



# **2019 Consumer Needs Assessment Report**

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Protecting and Improving the Health of Iowans



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## Acknowledgements

Thank you to the 555 Iowans living with HIV who participated in the 2019 Consumer Needs Assessment survey. Their collective responses offer insight into the epidemic and guidance for improving care and prevention services in Iowa. Thank you to International Translation Services for translating the survey, the Ryan White Parts B and C agencies and private medical providers for distributing the surveys, and RDE Systems for developing the survey. Special thanks to Annie Rodruck, Consumer Needs Assessment Coordinator, for organizing the development, distribution, and analysis of the Consumer Needs Assessment survey.

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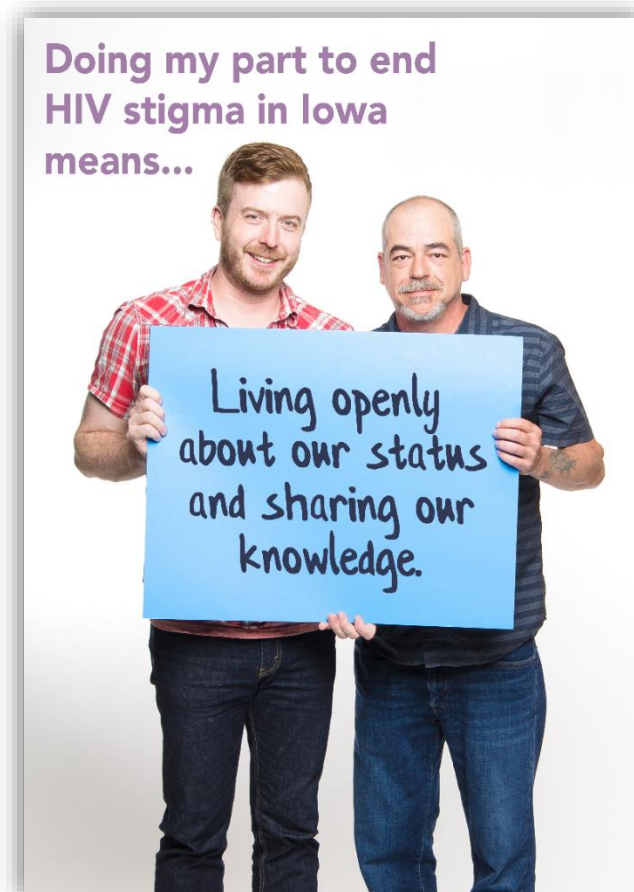
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## Executive Summary

There were 555 Iowans diagnosed and living with HIV who completed the Consumer Needs Assessment (CNA) survey. The survey collected information about income and employment, housing, perceived impact of racism, physical and mental health, access to insurance, access to medical and support services, HIV stigma, childhood trauma, resilience, intimate partner violence, HIV risk behaviors, and interest in a new injectable HIV medication. For many questions, results were compared to the CNA survey results of previous years to assess changes over time, or to the Iowa Behavioral Risk Factor Surveillance System (BRFSS) survey, which is representative of Iowa's general population. Results were also evaluated for disparities among specific populations. Identified disparities are noted throughout this report.

The survey respondents were generally representative of all people living with HIV in Iowa. Almost all respondents received Ryan White Part B services. Respondents in and around Des Moines were slightly underrepresented as they had a 13% response rate while 29% of people living with HIV in Iowa reside in Polk County.

About 30% of respondents identified as a race/ethnicity other than, or in addition to, White. These respondents were asked ten questions regarding bias they've experienced in a health care setting because of their race or ethnicity. Responses ranged between 17% and 30% of respondents who experienced bias in various health care situations.

The percent of respondents who have ever experienced homelessness increased from 38% in 2016 to 42% in 2019. Women and Black respondents were more likely to have experienced homelessness compared to all respondents. Thirty-four percent (34%) of respondents had experienced incarceration. Hispanic respondents were less likely to have experienced incarceration compared to all respondents.

One quarter of respondents (25%) reported being out of care for one or more years since their HIV diagnosis. Almost all respondents (97%) reported seeing their HIV medical provider within the past 12 months, and 92% were virally suppressed at last test. Black respondents (95%) were slightly less likely to have seen an HIV medical provider in the past 12 months, and were less likely to be virally suppressed (88%). Women respondents (89%) were also less likely to be virally suppressed.

A new HIV injectable medication will be available in 2020, and 64% of respondents were somewhat or very likely to switch to it. The most common reason for respondents wanting to switch was that they wouldn't have to take oral medications every day (64%). The greatest concern respondents had about switching was that they would need to attend monthly medical appointments (29%).

Fifty-four percent (54%) of respondents reported drinking alcohol in the past 30 days. About one quarter of respondents who drank (26%) reported engaging in binge drinking within the past 30 days. Women respondents (32%) were more likely to engage in binge drinking compared to all respondents. Among respondents who drank, 23% reported wanting to drink less, or that someone close to them had asked them to drink less.

Twenty percent (20%) of respondents reported ever injecting drugs, with 6% having injected drugs within the past 12 months and 14% having injected drugs more than 12 months ago. Among respondents who injected drugs within the past 12 months, 34% shared needles or works and 35%

reported wanting to stop using drugs, or that someone close to them had asked them to stop using drugs. Tobacco use in the last 30 days among respondents increased from 39% in the 2016 CNA to 46% of 2019 CNA respondents.

About one quarter of respondents experienced serious mental illness (23%), which was the same as the 2016 CNA. A new set of questions were included on the 2019 CNA on intimate partner violence, which included all types of abuse, coercion, and control. About one third (34%) of respondents had experienced intimate partner violence.

Stigma experienced among all respondents resembled results of the 2016 CNA. Some notable progress includes that 2019 respondents were less likely to worry about sharing their story (86% vs. 60%), worry about discrimination due to their HIV status (82% vs. 78%), have people physically back away from them (42% vs. 33%), and feel set apart or isolated from the rest of the world (58% vs. 51%).

Service needs and gaps were assessed among all respondents. The top 3 most utilized services were: case management (89%), dental care (80%), and help selecting or enrolling in insurance coverage (77%). The top three services with the lowest met need were alternative therapy (62% met need), help paying for education or to go back to school (65% met need), and helping finding a job or job training (78% met need). The most common barrier to services was that respondents did not know how to find/access the service (15%).

Almost half of respondents (49%) were tested for a sexually transmitted infection (STI) within the past 12 months. The top three STIs respondents were tested for were syphilis (68%), gonorrhea (66%) and chlamydia (63%). Among all respondents, 88% had been tested for hepatitis C at some point in their lifetime. Among those tested, 20% had ever tested positive. Among those who did test positive, 61% had been treated and cured.

This year for the first time, resilience was measured at two separate time points, in high school and in current day. Responses were categorized into low and high resilience. High resilience increased over time from 64% in high school to 76% in present day.

## List of Acronyms

ACEs	Adverse Childhood Experiences
BRFSS	Behavioral Risk Factor Surveillance System
CNA	Consumer Needs Assessment
CPG	HIV and Hepatitis C Community Planning Group
FPL	Federal Poverty Level
HCV	Hepatitis C Virus
HIV	Human Immunodeficiency Virus
HRSA	Health Resources and Services Administration
IDPH	Iowa Department of Public Health
PrEP	Pre-Exposure Prophylaxis
STIs	Sexually Transmitted Infections



## Introduction

An HIV consumer needs assessment is the process of collecting information from people living with HIV about their needs and barriers to care. The 2019 survey was the fifth Consumer Needs Assessment (CNA) survey administered by the Iowa Department of Public Health (IDPH), following those completed in 2005, 2008, 2011 and 2016. All recipients of the Ryan White Extension Act of 2009 are required by the Health Resources and Services Administration (HRSA) to conduct periodic needs assessments, as needs assessments play an integral role in improving prevention, health care, and support services for people living with HIV. The purpose of this survey was to reach a representative proportion of people diagnosed and living with HIV in Iowa to answer the following questions in order to improve care and prevention services across the state:

- What are the HIV care and prevention services people diagnosed and living with HIV in Iowa need?
- What are the barriers to accessing those services?
- What are the experiences of people diagnosed and living with HIV in Iowa, including stigma, social determinants of health, and childhood trauma?
- How do service needs, gaps, and barriers vary by sub-populations of people diagnosed and living with HIV in Iowa?
- How do health and wellness vary by sub-populations of people diagnosed and living with HIV in Iowa, and how does it compare to Iowa's overall population, as measured by statewide data?





## Methods

### Survey Development

The 2019 Consumer Needs Assessment (CNA) survey was developed by IDPH and the Iowa HIV and Hepatitis Community Planning Group (CPG), which consisted of healthcare and support services providers, community members, and people living with HIV. The survey instrument was adapted from the 2011 and 2016 Iowa HIV needs assessment surveys and informed by the Iowa Behavioral Risk Factor Surveillance System (BRFSS) surveys. The CNA collected information about participants' demographics, perceived impact of racism, physical and mental health, access to insurance, access to medical and support services, HIV stigma, childhood trauma, resilience, intimate partner violence, HIV risk behaviors, and interest in a new injectable HIV medication.

This was the second year the survey was entirely electronic. IDPH contracted with a third party, RDE Systems, to program the survey online making it accessible on computers, tablets, and smartphones. The survey was translated into Spanish and computer generated audio was available in English and Spanish to reach a larger population of people living with HIV. Respondents were also able to call the CNA Coordinator and complete the survey over the phone with a live person.

Eligible respondents were provided a new option this year of linking data from CAREWare (the Ryan White client-level data system) to their survey responses. To be offered this option, respondents had to be a current Ryan White Part B or Part C client in Iowa and have the required CAREWare fields completed. When this option was selected, respondents would skip 12 questions within the survey. If this option was not selected, or if the respondent was not eligible for this option, then they were asked to complete all questions within the survey.

### Survey Administration and Response Rates

IDPH coordinated with HIV care providers across the state, including Ryan White Part B subrecipients, Ryan White Part C clinics, and private HIV medical providers, to distribute the surveys. Each client receiving Ryan White Part B support services or Ryan White Part C medical care was mailed a survey letter containing a link to the survey and a unique access code. Throughout the survey period, fliers were posted in agencies and clinics, and Ryan White subrecipient staff contacted their clients to encourage them to take the survey. Staff from Ryan White subrecipients and IDPH assisted respondents in completing the survey over the phone or in person if respondents were unable to access the internet. Private providers distributed survey letters to patients in their clinics. Upon completing the online survey, respondents were prompted to select how they would like to receive their gift card (by mail or at their Ryan White agency if eligible).

The survey was open for a period of 56 days, from October 1, 2019 to November 25, 2019, and 555 surveys were completed. Some survey questions incorporated skip-logic, so n-values are indicated throughout the report for questions answered by less than 555 respondents. Percentages of survey respondents may exceed 100% due to rounding, or because some questions allowed for multiple answers.

Response rates were calculated by dividing the number of surveys completed by the number of surveys distributed, per agency. Since it was unknown how many survey letters were distributed by private

providers, a response rate was not calculated for them. The average response rate was 28%. This was calculated as 555 surveys completed out of an estimated 1,996 number of survey letters distributed.

**Table 1.**  
**Survey response rate by provider (Ryan White Parts B & C, and Private Providers)**

Distributors	Survey Letters Distributed	Surveys Completed	Response Rate
Cedar AIDS Support System	104	42	40%
Dubuque Visiting Nurses Association	62	54	87%
Genesis Health Group	0	0	--
Great River Health System	4	4	100%
Linn County Community Services	172	54	31%
Nebraska AIDS Project	79	25	32%
North Iowa Community Action Organization	38	25	66%
Primary Health Care	681	91	13%
River Hills Community Health Center	2	2	100%
Siouxland Community Health Center	189	36	19%
The Project Quad Cities	160	63	39%
University of Iowa Hospitals and Clinics	451	135	30%
University of Nebraska Medical Center	50	10	20%
Private Providers	*	13	*
Iowa Department of Public Health	4	4	100%
<b>Totals</b>	<b>1,996</b>	<b>555</b>	<b>28%</b>

\* Indicates an unknown value

### Confidentiality

Several precautions were taken to ensure respondent confidentiality. RDE Systems facilitated the data matching between CAREWare and the survey, and assigned Survey IDs. The electronic survey did not collect names or any other identifying information. For the purpose of survey tracking and gift card dissemination, RDE Systems developed an Incentive Module to track the distribution of gift cards. This database was maintained in a secure environment, and approved users were provided a unique login.

After completing the survey, respondents were provided an Incentive Code. They could request their gift card by mail, or pick up their gift card from their Ryan White Agency (if eligible). Name was an optional field in the mailing address when requesting gift cards by mail. Identifying information tied to the gift cards were stored in a separate database from the survey responses.

### Data Analysis

Microsoft Excel 2016 was used for data analyses.

### Limitations

The majority of survey respondents were clients of Ryan White services, and therefore may not be representative of all people living with HIV in Iowa. Respondents were primarily individuals receiving regular medical care and were connected to support services. Therefore, people who do not receive Ryan White care and support services, and people who are not engaged in medical care, are underrepresented in this survey. People residing in and around Polk County are also underrepresented as the response rate in Des Moines was only 13% compared to the 28% overall CNA response rate. These limitation should be kept in mind while reviewing the data presented throughout this report.

## Results

The remainder of this report contains topic specific fact sheets with the results of the 2019 CNA. The fact sheets may be used and distributed individually, or together in this report.



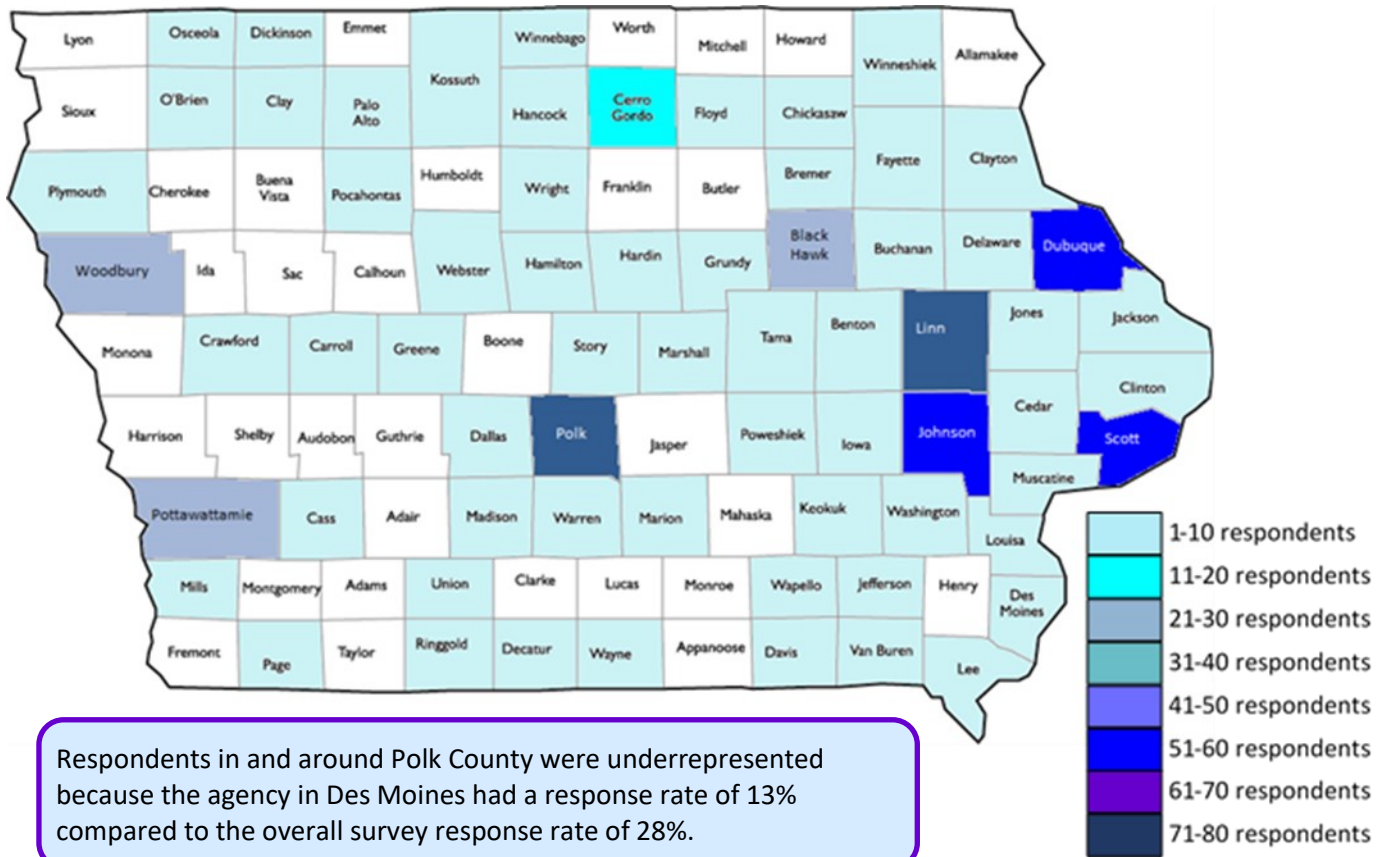


2019 Iowa Consumer Needs Assessment

DEMOGRAPHICS

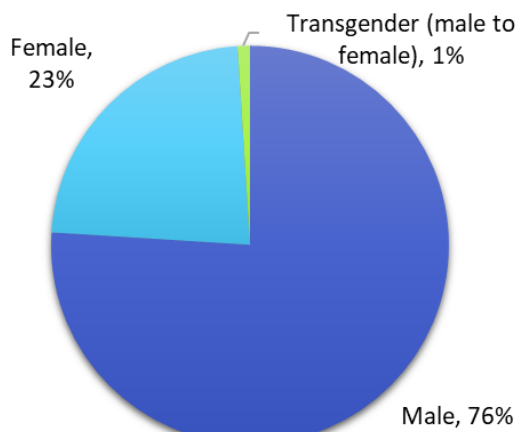
In 2019, the Iowa Department of Public Health and the HIV & Hepatitis Community Planning Group conducted a Consumer Needs Assessment (CNA) survey among Iowans diagnosed and living with HIV. There were 555 respondents who completed the survey. Results were evaluated for disparities among specific populations. Identified disparities are noted.

**Geographic Distribution of Respondents by County**

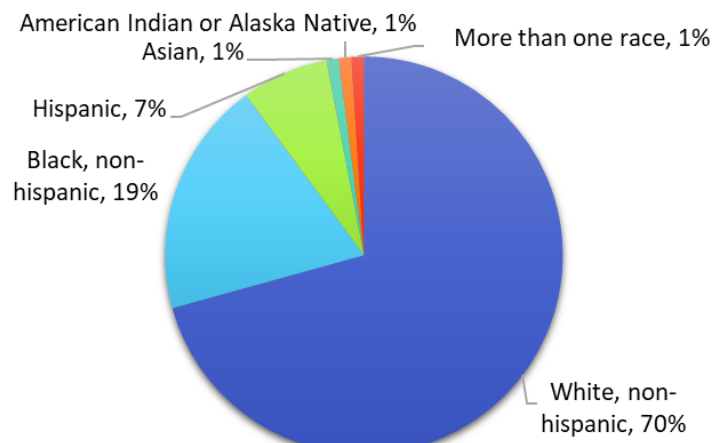


Respondents in and around Polk County were underrepresented because the agency in Des Moines had a response rate of 13% compared to the overall survey response rate of 28%.

**Gender Among All Respondents**

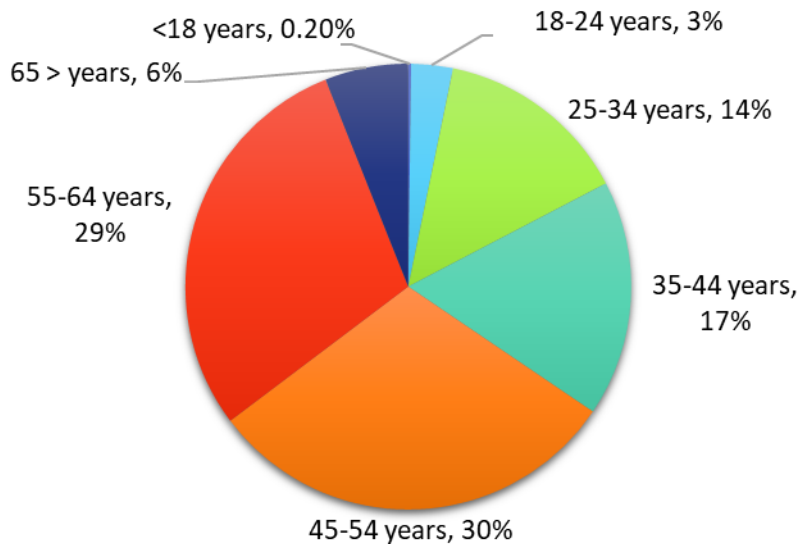


**Race/Ethnicity Among All Respondents**





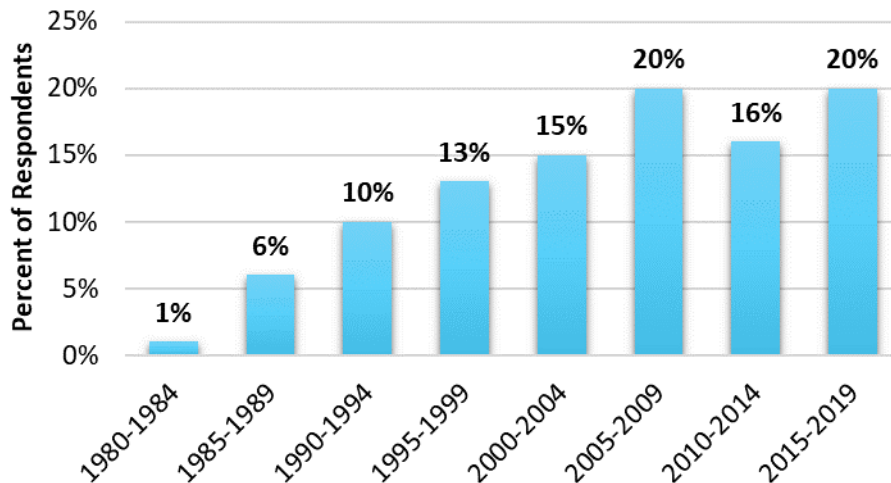
**Current Age Among All Respondents**



Respondents' gender, race/ethnicity, and current age resembled that of all lowans diagnosed and living with HIV, and were similar to results from the 2016 CNA.

White respondents (70%) were slightly overrepresented as only 60% of lowans diagnosed and living with HIV identified as White. Black respondents (19%) were slightly underrepresented compared to lowans diagnosed and living with HIV in 2019 (24%).

