CO.	535	93.4	87.5	171	96.1	28.0	706	94	115.5
LIBERTY CO.	7	1.2	58.4	0	0	0.0	7	0.9	58.4
MONTGOMERY CO.	20	1.6	41.6	<5	na	na	na	na	na
WALKER CO.	<5	na	na	0	0	0.0	<5	na	na
WALLER CO.	<5	na	na	<5	na	na	<5	na	na
WHARTON CO.	<5	na	na	<5	na	na	<5	na	na

Source: Texas Department of Health

Cell sizes <5 are suppressed (not reported) to ensure client confidentiality.

*HIV and AIDS may not sum to total due to PLWH changes in county of residence.

Rates per 100,000 based upon 2000 U.S. census


Table 1.2.16-E
HOUSTON-AREA EMA
HIV AND AIDS PREVALENCE AMONG YOUTH 13-24
2003

EMA 2003	LIVING W/HIV			LIVING W/AIDS			LIVING W/ HIV/AIDS*	
	No.	%	Rate	No.	%	Rate	No.	%
Total	563	100	75.6	176	100	23.6	739	100
Sex								
Male	247	43.9	64.5	85	48.3	22.2	332	44.9
Female	316	56.1	87.3	91	51.7	25.2	407	55.1
Race/Ethnicity								
White, not Hispanic	72	12.8	25.9	14	8	5.0	86	11.6
Black, not Hispanic	385	68.4	272.9	129	73.3	91.5	514	69.6
Hispanic	97	17.2	34.2	33	18.8	11.6	130	17.6
Other/Unknown	9	1.6	21.7	0	0	0.0	9	1.2
Transmission Mode								
MSM	131	23.3	na	38	21.6	na	169	22.9
IDU	35	6.2	na	9	5.1	na	44	6
MSM/IDU	6	1.1	na	<5	na	na	na	na
Hetero	198	35.2	na	61	34.7	na	259	35
Mother at Risk	26	4.6	na	30	17	na	56	7.6
Source: Texas Department of Health Cell sizes <5 are suppressed (not reported) to ensure client confidentiality. *HIV and AIDS may not sum to total due to PLWH changes in county of residence. Rates not calculated for total. Rates per 100,000 based upon 2000 U.S. census								

BLACKS/AFRICAN-AMERICANS

Surveillance data are gathered for blacks without nationality distinction. While it can be assumed that most of these blacks are African-Americans, surveillance data do not differentiate between African-Americans, Africans, Caribbean-Africans, etc.

The HSDA has 45 more blacks diagnosed with HIV or AIDS than the EMA. Between the two groups, percentages may vary by 0.1% to 0.2%.

-  In 2003, a total of 610 blacks were newly diagnosed with HIV or AIDS in the Houston HSDA, at a rate of 80 per 100,000. The number of HIV and AIDS diagnoses was almost identical. For those living with AIDS, the rate per 100,000 is higher than for those with an HIV diagnosis only.






-  Black males were the largest groups of newly diagnosed, but women increased as a percentage of new HIV infections compared to AIDS. Comparing those living with HIV to those living with AIDS also reveals a possible increase in infection among black women.
 - The rate of new HIV infection among men was 1.8 times higher than that among women, and the rate of new AIDS infection was 2.1 times higher among men than women.
 - Women are 43.9% of those living with HIV in both the EMA and HSDA, and they are 33.1% of those living with AIDS in both geographic areas.
-  Blacks age 25 to 44 had the highest rates of both HIV and AIDS diagnoses, but a possible increasing trend among black youth 13 to 24 years is presented.
 - Black youth had a higher rate of HIV diagnoses than AIDS diagnoses, 43.3 per 100,000 for HIV and 23.3 per 100,000 for AIDS
 - Similarly 11.4% of blacks living with HIV are youth, while only 3.2% of those living with AIDS are youth.
-  Among blacks with newly diagnosed HIV and AIDS, 125 (21%) were attributed to male-to-male sex, and 176 (29%) were attributed to heterosexual contact. Risk was not reported for approximately half of new HIV diagnoses and 30% of new AIDS diagnoses.
-  Comparing those living with HIV to those living with AIDS, the trend is toward increasing infections from heterosexual contact and fewer from MSM and IDU.
-  Harris County is home to over 92% of African-Americans diagnosed with HIV and with AIDS. Small percentages of newly diagnosed African-Americans also reside in Fort Bend and Montgomery Counties, and five other counties had less than five black residents diagnosed with HIV or AIDS. In addition, 96% of those living with HIV and AIDS reside in Harris County.

Table 1.2.17
HOUSTON AREA HSDA
HIV AND AIDS INCIDENCE AMONG BLACKS/AFRICAN-AMERICANS
2003

HSDA 2003	NEW HIV INFECTION			NEW AIDS			NEW HIV/AIDS COMBINED*		
	No.	%	Rate	No.	%	Rate	No.	%	Rate
Total	303	100.0	39.9	304	100.0	40.0	610	100.0	80.3
Sex									
Male	186	61.4	52.0	197	64.8	55.1	386	63.3	107.9
Female	117	38.6	29.1	107	35.2	26.7	224	36.7	55.8
Age (yrs)									
0-1	<5	na	na	0	na	0.0	<5	na	na
2-12	<5	na	na	0	na	0.0	<5	na	na
13-24	64	21.1	43.3	33	10.9	22.3	97	na	65.6
25-44	173	57.1	71.2	182	59.9	74.9	355	na	146.1
45-64	61	20.1	42.9	81	26.6	56.9	142	na	99.8
65+	<5	na	na	8	2.6	15.6	na	na	na
Transmission Mode									
MSM	63	20.8	na	60	19.7	na	125	20.5	na
IDU	6	2	na	38	12.5	na	45	7.4	na
MSM/IDU	<5	na	na	14	4.6	na	17	2.8	na
Hetero	81	26.7	na	95	31.3	na	176	28.9	na
Mother at Risk	<5	na	na	<5	na	na	5	0.8	na
Ten-Counties									
AUSTIN CO.	0	0	0.0	<5	na	na	<5	na	na
CHAMBERS CO.	0	0	0.0	0	0	0.0	0	0	0.0
COLORADO CO.	0	0	0.0	0	0	0.0	0	0	0.0
FORT BEND CO.	10	3.3	14.1	12	3.9	16.9	22	3.6	31.1
HARRIS CO.	279	92.1	44.3	285	93.8	45.2	567	93.0	90.0
LIBERTY CO.	<5	na	na	0	0	0.0	<5	na	na
MONTGOMERY CO.	6	2.0	57.2	<5	na	na	8	1.3	76.3
WALKER CO.	<5	na	na	<5	na	na	<5	na	na
WALLER CO.	<5	na	na	<5	na	na	<5	na	na
WHARTON CO.	<5	na	na	<5	na	na	<5	na	na

Source: Texas Department of Health

Cell sizes <5 are suppressed (not reported) to ensure client confidentiality.

*HIV and AIDS may not sum to total due to PLWH changes in county of residence.

Rates per 100,000 based upon 2000 U.S. census

Table 1.2.18-H
HOUSTON-AREA HSDA
HIV AND AIDS PREVALENCE AMONG BLACKS/AFRICAN-AMERICANS
2003






HSDA 2003	LIVING W/ HIV			LIVING W/AIDS			LIVING W/ HIV/AIDS*		
	No.	%	Rate	No.	%	Rate	No.	%	Rate
Total	3,445	100.0	453.7	4,081	100.0	537.5	7,526	100.0	991.2
Sex									
Male	1,931	56.1	539.6	2,731	66.9	763.2	4,662	61.9	1,302.8
Female	1,514	43.9	377.1	1,350	33.1	336.3	2,864	38.1	713.4
Age (yrs)									
0-1	7	0.2	28.2	0	0	0.0	7	0.1	28.2
2-12	94	2.7	62.6	27	0.7	18.0	121	1.6	80.5
13-24	393	11.4	265.8	130	3.2	87.9	523	6.9	353.7
25-44	2,136	62	879.2	2,421	59.3	996.5	4,557	60.6	1875.6
45-64	776	22.5	545.6	1,405	34.4	987.8	2,181	29	1533.3
65+	39	1.1	76.2	98	2.4	191.6	137	1.8	267.8
Transmission Mode									
MSM	679	19.7	na	1,158	28.4	na	1,837	24.4	na
IDU	433	12.6	na	819	20.1	na	1,252	16.6	na
MSM/IDU	115	3.3	na	259	6.3	na	374	5	na
Hetero	1,084	31.5	na	1,193	29.2	na	2,277	30.3	na
Mother at Risk	107	3.1	na	50	1.2	na	157	2.1	na
Ten-Counties									
AUSTIN CO.	9	0.3	352.8	5	0.1	196.0	14	0.2	548.8
CHAMBERS CO.	0	0	0.0	0	0	0.0	0	0	0.0
COLORADO CO.	5	0.1	166.6	0	0	0.0	5	0.1	166.6
FORT BEND CO.	73	2.1	103.1	107	2.6	151.1	180	2.4	254.2
HARRIS CO.	3,297	95.7	523.2	3,914	95.9	621.1	7,211	95.8	1,144.3
LIBERTY CO.	12	0.3	131.7	11	0.3	120.7	23	0.3	252.3
MONTGOMERY CO.	29	0.8	276.7	17	0.4	162.2	46	0.6	438.9
WALKER CO.	5	0.1	33.7	6	0.1	40.4	11	0.1	74.1
WALLER CO.	9	0.3	93.7	12	0.3	125.0	21	0.3	218.7
WHARTON CO.	6	0.2	98.2	9	0.2	147.3	15	0.2	245.4
Source: Texas Department of Health Cell sizes <5 are suppressed (not reported) to ensure client confidentiality. *HIV and AIDS may not sum to total due to PLWH changes in county of residence. Rates per 100,000 based upon 2000 U.S. census									

Table 1.2.18-E
HOUSTON-AREA EMA
HIV AND AIDS PREVALENCE AMONG BLACKS/AFRICAN-AMERICANS
2003

EMA 2003	LIVING W/ HIV			LIVING W/AIDS			LIVING W/ HIV/AIDS*		
	No.	%	Rate	No.	%	Rate	No.	%	Rate
Total	3,420	100.0	466.7	4,061	100.0	554.2	7,481	100.0	1,020.9
Sex									
Male	1,920	56.1	560.2	2,717	66.9	792.7	4,637	62.0	1,352.8
Female	1,500	43.9	384.6	1,344	33.1	344.6	2,844	38.0	729.2
Age (yrs)									
0-1	7	0.2	29.1	0	0	0.0	7	0.1	29.1
2-12	94	2.7	64.2	27	0.7	18.4	121	1.6	82.6
13-24	385	11.3	272.9	129	3.2	91.5	514	6.9	364.4
25-44	2,120	62	902.4	2,407	59.3	1024.5	4,527	60.5	1926.9
45-64	775	22.7	563.4	1,400	34.5	1017.8	2,175	29.1	1581.3
65+	39	1.1	80.0	98	2.4	201.1	137	1.8	281.1
Transmission Mode									
MSM	676	19.8	na	1,155	28.4	na	1,831	24.5	na
IDU	433	12.7	na	811	20	na	1,244	16.6	na
MSM/IDU	115	3.4	na	256	6.3	na	371	5.0	na
Hetero	1,078	31.5	na	1,192	29.4	na	2,270	30.3	na
Mother Risk	107	3.1	na	50	1.2	na	157	2.1	na
Source: Texas Department of Health Cell sizes <5 are suppressed (not reported) to ensure client confidentiality. *HIV and AIDS may not sum to total due to PLWH changes in county of residence. Rates per 100,000 based upon 2000 U.S. census									

HISPANICS/LATINOS

The HSDA has 2,807 Hispanics living with HIV or AIDS. The EMA has 14 fewer cases among Hispanics than the HSDA. Percentages between the two regions are nearly identical.

-  In 2003, a total of 256 Hispanics were newly diagnosed with HIV or AIDS in the Houston HSDA, at a rate of 20 per 100,000. Infection rates were the same for HIV and for AIDS.
-  Comparing HIV and AIDS diagnoses, Hispanic women demonstrate an increasing trend.
 - Women are 23.4% of new HIV diagnoses and 17.5% of new AIDS diagnoses. Rates per 100,000 Hispanic women are 4.9 for HIV and 3.6 for AIDS.
 - Nearly one quarter of Hispanics with HIV are women while 17% of those with AIDS are women.
-  Nevertheless, Hispanic men were infected with HIV at a rate three times that of women, and their AIDS infection rate was 4.3 times higher.
-  As with other populations, the 25 to 44 year age group is the largest, but infections among youth are increasing.
 - Nearly three-quarters of new HIV and AIDS diagnoses are among Hispanics age 25 to 44 years.
 - Nearly 10 percent of Hispanics living with HIV are youth, while 1.9% of those living with AIDS are youth.
-  Sexual activity, either MSM or heterosexual, was the transmission mode for almost all Hispanics diagnosed with HIV and those living with HIV or AIDS.
 - MSM were a higher percentage of those diagnosed with AIDS than those diagnosed with HIV.
 - Nearly 40% of Hispanics living with HIV and 50% of those living with AIDS report MSM as their transmission mode.
 - Heterosexual contact is the transmission mode for 24% of Hispanics living with HIV and 23% of those living with AIDS.
 - Among those diagnosed with AIDS, 7% were IDU, and 8% of those living with AIDS are IDU.


-  Harris County is home to between 95% and 96% of Hispanics living with HIV or AIDS. In addition, Harris County had the highest proportion of new HIV infections and diagnosed AIDS cases among Hispanics during 2003. There was also a small portion of cases in Fort Bend County and Montgomery County.

Table 1.2.19
HOUSTON AREA HSDA
HIV AND AIDS INCIDENCE AMONG HISPANICS
2003

HSDA 2003	NEW HIV INFECTION			NEW AIDS			NEW HIV/AIDS COMBINED (NOT HIV+/AIDS)		
	No.	%	Rate	No.	%	Rate	No.	%	Rate
Total	128	100.0	10.0	126	100.0	9.9	256	100.0	20.0
Sex									
Male	98	76.6	14.7	104	82.5	15.6	204	79.7	30.5
Female	30	23.4	4.9	22	17.5	3.6	52	20.3	8.5
Age (yrs)									
0-1	0	0	0.0	0	0	0.0	0	0	0.0
2-12	0	0	0.0	0	0	0.0	0	0	0.0
13-24	23	18.0	7.9	9	7.1	3.1	32	12.5	11.0
25-44	94	73.4	21.3	94	74.6	21.3	188	73.4	42.6
45-64	11	8.6	7.0	21	16.7	13.4	32	12.5	20.4
65+	0	0	0.0	<5	na	na	4	1.6	10.2
Transmission Mode									
MSM	38	29.7	na	53	42.1	na	93	36.3	na
IDU	<5	na	na	9	7.1	na	13	5.1	na
MSM/IDU	<5	na	na	<5	na	na	6	2.3	na
Hetero	38	29.7	na	31	24.6	na	69	27	na
Mother at Risk	0	0	na	0	0	na	0	0	na
Ten-Counties									
AUSTIN CO.	0	0	0.0	0	0	0.0	0	0	0.0
CHAMBERS CO.	0	0	0.0	0	0	0.0	0	0	0.0
COLORADO CO.	0	0	0.0	0	0	0.0	0	0	0.0
FORT BEND CO.	<5	na	na	<5	na	na	6	2.3	8.0
HARRIS CO.	120	93.8	10.7	123	97.6	11.0	245	95.7	21.9
LIBERTY CO.	0	0	0.0	0	0	0.0	0	0	0.0
MONTGOMERY CO.	<5	na	na	<5	na	na	5	2.0	13.5
WALKER CO.	0	0	0.0	0	0	0.0	0	0	0.0
WALLER CO.	0	0	0.0	0	0	0.0	0	0	0.0
WHARTON CO.	0	0	0.0	0	0	0.0	0	0	0.0
Source: Texas Department of Health									
Cell sizes <5 are suppressed (not reported) to ensure client confidentiality.									
*HIV and AIDS may not sum to total due to PLWH changes in county of residence.									
Rates per 100,000 based upon 2000 U.S. census									

Table 1.2.20-H
HOUSTON-AREA HSDA
HIV AND AIDS PREVALENCE AMONG HISPANICS
2003

HSDA 2003	LIVING W/HIV			LIVING W/AIDS			LIVING W/HIV/AIDS (NOT SUM)		
	No.	%	Rate	No.	%	Rate	No.	%	Rate
Total	987	100.0	77.2	1,820	100.0	142.4	2,807	100.0	219.6
Sex									
Male	741	75.1	110.9	1,513	83.1	226.5	2,254	80.3	337.4
Female	246	24.9	40.3	307	16.9	50.3	553	19.7	90.7
Age (yrs)									
0-1	<5	na	na	0	0	0	<5	na	na
2-12	15	1.5	5.2	14	0.8	4.8	29	1	10.0
13-24	97	9.8	33.3	34	1.9	11.7	131	4.7	45.0
25-44	723	73.3	163.7	1177	64.7	266.5	1900	67.7	430.2
45-64	144	14.6	91.8	561	30.8	357.8	705	25.1	449.6
65+	7	0.7	17.8	34	1.9	86.6	41	1.5	104.5
Transmission Mode									
MSM	392	39.7	na	915	50.3	na	1,307	46.6	na
IDU	45	4.6	na	143	7.9	na	188	6.7	na
MSM/IDU	37	3.7	na	82	4.5	na	119	4.2	na
Hetero	237	24	na	419	23	na	656	23.4	na
Mother at Risk	20	2	na	20	1.1	na	40	1.4	na
Ten-Counties									
AUSTIN CO.	0	0	0.0	0	0	0.0	0	0	0.0
CHAMBERS CO.	<5	na	na	<5	na	na	<5	na	na
COLORADO CO.	<5	na	na	<5	na	na	<5	na	na
FORT BEND CO.	24	2.4	32.1	41	2.3	54.8	65	2.3	86.8
HARRIS CO.	936	94.8	83.6	1,751	96.2	156.4	2,687	95.7	240.0
LIBERTY CO.	<5	na	na	<5	na	na	<5	na	na
MONTGOMERY CO.	17	1.7	45.8	17	0.9	45.8	34	1.2	91.5
WALKER CO.	<5	na	na	<5	na	na	<5	na	na
WALLER CO.	<5	na	na	<5	na	na	<5	na	na
WHARTON CO.	<5	na	na	<5	na	na	6	0.2	46.6
Source: Texas Department of Health Cell sizes <5 are suppressed (not reported) to ensure client confidentiality. *HIV and AIDS may not sum to total due to PLWH changes in county of residence. Rates per 100,000 based upon 2000 U.S. census									

Table 1.2.20-E
HOUSTON-AREA EMA
HIV AND AIDS PREVALENCE AMONG HISPANICS
2003

EMA 2003	LIVING W/HIV			LIVING W/AIDS			LIVING W/ HIV/AIDS (NOT SUM)		
	No.	%	Rate	No.	%	Rate	No.	%	Rate
Total	981	100.0	78.6	1,813	100.0	145.2	2,794	100.0	223.8
Sex									
Male	739	75.3	113.5	1,508	83.2	231.6	2,247	80.4	345.1
Female	242	24.7	40.5	305	16.8	51.1	547	19.6	91.6
Age (yrs)									
0-1	<5			0	0	0.0	<5		
2-12	15	1.5	5.3	14	0.8	4.9	29	1	10.2
13-24	97	9.9	34.2	33	1.8	11.6	130	4.7	45.8
25-44	719	73.3	166.4	1174	64.8	271.7	1893	67.8	438.1
45-64	142	14.5	93.1	559	30.8	366.4	701	25.1	459.4
65+	7	0.7	18.4	33	1.8	86.9	40	1.4	105.4
Transmission Mode									
MSM	391	39.9	na	913	50.4	na	1,304	46.7	na
IDU	45	4.6	na	143	7.9	na	188	6.7	na
MSM/IDU	36	3.7	na	82	4.5	na	118	4.2	na
Hetero	236	24.1	na	417	23	na	653	23.4	na
Mother at Risk	20	2	na	19	1	na	39	1.4	na
Source: Texas Department of Health Cell sizes <5 are suppressed (not reported) to ensure client confidentiality. *HIV and AIDS may not sum to total due to PLWH changes in county of residence. Rates per 100,000 based upon 2000 U.S. census									

QUESTION 1.3:

**WHAT ARE THE INDICATORS OF RISK FOR HIV/AIDS
INFECTION IN THE HOUSTON AREA?**

WHAT ARE THE INDICATORS OF RISK FOR HIV/AIDS INFECTION IN THE HOUSTON AREA?

