

Question 3

What are the indicators of risk for HIV/AIDS in Indiana?

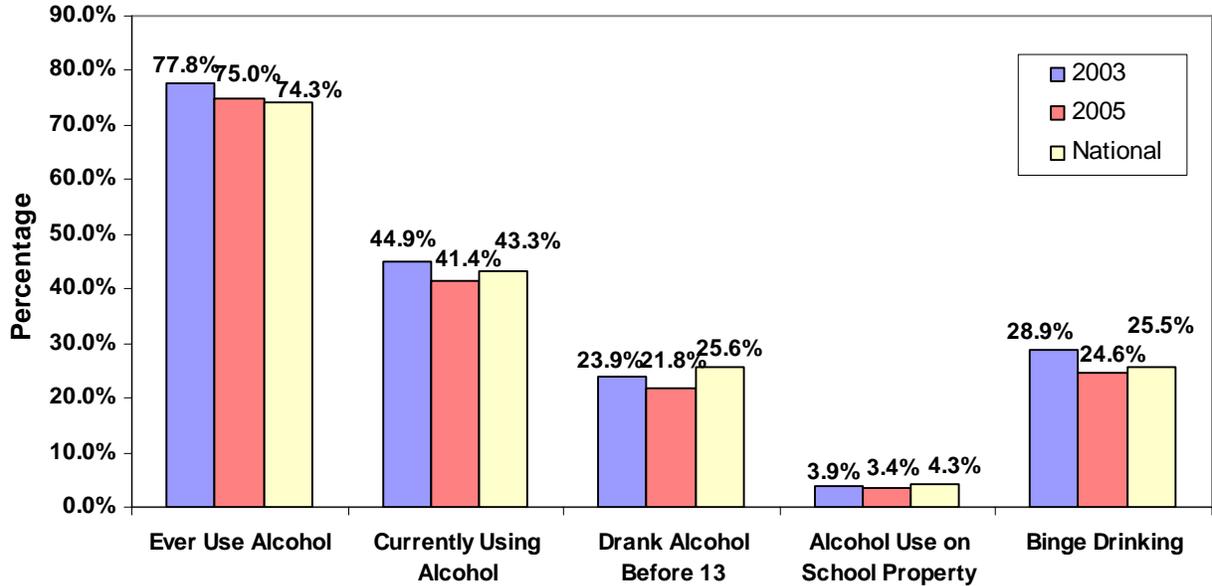
The risk indicators for this profile include results from the Youth Risk Behavior Survey (YRBS) 2005, the Behavioral Risk Factor Surveillance Report (BRFSS) 2006, the STD Surveillance System 2006, and Indiana's Pregnancy and Natality Report 2005, the latest data available for this report.

Youth Risk Behavior Survey (YRBS)

The Youth Risk Behavior Survey (YRBS) developed by the Centers for Disease Control and Prevention (CDC) surveys youth health-risk behaviors in six domains: (1) behaviors which facilitate unintentional injuries and violence, (2) tobacco use, (3) alcohol and drug uses, (4) sexual behaviors related to pregnancy and sexually transmitted diseases, (5) unhealthy dietary behaviors, and (6) physical inactivity and being overweight. The YRBS began in 1991 and is conducted every two years. In 2005, 13,917 students in grades 9-12 participated in this national survey. Those items pertaining to alcohol and drug use and sexual behaviors are presented in this report.

As shown in Figure 53, 75.0% of adolescents in Indiana reported that they had had one or more drinks of alcohol on one or more days during their lifetime. This percentage is slightly higher than the national average (74.3%). Additionally, 24.6% of Indiana youth reported drinking five or more alcoholic beverages on one occasion in the last 30 days, a slightly smaller percentage than the national average (25.5%).

Figure 53: Percentage of Indiana and National YRBS Respondents Endorsing Alcohol Use and Alcohol-related Behaviors, 2003 and 2005

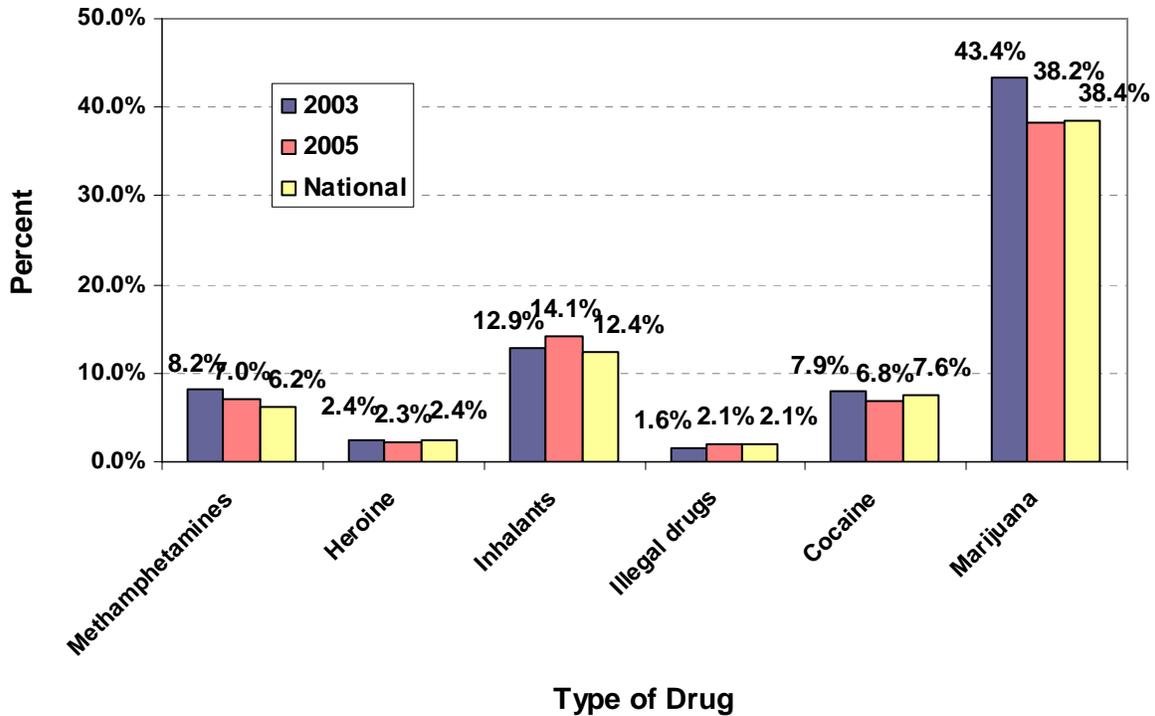


Source: YRBS, 2005: Centers for Disease Control and Prevention

Less than half of all questioned adolescents (41.4%) both in Indiana and on the National level are currently using alcohol. In general, Indiana is fairly close to the national average in alcohol consumption among its adolescents.

Another question related to the risk behavior among students deals with the use of illicit drugs. Figure 54 shows the types of drugs used, and lists the corresponding numbers of users.