**Year of HIV Diagnosis Among All Respondents**

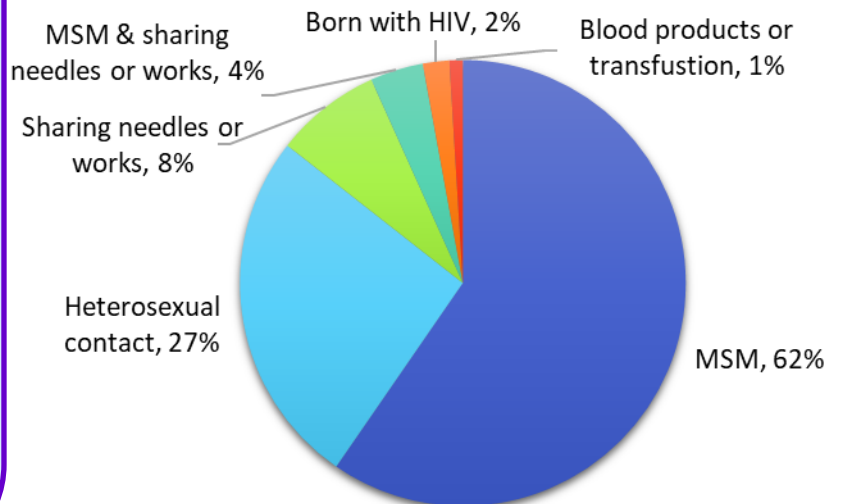


Respondents' modes of HIV exposure were similar to that of all lowans diagnosed and living with HIV, and to participants in the 2016 CNA.

MSM respondents (62%) were slightly overrepresented as only 53% of all lowans diagnosed and living with HIV in 2019 identified MSM as their mode of exposure. Respondents who identified heterosexual contact (27%) as their mode of exposure were also overrepresented compared to their 2019 statewide counterparts (19%).

Respondents reporting MSM and sharing needles or works were underrepresented (4%) compared to lowans diagnosed and living with HIV in 2019 (7%).

**Mode of Exposure Among All Respondents**



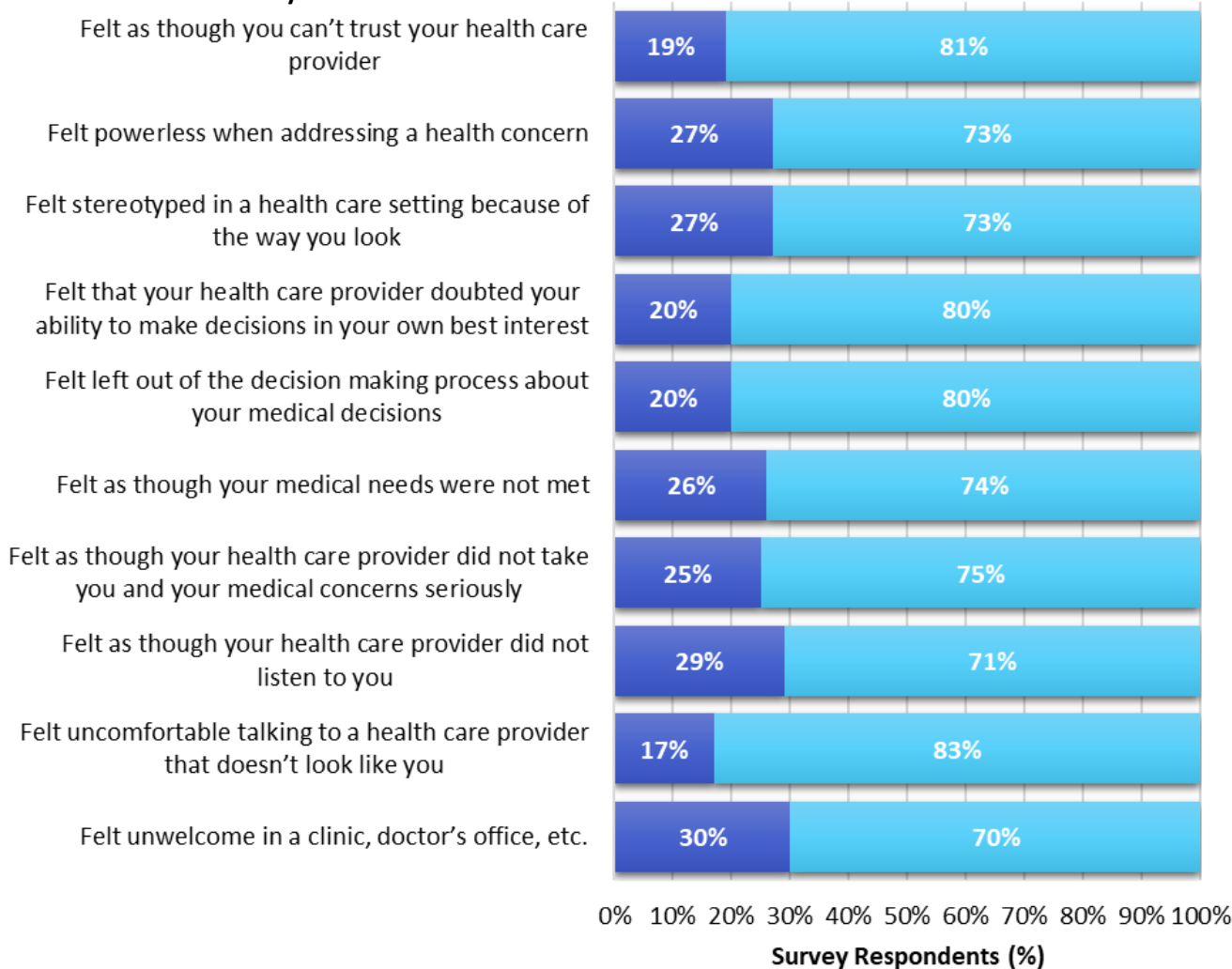


# PERCEIVED IMPACT OF RACISM

In 2019, the Iowa Department of Public Health and the HIV & Hepatitis Community Planning Group conducted a Consumer Needs Assessment (CNA) survey among Iowans diagnosed and living with HIV. There were 555 respondents who completed the survey. Results were evaluated for disparities among specific populations. Identified disparities are noted.

## Perceived Impact of Racism on Service Delivery (n=166)

**Because of bias towards your race or ethnicity, have you ever...**

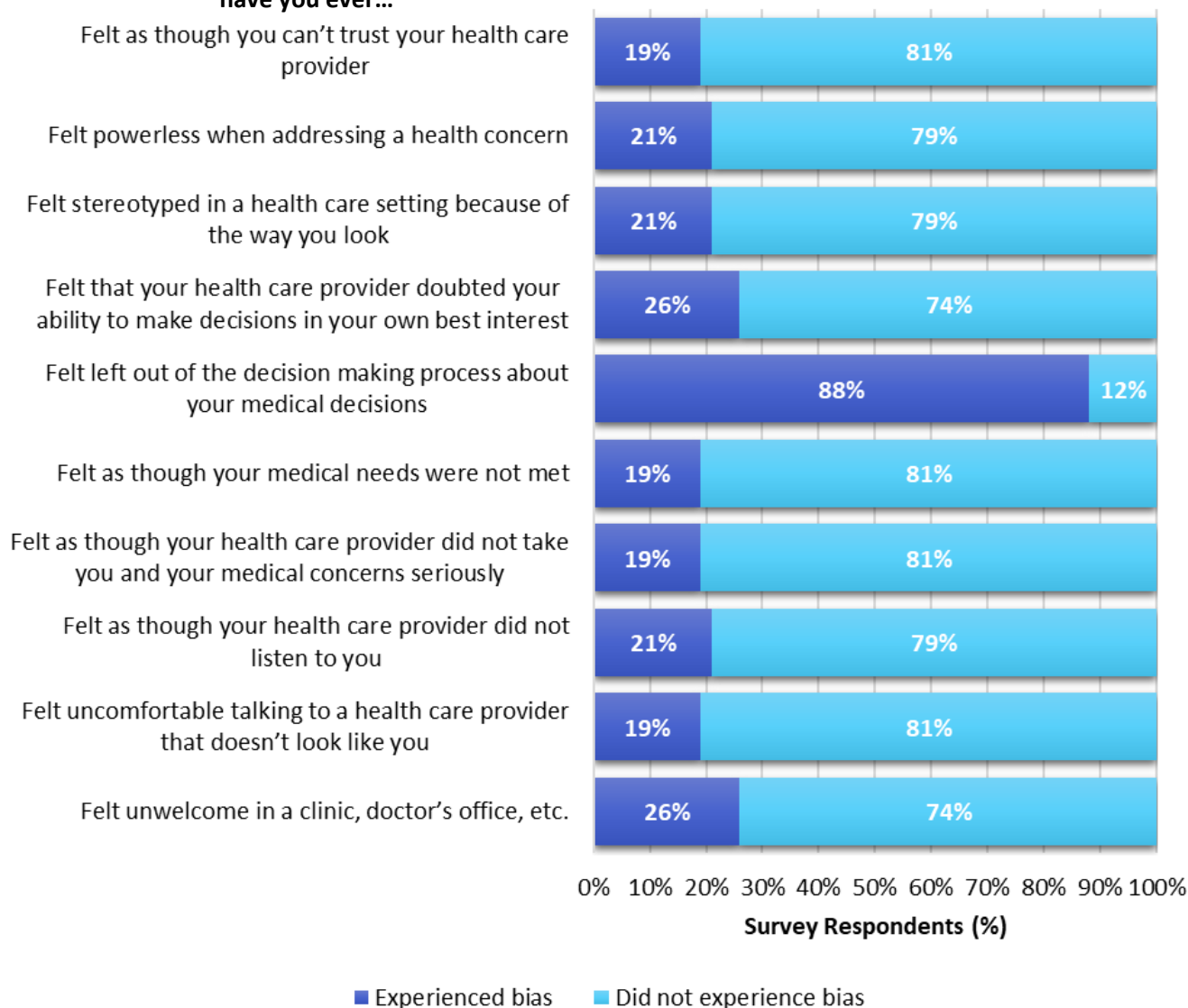


■ Experienced bias    ■ Did not experience bias

Respondents who identified as a race/ethnicity other than, or in addition to, White were asked to answer questions regarding bias they've experienced because of their race or ethnicity. This was the first time these questions were asked on a CNA. There were 166 respondents who completed this section of the survey. These data will be used as a baseline to compare on future surveys.

**Perceived Impact of Racism on Service Delivery Among Foreign-Born Respondents (n=42)**

**Because of bias towards your race or ethnicity, have you ever...**



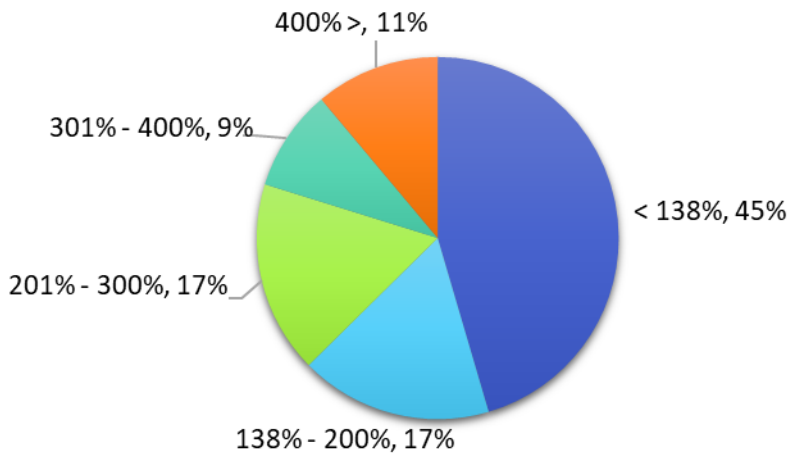
There were 42 foreign-born respondents who identified as a race/ethnicity other than, or in addition to, White that completed this section of the survey. Results were similar to all respondents who were offered these questions, with one exception: 88% of foreign-born respondents felt left out of the decision making process about their medical decisions compared to only 20% of all respondents who completed this section.



# INCOME AND EMPLOYMENT

In 2019, the Iowa Department of Public Health and the HIV & Hepatitis Community Planning Group conducted a Consumer Needs Assessment (CNA) survey among Iowans diagnosed and living with HIV. There were 555 respondents who completed the survey. Results were evaluated for disparities among specific populations. Identified disparities are noted.

## Household Income by Federal Poverty Level (FPL) Percentage

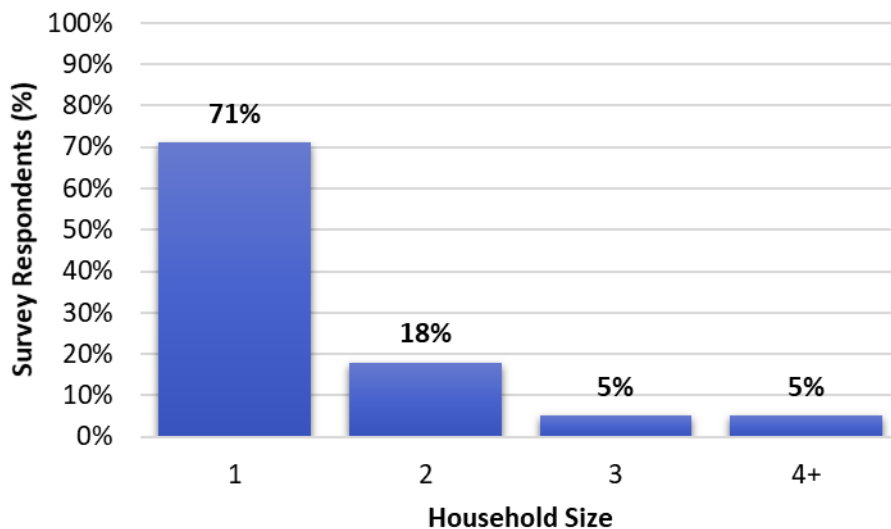


Respondents of the 2019 CNA had higher incomes compared to 2016 CNA respondents. Notable differences include:

- Fewer respondents had incomes less than 138% FPL in 2019 (45%) compared to 2016 (54%).
- More respondents had incomes between 201% and 400% FPL in 2019 (26%) compared to 2016 (15%).

Women (55%), Black (60%), and Hispanic respondents (51%) were more likely to have incomes <138% FPL compared to all 2019 respondents.

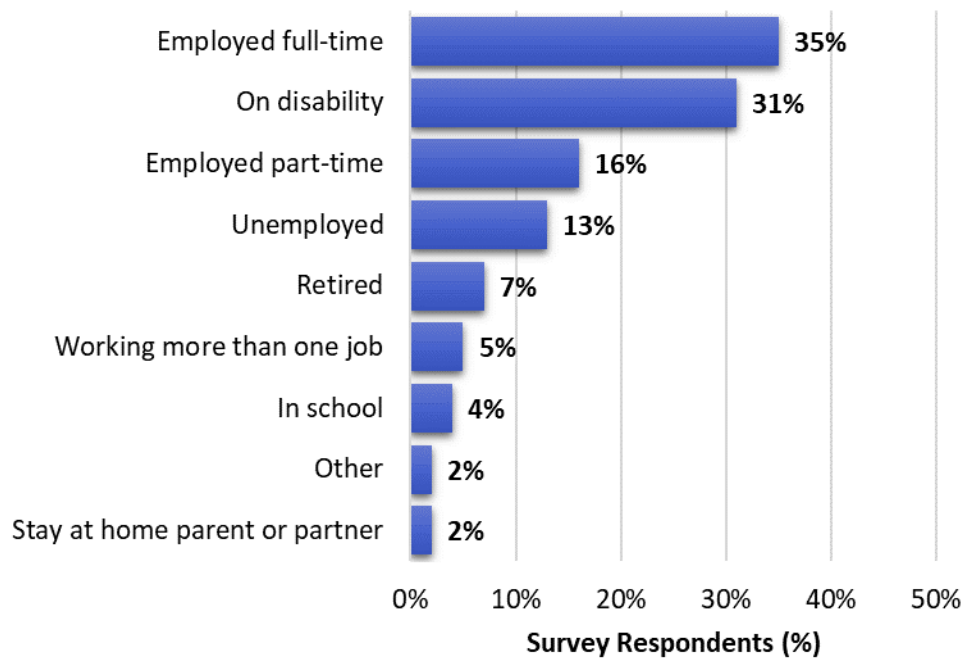
## Household Size Among All Respondents



Women (40%) and Hispanic respondents (43%) were more likely to have a household size greater than one compared to all respondents (29%).



**Employment Status Among All Respondents**



Results of the 2019 CNA resembled those from 2016. The following disparities were noted:

- Women (43%) and Black respondents (47%) were less likely, and Hispanic respondents (57%) were more likely to be working full- or part-time compared to all respondents (51%).
- Women (16%), Black (17%), and Hispanic respondents (24%) were more likely to be unemployed compared to all respondents (13%).
- Hispanic respondents (22%) were less likely to be on disability compared to all respondents (31%).

**Job Searching Among Unemployed Respondents (n=71)**



Unemployed women (33%) and Hispanic respondents (33%) were less likely to be looking for a job compared to all unemployed respondents (56%).



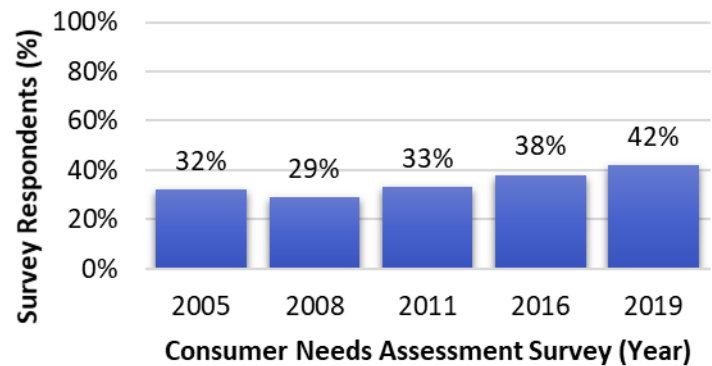
# HOUSING & HOMELESSNESS

In 2019, the Iowa Department of Public Health and the HIV & Hepatitis Community Planning Group conducted a Consumer Needs Assessment (CNA) survey among Iowans diagnosed and living with HIV. There were 555 respondents who completed the survey. Results were evaluated for disparities among specific populations. Identified disparities are noted.

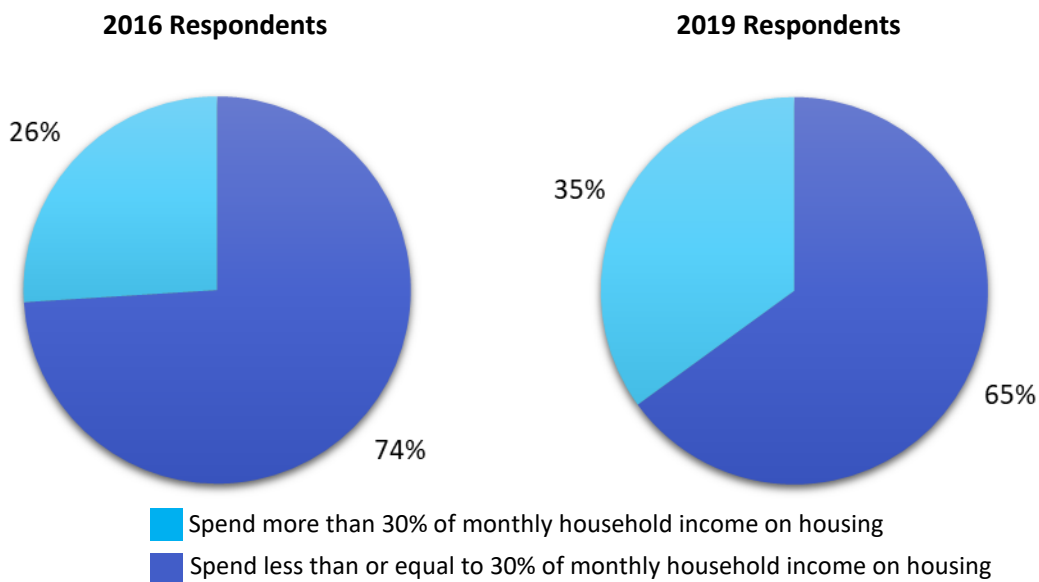
The percent of CNA respondents who have ever experienced homelessness continues to increase over time. Compared to all 2019 respondents:

- Women (47%) and Black respondents (62%) were more likely to have experienced homelessness.
- Hispanic respondents (24%) were less likely to have ever experienced homelessness.

**Respondents Who Have Ever Experienced Homelessness by CNA Survey Year**

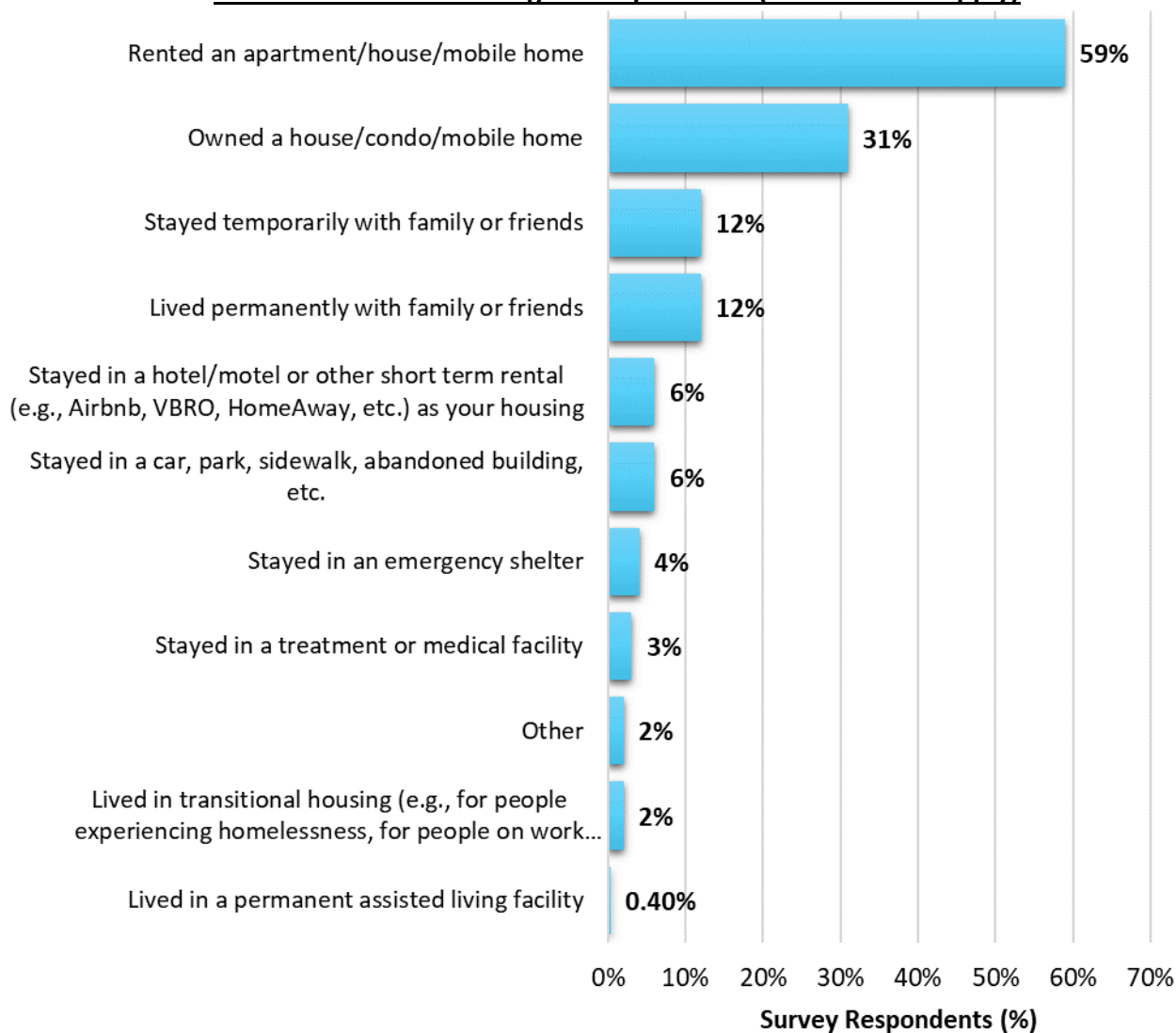


**Percent of Monthly Household Income Spent on Housing Among 2016 CNA (n=432) and 2019 CNA (n=555) Respondents**

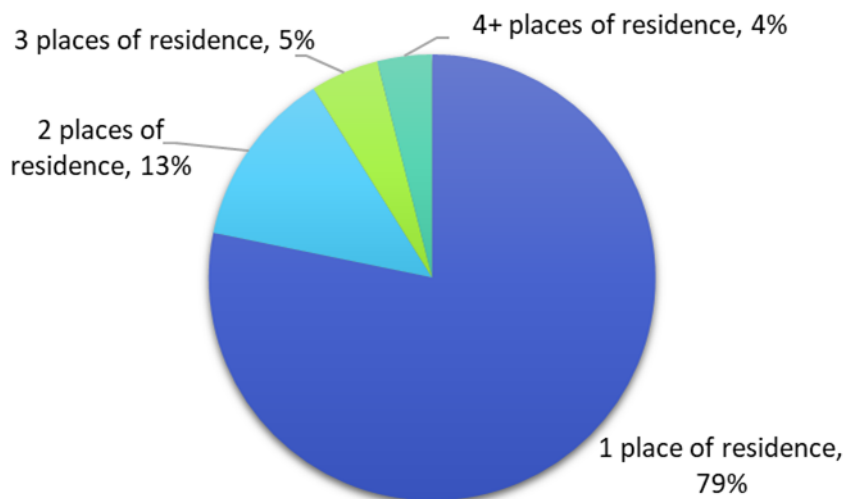


The percent of respondents who spent more than 30% of their monthly income towards housing increased from 26% in 2016 to 35% in 2019. Black respondents (44%) were more likely to spend more than 30% of their monthly income on housing compared to all 2019 respondents.

