

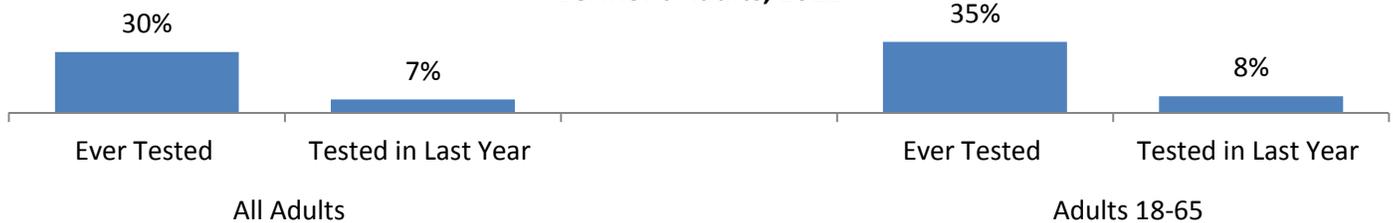
2012 Vermont Adult Behavioral Risk Factor Survey

Data Brief – H.I.V. Testing

The Centers for Disease Control and Prevention recommends that all individuals ages 13 to 65 be tested for human immunodeficiency virus, or H.I.V., at least once as part of regular health screenings. Individuals at high risk, regardless of age, should be tested more often¹. Using 2012 Vermont Behavioral Risk Factor Surveillance System (BRFSS) data we can look at the H.I.V. testing among adults 18-65, as well as where that testing occurs.

In 2012, 30% of all Vermont adults said they had ever been tested for H.I.V. This increased to 35% when looking only at those 18 to 65 years of age. Less than 10% of adults reported being tested in the last year.

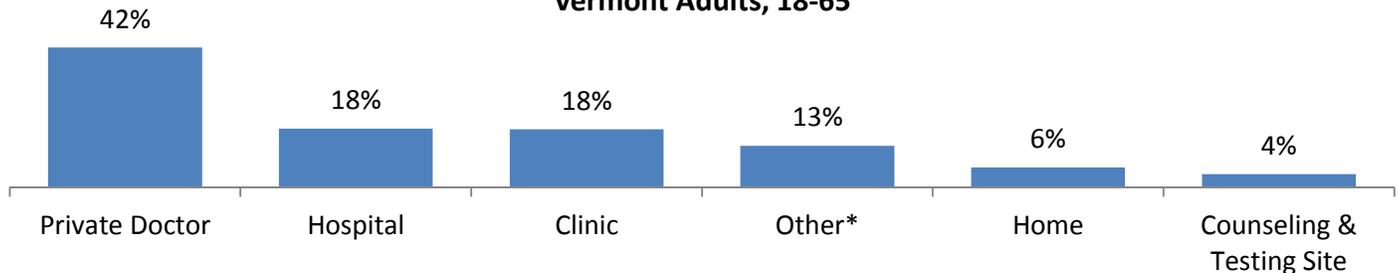
**H.I.V. testing - ever and in the last year
Vermont Adults, 2012**



Where Received Testing:

More than four in ten (42%) Vermont adults ages 18 to 65 said their last H.I.V. test was completed in a private doctor's office or health maintenance organization (HMO) office. About two in ten, (18% each) said their last H.I.V. test was done at a hospital or clinic. Thirteen percent were tested somewhere else, including jail, prison, or a drug treatment facility, while six percent used an at-home test, and four percent went to a counseling and testing site.

**Where received most recent H.I.V. test
Vermont Adults, 18-65**



Younger adults, those 18-44, are significantly more likely to have received their H.I.V. test at a doctor's office than those 45-65 (46% vs. 35%). Conversely, those 45-65 are significantly more likely to use an at home test than those 18-44 (11% vs. 3%).

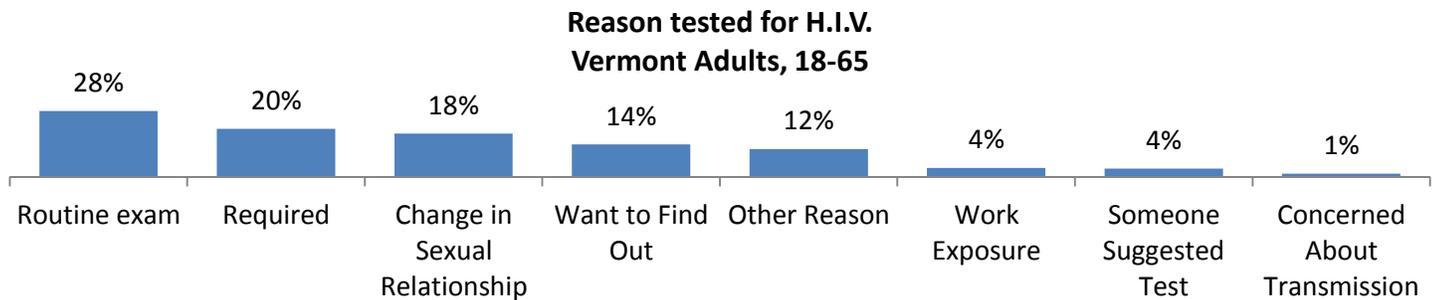
Women 18-65 were significantly more likely than men of the same age to have received their H.I.V. test in a private doctor's office (49% vs. 34%). Men were more likely to be tested at a clinic (22% vs. 14%) or somewhere else (18% vs. 8%), as compared with women.

There were no statistically significant differences in location of testing by education or annual household income level.

¹ Centers for Disease Control and Prevention (<http://www.cdc.gov/hiv/basics/index.html>)

Reason for Testing:

More than a quarter (28%) of Vermont adults 18-65 said their H.I.V. test was part of a routine medical exam. For women, this included tests done during pregnancy. Two in ten said the test was required, while slightly fewer (18%) said they were tested due to a change in a sexual relationship (new relationship or partner cheated). Fourteen percent said they just wanted to find out their H.I.V. status and less than five percent each said they were tested due to a work exposure to blood, a suggestion from someone else or they were thought they might have H.I.V. or were worried they could give it to others.



Adults who had a H.I.V. test as part of a routine exam were more likely to be female (38%) and 18-44 (34%). Those who said the test was required were more likely to be male (27%), 45-65 (27%), and have a college degree or higher (26%).

Who is Getting Tested:

More than half of adults 25-44 have ever been tested for H.I.V. This is significantly higher than the 24% among those 18-24 and 26% among those 45-65. Adults with a college degree or higher are significantly more likely to have ever had an H.I.V. test than those with less education. Forty-two percent of adults with a college degree reported having been tested, compared with about a third (32%) of those with a high school degree or less and those with some college education.

While females were more likely to report being tested than males (37% vs. 33%), this difference was not statistically significant. Reported H.I.V. testing by annual household income level also did not differ significantly across the levels.

Demographic	%
Gender	
Male	33%
Female	37%
Age	
18-24	24%
25-44	52%
45-65	26%
Education	
High school or less	32%
Some College	32%
College or higher	42%
Annual Household Income	
Less than \$25,000	37%
\$25,000 to less than \$50,000	36%
\$50,000 or more	34%

For more information on the BRFSS or to suggest ideas for future BRFSS Data Briefs, contact Jessie Hammond, M.P.H. (802-863-7663; Jessie.Hammond@state.vt.us).