

# NEW JERSEY HIV/AIDS REPORT

June 30, 2007



Jon S. Corzine  
Governor

Public Health Services Branch  
Division of HIV/AIDS Services  
...preventing disease with care



Fred M. Jacobs, M.D., J.D.  
Commissioner

## Division of HIV/AIDS Services

...preventing disease with care

**Office of the Assistant Commissioner** (609) 984-5874

Medical Director (609) 984-6191  
 Policy and Planning  
 Special Projects and Initiatives

**Administrative Support Services Unit** (609) 984-5888

**Care and Treatment Services Unit** (609) 984-6328

AIDS Drug Distribution Program  
 Corrections Initiative  
 Health Insurance Continuation Program  
 HIV Care Consortia  
 HIV Counseling and Testing Program (609) 984-6125  
 HIV Early Intervention Program  
 HIV Home Health Care Program  
 Housing Opportunities for Persons with AIDS

**Epidemiologic Services Unit** (609) 984-5940

Case Reporting Forms  
 HIV/AIDS Statistics  
 Epidemiologic Studies  
 Notification Assistance Program-Newark (973) 648-7500

**Prevention and Education Services Unit** (609) 984-6050

Community-based HIV Prevention Projects  
 HIV Prevention Community Planning Group  
 HIV-related Training  
 NJ AIDS/STD Hotline 1-800-624-2377  
 Printed Material Distribution

Visit the New Jersey Department of Health and Senior Services' website:  
[www.state.nj.us/health](http://www.state.nj.us/health).

To request to have this report link e-mailed to you, to be added to our mailing list, or to request other information, contact us by telephone or by e-mail.

Telephone (609) 984-5940 e-mail [aids@doh.state.nj.us](mailto:aids@doh.state.nj.us)

**Questions?** Contact New Jersey HIV/AIDS Hotline 1-800-624-2377

## Highlights

- By mid 2007, 34,199 people are reported living with HIV or AIDS in New Jersey.
- Minorities account for 76% of adult/adolescent cumulative HIV/AIDS cases and 78% of all persons living with HIV/AIDS (Page 6).
- Injection drug use and sexual contact remain the major modes of exposure to HIV infection. The proportion of reported cases with HIV/AIDS who were exposed through injection drug use (IDU) is lower than in the past, while the proportion of cases that were exposed through sexual contact is increasing (Page 7).
- Seven of ten persons living with HIV/AIDS are 40 years of age or older (Page 10).
- Thirty-six percent of those living with HIV/AIDS are females; 69% of females are currently 20-49 years old.
- The number of annual pediatric infections has dropped over 90% (page 11).
- Over 7,000 HIV/AIDS patients received medications through the state's AIDS Drug Distribution Program (ADDP) in 2006 (page 12).
- More than 22,000 clients received HIV prevention services funded by the NJDHSS in 2006 (Page 13).
- In 2006 over 80,000 HIV tests were administered through Counseling and Testing Sites (page 14).
- Over 124,000 clients have been tested by rapid testing funded by the NJDHSS since November 1, 2003 (page 15).

## Special Features

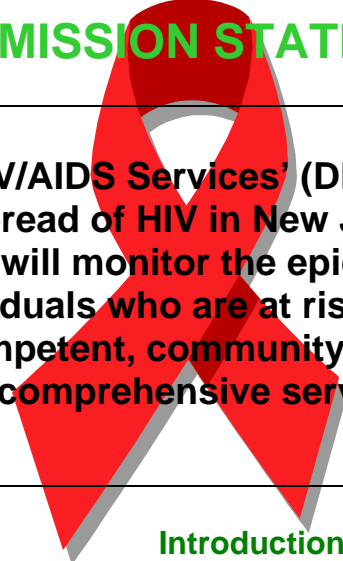
**The centerfold map** features a complete reporting of HIV/AIDS cases, pediatric HIV/AIDS infections, and perinatal exposure by county.

Copies of this report are available on the NJDHSS' website at [www.state.nj.us/health](http://www.state.nj.us/health). The website also contains complete county and municipal reports.



Look for these shoes to help you walk through the data!

## MISSION STATEMENT



**The Division of HIV/AIDS Services' (DHAS) mission is to prevent, treat, and reduce the spread of HIV in New Jersey. In keeping with this mission, the DHAS will monitor the epidemic and assure through its resources that individuals who are at risk or infected with HIV have access to culturally competent, community-based networks that provide qualitative and comprehensive services.**

### Introduction

The purpose of this report is to provide data that can be used for monitoring the epidemic and for planning services and prevention activities. All data in this report are based on cases that were reported to the Division of HIV/AIDS Services (DHAS) through June 30, 2007. A description of how these data are collected can be found in the June 2002 HIV and AIDS Surveillance Report. This is available on the NJDHSS' website at [www.state.nj.us/health](http://www.state.nj.us/health). If you would prefer to receive this report by e-mail contact us at [aids@doh.state.nj.us](mailto:aids@doh.state.nj.us) and we will e-mail you a link to the report.

### What can I find in this report?

#### Epidemiology

**Adult/Adolescent HIV/AIDS cases in each age group, in each racial/ethnic group, and for each HIV/AIDS exposure category by gender for the most recent year, as well as cumulatively.**

These tables show all adult/adolescent persons reported with HIV infection including those who have progressed to AIDS whether living or deceased. As new therapies become available, a larger percentage of cases will remain HIV positive for longer periods of time before developing AIDS. Looking at both HIV and AIDS status provides a more complete picture of the history of infection in the state than does data about AIDS alone. It is also important to note that cases reported in the past 12 months may have been diagnosed in previous years, but due to data transmission were only recently tabulated.