**Place of Residence Among All Respondents (select all that apply)**



**Respondents with Multiple Places of Residence**



The majority of respondents rented (31%) or owned (59%) their house/condo/apartment/mobile home.

Compared to all respondents, Black respondents were:

- Twice as likely to have stayed in a car, park, sidewalk, etc. (12%).
- Almost 4 times as likely to have stayed in an emergency shelter (14%).

The majority of respondents (79%) remained in the same residence over the past year. The remaining 21% stayed in multiple places of residence.

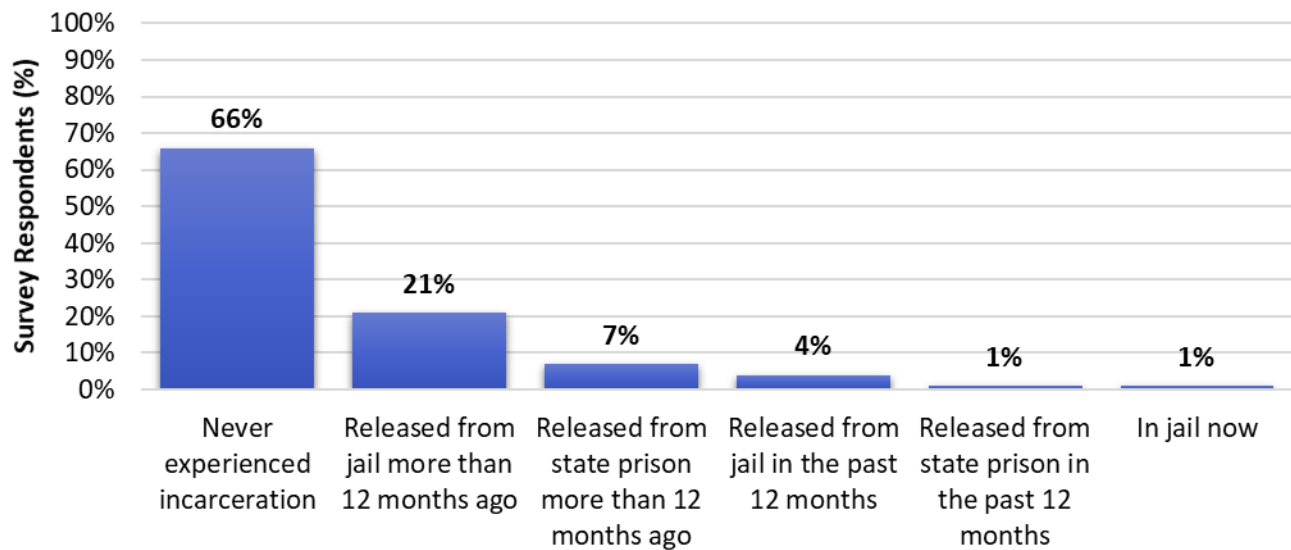


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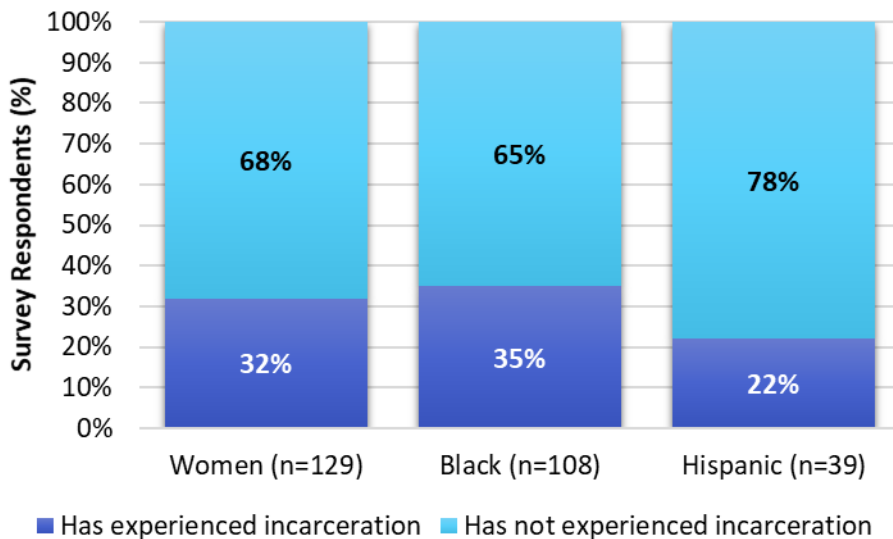
# INCARCERATION

In 2019, the Iowa Department of Public Health and the HIV & Hepatitis Community Planning Group conducted a Consumer Needs Assessment (CNA) survey among Iowans diagnosed and living with HIV. There were 555 respondents who completed the survey. Results were evaluated for disparities among specific populations. Identified disparities are noted.

### Incarceration Status Among All Respondents



### Incarceration Status Among Disproportionately Affected Populations



About two thirds of respondents (66%) had never experienced incarceration. Twenty-eight percent (28%) had been released from jail or prison more than 12 months ago, 5% had been released from jail or prison in the past 12 months, and only 1% were currently incarcerated.

Hispanic respondents (22%) were less likely to have experienced incarceration compared to all respondents (34%).

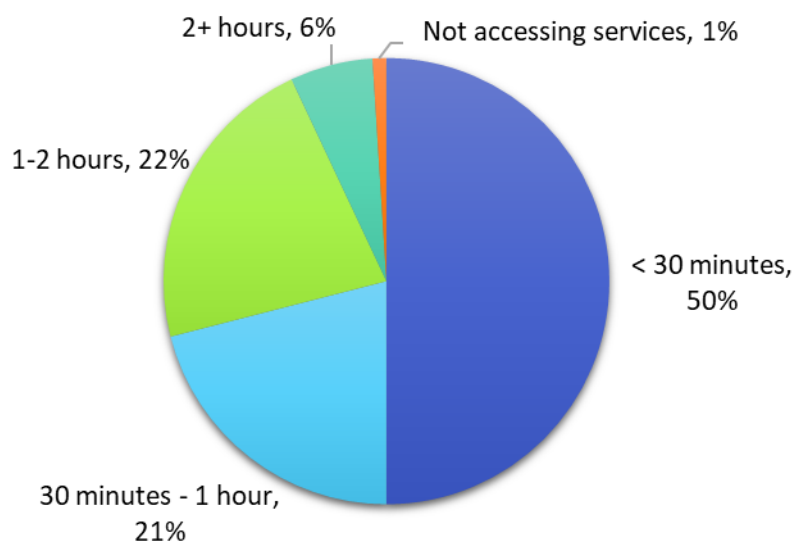




# TRANSPORTATION

In 2019, the Iowa Department of Public Health and the HIV & Hepatitis Community Planning Group conducted a Consumer Needs Assessment (CNA) survey among Iowans diagnosed and living with HIV. There were 555 respondents who completed the survey. Results were evaluated for disparities among specific populations. Identified disparities are noted.

### Travel Time (one way) to HIV Medical Care Among All Respondents

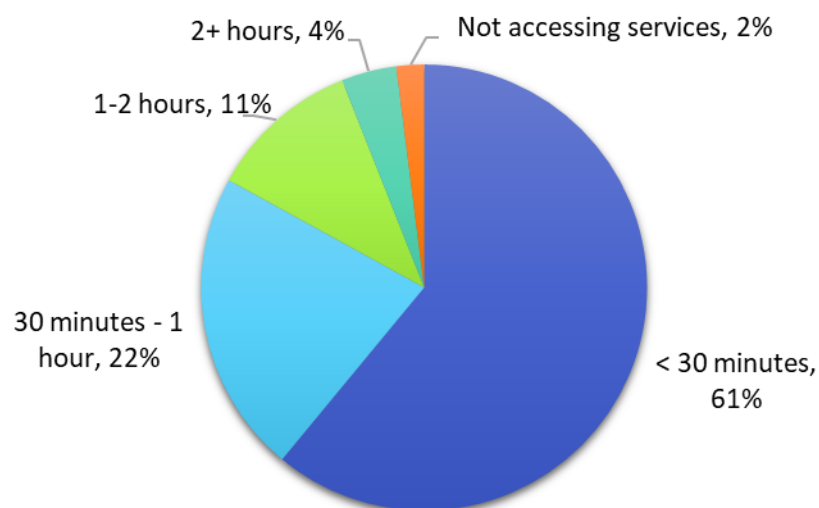


The percent of respondents who traveled more than 30 minutes to their medical care increased from 45% in 2016 to 50% in 2019.

Hispanic respondents (57%) were more likely to travel less than 30 minutes compared to all respondents (50%).

Note: Results from 2019 may be skewed due to the underrepresentation of respondents in and around Polk County.

### Travel Time (one-way) to Support Services Among All Respondents



The percentage of respondents who traveled less than 30 minutes to their support services increased from 53% in 2016 to 61% in 2019.

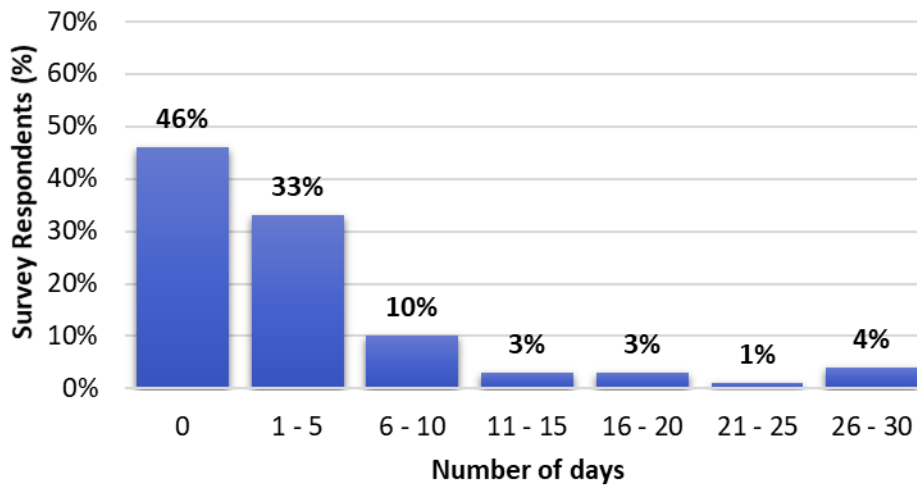
Black (56%) and Hispanic respondents (49%) were less likely to travel 30 minutes or fewer to support services compared to all respondents (61%).



# ALCOHOL USE

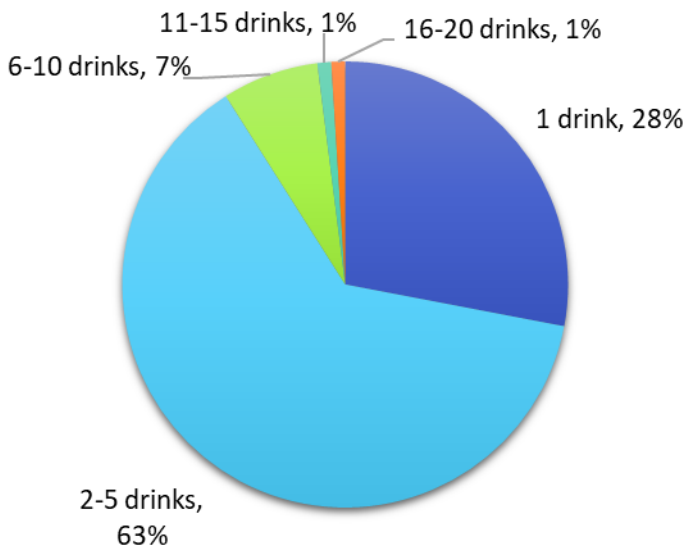
In 2019, the Iowa Department of Public Health and the HIV & Hepatitis Community Planning Group conducted a Consumer Needs Assessment (CNA) survey among Iowans diagnosed and living with HIV. There were 555 respondents who completed the survey. Results were evaluated for disparities among specific populations. Identified disparities are noted.

### Number of Days Respondents Drank Alcohol in the Last 30 Days



Just over half of respondents (54%) reported drinking alcohol in the past 30 days. Women (47%) were less likely to drink in the past 30 days compared to all respondents.

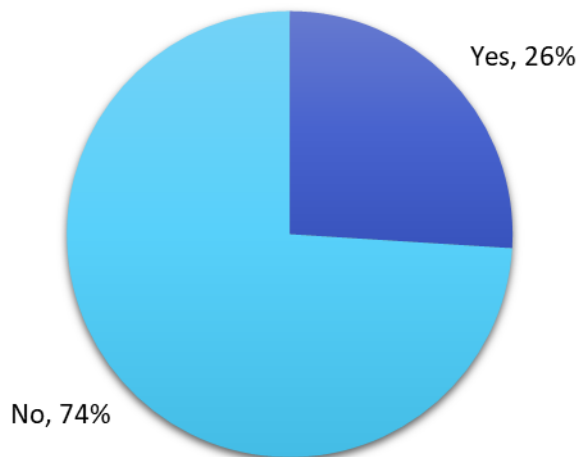
### Average Drinks per Day Among Respondents Who Drank (n=300)



The majority of respondents drank 5 drinks or less on the days that they drank (91%).

Women (82%) and Black respondents (79%) who drink were more likely to have more than one drink compared to all respondents (72%). Hispanic respondents (35%) were more likely to have only one drink compared to all respondents (28%).

**Respondents Who Engaged in Binge Drinking  
Over the Last 30 Days (n=300)**

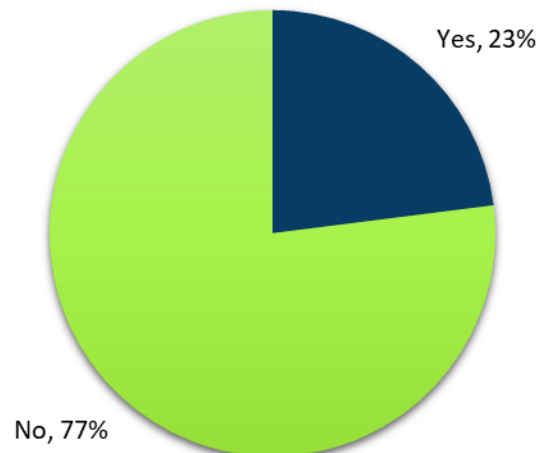


Binge drinking was defined as having more than 5 drinks if male, or more than 4 drinks if female, in one day over the last 30 days.

About one quarter of respondents (26%) reported engaging in binge drinking within the past 30 days.

Compared to all respondents, women (32%) were more likely to engage in binge drinking while Hispanic respondents (15%) were less likely to engage in binge drinking.

**Respondents Who Have Ever Wanted to Drink Less, or Someone Close to  
Them Has Asked Them to Drink Less (n=300)**



Twenty-three percent (23%) of respondents who drink reported wanting to drink less, or reported that someone close to them has asked them to drink less.

Compared to all respondents:

- Women (30%) were more likely to want to drink less, or to say that someone close to them has asked them to drink less.
- Hispanic respondents (15%) were less likely to want to drink less, or to say that someone close to them has asked them to drink less.

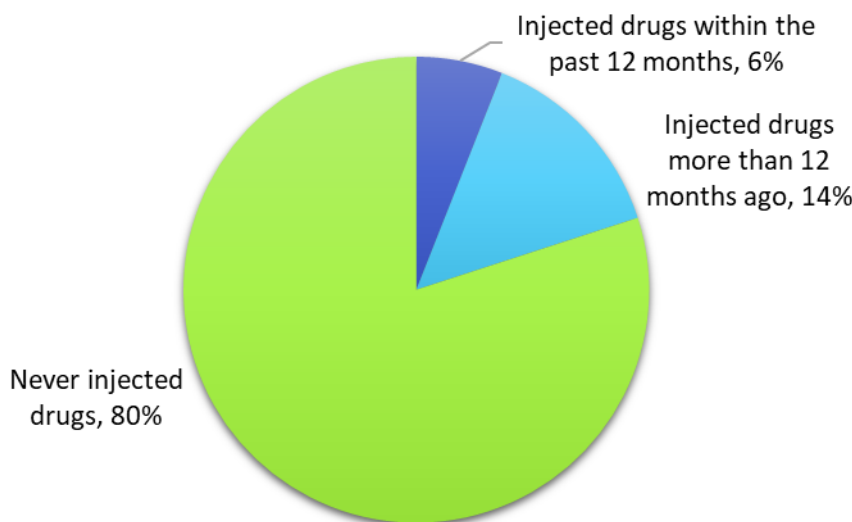


2019 Iowa Consumer Needs Assessment

**SUBSTANCE USE**

In 2019, the Iowa Department of Public Health and the HIV & Hepatitis Community Planning Group conducted a Consumer Needs Assessment (CNA) survey among Iowans diagnosed and living with HIV. There were 555 respondents who completed the survey. Results were evaluated for disparities among specific populations. Identified disparities are noted.

**Injection Drug Use Among All Respondents**



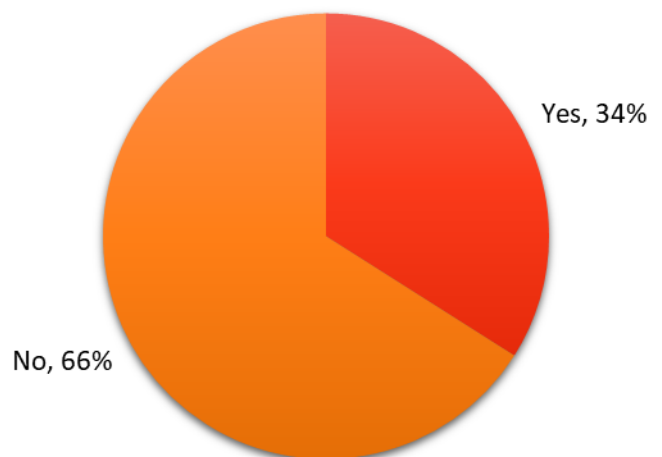
Twenty percent (20%) of respondents reported ever injecting drugs. Women (15%), Black (13%), and Hispanic respondents (11%) were less likely to have ever injected drugs compared to all respondents.

Women (3%), Black (2%) and Hispanic respondents (0%) were also less likely to have injected drugs within the past 12 months compared to all respondents (6%).

**Respondents Who Shared Needles, Works or Snorting Straws Within the Past 12 Months (n=32)**

Among respondents who injected drugs within the past 12 months, 34% shared needles, works or snorting straws.

No Hispanic respondents injected drugs within the past 12 months. No women (n=4) or Black respondents (n=2) who injected drugs within the past 12 months shared needles, works, or snorting straws.

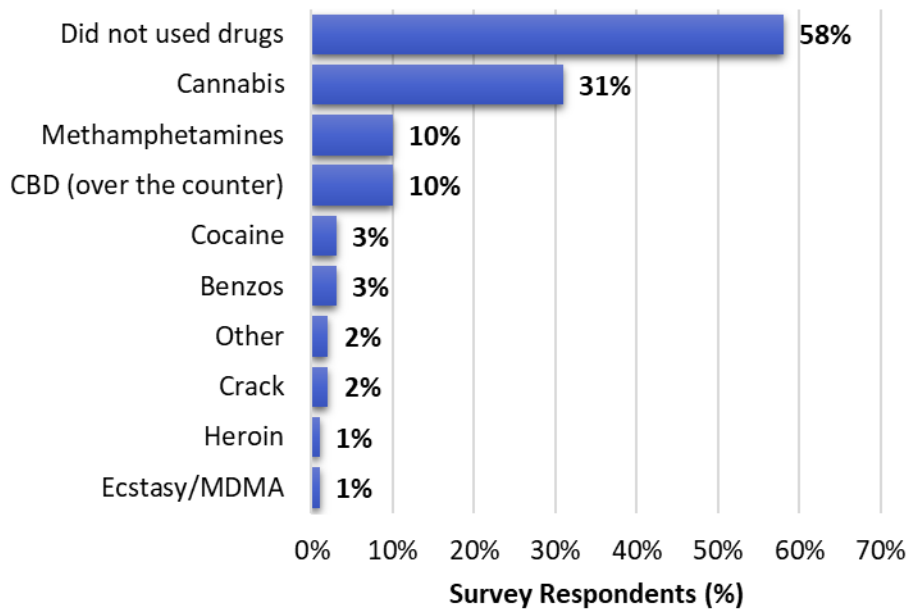


**Respondents Who Have a Convenient Place to Get New Needles (n=111)**

Half of respondents who have ever injected drugs reported having a convenient place to get new needles. Black (57%) and Hispanic respondents (75%) were more likely to have a convenient place to get new needles compared to all respondents.



**Drug Use In the Last 12 Months Among All Respondents**



Forty-two percent (42%) of all respondents reported using drugs within the past 12 months. Women (67%) and Hispanic respondents (76%) were less likely to have used drugs compared to all respondents.

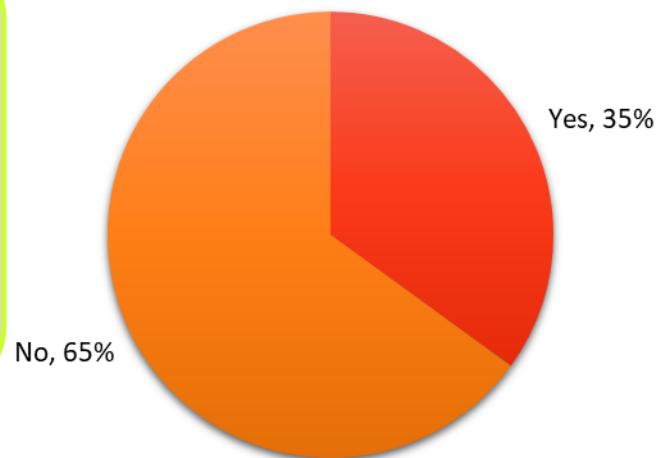
The percent of respondents who used Cannabis increased from 24% in 2016 to 31% in 2019.