Figure 54: Percentage of Indiana and National YRBS Respondents Reporting Illicit Drug Use, 2003 and 2005



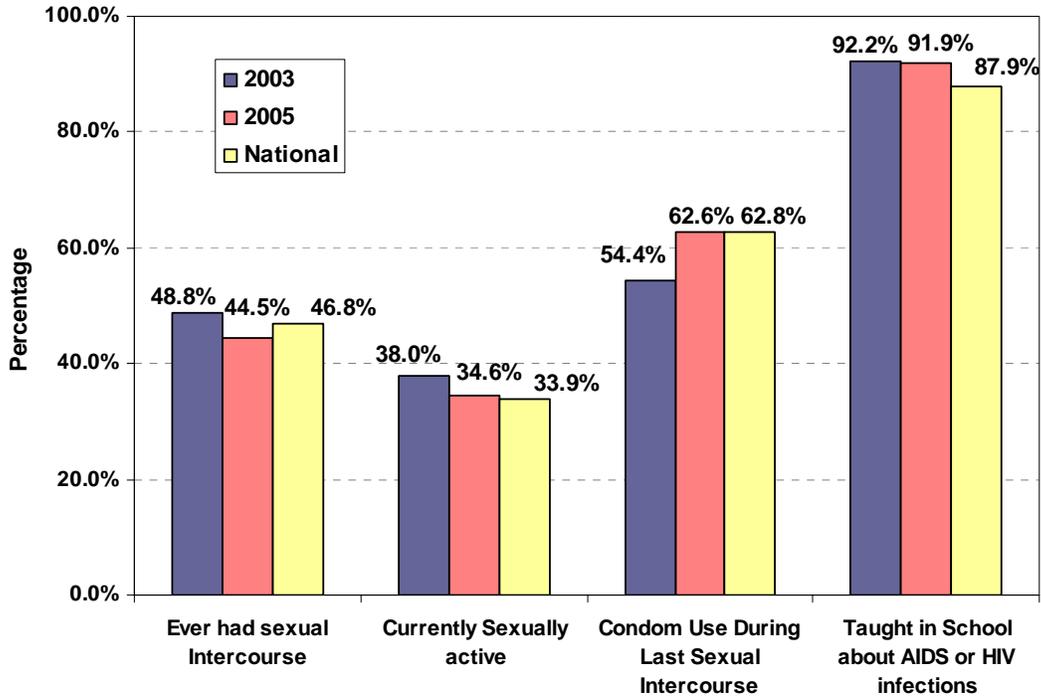
Source: YRBS, 2005; Centers for Disease Control and Prevention

By far the most commonly used illicit drug among adolescents was marijuana. Among youth in Indiana, 38.2% reported ever using marijuana, only slightly below the national level (38.4%), after dropping from the 2003 level of 43.4%. Though a distant second, the next most used drug was inhalants among Indiana (14.1%) and national youth (12.4%).

Whereas the two examples cited above point to risk behavior that would have a more indirect effect on the possibility to contract HIV or other STDs, the following figures and tables explore sexual activities among adolescents.

Other risk factors related to the transmission of HIV and STDs involve sexual behaviors and safe sex practices among adolescents. According to the YRBS results on sexual intercourse and condom use (Figure 55), 44.5% of Indiana youth have engaged in sexual intercourse, and 34.6% are currently sexually active. It is important to note that only 62.6% of Indiana youth used a condom on their last sex occasion, which is slightly lower than the national rate for this behavior (62.8%). However, condom use has been on the rise since 2003, when only slightly more than half of interviewed youth (54.4%) reported to have used a condom during the last sexual intercourse.

Figure 55: Percentage of Indiana and National YRBS Respondents engaging in Sexual Intercourse, using Condoms, and Reporting AIDS Educational Experience, 2003 and 2005.



Source: YRBS, 2005: Centers for Disease Control and Prevention

Taken together, the information gathered from the YRBS reveals that three-quarters of adolescents have used alcohol and more than a third have used marijuana. Almost half of adolescents in Indiana have had sexual intercourse, while more than a third are still sexually active at the present time. An encouraging 92% of Indiana adolescents have been taught about HIV and AIDS infection in school, yet only about six out of ten (62.6%) used a condom during the last sexual intercourse, which is an increase from previous years.

Behavioral Risk Factor Surveillance System (BRFSS)

Since 1984, the ISDH has entered into a yearly cooperative agreement with the Centers for Disease Control and Prevention (CDC) to develop and implement the Behavioral Risk Factor Surveillance System (BRFSS) survey in Indiana. This national survey monitors modifiable risk factors associated with chronic and communicable diseases by collecting information from adults on health behaviors and preventive practices. Health risk factors of adults, many of which are behavioral in nature, are examined in the BRFSS. The surveys are conducted on a continuous basis to determine the proportion of Indiana residents who engage in health behaviors that increase the probability of negative health outcomes.

This survey also assesses behaviors and knowledge related to HIV and AIDS. The following presentation of results focuses on responses to these items. All survey participants were 18 to 64 years of age and were a representative sample of the Indiana population.

The information in the following table was derived from the CDC BRFSS database. The numbers do not reflect those respondents that did not answer a question or that refused to answer a question. The CDC does not use these numbers in their analysis and, therefore, they are not included here.

Participants were queried about whether they had ever been tested for HIV (excluding tests that were part of a blood donation). As shown in Table 46, less than a third (29.3%) of the surveyed population overall had ever been tested for HIV. In other words, the majority of Indiana residents, two-thirds of the population, is unaware of its current HIV status and is potentially engaging in unsafe activities that could contribute to the spread of the virus.

Table 45: 2006 BRFSS Results: Have you ever been tested for HIV? (6,542 Respondents)

Demographic	Percent	
Age Group	Yes	No
18-24	26.8	73.2
25-34	47.7	52.3
35-44	34.1	65.9
45-54	22.0	78.0
55-64	13.2	86.8
Sex		
Male	26.6	73.4
Female	32.0	68.0
Race/Ethnicity		
White, non-Hispanic	26.9	73.1
Black, non-Hispanic	51.9	48.1
Hispanic	30.8	69.2
Totals	29.3	70.7

Note: Denominator is number of respondents who are at least 18 years and less than 65 years.
SOURCE: 2006 Indiana BRFSS Statewide Survey Data

Only slightly more than a quarter (26.8%) of men had been tested for HIV, compared to 36.1% of women. Among the racial and ethnic groups of Indiana’s population, Black, non-Hispanic people had the highest testing scores of all groups with 51.9%. These percentages were lower than in 2003, where the total percentage that had been tested was 32.7%

Respondents indicating that they had been tested were also asked where they were tested. Those surveyed were able to choose from a list of test locations and reasons. Table 46 shows the results. Among the test locations, the highest percentage of respondents (42.1%) had been tested at a hospital or drug treatment facility.

Table 46: 2006 BRFSS Results: Where was your last HIV test? (6,542 Respondents)

Where did you have your last HIV test?	
Location	Percent
Private doctor or HMO	36.8
Counseling and testing site	5.0
Hospital, Drug Treatment Facility	50.3
Jail or Prison	3.4
Home	4.5
Total	100.0

Note: Denominator is number of respondents who are at least 18 years and less than 65 years.

Source: 2006 Indiana BRFSS Statewide Survey Data

Those that responded that they had been tested were asked when they were last tested as well, with the option of choosing from five possible time periods. Table 47 shows that a majority of the respondents (54.5%) had been tested between the years of 2000 and 2005. Another 12.7% of the respondents were tested in the past year.

