

People Living with HIV Needs Assessment

New Orleans Eligible Metropolitan Area

Louisiana Department of Health and Hospitals
Office of Public Health

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INTRODUCTION

Purpose of the Louisiana Statewide Needs Assessment

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

Layout of the Report

This report presents the characteristics of survey respondents in the New Orleans Eligible Metropolitan Area (NO EMA) and provides basic aggregate results of responses provided to survey questions. A description of the methods used to conduct the *2015 Needs Assessment* and analyze the data, as well as a copy of the survey instrument, are included as appendices to this report.

Survey Respondents

A convenience sample of 582 questionnaires was submitted to PRG after the conclusion of the data collection period (March 9 to April 17, 2015). This represents 97% of the goal of 600 responses as set by *New Orleans Regional AIDS Planning Council* (NORAPC).

A. Background

HIV/AIDS status

Figure A1. HIV/AIDS Status of Respondents (n=569)

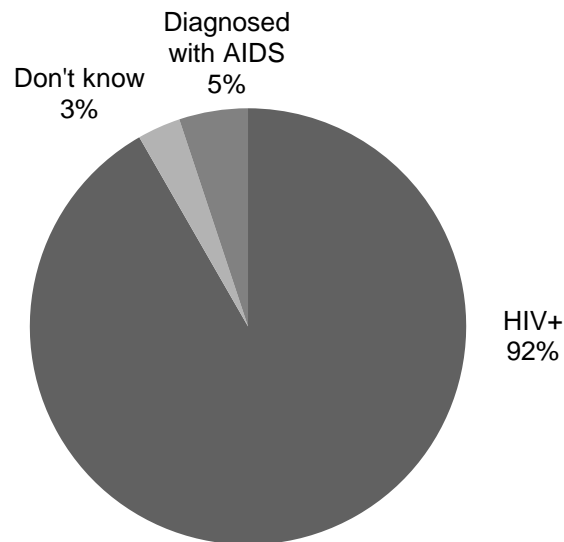


Figure A2. Length of Time Since HIV Diagnosis (n=543)

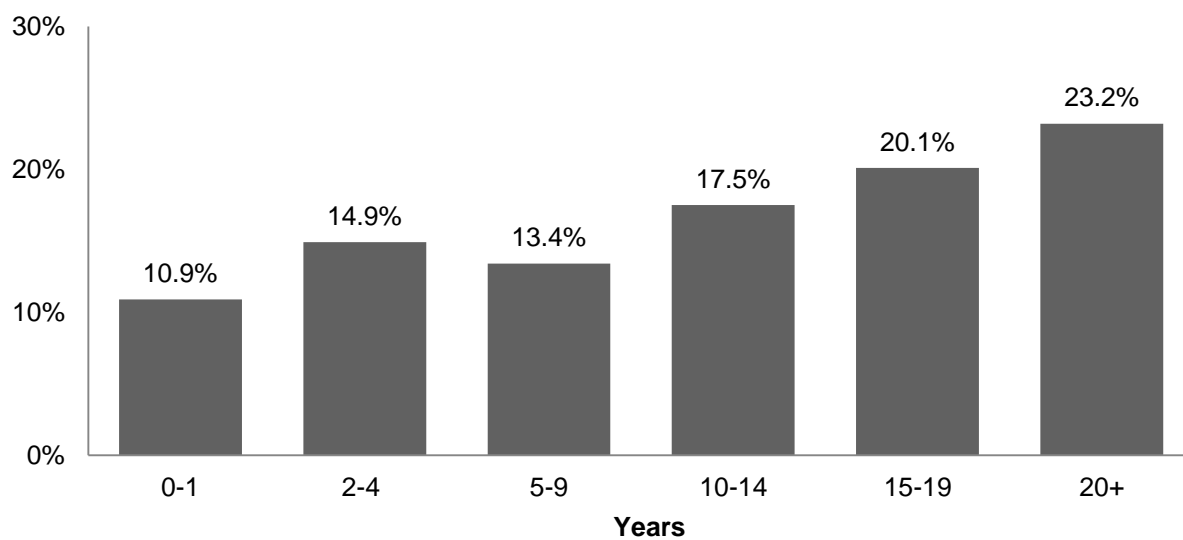
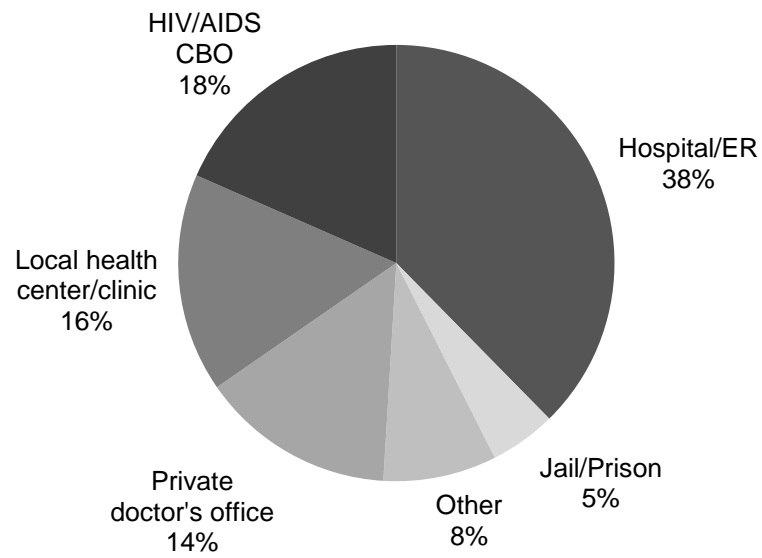


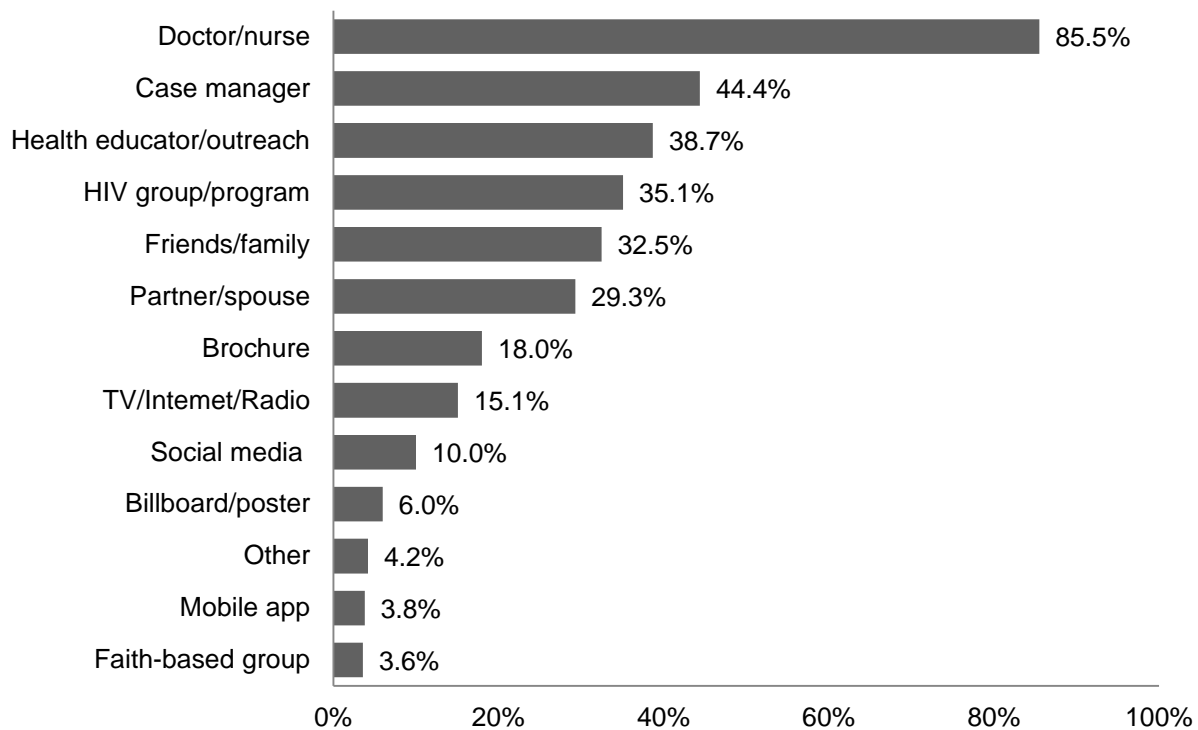
Figure A3. Place Where Respondents Were Told of HIV Diagnosis (n=548)



- The category *other* includes individuals who specifically chose the response option *other* (3.5%) as well as those who chose *organizations providing other services* (4.9%)

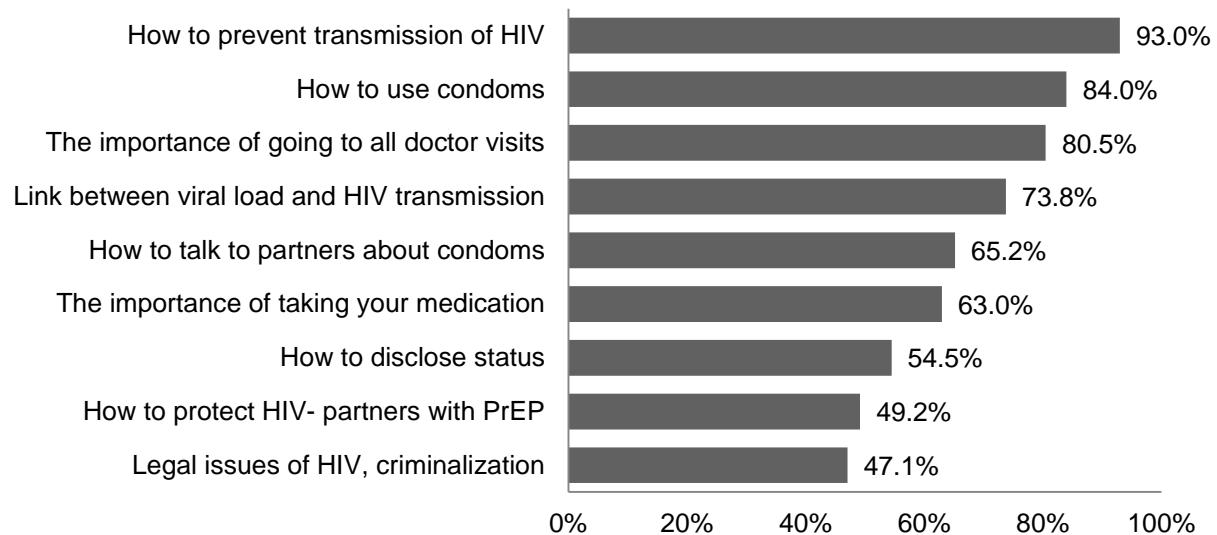
HIV Related Knowledge

Figure A4. Sources of HIV Information (n=550)



- Since respondents were permitted to select more than one category or not answer the question at all, the sum of all categories may not meet or may exceed 100%. Out of the 550 respondents who responded to this question, 427 (77.6%) reported two or more sources of HIV information.

Figure A5. Knowledge of Issues Related to HIV (n=543)



- Since respondents were permitted to select more than one category or not answer the question at all, the sum of all categories may not meet or may exceed 100%. Out of the 543 respondents who responded to this question, 493 (90.8%) reported having knowledge of two or more issues related to HIV.

Background Characteristics

Table A1. Current Parish of Residence (n=548)

Parish	Number Reporting	Percent Reporting
Orleans Parish	454	82.8%
Jefferson Parish	62	11.3%
St. Tammany Parish	9	1.6%
St. Bernard Parish	9	1.6%
St. Charles Parish	4	0.7%
Plaquemines Parish	4	0.7%
St. John the Baptist Parish	2	0.4%

- All respondents were asked to indicate their ZIP code; a total of 556 respondents provided a response. *The U.S. Department of Housing and Urban Development United States Postal Services* (HUD USPS) 1st quarter 2015 ZIP Code Crosswalk File (Retrieved May 27, 2015 from http://www.huduser.org/portal/datasets/usps_crosswalk.html) was used to determine the parish corresponding to each ZIP code. Six ZIP codes reported by 8 respondents (70061, 70102, 70120, 70136, 70137, and 70221) are not valid Louisiana zip codes; therefore, the parish could not be reported. In addition, in some instances ZIP codes cross county or parish lines (i.e., the same ZIP code is found in multiple counties). In order to address this problem, we assigned a county/parish to a ZIP code if that county accounted for the majority of the population residing in that ZIP code. Out of the 548 respondents for whom we designated a county of residence, 4 provided ZIP codes that were contained in more than one parish; therefore, in these cases, the parish of residence may not be accurate.
- Represented in the table and in Figure A6 are respondents residing in Region 1 (no respondents report living in St. James Parish). In addition, several individuals receiving services at clinics within Region 1 report residing in parishes outside that region. Not included in the table are the less than 1% of individuals who indicate they reside in Jefferson Davis Parish, Lafayette Parish, Tangipahoa Parish, and Washington Parish.

Figure A6. Map of Current Parish of Residence (n=548)



Figure A7. Gender of Respondents (n=561)

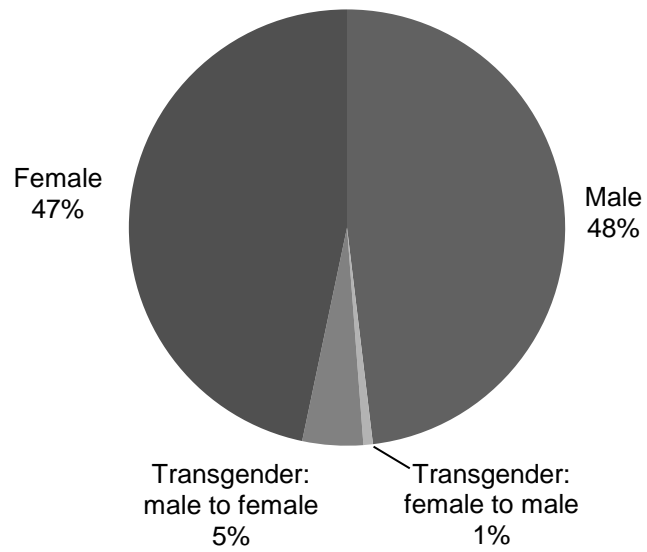


Figure A8. Sexual Orientation (n=559)

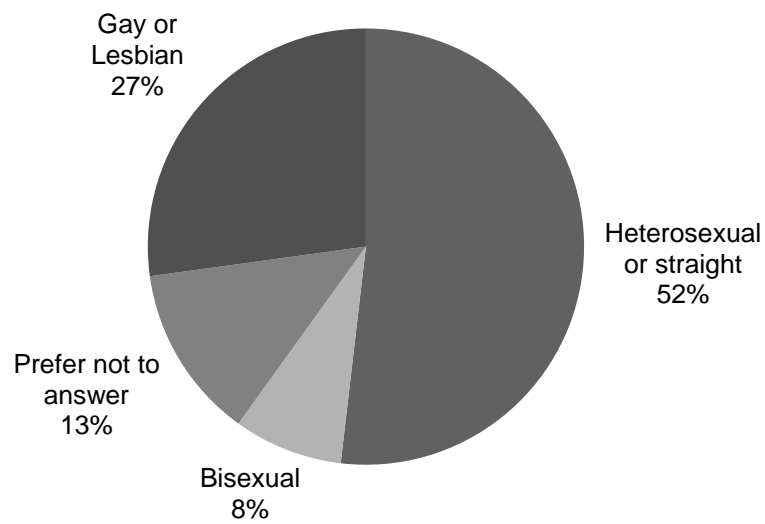
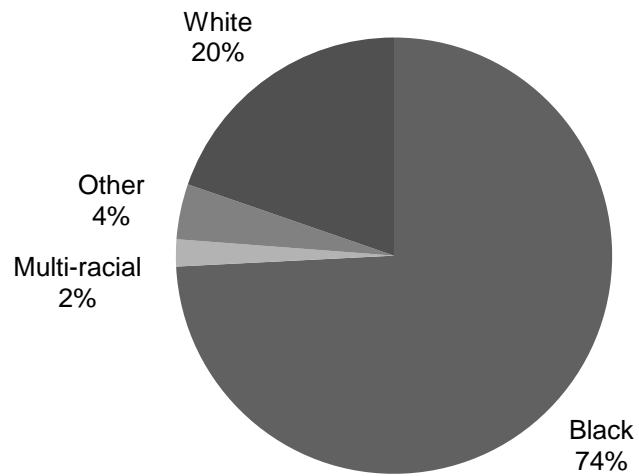


Figure A9. Race of Respondents (n=559)



- Included in the *other* category are those persons who specifically chose *other* (3% of respondents), along with those who identified as *Native American* (1%) and *Asian/Pacific Islander* (<1%).

Figure A10. Latino/Hispanic (n=554)

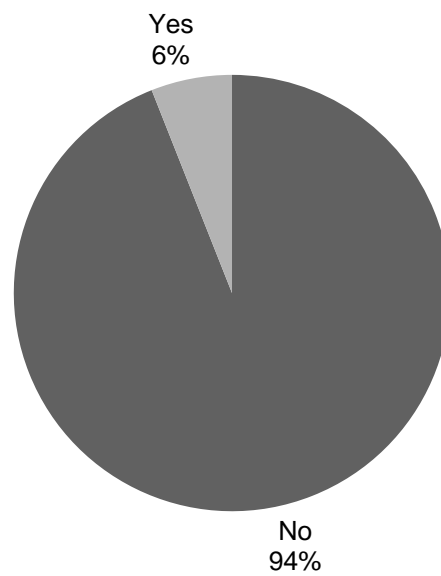
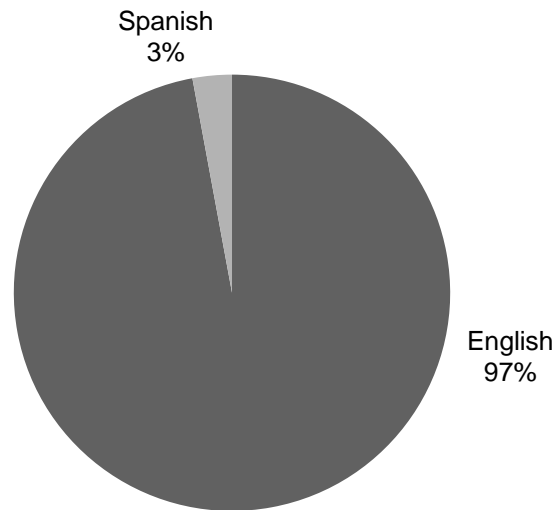


Figure A11. Primary Language of Respondents (n=557)



- Included in calculations, but not presented in the figure are the less than 1% of individuals who chose the response option *other*.