Among respondents who used drugs within the past 12 months, 31% reported poly-substance use (i.e., using more than one drug).

Among respondents who used drugs within the past 12 months, 35% have wanted to stop, or someone close has asked them to stop using drugs. Compared to all respondents:

- Women respondents (44%) were more likely to want to stop, or someone close has asked them to stop using drugs.
- Hispanic respondents (22%) were less likely to want to stop, or someone close has asked them to stop using drugs.

**Respondents Who Have Ever Wanted to Stop Using Drugs, or Someone Close Has Asked Them to Stop Using Drugs (n=234)**



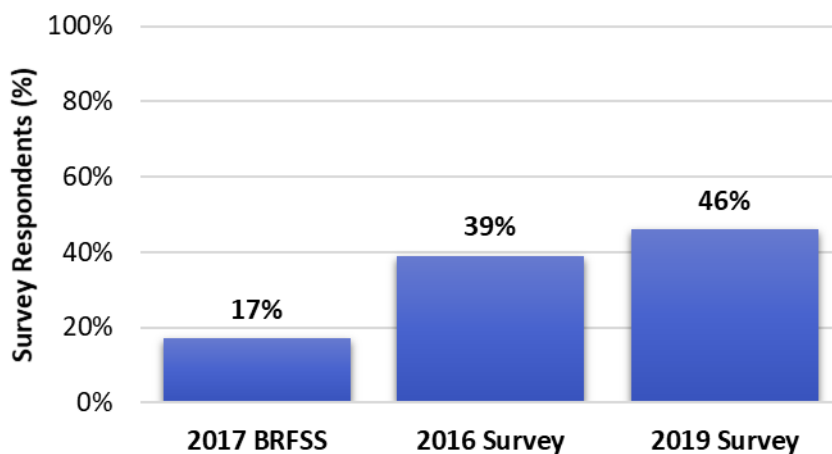




# TOBACCO USE

In 2019, the Iowa Department of Public Health and the HIV & Hepatitis Community Planning Group conducted a Consumer Needs Assessment (CNA) survey among Iowans diagnosed and living with HIV. There were 555 respondents who completed the survey. Results were evaluated for disparities among specific populations. Identified disparities are noted.

## Tobacco Use Within the Past 12 Months Among 2016 (n=432) and 2019 (n=555) CNA Respondents Compared to 2017 BRFSS Data (n=7,699)



Respondents reporting tobacco use within the past 12 months increased from 39% in 2016 to 46% in 2019.

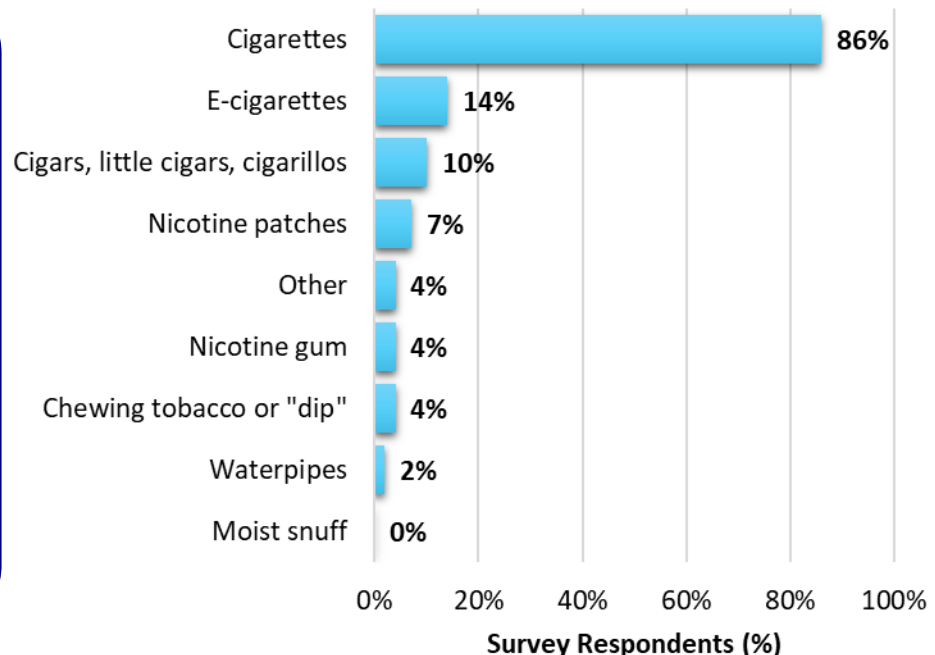
2019 respondents were more likely to use tobacco products (46%) compared to Iowa's general population (17%) as measured in the BRFSS.

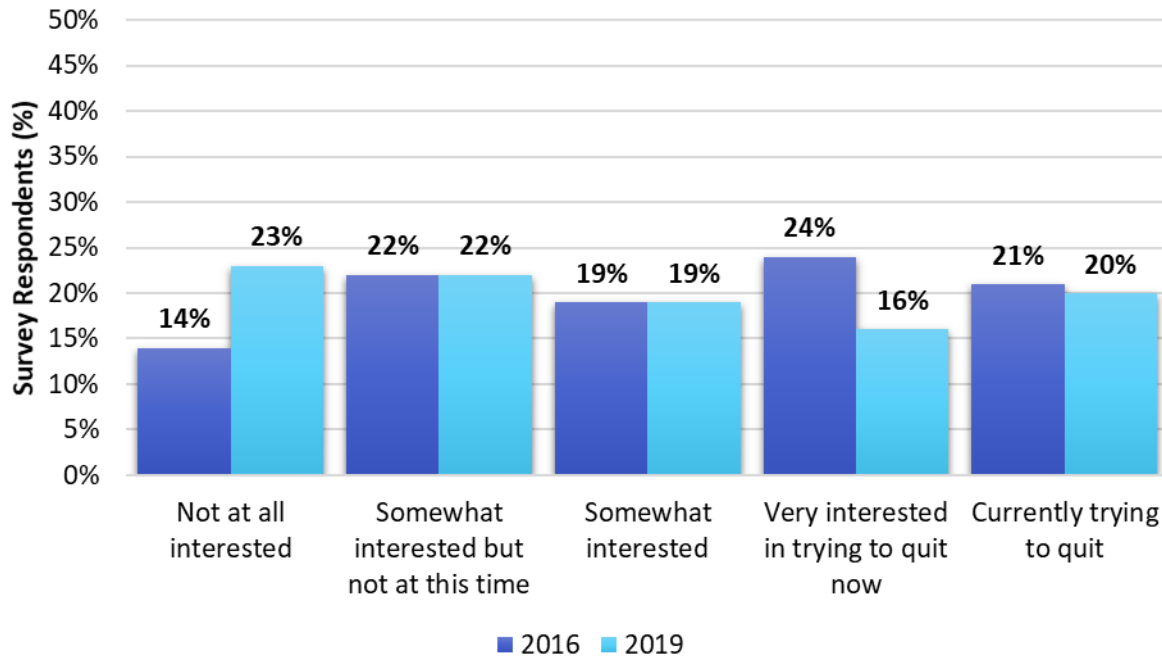
Hispanic respondents (19%) were less likely to use tobacco products compared to all respondents (46%).

Compared to all respondents:

- Women respondents (92%) were more likely, and Hispanic respondents (57%) were less likely, to smoke cigarettes.
- Hispanic respondents (43%) were more likely, and Black respondents (8%) were less likely, to use e-cigarettes.
- Women (12%) and Black respondents (18%) were more likely to use nicotine patches.

## Tobacco Products Used Within the Past 12 Months (n=256)



**Interest in Quitting Tobacco Use Among 2016 (n=170) and 2019 (n=256) CNA Respondents**

Respondents were less likely to be somewhat interested, very interested, or currently trying to quit tobacco use in 2019 (55%) compared to 2016 (64%). Compared to all 2019 respondents:

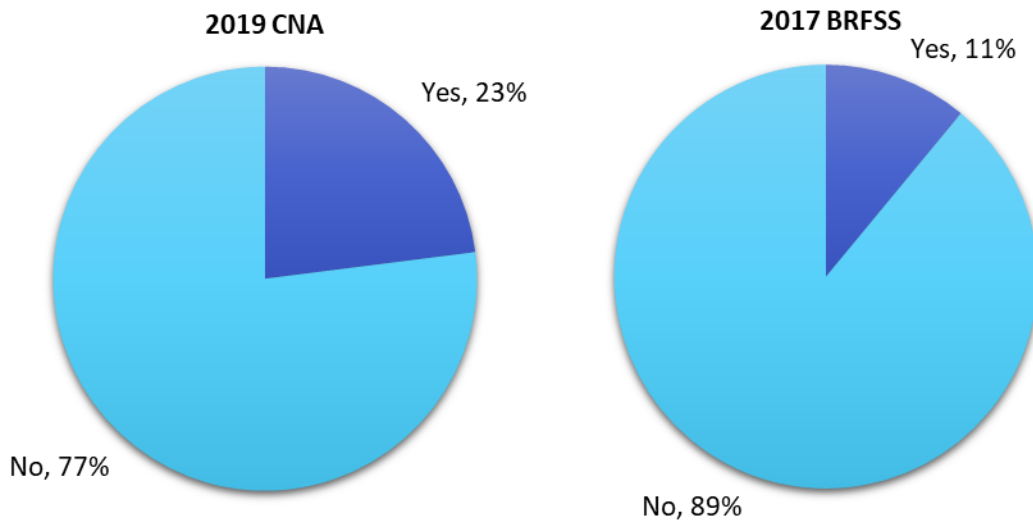
- Black (29%) and Hispanic respondents (29%) were more likely to be currently trying to quit.
- Women (25%) and Hispanic respondents (29%) were less likely to be somewhat or very interested in quitting tobacco (35% among all respondents).



# SERIOUS MENTAL ILLNESS

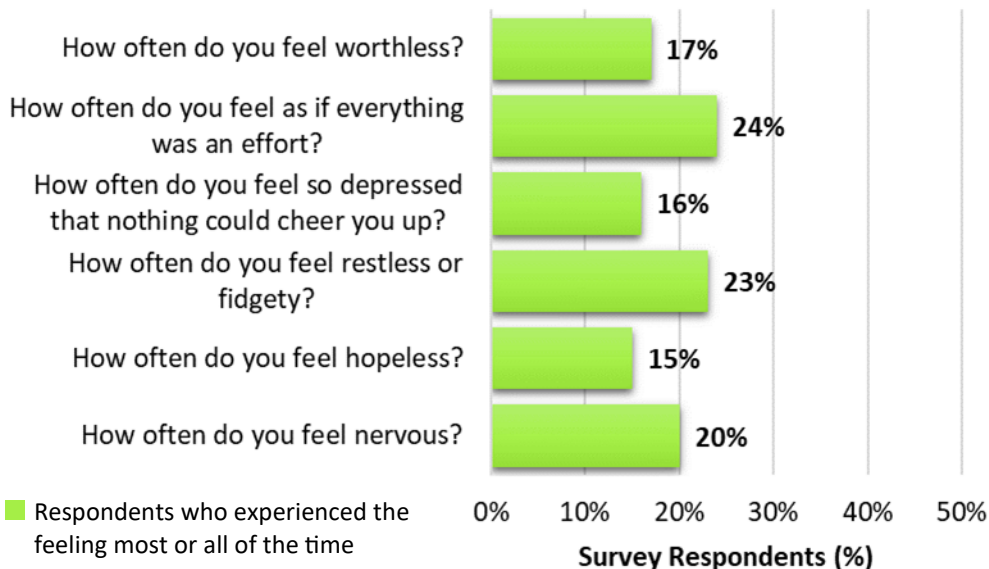
In 2019, the Iowa Department of Public Health and the HIV & Hepatitis Community Planning Group conducted a Consumer Needs Assessment (CNA) survey among Iowans diagnosed and living with HIV. There were 555 respondents who completed the survey. Results were evaluated for disparities among specific populations. Identified disparities are noted.

## Serious Mental Illness Among All Respondents (n=555) Compared to 2017 BRFSS Data (n=7,699)

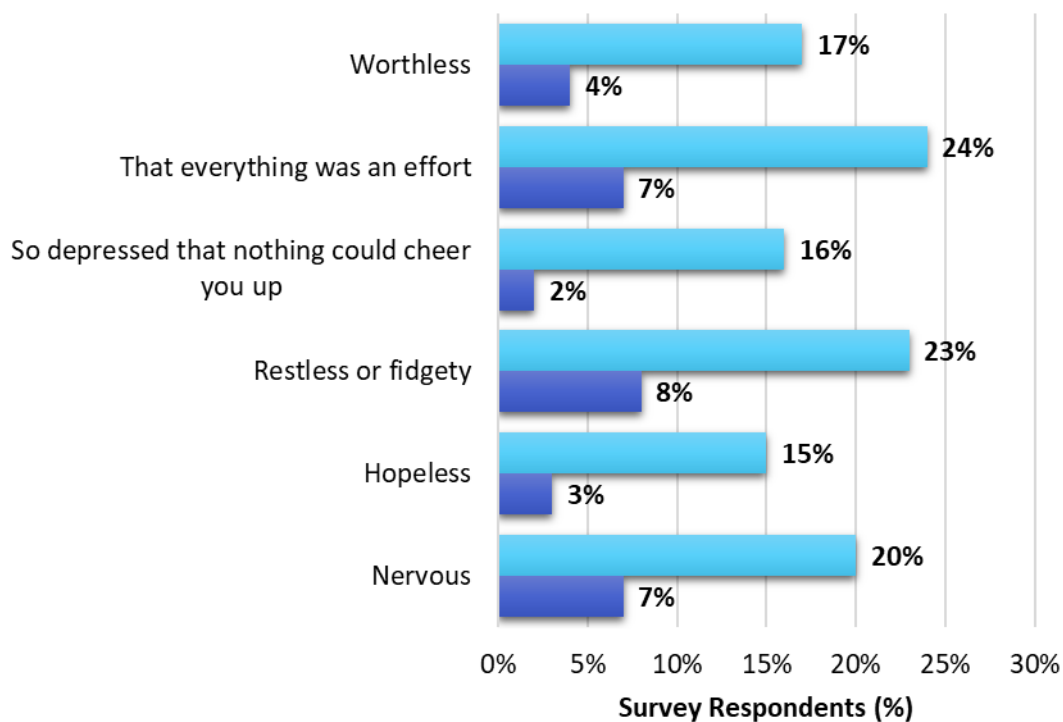


In 2019, 23% of respondents experienced serious mental illness compared to only 11% of Iowa’s general population (measured in BRFSS data). Compared to all respondents, women (33%) and Black respondents (29%) were more likely to experience serious mental illness. Hispanic respondents (11%) were less likely to experience serious mental illness.

## Mental Health Among All Respondents



Women and Black respondents were more likely, and Hispanic respondents were less likely, to experience each mental health question on the survey most or all of the time compared to all respondents.

**Mental Health Among All 2019 CNA Respondents (n=555) Compared to 2018 BRFSS Data (n=9,127)**

- 2019 CNA respondents who experienced the feeling most or all of the time
- 2018 BRFSS respondents who experienced the feeling most or all of the time

Compared to 2018 BRFSS respondents (i.e., the general population of Iowa), 2019 CNA respondents were:

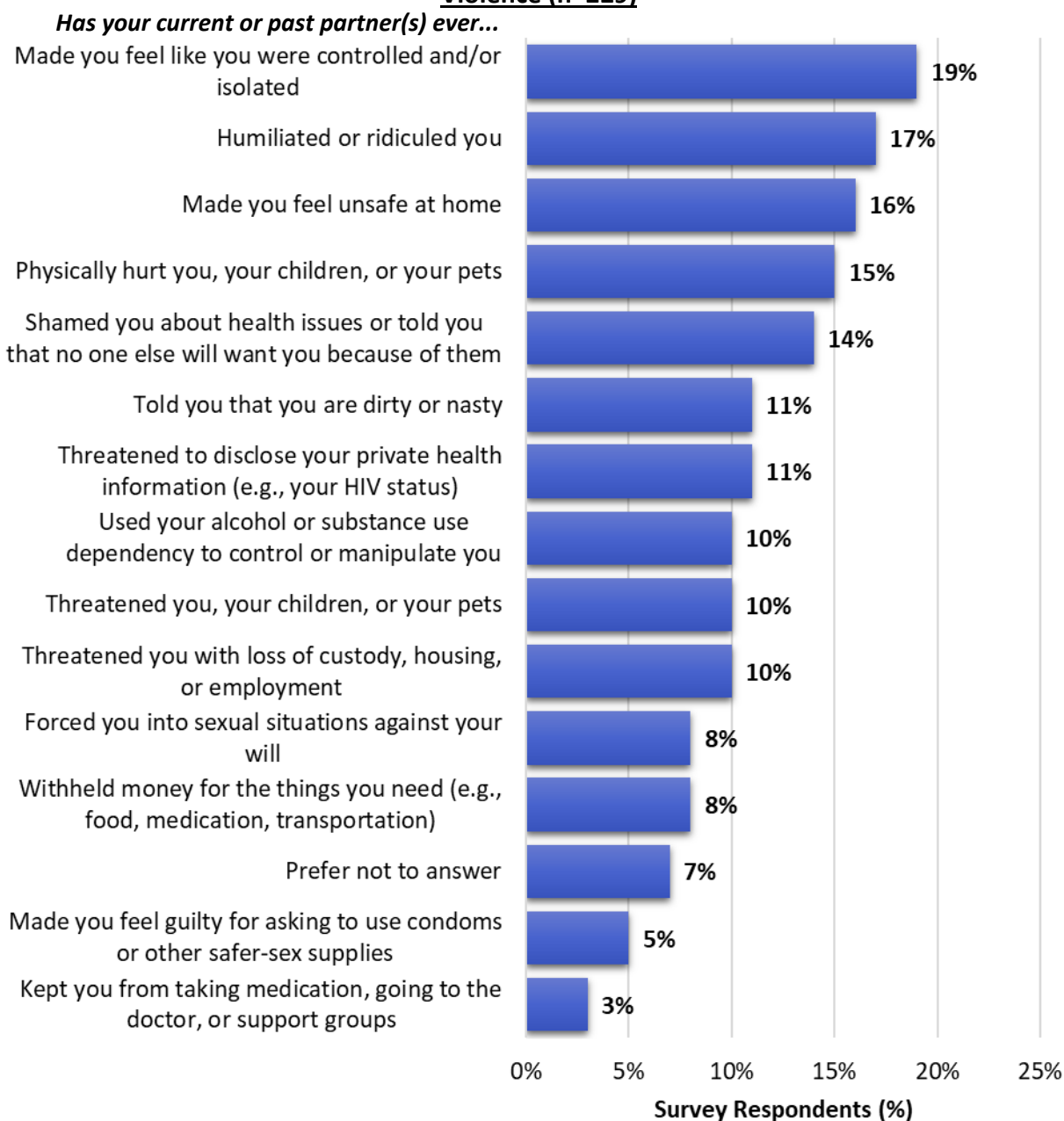
- **THREE TIMES** as likely to feel that everything was an effort; restless or fidgety; or nervous most of all of the time.
- **FOUR TIMES** as likely to feel worthless most of all of the time.
- **FIVE TIMES** as likely to feel hopeless most of all of the time.
- **EIGHT TIMES** as likely to feel so depressed that nothing could cheer your up most of all of the time.



# INTIMATE PARTNER VIOLENCE

In 2019, the Iowa Department of Public Health and the HIV & Hepatitis Community Planning Group conducted a Consumer Needs Assessment (CNA) survey among Iowans diagnosed and living with HIV. There were 555 respondents who completed the survey. Results were evaluated for disparities among specific populations. Identified disparities are noted.

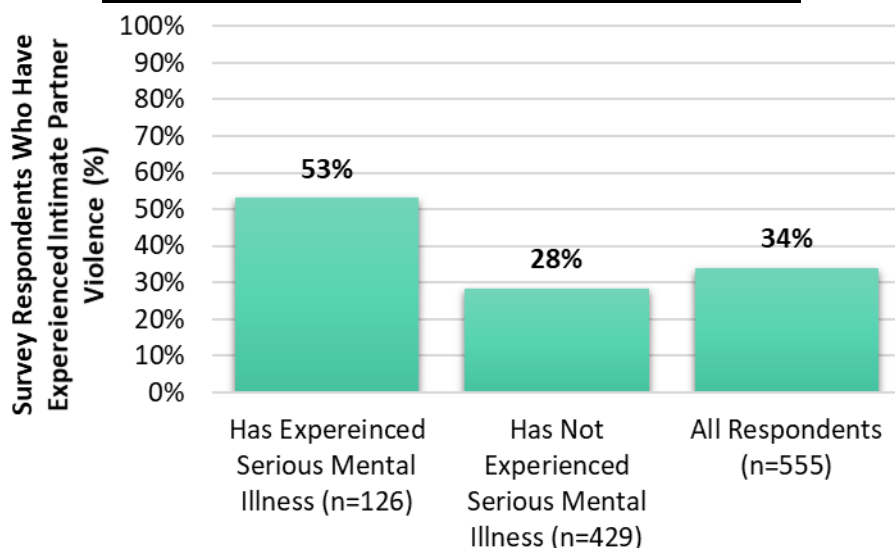
## Types of Abuse, Coercion, and Control Among Respondents Who Have Experienced Intimate Partner Violence (n=229)



Thirty-four percent (34%) of respondents reported experiencing intimate partner violence. Women respondents (43%) were more likely to have experienced intimate partner violence compared to all respondents.