**Persons *living* with HIV or AIDS for each gender by age group, in each racial/ethnic group, and for each exposure category.**

These data show where the epidemic is now and where services are most needed.

## **Pediatric HIV/AIDS and Exposures**

These data show the number of individuals diagnosed while under the age of 13. The data include information on perinatal exposures and other pediatric infections.

## **HIV Prevention, Care and Treatment Services**

Updated data is presented for services provided through state funding, the Ryan White CARE Act, and the CDC funded HIV Prevention Cooperative Agreement.

## **Modified Risk Exposure Hierarchy**

Although we usually cannot determine exactly how or when a person was infected, it is possible to determine which behaviors exposed an individual to HIV infection. In the 1980s the Centers for Disease Control and Prevention (CDC) established a hierarchy to categorize modes of exposure for persons reported with AIDS based on their risk exposures. Behaviors most likely to lead to infection are higher in the hierarchy than those less likely to lead to infection. This hierarchy is described at [www.cdc.gov/hiv/stats/hasr1402/technotes.htm](http://www.cdc.gov/hiv/stats/hasr1402/technotes.htm).

Beginning in the June 2004 report, we began to use a modified risk hierarchy. Heterosexual contact with a person of unknown status was reported as “heterosexual contact with partners of unknown HIV risk.” Prior to that, these cases were reported as persons with unknown risk exposure. Heterosexual contact with persons of known risk are reported by the risk status of the partner. Due to improvements in the screening of donated blood, transfusions have been virtually eliminated as an exposure category for HIV infection. In this report, transfusion and hemophilia cases are reported in the “Other/Unknown” category.

The ascertainment of exposure category is incomplete, especially for cases reported recently. Some cases currently in the “Other/Unknown” category may be categorized later to known exposure categories as follow-up investigations are completed.

## **What won't this report tell me?**

Due to delays between diagnosis of HIV or AIDS and reporting to the DHAS, cases reported during the last 12 months may have been diagnosed in previous years. Also, many cases diagnosed in 2006 and 2007 may not be in this report. It is also important to note that individuals who are infected but not tested and diagnosed are not included in these reports. It is estimated that undiagnosed and unreported cases comprise approximately one-third of all estimated infections. The number of persons living with HIV/AIDS is only an estimate because of incomplete mortality data due to delays in reporting deaths of HIV/AIDS cases, and migration in or out-of-state. Therefore, the reported data underestimate true incidence, prevalence and mortality rates.

RACE/ETHNICITY DATA

**Table 1. New Jersey Adult/Adolescent HIV/AIDS Cases Reported July 2006 - June 2007 (1) and Cumulative Totals as of June 30, 2007 Racial/Ethnic Group by Gender**

Adults/ Adolescents (2)	MALE				FEMALE				TOTAL				Percentage of Cumulative Cases Who Are Female
	July 2006- June 2007		Cumulative Total		July 2006- June 2007		Cumulative Total		July 2006- June 2007		Cumulative Total		
	No.	(%)	No.	(%)	No.	(%)	No.	(%)	No.	(%)	No.	(%)	
White	310	25%	12,944	27%	104	17%	3,691	17%	414	22%	16,635	24%	22%
Black	600	49%	24,377	52%	392	63%	13,870	65%	992	53%	38,247	56%	36%
Hispanic	304	25%	9,461	20%	121	19%	3,588	17%	425	23%	13,049	19%	27%
Asian/Pac. Isl.	19	2%	252	1%	6	1%	91	0%	25	1%	343	1%	27%
Other/Unknown	4	0%	207	0%	1	0%	104	0%	5	0%	311	0%	33%
<b>Total</b>	<b>1,237</b>	<b>100%</b>	<b>47,241</b>	<b>100%</b>	<b>624</b>	<b>100%</b>	<b>21,344</b>	<b>100%</b>	<b>1,861</b>	<b>100%</b>	<b>68,585</b>	<b>100%</b>	<b>31%</b>

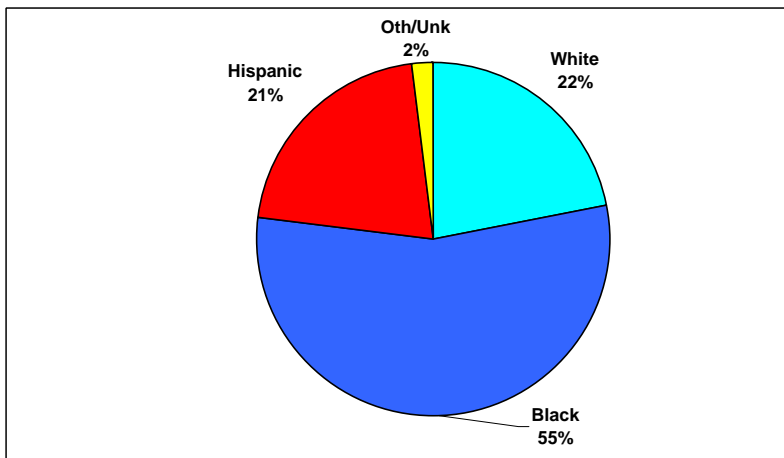
(1) Includes every new report of HIV infection received during the 12 month period, regardless of stage of disease (HIV or AIDS) at time of first report.  
 (2) Includes all patients 13 years of age or older at time of first diagnosis. Patients with missing specific age at diagnosis were not included.  
 Note: Percentages may not add to 100 due to rounding.

