

STD/HIV SURVEILLANCE

Annual Report
2017



LONG BEACH
HEALTH & HUMAN SERVICES



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ACKNOWLEDGMENTS

This report was prepared by the HIV/STD Surveillance Program staff. We wish to thank our colleagues at the California Department of Public Health, STD Control Branch and Office of AIDS for providing data.

Additionally, the Long Beach Department of Health and Human Services wishes to acknowledge all contributions made by health care providers, laboratories, community groups, and members of the community who are committed to reducing HIV and STD morbidity within the city.

ADDITIONAL REPORT INFORMATION

For information on this report please contact:

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DEPARTMENT OF HEALTH AND HUMAN SERVICES RESOURCES

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Address: 2525 Grand Avenue, Long Beach, CA 90815

To report cases, call or fax: p:(562)570-4321 or f:(562)570-4374

STD/HIV Hotline: (562) 570-4321



DEPARTMENT OF HEALTH AND HUMAN SERVICES CLINICAL SERVICES

Sexual Health (STD) Clinic: The Sexual Health Clinic offers comprehensive sexual health services Monday through Friday from 8am to 5pm. Services include: STD testing and treatment, and Biomedical HIV prevention services. Please call (562) 570-4180 to make an appointment or for more information.

HIV Care and Coordination (HCC) Clinic: The HIV Care and Coordination (HCC) Clinic provides medical services, health education, case management, treatment advocacy, support and direct linkage to outside services when needed. Please call (562) 570-4255 to make an appointment or for more information.

HIV Prevention Services: FREE anonymous and confidential HIV testing services are available on a walk-in basis Monday through Friday 8am to 5pm (No appointment is necessary). Mobile HIV testing services are provided throughout the community at various locations.

HIV/STD Surveillance Program: The Long Beach HIV/STD Surveillance Program aims to inform Long Beach residents of the morbidity of STD/HIV and make data informed decisions to mitigate disease morbidity. Please call (562) 570-4321 for any STD/HIV related questions.



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LIST OF ACRONYMS

AIDS Acquired Immunodeficiency Syndrome

eHARS Enhanced HIV/AIDS Reporting System

HIV Human Immunodeficiency Virus

LBDHHS Long Beach Department of Health and Human Services

MSM Men who have Sex with Men

MSM-PWID Men who have Sex with Men and who also Inject Drugs

OOJ Out-of-Jurisdiction

PWID People Who Inject Drugs

STD Sexually Transmitted Disease



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STD SURVEILLANCE

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STD TABLE AND FIGURE DEFINITIONS

Chlamydia (*Chlamydia trachomatis*): Chlamydia is the most commonly reported sexually transmitted disease in the US. It can infect both men and women, causing infections in the genitals, rectum, throat, and eye. It can cause serious, permanent damage to a woman's reproductive system, making it difficult or impossible for her to get pregnant later. Chlamydia can also cause a potentially fatal ectopic pregnancy (pregnancy that occurs outside the womb), as well as Pelvic Inflammatory Disease and chronic pelvic pain. It is most commonly diagnosed and reported among women ages 15-24.

Gonorrhea (*Neisseria gonorrhoeae*): Gonorrhea is a sexually transmitted disease that can infect both men and women. It can cause infections in the genitals, rectum, and throat, and eye. It can cause serious, permanent damage to a woman's reproductive system, making it difficult or impossible for her to get pregnant later. Gonorrhea can also cause a potentially fatal ectopic pregnancy (pregnancy that occurs outside the womb), as well as Pelvic Inflammatory Disease and chronic pelvic pain. It is most commonly diagnosed in men ages 20-29.

Syphilis (*Treponema pallidum*): Syphilis is a sexually transmitted disease that can infect both men and women. It can cause long-term complications if not treated correctly. Symptoms in adults are divided into stages. These stages are primary, secondary, early latent, and late latent syphilis. Syphilis can be spread by direct contact with a syphilis sore during vaginal, anal, or oral sex. Sores can be found anywhere on your body, such as: the penis, vagina, anus, in the rectum, or on the lips and in the mouth. Syphilis can also be spread from an infected mother to her unborn baby.

Primary Syphilis: A stage of infection with *T. pallidum* characterized by one or more ulcerative lesions (e.g. chancre), which might differ considerably in clinical appearance.

Secondary Syphilis: A stage of infection caused by *T. pallidum* characterized by localized or diffuse mucocutaneous lesions (e.g., rash — such as non-pruritic macular, maculopapular, papular, or pustular lesions), often with generalized lymphadenopathy. Other symptoms can include mucous patches, condyloma lata, and alopecia. The primary ulcerative lesion may still be present. Because of the wide array of symptoms possibly indicating secondary syphilis, serologic tests for syphilis and a thorough sexual history and physical examination are crucial to determine if a case should be classified as secondary syphilis.