**Intimate Partner Violence and Serious Mental Illness**



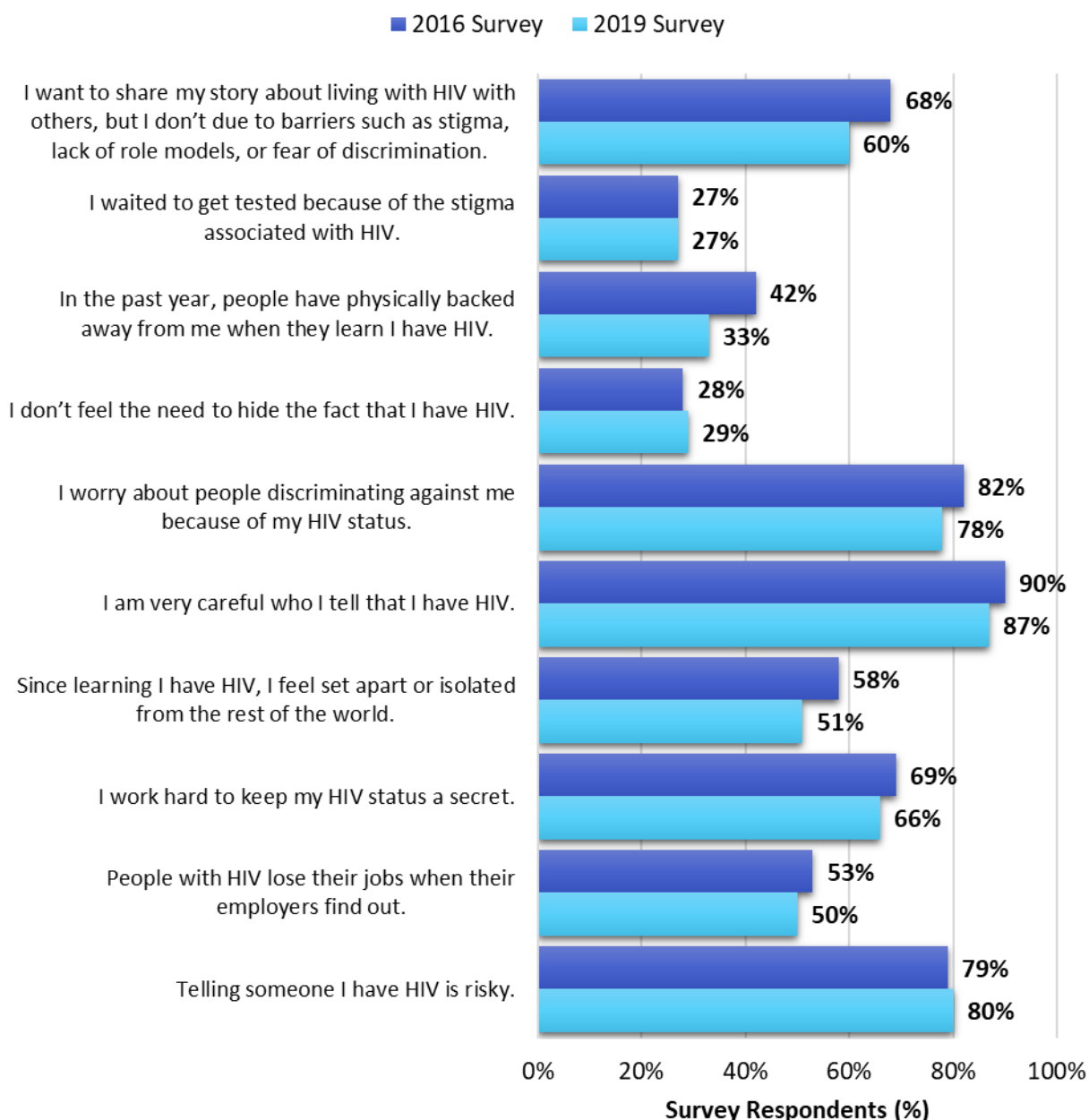
Fifty-three percent (53%) of respondents who have experienced serious mental illness have also experienced intimate partner violence.

This is greater than the percentage of respondents who have not experienced serious mental illness but have experienced intimate partner violence (28%) and the percentage of all respondents who have experienced intimate partner violence (34%).



In 2019, the Iowa Department of Public Health and the HIV & Hepatitis Community Planning Group conducted a Consumer Needs Assessment (CNA) survey among Iowans diagnosed and living with HIV. There were 555 respondents who completed the survey. Results were evaluated for disparities among specific populations. Identified disparities are noted.

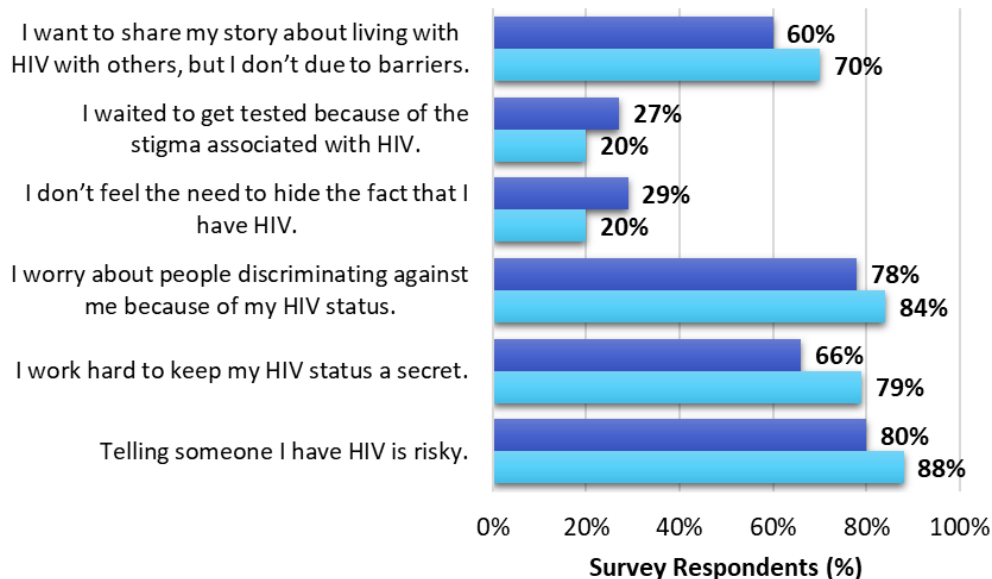
**HIV Stigma Among 2016 (n=432) and 2019 (n=555) CNA Respondents**



For the most part, respondents reported less stigma in the 2019 CNA than in the 2016 CNA. Some notable progress includes that 2019 respondents were less likely to worry about sharing their story, worry about discrimination due to their HIV status, have people physically back away from them, and feel set apart or isolated from the rest of the world.

**Disparities in HIV Stigma Among Women Respondents (n=129)**

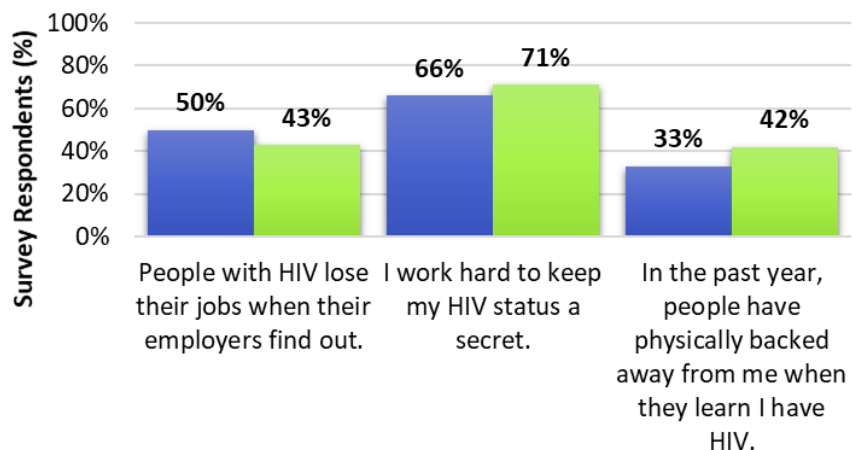
■ All Respondents ■ Women Respondents



In 5 out of the 10 questions, women respondents experienced more stigma compared to all respondents. However, women respondents (20%) were less likely to put off getting tested for HIV due to stigma compared to all respondents (27%).

**Disparities in HIV Stigma Among Black Respondents (n=108)**

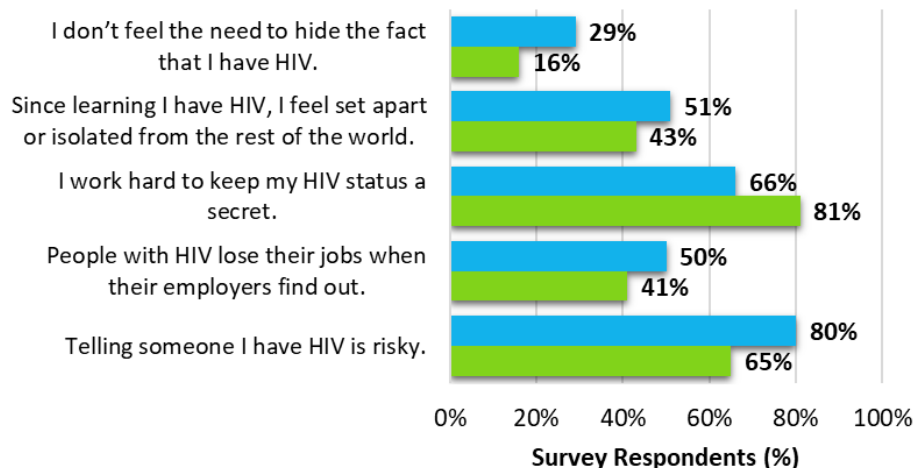
■ All Respondents ■ Black Respondents



Black respondents were more likely to work hard to keep their HIV status a secret (71%) and to have people physically back away from them (43%) compared to all respondents. However, Black respondents (43%) were less likely to report feeling that people with HIV lose their jobs when their employers find out compared to all respondents (50%).

**Disparities in HIV Stigma Among Hispanic Respondents (n=37)**

■ All Respondents ■ Hispanic Respondents



In 4 out of the 10 questions, Hispanic respondents experienced less stigma compared to all respondents. However, Hispanic respondents (81%) were more likely to work hard to keep their HIV status a secret compared to all respondents (66%).

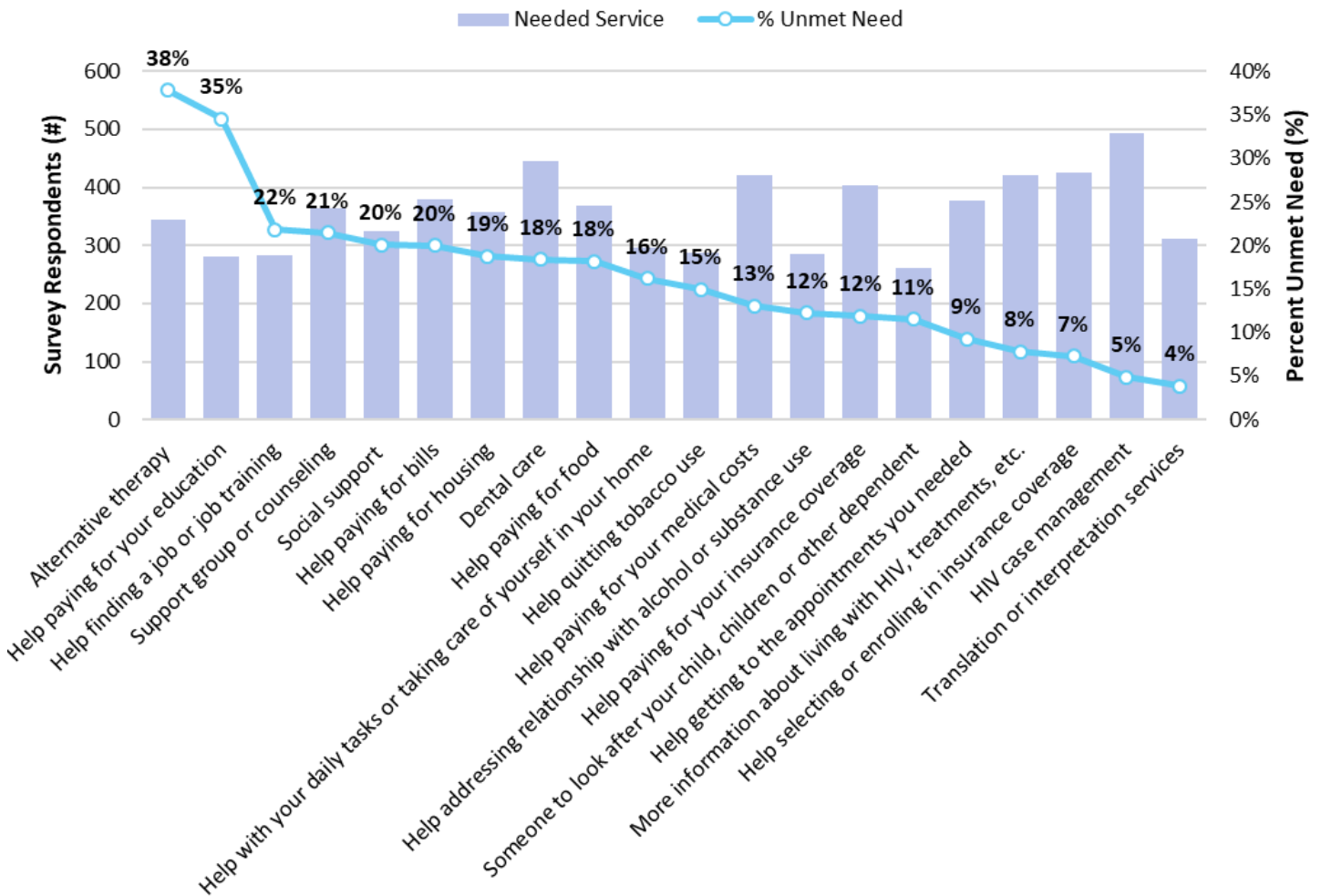


# SERVICE GAPS AND NEEDS

In 2019, the Iowa Department of Public Health and the HIV & Hepatitis Community Planning Group conducted a Consumer Needs Assessment (CNA) survey among Iowans diagnosed and living with HIV. There were 555 respondents who completed the survey. Results were evaluated for disparities among specific populations. Identified disparities are noted.

## Service Needs Among All Respondents

The purple bars represent the number of respondents who needed each service. The blue line represents the percent unmet need for each service (i.e., percent who wanted or needed the service but were unable to get it).



Among all services, HIV case management was the most wanted or needed (89%), and 95% of respondents who needed it were able to access it. Childcare during appointments was the least wanted or needed service (47%), and 89% of respondents who needed it were able to access it.

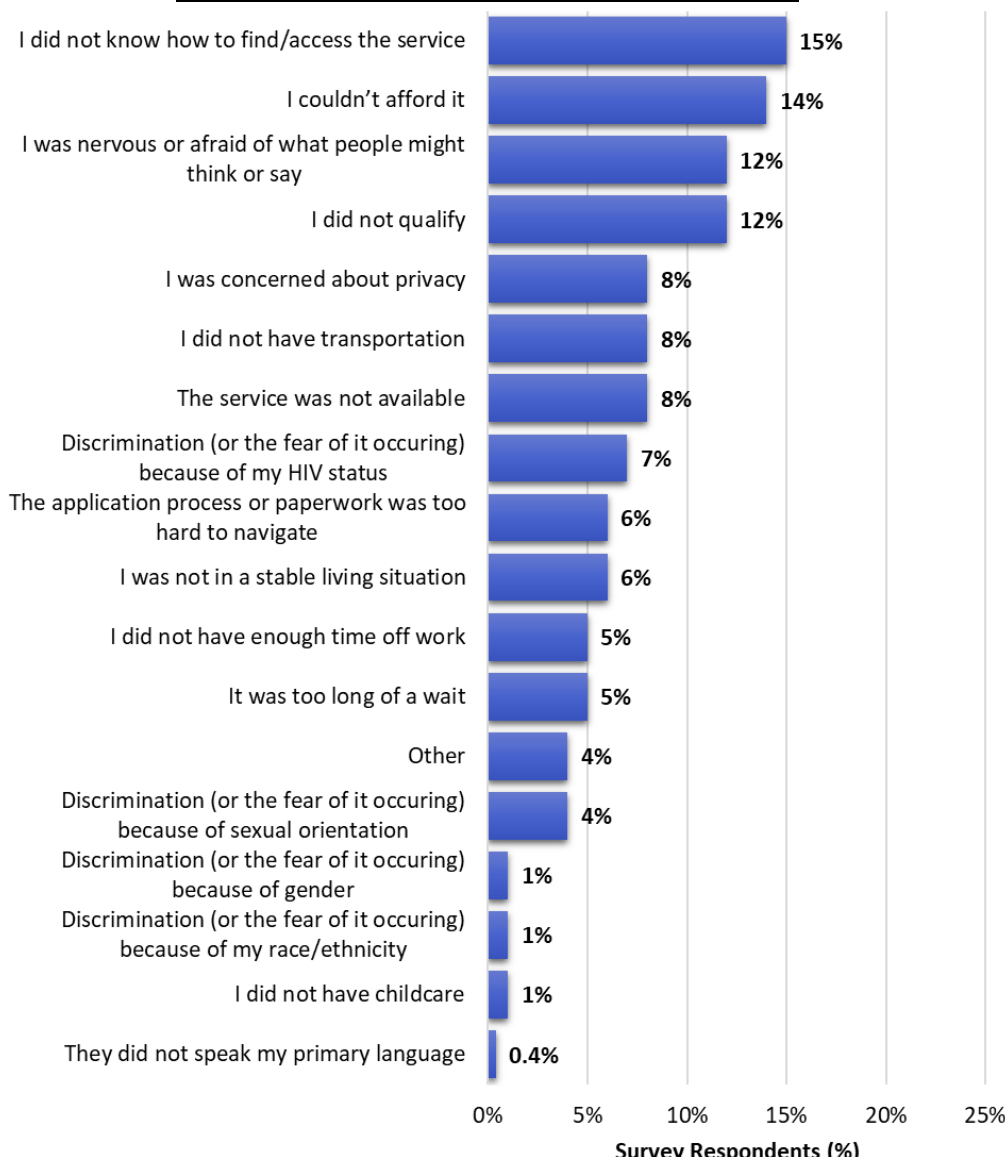
The percent of met need ranged from 62% to 96%. The top 5 services with the **lowest** met need were:

- Alternative therapy (62% met need)
- Help paying for education or to go back to school (65% met need)
- Help finding a job or job training (78% met need)
- Support group or counseling (79% met need)
- Social support from community, religious, hobbies, or volunteer group (80% met need)

The top 5 services with the **highest** met need were:

- Translation or interpretation services (96% met need)
- HIV case management (95% met need)
- Help selecting or enrolling in insurance coverage (93% met need)
- More information about living with HIV, treatments, or available support (92%)
- Help getting to the appointments you needed (91%)

**Barriers to All Services Among All Respondents**



The percent of respondents who experienced barriers to services decreased between 2016 and 2019 among all barriers. The largest decrease was seen with, “The application process or paperwork was too hard to navigate,” which had a 22 percentage point decrease (28% to 6%).

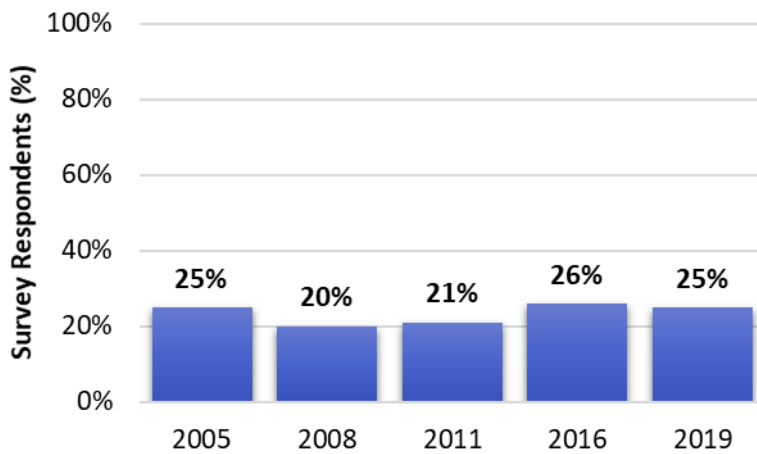




# MEDICAL CARE

In 2019, the Iowa Department of Public Health and the HIV & Hepatitis Community Planning Group conducted a Consumer Needs Assessment (CNA) survey among Iowans diagnosed and living with HIV. There were 555 respondents who completed the survey. Results were evaluated for disparities among specific populations. Identified disparities are noted.

### Respondents Who Did Not Receive HIV Medical Care for One or More Years by CNA Year



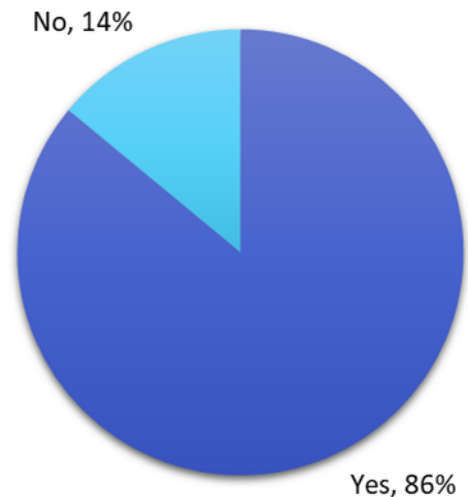
In 2019, 25% of respondents reported being out of medical care for at least one year. Compared to all respondents:

- Women respondents (18%) were less likely to have been out of care.
- Black (31%) and Hispanic respondents (32%) were more likely to have been out of care.

### Respondents Who Saw an HIV Medical Provider In the Past 12 Months



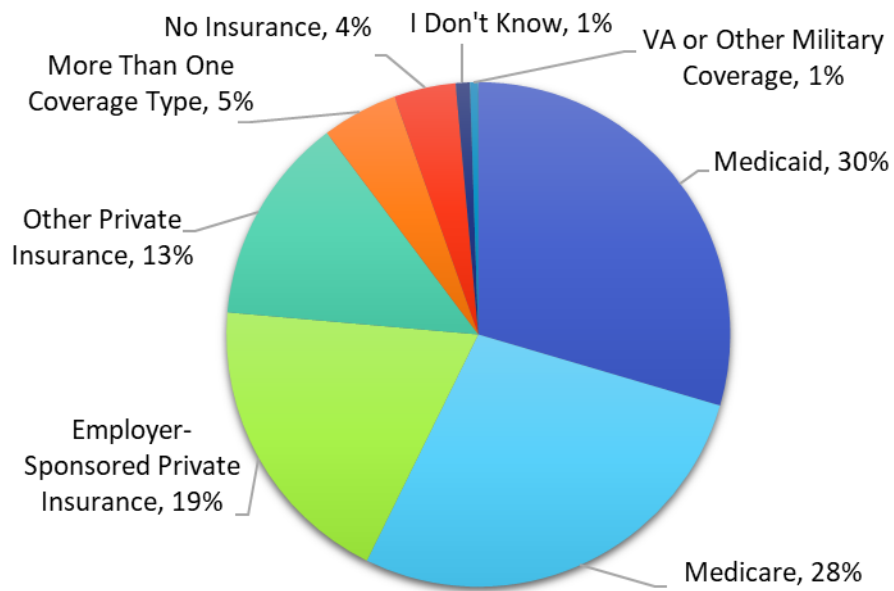
### Respondents Who Saw a Medical Provider For Other Health Care Needs In the Past 12 Months



Almost all respondents (97%) had seen an HIV medical provider in the past 12 months.

Eighty-six percent (86%) of all respondents saw a medical provider for other health care needs in the past 12 months. Women (91%) and Hispanic respondents (95%) were more likely to have seen a medical provider for other health care needs compared to all respondents.

### **Current Insurance Coverage Types Among All Respondents**



The majority of respondents had either Medicaid (30%) or Medicare (28%) as their health insurance payer. Compared to all respondents:

- Women (45%) and Black respondents (48%) were more likely to have Medicaid.
- Women (27%), Black (22%), and Hispanic respondents (16%) were less likely to have Medicare.
- Black respondents (13%) were less likely to have employer-sponsored insurance.
- Hispanic respondents (35%) were more likely to have other private insurance (e.g., ADAP-sponsored insurance, self-pay private insurance) or no insurance coverage (8%).