Figure A12. Age of Respondents (n=568)

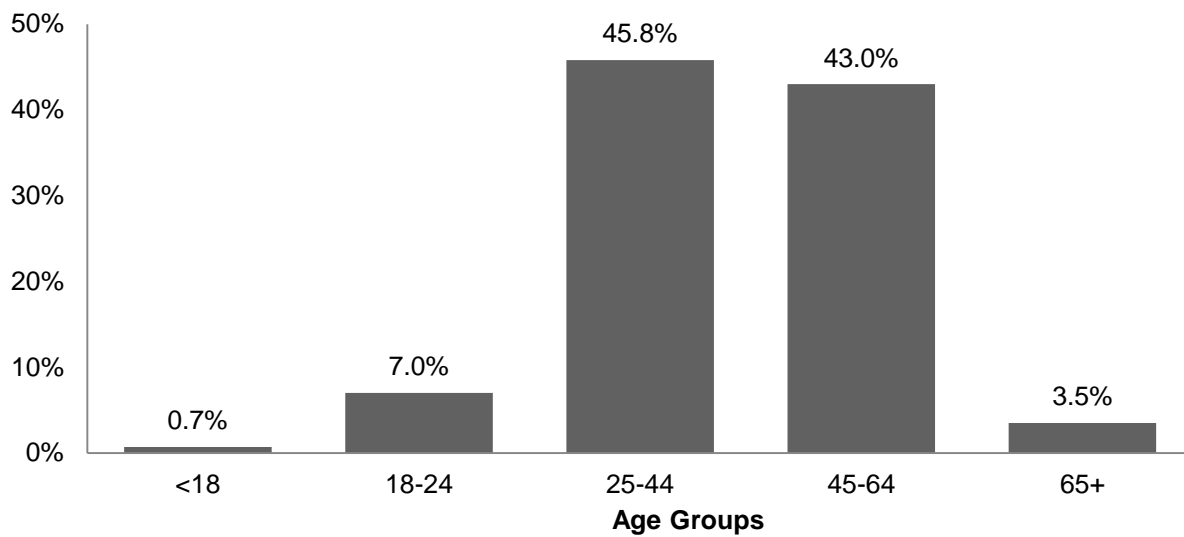
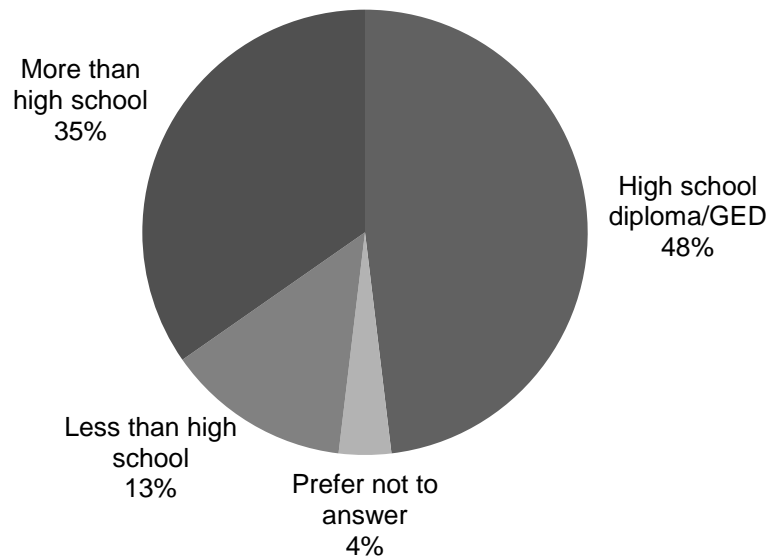
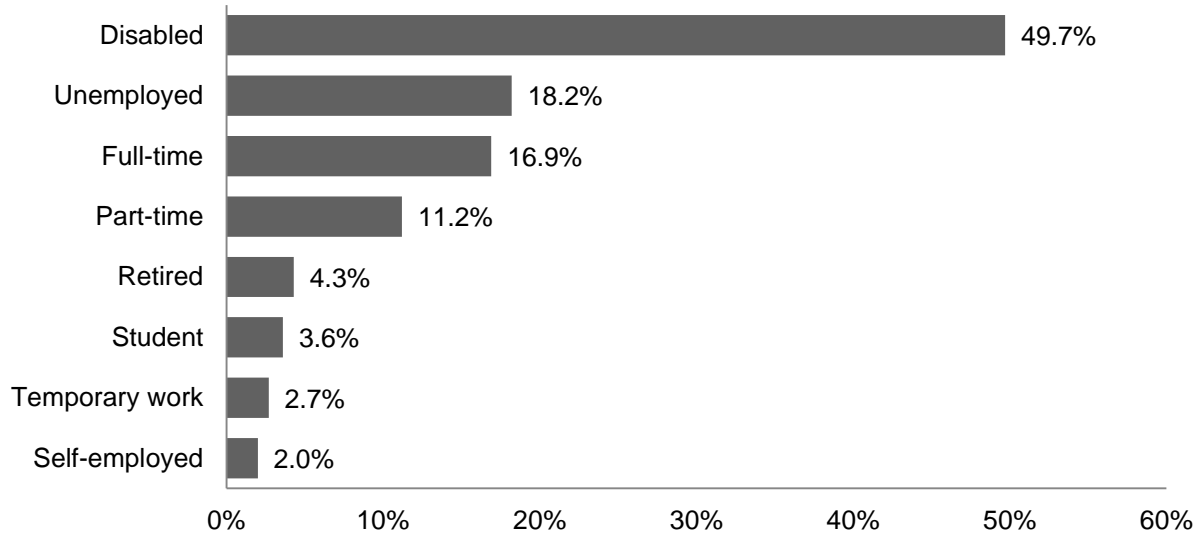


Figure A13. Highest Level of Education Completed by Respondents (n=559)



Employment

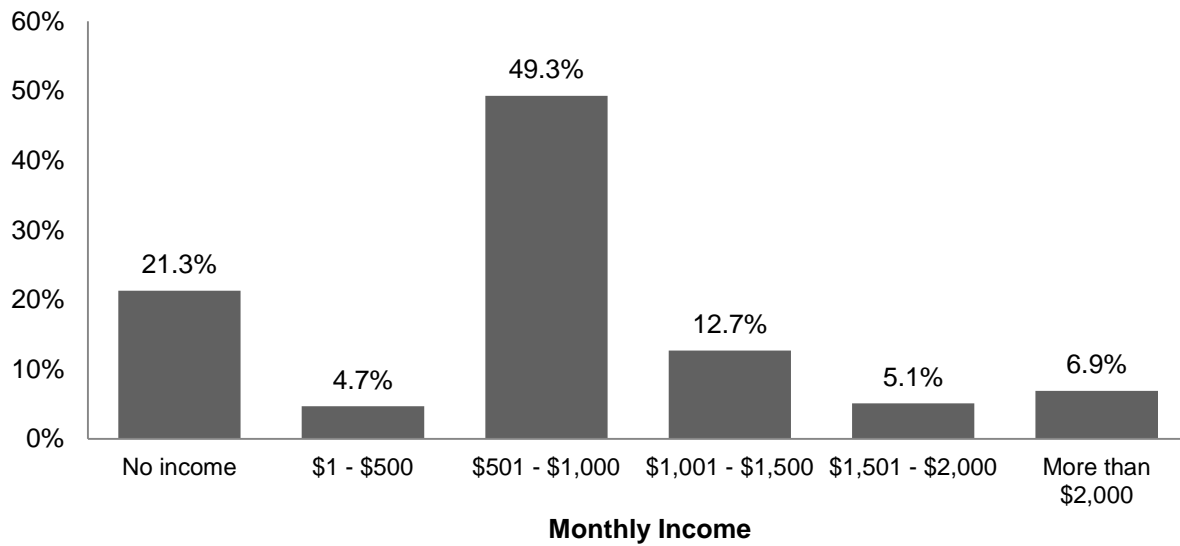
Figure A14. Employment Situation in the Last Six Months (n=561)



- Since respondents were permitted to select more than one category or not answer the question at all, the sum of all categories may not meet or may exceed 100%. Out of the 561 respondents who responded to this question, 45 (8.0%) reported having two or more employment situations in the last six months.

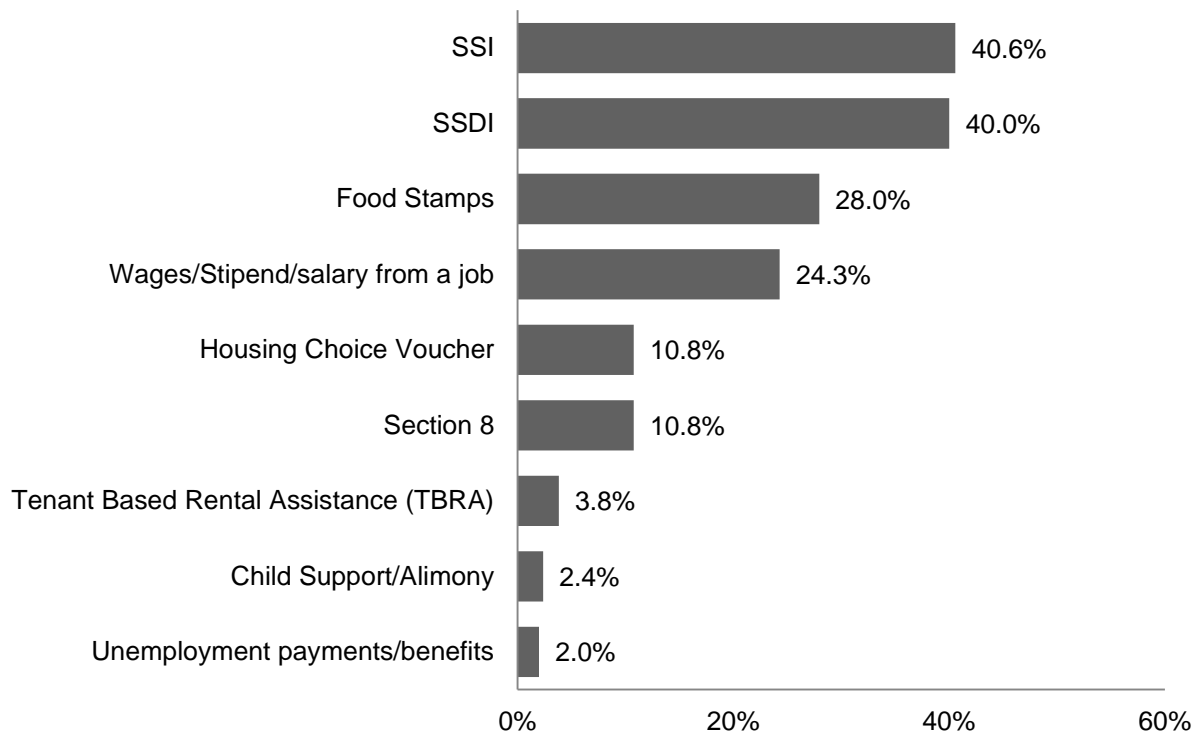
Income

Figure A15. Household Income in Month Prior to Survey (n=511)



- Excluded from calculations are 5 individuals who indicated their monthly income and responded that they do not have an income. The amounts of monthly income these respondents indicated they have are \$1,200, \$733, \$700, \$600, and \$300.

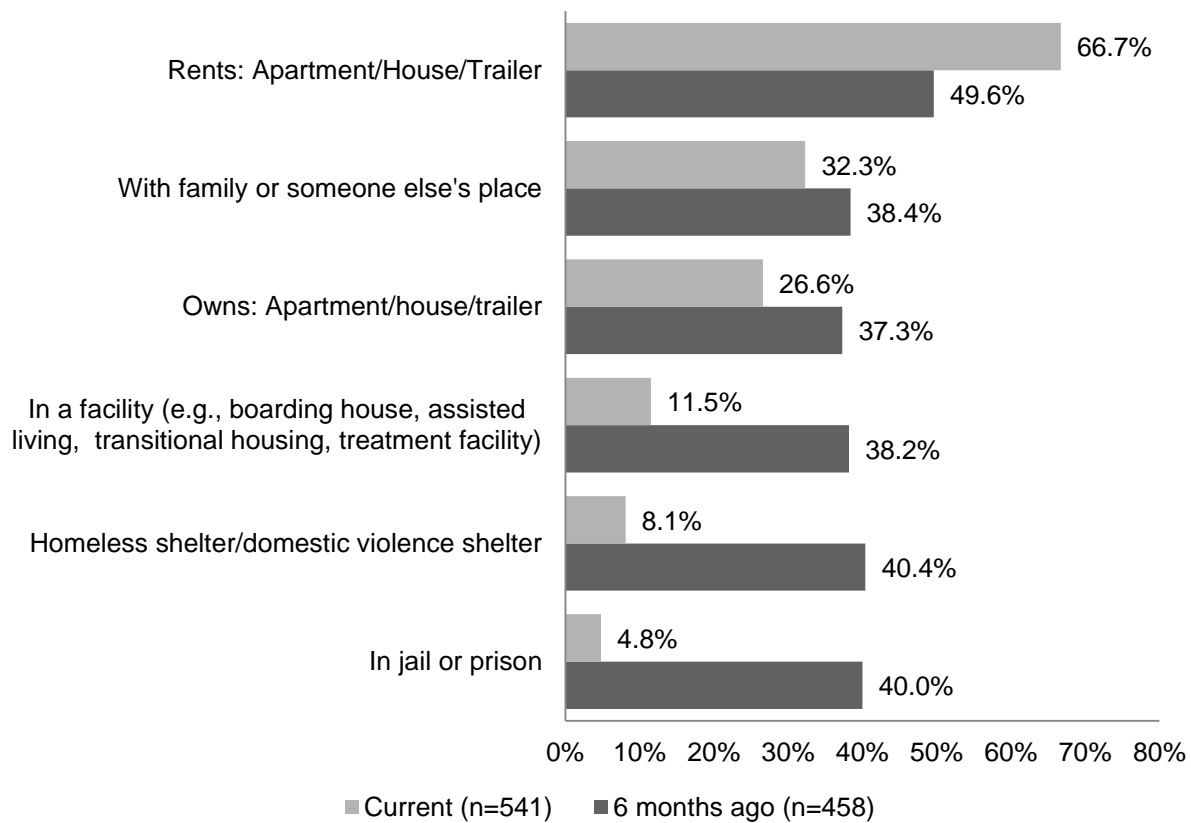
Figure A16. Sources of Income and Assistance (n=547)



- Abbreviations: SSI = Supplemental Security Income; SSDI = Social Security Disability Income
- In addition to what is reported in the table 68.9% of respondents indicated they do not receive housing assistance, and 21.2% indicated they do not receive financial assistance. Also, less than one percent of respondents indicated they received Veteran's Housing (0.2%) and Aid to Families with Dependent Children/Temporary Assistance to Needy Families (0.2%).
- Excluded from calculations are 15 individuals who specified forms of financial assistance received and indicated they do not receive any assistance. The sources of financial assistance these respondents indicated they have are *Wages* (4 respondents), *Food Stamps* (8 respondents), *Unemployment payment benefits* (3 respondents), *SSI* (4 respondents), and *Child Support/Alimony* (2 respondents), *Section 8* (3 respondents), and *Housing Choice Voucher* (3 respondents). Out of the 547 respondents who responded to this question, 479 (87.6%) reported receiving two or more forms of assistance.