**Table 2. New Jersey Residents Living with HIV/AIDS as of June 30, 2007 Racial/Ethnic Group by Gender**

Race/Ethnicity	MALE		FEMALE		TOTAL		Percentage of Prevalent Cases Who Are Female
	No.	(%)	No.	(%)	No.	(%)	
White	5,464	25%	2,001	16%	7,465	22%	27%
Black	11,087	50%	7,764	64%	18,851	55%	41%
Hispanic	5,064	23%	2,262	19%	7,326	21%	31%
Asian/Pac. Isl.	195	1%	76	1%	271	1%	28%
Other/Unknown	187	1%	99	1%	286	1%	35%
<b>Total</b>	<b>21,997</b>	<b>100%</b>	<b>12,202</b>	<b>100%</b>	<b>34,199</b>	<b>100%</b>	<b>36%</b>

Note: Percentages may not add to 100 due to rounding.

**Figure 1. Percent Living with HIV/AIDS by Ethnicity**



Minorities account for 76% of the cumulative adult/adolescent HIV/AIDS cases.

Thirty-one percent of the cumulative HIV/AIDS cases are women.

Over half of persons living with HIV/AIDS are non-Hispanic Blacks.

Thirty-six percent of those living with HIV/AIDS are females. Four out of five females living with HIV/AIDS are minorities.

**Table 3. New Jersey Adult/Adolescent (1) HIV/AIDS Cases Reported July 2006-June 2007 (2) and Cumulative Totals as of June 30, 2007 Modified Exposure Category by Gender**

Modified Exposure Category (3)	MALE				FEMALE				TOTAL				% of Cum. Cases Female
	Jul.2006-Jun.2007		Cumulative Total		Jul.2006-Jun.2007		Cumulative Total		Jul.2006-Jun.2007		Cumulative Total		
	No.	(%)	No.	(%)	No.	(%)	No.	(%)	No.	(%)	No.	(%)	
MSM (4)	373	30%	13,452	28%	0	0%	0	0%	373	20%	13,452	20%	0%
IDU (4)	159	13%	18,705	40%	80	13%	8,339	39%	239	13%	27,044	39%	31%
MSM/IDU	18	1%	2,209	5%	0	0%	0	0%	18	1%	2,209	3%	0%
Heterosexual contact with partner(s):													
- injection drug user	6	0%	856	2%	22	4%	2,759	13%	28	2%	3,615	5%	76%
- bisexual male	0	0%	0	0%	3	0%	179	1%	3	0%	179	0%	100%
- HIV infection, risk Other/Unknown	94	8%	3,095	7%	120	19%	4,505	21%	214	11%	7,600	11%	59%
-partner(s) of unknown HIV risk (5)	340	27%	5,121	11%	297	48%	3,999	19%	637	34%	9,120	13%	44%
Other/Unknown (6)	247	20%	3,803	8%	102	16%	1,563	7%	349	19%	5,366	8%	29%
<b>Total number of individuals</b>	<b>1,237</b>	<b>100%</b>	<b>47,241</b>	<b>100%</b>	<b>624</b>	<b>100%</b>	<b>21,344</b>	<b>100%</b>	<b>1,861</b>	<b>100%</b>	<b>68,585</b>	<b>100%</b>	<b>31%</b>

- (1) Includes all patients 13 years of age or older at time of diagnosis. Patients with missing specific age at diagnosis were not included.  
 (2) Includes every new report of HIV infection received during the 12 month period, regardless of stage of disease (HIV or AIDS) at time of first report.  
 (3) Cases with more than one risk factor, other than the MSM/IDU combination listed in the table, are tabulated only in the group listed first. The heterosexual contact exposure category has been modified to include contact with partners of unknown HIV risk (see note 5).  
 (4) MSM = male-to-male sex. IDU = injection drug use.  
 (5) Includes patients with no other risk identified who had heterosexual contact with partner(s) whose HIV infection risk is undocumented/unknown.  
 (6) Includes patients who received transfusion, transplant or hemophilia treatment, whether or not blood products were documented to be HIV infected; patients with pediatric HIV exposures; and patients with no reported HIV exposure.

Note: Percentages may not add to 100 due to rounding.

**Table 4. New Jersey Residents Living with HIV or AIDS as of June 30, 2007 Modified Exposure Category by Gender**

Modified Exposure Category (1)	MALE		FEMALE		TOTAL		% of Cases Female
	No.	(%)	No.	(%)	No.	(%)	
MSM (2)	6,694	30%	0	0%	6,694	20%	0%
IDU (2)	6,004	27%	3,355	27%	9,359	27%	36%
MSM/IDU	845	4%	0	0%	845	2%	0%
Heterosexual contact with partner(s):							
- injection drug user	400	2%	1,364	11%	1,764	5%	77%
- bisexual male	0	0%	112	1%	112	0%	100%
- HIV infection, risk Other/Unknown	1,989	9%	3,068	25%	5,057	15%	61%
-partner(s) of unknown HIV risk(3)	3,489	16%	2,955	24%	6,444	19%	46%
Other/Unknown (4)	2,576	12%	1,348	11%	3,924	11%	34%
<b>Total number of individuals</b>	<b>21,997</b>	<b>100%</b>	<b>12,202</b>	<b>100%</b>	<b>34,199</b>	<b>100%</b>	<b>36%</b>

