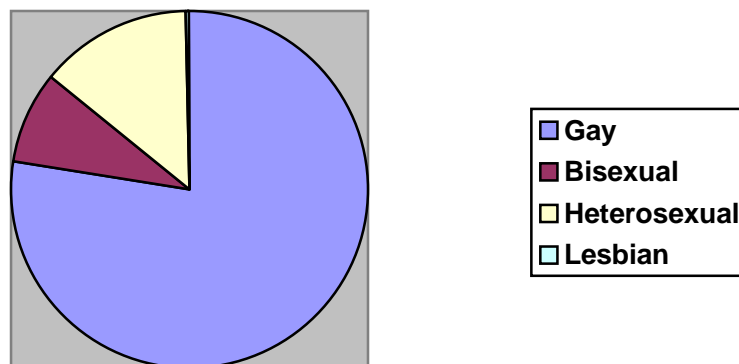


Positive Living
2001 Client Survey Highlights
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APLA' Research and Evaluation Core (REC) would like to thank APLA clients, volunteers, and staff for making the 2001 APLA Client Survey a success. The findings are used to improve HIV/AIDS-related services, prevention, and advocacy efforts. These preliminary results from the client survey project provide an overview of some of the highlights that we consider important. The 2001 Client Survey was mailed to 4,328 clients who agree to receive mail from the agency. Of those, 1,365 returned the survey (a 31.6% response rate). New areas of investigation included questions about sexual risk knowledge, attitudes, and behaviors; HIV status disclosure attitudes; HIV treatment resistance and structured treatment interruption questions, and additional treatment issues. We also measured how many clients use sign language and how many have been incarcerated in their lives at some point for the first time.

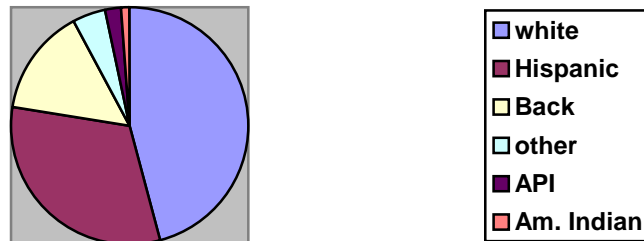
Who are the respondents? The average age of client survey respondents continues to increase. In 2001, the mean age was 44 whereas the mean ages in 1999 and 1997 were 42 and 41, respectively. The majority of clients listed English as a language spoken (84.6%), but 28.6% listed Spanish. 1.8% of our clients marked sign language and 3.6% marked 'other' (clients were asked to mark all languages that apply). The majority of clients stated that they were gay, while some were heterosexual and bisexual; 0.2% were lesbian (see Chart 1).

Chart 1: Sexual Orientation by %



As per APLA's client population, the majority of respondents to the survey were male (90.2%) and 8% were female; 1.8% were transgender (male to female). The breakdown of race/ethnicity follows: 45.7% white, 31.8% Hispanic, 14.7% Black/African American, 4.6% 'other', 2.1% Asian/Pacific Islander, and 1.1% American Indian (see Chart 2). One out of four of the respondents had been incarcerated at some point in their lives. 5.6% were homeless and another 12.9% stated that they were at risk of becoming homeless in the next three months.

Chart 2: % of Survey Respondents by Race/Ethnicity



Some of the highlights include differences between 1999 and 2001 client survey findings. For instance, clients are now more likely to get their health insurance from Medi-cal, Medicaid, or both. Respondents in the survey were also more likely to state that their income is from some form of public assistance. 2001 client survey respondents were more likely to report that they were adherent to their HIV medication regimens (50% versus 45%). Yet, despite the fact that clients report feeling better than they did 1 year ago, 56.1% of those tested reported some level of resistance to HIV medications and 3 out of 4 reported being bothered by side effects from their HIV medications. Only 49% knew what structured treatment interruptions were, while 29.1% of those who knew had done one. 28.6% of all clients stopped taking their medications without a doctor's supervision (drug holiday).

Survey respondents reported high levels of knowledge about STDs and HIV (90% reported excellent to good knowledge of both) and were aware of the syphilis outbreak in Los Angeles County (81.7%). Still, sexual risk behaviors were reported by all groups large enough to analyze (gay men, bisexual men, heterosexual men, and heterosexual women). Rates of unprotected anal or intercourse were particularly high with female and male partners of unknown HIV status. 5% of clients reported injected drug use, but many more reported some substance use with marijuana, viagra, medical marijuana, poppers and alcohol being used most prevalently.

Clients satisfaction with APLA overall was between 'good' and 'very good' and was slightly lower than 1999. All services were rated between 'good' and 'very good'

and APLA received high marks in terms of being friendly and knowledgeable. The 5 services most used in 2001 were: publications, case management, dental, client line, and residential services. Limitations of this survey include the fact that it was self-administered and responses may not reflect those of all APLA clients or those living with HIV/AIDS. Still, these preliminary highlights suggest that our client base continues to evolve and that HIV treatment, substance use, and sexual health/prevention issues are important to address despite, or perhaps because, of the fact that clients report feeling better.