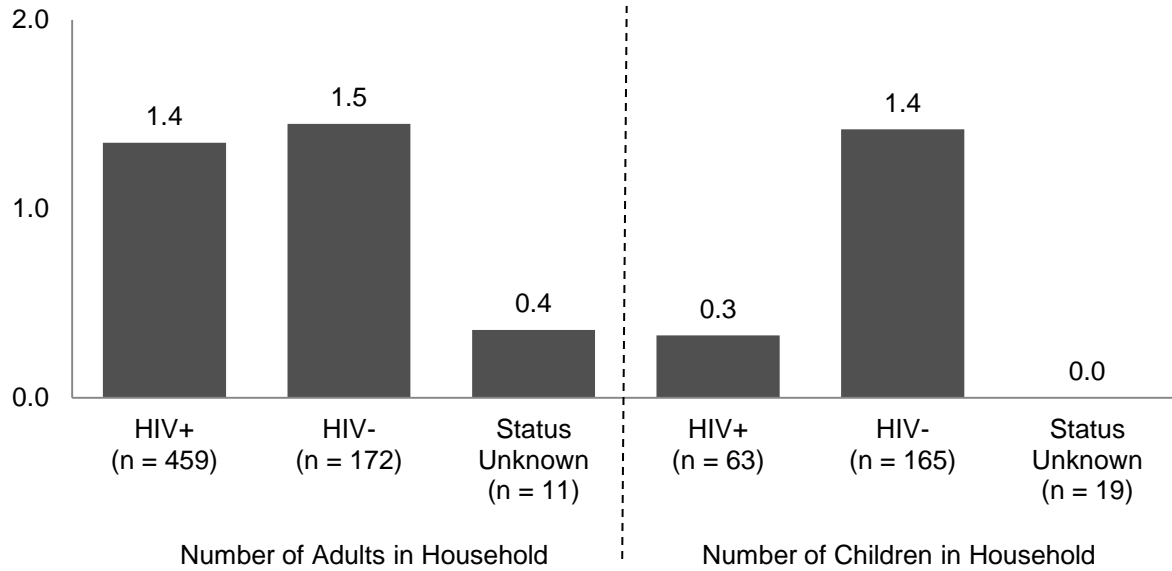
Housing

Figure A17. Places Where Respondents Live Now and 6 Months Ago



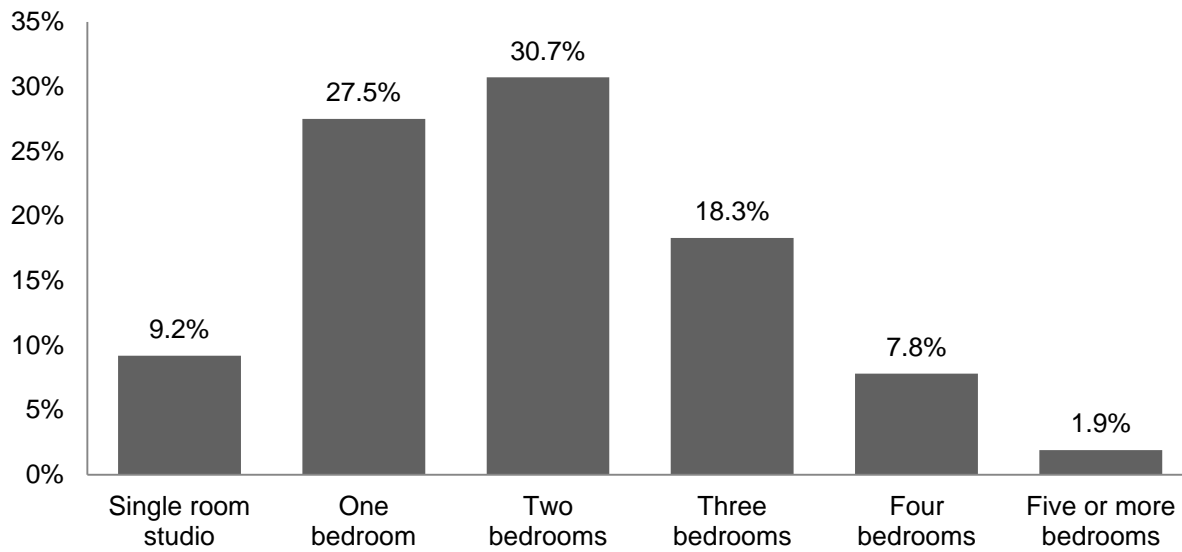
- Out of the 541 respondents who responded to the question of where they currently live, 180 (33.3%) reported two or more types of housing. Out of the 458 respondents who responded to the question of where they lived six months ago, 228 (49.8%) reported two or more types of housing. It is important to note that the questionnaire did not indicate what respondents should do in the case that they lived in more than one place; therefore, respondents may not have chosen all responses that applied to their living situation.

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



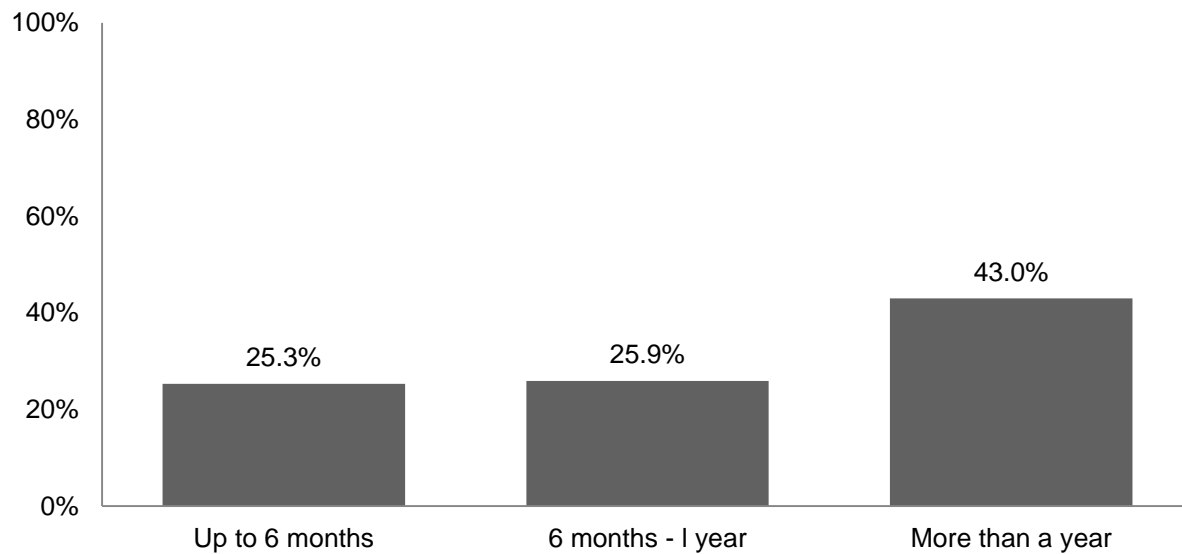
- The following outliers (extreme values) are retained in calculations: *number of adults in their household who are HIV+*: 11 (2 respondents) and 22 (1 respondent); *number of adults in their household who are HIV-*: 11 (1 respondent), 10 (1 respondent), 9 (1 respondent), 7 (1 respondent), and 5 (1 respondent); *number of children in their household who are HIV+*: 11 (1 respondent), 9 (1 respondent), 7 (1 respondent), and 5 (1 respondent).

Figure A19. Number of bedrooms in respondents' residences (n=567)



- In addition to what is presented in the figure, 4.6% of individuals selected the response option *none, I'm homeless*.

Figure A20. Length of Time at Current Residence (n=549)



- In addition to what is reported here, 5.8% of respondents selected the response option *I'm homeless*

Figure A21. Nights Spent Homeless or Without a Place to Sleep (n=498)

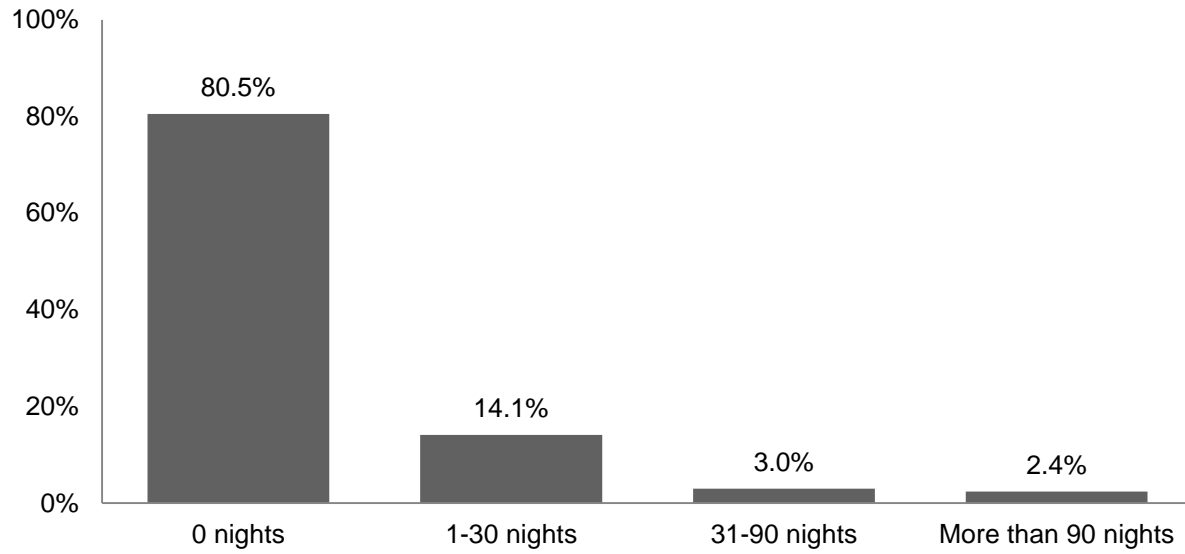


Figure A22. Had Problems Obtaining Housing in the Last 6 months (n=542)

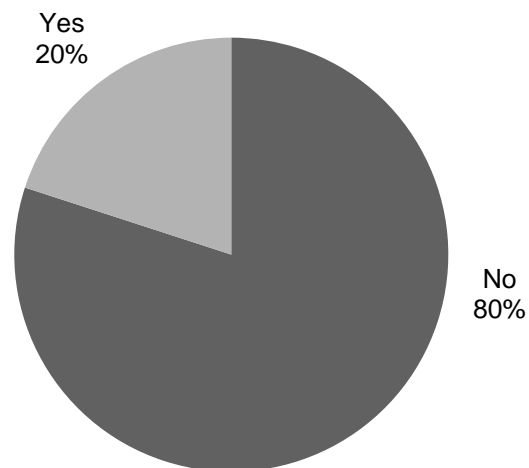
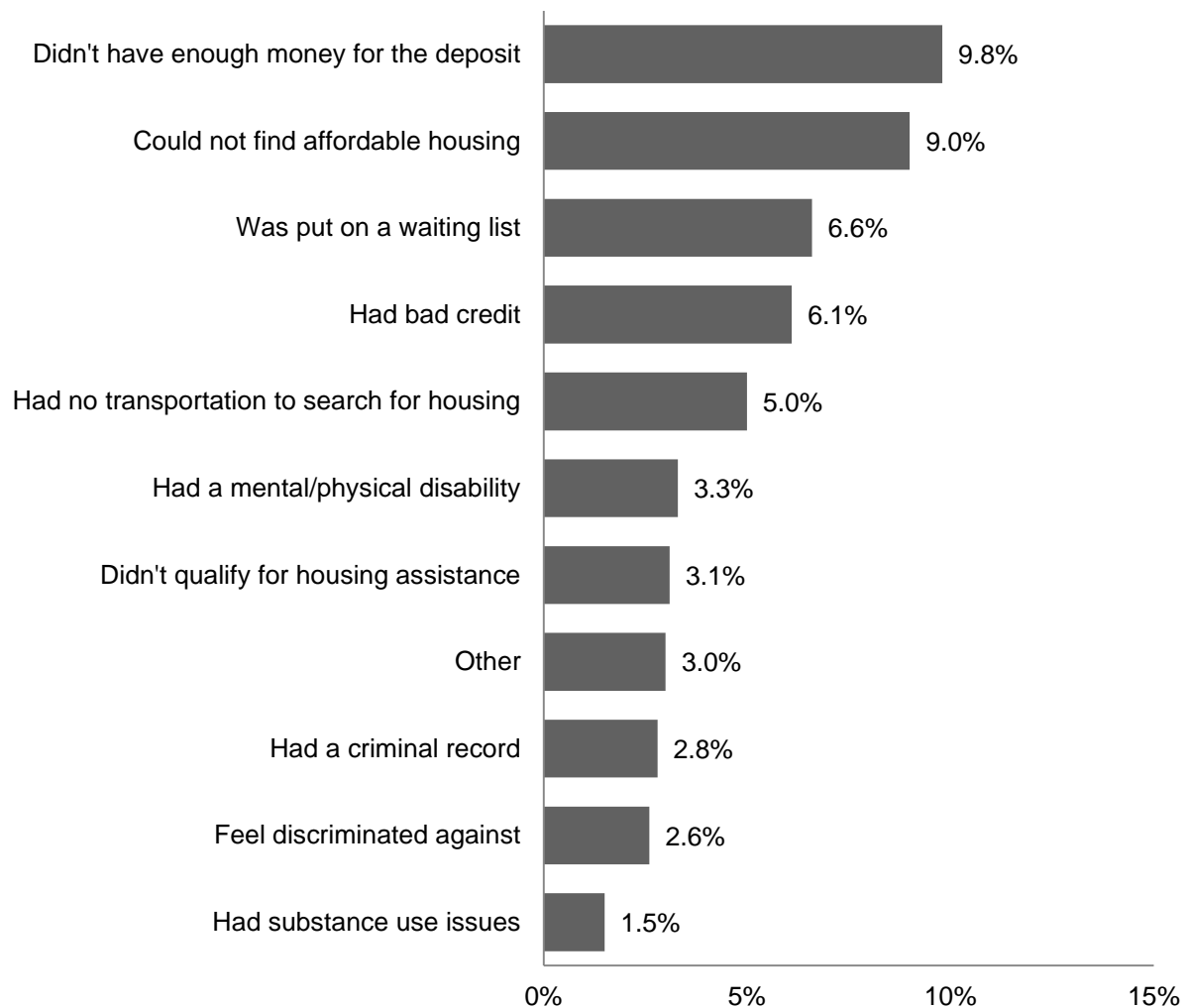
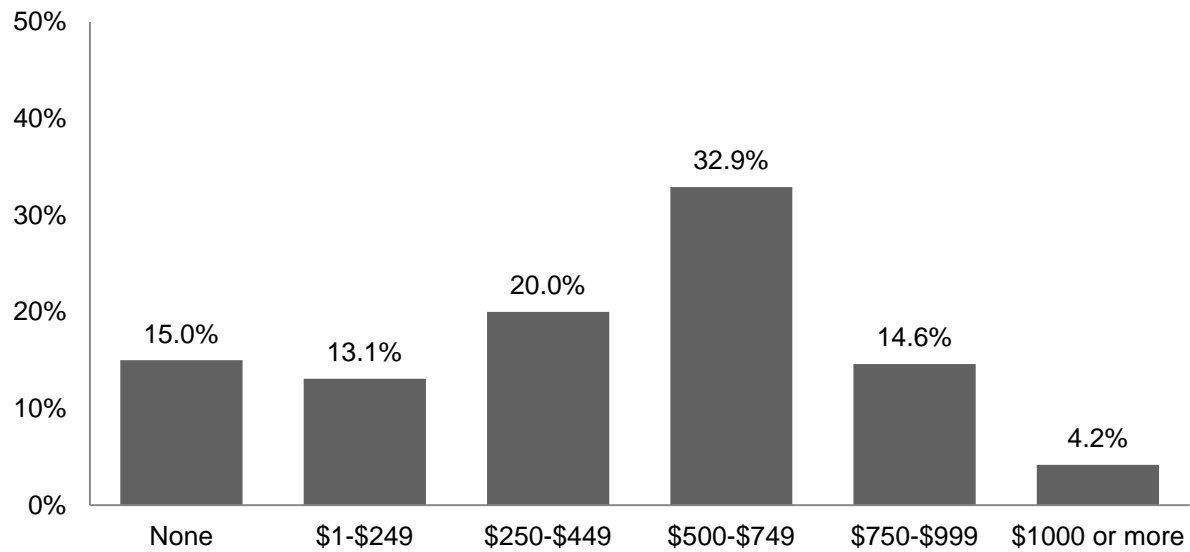


Figure A23. Barriers to Obtaining Housing (n=542)



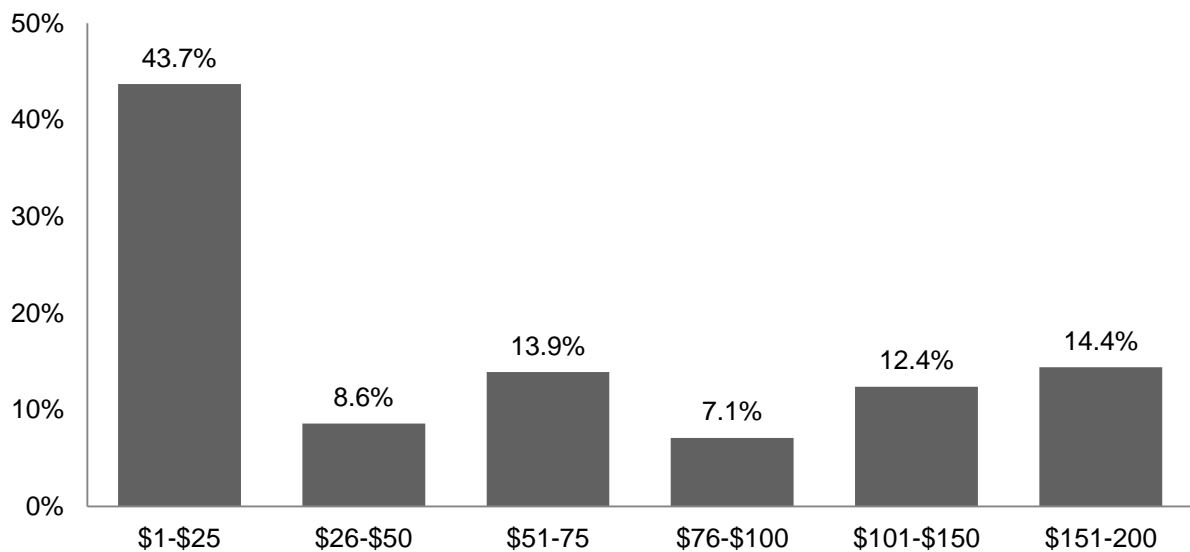
- In addition to what is reported here, 79.5% of respondents indicated they did not have problems finding housing.
- Excluded from calculations are 6 respondents who indicated they experienced at least one barrier in obtaining housing in the last six months and that they do not have any problems obtaining housing. The barriers these respondents indicated they have are: *Was put on a waiting list* (3 respondents), *Didn't qualify for housing assistance* (3 respondents), *Could not find affordable housing* (2 respondents), *Had a criminal record* (2 respondents), *Didn't have enough money for a deposit* (1 respondent), *Had no transportation to search for housing* (1 respondent), *Had bad credit* (1 respondent), *Had a mental/physical disability* (1 respondent), *Felt discriminated against* (1 respondent), *Other* barrier to obtaining housing (1 respondent).
- Since respondents were permitted to select more than one category or not answer the question at all, the sum of all categories may not meet or may exceed 100%. Out of the 111 respondents who reported at least one barrier to obtaining housing, 61 (55.0%) reported having two or more barriers.

Figure A24. Rent/Mortgage Contribution Paid “Out of Pocket” (n=519)



- Of the 441 individuals who reported that they do contribute to their rent/mortgage, 184 (41.7%) indicate that their rent/mortgage contribution includes utilities.