Latent Syphilis: A stage of infection caused by *T. pallidum* in which organisms persist in the body of the infected person without causing symptoms or signs. Latent syphilis is subdivided into early, late, and unknown categories based on the duration of infection.

Early Latent Syphilis: A subcategory of latent syphilis. When the initial infection has occurred within the previous 12 months, latent syphilis is classified as early latent.

Late Latent Syphilis: A subcategory of latent syphilis. When initial infection has occurred >1 year previously, latent syphilis is classified as late latent.

Latent Syphilis of Unknown Duration: A subcategory of latent syphilis. When the date of initial infection cannot be established as having occurred within the previous year, the patient's age is between 13-35 years and patient's titer is ≥ 32 , latent syphilis is classified as latent syphilis of unknown duration.

Total Early Syphilis: consists of primary syphilis, secondary syphilis and early latent syphilis diagnosis.

Congenital Syphilis: A condition caused by infection in utero with *Treponema pallidum*. A wide spectrum of severity exists, and only severe cases are clinically apparent at birth. An infant or child (aged <2 years) may have signs such as hepatosplenomegaly, rash, condyloma lata, snuffles, jaundice (nonviral hepatitis), pseudoparalysis, anemia, or edema.



(nephrotic syndrome and/or malnutrition). An older child may have various stigmata (e.g., interstitial keratitis, nerve deafness, anterior bowing of shins, frontal bossing, mulberry molars, Hutchinson teeth, saddle nose, rhagades, or Clutton joints).

Extra Genital Site Testing: three-site testing, also known as triple-site testing; testing pharyngeal, rectal, and urethral/ first void urine samples for chlamydia and gonorrhea detection using nucleic acid amplification tests (NAATs).

STD LIMITATIONS

Suppression of Small Numbers: The Long Beach HIV/STD Surveillance program must balance providing data to the public, stakeholders, and policymakers while simultaneously protecting client confidentiality. Thus, when dealing with data concerning small and/or sensitive populations (e.g., number of female Native American chlamydia cases) in our report, cells containing 0–4 cases were suppressed to eliminate the possibility of identification. It is important to note that this data is still valuable and is used internally to evaluate STDs/HIV in Long Beach to make programmatic recommendations.

Due to fewer than 12 cases of CT, GC, and TES being reported in individuals who identified as transgender, this portion of the report will not release data for those who identified themselves as transgender. This is to ensure the protection of these individuals’ personal health information.

Unstable Rates: The National Center for Health Statistics considers rates based on 20 or fewer observations unstable. The Center for Health Statistics utilizes relative standard error (RSE):

$$RSE(X) = \sqrt{A + \frac{B}{X}}$$

Any RSE less than 30% does not meet the requirement for a minimum degree of accuracy.

The City of Long Beach acknowledges that data presented in this report may not meet the National Center for Health Statistics guidelines on stable rates. However, the City must utilize the available data for programmatic evaluation and recommendations. In the context of this report, unstable rates are displayed for reporting purposes only.

Year Totals: While case counts are continuously updated from previous years by the California Department of Public Health, STD Control Branch, year totals in this report are not updated. This report captures data as of the March 31st state deadline for reporting all chlamydia, gonorrhea, and syphilis cases of the previous year.



