HIV/AIDS and Special Populations

Multiple Choice
Identify the choice that best completes the statement or answers the question.

1. **HIV/AIDS Among African Americans**
   At all stages of HIV/AIDS, from infection with HIV to death with AIDS, blacks are disproportionately affected compared with members of other races and ethnicities. According to the 2000 census, while blacks make up approximately 13% of the US population, in 2005, blacks accounted for ______ of the estimated 37,331 new HIV/AIDS diagnoses in the 33 states with long-term, confidential name-based HIV reporting.
   A. 29 percent  
   B. 39 percent  
   C. 49 percent  
   D. 59 percent

2. Although race and ethnicity, by themselves, are not risk factors for HIV infection, blacks are also likely to face challenges associated with risk factors for HIV infection. All of the following are accurate statements about these risk factors EXCEPT:
   A. Black women are most likely to be infected with HIV as a result of sex with men who are infected with HIV, and they may not be aware of their male partner’s risk factors for HIV infection, such as unprotected sex with multiple partners, bisexuality, or injection drug use
   C. Black MSM are more likely than other MSM not to identify themselves as gay, and this absence of self-identification or the absence of disclosure presents challenges to prevention programs
   B. African Americans are often unaware of their HIV status, and therefore don’t seek proper treatment. A CDC study showed that of participating black males who have sex with males (MSM) and who tested positive for HIV, 55% were unaware of their infection
   D. The highest rates of sexually transmitted diseases (STDs) are those for blacks, and the presence of certain STDs can increase ones chances of contacting HIV infection 3-to-5 fold

3. Socioeconomic issues and other social and structural influences affect the rates of HIV infection among blacks, and studies have shown that nearly 1 in 3 blacks were living in poverty and that there is an association between higher AIDS incidence and lower income.
   A. True  
   B. False

4. **HIV/AIDS Among American Indians and Alaska Natives**
   HIV/AIDS is a growing problem among American Indians and Alaska Natives. Which of the following is an accurate statement about statistics affecting this population in 2005?
   A. Women accounted for 29% of the HIV/AIDS diagnoses among American Indians and Alaska Natives
   B. HIV/AIDS was diagnosed for an estimated 295 American Indians and Alaska Natives representing 2.5% of the total number of HIV/AIDS diagnoses reported for that year
   C. The rate (per 100,000 persons) of HIV/AIDS diagnosis for American Indians and Alaska Natives was 15.4, compared with 63.3 for blacks, 36.8 for Hispanics, 9.8 for whites, and 4.4 for Asians and Pacific Islanders
   D. All of the above
5. The American Indian and Alaska Native population makes up 562 federally recognized tribes plus at least 50 state-recognized tribes. Because each tribe has its own culture, beliefs, and practices and these tribes may be subdivided into language groups, prevention programs that can be adapted to individual tribal cultures and beliefs and that emphasize traditional teachings and the importance of the community are critically important.

A. True  
B. False

6. Access to HIV testing and issues concerning confidentiality are important for many American Indians and Alaska Natives, and each of the following is an accurate statement about HIV testing for this population EXCEPT:

A. Many American Indians and Alaska Natives reside in rural areas and may be less likely to be tested for HIV because of limited access

B. American Indians and Alaska Natives may be less likely to seek testing because of concerns about confidentiality in close-knit communities

C. During 1997-2000, 42% of American Indians and Alaska Natives who responded to the Behavioral Risk Factor Surveillance System survey reported that they had never been tested for HIV

D. In the southwestern United States, 58.1% of American Indians and Alaska Natives reported never having been tested

7. HIV/AIDS Among Asians and Pacific Islanders

In 2005, the rate of AIDS diagnosis by race/ethnicity was lowest for Asians and Pacific Islanders (3.6 per 100,000 population), compared with 54.1 per 100,000 for blacks (including African Americans), 18.0 per 100,000 for Hispanics, 7.4 for American Indians and Alaska Natives, and 5.9 per 100,000 for whites.

A. True  
B. False

8. Which of the following is an accurate statement about substance abuse and HIV/AIDS among Asian and Pacific Islander populations?