Table 47: 2006 BRFSS Results: When was your last HIV test? (6,542 Respondents)

When did you have your last HIV test?	
Year	Percent
Before 1990	4.9
1991-1995	9.1
1996-1999	18.8
2000-2005	54.5
2006	12.7
Total	100.0

Note: Denominator is number of respondents who are at least 18 years and less than 65 years.
 Source: 2006 Indiana BRFSS Statewide Survey Data

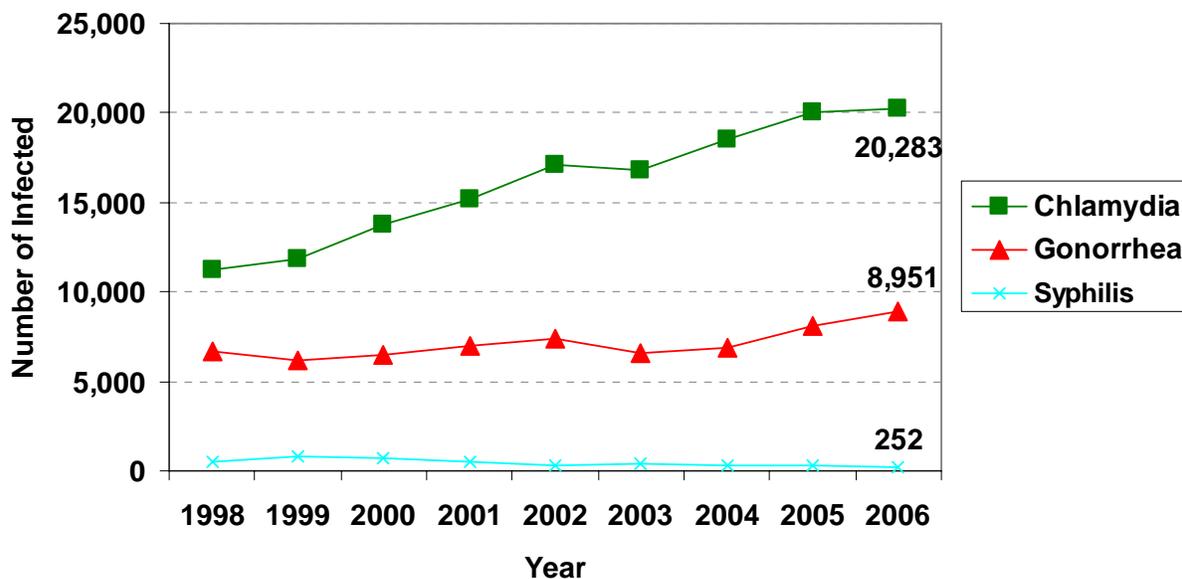
Questions about high risk situations, including using intravenous drugs or having unprotected sex, have been omitted from the 2006 questionnaire.

STDs in Indiana

Sexually transmitted diseases are another strong indicator of unprotected sexual contact. With an STD there is a 2 to 5-fold increased risk of HIV seroconversion. HIV susceptibility is increased for both ulcerative and non-ulcerative STDs by 1) endocervical CD4 recruitment with a non-ulcerative STD and 2) an open portal-of-entry for the HIV is established with ulcerative STDs. There is a greater infectiousness because of the frequency and concentration of HIV shedding with a STD. STD treatment reduces shedding to baseline levels. Therefore, STD prevention and treatment are direct HIV prevention interventions.

This report will take a closer look at the three most prevalent STDs, Chlamydia, Gonorrhea and Syphilis. The results of the STD Surveillance Report 2006 for Indiana are presented in the following tables and figures. Figure 56 shows the number of cases for Chlamydia, Gonorrhea and Syphilis from 1998 to 2006.

Figure 56: Number of STD Cases in Indiana, 1998-2006



In the case of Syphilis and Gonorrhea, both diseases have seen a rise in numbers from their decrease from a high in recent years. The number of Chlamydia cases rose to a new high in 2006. It continued the trend of the last seven years that seemed briefly stalled in 2003. The state and local health departments have worked together on numerous projects to educate the public about the risks and ways to prevent the spread of these STDs.

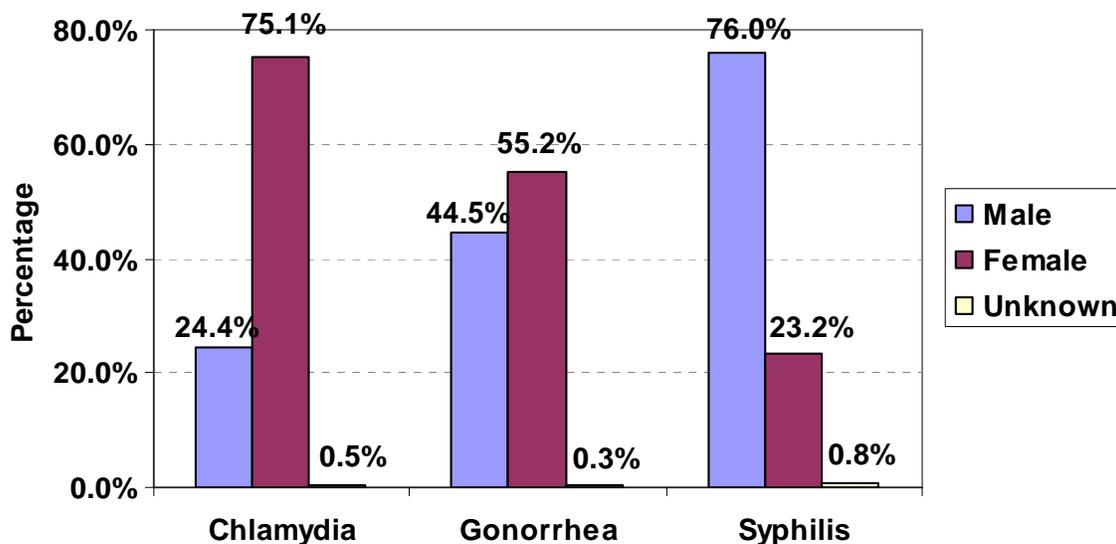
As a result of these efforts the number of new Syphilis cases has decreased by 32% from the levels in 2003. Table 48 lists the numbers for all three STDs by year.

Table 48: Number of STD Cases in Indiana, 1998 to 2006

Year	Chlamydia	Gonorrhea	Syphilis
1998	11,253	6,706	522
1999	11,829	6,203	829
2000	13,768	6,453	745
2001	15,223	6,941	524
2002	17,144	7,394	316
2003	16,838	6,596	370
2004	18,504	6,872	275
2005	20,006	8,078	289
2006	20,283	8,951	252

The three STDs also show a different infection pattern between the sexes. The following figures and tables will take a look at the available data for 2006. Figure 57 breaks out the STDs by Sex.

Figure 57: Percentages of STD Cases in Indiana by Sex, 2006



Chlamydia affects predominantly women, even though men do act as carriers of the disease. Three-quarters of Chlamydia cases in 2006 were female. In the case of Gonorrhea a majority of infection cases also occurred among women (55.2%). Syphilis on the other hand is affecting more males than females, another indicator of the predominantly MSM risk category for the transmission of that disease in Indiana. More than three-quarters (76%) of persons infected with Syphilis were male.

There are differences in how the different STDs are present at different age groups. Figure 58 shows the breakout for all Chlamydia and Gonorrhea, while Figure 59 shows the age distribution for Syphilis for a comparison.