- (1) Cases with more than one risk factor, other than the MSM/IDU combination listed in the table, are tabulated only in the group listed first. The heterosexual contact exposure category has been modified to include contact with partners of unknown HIV risk (see note 3).  
 (2) MSM = male-to-male sex. IDU = injection drug use.  
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 (4) Includes patients who received transfusion, transplant or hemophilia treatment, whether or not blood products were documented to be HIV infected; patients with pediatric HIV exposures; and patients with no reported HIV exposure.

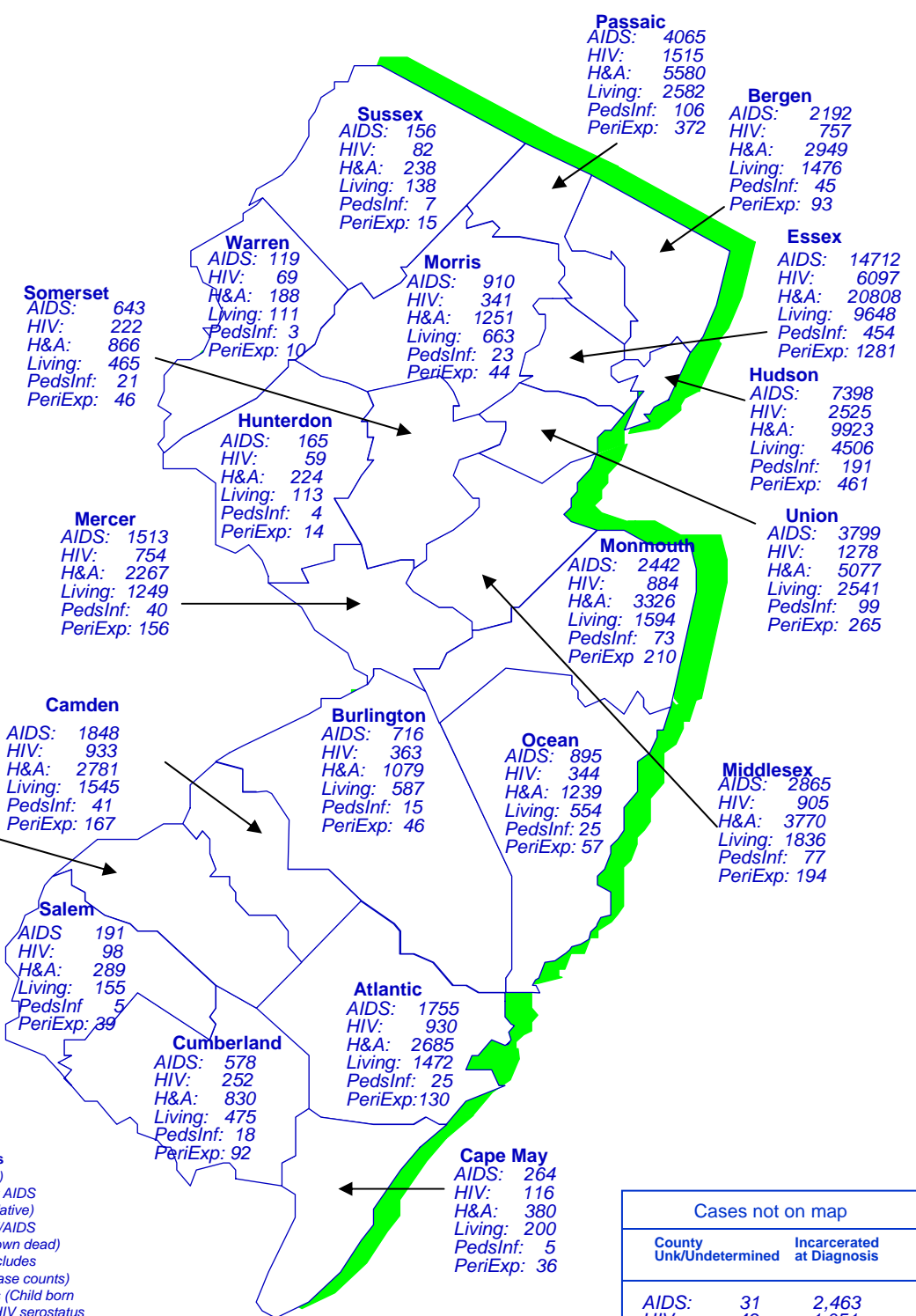
Note: Percentages may not add to 100 due to rounding.



Forty percent of all cumulative adult/adolescent HIV/AIDS cases were exposed by IDU, 29% by heterosexual contact, and 20% by male-to-male sex. Only 8% of cumulative cases (and 19% of cases recently reported in the last 12 months) were exposed through another risk factor, or had no risk exposure reported.