A. According to a study of Filipino American cocaine users in the San Francisco Bay Area, cocaine use was strongly associated with behavioral risk factors for HIV infection, including infrequent condom use, commercial sex activity, and low rates of HIV testing

B. Research showed that the use of drugs or alcohol was associated with unprotected anal intercourse

C. In a study of young Asian and Pacific Islander MSM, more than 65% used “party drugs” such as ecstasy, inhaled nitrates, hallucinogens, crack, and amphetamines

D. None of the above

9. In 2004, 44% of Asians and Pacific Islanders received an AIDS diagnosis within 1 year after their HIV infection was diagnosed, which indicated that the diagnosis of HIV infections is made later in the course of disease for these populations than for any other ethnic group.

A. True  
B. False

10. The HIV/AIDS Epidemic Among Hispanics/Latinos

While Hispanics/Latinos comprise 15% of the US population, they accounted for 17% of all new HIV infections occurring in the United States in 2006. For Hispanic/Latino men living with HIV/AIDS, the most common methods of HIV transmission were, in order:

A. Sexual contact with other men, injection drug use, and high-risk heterosexual contact

B. Injection drug use, sexual contact with other men, , and high-risk heterosexual contact

C. Sexual contact with other men, high-risk heterosexual contact, and injection drug use

D. None of the above
11. Which of the following is an accurate statement about how cultural, socioeconomic, and health-related factors contribute to the HIV epidemic and prevention challenges in the US Hispanic/Latino community?

A. Behavioral risk factors for HIV infection differ by country of birth and data suggest that Hispanics/Latinos born in Puerto Rico are more likely than other Hispanics/Latinos to contract HIV as a result of sexual contact with other men

B. Greater acculturation into the US culture generally has positive effects on the health behaviors of Hispanics/Latinos, as they are more likely to communicate with partners about practicing safer sex

C. Hispanic/Latina women and Hispanic/Latino men are most likely to be infected with HIV as a result of sex with men, so condom usage is should be a very important part of prevention programs

D. The rates of sexually transmitted diseases, which can increase the chances of contracting HIV, are higher for Hispanics/Latinos, and in 2006, the rate of chlamydia infection for Hispanics/Latinos was about 4 times the rate for whites

12. While machismo may have has positive implications for HIV prevention, such as strength and protection of the family, proving masculinity through power and dominance can lead both straight and gay Hispanic/Latino men to engage in risky sexual behavior.

A. True
B. False

13. HIV/AIDS among Men Who Have Sex with Men (MSM)

Although the number of HIV diagnoses for MSM increased during the 1980s and 1990s, recent surveillance data show a decrease in HIV diagnoses for this group.

A. True
B. False

14. Each of the following is an accurate statement about risk factors for HIV infections in men having sex with men EXCEPT:

A. STDs, which increase the risk for HIV infection, remain an important health issue for MSM, and the proportion of gonorrhea-positive test results among MSM increased from 6% in 1988 to 15.2% in 2004

B. Substance use can increase the risk for HIV transmission through the tendency toward risky sexual behaviors while under the influence and through sharing needles or other injection equipment

C. More than 25 years into the HIV epidemic, there is evidence of an underestimation of risk, and optimism about HIV treatments is associated with a greater willingness to have unprotected anal intercourse

D. During the past decade, the Internet has created new opportunities for MSM to meet sex partners, and may also normalize certain risky behaviors by making others aware of these behaviors and creating new connections between those who engage in them

15. Although MSM as a group continues to be the population most affected by HIV infection and AIDS, research shows that HIV prevention efforts can reduce sexual risk factors. One review found that among men who received an HIV prevention intervention, the proportion who engaged in unprotected sex decreased, on average, 16%.