Figure 58: Number of Chlamydia and Gonorrhea Cases in Indiana by Age, 2006

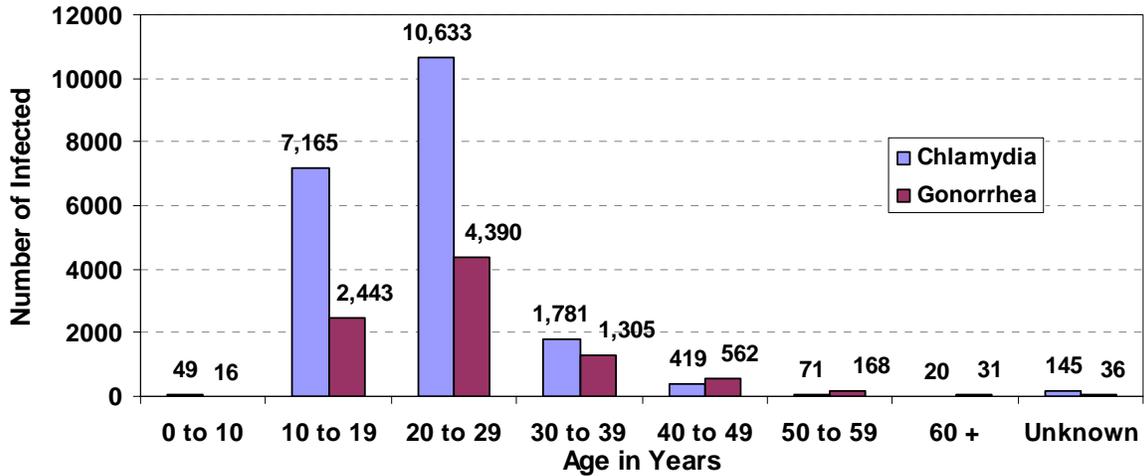
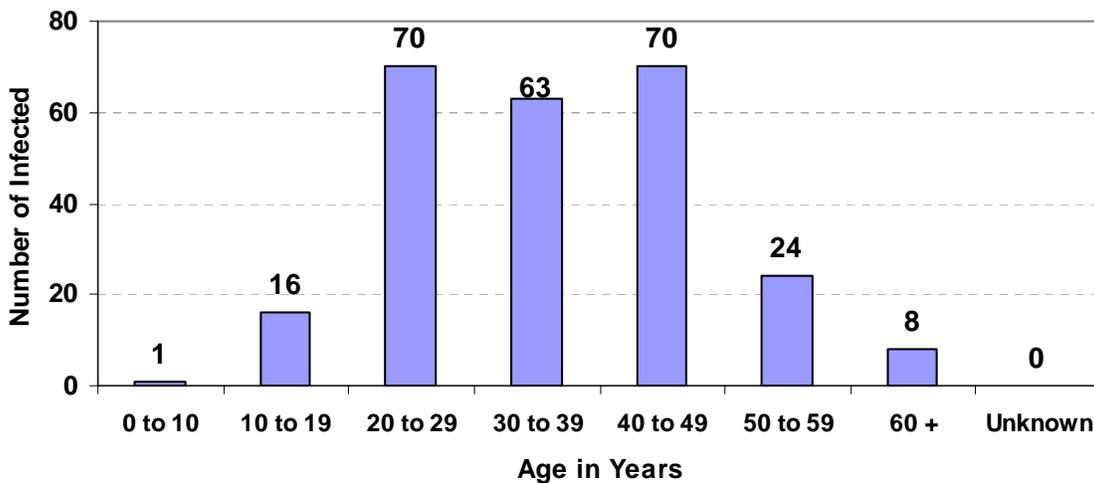


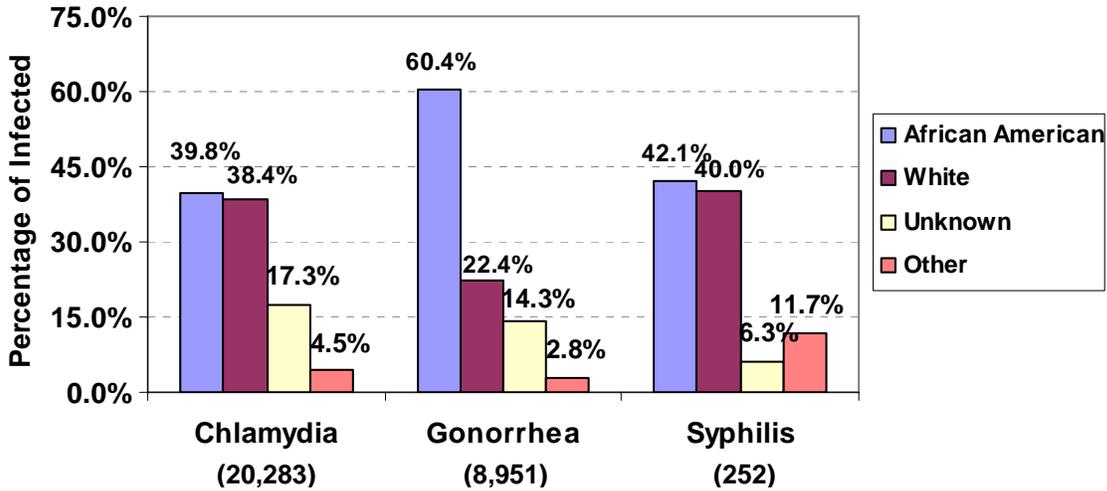
Figure 59: Number of Syphilis Cases in Indiana by Age, 2006



Both Chlamydia and Gonorrhea are affecting people at a much younger age than Syphilis in Indiana. While Chlamydia and Gonorrhea peak in the age group of 20 to 29 year olds, Syphilis is more predominant in the age bracket of both 20 to 29 years and 40 to 49 years of age. It is interesting to note that Syphilis is affecting a larger percentage of the population, age 40 and older, than the two other diseases, which are most prevalent between the ages of 13 to 30 years of age.

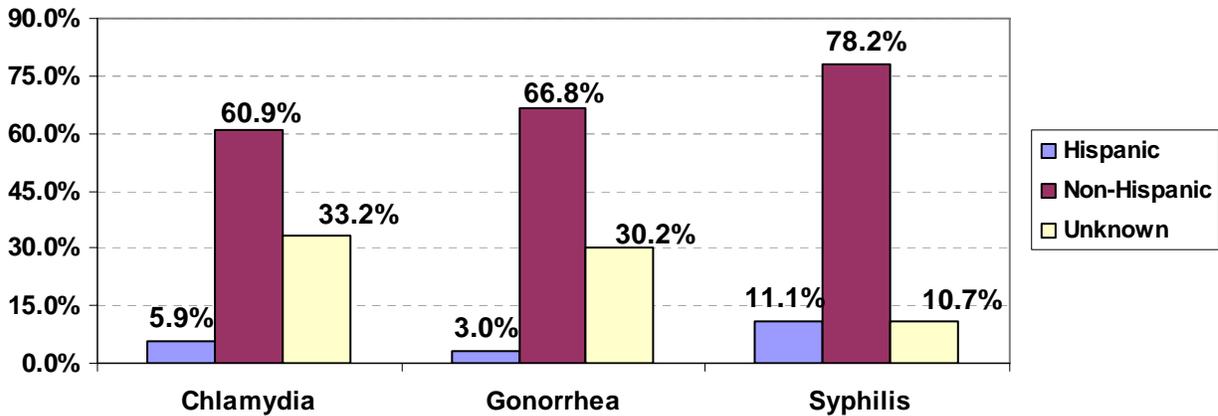
Similar to the racial and ethnic distribution of the HIV/AIDS infection, STDs are more prevalent among minorities than among the White population. Figure 60 shows the distribution of STD cases in Indiana by race.

Figure 60: Percentage of STD Cases in Indiana by Race, 2006



African Americans are disproportionately affected by all three STDs. Figure 61 breaks out the numbers of STD cases by ethnicity.

Figure 61: Percentage of STD Cases in Indiana by Ethnicity, 2006



Among Indiana's general population, 4.6% claim Hispanic background. Chlamydia affects Hispanics almost proportionally to that share (5.9%), while Gonorrhea affects slightly less Hispanics. However, Syphilis affects Hispanics more severely than Non-

Hispanics. The number of Syphilis infections among Hispanics in 2006 (11.1%) was almost twice the share of Hispanics among the general population.