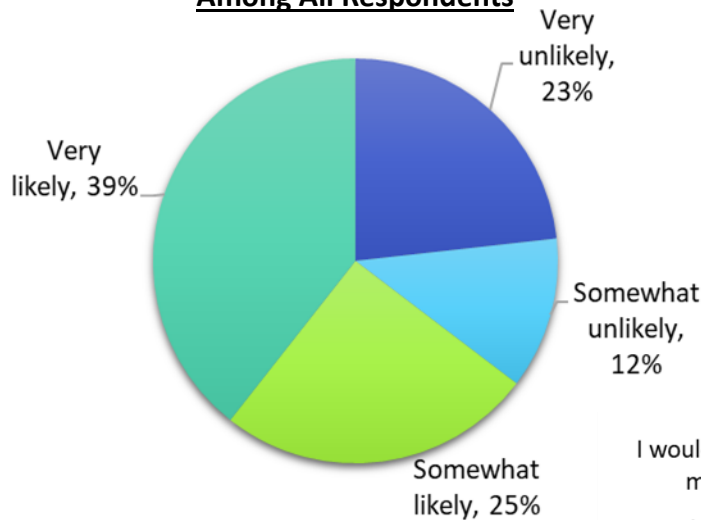


# HIV INJECTABLE MEDICATION

In 2019, the Iowa Department of Public Health and the HIV & Hepatitis Community Planning Group conducted a Consumer Needs Assessment (CNA) survey among Iowans diagnosed and living with HIV. There were 555 respondents who completed the survey. Results were evaluated for disparities among specific populations. Identified disparities are noted.

## Likelihood of Switching to the Injectable Medication

### Among All Respondents



Sixty-four percent (64%) of respondents were somewhat or very likely to switch to an injectable medication. Slightly fewer women (60%), Black (60%), and Hispanic (57%) respondents were somewhat or very likely to switch to an injectable medication.

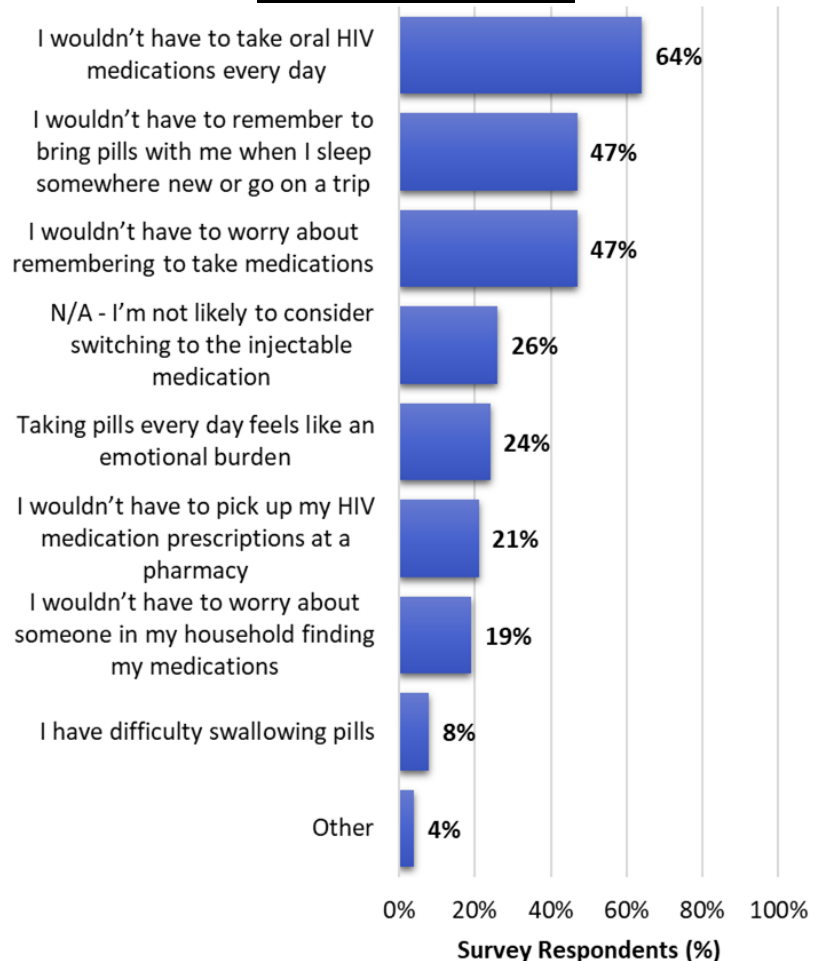
Respondents were most interested in switching to an injectable medication so they didn't have to take daily oral medications (64%). This was also the most popular response among women (62%), Black (56%), and Hispanic respondents (70%).

Other reasons why respondents would consider switching to the injectable medication include:

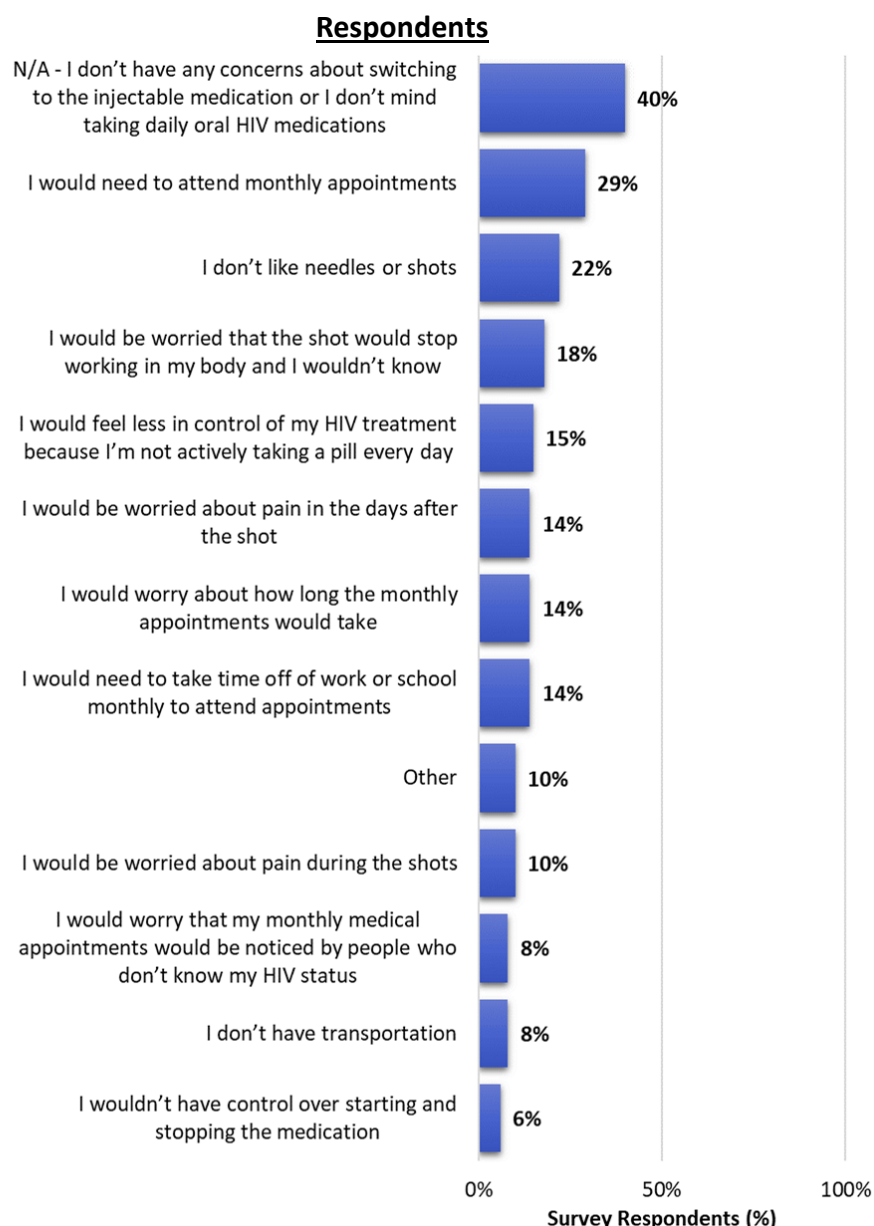
- If their HIV medical provider recommended it
- When taking pills, people ask unwanted questions
- Convenience and simplicity
- Wanting to play a part in the advancement of HIV treatment

## Reasons to Switch to an Injectable Medication

### Among All Respondents



**Reasons Not to Switch to an Injectable Medication Among All**



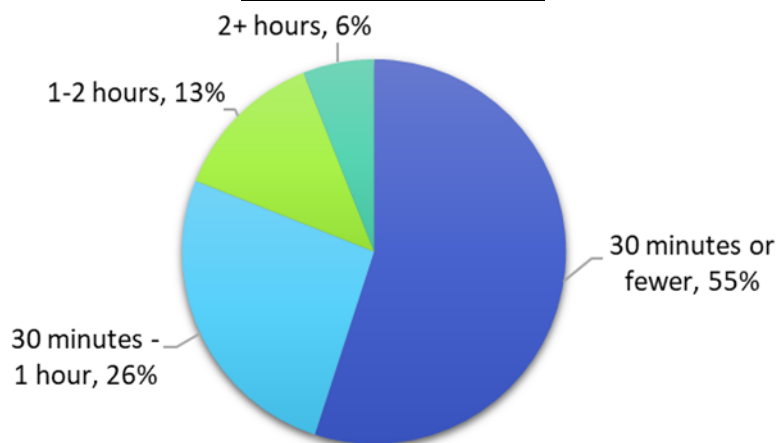
The majority of respondents had no concerns about switching to an injectable medication (40%). Among the concerns noted, the most frequent reason for not switching to an injectable medication was the need to attend monthly appointments to get the injection (29%). This was tied for the most popular reason among women respondents (22%) along with not liking needles or shots. The most popular reason among Black (23%) and Hispanic respondents (30%) was not liking needles or shots.

Other reasons not to switch to an injectable medication include:

- Wanting to see its effect on others first
- Satisfied with their current medication regimen
- Concerns about side effects
- Concerns about the time, distance and frequency of traveling to the doctor's office monthly and the costs associated with transportation

**Time Respondents Are Willing to Travel for the Monthly**

**Medical Appointments**



Just over half of respondents were only willing to travel 30 minutes or fewer to a monthly medical appointment (55%).

Black respondents (19%) were more likely to travel between 1 to 2 hours for an injectable medication compared to all respondents (13%).



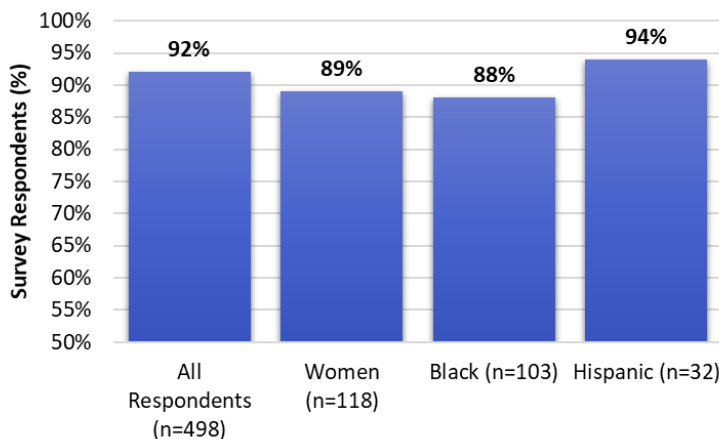
# VIRAL SUPPRESSION

In 2019, the Iowa Department of Public Health and the HIV & Hepatitis Community Planning Group conducted a Consumer Needs Assessment (CNA) survey among Iowans diagnosed and living with HIV. There were 555 respondents who completed the survey. Results were evaluated for disparities among specific populations. Identified disparities are noted.

Viral suppression data were available for the majority of clients (n=498) through the HIV Surveillance office at the IDPH. Viral load results were linked to CNA survey results through a secure mechanism. No identifying information was released through this process, maintaining survey respondents' confidentiality.

Viral suppression was measured as the percentage of respondents who had a viral load result <200 copies/mL at last test within one year of the survey close date (November 25, 2019). Viral suppression results may be skewed (i.e., greater than viral suppression statewide) due to the survey's distribution method. Surveys were distributed through the Ryan White (RW) Part B program, RW Part C clinics, and private HIV providers. This may have resulted in Iowans living with HIV who are in medical care being more likely to complete the survey.

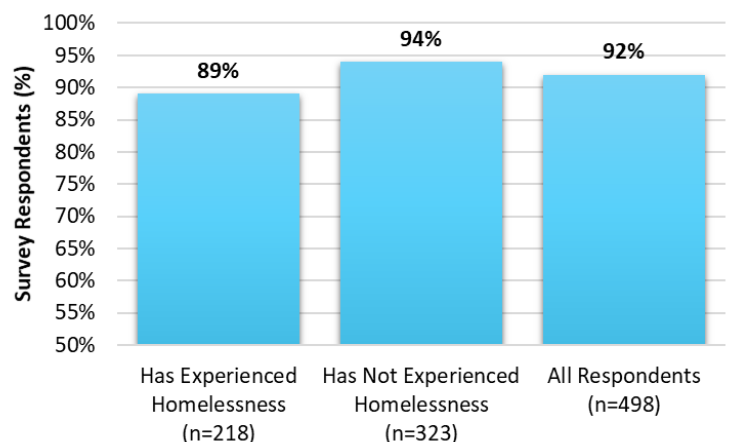
### Viral Suppression Among All Respondents



Almost all respondents (92%) were virally suppressed at last test. Women (89%) and Black respondents (88%) were less likely to be virally suppressed compared to all respondents. Hispanic respondents (94%) were more likely to be virally suppressed.

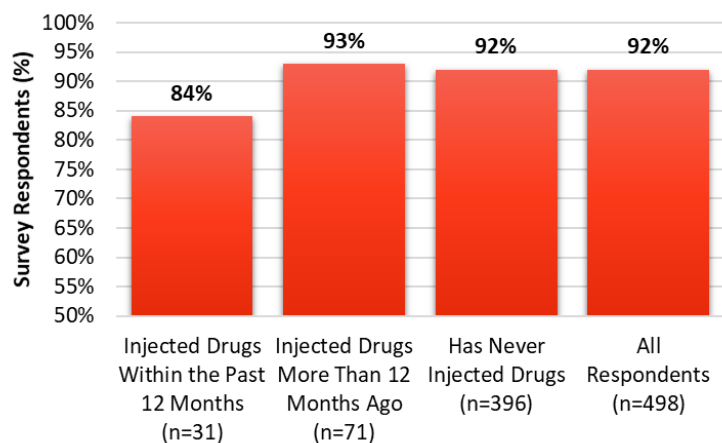
Only 89% of respondents who have ever experienced homelessness were virally suppressed compared to 94% of respondents who had never experienced homelessness.

### Viral Suppression and Homelessness



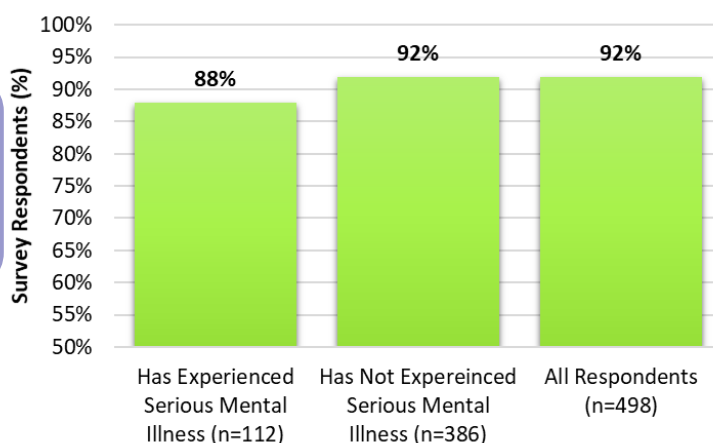


### Viral Suppression and Injection Drug Use



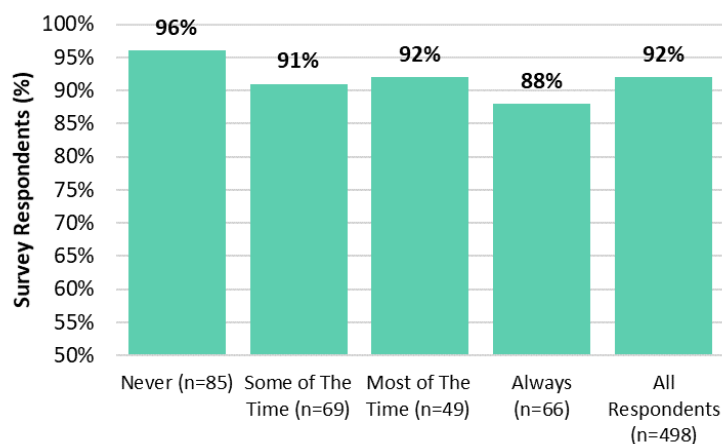
Respondents who injected drugs within the past 12 months were less likely to be virally suppressed at 84%. Respondents who injected drugs more than 12 months ago (93%) or have never injected drugs (92%), were equally as likely to be virally suppressed.

### Viral Suppression and Serious Mental Illness



Respondents who experience serious mental illness were less likely to be virally suppressed (88%) compared to those who were not experiencing serious mental illness (92%).

### Viral Suppression and Condom Use



Respondents who were sexually active within the past year and never used a condom were more likely to be virally suppressed (96%). Respondents who used a condom some or most of the time were equally as likely to be virally suppressed. Respondents who always used a condom were less likely to be virally suppressed at 88%.

Other populations less likely to be virally suppressed compared to all respondents include:

- Respondents whose incomes were <138% FPL (88%, n=235)
- Respondents who have ever wanted to stop using drugs (86%, n=77)
- Respondents who, because of bias towards their race or ethnicity, have felt left out of the decision-making process about their medical decisions (88%, n=155)
- Respondents diagnosed with HIV in an emergency room (86%, n=21)
- Respondents diagnosed with HIV at an HIV testing site (88%, n=32)

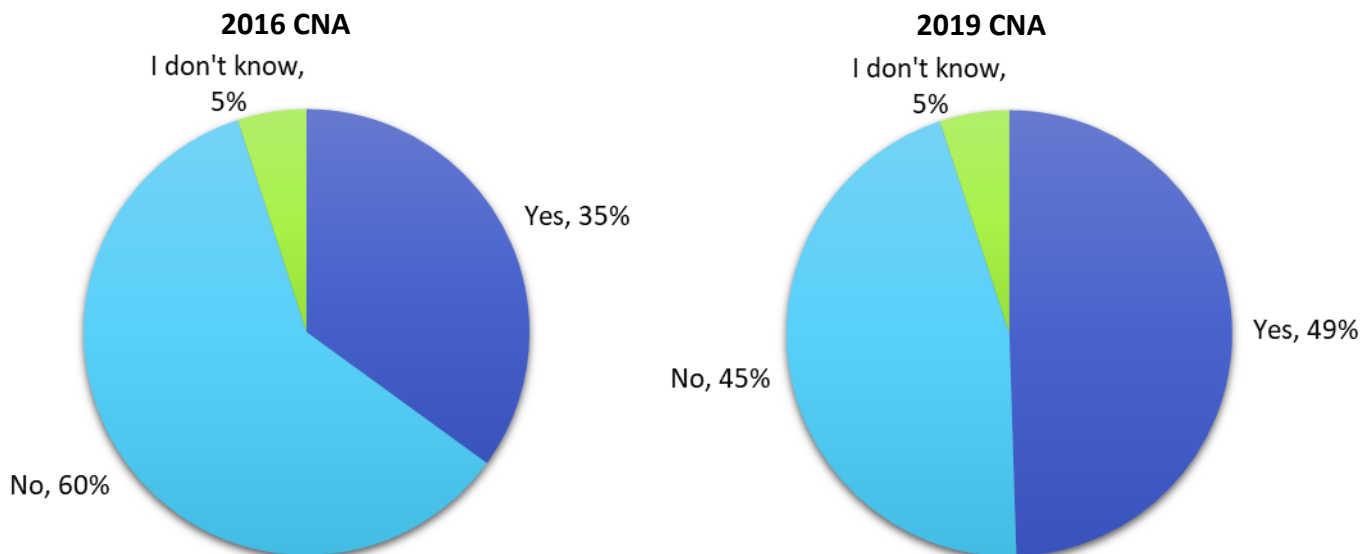


2019 Iowa Consumer Needs Assessment

SEXUALLY TRANSMITTED INFECTIONS (STIs)

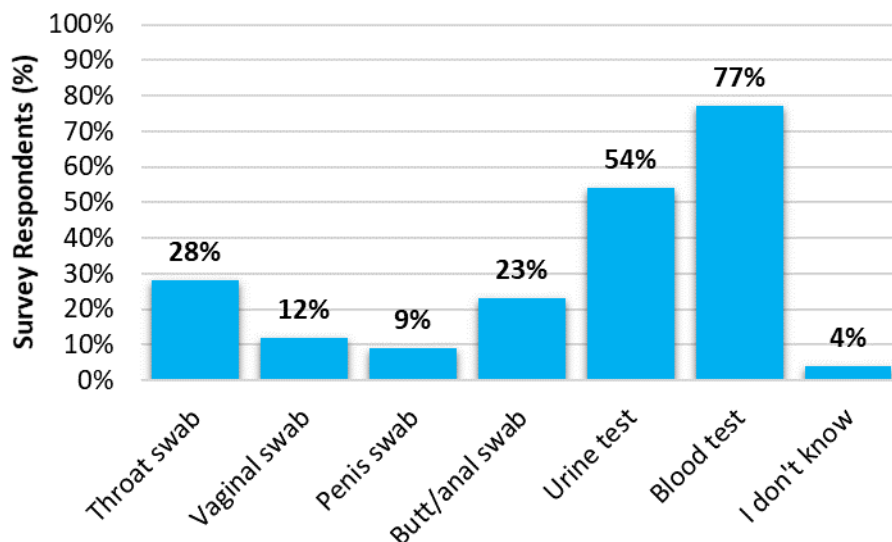
In 2019, the Iowa Department of Public Health and the HIV & Hepatitis Community Planning Group conducted a Consumer Needs Assessment (CNA) survey among Iowans diagnosed and living with HIV. There were 555 respondents who completed the survey. Results were evaluated for disparities among specific populations. Identified disparities are noted.

**Respondents Tested for an STI in the 2016 CNA (n=432) Compared to the 2019 CNA (n=555)**



The percent of respondents who were tested for an STI in the past 12 months increased from 35% in 2016 to 49% in 2019. Black (53%) and Hispanic respondents (57%) were more likely to be tested compared to all respondents. Women respondents (44%) were less likely to be tested.