# CASES OF HIV/AIDS AND PERINATAL HIV EXPOSURE REPORTED AS OF JUNE 30, 2007

Statewide Summary Case Counts	
AIDS:	50,107
HIV:	19,807
H&A:	69,914
Living:	34,199
PedsInf:	1,332
PeriExp:	3,765



**Passaic**  
AIDS: 4065  
HIV: 1515  
H&A: 5580  
Living: 2582  
PedsInf: 106  
PeriExp: 372

**Bergen**  
AIDS: 2192  
HIV: 757  
H&A: 2949  
Living: 1476  
PedsInf: 45  
PeriExp: 93

**Sussex**  
AIDS: 156  
HIV: 82  
H&A: 238  
Living: 138  
PedsInf: 7  
PeriExp: 15

**Warren**  
AIDS: 119  
HIV: 69  
H&A: 188  
Living: 111  
PedsInf: 3  
PeriExp: 10

**Morris**  
AIDS: 910  
HIV: 341  
H&A: 1251  
Living: 663  
PedsInf: 23  
PeriExp: 44

**Essex**  
AIDS: 14712  
HIV: 6097  
H&A: 20808  
Living: 9648  
PedsInf: 454  
PeriExp: 1281

**Somerset**  
AIDS: 643  
HIV: 222  
H&A: 866  
Living: 465  
PedsInf: 21  
PeriExp: 46

**Hudson**  
AIDS: 7398  
HIV: 2525  
H&A: 9923  
Living: 4506  
PedsInf: 191  
PeriExp: 461

**Hunterdon**  
AIDS: 165  
HIV: 59  
H&A: 224  
Living: 113  
PedsInf: 4  
PeriExp: 14

**Union**  
AIDS: 3799  
HIV: 1278  
H&A: 5077  
Living: 2541  
PedsInf: 99  
PeriExp: 265

**Mercer**  
AIDS: 1513  
HIV: 754  
H&A: 2267  
Living: 1249  
PedsInf: 40  
PeriExp: 156

**Monmouth**  
AIDS: 2442  
HIV: 884  
H&A: 3326  
Living: 1594  
PedsInf: 73  
PeriExp: 210

**Camden**  
AIDS: 1848  
HIV: 933  
H&A: 2781  
Living: 1545  
PedsInf: 41  
PeriExp: 167

**Burlington**  
AIDS: 716  
HIV: 363  
H&A: 1079  
Living: 587  
PedsInf: 15  
PeriExp: 46

**Ocean**  
AIDS: 895  
HIV: 344  
H&A: 1239  
Living: 554  
PedsInf: 25  
PeriExp: 57

**Gloucester**  
AIDS: 387  
HIV: 189  
H&A: 576  
Living: 334  
PedsInf: 6  
PeriExp: 22

**Middlesex**  
AIDS: 2865  
HIV: 905  
H&A: 3770  
Living: 1836  
PedsInf: 77  
PeriExp: 194

**Salem**  
AIDS: 191  
HIV: 98  
H&A: 289  
Living: 155  
PedsInf: 5  
PeriExp: 39

**Atlantic**  
AIDS: 1755  
HIV: 930  
H&A: 2685  
Living: 1472  
PedsInf: 25  
PeriExp: 130

**Cumberland**  
AIDS: 578  
HIV: 252  
H&A: 830  
Living: 475  
PedsInf: 18  
PeriExp: 92

**Cape May**  
AIDS: 264  
HIV: 116  
H&A: 380  
Living: 200  
PedsInf: 5  
PeriExp: 36

**Legend for Summary Case Counts**  
 AIDS = AIDS cases (cumulative)  
 HIV = HIV Positive Cases, not AIDS  
 H&A = HIV/AIDS Cases (cumulative)  
 Living = Persons Living with HIV/AIDS (HIV/AIDS cases not known dead)  
 PedsInf = Pediatric Infections (includes all pediatric HIV/AIDS case counts)  
 PeriExp = Perinatal HIV Exposures (Child born to HIV+ mother, child's HIV serostatus is negative or indeterminate; NOT included in HIV/AIDS case counts)

Cases not on map		
County	Unk/Undetermined	Incarcerated at Diagnosis
AIDS:	31	2,463
HIV:	43	1,051
H&A:	74	3,514
Living:	70	1,885
PedsInf:	48	1
PeriExp:	16	0

**Table 5. New Jersey Adult/Adolescent HIV/AIDS Cases Reported July 2006 - June 2007 (1) and Cumulative Totals as of June 30, 2007**  
**Age at Diagnosis by Gender**

Known Age at Diagnosis	MALE				FEMALE				TOTAL				Percentage of Cumulative Cases Who Are Female
	Jul. 2006- Jun. 2007		Cumulative Total		Jul. 2006- Jun. 2007		Cumulative Total		Jul. 2006- Jun. 2007		Cumulative Total		
	No.	(%)	No.	(%)	No.	(%)	No.	(%)	No.	(%)	No.	(%)	
13-19	29	2%	412	1%	20	3%	473	2%	49	3%	885	1%	53%
20-29	216	17%	7,982	17%	113	18%	5,166	24%	329	18%	13,148	19%	39%
30-39	326	26%	20,381	43%	167	27%	9,306	44%	493	26%	29,687	43%	31%
40-49	386	31%	13,073	28%	210	34%	4,565	21%	596	32%	17,638	26%	26%
Over 49	280	23%	5,393	11%	114	18%	1,834	9%	394	21%	7,227	11%	25%
<b>Total</b>	<b>1,237</b>	<b>100%</b>	<b>47,241</b>	<b>100%</b>	<b>624</b>	<b>100%</b>	<b>21,344</b>	<b>100%</b>	<b>1,861</b>	<b>100%</b>	<b>68,585</b>	<b>100%</b>	<b>31%</b>