Finally, the geographic distribution of the three STDs varies strongly by county. Table 49 lists the absolute numbers and percentages for all three STDs by county of residence in 2006

Table 49: STD Cases and Percentages in Indiana by County, 2006

County	Chlamydia	%	Gonorrhea	%	Syphilis	%
Adams	23	0.1%	*	*	0	0.0%
Allen	1704	8.4%	718	8.0%	15	6.0%
Bartholomew	156	0.8%	21	0.2%	0	0.0%
Benton	10	0.0%	*	*	0	0.0%
Blackford	10	0.0%	*	*	0	0.0%
Boone	60	0.3%	17	0.2%	0	0.0%
Brown	*	*	*	*	0	0.0%
Carroll	16	0.1%	0	0.0%	0	0.0%
Cass	42	0.2%	13	0.1%	*	*
Clark	184	0.9%	84	0.9%	*	*
Clay	29	0.1%	8	0.1%	0	0.0%
Clinton	36	0.2%	9	0.1%	*	*
Crawford	15	0.1%	0	0.0%	0	0.0%
Daviess	49	0.2%	14	0.2%	0	0.0%
De Kalb	56	0.3%	8	0.1%	0	0.0%
Dearborn	47	0.2%	8	0.1%	*	*
Decatur	21	0.1%	*	*	0	0.0%
Delaware	447	2.2%	149	1.7%	*	*
Dubois	39	0.2%	*	*	0	0.0%
Elkhart	748	3.7%	312	3.5%	7	2.8%
Fayette	44	0.2%	*	*	0	0.0%
Floyd	198	1.0%	80	0.9%	*	*
Fountain	29	0.1%	*	*	0	0.0%
Franklin	10	0.0%	*	*	0	0.0%
Fulton	12	0.1%	*	*	0	0.0%
Gibson	39	0.2%	8	0.1%	0	0.0%
Grant	146	0.7%	43	0.5%	0	0.0%
Greene	30	0.1%	5	0.1%	*	*
Hamilton	186	0.9%	52	0.6%	*	*
Hancock	96	0.5%	23	0.3%	*	*
Harrison	39	0.2%	*	*	*	*
Hendricks	159	0.8%	38	0.4%	*	*
Henry	91	0.4%	18	0.2%	0	0.0%
Howard	250	1.2%	131	1.5%	0	0.0%
Huntington	38	0.2%	6	0.1%	0	0.0%
Jackson	77	0.4%	*	*	0	0.0%
Jasper	19	0.1%	7	0.1%	0	0.0%

County	Chlamydia	%	Gonorrhea	%	Syphilis	%
Jay	24	0.1%	*	*	0	0.0%
Jefferson	75	0.4%	17	0.2%	0	0.0%
Jennings	33	0.2%	*	*	0	0.0%
Johnson	278	1.4%	70	0.8%	*	*
Knox	103	0.5%	26	0.3%	0	0.0%
Kosciusko	82	0.4%	*	*	*	*
La Porte	219	1.1%	96	1.1%	*	*
LaGrange	34	0.2%	9	0.1%	0	0.0%
Lake	2223	11.0%	925	10.3%	55	21.8%
Lawrence	36	0.2%	5	0.1%	0	0.0%
Madison	450	2.2%	154	1.7%	*	*
Marion	7173	35.4%	4357	48.7%	108	42.9%
Marshall	36	0.2%	5	0.1%	0	0.0%
Martin	*	*	*	*	0	0.0%
Miami	23	0.1%	5	0.1%	0	0.0%
Monroe	415	2.0%	126	1.4%	*	*
Montgomery	86	0.4%	26	0.3%	*	*
Morgan	110	0.5%	36	0.4%	0	0.0%
Newton	14	0.1%	*	*	0	0.0%
Noble	69	0.3%	6	0.1%	0	0.0%
Ohio	8	0.0%	0	0.0%	0	0.0%
Orange	23	0.1%	*	*	0	0.0%
Owen	23	0.1%	8	0.1%	0	0.0%
Parke	11	0.1%	0	0.0%	*	*
Perry	7	0.0%	0	0.0%	0	0.0%
Pike	15	0.1%	*	*	0	0.0%
Porter	196	1.0%	39	0.4%	5	2.0%
Posey	24	0.1%	10	0.1%	0	0.0%
Pulaski	9	0.0%	*	*	0	0.0%
Putnam	61	0.3%	14	0.2%	*	*
Randolph	44	0.2%	*	*	0	0.0%
Ripley	24	0.1%	*	*	0	0.0%
Rush	21	0.1%	6	0.1%	0	0.0%
Scott	48	0.2%	*	*	0	0.0%
Shelby	72	0.4%	13	0.1%	0	0.0%
Spencer	17	0.1%	*	*	0	0.0%
St Joseph	867	4.3%	432	4.8%	7	2.8%
Starke	10	0.0%	*	*	0	0.0%
Steuben	37	0.2%	7	0.1%	0	0.0%
Sullivan	13	0.1%	0	0.0%	0	0.0%
Switzerland	7	0.0%	*	*	0	0.0%
Tippecanoe	508	2.5%	156	1.7%	8	3.2%
Tipton	16	0.1%	*	*	0	0.0%
Union	8	0.0%	*	*	0	0.0%
Unknown	140	0.7%	44	0.5%	0	0.0%
Vanderburgh	778	3.8%	356	4.0%	6	2.4%
Vermillion	13	0.1%	*	*	0	0.0%

County	Chlamydia	%	Gonorrhea	%	Syphilis	%
Vigo	324	1.6%	92	1.0%	*	*
Wabash	29	0.1%	7	0.1%	0	0.0%
Warren	12	0.1%	0	0.0%	0	0.0%
Warrick	69	0.3%	18	0.2%	*	*
Washington	25	0.1%	*	*	0	0.0%
Wayne	102	0.5%	29	0.3%	*	*
Wells	27	0.1%	9	0.1%	0	0.0%
White	24	0.1%	5	0.1%	*	*
Whitley	29	0.1%	10	0.1%	0	0.0%
Total	20,283	100.0	8,951	100.0	252	100.0

Hepatitis B & C

Hepatitis B is a sexually transmitted liver disease caused by the hepatitis B virus (HBV). HBV is spread much like HIV, the virus that causes AIDS. HBV, however, is easier to catch than HIV because it is over 100 times more concentrated in an infected person's blood and it can exist on surfaces outside the body. It is, therefore, a very sensitive indicator of risky sexual behavior that might lead to HIV infections among the general population. HBV infection can cause severe liver disease, including liver failure (cirrhosis) and liver cancer. Over 5,000 people die every year from hepatitis B-related liver disease. Indiana state law requires that only acute cases of Hepatitis B are reported.

In 2006, Indiana had 80 cases of acute Hepatitis B, up from 57 cases in 2005. There were also 80 cases reported in 2004. There were three counties of significant infection of Hepatitis B in 2006, Lake (5) and St. Joseph (6) counties in northern Indiana and Marion County (32) in central Indiana. There were 4 counties with 5 or more cases of Hepatitis B in 2005, with Porter being the other county on this list.

Table 50: Numbers, Percentages and Rates of Hepatitis B cases in Indiana by Sex, and Race/Ethnicity, 2006

	Number	Percent	New Diagnosis/Rate
Sex			
Female	16	20.0%	0.5
Male	64	80.0%	2.06
Race			
Black	14	17.5%	2.5
Other	1	1.3%	0.6
Unknown	7	8.8%	-
White	58	72.5%	1.0
Total	80	100.0%	1.27

Hepatitis C is a liver disease caused by the hepatitis C virus (HCV), which is found in the blood of persons who have the disease. HCV is spread by contact with the blood of an infected person. The Indiana State Health Department collects the number of laboratory reports of persons testing positive for Hepatitis C. In 2006, there were 4,011 cases of Hepatitis C infection reported.

The geographic distribution of Hepatitis C is shown in Table 51 in descending order.