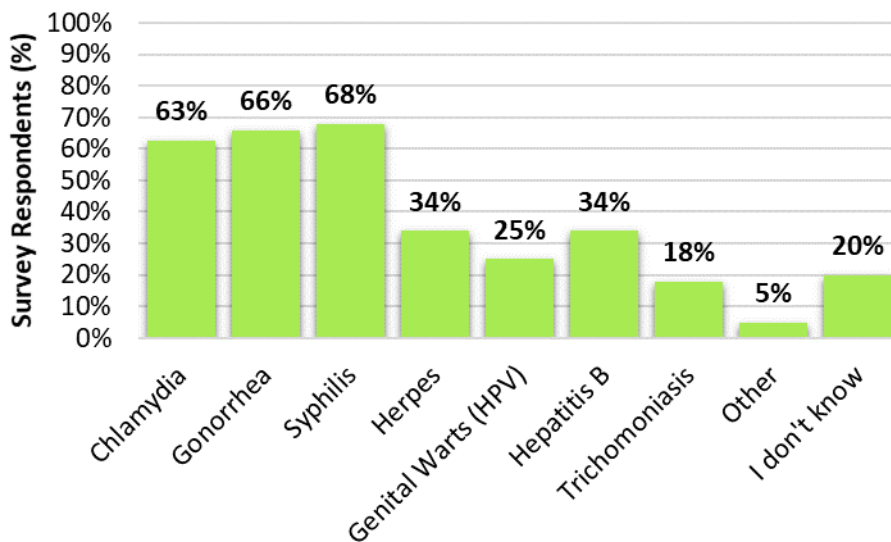
**Method of STI Testing (n=274)**



The majority of respondents were tested via a blood test (77%), followed by urine test (54%). Compared to all respondents:

- Women respondents (14%) were less likely to be tested via a throat swab.
- Women (4%), Black (19%), and Hispanic respondents (14%) were less likely to be tested via an anal swab.
- Women respondents (65%) were less likely, and Black (86%) and Hispanic respondents (81%) were more likely, to be tested via a blood test.

**Percentage of Respondents Tested for Specific STIs (n=274)**

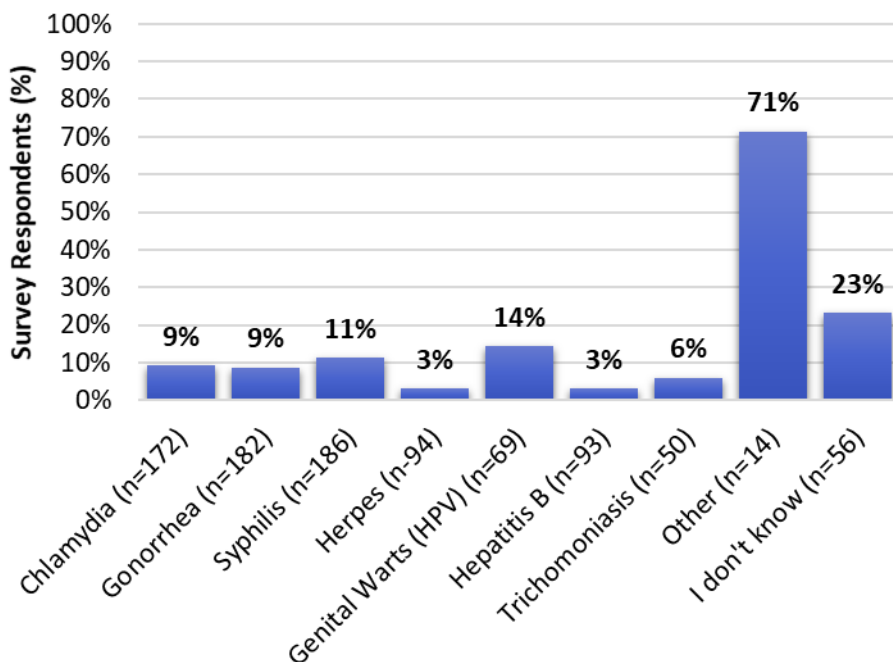


The greatest proportion of respondents were tested for syphilis (68%), followed closely by gonorrhea (66%) and chlamydia (63%). Compared to all respondents, women respondents were more likely to be tested for all STIs, with the exception of syphilis where they were equally as likely to be tested.

Compared to all respondents:

- Black respondents were more likely to be tested for all STIs, with the exception of gonorrhea and syphilis where they were equally as likely to be tested.
- Hispanic respondents were less likely to be tested for all STIs, with the exception of herpes where they were equally as likely to be tested.

**Percentage of Respondents Who Tested Positive for Each STIs**



Only 28% of respondents tested for STIs had positive results. The results displayed in the graph to the left represent the percentage of respondents tested for each STI that had a positive result (e.g., 9% of respondents tested for chlamydia had a positive result). Women respondents were less likely to test positive for chlamydia (2%), gonorrhea (2%) and syphilis (5%), and more likely to test positive for HPV (21%) and trichomoniasis (14%) compared to all respondents.

Forty-four percent (44%) of chlamydia and/or gonorrhea infections were located in the anus, 19% in the throat, 33% in the penis, and 7% in the vagina. Fifteen percent (15%) of respondents who tested positive for chlamydia and/or gonorrhea didn't know where their infections were located.

Seventeen percent (17%) of respondents had been vaccinated for HPV, 57% had not, 23% didn't know, and 2% were currently receiving the series.

Black respondents were more likely to test positive for chlamydia (13%), gonorrhea (19%), syphilis (29%), HPV (30%) and trichomoniasis (33%) compared to all respondents.

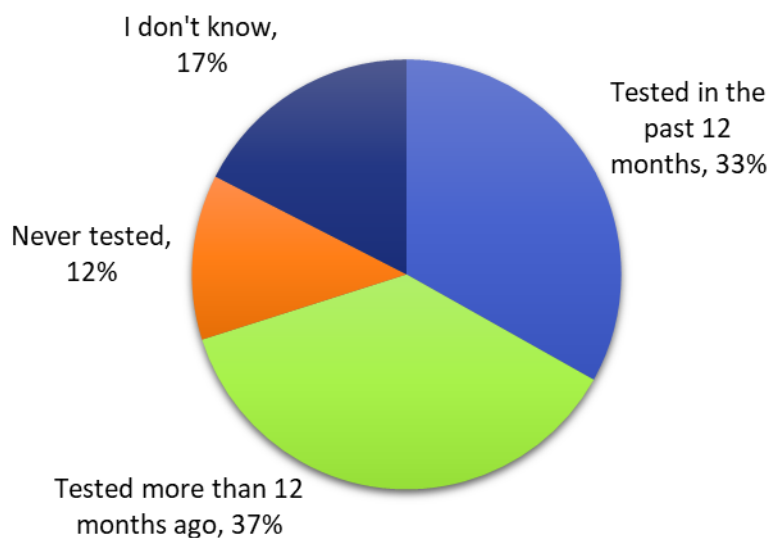
No Hispanic respondents tested positive for gonorrhea, herpes or trichomoniasis.



# HEPATITIS C

In 2019, the Iowa Department of Public Health and the HIV & Hepatitis Community Planning Group conducted a Consumer Needs Assessment (CNA) survey among Iowans diagnosed and living with HIV. There were 555 respondents who completed the survey. Results were evaluated for disparities among specific populations. Identified disparities are noted.

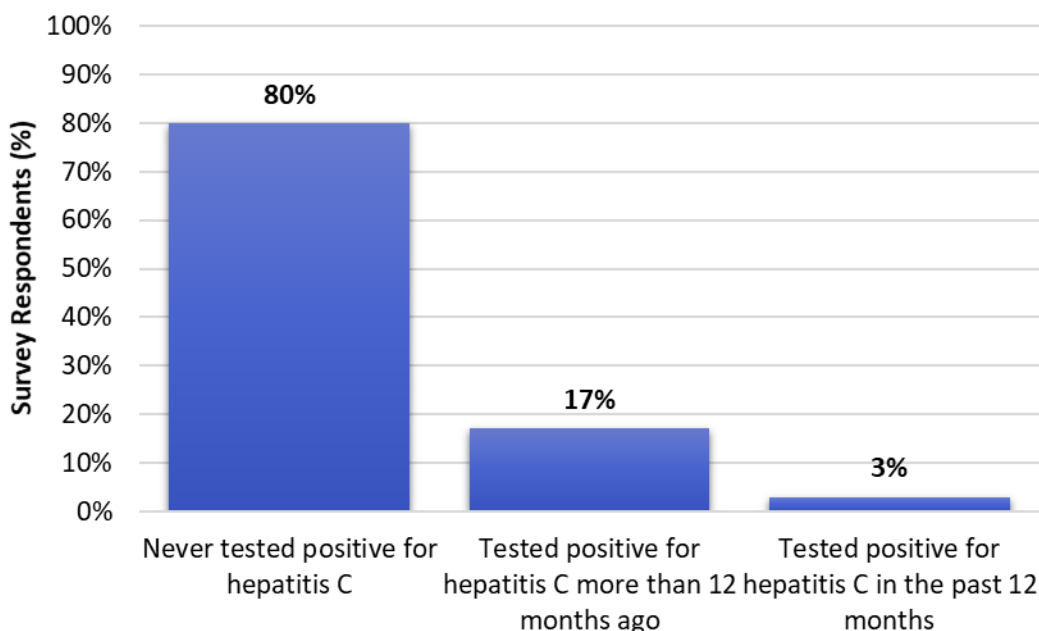
### Hepatitis C Testing Among All Respondents



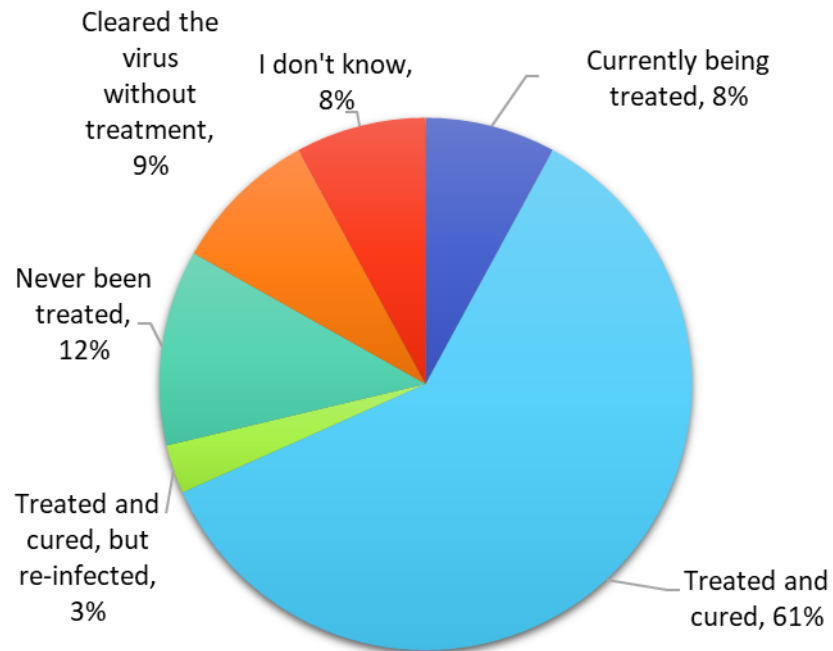
Eighty-eight percent (88%) of all respondents were tested for hepatitis C at some point in their lives. Women (76%), Black (81%), and Hispanic respondents (73%) were less likely to have ever been tested for hepatitis C.

Respondents who have ever injected drugs (44%) and respondents who injected drugs within the past 12 months (44%) were more likely to have been tested for hepatitis C in the past 12 months.

### Testing Results Among Respondents Ever Tested for Hepatitis C (n=389)



Among respondents who have ever been tested for hepatitis C, 20% have tested positive. Compared to all respondents, those who have ever inject drugs were twice as likely to have tested positive in the past 12 months (6%), and more than twice as likely to have tested positive 12 or more months ago (39%).

**Treatment For Hepatitis C Among Respondents Who Have Ever Tested Positive (n=76)**

Among all respondents who have ever tested positive for hepatitis C, 81% have ever been treated or have cleared the virus on their own. Women (76%) and Hispanic respondents (50%) were less likely to have ever been treated or clear the virus on their own compared to all respondents.

The majority of respondents who have ever tested positive for hepatitis C had been treated and cured (61%). Women (47%) and Hispanic respondents (50%) were less likely to have been treated and cured compared to all respondents. Black respondents (67%) were more likely to have been treated and cured.



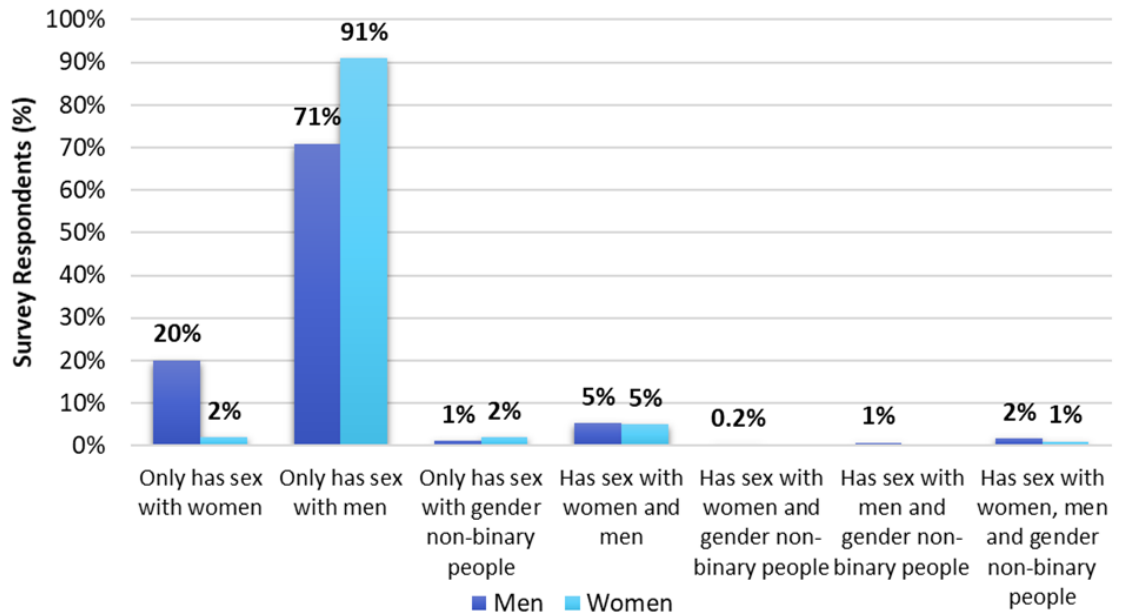


# SEXUAL PRACTICES

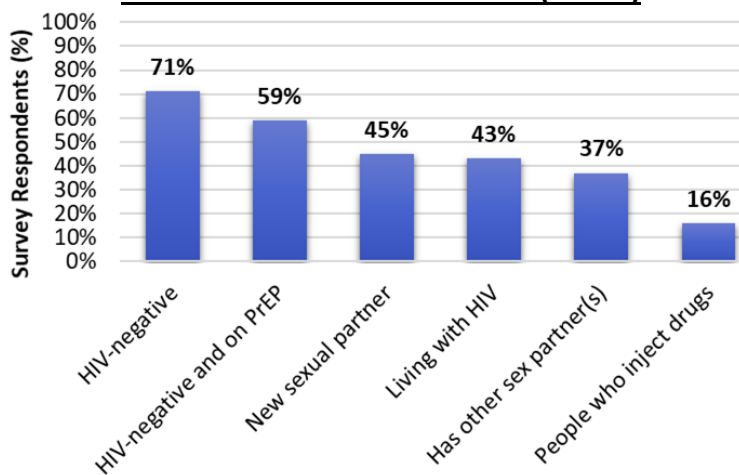
In 2019, the Iowa Department of Public Health and the HIV & Hepatitis Community Planning Group conducted a Consumer Needs Assessment (CNA) survey among Iowans diagnosed and living with HIV. There were 555 respondents who completed the survey. Results were evaluated for disparities among special populations. Identified disparities are noted.

## Partner Selection Among All Respondents

Among all respondents, 54% had vaginal or anal sex within the past 12 months. Among men, 71% preferred to only have sex with men and 20% preferred to only have sex with men and women. Among women, 91% preferred to only have sex with men.



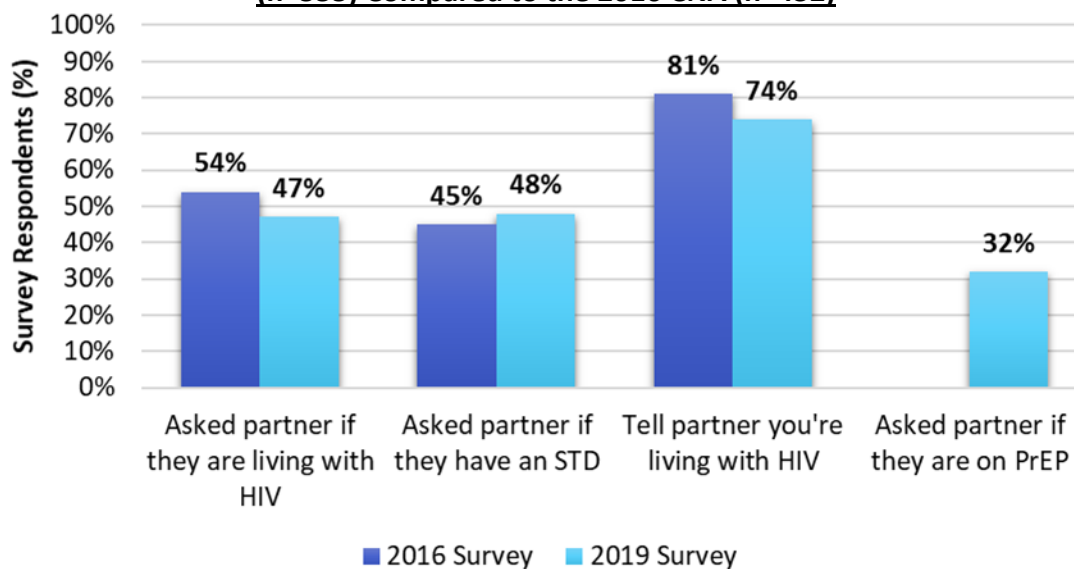
## Characteristics of Sexually Active Respondents' Sexual Partners in the Past 12 Months (n=299)



Respondents were most likely to have a partner who was HIV negative (71%) and least likely to have a partner who injects drugs (16%). Among respondents who had partners without HIV (n=82), 59% had partners who were on PrEP.

Compared to all respondents:

- Black respondents (56%) were less likely to have a partner without HIV.
- Women respondents (15%) were less likely to have a partner living with HIV.
- Women (6%), Black (5%), and Hispanic respondents (0%) were less likely to have a partner who injects drugs.
- Women (23%) and Black respondents (25%) were less likely, and Hispanic respondents (41%) were more likely, to have a new sexual partner.

**Sexual Health Conversations with Most Recent Sex Partner Among All Respondents****(n=555) Compared to the 2016 CNA (n=432)**

Thirty-two percent (32%) of respondents had asked their newest sexual partner if they were on PrEP. Women respondents (29%) were less likely, and Black (40%) and Hispanic respondents (41%) were more likely, to ask their newest sexual partner if they were on PrEP compared to all respondents.

There was a decrease in the percent of respondents who asked their partner if they were living with HIV between 2016 (54%) and 2019 (47%). Women respondents (41%) were less likely, and Hispanic respondents (59%) were more likely, to ask their partner if they were living with HIV compared to all respondents.

There was also a decrease in the percent of respondents who told their newest sexual partner they were living with HIV from 81% in 2016 to 74% in 2019.

There was a slight increase in the percent of respondents who asked their newest sexual partner if they had an STD between 2016 (45%) and 2019 (48%). Women (50%), Black (51%), and Hispanic respondents (54%) were more likely to ask their partner if they had an STD compared to all respondents.

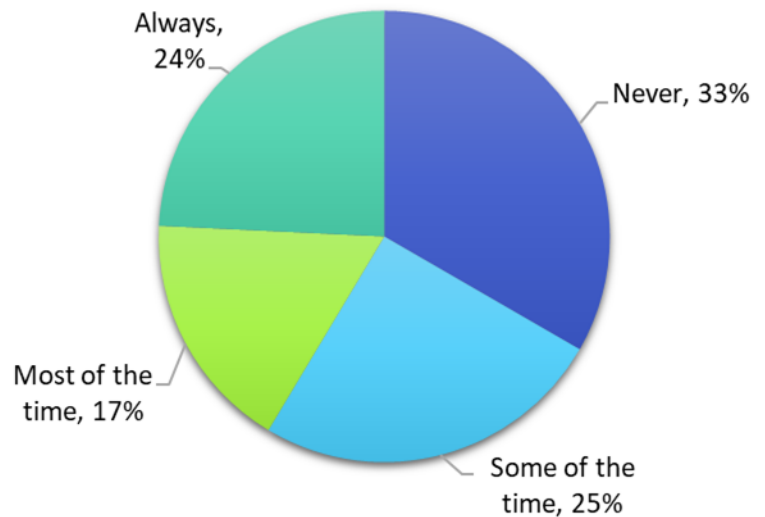


# CONDOM USE

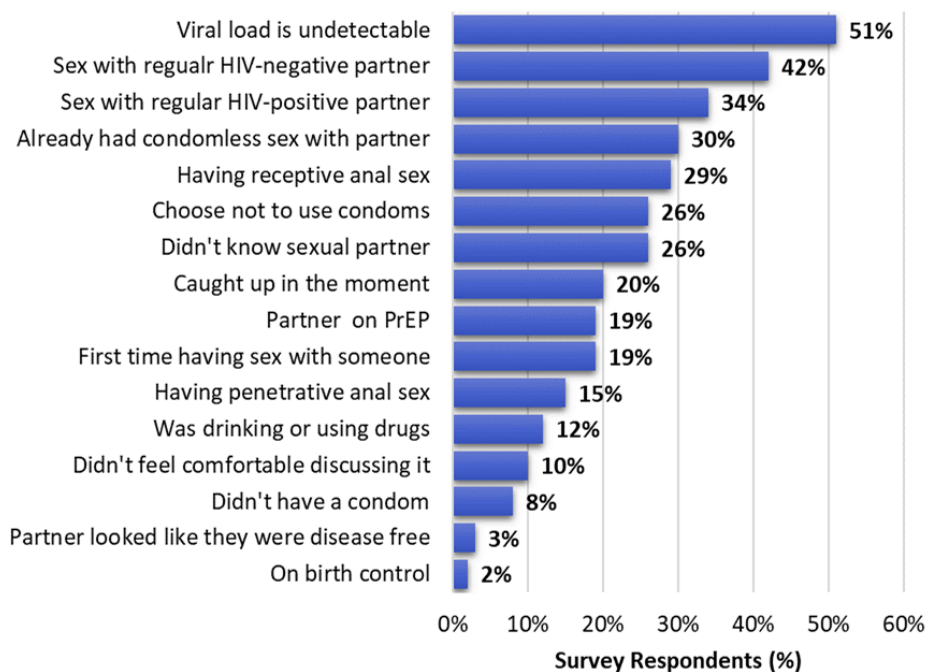
In 2019, the Iowa Department of Public Health and the HIV & Hepatitis Community Planning Group conducted a Consumer Needs Assessment (CNA) survey among Iowans diagnosed and living with HIV. There were 555 respondents who completed the survey. Results were evaluated for disparities among specific populations. Identified disparities are noted.

## Condom Use Among Respondents Who Had Vaginal or Anal Sex Within the Past 12 Months (n=299)

About one quarter of respondents used condoms all of the time (24%). Women (30%), Black (34%), and Hispanic respondents (32%) were more likely to always use a condom compared to all respondents.



## Situation When Respondents Did Not Use Condoms Within the Past 12 Months (n=227)



Among respondents who did not always use condoms, just over half did not use a condom because their viral load was undetectable (51%). Women respondents (54%) were most likely not to use a condom when having sex with their regular partner who was HIV-negative. Black respondents (46%) were most likely not to use a condom when having sex with their regular partner who is living with HIV. Hispanic respondents (60%) were most likely not to use a condom because their viral load was undetectable.