A. True
B. False

16. HIV/AIDS Among Persons Aged 50 or Over
The number of persons aged 50 years and older living with HIV/AIDS has been increasing in recent years. Risk factors for this age group may include all of the following EXCEPT:

A. Older women may be especially at risk for HIV infection because age-related vaginal thinning and dryness can cause tears in the vaginal area

B. Some older persons inject drugs or smoke crack cocaine, and HIV transmission through injection drug use accounts for more than 24% of AIDS cases among persons aged 50 and older

C. Some older persons, compared with those who are younger, may be less knowledgeable about HIV/AIDS and therefore less likely to use condoms, and to get tested for HIV

D. Health care professionals may underestimate their older patients’ risk for HIV/AIDS and thus may miss opportunities to deliver prevention messages, offer HIV testing, or make an early diagnosis that could help their patients get early care

17. Physicians may miss a diagnosis of AIDS with older adults because some symptoms, such as fatigue, weight loss, and mental confusion, can mimic those of normal aging.
   A. True B. False

18. **HIV/AIDS Among Women**
   While early in the epidemic HIV infection and AIDS were diagnosed for relatively few women and female adolescents, today women account for more than one third of all new HIV/AIDS diagnoses.
   A. True B. False

19. Which of the following is an accurate statement about women and the HIV/AIDS epidemic as of 2005?
   A. In 2004, HIV infection was the leading cause of death for black women aged 35-44.
   B. According to a CDC study of more than 19,500 patients with HIV in 10 US cities, women were slightly more likely than men to receive prescriptions for the most effective treatments for HIV infection
   C. In 2005, an estimated 4,128 women with AIDS died, representing 25% of the 16,316 persons with AIDS who died in the 50 states and the District of Columbia
   D. Of the 126,964 women living with HIV/AIDS, 61% were black, 19% were white, 18% were Hispanic, 1% were Asian or Pacific Islander, and less than 1% were American Indian or Alaska Native

20. To further reduce the incidence of HIV infection, CDC announced a new initiative known as Advancing HIV Prevention in 2003. It included all of the following strategies EXCEPT:
   A. Making HIV testing a routine part of medical care
   B. Implementing new models for diagnosing HIV infections outside medical settings
   C. Further decreasing perinatal HIV transmission
   D. Implementing research on interventions to reduce HIV-related risk behaviors or their outcomes

21. **HIV/AIDS Among Women Who Have Sex with Women**
   To date, there are no confirmed cases of female-to-female sexual transmission of HIV in the United States database, and through December, 2004, of the 534 HIV infected women who were reported to have had sex only with women, 91% also had another risk factor, typically injection drug use.
   A. True B. False
22. It is important that health care providers remember that sexual identity does not necessarily predict behavior, and that some women who identify themselves as women who have sex with women or lesbian may still be at risk for HIV infection through unprotected sex with men.
   A. True  
   B. False

23. **HIV/AIDS Among Youth**
   Young people in the United States are at persistent risk for HIV infection, especially youth of minority races and ethnicities. All of the following are accurate statements about HIV/AIDS among this population as of 2004 EXCEPT:
   A. An estimated 4,883 young people received a diagnosis of HIV infection or AIDS in 2004, representing about 13% of the persons given a diagnosis during that year
   B. African Americans were disproportionately affected by HIV infection, accounting for 45% of HIV infections reported among persons age 13-24
   C. Since the beginning of the epidemic, an estimated 40,059 young people in the United States had received a diagnosis of AIDS, and an estimated 10,129 young people with AIDS had died
   D. An estimated 7,761 young people were living with AIDS, a 42% increase since 2000, when 5,457 young people were living with AIDS

24. According to a CDC study of 5,589 MSM aged 15-22, 48% did not let other people know they were sexually attracted to men, and were therefore less likely to seek HIV testing.
   A. True  
   B. False

**Matching**

**An Evaluation is Required for Each Course:**

Please evaluate the course by choosing one of the responses below for each question. This data will help us to improve our program and meet certifying organization requirements. Thank you for allowing QUE to be your provider.

   A. Excellent  
   B. Above Average  
   C. Average  
   D. Below Average

25. The extent to which this course met the objectives
26. The adequacy of the author’s mastery of the subject
27. Efficiency of course mechanics
28. The applicability or usability of the information for you
29. Website functionality and ease of use
30. Availability of staff member (does the website provide adequate direction on how to access assistance)

**Short Answer**
31. Please provide us with any additional comments or suggestions that would help us to improve the quality of our program:

32. How did you find out about QUE?