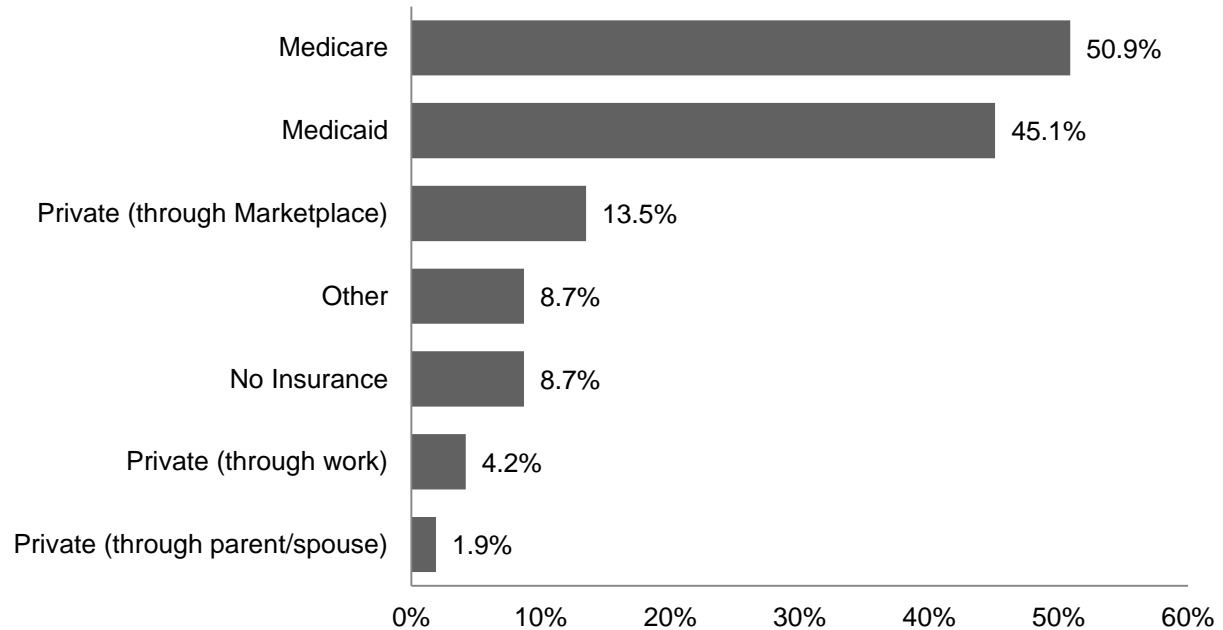
Figure A25. Increase per Month in Rent/Mortgage That Would Cause Respondents to Move (n=396)



B. Medical Care

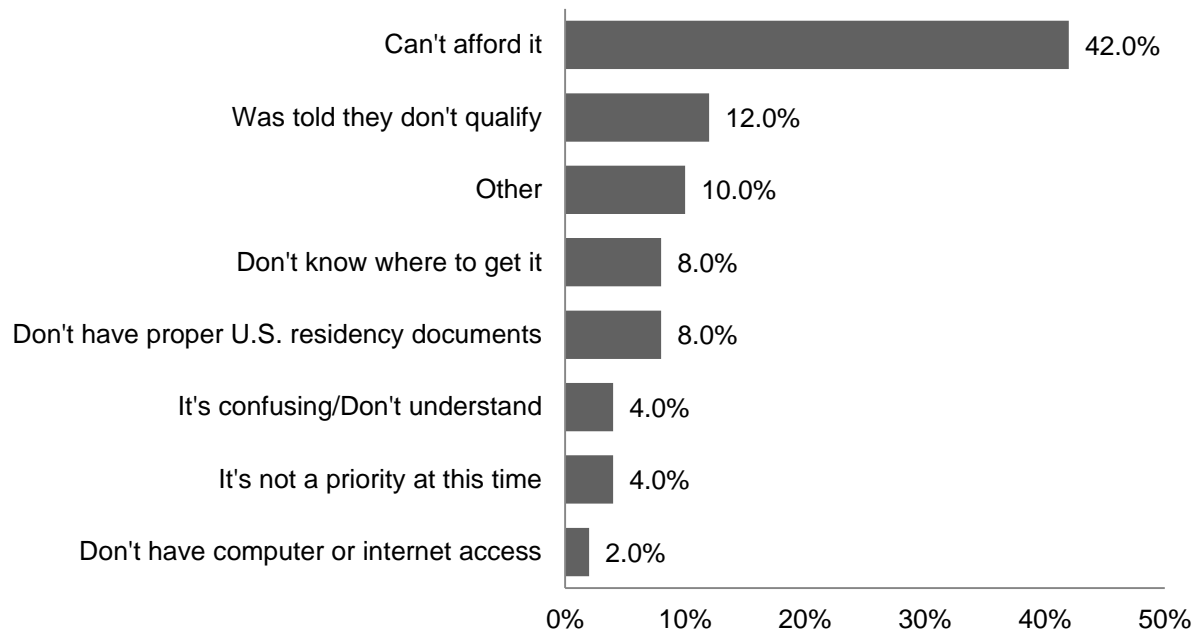
Health Insurance and Medical Coverage

Figure B1. Sources of Health Insurance for HIV/AIDS Medical Care (n=576)



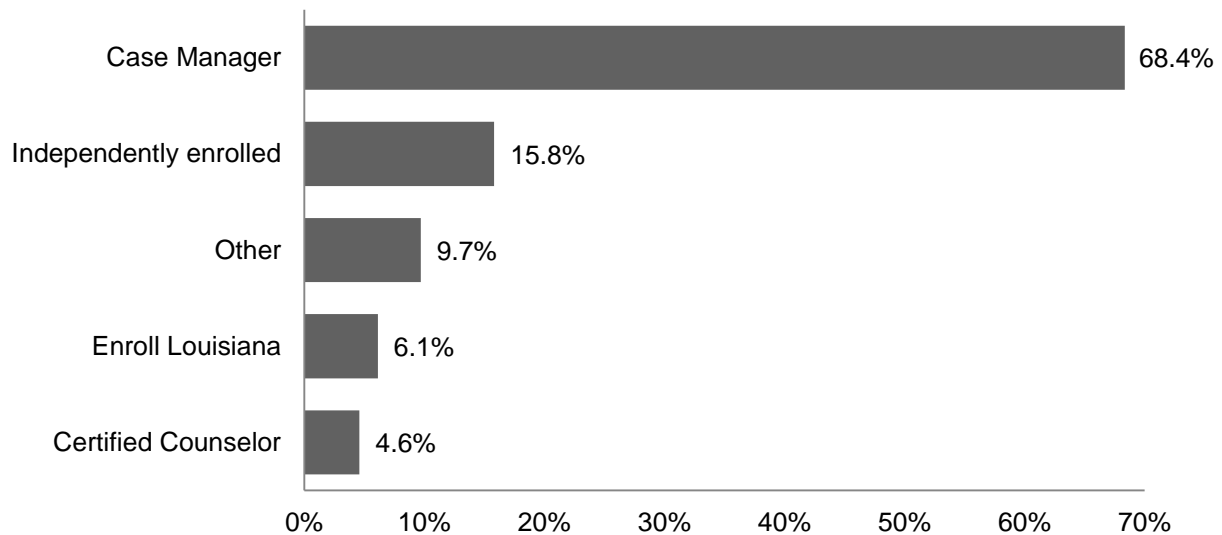
- Excluded from calculations is one respondent who indicated having at least one source of health insurance as well as no insurance.
- No respondents reported *Veteran's Administration (VA)* as a source of health insurance for their HIV/AIDS medical care, and less than one percent of respondents indicated they used *COBRA* (0.2%) as their source of insurance.
- Since respondents were permitted to select more than one category or not answer the question at all, the sum of all categories may not meet or may exceed 100%. Out of the 526 respondents who reported having at least one type of health insurance, 189 (35.9%) reported having two or more sources of health insurance for their HIV/AIDS medical care.

Figure B2. Barriers to Obtaining Health Insurance Coverage (n=50)



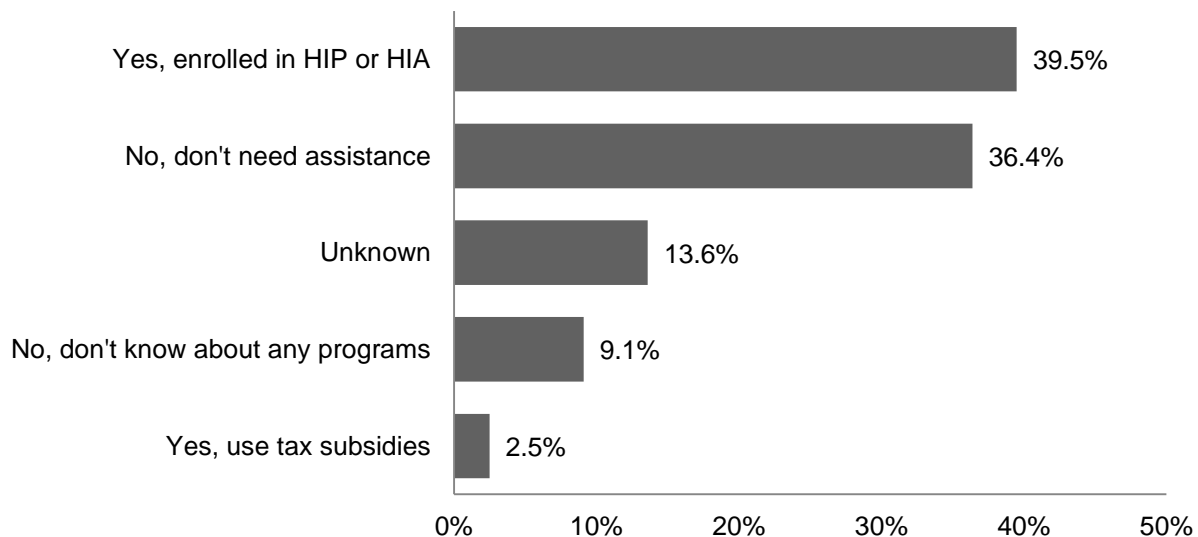
- In addition to what is reported here, 10 respondents (20%) report having insurance, and that the question does not apply.
- Excluded from calculations is one respondent who indicated having insurance as well as experiencing several barriers to obtaining health insurance coverage.
- No respondents report being denied health insurance coverage due to a previous medical condition or not being able to get the premium paid on time.
- Since respondents were permitted to select more than one category or not answer the question at all, the sum of all categories may not meet or may exceed 100%. Out of the 40 respondents who reported at least one barrier to obtaining health insurance coverage, 4 (10.0%) reported having two or more barriers to obtaining health insurance coverage.

Figure B3. Enrollment in MARKETPLACE Plan (n=196)



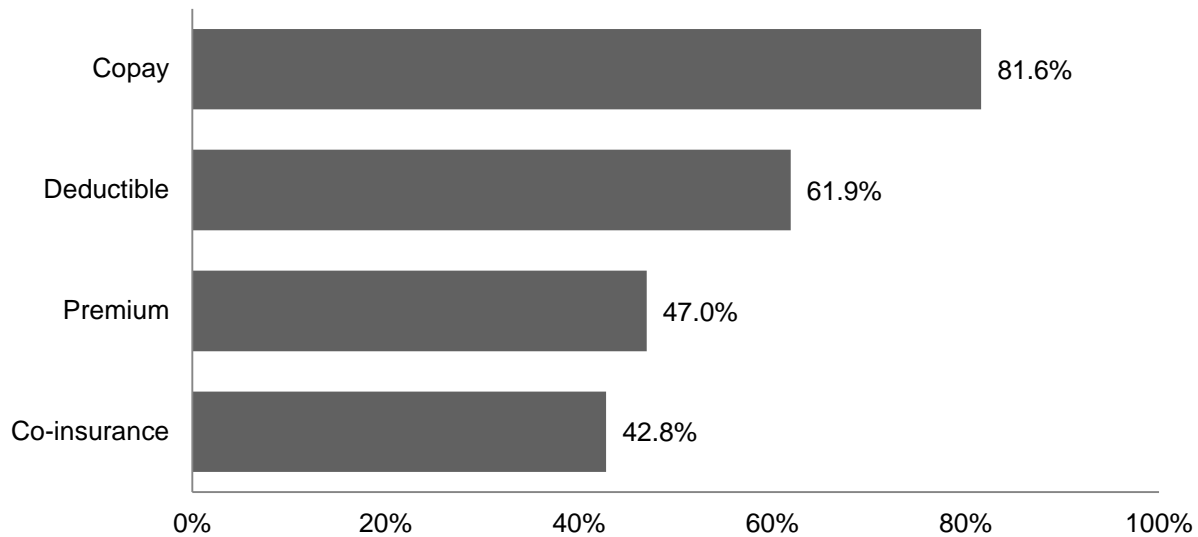
- Not included in this calculation are 353 individuals who responded that they are not on a MARKETPLACE plan. In addition, 2 respondents indicated that they do not have a MARKETPLACE plan, but also indicated how they were enrolled. These respondents were excluded from the analysis. One respondent indicated that he/she used Enroll Louisiana and another respondent indicated that he/she is "waiting to hear from medicaid".
- Since respondents were permitted to select more than one category or not answer the question at all, the sum of all categories may not meet or may exceed 100%. Out of the 196 respondents who responded to this question, 9 (4.6%) reported having two or more ways that they enrolled in a MARKETPLACE plan.

Figure B4. Receives Help with Insurance Premiums (n=560)



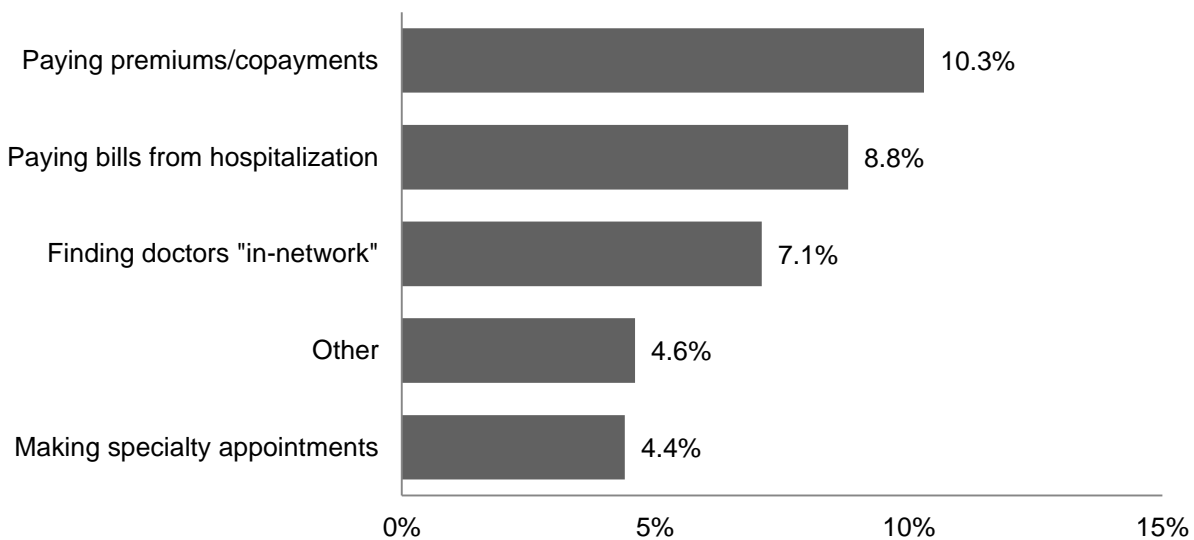
- Since respondents were permitted to select more than one category or not answer the question at all, the sum of all categories may not meet or may exceed 100%. Out of the 560 respondents who responded to this question, 6 (1.1%) reported having two or more responses to whether they receive help with insurance premiums.

Figure B5. Self-Reported Understanding of Insurance Terms (n=559)



- In addition to what is reported here, 12.5% of respondents indicated that they understood *none of these* terms.
- Excluded from calculations are 4 respondents who indicated that they understood all of these terms, but also indicated that they understood *none of these* terms.
- Since respondents were permitted to select more than one category or not answer the question at all, the sum of all categories may not meet or may exceed 100%. Out of the 489 respondents who indicated they understood at least one of these terms, 391 (80.0%) reported understanding two or more of these insurance terms.

Figure B6. Problems Encountered with Health Insurance (n=565)



- In addition to what is reported here, 72.7% of respondents indicated that they encountered *none* of these problems.
- Since respondents were permitted to select more than one category or not answer the question at all, the sum of all categories may not meet or may exceed 100%. Out of the 154 respondents who reported at least on problem they encountered with health insurance, 33 (21.4%) reported two or more problems.