The previous chapter described the distribution and trends of HIV infection and AIDS diagnoses throughout the Houston HSDA and EMA. The purpose of this chapter is to examine available data on risk behaviors and markers in the Houston EMA from two perspectives: 1) Factors that affect the risk of acquiring HIV infection among HIV-negative persons (STDs, HIV testing), and; 2) Factors that affect the risk of transmitting HIV infection among HIV-positive persons (MSMs, injection drug users, heterosexuals).

Risk factor data for HIV-negative persons was limited to 5-year STD data trends by age, sex and race/ethnicity (Source: Texas Department of State Health Services) and HIV Counseling & Testing data (Source: City of Houston Department of Health and Human Services). Risk factor data for HIV-positive persons were obtained from a sample of 654 consumers from the 2005 Houston Area HIV/AIDS Needs Assessment. Additional HIV/AIDS risk behavior data were not readily available at time of report preparation, but continuing collaborations with partner institutions (City of Houston Health Department, Department of State Health Services, etc) will facilitate similar data collection efforts in the future.

The purpose of the 2005 Houston Area HIV/AIDS Comprehensive Needs Assessment is to provide accurate and reliable information about the level of use, perception of need, experience of barriers, and analysis of gaps in services to those affected with HIV/AIDS. This information is used by community-based planning bodies in order to a) Prioritize fundable services from a consumer point-of-view, including needed services not currently offered; b) Determine funding allocations for those services based upon money available within the various partner organizations, and to inform other funding sources which pay for similar services; c) Make programmatic recommendations on how to best meet the needs of clients within those services; d) Support efforts to plan a comprehensive system of HIV/AIDS care; and e) Provide the supporting documentation for annual Health Resources and Services Administration (HRSA) and Department of State Health Services (DSHS) grant applications. The 2005 Houston Area HIV/AIDS Needs Assessment was conducted for the Houston Eligible Metropolitan Area (EMA) and the Houston Health Services Delivery Area (HSDA) designated by the Texas Department of State Health Services (DSHS). A survey of 654 people living with HIV disease was conducted during April and May 2004.

Data for each population are organized as direct and indirect measures. Direct measures of risk provide information about risk behavior that is directly associated with HIV transmission. Indirect measures do not directly describe HIV risk behaviors. Rather, they are indicators of possible HIV risk that may need further investigation. For example, an increase in STD or teen pregnancy rates does not directly indicate that HIV exposure is increasing, but may indicate an increase in unprotected sex.

Summary

Men who have sex with Men (MSM):

- According to HIV-positive MSM respondents in the 2005 Needs Assessment, 51% reported always or usually using condoms with regular and casual partners. However, 32% of MSM also reported rarely or never using condoms with regular partners and 26% reported never or rarely using condoms with casual partners.
- Of the 210 HIV-positive MSM who reported current or past drug use, 52% reported a history of street drugs and 21% reported a history of injection drug use.
- Of the 210 self-identified MSM, 23 (11%) reported having received medical care for an STD during the previous 12 months.

Injection Drug Users (IDUs):

- Although the sample size for IDUs was smaller, condom use with regular partners was less frequent among current injection drug compared to MSMs and heterosexuals. According to currently HIV-positive injection drug users (IDUs) in the 2005 Needs Assessment (n = 33), 12% reported always or usually using condoms with regular partners; however, 64% of IDUs reported rarely or never using condoms.
- With casual partner, 30% of HIV-positive IDUs reported always or usually using condoms and 44% reported rarely or never using condoms.
- Of the 39 current IDUs, 3 (8%) reported having received medical care for an STD during the previous 12 months.

Heterosexuals:

- According to currently HIV-positive heterosexual survey who reported condom use behaviors (n = 368), 52% reported always or usually using condoms and 31% reported rarely or never using condoms with regular partners. Likewise, 55% of HIV-positive heterosexuals reported always or usually using condoms with casual partners, and 30% reported rarely or never using condoms.
- Of the 399 HIV-positive heterosexuals who reported current or past drug use, almost half (48%) reported that they were currently using street drugs, and 29% reported they were current injection drug users.

- Of the 444 HIV+ heterosexual respondents, 44 (10%) reported having received medical care for an STD during the previous 12 months.



Gonorrhea Trends:

- Overall, the number of gonorrhea cases in both the Houston HSDA and in Harris County has been declining over the past 5 years. Breakdowns by sex show similar trends in reported gonorrhea cases for the Houston HSDA.
- From 2002 to 2003, all HSDA counties outside of Harris reported decreases in gonorrhea cases except for Chambers county, which reported a slight increase. The number of cases in Austin and Wharton counties remained approximately the same.



Syphilis Trends:

- Unlike gonorrhea, the number of reported syphilis cases in the Houston HSDA has been steadily increasing. The number of syphilis cases in 2003 is twice that reported in 1999.
- However, Harris County is the only HSDA county experiencing such an increase. All other counties have experienced a decrease or leveling of reported syphilis cases.
- A breakdown by sex shows that the increase in syphilis cases is most significant among males. Between 1999 and 2003, the number of syphilis cases among males has tripled; among women, the number of cases has decreased by almost half.



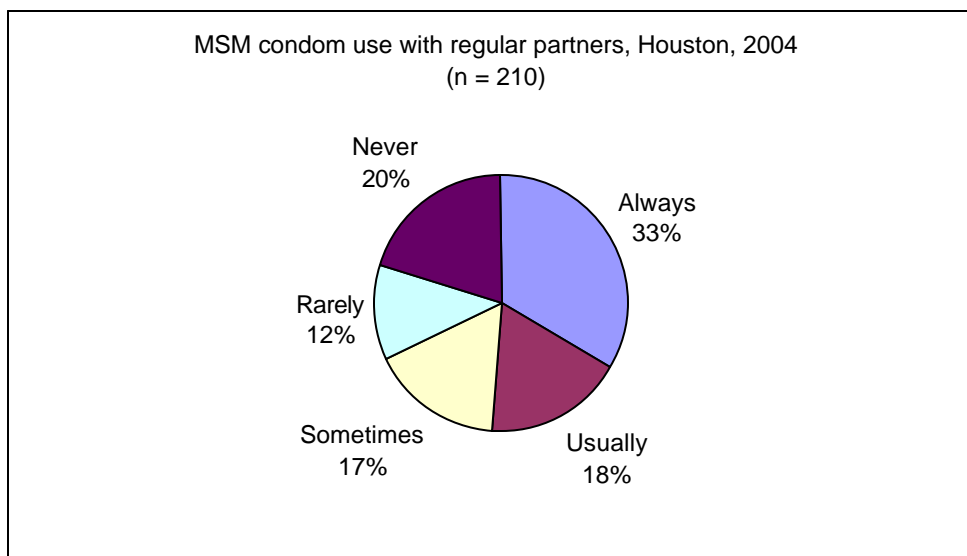
HIV Testing:

- In 2003, a total of 29,827 HIV tests were reported for the Houston HSDA.
- The vast majority of HIV tests reported to the State's HIV Counseling & Testing system were confidential, and conducted during field visits or at HIV Testing Sites.
- In terms of HIV exposure categories, "non-targeted" constituted the majority of HIV tests, followed by female-to-male sex, male-to-male sex and injection drug users.

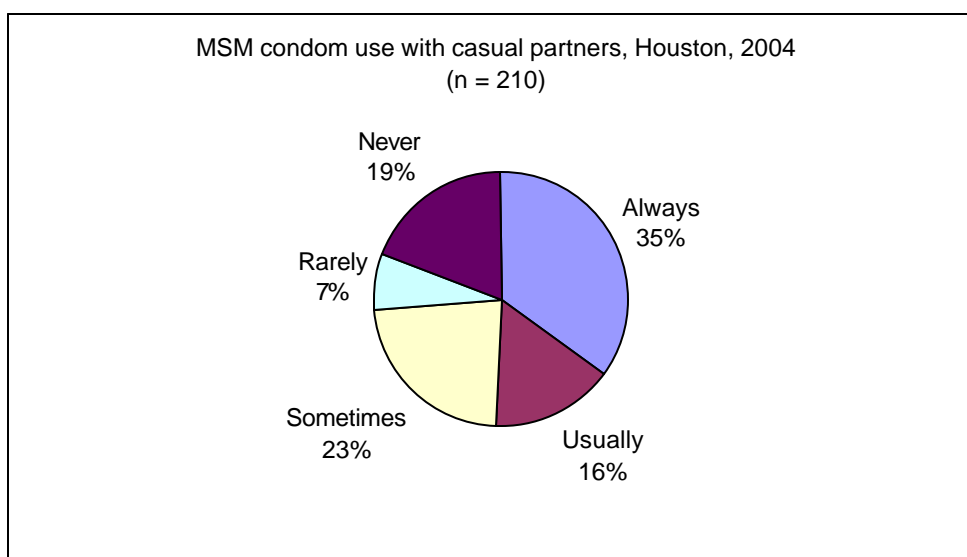
Men who have sex with men (MSMs)

DIRECT MEASURES:

Frequency of Condom Use or Unprotected Sex:



* Source: 2005 Houston Area HIV/AIDS Needs Assessment.



* Source: 2005 Houston Area HIV/AIDS Needs Assessment.

- According to HIV-positive MSM respondents in the 2005 Needs Assessment, 51% reported always or usually using condoms with regular partners. However, 32% of MSM also reported rarely or never using condoms with regular partners.

- Likewise, 51% of HIV -positive MSM reported always or usually using condoms with casual partners, and 26% reported never or rarely using condoms.

Substance Use among MSM:

Substance Use among MSM, Houston, 2004
(n = 210)

History of IDU	21%
Current IDU	3%
History of street drugs	52%
Current Street Drugs	13%

- Of the 210 HIV -positive MSM who reported current or past drug use, 52% reported a history of street drugs and 21% reported a history of injection drug use.

INDIRECT MEASURES:

STDs

- Of the 210 self-identified MSM, 23 (11%) reported having received medical care for an STD during the previous 12 months.

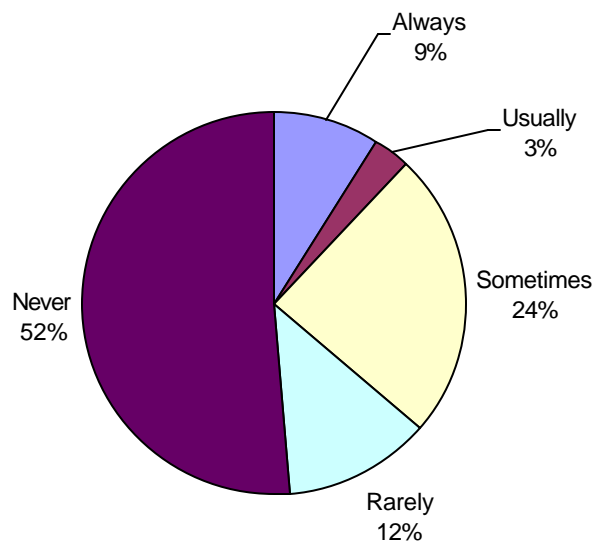
Injection Drug Users:

- One quarter of the 2004 Needs Assessment survey sample were injection drug users.

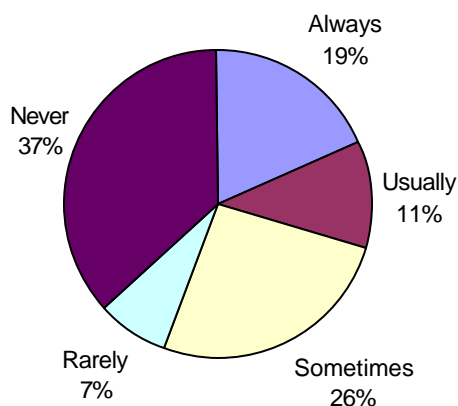
DIRECT MEASURES

Frequency of condom use or unprotected sex:

IDU condom use with regular partners, Houston, 2004
(n = 33)



IDU condom use with casual partners, Houston, 2004
(n = 27)



- According to currently HIV -positive injection drug users (IDUs) in the 2004 Needs Assessment (n = 33), 12% reported always or usually using condoms with regular partners. However, 64% of IDUs reported rarely or never using condoms with regular partners.
- Likewise, 30% of HIV -positive IDUs reported always or usually using condoms with casual partners, and 44% reported rarely or never using condoms.

Substance Use

Substance Use Among HIV+ Injection Drug Users, Houston, 2004
(n = 39)

History of street drugs	92%
Current Street Drugs	74%

- The vast majority of current IDUs reported either a history of, or current street drug use.

INDIRECT MEASURES

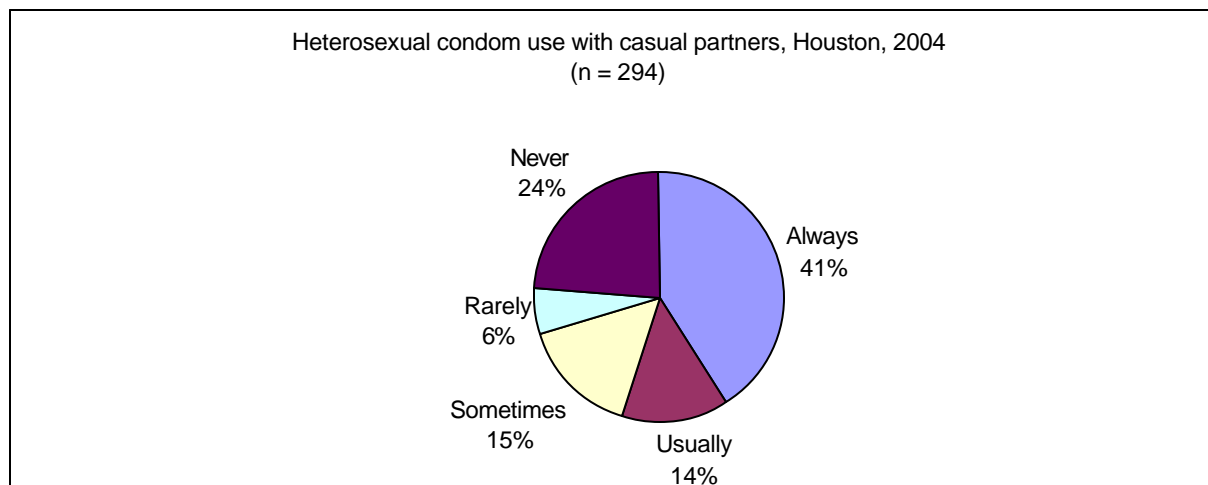
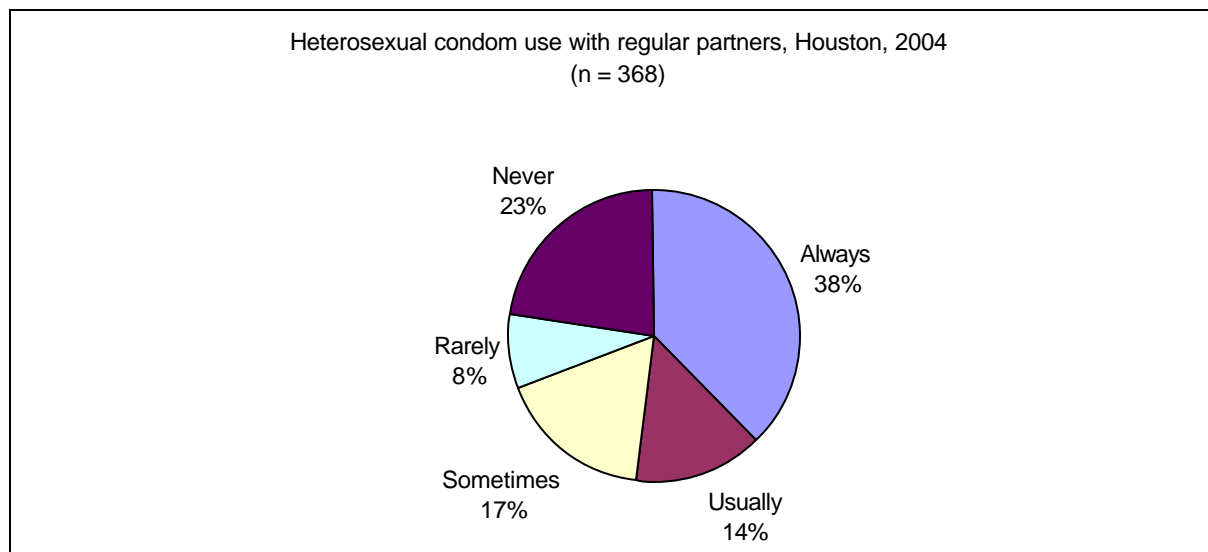
STDs

- Of the 39 current IDUs, 3 (8%) reported having received medical care for an STD during the previous 12 months.

Heterosexuals

DIRECT MEASURES

Frequency of condom use:



- According to currently HIV -positive heterosexual survey who reported condom use behaviors (n = 368), 52% reported always or usually using condoms and 31% reported rarely or never using condoms with regular partners.
- Likewise, 55% of HIV -positive heterosexuals reported always or usually using condoms with casual partners, and 30% reported rarely or never using condoms.