Table 51: Numbers and Percentages of Hepatitis C Infections by County in Indiana in 2006

County	Number of Infections	Percentage of Infections
Marion	1,109	27.6%
Lake	366	9.1%
Hendricks	226	5.6%
Vanderburgh	192	4.8%
St. Joe	180	4.5%
Wayne	122	3.0%
Allen	114	2.8%
Delaware	91	2.3%
Clark	79	2.0%
Hamilton	77	1.9%
Tippecanoe	72	1.8%
Vigo	72	1.8%
LaPorte	71	1.8%
Porter	71	1.8%
Henry	68	1.7%
Howard	65	1.6%
Madison	50	1.2%
Monroe	50	1.2%
Bartholomew	43	1.1%
Floyd	41	1.0%
Elkhart	40	1.0%
Knox	40	1.0%
Scott	31	0.8%
Warrick	30	0.7%
Morgan	29	0.7%
Johnson	28	0.7%
Dearborn	27	0.7%
Jackson	26	0.6%
Daviess	25	0.6%
Hancock	21	0.5%
Washington	19	0.5%
Putnam	18	0.4%
Sullivan	18	0.4%

County	Number of Infections	Percentage of Infections
Boone	17	0.4%
Greene	17	0.4%
Harrison	17	0.4%
Jennings	17	0.4%
Clinton	16	0.4%
Randolph	16	0.4%
Cass	15	0.4%
Gibson	15	0.4%
Fayette	14	0.3%
Grant	14	0.3%
Jefferson	14	0.3%
Shelby	14	0.3%
Unknown	14	0.3%
Lawrence	13	0.3%
Wells	13	0.3%
Marshall	12	0.3%
Perry	12	0.3%
Clay	11	0.3%
Dubois	11	0.3%
Jasper	11	0.3%
Posey	11	0.3%
Rush	11	0.3%
Wabash	11	0.3%
Dekalb	9	0.2%
Miami	9	0.2%
Steuben	9	0.2%
Franklin	8	0.2%
Kosciusko	8	0.2%
Montgomery	8	0.2%
Owen	8	0.2%
Parke	8	0.2%
Starke	8	0.2%
Crawford	7	0.2%
Orange	7	0.2%
Pike	7	0.2%
White	7	0.2%
Adams	6	0.1%
Pulaski	6	0.1%
Tipton	6	0.1%
Vermillion	6	0.1%
Blackford	*	0.1%
Fountain	*	0.1%
Lagrange	*	0.1%

County	Number of Infections	Percentage of Infections
Switzerland	*	0.1%
Whitley	*	0.1%
Benton	*	0.1%
Carroll	*	0.1%
Decatur	*	0.1%
Ripley	*	0.1%
Huntington	*	0.1%
Noble	*	0.1%
Warren	*	0.1%
Fulton	*	0.0%
Jay	*	0.0%
Brown	*	0.0%
Spencer	*	0.0%
Union	*	0.0%
Total	4,011	100.0%

Note: Counties with less than five infection cases are denoted by a star for confidentiality reasons.

The absolute numbers and percentages by sex and race are listed in Tables 52 and 53. Please note that no data for a breakout by ethnicity was available at the time of this report.

Table 52: Numbers and Percentages of Hepatitis C Infections By Sex

Gender	Number of Infections	Percentage of Infections
Male	2,440	62.2%
Female	1,478	37.8%
Total	3,918	100.0%

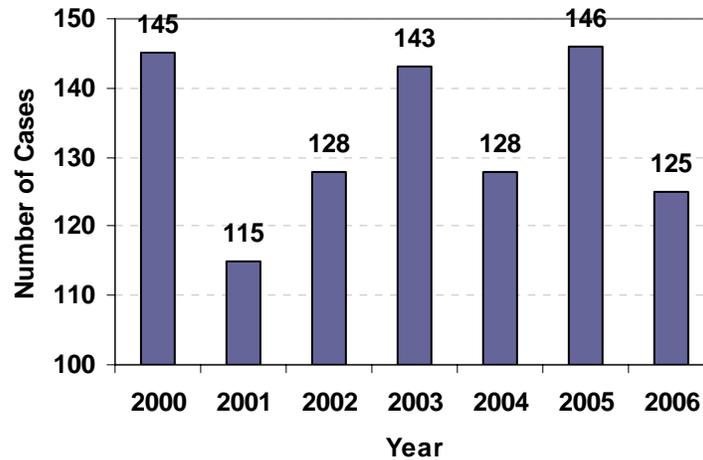
Table 53: Numbers and Percentages of Hepatitis C Infections By Race

Race	Number of Infections	Percentage of Infections
Caucasian/White	1,642	57.3%
Unknown	743	25.9%
African American	460	16.0%
Other/Multiracial*	23	0.8%
Total	2,868	100.0%

Note: The *Other* category encompasses people of Asian, Pacific Islander, and Native American descent, as well as persons of multiracial background

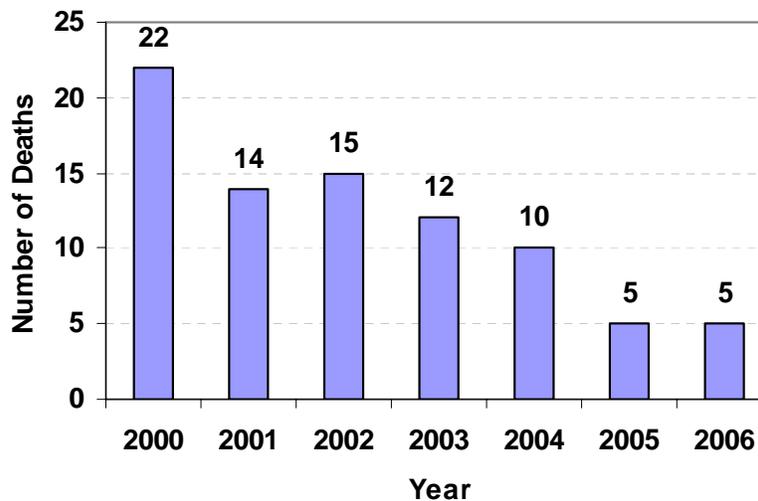
Tuberculosis, or TB, is a disease caused by bacteria called *Mycobacterium tuberculosis*. The bacteria can attack any part of the body, but they usually attack the lungs. In 2006, there were 125 cases of TB reported in Indiana, down from 146 in 2005. However, the overall trend of TB cases in the last fifty years has shown steady decline. The last seven years has shown a fairly consistent number of cases averaging around 132, as shown in Figure 62.

Figure 62: Reported Tuberculosis Cases in Indiana, 2000-2006



The number of TB related deaths has declined dramatically since they peaked in 2000. TB deaths have shown a steady incline since 2000, with a new low of 5 deaths in 2005 and 2006, as shown in Figure 63.

Figure 63: Number of Tuberculosis Related Deaths, 2000-2006



The sex and racial/ethnic distribution of TB cases in Indiana is shown in Table 54.

Table 54: Percentage of TB-Cases by Sex, Race and Ethnicity, 2006

Category	Percentage of all New Cases
Sex	
Male	67%
Female	33%
Race/Ethnicity	
White	60%
African American	27%
Hispanic	25%
Asian	13%
Native American	<1%
Hawaiian Native or Pacific Islander	<1%

Compared to their share of the overall population, African Americans and Hispanics are over-represented in the TB numbers.