Figure B7. Other Coverage Needed (n=559)

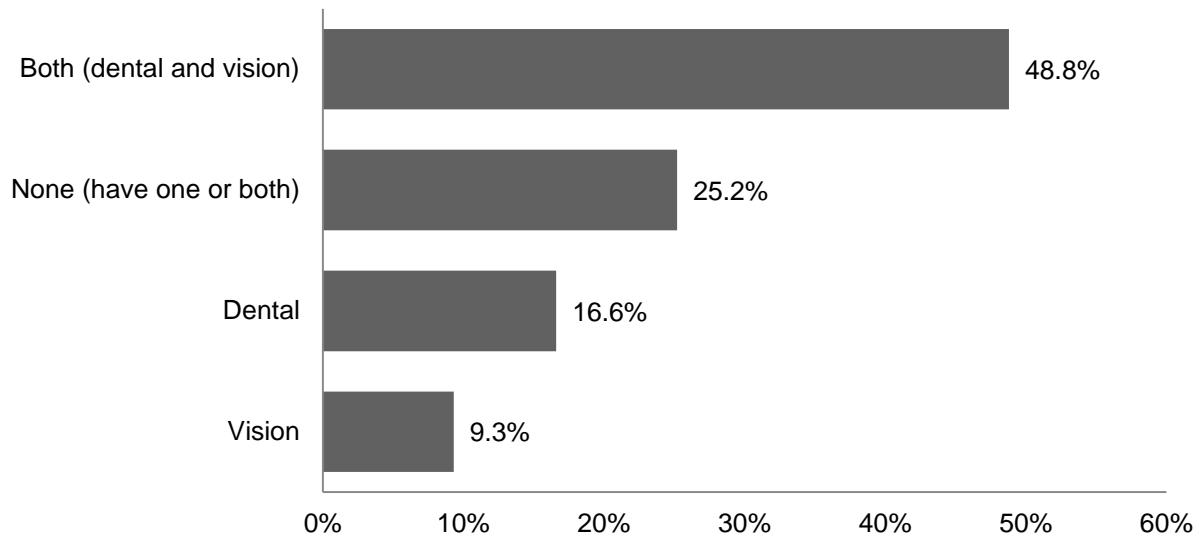
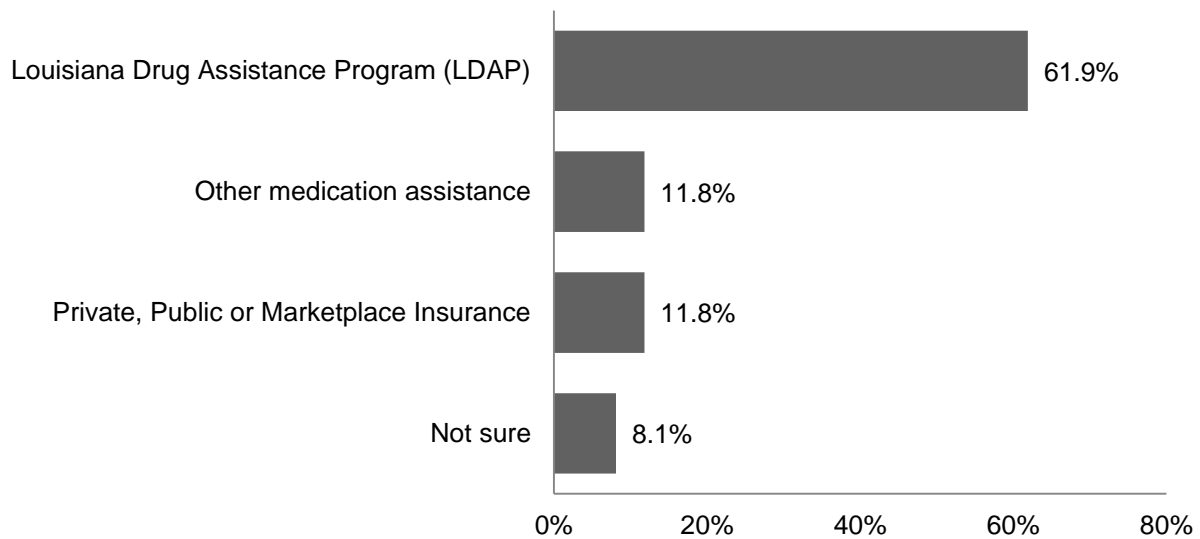


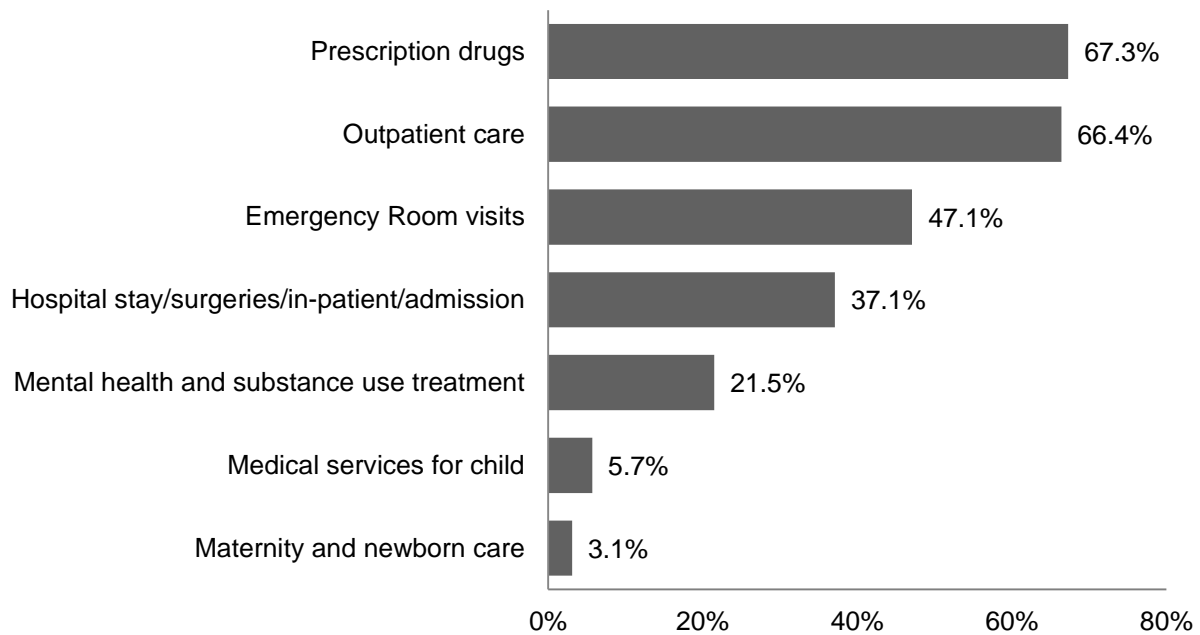
Figure B8. Method of Payment for Medications (n=533)



- In addition to what is presented here, 6.4% of respondents indicated the question *does not apply*.

Medical Services

Figure B9. Non-HIV Related Medical Services Needed (n=456)



- Since respondents were permitted to select more than one category or not answer the question at all, the sum of all categories may not meet or may exceed 100%. Out of the 456 respondents who indicated they needed at least one of the listed services for non-HIV related reasons, 290 (63.6%) reported that they needed two or more of these services.

C. Health and Health Behaviors

Overall Health

Figure C1. Self-Reported Overall Health Status (n=569)

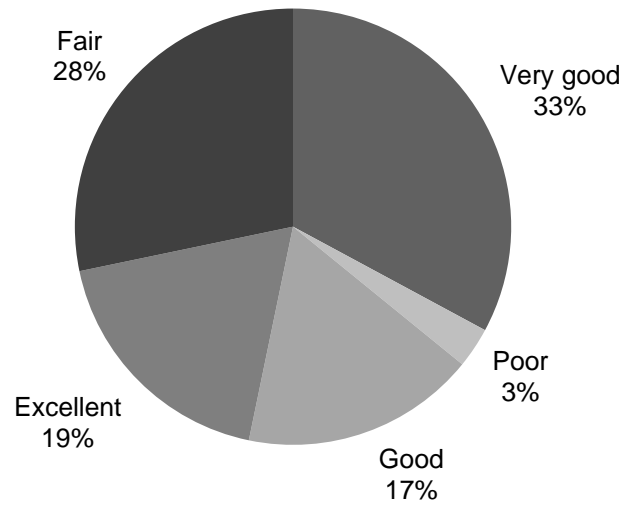


Figure C2. Current Viral Load (n=571)

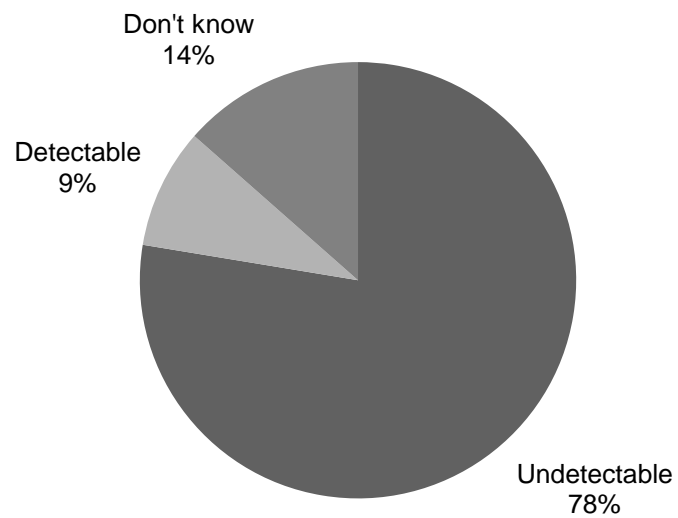
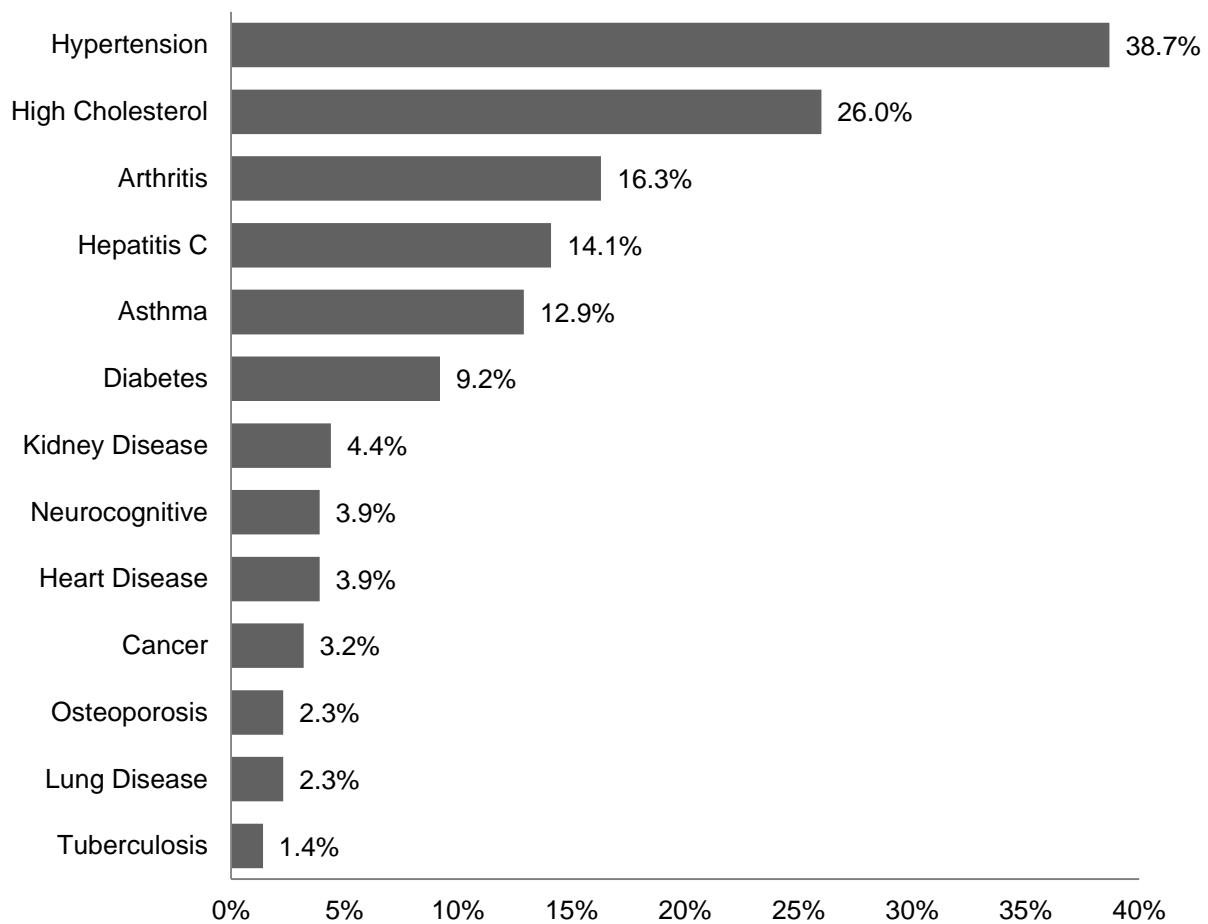
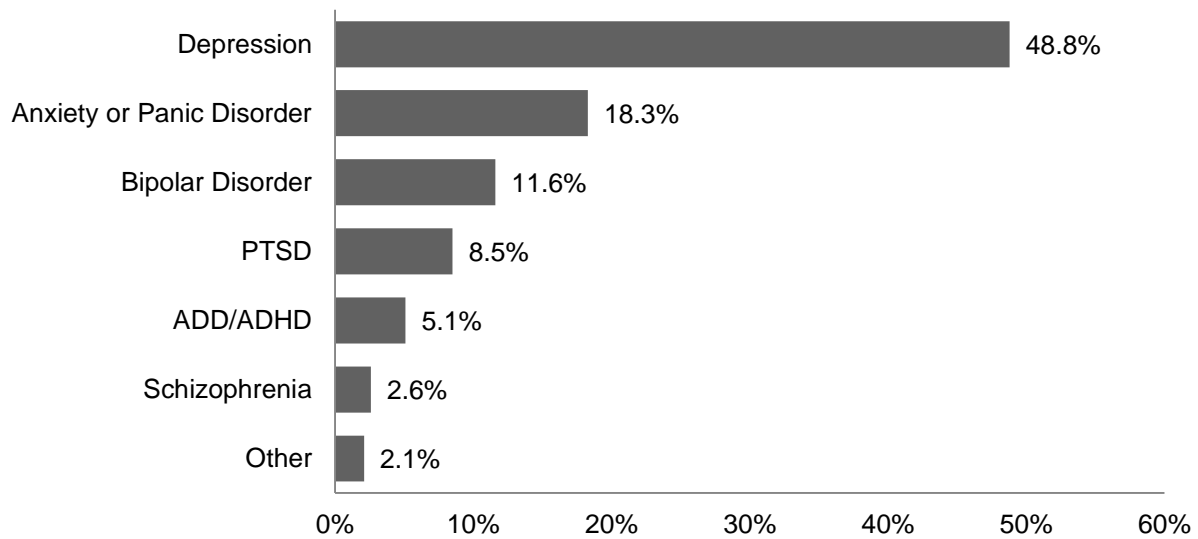


Figure C3. Medical Diagnoses (n=566)



- In addition to what is reported here, 38.3% of respondents indicated they have *none* of the listed diagnoses.
- Excluded from analysis are 4 respondents who selected at least one diagnosis and indicated that they have *none* of the listed diagnoses. The diagnoses these respondents indicated they have are *Arthritis* (2 respondents), *Asthma* (1 respondent), and *Hepatitis C* (1 respondent).
- Since respondents were permitted to select more than one category or not answer the question at all, the sum of all categories may not meet or may exceed 100%. Out of the 349 respondents who indicated they have at least one of these diagnoses, 221 (63.3%) reported two or more medical diagnoses.

Figure C4. Mental Health Diagnoses (n=568)



- Abbreviations: PTSD = Post-Traumatic Stress Disorder; ADD/ADHD= Attention Deficit Disorder/ Attention Deficit Hyperactivity Disorder
- In addition to what is reported here, 43.8% of respondents indicated they have *none* of the listed diagnoses.
- Excluded from calculations is one respondent who selected at least one diagnosis in addition to indicating *none* of the listed diagnoses.
- Since respondents were permitted to select more than one category or not answer the question at all, the sum of all categories may not meet or may exceed 100%. Out of the 319 respondents who indicated they have at least one of these diagnoses, 129 (40.4%) reported two or more mental health diagnoses.

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

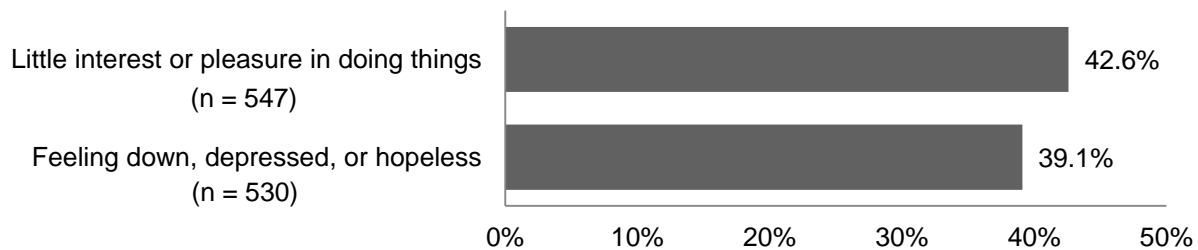
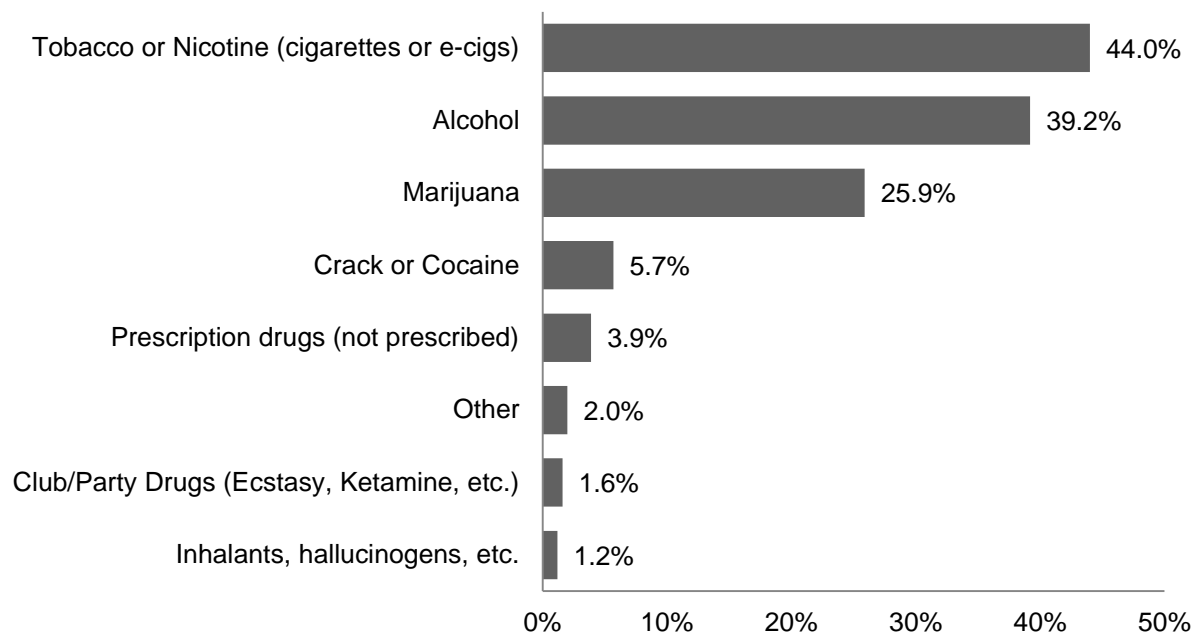


Figure C6. Self-Reported Substance Use in the Past 12 Months (n=564)



- In addition to what is reported here, 39.5% of respondents indicated they used *none* of the listed substances, and less than 1% of individuals reported that they used *Heroin*.
- Excluded from calculations are 2 respondents who indicated using at least one substance and indicated that they used *none* of the listed substances.
- Since respondents were permitted to select more than one category or not answer the question at all, the sum of all categories may not meet or may exceed 100%. Out of the 341 respondents who indicated they used at least one of these substances, 214 (62.8%) reported using two or more substances.