Substance Use

Substance Use Among HIV+ Heterosexuals, Houston, 2004
(n = 399)

History of IDU	8%
Current IDU	29%
History of street drugs	15%
Current Street Drugs	48%

- Of the 399 HIV-positive heterosexuals who reported current or past drug use, almost half (48%) reported that they were currently using street drugs, and 29% reported they were current injection drug users.

INDIRECT MEASURES

STDs

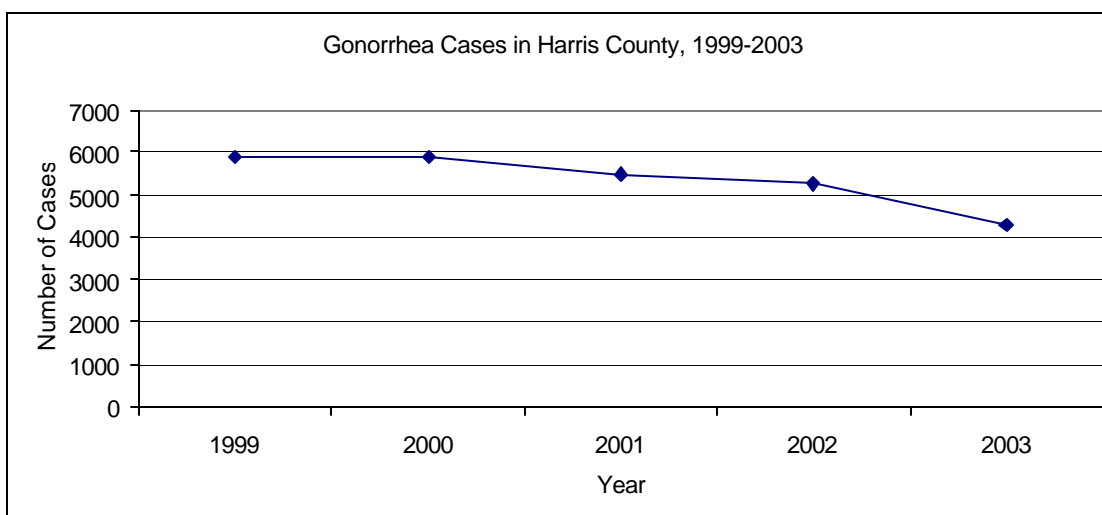
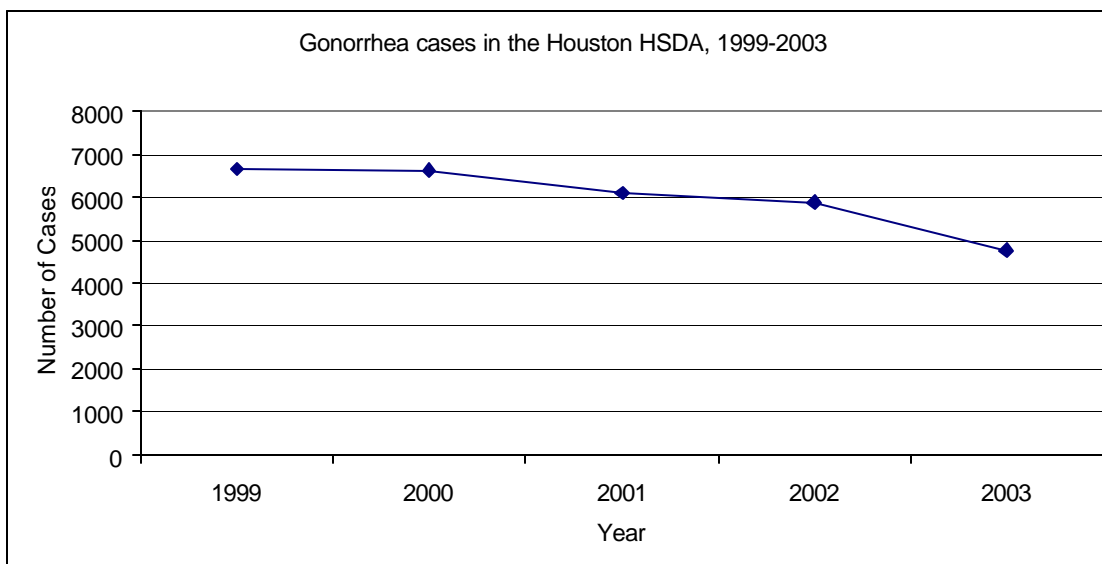
- Of the 444 HIV+ heterosexual respondents, 44 (10%) reported having received medical care for an STD during the previous 12 months.

STD Trends: Gonorrhea

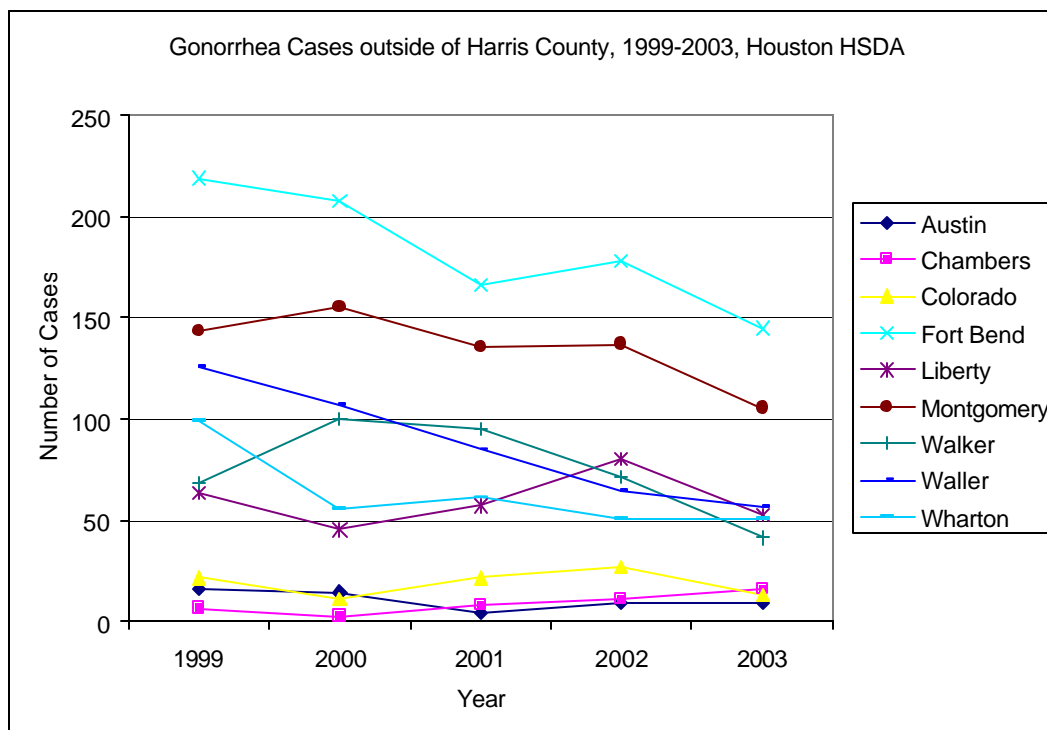
- Overall, the number of gonorrhea cases in both the Houston HSDA and in Harris County has been declining over the past 5 years.
- Outside of Harris County, most HSDA counties experience an increase in gonorrhea cases between 2001 and 2002. Only Walker, Waller and Wharton counties reported a decrease in cases during this time period.
- From 2002 to 2003, all HSDA counties outside of Harris reported decreases in gonorrhea cases except for Chambers county, which reported a slight increase. The number of cases in Austin and Wharton counties remained approximately the same.
- Breakdowns by sex show similar trends in reported gonorrhea cases for the Houston HSDA.

- (Figures continued)

	1999	2000	2001	2002	2003
Austin	16	14	4	9	9
Chambers	6	2	8	11	16
Colorado	21	11	21	27	13
Fort Bend	219	208	166	178	145
Harris	5914	5917	5486	5246	4257
Liberty	63	45	57	80	52
Montgomery	143	155	135	137	105
Walker	68	100	95	71	41
Waller	126	107	85	64	56
Wharton	99	55	61	51	51
Total	6675	6614	6118	5874	4745



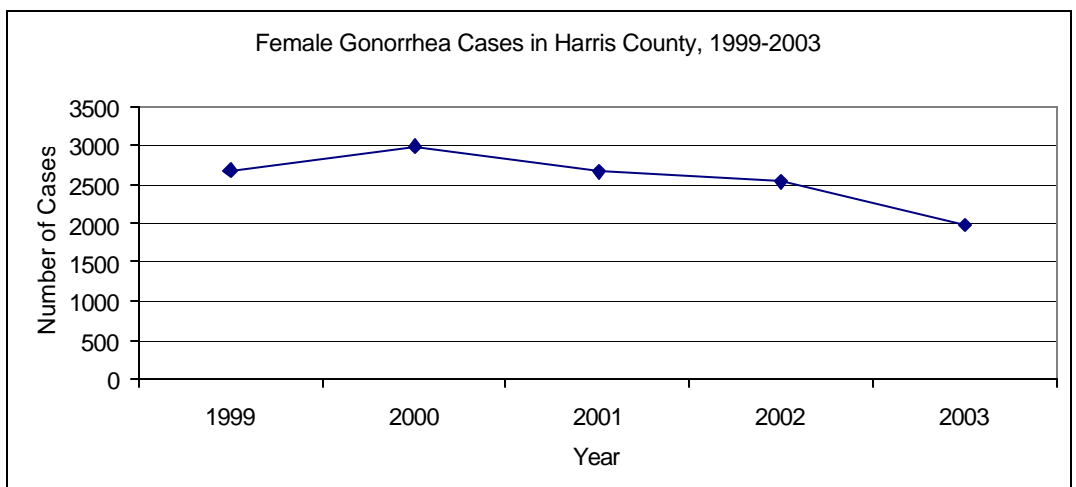
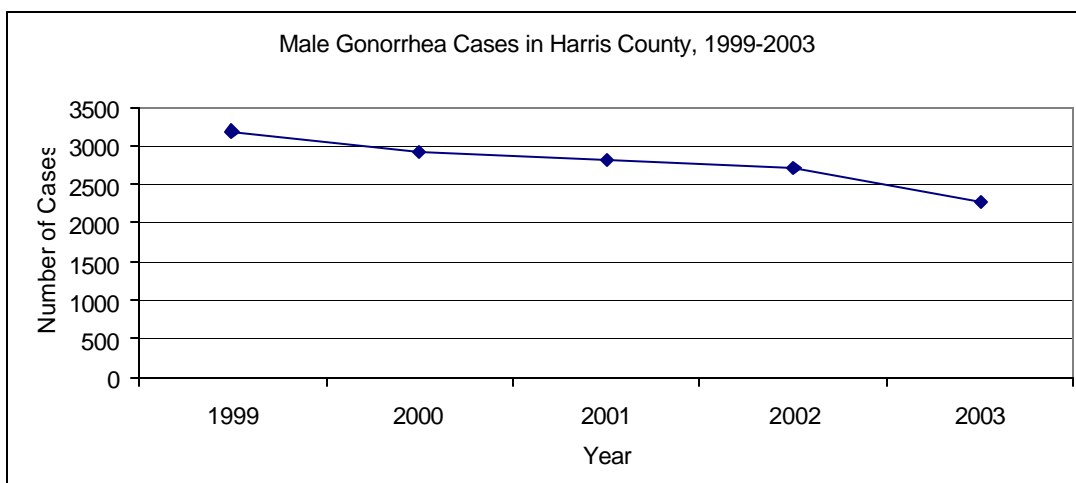
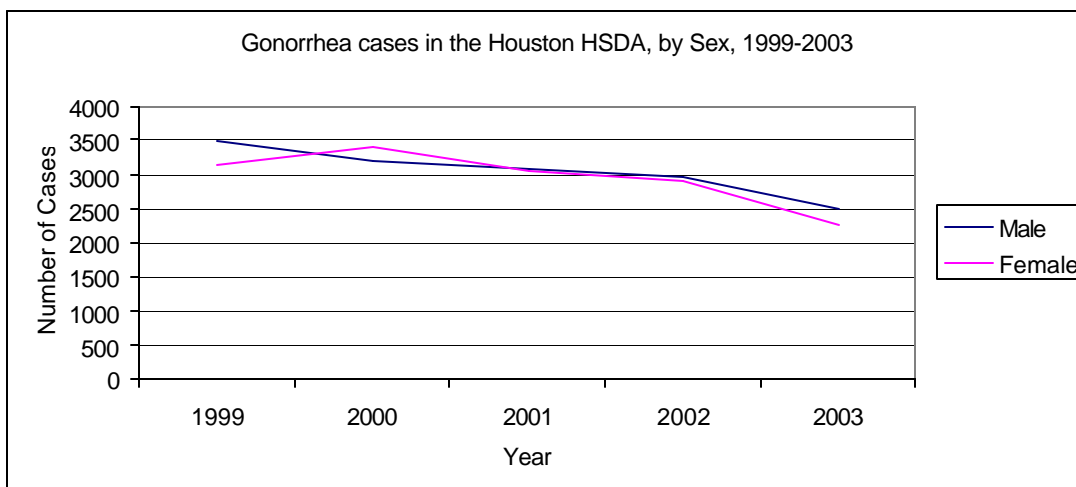
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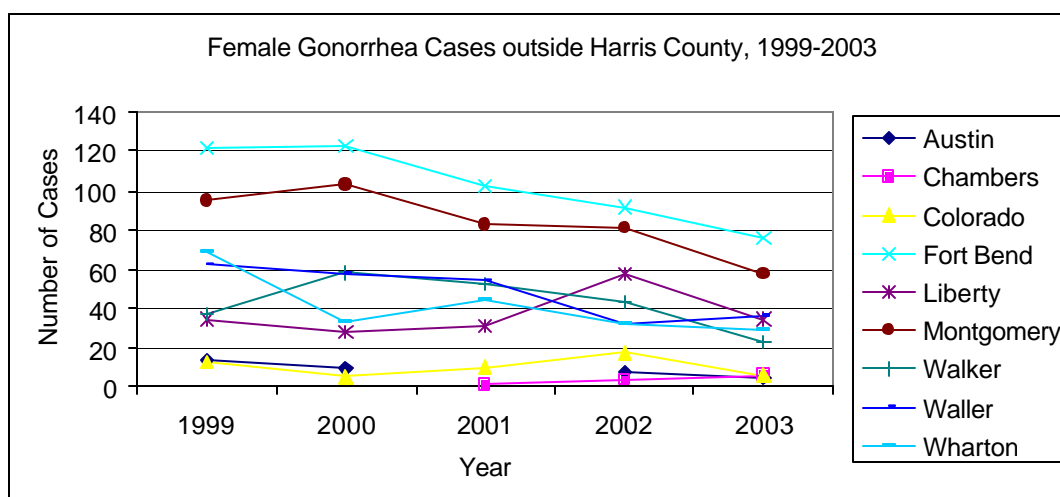
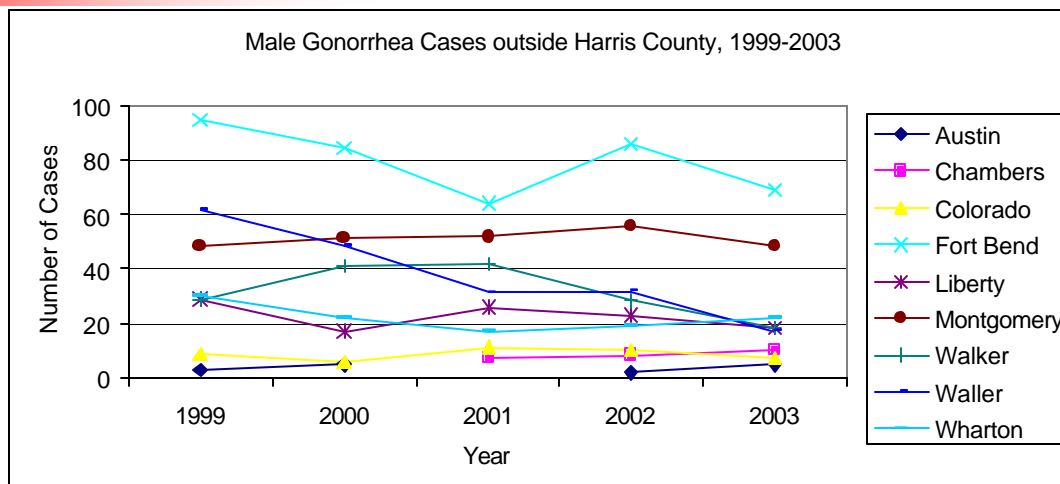


	1999		2000		2001		2002		2003	
	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female
Austin	3	13	5	9			2	7	5	4
Chambers					7	1	8	3	10	6
Colorado	9	12	6	5	11	10	10	17	7	6
Fort Bend	95	122	84	123	64	102	86	92	69	76
Harris	3184	2682	2925	2988	2821	2659	2706	2536	2279	1978
Liberty	29	34	17	28	26	31	23	57	18	34
Montgomery	48	95	51	103	52	83	56	81	48	57
Walker	29	37	41	58	42	52	28	43	18	23
Waller	62	62	48	57	31	54	32	32	17	36
Wharton	30	69	22	33	17	44	19	32	22	29
Total	3493	3128	3200	3405	3071	3040	2970	2900	2493	2249

* Grayed out cells have had the demographic breakdowns suppressed due to small cell sizes.

(Figures continued)





(Figures continued)

STD Trends: Syphilis

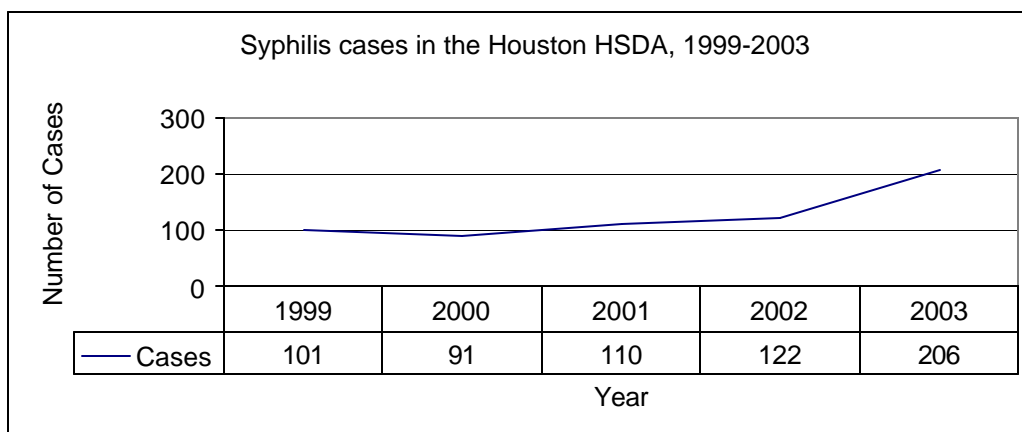
- Unlike gonorrhea, the number of reported syphilis cases in the Houston HSDA has been on a steady increase. The number of syphilis cases in 2003 is twice that reported in 1999.
- However, Harris County is the only HSDA county experiencing such an increase. All other counties have experienced a decrease or leveling of reported syphilis cases.
- A breakdown by sex shows that the increase in syphilis cases is significant among males. Between 1999 and 2003, the number of syphilis cases among males has tripled; among women, the number of cases has decreased by almost half.