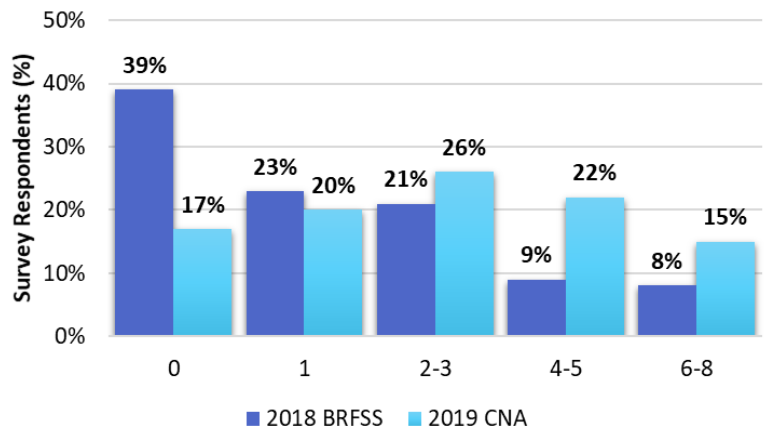


2019 Iowa Consumer Needs Assessment

# ADVERSE CHILDHOOD EXPERIENCES (ACEs)

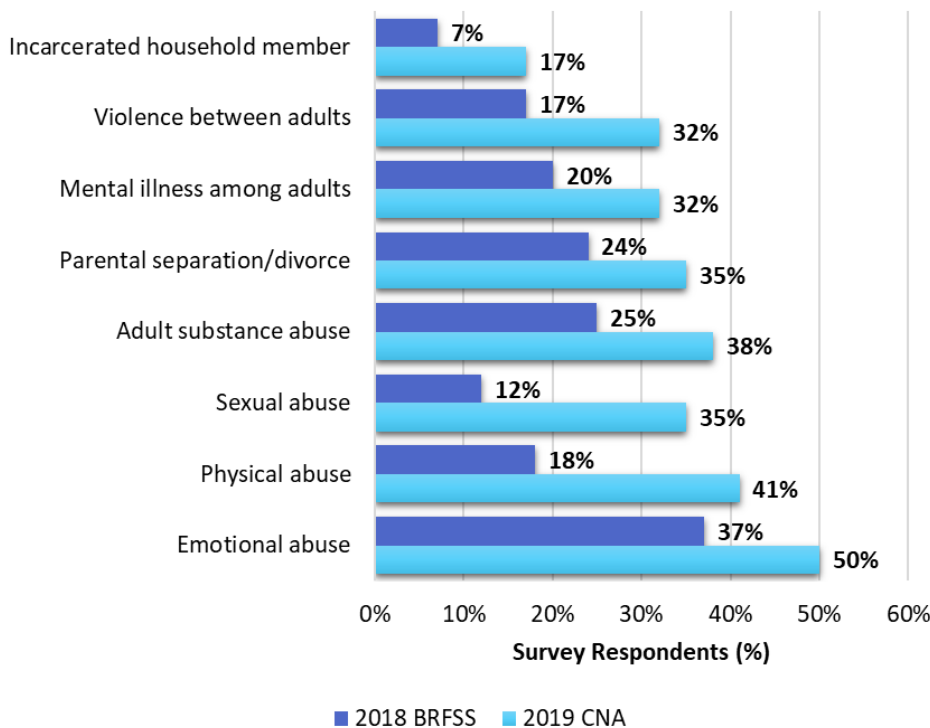
In 2019, the Iowa Department of Public Health and the HIV & Hepatitis Community Planning Group conducted a Consumer Needs Assessment (CNA) survey among Iowans diagnosed and living with HIV. There were 555 respondents who completed the survey. Results were evaluated for disparities among specific populations. Identified disparities are noted.

**ACE Scores Among 2018 BRFSS (n=9,127) and 2019 CNA Respondents (n=555)**



The general population of Iowa (as measured in the Behavioral Risk Factor Surveillance System (BRFSS)) was more than twice as likely to have ACE scores of zero (39%) compared to 2019 CNA respondents (17%). However, CNA respondents were more than twice as likely to have ACE scores of four or more (37%) compared to the general Iowa population (17%).

**ACEs Experienced by 2019 CNA Respondents (n=555) Compared to 2012-2014 BRFSS Respondents (19,000+)**



The percent of 2019 CNA respondents who experienced an ACE category was greater than the general Iowa population in every category. Compared to the general Iowa population, CNA respondents were about twice as likely to experience:

- An incarcerated household member
- Violence between adults
- Physical abuse

CNA respondents were more than three times as likely to experience sexual abuse compared to the general Iowa population.

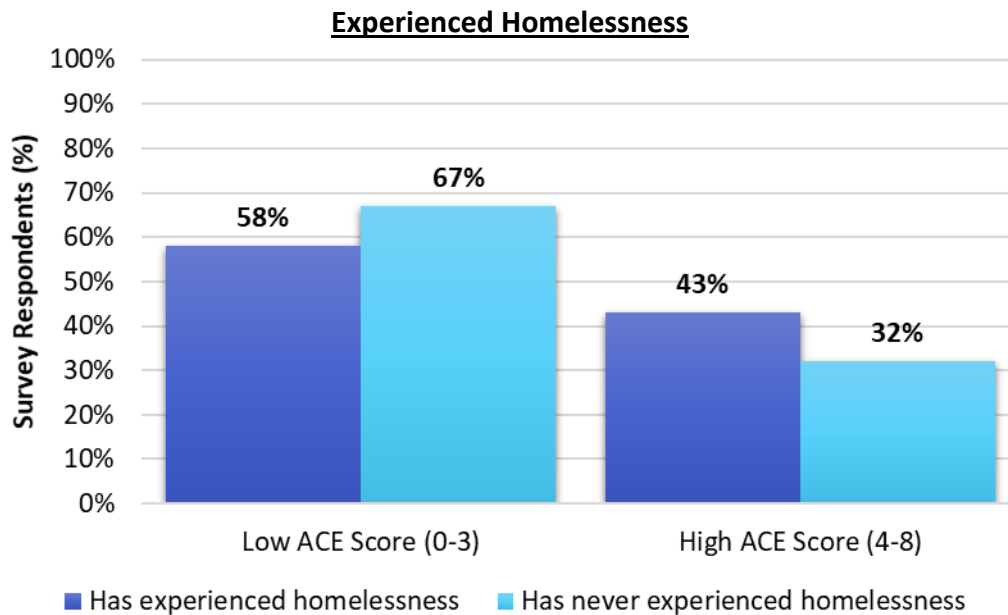




# ACEs AMONG VARIOUS POPULATIONS

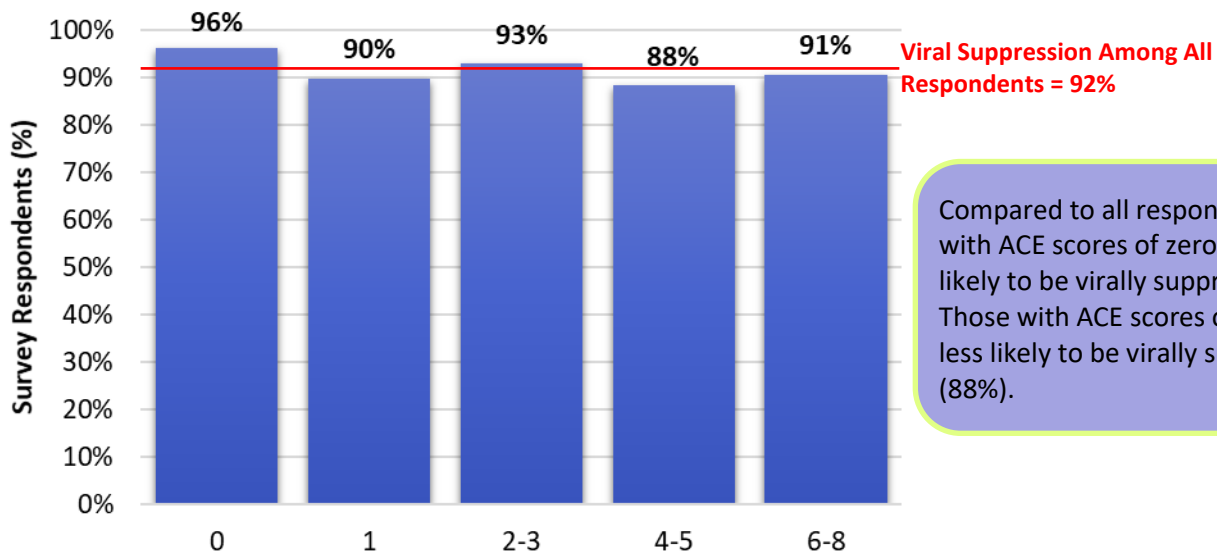
In 2019, the Iowa Department of Public Health and the HIV & Hepatitis Community Planning Group conducted a Consumer Needs Assessment (CNA) survey among Iowans diagnosed and living with HIV. There were 555 respondents who completed the survey. Results were evaluated for disparities among specific populations. Identified disparities are noted.

## ACE Scores Among Respondents Who Have (n=231) and Have Not (n=324)



Respondents who have experienced homelessness were more likely to have high ACE scores (43%) compared to respondents who have not experienced homelessness (32%).

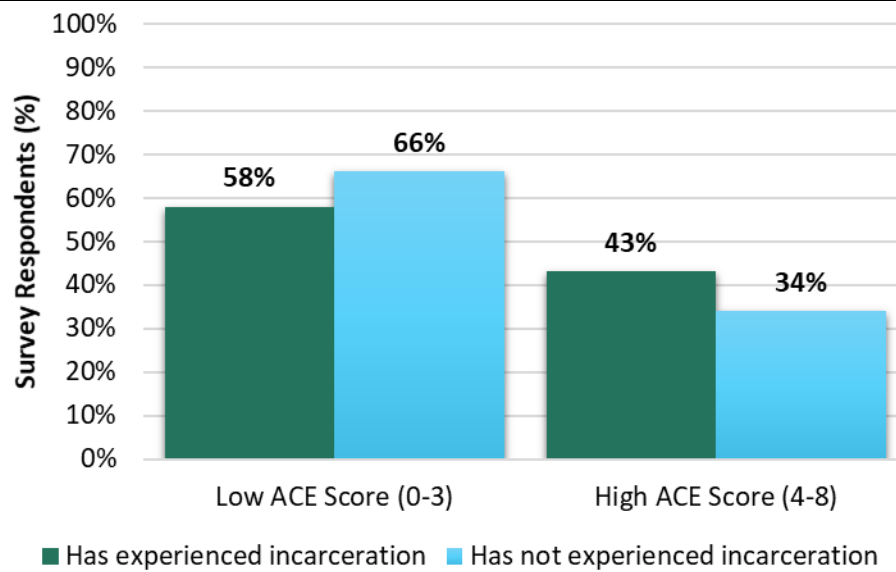
## Viral Suppression Rates by ACE Scores



Compared to all respondents, those with ACE scores of zero were more likely to be virally suppressed (96%). Those with ACE scores of 4-5 were less likely to be virally suppressed (88%).

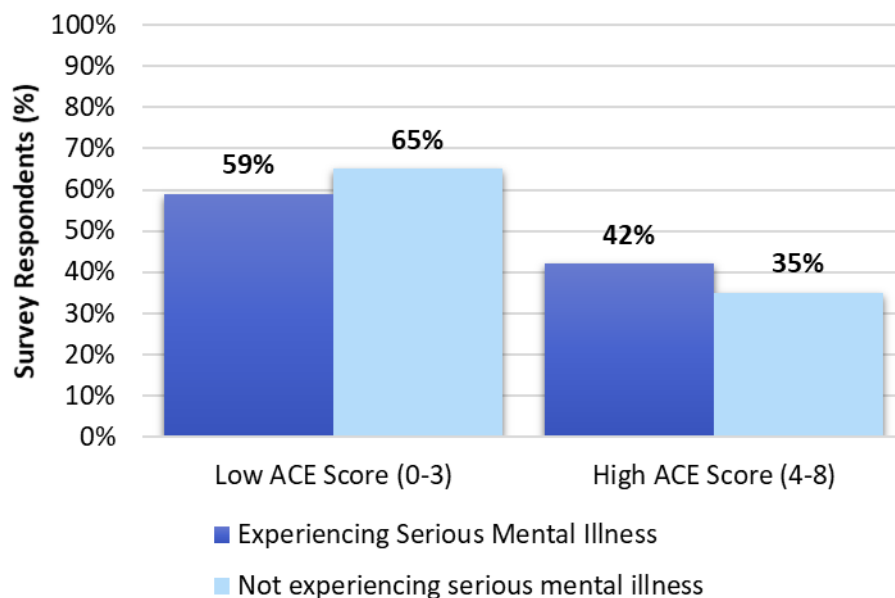


**ACE Scores Among Respondents Who Have (n=189) and Have Not (n=366) Experienced Incarceration**



Respondents who have experienced incarceration were more likely to have high ACE scores (43%) compared to respondents who have never experienced incarceration (34%).

**ACE Scores Among Respondents Who Are (n=126) and Are Not (n=428) Experiencing Serious Mental Illness**



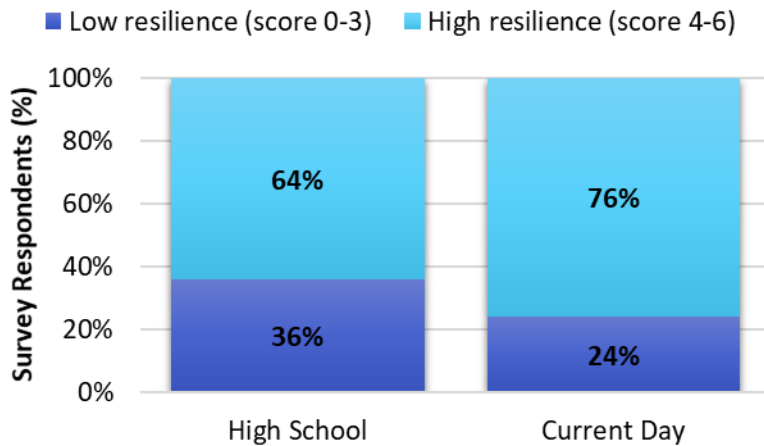
Respondents experiencing serious mental illness were more likely to have high ACE scores (42%) compared to respondents not experiencing serious mental illness (35%).



# RESILIENCE

In 2019, the Iowa Department of Public Health and the HIV & Hepatitis Community Planning Group conducted a Consumer Needs Assessment (CNA) survey among Iowans diagnosed and living with HIV. There were 555 respondents who completed the survey. Results were evaluated for disparities among specific populations. Identified disparities are noted.

### Resilience Among All Respondents In High School and In Current Day

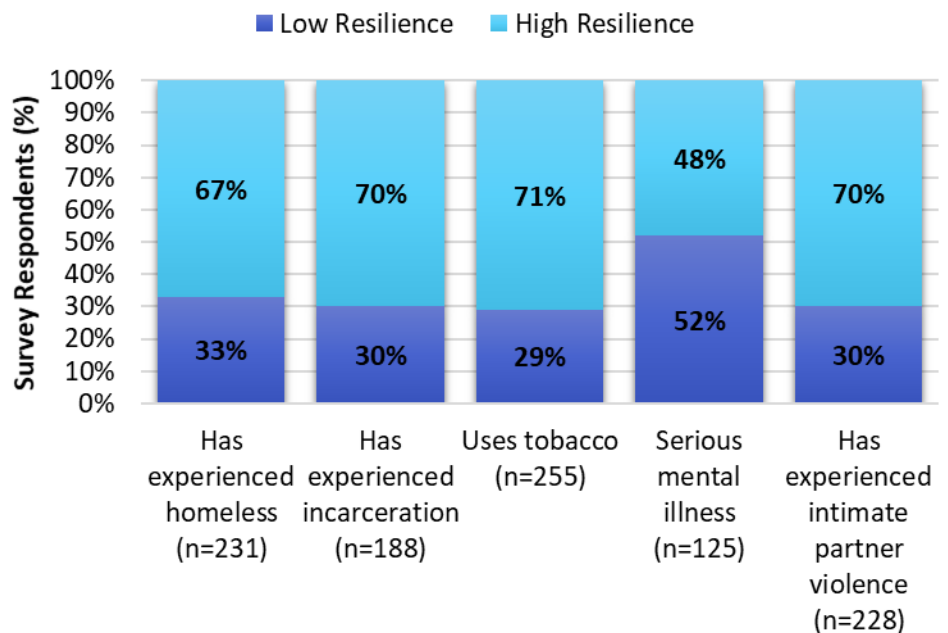


Resilience was measured for the first time in the 2019 CNA, and was evaluated during high school and in current day. Results were categorized into low and high resilience.

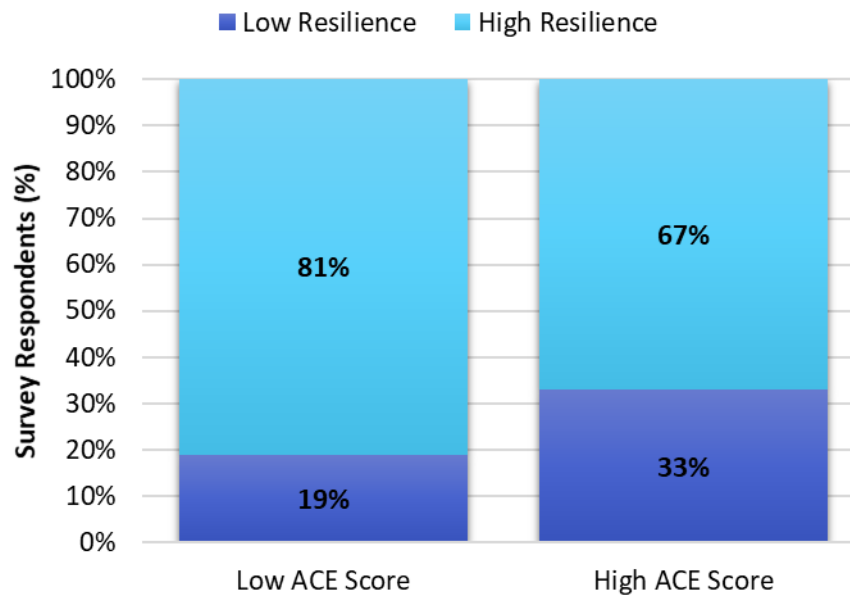
In current day, women respondents (79%) were more likely have high resilience compared to all respondents (76%). Black (73%) and Hispanic respondents (73%) were less likely to have high resilience in current day.

High resilience increased among all respondents between high school and current day by 12 percentage points. High resilience increased by 10 percentage points for women respondents, by 8 percentage points for Hispanic respondents, and by 5 percentage points for Black respondents.

### Current Day Resilience Among Various Populations



The populations presented in the graph to the right all had a smaller proportion of respondents with high resilience compared to all respondents. Respondents experiencing serious mental illness had the smallest proportion of those with high resilience (48%) compared to all respondents (76%).

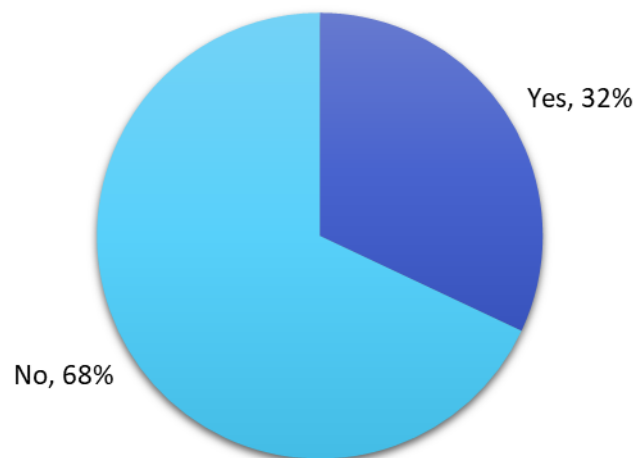
**Current Day Resilience Among Respondents With Low and High ACE Scores**

Current day resilience was measured among respondents who had low and high ACE scores. Only 67% of respondents with high ACE scores also had high resilience, compared to 81% of respondents with low ACE scores, and 76% of all respondents.

# BRAND AWARENESS

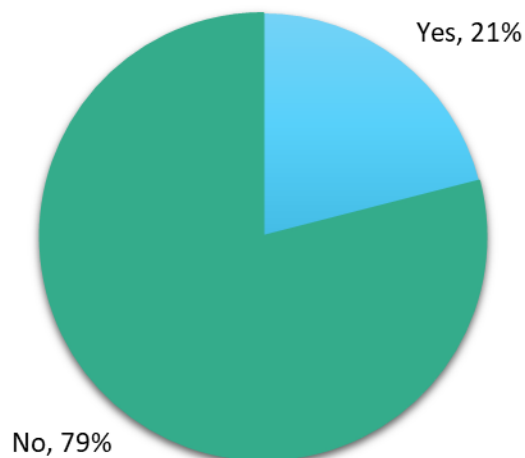
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## Awareness of the StopHIVlowa.org Website Among All Respondents

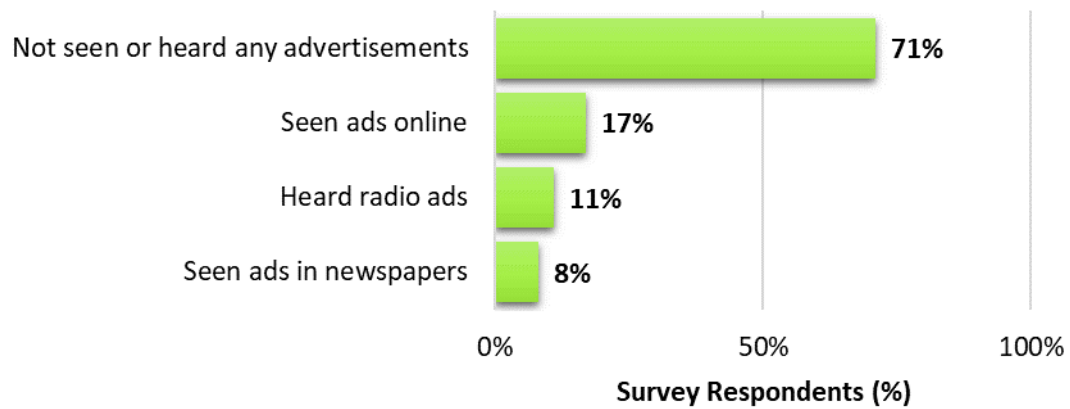


Only 32% of respondents had heard of the website StopHIVlowa.org. Women respondents (25%) were less likely to have heard of the website compared to all respondents.

## Respondents Who Have Visited the StopHIVlowa.org Website (n=180)



Among respondents who had heard of the website (n=180), less than one quarter of them had visited it (21%). Compared to all respondents, women (37%) and Hispanic respondents (31%) were more likely to have visited the website compared to all respondents. Black respondents (15%) were less likely to have visited the website.

**Types of HIV Advertisements Seen or Heard Among All Respondents**

Seventy-one percent (71%) of respondents had not seen or heard any HIV-related advertisements for the *Stop HIV Iowa* marketing campaign. The most common type of advertisements seen were online ads (17%). Compared to all respondents, Black respondents (21%) were more likely to see an online ad, and women respondents (15%) were more likely to have heard an ad on the radio.





For assistance or questions regarding the 2019 Consumer Needs Assessment Report, please contact:

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