Health Seeking Behavior

Figure C7. HIV-Specific Primary Medical Care Visits in Past Year (n=563)

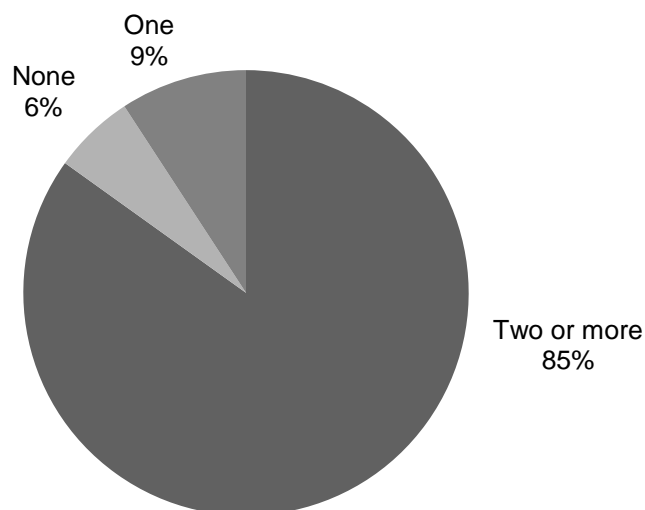
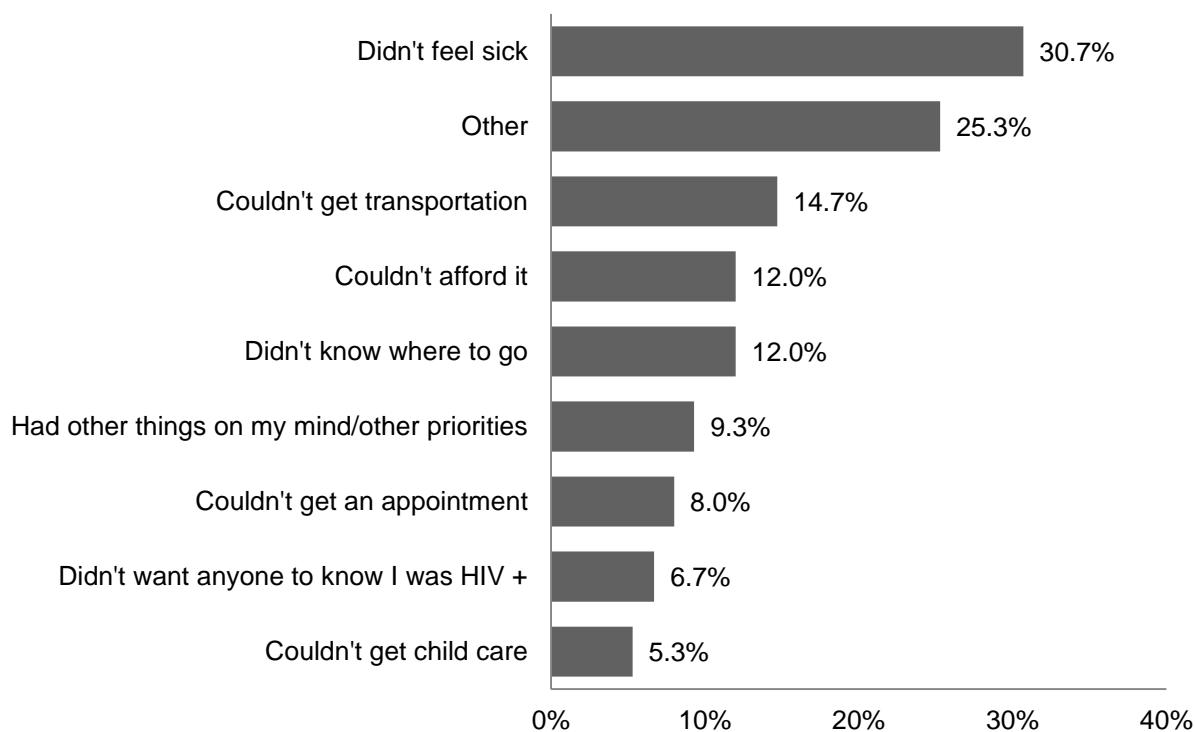
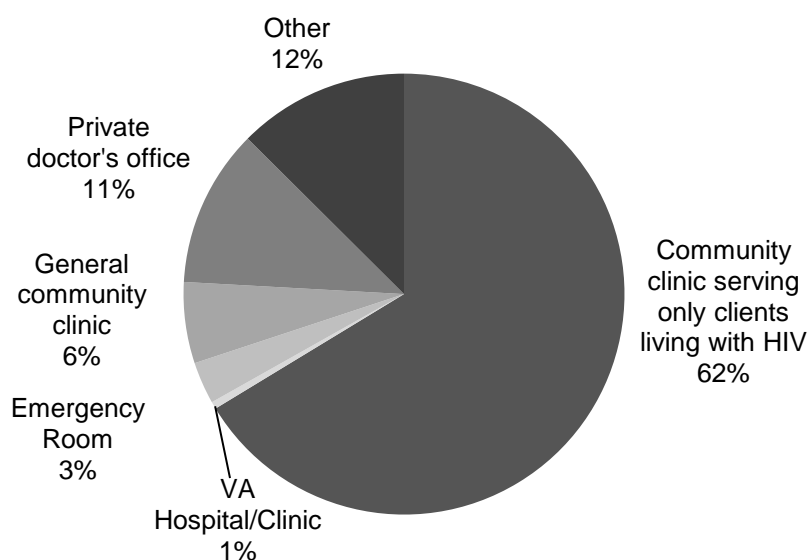


Figure C8. Reasons for Not Having an HIV-Related Primary Care Visit in the Last Year (n=75)



- Since respondents were permitted to select more than one category or not answer the question at all, the sum of all categories may not meet or may exceed 100%. Out of the 75 respondents who indicated at least one reason for not having an HIV-related primary care visit in the last year, 7 (9.3%) reported two or more reasons.
- Respondents were able to identify reasons other than those given for not having an HIV/AIDS-related primary care visit in the last year. Out of the 19 respondents who chose *other*, 8 provided written responses. Responses written in by more than one respondent are: don't know (2 respondents) and not HIV+ (2 respondents).

Figure C9. Places Where Respondent Regularly Receives HIV/AIDS-Related Medical Care (n=558)



- In addition to what is reported here, 6% of respondents indicated they *don't receive care*.

HIV Medication and Medical Adherence

Figure C10. Currently Taking HIV Medications Prescribed by a Doctor (n=563)

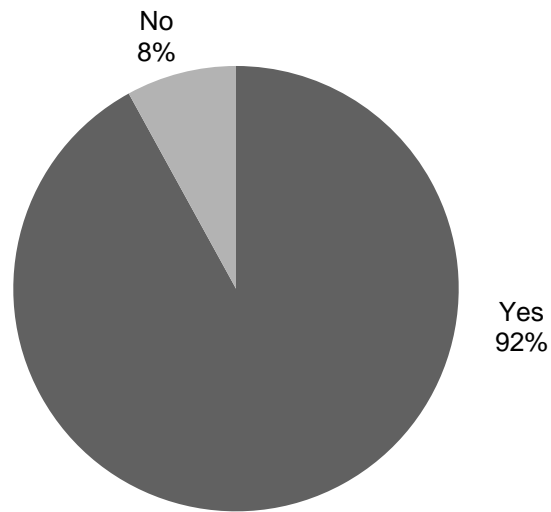
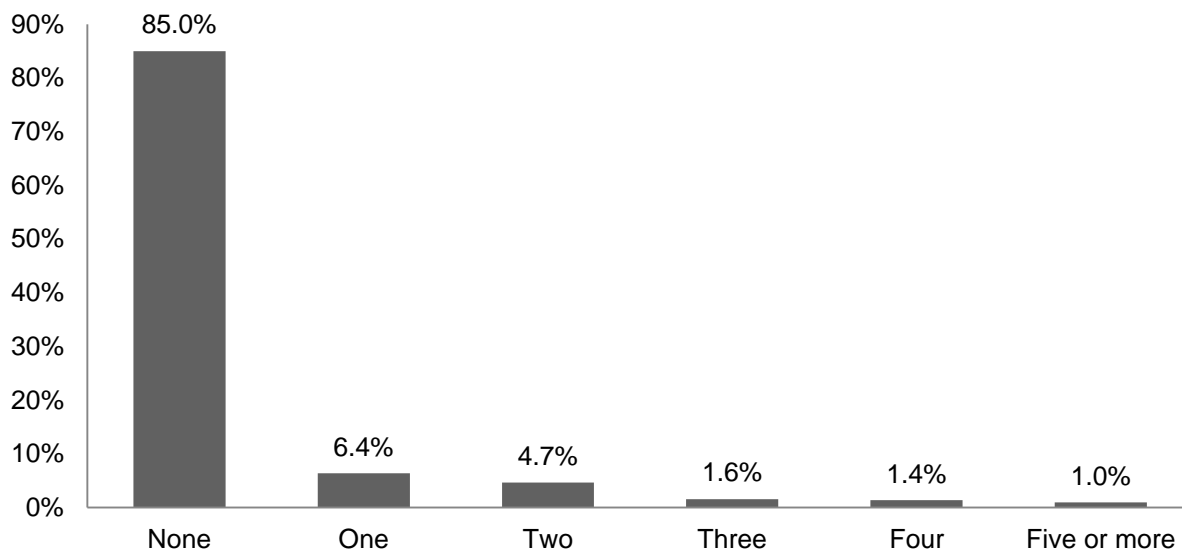
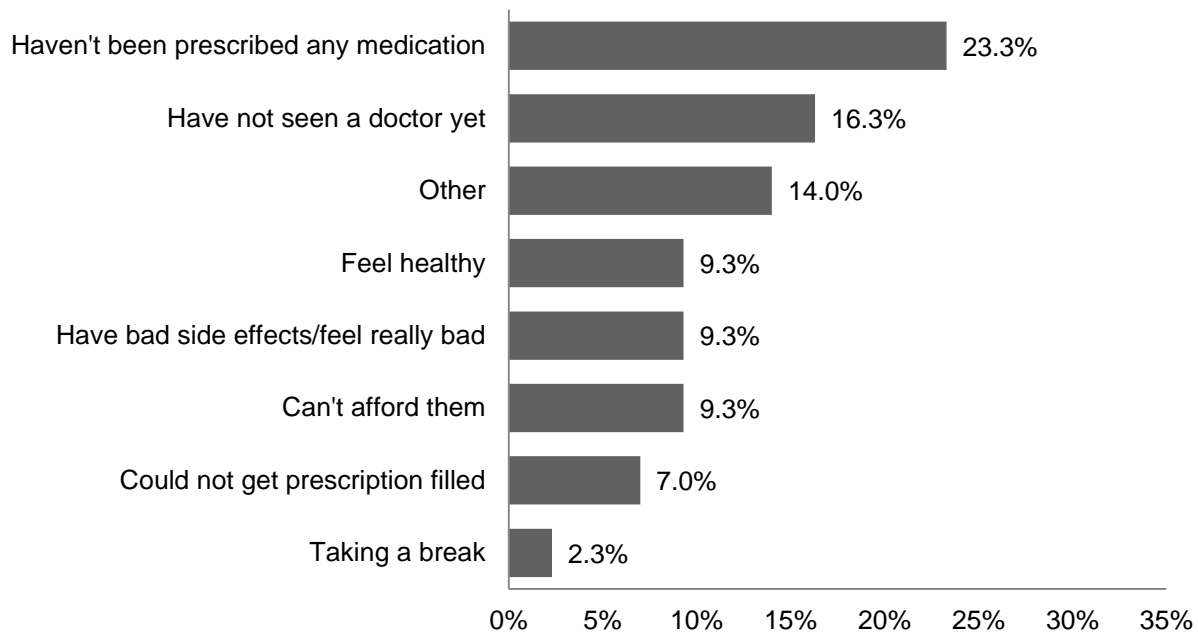


Figure C11. Number of Doses Missed in Last Three Days (n=514)



- Of the respondents that answered this question, 54 provided the following reasons for why they missed a dose of medication in the last three days: they forgot to take it (22 respondents), other reasons (9 respondents), they did not have the medication (8 respondents), they fell asleep or overslept (5 respondents), N/A (4 respondents), they did not eat (3 respondents), and they were too busy (3 respondents).

Figure C12. Reasons for Not Taking HIV/AIDS Medication (n=43)



- In addition to what is reported here, 32.6% of respondents indicated *N/A: I am taking HIV medications as prescribed.*
- Since respondents were permitted to select more than one category or not answer the question at all, the sum of all categories may not meet or may exceed 100%. Out of the 29 respondents who indicated at least one reason for not taking their HIV/AIDS medication, 6 (20.7%) reported two or more reasons.
- No respondents reported having trouble remembering to take their HIV/AIDS medication as a reason for not taking them.