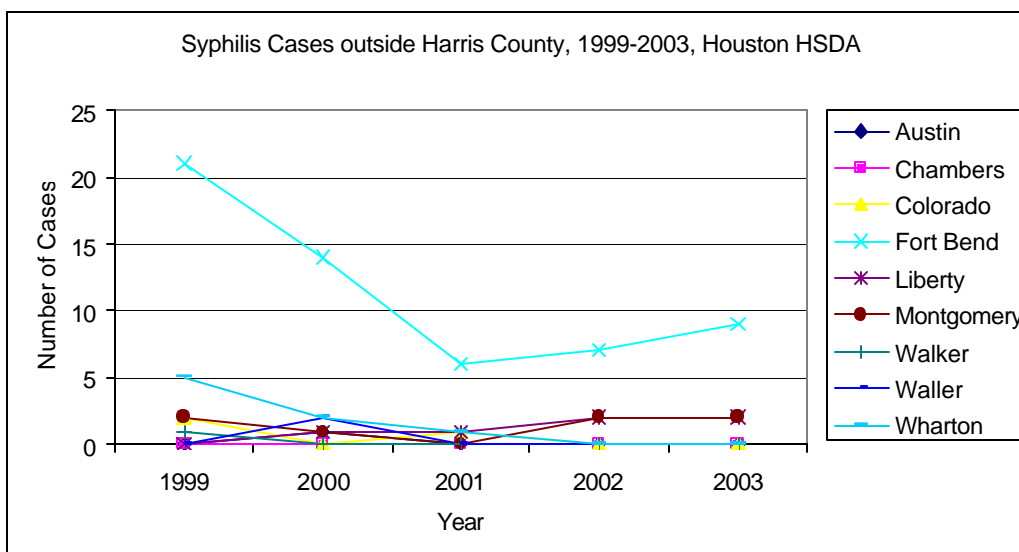
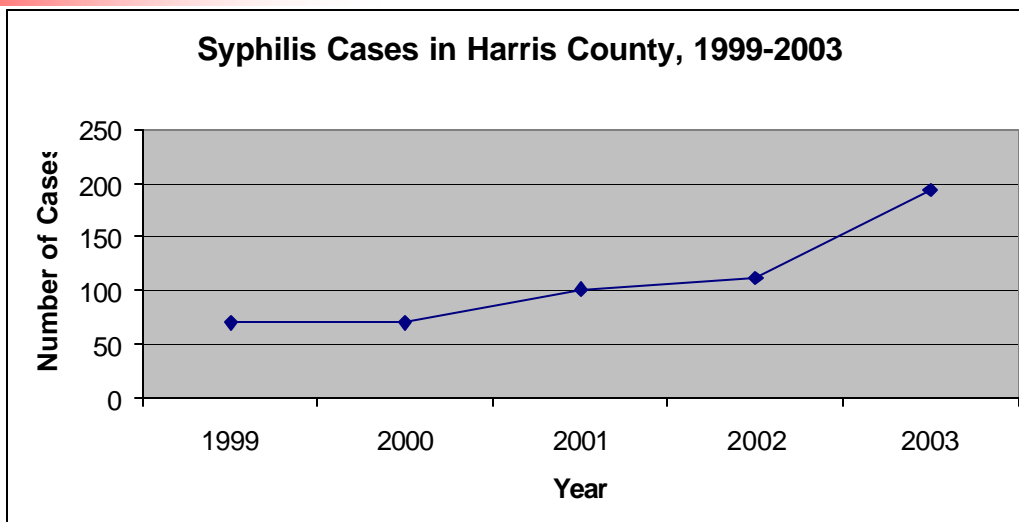
- Again, this trend is limited to Harris County – however, for some of the HSDA counties outside of Harris, the sex of cases was sometimes unknown.

NUMBER OF SYPHILIS CASES, BY YEAR AND HSDA COUNTY, 1999-2003

	1999	2000	2001	2002	2003
Austin	0	1	0	0	0
Chambers	0	0	0	0	0
Colorado	2	0	1	0	0
Fort Bend	21	14	6	7	9
Harris	70	70	101	111	193
Liberty	0	1	1	2	2
Montgomery	2	1	0	2	2
Walker	1	0	0	0	0
Waller	0	2	0	0	0
Wharton	5	2	1	0	0
Total	101	91	110	122	206

Source: The Texas Department of State Health Services



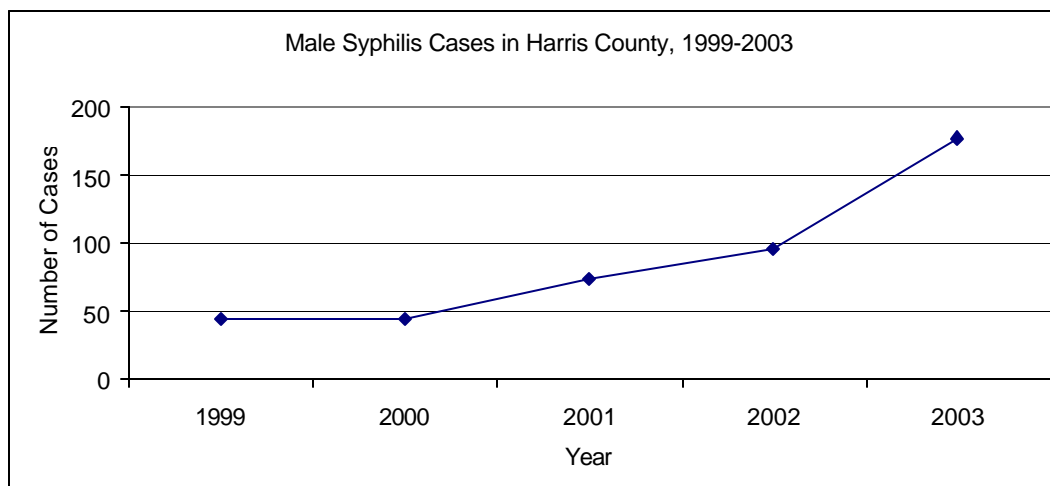
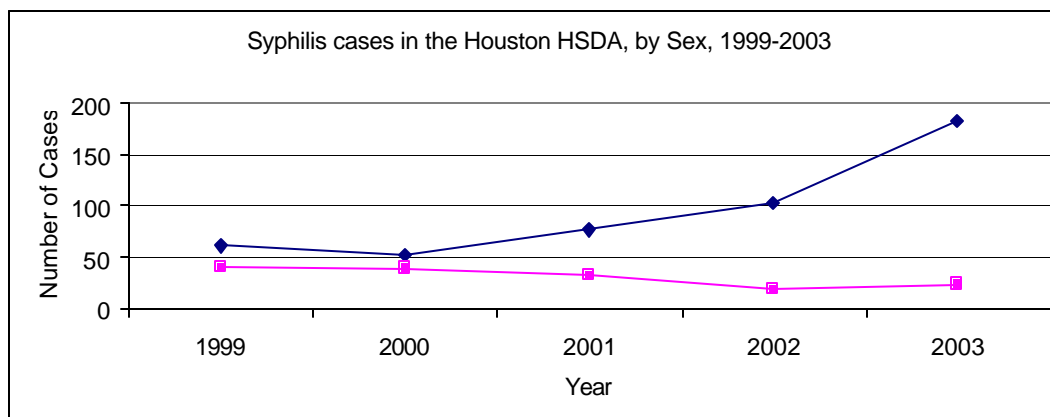


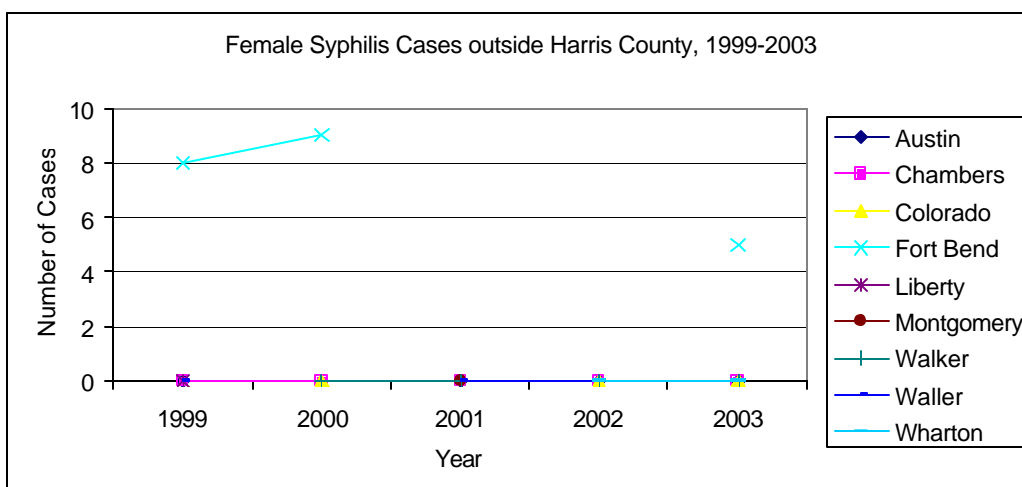
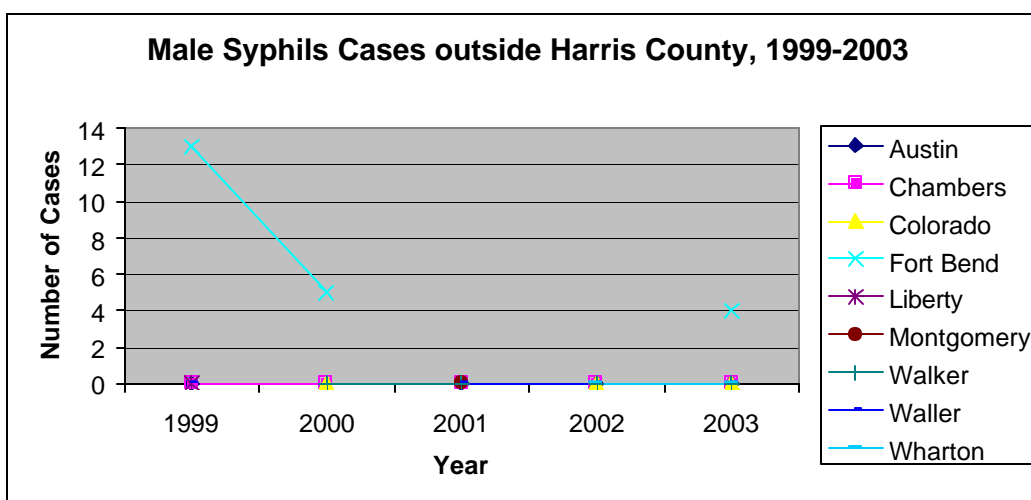
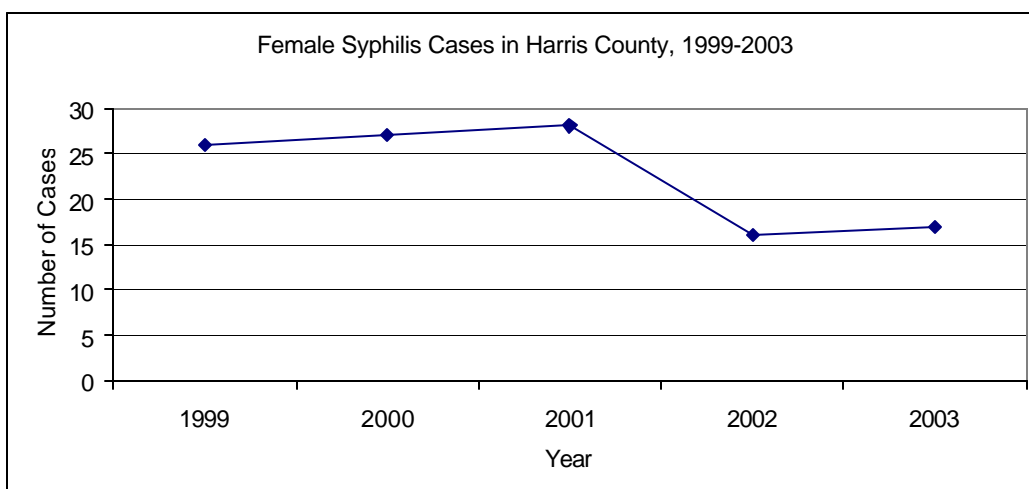
(Figures continued)

NUMBER OF SYPHILIS CASES, BY YEAR, SEX AND HSDA COUNTY, 1999-2003

	1999		2000		2001		2002		2003	
	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female
Austin	0	0			0	0	0	0	0	0
Chambers	0	0	0	0	0	0	0	0	0	0
Colorado			0	0			0	0	0	0
Fort Bend	13	8	5	9					4	5
Harris	44	26	43	27	73	28	95	16	176	17
Liberty	0	0								
Montgomery					0	0				
Walker			0	0	0	0	0	0	0	0
Waller	0	0			0	0	0	0	0	0
Wharton							0	0	0	0
Total	61	40	52	39	77	33	103	19	183	23

* Grayed out cells have had the demographic breakdowns suppressed due to small cell sizes.





(Figures continued)

HIV Testing

Data on HIV testing patterns can provide information that is helpful in focusing HIV counseling and testing programs. The data may also be used to help identify potential gaps in HIV surveillance data, which represents only persons who have been tested for HIV. For the Houston-Area Ryan White Program 2004 Integrated Epidemiological Profile For HIV/AIDS Prevention and Care Planning, HIV counseling & testing data were obtained from the Counseling & Testing System at the Texas Department of State Health Services (DSHS). These data represent the only available data for HIV counseling & testing in the Houston HSDA.

- In 2003, a total of 29,827 HIV tests were reported for the Houston HSDA.
- The vast majority of HIV tests reported to the State's HIV Counseling & Testing system were confidential, and conducted during field visits or at HIV Testing Sites.
- In terms of HIV exposure categories, "non-targeted" constituted the majority of HIV tests, followed by female-to-male sex, male-to-male sex and injection drug users.

Number of HIV tests reported, by Sex and HSDA county, 2003

<u>COUNTY OF RESIDENCE</u>	<u>Male</u>	<u>Female</u>	<u>TOTAL</u>
AUSTIN	8	6	14
CHAMBERS	7	10	17
COLORADO	11	2	13
FORT BEND	188	210	398
HARRIS	16966	11760	28726
LIBERTY	16	12	28
MONTGOMERY	209	167	376
WALKER	97	108	205
WALLER	21	12	33
WHARTON	13	4	17
Total	17536	12291	29827

Number of HIV tests reported, by test type and HSDA county, 2003

<u>County of Residence</u>	<u>HIV test type</u>		<u>TOTAL</u>
	<u>Anonymous</u>	<u>Confidential</u>	
AUSTIN	1	12	13
CHAMBERS	1	13	14

COLORADO	1	12	13
FORT BEND	74	308	382
HARRIS	2666	25790	28456
LIBERTY	0	28	28
MONTGOMERY	21	349	370
WALKER	3	198	201
WALLER	3	30	33
WHARTON	3	13	16
Total	2773	26753	29526

(Table continued)

Number of HIV tests reported, by HIV exposure category and HSDA county, 2003

	M/MS/IDU	M/MS	IDU	F/MS	Non-targeted	TOTAL
AUSTIN	0	2	0	9	3	14
CHAMBERS	1	0	4	11	1	17
COLORADO	0	2	1	10	0	13
FORT BEND	1	51	23	226	97	398
HARRIS	286	4963	1193	7145	15150	28737
LIBERTY	0	5	8	13	2	28
MONTGOMERY	5	31	156	151	34	377
WALKER	1	15	32	153	4	205
WALLER	0	5	3	16	9	33
WHARTON	0	2	0	11	4	17
Total	294	5076	1420	7745	15304	29839

NUMBER OF HIV TESTS REPORTED, BY HIV TEST SITE TYPE AND HSDA COUNTY, 2003

	HIV/CTS Testing Site	STD Clinic	Drug Treatment Facility	Family Planning Clinic	Primary Health Care Facility	Corrections	Field Visit	Education /Other	TOTAL
AUSTIN	6	1	0	2	0	3	2	0	14
CHAMBERS	1	0	6	2	0	4	4	0	17
COLORADO	3	0	2	1	0	6	1	0	13
FORT BEND	141	3	16	177	0	19	42	0	398
HARRIS	5761	2587	288	2863	2542	4197	10384	115	28737
LIBERTY	2	0	5	5	0	11	5	0	28
MONTGOMERY	50	1	32	70	0	158	66	0	377
WALKER	5	0	12	139	0	44	5	0	205
WALLER	12	1	1	5	0	1	13	0	33
WHARTON	7	0	4	3	0	3	0	0	17
Total	5988	2593	366	3267	2542	4446	10522	115	29839

QUESTION 2.1:

**WHAT ARE THE PATTERNS OF UTILIZATION OF HIV
SERVICES OF PEOPLE LIVING IN THE HOUSTON
REGION?**

WHAT ARE THE PATTERNS OF UTILIZATION OF HIV SERVICES OF PEOPLE LIVING IN THE HOUSTON REGION?

For all services except primary care and AIDS Drug Assistance Program (ADAP), data was obtained from the CPCDMS system operated by the Ryan White Title I Program. This system identifies unduplicated patients for providers funded by Titles I, II, III and IV.

Primary care data used only CPCDMS data in 2001 and 2002. In 2003, however, this data was expanded with unduplicated patient profiles from Titles III and IV, the Harris County Jail and the Veterans Administration.

CPCDMS was established for data collection in 2000. It requires initial client registration with annual updates for re-enrollment. The initial registration requests detailed information on, among other things, risk factors and co-morbidities. This information is not necessarily updated during re-enrollment. Data presented on transmission mode and subpopulations is generally based on responses provided at initial registration.

SUMMARY

Service utilization increased significantly between 2001 and 2003. Case management use increased 25%; dental care use increased 134% and mental health therapy and counseling increased 53%.

Primary medical care:

through these funding sources is used by a disproportionate percentage of blacks and Hispanics. It is also accessed proportionally by PLWH of all ages.

Case management:

use increased 25% between 2001 and 2003. Older PLWH (age 45 to 64) are only 16% of people living with HIV disease but are 30% of case management clients. On the other hand, youth (age 13 to 24) are 12% of PLWH but 4% of case management client. Blacks tend to use case management services to a somewhat greater extent than whites.

Dental care:

is used disproportionately by Hispanics, whites and older adults. Youth access dental care to a lesser extent than older adults.

Mental health therapy and counseling:





is used by a disproportionate percentage of white PLWH. Thirty three percent of PLWH are white, but 53% of 2003 mental health clients were white. Older adults under-utilize mental health therapy and counseling services

ADAP:



was used by a disproportionate percentage of Hispanic PLWH in 2003. Hispanics make up 18% of PLWH in the region but were 27% of ADAP clients.