Table 55: Numbers and Percentages of TB-Cases by Age Group, 2006

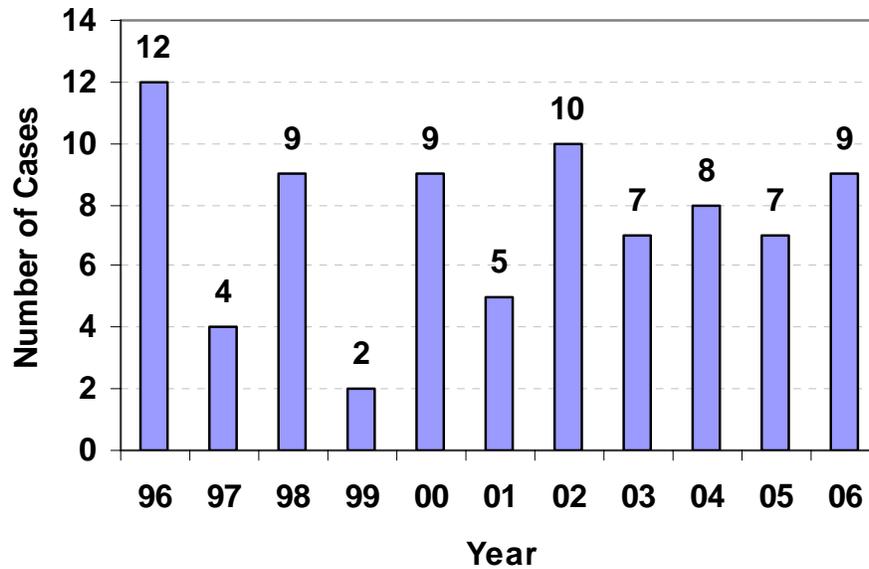
Age Group	Number of New Cases	Percentage of New Cases
Less than 15 Years	9	6%
15-24 Years	18	12%
25-44 Years	44	30%
45-64 Years	43	30%
Over 65 Years	32	22%
Total	146	100.0%

In 2006, there were seven cases of pediatric TB reported in Indiana.

The TB bacteria are especially dangerous for HIV infected persons whose immune systems are weakened. Of the total number of TB infected persons in Indiana in 2006, 9 persons were also HIV positive, up from 7 in 2005.

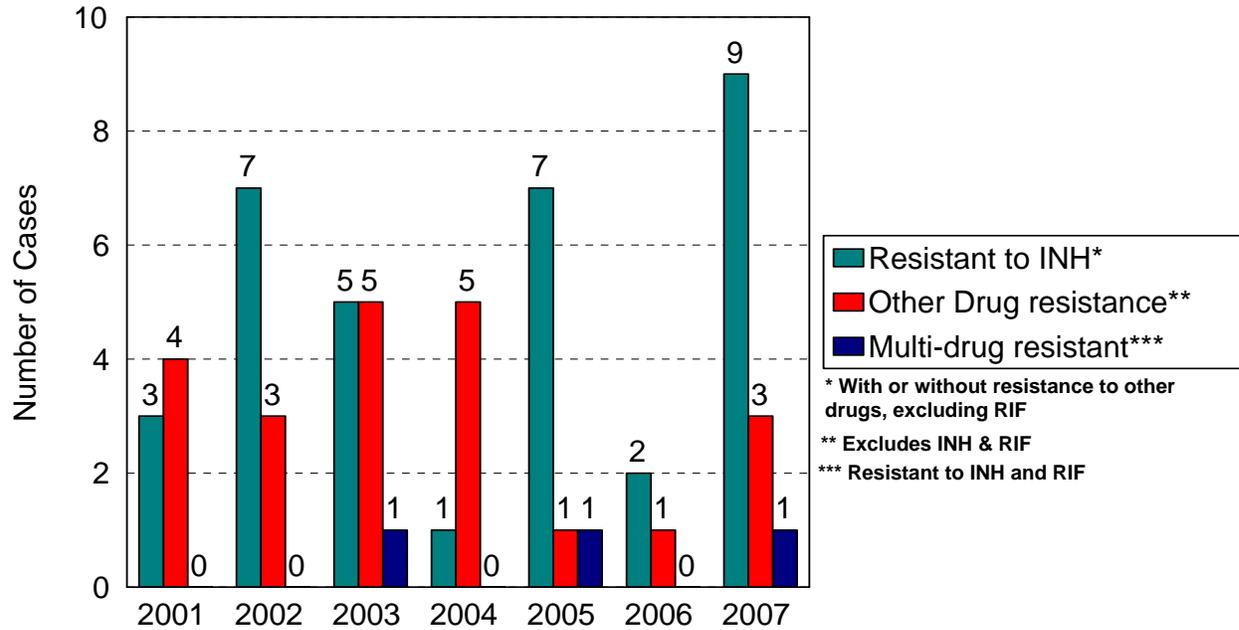
Figure 64 lists the number of HIV and TB co-infection for the past 10 years.

Figure 64: HIV and TB Co-infection Cases, 1996-2006.



In 2006, sixteen cases showed resistance to either INH (Isoniazid – antibiotic specifically described to treat TB), had multi-drug resistance, or had other drug resistance. Figure 65 shows the number of drug resistant TB cases for the period of 2000 to 2006.

Figure 65: TB Cases with Drug Resistance, 2000-2006



ISDH Tuberculosis Control Program

Finally, the geographic distribution of TB cases for 2006 is listed in Table 56.

Table 56: Reported TB Cases by County, 2006

County	Number of Cases
ALLEN	10
BARTHOLOMEW	*
BOONE	*
CASS	*
CLINTON	*
DELAWARE	*
DUBOIS	*
ELKHART	6
FLOYD	*
FRANKLIN	*
FULTON	*
GRANT	*
HAMILTON	*
HENDRICKS	*
HOWARD	*
JAY	*
JEFFERSON	*
KOSCIUSKO	5
LAGRANGE	*
LAPORTE	*
LAKE	10
LAWRENCE	*
MADISON	*
MARION	47
MARSHALL	*
MONROE	*
OWEN	*
PARKE	*
RIPLEY	*
ST. JOSEPH	6
SULLIVAN	*
TIPPECANOE	5
TIPTON	*
VANDEBURGH	*
WHITLEY	*
INDIANA	125

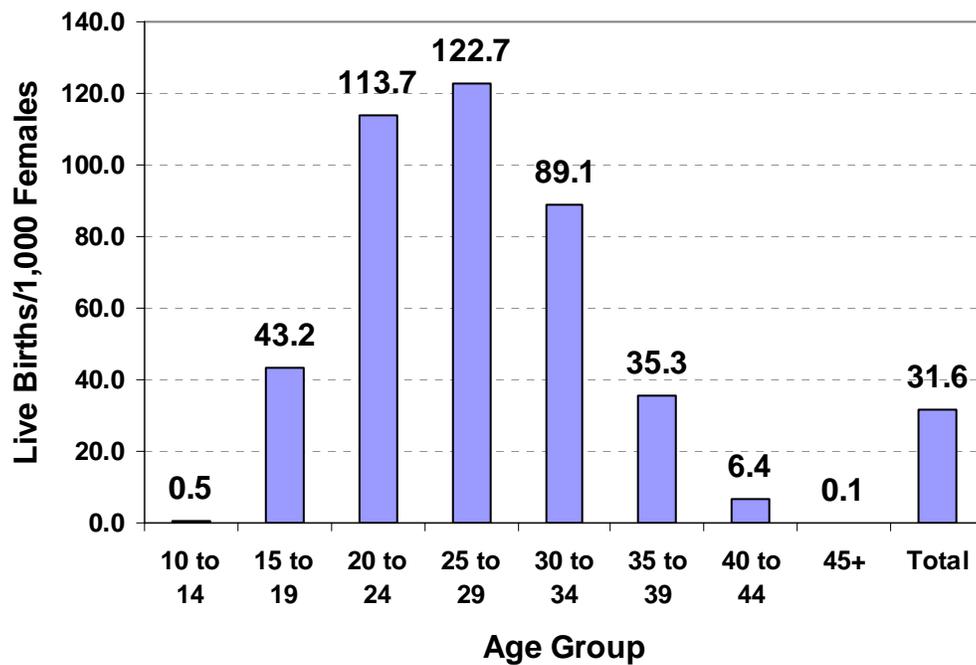
* Indicates counties with less than 5 reported cases

Pregnancy and Natality Report

The number of live births and pregnancies are indicators of HIV risk factors (e.g. sexual behavior). This report includes live births as well as pregnancies. Pregnancies include births, fetal deaths, and induced terminated pregnancies. In 2005, the latest data available for this report, the overall birth rate was 31.6 per 1,000 females aged 15-49 in Indiana⁶. In absolute terms there were 87,088 births in Indiana in 2005.