D. Need and Use of Services

Figure D1. Need and Receipt of Core Medical Services

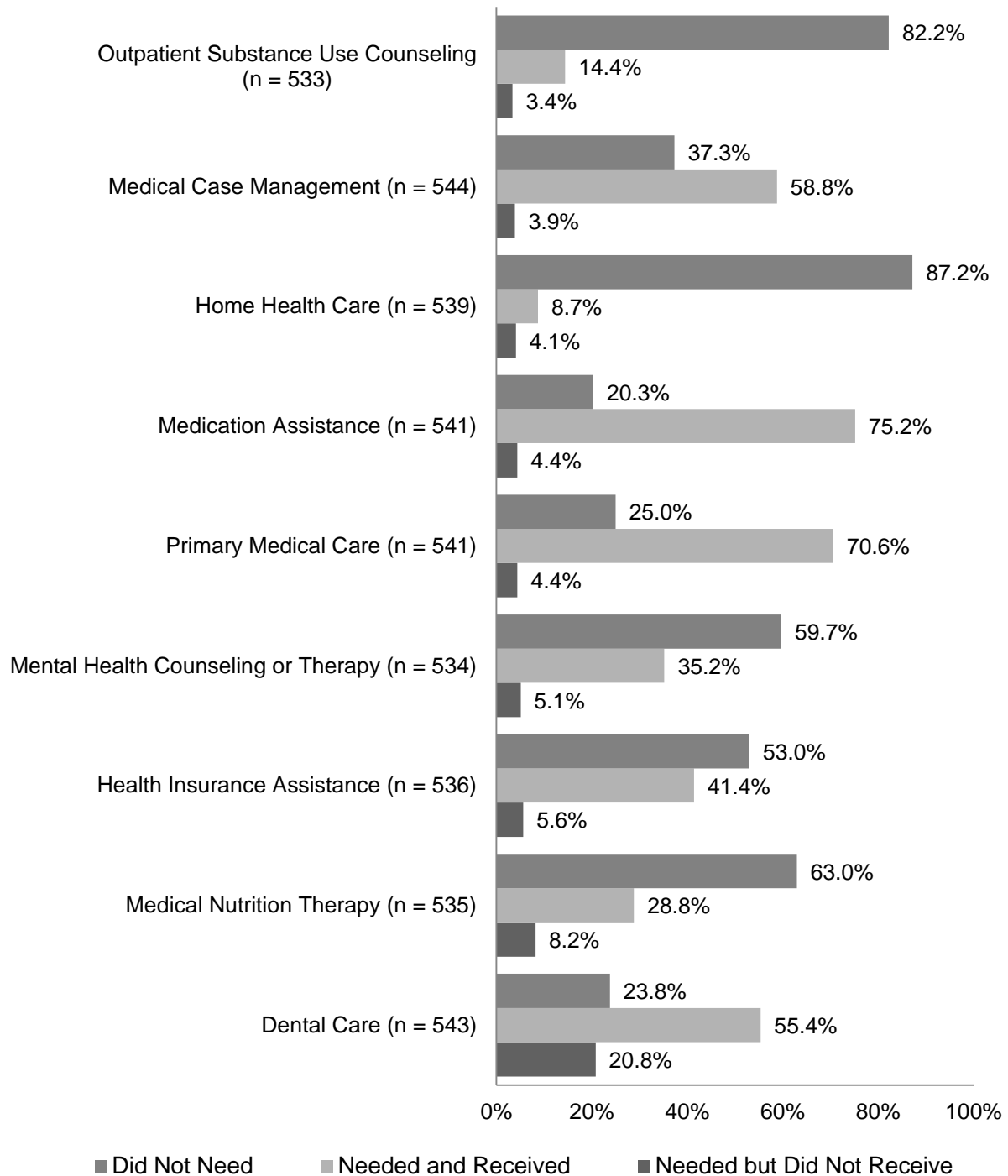


Figure D2. Use of Housing Services

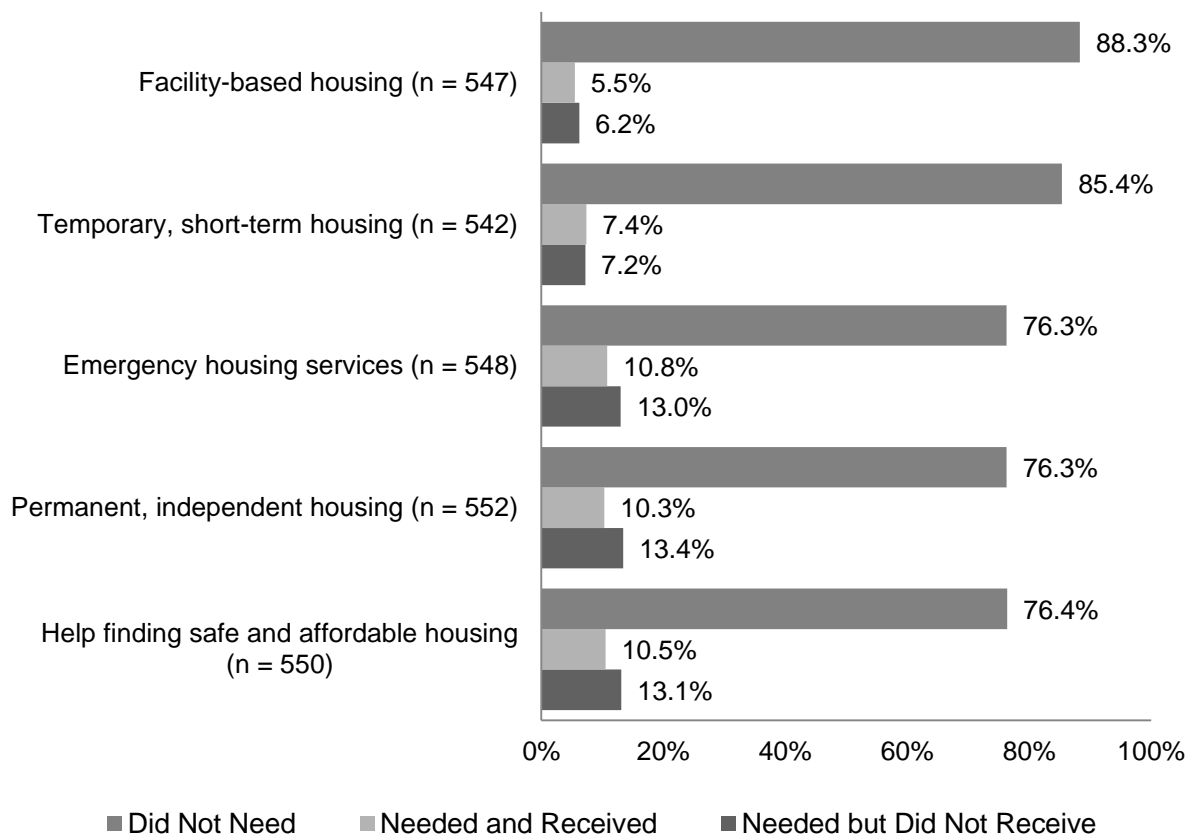


Figure D3. Use of Support Services

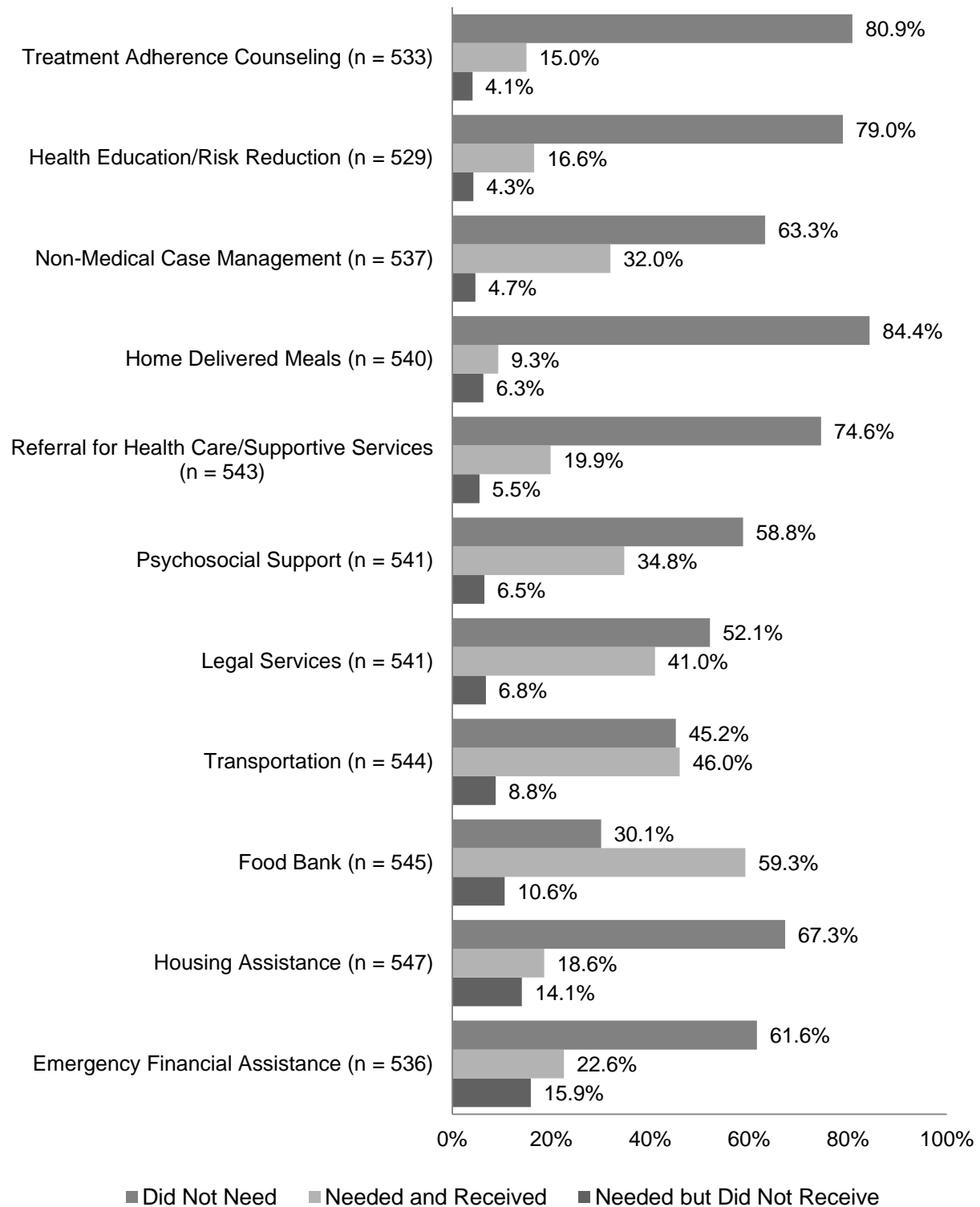
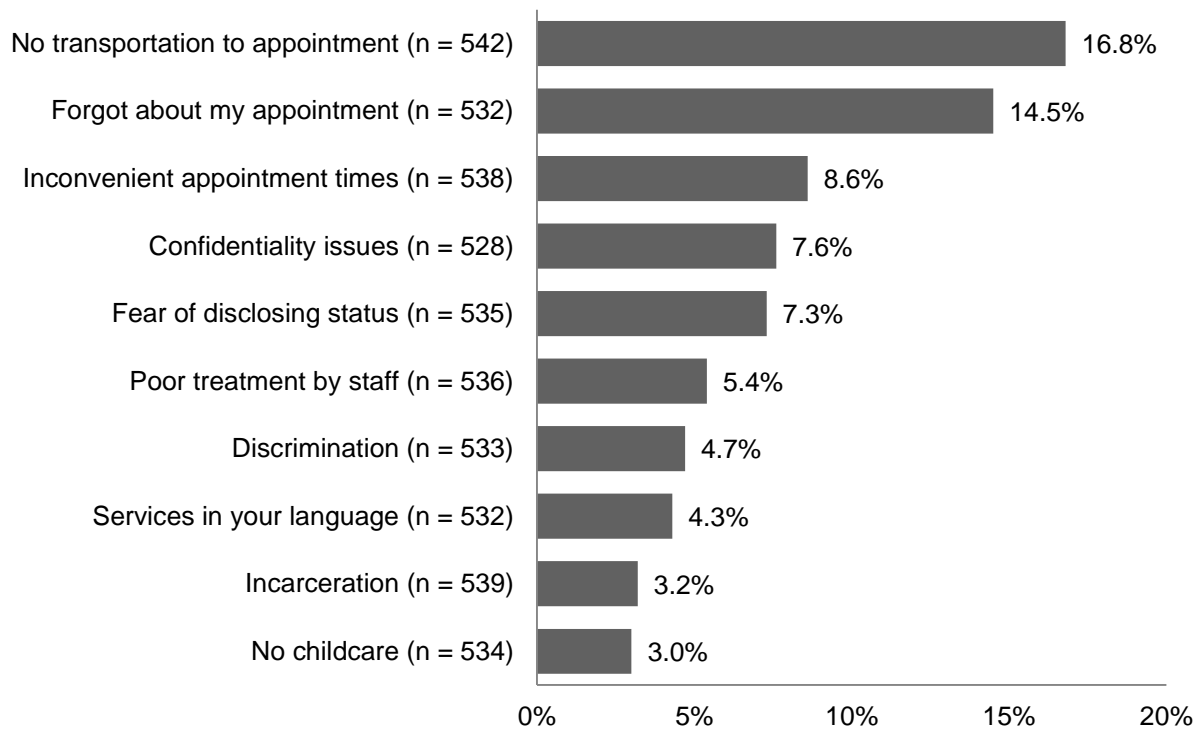


Figure D4. Reasons unable to get services



Appendix A. Ranked Needs and Gaps

Table I1. Services Ranked by Needs

Ranking	Service	Total responses (n)	Number who needed it	% who needed it
1	Medication Assistance	541	431	80%
2	Dental Care	543	414	76%
3	Primary Medical Care	541	406	75%
4	Food Bank	545	381	70%
5	Medical Case Management	544	341	63%
6	Transportation	544	298	55%
7	Legal Services	541	259	48%
8	Health Insurance Assistance	536	252	47%
9	Psychosocial Support	541	223	41%
10	Mental Health Counseling or Therapy	534	215	40%
11	Emergency Financial Assistance	536	206	38%
12	Medical Nutrition Therapy	535	198	37%
13	Non-Medical Case Management	537	197	37%
14	Housing Assistance	547	179	33%
15	Referral for Health Care/Supportive Services	543	138	25%
16	Permanent, independent housing	552	131	24%
17	Help finding safe and affordable housing	550	130	24%
18	Emergency housing services	548	130	24%
19	Health Education Risk/Risk Reduction	529	111	21%
20	Treatment Adherence Counseling	533	102	19%
21	(Outpatient) Substance Use Counseling or Therapy	533	95	18%
22	Home Delivered Meals	540	84	16%
23	Temporary, short-term housing	542	79	15%
24	Home Health Care	539	69	13%
25	Facility-based housing	547	64	12%

- This table presents services ranked by need.
- The “total responses” or “n” represents the number of respondents who answered each question about the need of services. Those who responded ‘needed and received’ or ‘needed but did not receive’ are included in the ‘Number who needed it’ column.

Table I2. Services Ranked by Gaps

Ranking	Service	Total responses (n)	Number who needed it, but didn't receive it	% who needed it, but didn't receive it
1	Dental Care	543	113	21%
2	Emergency Financial Assistance	536	85	16%
3	Housing Assistance	547	77	14%
4	Permanent, independent housing	552	74	13%
5	Help finding safe and affordable housing	550	72	13%
6	Emergency housing services	548	71	13%
7	Food Bank	545	58	11%
8	Transportation	544	48	9%
9	Medical Nutrition Therapy	535	44	8%
10	Temporary, short-term housing	542	39	7%
11	Legal Services	541	37	7%
12	Psychosocial Support	541	35	7%
13	Home Delivered Meals	540	34	6%
14	Facility-based housing	547	34	6%
15	Health Insurance Assistance	536	30	6%
16	Referral for Health Care/Supportive Services	543	30	6%
17	Mental Health Counseling or Therapy	534	27	5%
18	Non-Medical Case Management	537	25	5%
19	Primary Medical Care	541	24	4%
20	Medication Assistance	541	24	4%
21	Health Education Risk/Risk Reduction	529	23	4%
22	Home Health Care	539	22	4%
23	Treatment Adherence Counseling	533	22	4%
24	Medical Case Management	544	21	4%
25	(Outpatient) Substance Use Counseling or Therapy	533	18	3%

- This table presents services ranked by gaps experienced.
- The “total responses” or “n” represents the number of respondents who answered each question about the need of services. Those who responded ‘needed but did not receive’ are included in the ‘Number who needed it, but didn’t receive it’ column.’
- Because there is variation in “n”, the percentages do not accurately reflect how gaps in services compare (i.e., the percentages do not capture which services have the largest gaps). Therefore, gaps are ranked by the frequency of gaps, or the number of respondents reporting they needed a service but did not receive it.

Appendix B – Methods

To collect data for the *2015 Needs Assessment*, a convenience sample survey on the current care service needs of PLWH was conducted with consumers of HIV/AIDS services in NO EMA. The survey was conducted at four agencies that provide HIV/AIDS-related medical care and services using a self-administered questionnaire available in both English and Spanish. Consumers were eligible to take the survey over a five week period, from March 9 to April 17, 2015. Survey administration was managed by the New Orleans Regional AIDS Planning Council (NORAPC). As incentives for their participation, consumers who participated in the survey were offered a raffle ticket for a chance to win one of five Kindle Fire HD tablets. Peer Survey Administrators were used to promote the *2015 Needs Assessment* at their local agencies and in the community, assist consumers in completing the questionnaire, and distribute and document raffle tickets. This section describes the instrument, sample, and procedures used in this needs assessment.

Instrument

The *2015 Needs Assessment Survey* was created at NORAPC with feedback from Office of Public Health STD/HIV Program, City of New Orleans Office of Health Policy and AIDS Funding, Collaborative Solutions, Inc., and clients in the EMA. The Louisiana Latino Health Coalition (LLHC) assisted in developing the Spanish translation of the survey.

The questionnaire comprises the following six sections: Health Insurance, HIV-Specific Primary Medical Care, HIV Medication, Housing, General Information, and Income. The instrument has a total of 40 primary questions, three sub-questions to account for skip patterns and questions not applicable to certain individuals, and seven multiple category questions with 45 total categories. Thus, the instrument contains 88 total questions within seven pages. Questions are mostly closed-ended, including multiple-selection, dichotomous, and select-all-that-apply response options. Some questions include an “other” category so that consumers can write in a unique response if the available categorical response options are not comprehensive enough. From the field-testing of the instrument, the questionnaire is expected to take between 30 and 45 minutes to complete.

Sample

Ryan White funding structures were used to organize administration of the *2015 Needs Assessment*. OPH specified a convenience sampling method in the initial Request for Proposal. In NO EMA, NORAPC determined that the desired sample size would be 600 people, stratified by agency. NO EMA includes all parishes in Region I (Orleans, St. Bernard, Plaquemines, and Jefferson), and several additional parishes from Region III (St. Charles, St. John the Baptist, and St. James) and Region IX (St. Tammany). These parishes are highlighted in Figure 1 below.

Figure 1. Map of Louisiana with New Orleans Metropolitan Statistical Area in Gray



The survey used convenience sampling, which means that the sample is not considered representative of all PLWH in the NO EMA, but rather a subset of that population that shares the characteristics – observed and unobserved – with those who were asked and responded to the questionnaire. Because the survey was additionally stratified by agency, the resulting sample will be weighted according to the proportions of the sub-samples. Any PLWH who walked into any one of the participating agencies and was at least 18 years old during the administration period was eligible to complete the *2015 Needs Assessment Survey*.¹ NORAPC staff were in regular communication with each local agency during survey administration to ensure that the sampling size target was being met.

Partners

The NO EMA *2015 Needs Assessment* was conducted with the cooperation of four agencies across NO EMA. Partner agencies were responsible for distributing questionnaires and raffle tickets to consumers and tracking the distribution of raffle tickets. A partner list is provided in Appendix B.

Peer survey administrators were assigned to work in each partner agency; their role was to manage administration of questionnaires and distribution of raffle tickets, as well as serve as the point of contact

¹ At one agency, a mother filled out surveys for her two children with HIV who were under the age of eighteen.

during data collection for NORAPC. Peer survey administrators were selected based on responses to applications submitted. Preference was given to those with previous experience administering surveys as well as their ability to reach consumers. The peer survey administrators' responsibilities included promoting the *2015 Needs Assessment* at their local agency and in the community, helping consumers complete the survey, collecting all surveys, and distributing and documenting raffle tickets. Peer survey administrators were paid \$50 weekly for two days of work in the form of two \$25 Walmart gift cards by NORAPC.

Training

All peer survey administrators who were involved with the administration of the NO EMA *2015 Needs Assessment* received training at NORAPC. The training covered survey administration, an overview of the questionnaire, management of incentives, logistics and planning, and appropriate ways to engage consumers.

Administration

All of the materials necessary to begin collecting data, including questionnaires, raffle tickets, and writing utensils, were provided by NORAPC to the partner agencies. Data were collected in NO EMA from March 9 to April 17, 2015. Each agency had a target for the number of questionnaires it aimed to administer to consumers. Agencies were provided with the specific number of questionnaires needed to reach their target.

During the data collection period, each consumer who visited a participating agency was offered the chance to take the *2015 Needs Assessment Survey*. Peer survey administrators were involved in recruiting consumers for the survey. Participation was completely voluntary, and consumers could decide whether they wanted to participate in the raffle. Peer survey administrators asked each consumer whether they would be willing to take an anonymous survey about the services they need. Each consumer who agreed to participate was given survey materials, including the paper version of the questionnaire, instructions, a clipboard, and a pen. The instruction sheet explained the purpose of the *2015 Needs Assessment*, how long it would take to complete the questionnaire, that participation was completely voluntary, details about the raffle, and a reminder that consumers could only complete one questionnaire.

The questionnaire was completed by the consumer at the designated agencies. Consumers were assured that the survey was completely anonymous, that their responses would not be used to identify them, and that the information collected would be used only for planning purposes. For consumers requiring assistance with the survey, the peer survey administrator would read each question and mark the corresponding response.

Once the consumer completed his/her questionnaire, the peer survey administrators performed quality checks on a specific set of questions. Consumers were then given the opportunity to fill out a raffle ticket for a chance to win one of five Kindle Fire HD tablets as a gesture of appreciation for his/her time and participation. Completed surveys and raffle tickets were placed in separate secure envelopes and returned to NORAPC weekly. In May 2015, NORAPC delivered all completed questionnaires to PRG.

Data Entry and Cleaning

Data entry began as soon as the questionnaires were received by PRG. Questionnaires were counted, marked with a unique ID number, and grouped into stacks of 50. Each questionnaire in a stack was entered into an online *Remark Web Survey* data form that was created by PRG. Once a stack of 50 questionnaires was entered, 10% of the questionnaires from the stack were randomly chosen, and

responses on the paper instruments were compared with the corresponding data in the data set. If any errors were found in the first 10% data check, a subsequent 10% data check was completed. This process continued until no errors were found in a 10% data check, or all 50 questionnaires in a stack were checked. This was done to ensure data entry accuracy. Once all questionnaires were entered and cleaned, they were converted to Stata 12.1.