PRIMARY CARE SERVICES

The following data-related issues should be considered in reviewing the primary care utilization data:

-  Of the 661 patients reported by the Veterans Administration, 19 died during the year. These patients are still included in unduplicated patient counts.
-  The jail data had a discrepancy of one client between racial category totals and other totals.
-  The Title IV data received from Texas Children's Hospital identified patients with both race (white, black, etc) and ethnicity (Hispanic, non-Hispanic). This results in duplication between the racial and ethnic categories.
-  Because previous years' utilization data do not reflect all of these data sources, comparisons with other years are not made.

In 2003, a total of 7,331 people received primary medical care through Ryan White Titles 1 through IV, the Harris County Jail or the Veterans Administration. The following compare primary care utilization (Table 2.1.1) to surveillance data on those living with HIV disease (Tables 1.2.2 -H and 1.2.2 - E)

-  Medical care services are used proportionately by men and women. Over 73% of primary medical care patients are men, and 74% of those living with HIV or AIDS are male.
-  Disproportionate percentage of blacks and Hispanics use primary medical care services through these funding sources.
 - While blacks are 48% of those living with HIV or AIDS and Hispanics are 18%, these two groups are 53% and 20%, respectively, of those accessing primary medical care.

- Whites make up 33% of those living with HIV disease and are 26% of those accessing these primary medical care services.



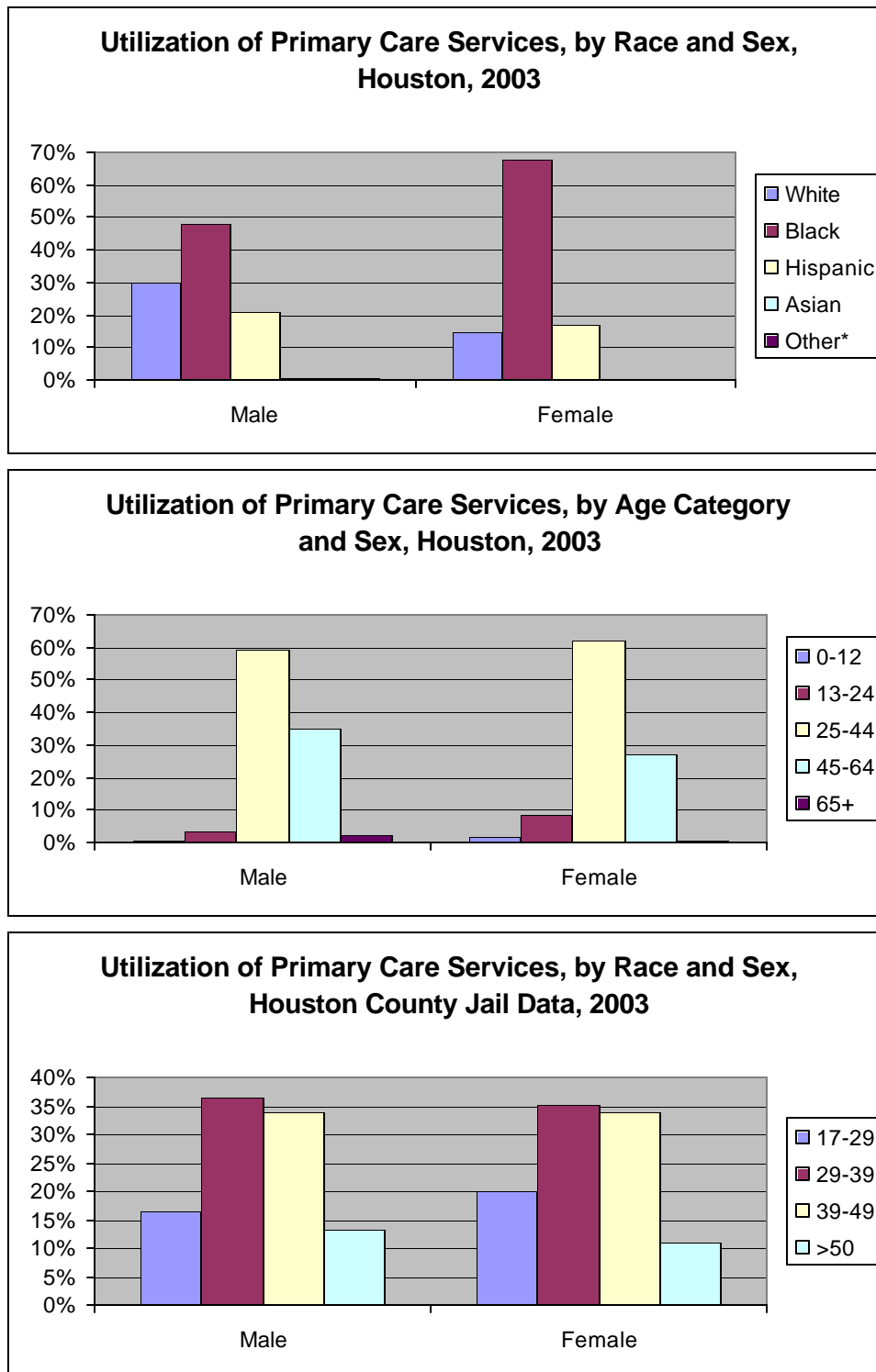
Primary medical care use is proportional by age.

- Older adults, age 45 to 64, are 32% of those living with HIV or AIDS, and they are 33% of those accessing primary medical care.
- People in the 25 to 44 age range are 60% of those living with the virus and are 60% of those accessing primary medical care
- Youth, age 13 to 24 years, are fewer than 5% of those with HIV disease and are 5% of those receiving primary medical care.

Table 2.1.1
PRIMARY CARE UTILIZATION
GENDER, RACE AND AGE
2003

	Male		Female		Total	
	No.	%	No.	%	No.	%
Race						
White	1,602	30%	294	15%	1,896	26%
Black	2,565	48%	1,338	68%	3,903	53%
Hispanic	1,119	21%	331	17%	1,450	20%
Asian	35	1%	4	0%	39	1%
Other*	40	1%	3	0%	43	1%
Total	5,361	100%	1,970	100%	7,331	100%
Age						
0-12	26	1%	28	2%	54	1%
13-24	151	3%	149	9%	300	5%
25-44	2,757	59%	1,064	62%	3,821	60%
45-64	1,640	35%	463	27%	2,103	33%
65+	96	2%	14	1%	110	2%
Total	4,670	100%	1,718	100%	6,388	100%
2003 County Jail Data						
17-29	112	16%	48	20%	160	17%
29-39	249	36%	84	35%	333	36%
39-49	232	34%	81	34%	313	34%
>50	91	13%	26	11%	117	13%
Total	684	100%	239	100%	923	100%
Combined Age Total	5,354		1,957		7,311	
<p>*"Other" includes Native Americans, Pacific Islanders, and multi-race.</p> <p>Includes CPCDMS, all of 2003 for: Hospital District (Titles III & IV), Texas Children's Hospital (Title IV, Fort Bend Family Health Center and Harris County Jail.</p> <p>Totals include 661 aggregate VA data of which 19 died during 2003.</p> <p>Jail data inconsistent on race. Discrepancy of one client.</p> <p>Title IV data From Texas Children's Hospital may reflect duplicate data for Hispanic race/ethnicity.</p>						

Figure 2.1.1
PRIMARY CARE UTILIZATION



*Other includes Native Americans, Pacific Islanders and multi-race

CASE MANAGEMENT SERVICES




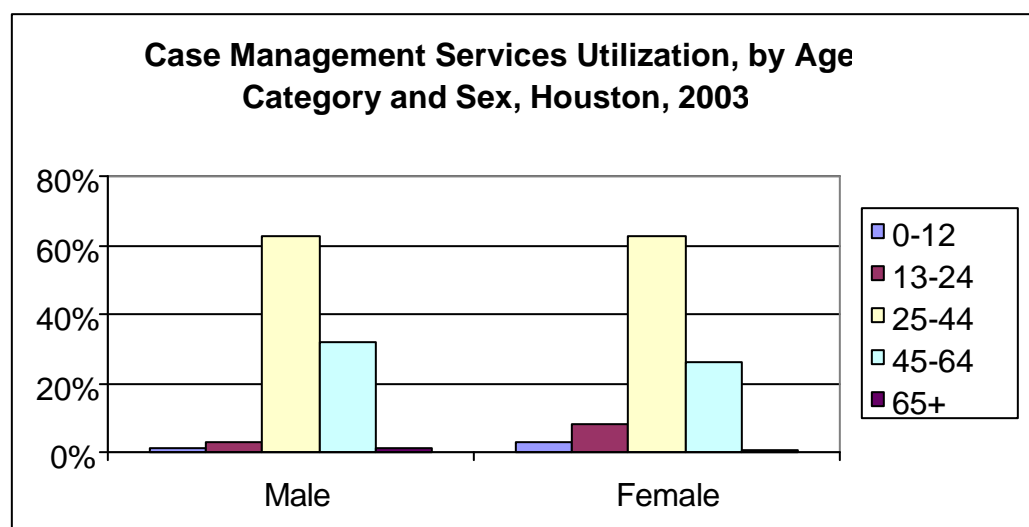
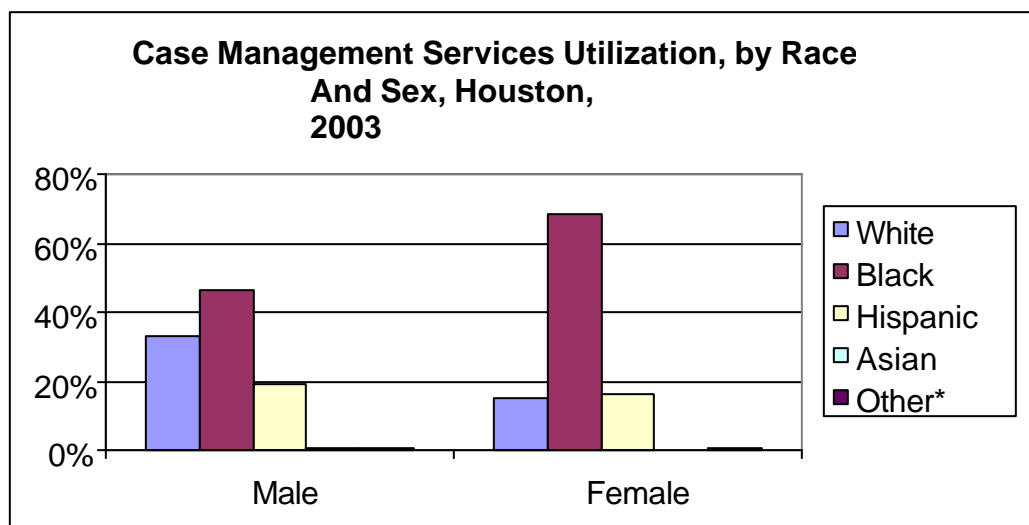
-  Case management services were used by 3,447 unduplicated clients in 2003.
 - In comparing case management service utilization to the profile of the epidemic in the EMA and HSDA, blacks use case management services to a greater extent than whites. Whites are 33% of PLWH in the region, but 28% of case management clients, and blacks are 48% of PLWH, but 53% of case management clients. Hispanics use case management services proportionately since they make up 18% of the epidemic and 18% of case management clients.
 - Men and women use case management services approximately proportional to their distribution in the EMA and HSDA. Men are 74% of the infected population and 72% of people using case management services, and women are 25% of those infected with HIV disease and are 28% of case management clients.
 - Case management services are used proportionately by PLWH in each age group. Youth, age 13 to 24 are 5% of PLWH and are 4% of case management clients. On the other hand, people 45 to 64 are 32% of PLWH and are 30% of case management clients. The largest group, those 25 to 44 years, are 60% of people living with HIV and AIDS and 63% of case management clients.
-  Case management use increased 25% between 2001 and 2003.
 - On a percentage basis, use of case management services by race or gender did not change significantly during this time.
 - By age, case management use decreased among youth and people 25 to 44 years, but increased among older PLWH.
-  Examining PLWH comorbidities and special situations presented in Table 2.1.4, homeless case management clients decreased from 8% of total cases in 2001 to 5% in 2003, and clients with active psychiatric illness decreased from 8% in 2001 to 6% in 2003.

Table 2.1.2
HOUSTON EMA/HSDA
CASE MANAGEMENT UTILIZATION
GENDER, RACE AND AGE
2003

	Case Management				Total	
	Male		Female			
	Number	Percent	Number	Percent	Number	Percent
Gender						
	2,483	72%	964	28%	3,447	100%
Race						
White	816	33%	146	15%	962	28%
Black	1,154	46%	658	68%	1,812	53%
Hispanic	480	19%	155	16%	635	18%
Asian	16	1%	2	0%	18	1%
Other*	17	1%	3	0%	20	1%
Total	2,483	100%	964	100%	3,447	100%
Age						
0-12	22	1%	28	3%	50	1%
13-24	75	3%	76	8%	151	4%
25-44	1,556	63%	604	63%	2,160	63%
45-64	795	32%	253	26%	1,048	30%
65+	35	1%	3	0%	38	1%
Total	2,483	100%	964	100%	3,447	100%
* "Other" includes Native Americans, Pacific Islanders and multi-race.						

Figure 2.1.2



*Other includes Native American, Pacific Islander and multi-race

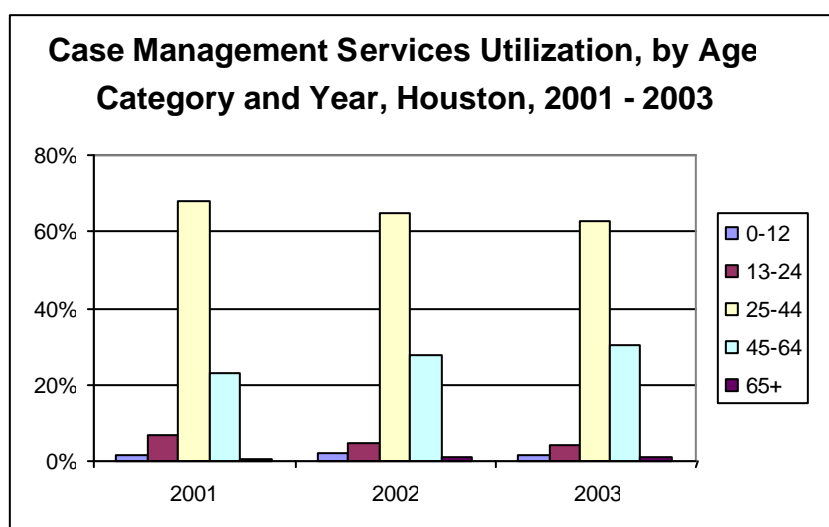
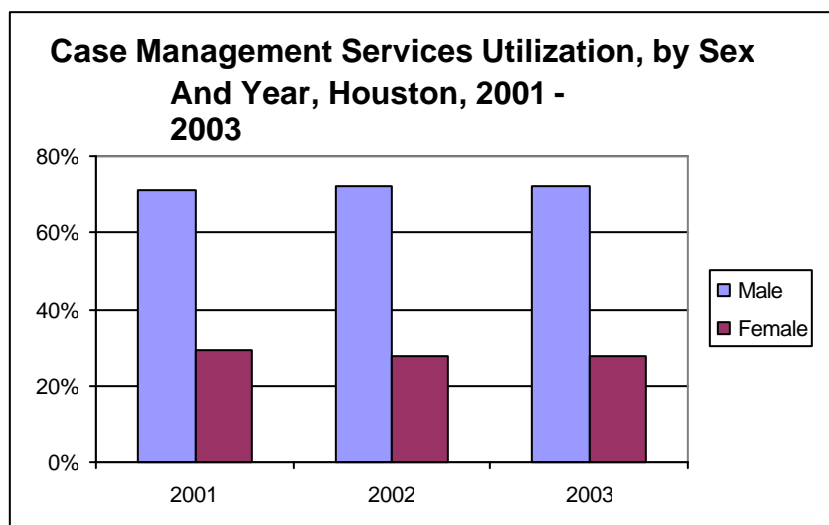
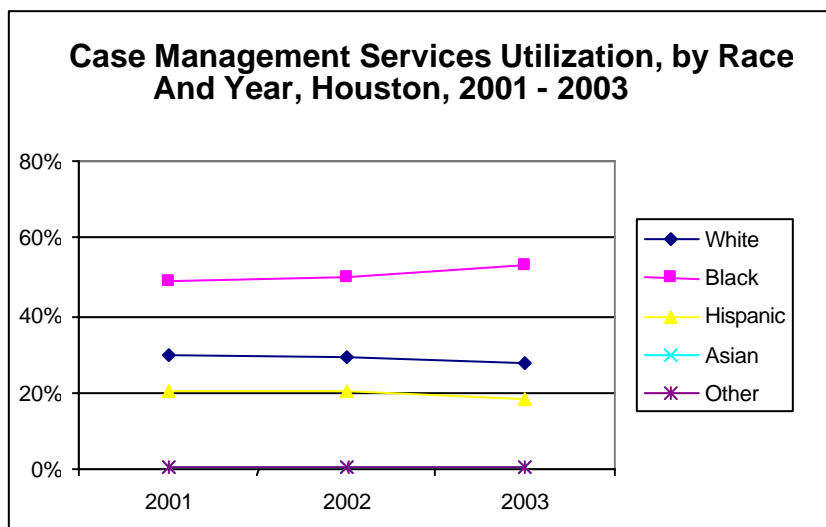
Table 2.1.3
HOUSTON EMA/HSDA
CASE MANAGEMENT UTILIZATION
GENDER, RACE AND AGE
2001 - 2003

	CASE MANAGEMENT					
	2001		2002		2003	
	(N=2757)		(N=2876)		(N=3447)	
	NUMBER	PERCENTAGE	NUMBER	PERCENTAGE	NUMBER	PERCENTAGE
Race						
White	820	30.0%	848	29.0%	962	28.0%
Black	1,339	49.0%	1,422	49.0%	1,812	53.0%
Hispanic	562	20.0%	583	20.0%	635	18.0%
Asian	17	1.0%	13	0.0%	18	1.0%
Other*	19	1.0%	10	0.0%	20	1.0%
	2,757	100.0%	2,876	100.0%	3,447	100.0%
Sex						
Male	1,955	71.0%	2,080	72.0%	2,483	72.0%
Female	802	29.0%	796	28.0%	964	28.0%
	2,757	100.0%	2,876	100.0%	3,447	100.0%
Age						
0-12	47	2.0%	65	2.0%	50	1.0%
13-24	181	7.0%	139	5.0%	151	4.0%
25-44	1,876	68.0%	1,858	65.0%	2,160	63.0%
45-64	637	23.0%	790	27.0%	1,048	30.0%
65+	16	1.0%	24	1.0%	38	1.0%
	2,757	100.0%	2,876	100.0%	3,447	100.0%
* "Other" includes Native Americans, Pacific Islanders and multi-race.						