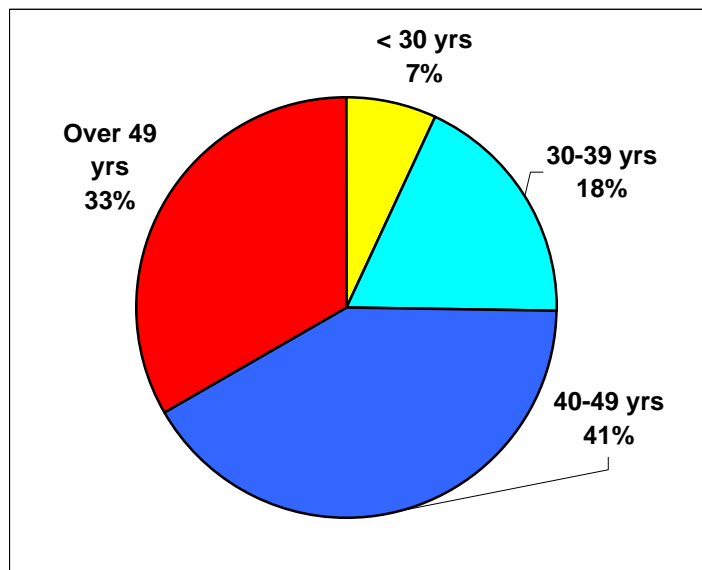
(1) Includes every new report of HIV infection received during the 12 month period, regardless of stage of disease (HIV or AIDS) at time of first report.

Note: Percentages may not add to 100 due to rounding.

**Table 6. New Jersey Residents Living with HIV/AIDS as of June 30, 2007**  
**Current Age by Gender**

Current Age	MALE		FEMALE		TOTAL		Percentage of Prevalent Cases Who Are Female
	No.	(%)	No.	(%)	No.	(%)	
0-12	121	1%	125	1%	246	1%	51%
13-19	234	1%	232	2%	466	1%	50%
20-29	1,081	5%	731	6%	1,812	5%	40%
30-39	3,614	16%	2,613	21%	6,227	18%	42%
40-49	8,924	41%	5,129	42%	14,053	41%	36%
Over 49	8,023	36%	3,372	28%	11,395	33%	30%
<b>Total</b>	<b>21,997</b>	<b>100%</b>	<b>12,202</b>	<b>100%</b>	<b>34,199</b>	<b>100%</b>	<b>36%</b>

Figure 2. Percentage Living with HIV/AIDS by Age Group



Recently reported cases of adult/adolescent HIV and AIDS are older at diagnosis than previously reported cases.

Seventy-four percent of those living with HIV or AIDS are 40 years of age or older.

Thirty-six percent of those living with HIV/AIDS are females.

Sixty-nine percent of females living with HIV/AIDS are currently 20-49 years old.

**Table 7. New Jersey Pediatric (1) Cumulative HIV and AIDS Cases  
Data Reported as of June 30, 2007  
Exposure Category (2) by Race/Ethnicity**

Mode of Transmission (2)	White	Black	Hispanic	Other/Not Reported	Total
Mother With/At Risk of HIV (3)	164	837	239	4	1,244
Hemophilia/Coagulation Disorder	10	7	5	0	22
Transfusion/Blood Components	15	3	4	0	22
Risk Not Reported/Other Risk	7	28	7	2	44
<b>Total</b>	<b>196</b>	<b>875</b>	<b>255</b>	<b>6</b>	<b>1,332</b>
<b>% Perinatally Infected</b>	<b>84%</b>	<b>96%</b>	<b>94%</b>	<b>67%</b>	<b>93%</b>

- (1) Includes all patients under 13 years of age at time of HIV infection, who were New Jersey residents or diagnosed in New Jersey.
- (2) Cases with more than one risk, other than the combinations listed, are tabulated only in the risk group listed first.
- (3) Epidemiologic data suggest transmission from an infected mother to her fetus or infant during the perinatal period.

**Table 8. New Jersey Born HIV Pediatric Exposures (1) by Current Status  
and Year of Birth for Children Born 1993-2007 - Data as of June 30, 2007**


Birth Year	Infected (2)		Indeterminate (3)		Seroreverter (4)		Total Reported
	No.	(%)	No.	(%)	No.	(%)	No.
1993	77	21%	87	24%	196	54%	360
1994	56	16%	120	35%	164	48%	340
1995	50	15%	94	28%	186	56%	330
1996	39	13%	71	24%	182	62%	292
1997	33	12%	80	29%	166	59%	279
1998	23	8%	92	30%	189	62%	304
1999	14	6%	69	28%	160	66%	243
2000	15	6%	72	26%	185	68%	272
2001	10	5%	65	30%	140	65%	215
2002	5	2%	68	30%	155	68%	228
2003	7	3%	52	26%	142	71%	201
2004	8	2%	43	20%	163	76%	214
2005	7	2%	54	28%	132	68%	193
2006*	2	2%	60	47%	67	52%	129
2007*	0	0%	33	97%	1	3%	34