Data Preparation

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

As previously mentioned, some questions allowed respondents to provide “other” responses if they felt that their situation was not represented by the given answers. PRG reviewed responses to all questions with an “other” category. For each particular question, if over 20% of respondents in NO EMA selected the “other” category, we report any response written in by more than one respondent below the appropriate figure. The responses are presented from most common to least common. It should be noted that not all persons who responded “other” provided written-in responses.

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

For this report, two separate tables were generated, which ranked services needed and services in which respondents reported a gap (needed the service but did not receive it). For Table I1, ranking was determined by the total number of respondents who provided a response that they either “Needed & received” or “Needed but did not receive” each service. For Table I2, ranking was determined by the total number of respondents who provided a response that they “Needed but did not receive” each service. In each table, the service with the highest number of respondents is ranked first, and the service with the lowest number of respondents is ranked last.

Appendix C – List of Partners

New Orleans Eligible Metropolitan Area:

Crescent Care including NO/AIDS Task Force and the Family Advocacy, Care & Education Services
Program of Children's Hospital (FACES)

HIV Outpatient Program at the Interim LSU Hospital

Priority Health Care, Inc.

Southeast Louisiana Area Health Education Center

Appendix D – Survey Instrument

Please STOP if you have already taken this survey. Each individual is only allowed to take this survey ONE TIME.

What is this survey for?

The survey asks people living with HIV/AIDS (PLWHA) in Louisiana what HIV/AIDS services they need and what HIV/AIDS services they are getting. The information that is gathered from these surveys helps determine what services will be offered to PLWHA for the next 2 years. Data is being collected from March 9 – April 17.

Why should you complete this survey?

Completing this survey gives YOU a voice and helps us understand your needs relating to HIV/AIDS services. We won't know the services you need most unless YOU tell us. Your input *does* matter. Plus, you will be entered in a raffle to win one of five Kindle Fire HD tablets just for completing the survey!

How long will this survey take?

This survey takes 30-45 minutes to complete. Please take as long as you need to answer **each** question. If there is a question you do not understand, please ask for help from the survey coordinator.

Do I have to complete this survey in order to receive HIV/AIDS services?

No. Please understand the completion of this survey is strictly voluntary. If you do not want to complete the survey, it will not affect the services you receive. You may stop the survey at any time or skip any question that you do not want to answer.

Will this information be used to identify me as an individual?

No. All information collected through this survey is completely confidential and anonymous. Please do not put your name or any identifying information on this survey. The information is collected for planning purposes only and the individual's information will NOT be shared with anyone.

How will I know if I won the raffle?

Raffle drawing will take place April 27th once all surveys have been completed. Winners will then be contacted to receive their new Kindle Fire HD tablet!

If you need help taking this survey, please ask the peer coordinator or agency staff for help. If you have any further questions regarding this survey, please contact Nicole Muriithi at the New Orleans Regional AIDS Planning Council (NORAPC) at 504-821-7334.

HEALTH INSURANCE

1) What kind of health insurance do you have that covers your HIV-related medical care and medications? (MARK ALL THAT APPLY)

- ☐ NO INSURANCE
- ☐ Private insurance through work/employer
- ☐ COBRA (continuation of insurance paid through your last employer)
- ☐ Private Insurance: Marketplace
- ☐ Private Insurance: through parent or spouse
- ☐ Medicare
- ☐ Medicaid (Bayou Health, People's Choice, etc.)
- ☐ Veteran's Administration (VA)
- ☐ Other (specify: _____)

2) If you selected *no insurance*, what is preventing you from getting health insurance? (MARK ALL THAT APPLY)

- ☐ N/A: I have insurance
- ☐ I can't afford it
- ☐ I don't know where to get it
- ☐ I was denied because of a previous medical condition
- ☐ I don't have proper U.S. residency (immigration) documents
- ☐ I was told I don't qualify
- ☐ It's not a priority for me at this time
- ☐ I don't have computer or internet access
- ☐ It's confusing, I don't understand
- ☐ I couldn't get the premium paid on time
- ☐ Other (specify: _____)

3) If on a private plan from the MARKETPLACE, how did you enroll? (MARK ALL THAT APPLY)

- ☐ N/A: I'm not on a private Marketplace plan
- ☐ Case Manager
- ☐ Certified Counselor
- ☐ Enroll Louisiana
- ☐ Yourself
- ☐ Other (specify: _____)

4) Do you get help with insurance premiums? (MARK ALL THAT APPLY)

- ☐ Yes, I am enrolled in HIP or HIA
- ☐ Yes, I use tax subsidies
- ☐ No, I don't know about any programs
- ☐ No, I don't need assistance
- ☐ I don't know

5) Select all the terms that you understand:

- ☐ Copay
- ☐ Co-insurance
- ☐ Deductible
- ☐ Premium
- ☐ None of these

6) Please tell us about any problems you have encountered with health insurance:

I've had trouble...

- ☐ Finding doctors in my network "in-network"
- ☐ Making specialty appointments
- ☐ Paying bills from hospitalization
- ☐ Paying premiums and/or copayments
- ☐ Other (specify: _____)
- ☐ None

7) Did you need any of the following services for non-HIV related reasons? (MARK ALL THAT APPLY)

- ☐ Outpatient care: private doctor, urgent care, annual check-up, vaccines, etc.
- ☐ Prescription drugs (excluding HIV medication)
- ☐ Maternity and newborn care
- ☐ Emergency Room visits
- ☐ Mental health and substance use treatment services
- ☐ Medical services for your child
- ☐ Hospital stay/surgeries/in-patient/admission

8) What other coverage do you need?

- ☐ Dental
- ☐ Vision
- ☐ Both
- ☐ None, I have one or both

HIV-SPECIFIC PRIMARY MEDICAL CARE

9) In general, how would you describe your overall health today? (MARK ONE)

- ☐ Excellent
- ☐ Very Good
- ☐ Good
- ☐ Fair
- ☐ Poor

10) How many HIV-specific PRIMARY MEDICAL CARE visits did you have in the LAST YEAR? (MARK ONE)

- ☐ One
- ☐ Two or more
- ☐ None

11) Where do you REGULARLY receive your HIV-related medical care? (MARK ONE)

- ☐ N/A: I don't receive any HIV-related medical care
☐ Emergency Room/ER
☐ Community clinic serving only clients living with HIV
☐ Private doctor's office/clinic
☐ Other community clinic that is not HIV-specific
☐ VA Hospital/Clinic
☐ Other (specify: _____)

12) If you did not have an HIV-related primary care visit in the last LAST YEAR, why not? (MARK ALL THAT APPLY)

- ☐ N/A: I had a HIV-related primary care visit in the last year
☐ I didn't know where to go
☐ I couldn't get an appointment
☐ I couldn't get transportation
☐ I couldn't get child care
☐ I couldn't afford it
☐ I had other things on my mind/other priorities
☐ I didn't want anyone to know I was HIV+
☐ I didn't feel sick
☐ Other (specify: _____)

13) Have you ever been diagnosed with any of the following? (MARK ALL THAT APPLY)

- | | |
|--|---|
| <input type="radio"/> NONE | <input type="radio"/> Lung Disease |
| <input type="radio"/> Hypertension | <input type="radio"/> Hepatitis C |
| <input type="radio"/> High Cholesterol | <input type="radio"/> Kidney Disease |
| <input type="radio"/> Arthritis | <input type="radio"/> Osteoporosis |
| <input type="radio"/> Asthma | <input type="radio"/> Neurocognitive |
| <input type="radio"/> Diabetes | (memory loss, difficulty moving body parts) |
| <input type="radio"/> Heart Disease | <input type="radio"/> Tuberculosis |
| <input type="radio"/> Cancer | |

14) Have you been diagnosed with any of the following? (MARK ALL THAT APPLY)

- ☐ NONE
☐ Depression
☐ Bipolar Disorder
☐ Anxiety or Panic Disorder
☐ ADD/ADHD
☐ Post-Traumatic Stress Disorder (PTSD)
☐ Schizophrenia
☐ Other (specify: _____)

15) Over the last 2 WEEKS, have you been bothered by either of the following problems?

- | | Yes | No |
|--|-----------------------|-----------------------|
| A) Little interest or pleasure in doing things | <input type="radio"/> | <input type="radio"/> |
| B) Feeling down, depressed, or hopeless | <input type="radio"/> | <input type="radio"/> |

16) Have you used any of the following during the past 12 MONTHS? (MARK ALL THAT APPLY)

- ☐ NONE
☐ Tobacco or Nicotine (cigarettes or e-cigs)
☐ Alcohol
☐ Marijuana
☐ Crack or Cocaine
☐ Heroin
☐ Inhalants, hallucinogens, etc.
☐ Club/Party Drugs (Ecstasy, Ketamine, etc.)
☐ Prescription drugs (not prescribed to you)
☐ Other (specify: _____)

HIV MEDICATION

17) Are you currently taking your HIV medications as prescribed by your doctor?

- ☐ Yes
 ☐ No

18) If you are NOT taking HIV medications as prescribed, why not? (MARK ALL THAT APPLY)

- ☐ N/A: I am taking HIV medications as prescribed.
☐ I haven't been prescribed any medication
☐ Could not get prescription filled
☐ I can't afford them
☐ They have bad side effects/make me feel really bad
☐ Taking a break
☐ I feel healthy
☐ I have trouble remembering to take them
☐ I have not seen a doctor yet
☐ Other (specify: _____)

19) How many doses have you missed in the last three days?

- A) ☐ None ☐ 2 ☐ 4
☐ 1 ☐ 3 ☐ 5 or more

B) Why did you miss doses? _____

20) How do you pay for your medication (s)?

- ☐ Louisiana Drug Assistance Program (LDAP) ☐ Other medication assistance
☐ Private, Public or Marketplace Insurance ☐ Not sure
☐ Does not apply

21) What is your current Viral Load? (MARK ONE)

- ☐ Undetectable
- ☐ Detectable (201-10,000 or more copies/mL)
- ☐ I don't know

HOUSING**22) How many people live in your household including yourself? (WRITE THE NUMBER ON THE LINE)**Number of **adults** (18 years or older)Number of **children** (under age 18)

____ How many are HIV+

____ How many are HIV+

____ How many are HIV-

____ How many are HIV-

____ I Don't know

____ I Don't know

23) Where do you live NOW and where did you live 6 MONTHS ago?

BE SURE TO ANSWER BOTH COLUMNS!!	NOW	6 Months Ago
A) Apartment/house/trailer that I OWN	<input type="radio"/>	<input type="radio"/>
B) Apartment/House/Trailer that I RENT	<input type="radio"/>	<input type="radio"/>
C) With your parents, relatives, or someone else's place	<input type="radio"/>	<input type="radio"/>
D) In a facility (boarding house, assisted living, half-way house, transitional housing, treatment facility, hospice, nursing home, other)	<input type="radio"/>	<input type="radio"/>
E) In jail or prison	<input type="radio"/>	<input type="radio"/>
F) Homeless/homeless shelter/domestic violence shelter	<input type="radio"/>	<input type="radio"/>

24) How much do you and/or your household pay "Out of Pocket" in rent/mortgage each month ?

25) Does this amount also include utilities?

Water & Garbage ☐ ☐

Electric & Gas ☐ ☐

26) How long have you lived in your current residence?

- ☐ Up to 6 months ☐ More than a year
- ☐ 6 months-1year ☐ I'm homeless

27) How many bedrooms are in your home?

- ☐ Single room/Studio ☐ 4 bdrm
- ☐ 1 bdrm ☐ 5+ bdrm
- ☐ 2 bdrm ☐ None, I'm homeless
- ☐ 3 bdrm

28) In the last year, how many nights have you NOT had a place to sleep?

29) If you had trouble getting housing in the last 6 months, what kept you from getting housing? (MARK ALL THAT APPLY)

- ☐ I did not have any problems
- ☐ I didn't have enough money for the deposit
- ☐ I could not find affordable housing
- ☐ I had no transportation to search for housing
- ☐ I had bad credit
- ☐ I was put on a waiting list
- ☐ I had a mental/physical disability
- ☐ I had a criminal record
- ☐ I didn't qualify for housing assistance
- ☐ I feel I was discriminated against
- ☐ I had substance use issues
- ☐ Other: _____

30) How much of an increase PER MONTH in rent or mortgage would cause you to have to find a new place to live?

- ☐ \$1-25 ☐ \$51-\$75 ☐ \$101-\$150
- ☐ \$26-\$50 ☐ \$76-\$100 ☐ \$151-\$200

31) Please tell us about your Core Medical Services needs over the LAST 6 MONTHS. Mark only one answer per service.	DID NOT NEED	NEEDED & RECEIVED	NEEDED BUT DID <u>NOT</u> RECEIVE
A) Medical Case Management			
B) Dental Care			
C) Primary Medical Care			
D) Medication Assistance			
E) Health Insurance Assistance			
F) Medication Reimbursement			
G) Mental Health Counseling or Therapy			
H) Medical Nutrition Therapy			
I) Home Health Care			
J) (Outpatient) Substance Use Counseling or Therapy			

32) Please tell us about your Supportive Services needs over the LAST 6 MONTHS. Mark only one answer per service.	DID NOT NEED	NEEDED & RECEIVED	NEEDED BUT DID <u>NOT</u> RECEIVE
A) Emergency Financial Assistance			
B) Food Bank			
C) Home Delivered Meals			
D) Housing Assistance			
E) Legal Services			
F) Psychosocial Support			
G) Transportation			
H) Non-Medical Case Management			
I) Health Education/Risk Reduction			
J) Referral for Health Care/Supportive Services			
K) Treatment Adherence Counseling			

33) Please tell us about your housing services needs over the LAST 6 MONTHS. Mark only one answer per service.	DID NOT NEED	NEEDED & RECEIVED	NEEDED BUT DID <u>NOT</u> RECEIVE
A) Someone to help you find safe and affordable housing			
B) Permanent, independent housing (house or apartment to rent including a place you may share)			
C) Temporary, short-term housing (shelter, hotel/motel, or other very temporary housing)			
D) Emergency housing services (money for utilities, rent, or mortgage)			
E) Facility-based housing (nursing home, assisted living facility for HIV+ residents, etc.)			

GENERAL INFORMATION

34) What is your HIV/AIDS Status? (SELECT ONE)

- ☐ HIV positive
☐ Diagnosed with AIDS
☐ Don't know

35) What year did you find out your HIV diagnosis?

36) Where did you receive your HIV Diagnosis?

- ☐ Hospital/ER
☐ HIV/AIDS community-based organization
☐ Local health center or STD clinic
☐ Private doctor's office
☐ Organization providing other services (e.g. substance use treatment)
☐ Jail or prison
☐ Other (specify: _____)

37) What is your zip code?

38) What is your gender?

- ☐ Male
☐ Female
☐ Transgender: male to female
☐ Transgender: female to male

39) How old are you?

- ☐ <18 years ☐ 45-64 years
☐ 18-24 years ☐ 65+ years
☐ 25-44 years

40) How do you describe your race?

- ☐ Black or African-American ☐ Native American
☐ White or Caucasian ☐ Multi-racial
☐ Asian or Pacific Islander ☐ Other (specify: _____)

41) Do you consider yourself to be Latino or Hispanic?

- ☐ Yes ☐ No

42) What is your primary language?

- ☐ English
☐ Spanish
☐ Other (specify: _____)

43) What is your highest level of education completed?

- ☐ Less than high school ☐ More than high school
☐ High school diploma/ GED ☐ Prefer not to answer

44) Do you consider yourself to be:

- ☐ Heterosexual or straight
☐ Gay or Lesbian
☐ Bisexual
☐ Prefer not to answer

INCOME

45) What is your employment status? (MARK ALL THAT APPLY)

- ☐ Full-time
☐ Part-time
☐ Temporary or contract work
☐ "Odd jobs"/work for cash/self-employed
☐ Retired
☐ Unemployed
☐ Disabled
☐ Student

46) What was your total household income LAST MONTH including money from those who live with you?

- ☐ No income

47) Which of these did you receive in the last 6 months? (SELECT ALL THAT APPLY)

Wages

- ☐ Wages/Stipend/salary from a job

Financial Assistance

- ☐ None of these
☐ SSI (Supplemental Security Income)
☐ SSDI (Social Security Disability Income)
☐ AFDC/TANF (Aid to Families with Dependent Children/Temporary Assistance to Needy Families)
☐ Child Support/Alimony
☐ Unemployment payments/benefits
☐ Food Stamps

Housing Assistance

- ☐ None of these
☐ Section 8
☐ Housing Choice Voucher
☐ Veteran's Housing
☐ Tenant Based Rental Assistance (TBRA)

48) During the LAST YEAR, were you unable to get services for any of the following reasons?
(MARK ALL THAT APPLY)

	YES	NO
A) No transportation to appointment		
B) No childcare		
C) Services in your language		
D) Trust/Privacy/confidentiality issues		
E) Fear of disclosing my status		
F) Discrimination because of sexual orientation or gender identity		
G) Incarceration		
H) Inconvenient appointment times		
I) Poor treatment by staff		
J) I forgot about my appointment		

49) Where do you get information about HIV ?

(SELECT ALL THAT APPLY)

- ☐ Doctor or nurse
- ☐ Case manager
- ☐ Health educator or out-reach
- ☐ HIV group or program
- ☐ Brochure
- ☐ Friends or family
- ☐ Partner/significant other/spouse
- ☐ TV/Internet/Radio
- ☐ Billboard or poster
- ☐ Faith-based group
- ☐ Mobile app
- ☐ Social media (Twitter, Facebook, etc.)
- ☐ Other (specify: _____)

50) Did someone explain the following things to you?

(SELECT ALL THAT APPLY)

- ☐ How to prevent transmission of HIV
- ☐ How to use condoms
- ☐ The importance of going to all your doctor visits
- ☐ How viral load is linked to preventing the spread of HIV
- ☐ How to talk to partners about condoms
- ☐ How to disclose status
- ☐ Legal issues of HIV, criminalization
- ☐ How to protect HIV-negative partners with PrEP
- ☐ The importance of taking your medication

THE END! Please tell us about any final comments here or on the back of the page. Thank you for completing this survey!