Table 2.1.4
HOUSTON EMA/HSDA
CASE MANAGEMENT UTILIZATION
TRANSMISSION MODE AND SUBPOPULATIONS
2001 - 2003

	CASE MANAGEMENT					
	2001		2002		2003	
	(N=2757)		(N=2876)		(N=3447)	
	NUMBER	PERCENTAGE	NUMBER	PERCENTAGE	NUMBER	PERCENTAGE
Transmission Mode**						
Perinatal Transmission	53	2.0%	74	3.0%	63	2.0%
Hemophilia Coagulation	5	0.0%	6	0.0%	5	0.0%
Transfusion	49	2.0%	45	2.0%	53	2.0%
Heterosexual Contact	949	38.0%	940	34.0%	1,116	33.0%
MSM (not IDU)	744	30.0%	812	29.0%	981	29.0%
IV Drug Use (not MSM)	136	5.0%	138	5.0%	146	4.0%
MSM/IDU	19	1.0%	19	1.0%	18	1.0%
Multiple Exposure Categories	121	5.0%	116	4.0%	123	4.0%
Other risk	441	18.0%	638	23.0%	864	26.0%
Subpopulation**						
Unduplicated clients	2,757	100.0%	2,884	100.0%	3,447	100.0%
Monolingual (Spanish)	311	11.0%	338	12.0%	353	10.0%
Deaf/hard of hearing	69	3.0%	68	2.0%	69	2.0%
Blind/sight impaired	94	3.0%	109	4.0%	128	4.0%
Homeless	214	8.0%	172	6.0%	158	5.0%
Transgender M to F	17	1.0%	12	0.0%	16	0.0%
Transgender F to M	0	0.0%	1	0.0%	3	0.0%
Within the Beltway	2,205	80.0%	2,303	80.0%	2,751	80.0%
Outside the Beltway	552	20.0%	581	20.0%	696	20.0%
Active substance abuse	193	7.0%	204	7.0%	214	6.0%
Active psychiatric illness	208	8.0%	204	7.0%	209	6.0%
<p>* In 2001 and 2002, "Other" included Native Americans and Pacific Islanders; in 2003, included are Native Americans, Pacific Islanders and multi-race.</p> <p>** Not mutually exclusive.</p> <p>Most information on transmission mode and comorbidities is obtained during initial registration and not updated. Initial registration could have occurred at any time between 2000 and 2003.</p>						

Figure 2.1.3



DENTAL SERVICES





-  Dental services are used disproportionately by Hispanics and whites.
 - Hispanics are 18% of PLWH in the region and 22% of those who use dental services.
 - Whites are 33% of PLWH and 35% of those who use dental services.
 - Blacks are 48% of PLWH and 43% of those who use dental services.
-  Dental services are used disproportionately by older adults.
 - PLWH age 45 to 64 make up 32% of the infected population in the EMA and HSDA, but they are 37% of dental care users.
 - Youth, age 13 to 24, are 5% of PLWH, but they are 2% of dental care users.
 - PLWH age 25 to 44 make up 60% of the epidemic and 59% of dental care clients.
-  Men are 74% of PLWH and are 77% of dental service users.
 - Forty percent of male dental service users are white.
 - Sixty four percent of female dental service users are black.
-  Between 2001 and 2002, use of dental services more than doubled. Between 2002 and 2003, utilization increased another 12%. Between 2001 and 2003, the dental service use increased 134%.
 - As a percentage of the total, those 25 to 44 were 65% in 2001, declining to 59% in 2003, and those 45 to 64 were 32% of dental care patients in 2001, increasing to 37% in 2003.

Table 2.1.5
HOUSTON EMA/HSDA
DENTAL SERVICE UTILIZATION
GENDER, RACE AND AGE
2003

	2003 DENTAL CARE					
	MALE		FEMALE		TOTAL	
	No.	%	No.	%	No.	%
Gender						
	1,533	77%	447	23%	1,980	100%
Race						
White	614	40.0%	74	17.0%	688	35.0%
Black	558	36.0%	288	64.0%	846	43.0%
Hispanic	346	23.0%	84	19.0%	430	22.0%
Asian	9	1.0%	0	0.0%	9	0.0%
Other*	6	0.0%	1	0.0%	7	0.0%
Total	1,533	100%	447	100%	1,980	100%
Age						
0-12	0	0.0%	0	0.0%	0	0.0%
13-24	29	2.0%	15	3.0%	44	2.0%
25-44	894	58.0%	274	61.0%	1,168	59.0%
45-64	588	38.0%	153	34.0%	741	37.0%
65+	22	1.0%	5	1.0%	27	1.0%
Total	1,533	100%	447	100%	1,980	100%
* "Other" includes Native Americans, Pacific Islanders and multi-race.						

Figure 2.1.4

*Other includes Native Americans

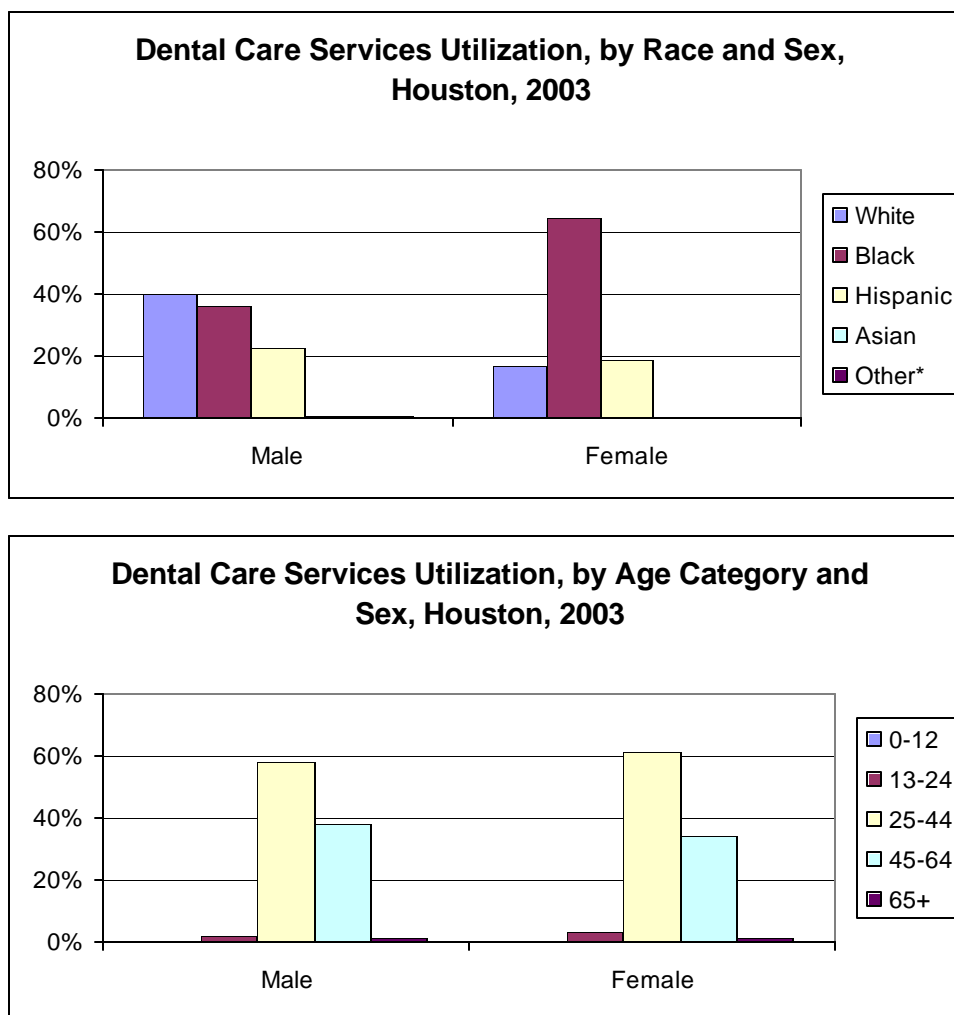


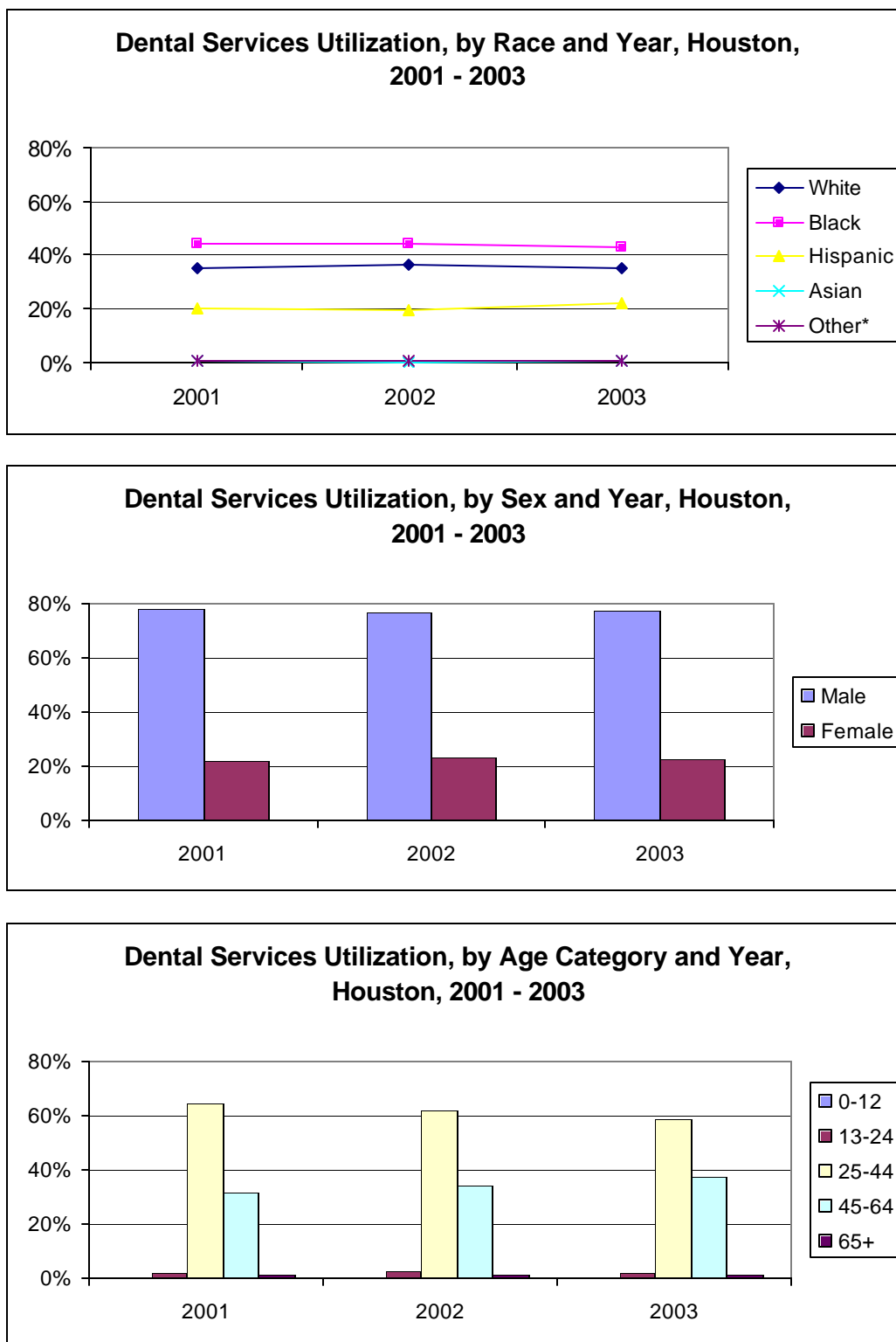
Table 2.1.6
HOUSTON EMA/HSDA
DENTAL SERVICE UTILIZATION
GENDER, RACE AND AGE
2001 - 2003

	DENTAL CARE					
	2001		2002		2003	
	(N=846)		(N=1763)		(N=1980)	
	NUMBER	PERCENT	NUMBER	PERCENT	NUMBER	PERCENT
Race						
White	297	35.0%	635	36.0%	688	35.0%
Black	373	44.0%	772	44.0%	846	43.0%
Hispanic	167	20.0%	341	19.0%	430	22.0%
Asian	4	0.0%	5	0.0%	9	0.0%
Other*	5	1.0%	10	1.0%	7	0.0%
Sex						
Male	658	78.0%	1,358	77.0%	1,533	77.0%
Female	188	22.0%	405	23.0%	447	23.0%
Age						
0-12	0	0.0%	0	0.0%	0	0.0%
13-24	19	2.0%	46	3.0%	44	2.0%
25-44	547	65.0%	1,096	62.0%	1,168	59.0%
45-64	269	32.0%	599	34.0%	741	37.0%
65+	11	1.0%	22	1.0%	27	1.0%
* "Other" includes Native Americans, Pacific Islanders and multi-race.						

Table 2.1.7
HOUSTON EMA/HSDA
DENTAL SERVICE UTILIZATION
TRANSMISSION MODE AND SUBPOPULATIONS
2001 - 2003

	DENTAL CARE					
	2001		2002		2003	
	(N=846)		(N=1763)		(N=1980)	
	NUMBER	PERCENT	NUMBER	PERCENT	NUMBER	PERCENT
Transmission Mode**						
Perinatal Transmission	0	0.0%	2	0.0%	2	0.0%
Hemophilia Coagulation	2	0.0%	2	0.0%	2	0.0%
Transfusion	10	1.0%	26	2.0%	28	2.0%
Heterosexual Contact	174	25.0%	365	24.0%	415	23.0%
MSM (not IDU)	216	31.0%	451	30.0%	560	32.0%
IV Drug Use (not MSM)	25	4.0%	62	4.0%	62	4.0%
MSM/IDU	7	1.0%	10	1.0%	13	1.0%
Multiple Exposure Categories	24	3.0%	51	3.0%	64	4.0%
Other risk	232	34.0%	545	36.0%	622	35.0%
Subpopulation**						
Unduplicated clients	846	100.0%	1,763	100.0%	1,980	100.0%
Monolingual (Spanish)	84	10.0%	185	10.0%	238	12.0%
Deaf/hard of hearing	14	2.0%	28	2.0%	37	2.0%
Blind/sight impaired	20	2.0%	47	3.0%	55	3.0%
Homeless	24	3.0%	53	3.0%	57	3.0%
Transgender M to F	2	0.0%	6	0.0%	3	0.0%
Transgender F to M	0	0.0%	0	0.0%	2	0.0%
Within the Beltway	685	81.0%	1,391	79.0%	1,579	80.0%
Outside the Beltway	161	19.0%	372	21.0%	401	20.0%
Active substance abuse	33	4.0%	69	4.0%	87	4.0%
Active psychiatric illness	32	4.0%	80	5.0%	76	4.0%
<p>* In 2001 and 2002, "Other" included Native Americans and Pacific Islanders; in 2003, included are Native Americans, Pacific Islanders and multi-race.</p> <p>** Not mutually exclusive.</p> <p>Most information on transmission mode and comorbidities is obtained during initial registration and not updated. Initial registration could have occurred at any time between 2000 and 2003.</p>						

Figure 2.1.5



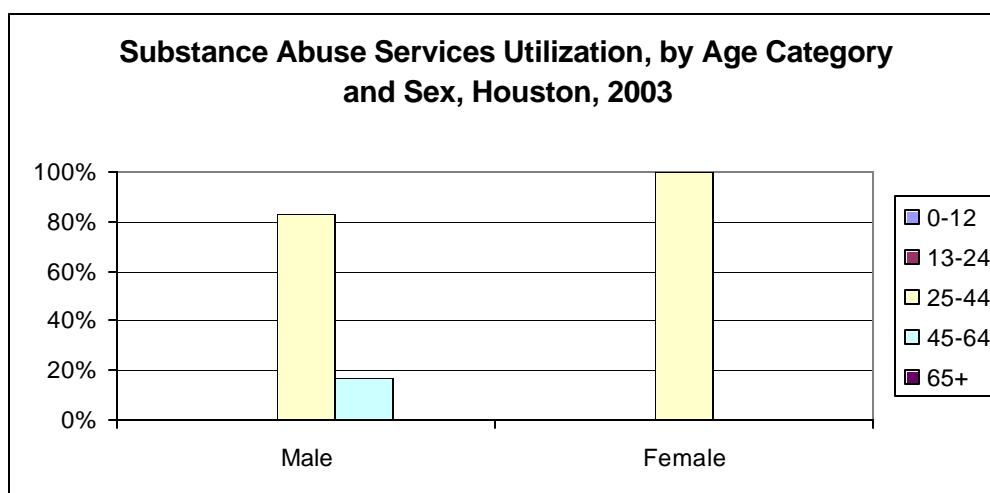
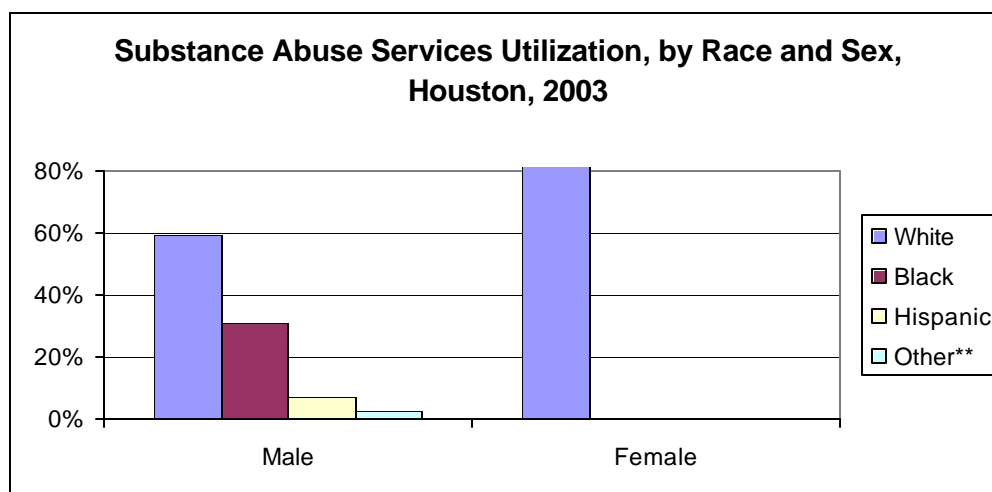
SUBSTANCE ABUSE TREATMENT

- ⚠ In 2003 substance abuse treatment was used by 43 clients. All but one of these clients were men. Sixty percent were white, 31% were black and 7% were Hispanic.
- ⚠ Substance abuse treatment utilization increased from 34 clients in 2001 to 43 clients in 2003.