As shown in Figure 66, women aged 25 to 29 years had the highest birth rate (122.7 per 1000 females) and women aged 45 and older years had the lowest (0.1 per 1000 females).

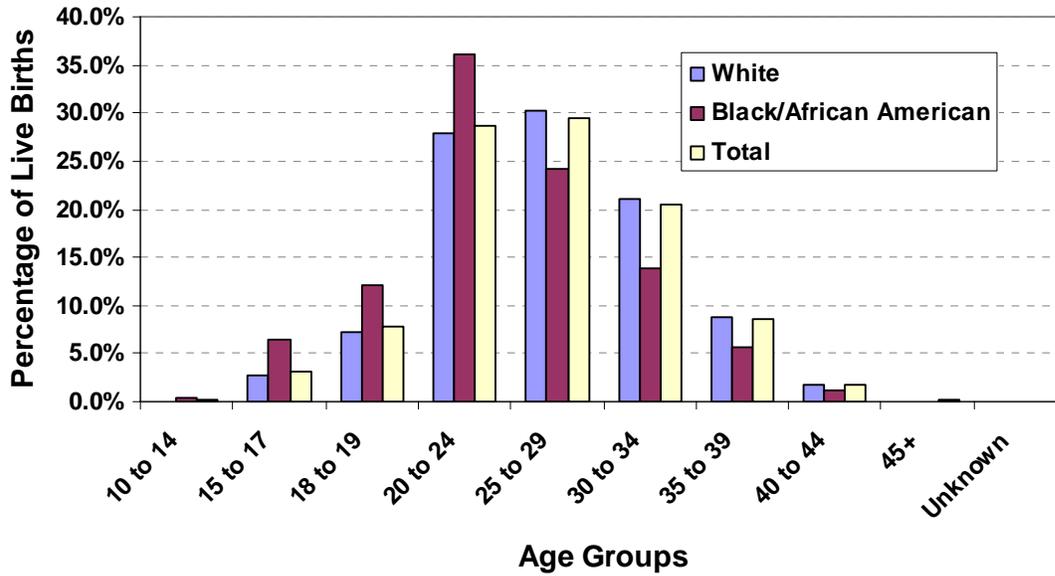
Figure 66: Live Birth Rates by Age Category, 2005



⁶ Indiana State Department of Health, Epidemiology Resource Center, Data Analysis Team, 2005

Figure 67 shows the percentage distribution of live births by age and race of the mother for Indiana.

Figure 67: Percentage of Live Births By Age and Race, 2005



Source: Indiana State Department of Health, Epidemiology Resource Center, Data Analysis Team 2005

It is interesting to note that the share of pregnancies among White mothers age 24 and under is lower than for African American mothers. However, the share of live births among White mothers is higher than African American mothers in the age groups 25 and older.

Table 57 lists the number of reported pregnancies for each county in 2005, as well as the percentage and rate per 1,000 females by county.

Table 57: Pregnancies by County of Residence of the Mother, 2005

County	Total Births	Percent	Rate
Adams	658	0.7%	104.1
Allen	5881	6.0%	84.0
Bartholomew	1180	1.2%	84.3
Benton	125	0.1%	77.5
Blackford	154	0.2%	60.8
Boone	758	0.8%	70.1
Brown	111	0.1%	40.5
Carroll	220	0.2%	56.2
Cass	636	0.7%	85.1
Clark	1428	1.5%	67.7
Clay	355	0.4%	66.8
Clinton	559	0.6%	86.0
Crawford	107	0.1%	48.1
Daviess	520	0.5%	92.8
Dearborn	657	0.7%	66.1
Decatur	375	0.4%	77.1
DeKalb	610	0.6%	73.2
Delaware	1502	1.5%	54.3
Dubois	588	0.6%	74.2
Elkhart	3665	3.7%	91.6
Fayette	327	0.3%	68.7
Floyd	934	1.0%	64.2
Fountain	203	0.2%	64.3
Franklin	289	0.3%	62.7
Fulton	284	0.3%	72.5
Gibson	430	0.4%	67.1
Grant	854	0.9%	60.1
Greene	415	0.4%	64.8
Hamilton	4061	4.2%	73.8
Hancock	980	1.0%	74.9
Harrison	465	0.5%	61.7
Hendricks	1800	1.8%	65.0
Henry	620	0.6%	70.4
Howard	1181	1.2%	72.0
Huntington	474	0.5%	62.6
Jackson	658	0.7%	79.0
Jasper	512	0.5%	77.0
Jay	315	0.3%	81.4
Jefferson	380	0.4%	58.2
Jennings	423	0.4%	72.1
Johnson	1891	1.9%	68.4
Knox	498	0.5%	66.5
Kosciusko	1118	1.1%	74.8
LaGrange	775	0.8%	105.5
Lake	8288	8.5%	83.4
LaPorte	1523	1.6%	75.6
Lawrence	584	0.6%	66.0
Madison	1888	1.9%	76.4
Marion	18196	18.6%	98.1
County	Total	Percent	Rate
Marshall	725	0.7%	79.1

Martin	147	0.2%	82.3
Miami	506	0.5%	77.2
Monroe	1574	1.6%	44.9
Montgomery	523	0.5%	72.1
Morgan	959	1.0%	68.3
Newton	144	0.1%	50.2
Noble	739	0.8%	78.4
Ohio	56	0.1%	47.0
Orange	257	0.3%	67.0
Owen	263	0.3%	56.8
Parke	198	0.2%	53.6
Perry	221	0.2%	64.7
Pike	164	0.2%	70.7
Porter	2089	2.1%	63.2
Posey	237	0.2%	45.9
Pulaski	167	0.2%	64.8
Putnam	440	0.4%	58.7
Randolph	309	0.3%	62.6
Ripley	413	0.4%	75.9
Rush	236	0.2%	71.3
St. Joseph	4238	4.3%	75.2
Scott	318	0.3%	63.3
Shelby	551	0.6%	63.4
Spencer	240	0.2%	61.3
Starke	316	0.3%	76.7
Steuben	474	0.5%	72.3
Sullivan	229	0.2%	60.7
Switzerland	102	0.1%	51.7
Tippecanoe	2358	2.4%	61.5
Tipton	193	0.2%	63.3
Union	96	0.1%	65.9
Vanderburgh	2633	2.7%	72.0
Vermillion	209	0.2%	66.5
Vigo	1450	1.5%	67.9
Wabash	403	0.4%	61.6
Warren	88	0.1%	54.9
Warrick	652	0.7%	57.7
Washington	340	0.3%	60.9
Wayne	961	1.0%	70.7
Wells	317	0.3%	59.2
White	356	0.4%	79.8
Whitley	426	0.4%	67.3
UNKNOWN	16	0.0%	
Indiana	97,788	100.0%	75.4