- (1) Exposure - Child was exposed to HIV during pregnancy/delivery.
  - (2) Infected - Child is infected with HIV/AIDS.
  - (3) Indeterminate - Child was exposed but actual status of infection is unknown.
  - (4) Seroreverter - Child was perinatally exposed and proven to be uninfected.
- \* Year 2006 and 2007 data is incomplete

**Table 9. New Jersey Pediatric Cases Living with HIV/AIDS (1)  
by Race/Ethnicity and Current Age  
As of June 30, 2007**

Race/Ethnicity	Current Age							
	< 5 Yrs.		5-12 Yrs.		≥ 13 Yrs.		Total	
	No.	(%)	No.	(%)	No.	(%)	No.	(%)
White	0	0%	27	11%	80	15%	107	14%
Black	21	70%	173	72%	335	64%	529	67%
Hispanic	8	27%	40	17%	105	20%	153	19%
Other	1	3%	0	0%	0	0%	1	0%
<b>Total</b>	<b>30</b>	<b>4%</b>	<b>240</b>	<b>30%</b>	<b>520</b>	<b>66%</b>	<b>790</b>	<b>100%</b>

- (1) Living Pediatric HIV/AIDS cases who were New Jersey residents or diagnosed in New Jersey.



Most pediatric cases are a result of perinatal transmission.

Perinatal transmission has been reduced to less than 5 percent.

Approximately 250 Individuals infected perinatally in the early 1990's are now approaching adulthood.

Eighty-six percent of pediatric cases living with HIV/AIDS are minorities.

**Table 10. Ryan White Title II Services in 2006**

<b>Program Area</b>	<b>Type of Service</b>	<b>Clients Served per Year</b>
AIDS Drug Distribution Program	medications	7,005
Health Insurance Continuation Program	health insurance premiums	330
Home Care Program	home health services	148
Access to Care	care outreach	622
Core Health Services	outpatient/ambulatory medical care	3,755
	dental care	518
	treatment adherence counseling	2,729
	mental health services	433
	substance abuse services	107
	nutritional counseling	485
Support Services	case management	6,449
	emergency financial assistance	149
	short-term/emergency housing assistance	79
	legal services	140
	medical transportation services	1,212
	residential substance abuse services	12

**Table 11. DHAS Care and Treatment Services in 2006**

<b>Program</b>	<b>Source of Funding</b>	<b>Clients Served per Year</b>
Early Intervention Programs	State	6,027
Housing Opportunities for Persons with AIDS	HUD	418

## PREVENTION

**Table 12. Summary of Major HIV/AIDS Prevention Interventions Funded Agencies and Client Numbers by Target Population for 2006**

Type of Intervention	Populations Targeted/Reached					
<b>Individual Outreach</b>	MSM	IDU	Heterosexual		Youth	HIV Positive
			Males	Females		
Number of Agencies Providing Services	15	12	25	38	33	17
Number of Clients Served	1,744	2,337	3,898	7,516	5,730	794
<b>Individual Level Intervention</b>	MSM	IDU	Heterosexual		Youth	HIV Positive
			Males	Females		
Number of Agencies Providing Services	13	10	11	27	22	16
Number of Clients Served	405	298	540	1,071	593	526
<b>Health Education/Risk Reduction</b>	MSM	IDU	Heterosexual		Youth	HIV Positive
			Males	Females		
Number of Agencies Providing Services	12	14	7	33	25	24
Number of Clients Served	220	764	303	1,978	1,005	412
<b>Prevention Case Management</b>	MSM	IDU	Heterosexual		Youth	HIV Positive
			Males	Females		
Number of Agencies Providing Services	11	12	6	29	12	23
Number of Clients Served	84	665	12	289	63	201

The DHAS provides partner counseling and referral services to HIV positive clients in the state through the Notification Assistance Program (NAP). They notify the sex or needle-sharing partners of HIV infected individuals that have been elicited by providers of the fact that they have been exposed to HIV. They offer them HIV counseling and testing, and if HIV positive, elicit the names of their partners for this service. This is done because these partners may be infected and not know it, may be infecting others, and may benefit from treatment. The service is confidential, and the individual who named the partner is never revealed. The NAP staff also provides test results to persons who test HIV positive but fail to return for results. If you would like to refer individuals to the NAP for partner counseling you can call (877) 356-8312 toll free.

**Table 13. Notification Assistance Program Services Provided in 2006**

Partners Referred/Elicited (1)	343
Partners Tested	89
Partners Testing HIV Positive	8
HIV+ Clients Counseled	276

(1) Referred partners are those that are elicited by providers and assigned to the NAP to contact. Elicited partners are those that the NAP staff identify when they counsel HIV positive individuals.

## HIV COUNSELING AND TESTING

Publicly funded HIV counseling and testing is offered at over 200 sites throughout New Jersey. Each year between sixty and seventy thousand tests are done (1). The table below details the number of tests done and the number and percentage positive for each site type, age group, race/ethnicity, and sex. Clients identified through this system account for approximately 25 percent of all reported HIV cases in a year. An increase of testing at the HIV/CTS site type is attributed to the introduction of the new Rapid Testing technology at most of the HIV/CTSs during 2006.