Table 2.1.8
HOUSTON EMA/HSDA
SUBSTANCE ABUSE TREATMENT UTILIZATION
GENDER, RACE AND AGE
2003

	2003 SUBSTANCE ABUSE					
	MALE		FEMALE		TOTAL	
	NUMBER	PERCENT	NUMBER	PERCENT	NUMBER	PERCENT
Gender						
	42	97.6%	1	2.3%	43	100.0%
Race						
White	25	60.0%	1	100.0%	26	60.0%
Black	13	31.0%	0	0.0%	13	30.0%
Hispanic	3	7.0%	0	0.0%	3	7.0%
Asian*	-	-	-	-	-	-
Other**	1	2.0%	0	0.0%	1	2.0%
Total	42	100.0%	1	100.0%	43	100.0%
Age						
0-12	0	0.0%	0	0.0%	0	0.0%
13-24	0	0.0%	0	0.0%	0	0.0%
25-44	35	83.0%	1	100.0%	36	84.0%
45-64	7	17.0%	0	0.0%	7	16.0%
65+	0	0.0%	0	0.0%	0	0.0%
Total	42	100.0%	1	100.0%	43	100.0%
* No data were given for Asians.						
** "Other" includes Native Americans.						

Figure 2.1.6



** "Other" includes Native Americans.

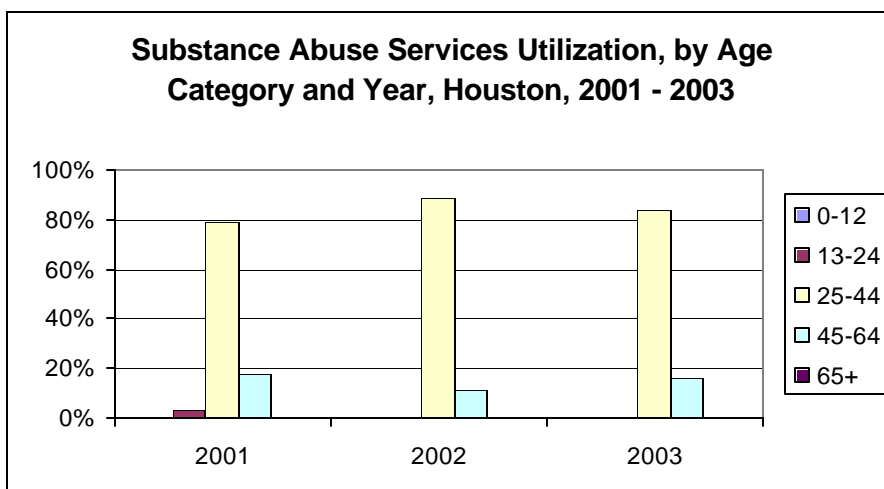
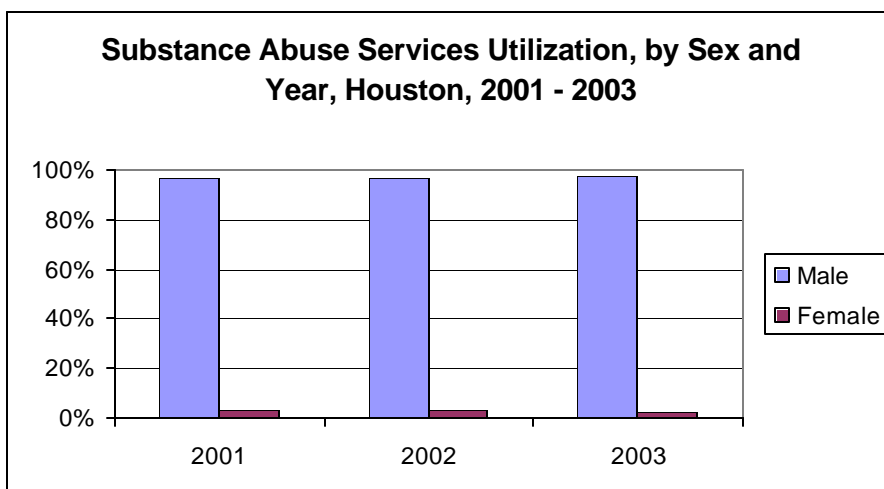
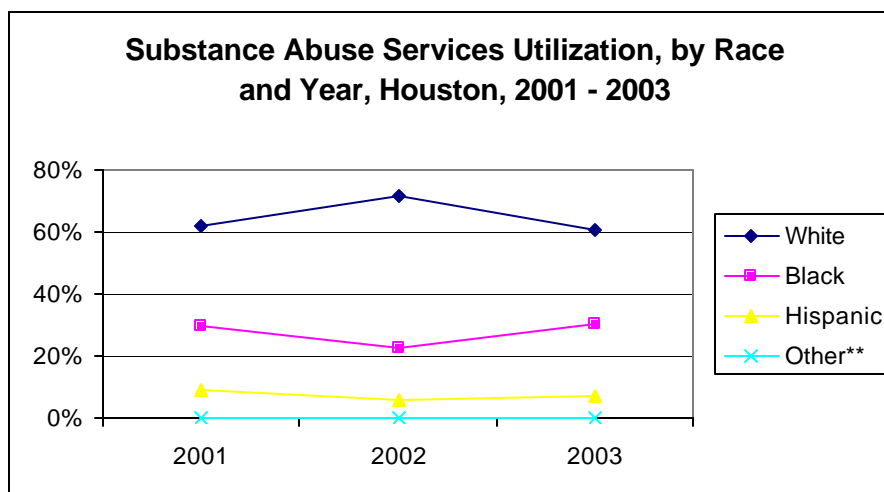
Table 2.1.9
HOUSTON EMA/HSDA
SUBSTANCE ABUSE TREATMENT UTILIZATION
GENDER, RACE AND AGE
2001 - 2003

	SUBSTANCE ABUSE					
	2001		2002		2003	
	(N=34)		(N=35)		(N=43)	
	NUMBER	PERCENT	NUMBER	PERCENT	NUMBER	PERCENT
Race						
White	21	62.0%	25	71.0%	26	60.0%
Black	10	29.0%	8	23.0%	13	30.0%
Hispanic	3	9.0%	2	6.0%	3	7.0%
Asian	*-	-	*-	-	*-	-
Other**	0	0.0%	0	0.0%	1	0.0%
Sex						
Male	33	97.0%	34	97.0%	42	98.0%
Female	1	3.0%	1	3.0%	1	2.0%
Age						
0-12	0	0.0%	0	0.0%	0	0.0%
13-24	1	3.0%	0	0.0%	0	0.0%
25-44	27	79.0%	31	89.0%	36	84.0%
45-64	6	18.0%	4	11.0%	7	16.0%
65+	0	0.0%	0	0.0%	0	0.0%
* No data were given for Asians.						
** "Other" includes Native Americans.						

Table 2.1.10
HOUSTON EMA/HSDA
SUBSTANCE ABUSE TREATMENT UTILIZATION
TRANSMISSION MODE AND SUBPOPULATIONS
2001 - 2003

	SUBSTANCE ABUSE					
	2001		2002		2003	
	(N=34)		(N=35)		(N=43)	
	NUMBER	PERCENT	NUMBER	PERCENT	NUMBER	PERCENT
Transmission Mode***						
Perinatal Transmission	0	0.0%	0	0.0%	0	0.0%
Hemophilia Coagulation	0	0.0%	0	0.0%	0	0.0%
Transfusion	0	0.0%	0	0.0%	0	0.0%
Heterosexual Contact	2	6.0%	1	3.0%	1	2.0%
MSM (not IDU)	20	63.0%	16	55.0%	24	57.0%
IV Drug Use (not MSM)	1	3.0%	0	0.0%	3	7.0%
MSM/IDU	2	6.0%	1	3.0%	2	5.0%
Multiple Exposure Categories	2	6.0%	1	3.0%	2	5.0%
Other risk	5	16.0%	10	34.0%	10	24.0%
Subpopulation***						
Unduplicated clients	34	100.0%	35	100.0%	43	100.0%
Monolingual (Spanish)	0	0.0%	0	0.0%	0	0.0%
Deaf/hard of hearing	1	3.0%	0	0.0%	0	0.0%
Blind/sight impaired	2	6.0%	3	9.0%	2	5.0%
Homeless	3	9.0%	3	9.0%	3	7.0%
Transgender M to F	1	3.0%	1	3.0%	0	0.0%
Transgender F to M	0	0.0%	0	0.0%	0	0.0%
Within the Beltway	29	85.0%	30	86.0%	37	86.0%
Outside the Beltway	5	15.0%	5	14.0%	6	14.0%
Active substance abuse	12	35.0%	8	23.0%	8	19.0%
Active psychiatric illness	4	12.0%	5	14.0%	6	14.0%
<p>*No data for Asian was available. ** For all years, "Others" includes Native Americans. *** Not mutually exclusive. Most information on transmission mode and comorbidities is obtained during initial registration and not updated. Initial registration could have occurred at any time between 2000 and 2003.</p>						

Figure 2.1.7



MENTAL HEALTH THERAPY AND COUNSELING






-  Use of mental health services increased 53% between 2001 and 2003.
-  A disproportionate percentage of white PLWH use mental health services.
 - Whites comprise 33% of PLWH in the region but were 53% of those using mental health services in 2003.
 - On the other hand, blacks are 48% of PLWH but only 35% of mental health clients, and Hispanics are 18% of PLWH but 11% of those using mental health services.
-  Older adults under-utilize mental health services.
 - PLWH between the ages of 45 and 64 make up 32% of the infected population and are 28% of mental health clients.
 - Youth are 5% of the infected population and are 4% of mental health clients.
-  Use of mental health services by women declined slightly between 2001 and 2003. Women make up 26% of the infected population and were 25% of mental health clients in 2001 and 22% of these clients in 2003.
-  Active substance users were 9% of mental health clients in 2001, declining to 7% in 2003. this is based on self-report at initial registration.

Table 2.1.11
HOUSTON EMA/HSDA
MENTAL HEALTH THERAPY AND COUNSELING UTILIZATION
GENDER, RACE AND AGE
2003

	2003 MENTAL HEALTH					
	MALE		FEMALE		TOTAL	
	NUMBER	PERCENT	NUMBER	PERCENT	NUMBER	PERCENT
Gender						
	419	78.2%	117	21.8%	536	100.0%
Race						
White	248	59.0%	34	29.0%	282	53.0%
Black	119	28.0%	68	58.0%	187	35.0%
Hispanic	47	11.0%	14	12.0%	61	11.0%
Asian	2	0.0%	0	0.0%	2	0.0%
Other*	3	1.0%	1	1.0%	4	1.0%
Total	419	100.0%	117	100.0%	536	100.0%
Age						
0-12	0	0.0%	0	0.0%	0	0.0%
13-24	11	3.0%	12	10.0%	23	4.0%
25-44	288	69.0%	75	64.0%	363	68.0%
45-64	119	28.0%	30	26.0%	149	28.0%
65+	1	0.0%	0	0.0%	1	0.0%
Total	419	100.0%	117	100.0%	536	100.0%
* "Other" includes Native Americans and multi-race.						

*No data for Asian were available

Figure 2.1.8

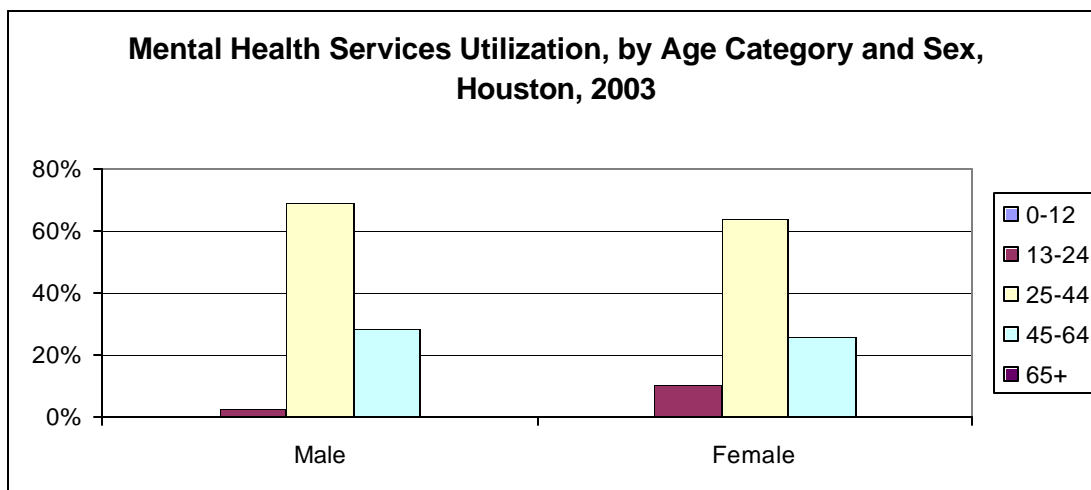
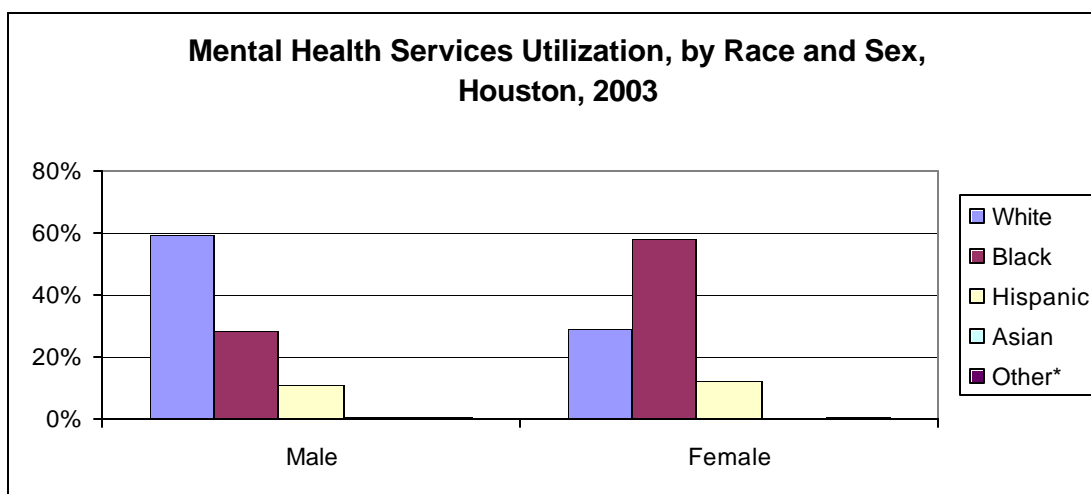


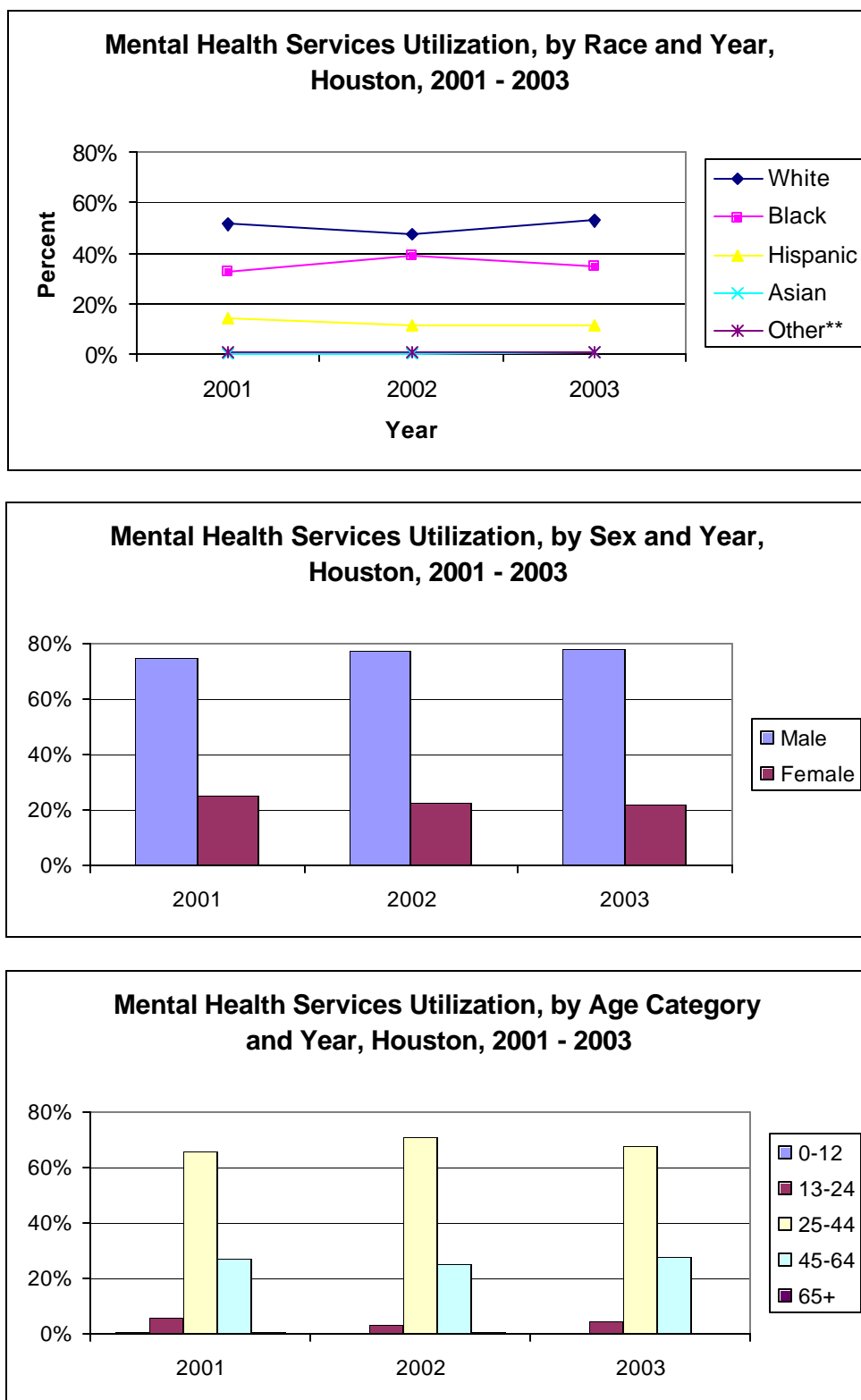
Table 2.1.12
HOUSTON EMA/HSDA
MENTAL HEALTH THERAPY AND COUNSELING UTILIZATION
GENDER, RACE AND AGE
2001 - 2003

	MENTAL HEALTH CARE					
	2001		2002		2003	
	(n=350)		(n=511)		(n=536)	
	Number	Percent	Number	Percent	Number	Percent
Race						
White	181	52.0%	245	48.0%	282	53.0%
Black	116	33.0%	202	40.0%	187	35.0%
Hispanic	51	15.0%	59	12.0%	61	11.0%
Asian	--*	--	1	0.0%	2	0.0%
Other*	2	1.0%	4	1.0%	4	1.0%
Sex						
Male	261	75.0%	395	77.0%	419	78.0%
Female	89	25.0%	116	23.0%	117	22.0%
Age						
0-12	2	1.0%	1	0.0%	0	0.0%
13-24	21	6.0%	17	3.0%	23	4.0%
25-44	231	66.0%	361	71.0%	363	68.0%
45-64	94	27.0%	130	25.0%	149	28.0%
65+	2	1.0%	2	0.0%	1	0.0%
* "Other" includes Native Americans and multi-race.						

Table 2.1.13
HOUSTON EMA/HSDA
MENTAL HEALTH THERAPY AND COUNSELING UTILIZATION
TRANSMISSION MODE AND SUBPOPULATIONS
2001 - 2003

	MENTAL HEALTH CARE					
	2001		2002		2003	
	(n=350)		(n=511)		(n=536)	
	Number	Percent	Number	Percent	Number	Percent
Transmission Mode***						
Perinatal Transmission	1	0.0%	2	0.0%	2	0.0%
Hemophilia Coagulation	1	0.0%	2	0.0%	1	0.0%
Transfusion	5	2.0%	10	2.0%	5	1.0%
Heterosexual Contact	83	26.0%	111	22.0%	113	21.0%
MSM (not IDU)	141	44.0%	208	42.0%	231	43.0%
IV Drug Use (not MSM)	12	4.0%	16	3.0%	22	4.0%
MSM/IDU	11	3.0%	7	1.0%	6	1.0%
Multiple Exposure Categories	18	6.0%	24	5.0%	24	4.0%
Other risk	48	15.0%	114	23.0%	134	25.0%
Subpopulation**						
Unduplicated clients	350	100.0%	512	100.0%	536	100.0%
Monolingual (Spanish)	18	5.0%	14	3.0%	24	4.0%
Deaf/hard of hearing	7	2.0%	12	2.0%	11	2.0%
Blind/sight impaired	12	3.0%	25	5.0%	22	4.0%
Homeless	19	5.0%	19	4.0%	20	4.0%
Transgender M to F	4	1.0%	2	0.0%	2	0.0%
Transgender F to M	0	0.0%	0	0.0%	2	0.0%
Within the Beltway	299	85.0%	400	78.0%	397	74.0%
Outside the Beltway	51	15.0%	112	22.0%	139	26.0%
Active substance abuse	31	9.0%	40	8.0%	38	7.0%
Active psychiatric illness	40	11.0%	36	7.0%	46	9.0%
<p>*No data for Asian were given.</p> <p>** In 2001, "Other" included Native Americans; in 2002 and 2003, included are Native Americans and multi-race.</p> <p>** Not mutually exclusive.</p> <p>Most information on transmission mode and comorbidities is obtained during initial registration and not updated. Initial registration could have occurred at any time between 2000 and 2003.</p>						

Figure 2.1.9



AIDS DRUG ASSISTANCE PROGRAM



-  The AIDS Drug Assistance Program (ADAP) was used by a disproportionate percentage of Hispanic PLWH in 2003.
 - Hispanics make up 18% of PLWH in the region but were 27% of ADAP clients.
 - Blacks are 48% of PLWH but are 42% of ADAP clients.
 - Whites are 33% of PLWH but are 29% of ADAP clients.
-  Although ADAP data is captured with different age categories than surveillance data, it can be seen that PLWH age 45 and older make up 34% of the infected population in the region are 37% of ADAP clients.
 - Both youth and adults up to age 44 access ADAP at somewhat smaller percentages than they are found in the region.

Table 2.1.14
ADAP UTILIZATION, HOUSTON HSDA
2003

	Male		Female		Total	
	No.	%	No.	%	No.	%
Gender						
	2,807	76.7%	855	23.3%	3,662	100.0%
Race						
White	924	33.0%	122	14.0%	1,046	29.0%
Black	1,058	38.0%	495	58.0%	1,553	42.0%
Hispanic	771	27.0%	222	26.0%	993	27.0%
Asian	24	1.0%	6	1.0%	30	1.0%
Other*	30	1.0%	10	1.0%	40	1.0%
Total	2,807	100.0%	855	100.0%	3,662	100.0%
Age						
0-12	1	0.0%	7	1.0%	8	0.0%
13-19	2	0.0%	4	0.0%	6	0.0%
20-44	1,742	62.0%	566	66.0%	2,308	63.0%
45-99	1,062	38.0%	278	33.0%	1,340	37.0%
Total	2,807	100.0%	855	100.0%	3,662	100.0%
Source: Texas Department of Health						
*Other = "Native Hawaiian/Pacific Islander", "Other," "Unknown", American Indian/Alaska Native						

QUESTION 2.2:

**WHAT ARE THE NUMBER AND CHARACTERISTICS
OF PERSONS WHO KNOW THEY ARE HIV-POSITIVE,
BUT WHO HARE NOT RECEIVING PRIMARY MEDICAL
CARE?**

WHAT ARE THE NUMBER AND CHARACTERISTICS OF PERSONS WHO KNOW THEY ARE HIV-POSITIVE, BUT WHO ARE NOT RECEIVING PRIMARY MEDICAL CARE?

When Congress reauthorized the Ryan White CARE Act in 2000, they placed an increased emphasis on identifying people who are HIV positive and not receiving medical care. Congress' ultimate goal is to link these people into the HIV medical care system. To this end, the Health Resources Services Administration (HRSA) wants EMAs to quantify people who are not receiving HIV medical care in their areas, and develop strategies to reach them and bring them into the care system. People are out-of-care if they have not received HIV medical care in the last 12 months. HRSA has made this very specific by defining medical care as having had blood tests to monitor their HIV condition, either CD4 count or viral load test, and/or taking HIV medication, known as antiretroviral medication. HRSA has coined the term "unmet need" to refer to these people who are not receiving HIV medical care because their needs are not being met in the medical care system.

In addition to requesting a simple "count" of the unmet need, HRSA would like a profile of the population who is out-of-care. This profile will inform outreach and service activities being designed to link populations with the care system.

In order to quantify the unmet need, data about the number of people receiving HIV medical care must be compared to the prevalence, or number of people living with HIV disease. While this sounds simple in theory, a wide range of data issues make this a complex task. The following presents the data elements developed by the Houston EMA, and the calculations of unmet need.

PREVALENCE

The surveillance data presented in this report is an indication of the number of people with HIV disease, and it is felt that the percentages and trends are an accurate reflection of the epidemic in the region. In terms of total prevalence, however, this surveillance data has limitations since HIV reporting did not begin until 1999. Anyone diagnosed with HIV before 1999, who has not progressed to AIDS and who has not had another HIV test, is not included in the surveillance figures. Therefore, the surveillance data should not be considered complete for estimating the unmet need.

In the summer of 2003, the Centers for Disease Control and Prevention (CDC) provided the Houston EMA with a prevalence estimate that they developed for the region. This estimate, based on December 31, 2002 data, increases the prevalence figures to account for those who are not included in the surveillance statistics.

For this 2004 unmet need calculation, the CDC prevalence estimate, 20,045, is increased only by the number of new HIV cases diagnosed in 2003, or 604 cases. This

results in a total prevalence of 20,649 people living with either HIV or AIDS in the Houston EMA.

Since the surveillance data presented in this profile is considered an accurate reflection of the epidemic in the region, demographics of the unmet need population are calculated based upon the percentages within the surveillance data.

SERVICE UTILIZATION

CPCDMS provides excellent unduplicated patient counts and profiles of patients receiving Title I and II services. This data was accurately augmented with data from Titles III and IV. The Harris County Jail and the Veterans Administration Hospital provided their patient data. These data were integrated with CPCDMS and are presented in Table 2.1.1. Slight data discrepancies are footnoted on that table.

In order to estimate the number of people receiving HIV medical care from a private provider, the Ryan White Program conducted a survey of major insurers and private physicians who treat large number of people living with HIV disease. Most major insurer responded, either in July 2003 or April 2004. The most recent responses are use. These insurers provided data on total number of patients with HIV covered by their plans and the gender of these patients. Other demographic profile information was not available.

Physician responses were limited, but four practitioners provided information on 1,072 patients. These physicians provided both gender and racial distribution. That distribution is applied to the total number of HIV patients covered by the private insurers. It should be noted that one physician reported 5% of patients were of Asian race. Basing percentages on this figure may overstate the Asian number receiving care and should be further examined.

Since neither physicians nor insurers provided age information, the CPCDMS age profile is applied. This profile includes age-adjusted Veterans Administration (VA) data. The VA data was allocated to age groups that correspond to the age groups used in this profile.

Medicaid data, prepared by the Texas Health and Human Services Commission, showed the number of people treated for HIV or AIDS during calendar year 2003. The Medicaid profile includes both Title I and Title II Medicaid claims and encounter data.

Medicare data are not included.

RESULTS

Without including Medicare data, an estimated 42.13% of people living with HIV and AIDS in the Houston EMA are outside the medical care system. This includes nearly 47.75% of men and 25.94% of women. (Table 2.2.1)

Considering the race and ethnicity of those with unmet need, whites have the largest percentage outside the medical care system, nearly 52%. Almost 40% of blacks are outside the care system, and Hispanics have the lowest unmet need, 34.74%. (Table 2.2.2)

Examining unmet need by age using current data sources, the largest unmet need is among pediatrics, age 0 – 12, with 56.45% out-of-care. Youth include the largest in-care percentage, with 33.50% out of care. Both the 25 to 44 year group and 45 to 64 year group have approximately 42% out-of-care. (Table 2.2.3)

Table 2.2.1
HOUSTON EMA
2003 UNMET NEED ESTIMATE
GENDER PROFILE

	HIV/AIDS	In-Care	In-Care	In-Care	Total	Total	Unmet
	Prevalence	CPCDMS*	Private*	Medicaid***	In-Care	Unmet	Need
							Percentage
Total	20,649	7,331	2,850	1,769	11950	8699	42.13%
Gender							
Men	15,322	5,361	2,017	627	8,005	7,317	47.75%
Women	5,327	1,970	833	1,142	3,945	1,382	25.94%

*Includes Titles I, II, III, IV, Fort Bend Family Health Center, Harris County Jail, Veterans Administration
VA data includes 19 people who died during 2003
Jail data inconsistent on race with discrepancy of one client
Title IV data from Texas Children's Hospital may reflect duplicate data of Hispanic ethnicity
**Totals provided by gender. Insurers include: BC/BS of Texas, CIGNA, United Healthcare, Humana
***Includes Title I and Title II Medicaid data.

TABLE 2.2.2
HOUSTON EMA
2003 UNMET NEED ESTIMATE
RACIAL/ETHNIC PROFILE

		Total	Race/ Ethnicity	White, non Hispanic	Black, non- Hispanic	Hispani c c	Other
HIV/AIDS	Prevalenc e	20,649		6,835	9,912	3,696	206
In-Care	CPCDMS*	7,331		1,896	3,903	1,450	82
In-Care	Private**	2,850					
Private race	Profile Male	2,017		914	472	587	46
Private race	Profile Female	833		286	338	167	42
In- Care***	Medicaid Male	627		105	368	110	44
In Care***	Medicaid Female	1,142		103	907	98	34
Total	In-Care	11,950		3,304	5,988	2,412	164
Total	Unmet Need	8,699		3,531	3,924	1,284	42
Unmet Need	Percenta ge	42.13%		51.66%	39.59%	34.74 %	20.3 9%
<p>*Includes Titles I, II, III, IV, Port Bend Family Health Center, Harris County Jail, Veterans Administration VA data includes 19 people who died during 2003 Jail data inconsistent on race with discrepancy of one client Title IV data from Texas Children's Hospital may reflect duplicate data of Hispanic ethnicity **Totals provided by gender. Insurers include: BC/BS of Texas, CIGNA, United Healthcare, Humana **Includes Title I and Title II Medicaid data Private utilization by race is based upon a survey of private physicians (n=4)</p>							

WHO ARE NOT RECEIVING PRIMARY MEDICAL CARE?





QUESTION 2.2: WHAT ARE THE NUMBER AND CHARACTERISTICS OF PERSONS WHO KNOW THEY ARE HIV-POSITIVE, BUT

Table 2.2.3
Houston EMA
2003 Unmet Need Estimate
Age Profile

		Total	Age	0-12	13-24	25-44	45-64	65+
HIV/AIDS	Prevalence	20,649		248	991	12,369	6,690	372
In-Care	CPCDMS*	7,331		54	416	4,355	2,359	127
In-Care	Private**	2,850						
Private age	Profile Male			20	61	1,190	706	40
Private Age	Profile Female			17	75	516	225	8
In-Care***	Medicaid Male	627		6	38	370	201	12
In Care***	Medicaid Female	1,142		11	69	674	365	23
Total	In-Care	11,950		108	659	7,105	3,856	210
Total	Unmet Need	8,699		140	332	5,264	2,834	162
Unmet Need	Percentage	42.13%		56.45%	33.50%	42.56%	43.36%	43.55%
<p>*Includes Titles I, II, III, IV, Port Bend Family Health Center, Harris County Jail, Veterans Administration VA data includes 19 people who died during 2003 Jail data inconsistent on race with discrepancy of one client Title IV data from Texas Children's Hospital may reflect duplicate data of Hispanic ethnicity **Totals provided by gender. Insurers include: BC/BS of Texas, CIGNA, United Healthcare, Humana ***Includes Title I and Title II Medicaid data Utilization by age is based up on percentages from CPCDMS Veterans Administration patients redistributed to under 65 year age groups</p>								

UNMET NEED RECOMMENDATIONS

In order to enhance the unmet need calculations, the following actions are recommended:

-  Attempt to obtain Medicare data or some indication of the percentage of Medicare patients in the EMA.
-  Increase the physician response to the patient profile survey.
-  Survey physicians for patient age profiles to compare with the CPCDMS profile used here.
-  Consider surveying additional, large private insurers.

APPENDIX A

POPULATION PROJECTIONS BY AGE, GENDER AND COUNTY

POPULATION CHANGE

COUNTY	POPULATION 2000		POPULATION 2010		PERCENT CHANGE 2000- 2010
	NUMBER	PERCENT	NUMBER	PERCENT	
Chambers					
Under 2 years	672	2.6%	770	2.5%	14.6%
2-12 years	4,504	17.3%	4,273	13.6%	-5.1%
13-24 years	4,473	17.2%	5,775	18.4%	29.1%
25-44 years	7,783	29.9%	8,173	26.0%	5.0%
45-64 years	6,249	24.0%	9,068	28.9%	45.1%
65 and older	2,350	9.0%	3,316	10.6%	41.1%
Total	26,031	100.0%	31,375	100.0%	20.5%
Fort Bend					
Under 2 years	10,475	3.0%	10,798	2.4%	3.1%
2-12 years	69,263	19.5%	63,465	14.1%	-8.4%
13-24 years	60,807	17.2%	88,613	19.7%	45.7%
25-44 years	114,336	32.3%	110,664	24.6%	-3.2%
45-64 years	79,402	22.4%	141,207	31.4%	77.8%
65 and older	20,169	5.7%	35,064	7.8%	73.9%
Total	354,452	100.0%	449,811	100.0%	26.9%
Harris					
Under 2 years	114,059	3.4%	124,181	3.1%	8.9%
2-12 years	611,189	18.0%	655,435	16.6%	7.2%
13-24 years	611,150	18.0%	670,299	17.0%	9.7%
25-44 years	1,136,376	33.4%	1,219,700	30.9%	7.3%
45-64 years	674,909	19.8%	946,732	24.0%	40.3%
65 and older	252,895	7.4%	335,335	8.5%	32.6%
Total	3,400,578	100.0%	3,951,682	100.0%	16.2%
Liberty					
Under 2 years	1,986	2.8%	2,263	2.8%	13.9%
2-12 years	11,826	16.9%	12,101	14.8%	2.3%
13-24 years	11,995	17.1%	14,568	17.8%	21.5%
25-44 years	22,134	31.6%	23,300	28.4%	5.3%
45-64 years	15,021	21.4%	20,729	25.3%	38.0%
65 and older	7,192	10.3%	8,969	10.9%	24.7%
Total	70,154	100.0%	81,930	100.0%	16.8%
Montgomery					
Under 2 years	8,975	3.1%	10,292	2.7%	14.7%
2-12 years	53,217	18.1%	57,250	15.1%	7.6%
13-24 years	48,105	16.4%	67,694	17.8%	40.7%
25-44 years	90,013	30.6%	95,900	25.3%	6.5%
45-64 years	67,910	23.1%	108,793	28.7%	60.2%
65 and older	25,548	8.7%	39,434	10.4%	54.4%
Total	293,768	100.0%	379,363	100.0%	29.1%

(Table continues)

Table continues....

COUNTY	POPULATION 2000		POPULATION 2010		PERCENT CHANGE 2000- 2010
	NUMBER	PERCENT	NUMBER	PERCENT	
Waller					
Under 2 years	963	2.9%	1,172	2.8%	21.7%
2-12 years	5,032	15.4%	6,109	14.9%	21.4%
13-24 years	8,294	25.4%	10,126	24.6%	22.1%
25-44 years	8,614	26.4%	10,512	25.6%	22.0%
45-64 years	6,701	20.5%	9,874	24.0%	47.4%
65 and older	3,059	9.4%	3,344	8.1%	9.3%
Total	32,663	100.0%	41,137	100.0%	25.9%
Austin					
Under 2 years	625	2.6%	674	2.6%	7.8%
2-12 years	3,774	16.0%	3,630	14.2%	-3.8%
13-24 years	3,877	16.4%	4,319	16.9%	11.4%
25-44 years	6,218	26.4%	6,045	23.6%	-2.8%
45-64 years	5,601	23.7%	7,175	28.0%	28.1%
65 and older	3,495	14.8%	3,739	14.6%	7.0%
Total	23,590	100.0%	25,582	100.0%	8.4%
Colorado					
Under 2 years	484	2.4%	606	2.9%	25.2%
2-12 years	3,043	14.9%	2,939	13.9%	-3.4%
13-24 years	3,509	17.2%	3,478	16.5%	-0.9%
25-44 years	4,848	23.8%	4,997	23.7%	3.1%
45-64 years	4,715	23.1%	5,446	25.8%	15.5%
65 and older	3,791	18.6%	3,635	17.2%	-4.1%
Total	20,390	100.0%	21,101	100.0%	3.5%
Walker					
Under 2 years	1,235	2.0%	1,329	2.0%	7.6%
2-12 years	6,619	10.7%	7,408	10.9%	11.9%
13-24 years	17,446	28.2%	16,728	24.7%	-4.1%
25-44 years	19,230	31.1%	22,060	32.6%	14.7%
45-64 years	11,702	18.9%	13,718	20.3%	17.2%
65 and older	5,526	8.9%	6,421	9.5%	16.2%
Total	61,758	100.0%	67,664	100.0%	9.6%
Wharton					
Under 2 years	1,164	2.8%	1,359	3.1%	16.8%
2-12 years	7,004	17.0%	7,000	16.1%	-0.1%
13-24 years	7,508	18.2%	7,703	17.7%	2.6%
25-44 years	10,916	26.5%	11,126	25.5%	1.9%
45-64 years	8,874	21.5%	10,736	24.6%	21.0%
65 and older	5,722	13.9%	5,636	12.9%	-1.5%
Total	41,188	100.0%	43,560	100.0%	5.8%