<b>Table 14. PUBLICLY FUNDED HIV COUNSELING AND TESTING ACTIVITIES January - December 2006 (Data as of July 19, 2007)</b>			
<b>SITE TYPE</b>	<b>NUMBER OF TESTS</b>	<b>NUMBER POSITIVE</b>	<b>PERCENT POSITIVE</b>
HIV CTS(2)	18,480	286	1.55%
STD Clinic	12,984	70	0.54%
Drug Treatment Center	2,657	43	1.62%
Family Planning Clinic	10,642	20	0.19%
Prenatal Clinic	3,940	7	0.18%
TB Clinic	55	2	3.64%
Community Health Center	8,497	144	1.69%
Prison/Jail	2,543	2	0.08%
Hospital/Emergency Dept.	10,865	235	2.16%
Field Visit/Outreach	7,891	100	1.27%
Other	2,156	18	0.83%
No Reported Site Type	30	0	0.00%
<b>SEX</b>			
Male	37,745	560	1.48%
Female	42,932	364	0.85%
Unknown	63	3	4.76%
<b>RACE/ETHNICITY</b>			
White not Hispanic	18,115	89	0.49%
Black not Hispanic	36,306	620	1.71%
Hispanic	23,129	195	0.84%
Asian/Pacific Islander	1,285	4	0.31%
AM Indian/AK Native	126	2	1.59%
Other	1,685	16	0.95%
Undetermined	94	1	1.06%
<b>AGE</b>			
Under 5	10	0	0.00%
5-12	46	0	0.00%
13-19	10,522	26	0.25%
20-29	32,922	192	0.58%
30-39	18,045	254	1.41%
40-49	12,995	315	2.42%
50+	6,121	140	2.29%
Unknown	79	0	0.00%
<b>TOTAL</b>	<b>80,740</b>	<b>927</b>	<b>1.15%</b>

1. Numbers do not represent individuals as clients may be tested more than once.

2. HIV/CTS sites are clinics whose primary purpose is HIV counseling and testing.

3. Fifteen of the HIV/CTS sites test confidentially and anonymously.

## Rapid HIV Testing Update

Rapid HIV testing is a diagnostic tool that allows patients to learn their HIV status in 10 to 40 minutes depending on the test used. The Food and Drug Administration currently approves five HIV rapid tests that are available for use in the United States. Of these tests, OraQuick® ADVANCE Rapid HIV1/HIV2 Antibody Tests, Clearview HIV1/2 STAT-PAK™ and Unigold Recombigen™ can be done as point-of-care testing. Testing with Reveal™ and Multispot HIV1/HIV2 needs to be done in a licensed laboratory.

Rapid diagnostic HIV testing has several clinical applications. These include: 1) reducing the risk of vertical HIV transmission for women who present in labor with unknown HIV status, 2) reducing the risk of occupational transmission of HIV, 3) as part of the initial evaluation of a patient for non-occupational post exposure prophylaxis, and 4) assisting in diagnosis and counseling of patients with HIV disease. Rapid HIV testing at publicly funded counseling and testing sites started at one site in New Jersey on November 1, 2003. As of July 12, 2005, over 160 publicly funded counseling and testing sites in New Jersey are licensed to conduct OraQuick® ADVANCE Rapid HIV1/HIV2 Antibody testing.

**Table 15. Publicly Funded Rapid Testing in New Jersey through July 12, 2007**

	Number	%
Total Clients Rapid Tested	124,692	
Clients Testing Positive	1,937	1.55%
Clients Receiving Test Results	122,915	98.57%

### Rapid HIV testing is now available at the following HIV Counseling and Testing Sites throughout the state

**AIDS Coalition of Southern NJ**  
**Atlantic City Health Department**  
**Bergen County Counseling Center**  
**Burlington Health Department**  
**Camden AHEC**  
**Camden County Health Department**  
**Chandler Health Center**  
**Check-Mate, Inc.**  
**Columbus Hospital**  
**Community Health Center of Asbury Park**  
**Cooper University Hospital**  
**East Orange Health Department**  
**Fam Care, Inc.**  
**Henry J. Austin Health Center**  
**Hope House**  
**Horizon Health Center**  
**Hunterdon County Health Department**  
**Hyacinth AIDS Foundation**  
**Jersey City Medical Center CTS**  
**Jersey City STD**  
**Jersey Shore Medical Center**  
**Kennedy Health Systems**

**Martin Luther King Academy**  
**Monmouth Medical Center**  
**Morristown Memorial Hospital**  
**N. Jersey Community Research Initiative**  
**Newark Beth Israel Medical Center**  
**Newark Community Health Center**  
**Newark DOH-STD Clinic**  
**Ocean County Health Department**  
**Paterson Health Department**  
**Plainfield Community Health Center**  
**Planned Parenthood of Greater Northern NJ**  
**Planned Parenthood of Metro NJ**  
**Planned Parenthood of Plainfield**  
**PROCEED, Inc.**  
**Raritan Bay Medical Center**  
**RWJ – New Brunswick**  
**St. James Hospital**  
**St. Joseph's Medical Center**  
**St. Michael's Medical Center**  
**Trinitas Hospital**  
**UMDNJ – Emergency Department**

**For more information visit our website at**  
[www.state.nj.us/health/aids/rapidtesting/index.shtml](http://www.state.nj.us/health/aids/rapidtesting/index.shtml)  
**or call 1-800-624-2377**

For More Information  
go to the  
Division of HIV/AIDS Services  
Website at:

<http://www.state.nj.us/health/aids>

or call the

New Jersey Department of Health and Senior Services  
Division of HIV/AIDS Services  
Epidemiologic Services Unit  
at  
(609) 984-5940