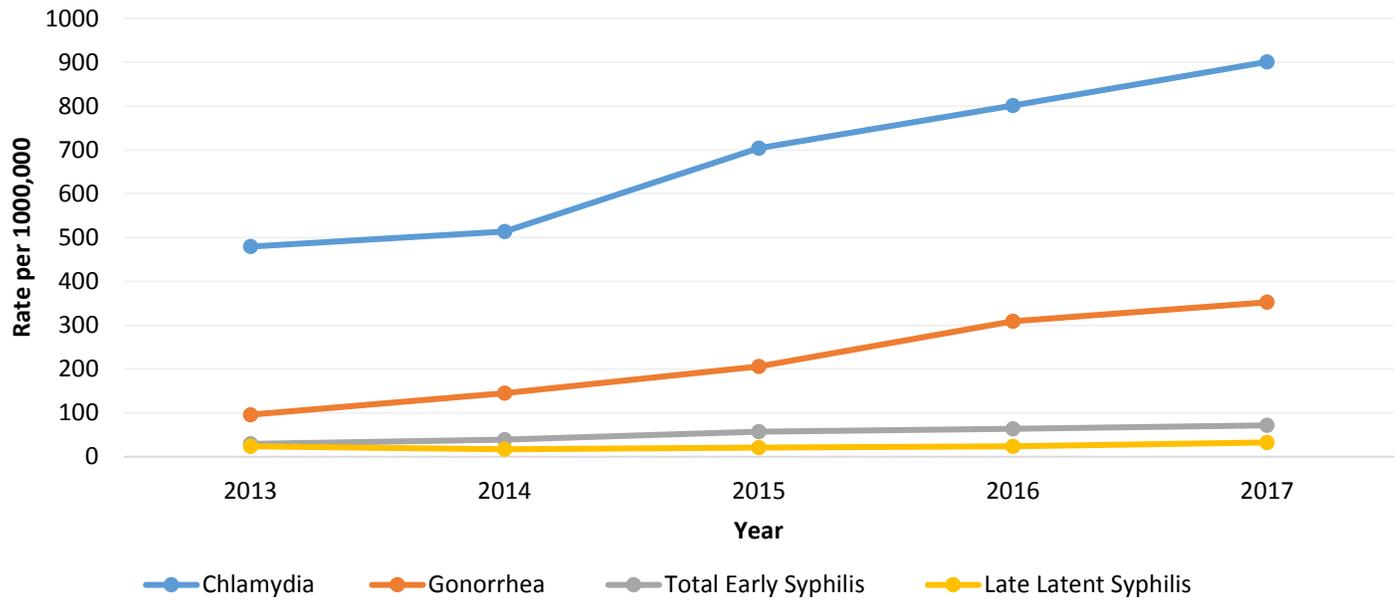
STD HIGHLIGHTS

- The rates for chlamydia, gonorrhea, and total early syphilis in Long Beach have seen an overall increase from 2013 to 2017 ([Table 1](#)). The majority of sexually transmitted disease (STD) diagnoses in Long Beach are concentrated among young adults aged 15-29 years ([Tables 5, 9, and 13](#)). Unfortunately, about 50% of the race/ethnicity for chlamydia, gonorrhea, and syphilis is missing. Among those with available race/ethnicity data, African Americans had the highest rates of infection for chlamydia, gonorrhea, and total early syphilis in 2017 ([Tables 6, 10, and 14](#)).
- Most chlamydia cases occurred in the 90805 zip code; gonorrhea cases occurred most often in 90802 and 90805; and total early syphilis occurred most often in the 90802 zip code ([Figures 5, 9, and 11](#)).
- *Chlamydia trachomatis* is the most common reportable communicable disease in the City of Long Beach. Chlamydia rates in Long Beach have increased by 88% ([Table 3](#)) (479.5 to 901.1 per 100,000) from 2013 to 2017 ([Table 4](#)). In 2017, Long Beach had the second highest rate of chlamydia in the State of California ([Table 2](#)), with San Francisco having the highest. In 2017, the highest rates of chlamydia occurred among those aged 15-29 years ([Table 5](#)). In the same year, the total rate for females was significantly higher than that of males (1,065.3 per 100,000 compared to 719.2 per 100,000) ([Table 5](#)).
- Gonorrhea rates in Long Beach have increased by 267% ([Table 3](#)) (95.9 to 352.4 per 100,000) from 2013 to 2017 ([Table 8](#)). In 2017, Long Beach had the second highest rate of gonorrhea in the State of California ([Table 2](#)). In 2017, the highest rates of gonorrhea occurred among those aged 20-29 years ([Table 9](#)). In the same year, the total rate for males was more than double that of females (478.8 per 100,000 compared to 224.9 per 100,000) ([Table 9](#)).
- There are fewer cases of extra genital site tests in comparison to urogenital site tests for both chlamydia and gonorrhea (287 extra genital site tests performed compared to 1,771 urogenital site test) ([Tables 7 and 11](#)). Despite this finding, there has been an 178% increase in the number of extra genital site tests being performed since 2013 ([Tables 7 and 11](#)). Women are receiving fewer extra genital site tests than men ([Tables 7 and 11](#)).
- Total early syphilis (primary, secondary, early latent syphilis) rates in Long Beach have increased by 143% ([Table 3](#)) (29.5 to 71.5 per 100,000) from 2013 to 2017 ([Table 12](#)). In 2017, Long Beach had the third highest rate of total early syphilis in the State of California ([Table 2](#)). In 2017, the highest rates of total early syphilis occurred among men aged 25-34 years and women aged 20-24 years ([Table 13](#)). In the same year, total early syphilis rates for men were much higher than those of women (134.1 per 100,000 compared to 11 per 100,000) ([Table 13](#)). Men who have sex with men (MSM) comprises of 67% of syphilis cases in Long Beach ([Figure 13](#)); however, due to the large amount of missing data this may be an underestimation of syphilis among MSM.
- Rates of late latent syphilis in Long Beach have steadily increased from 2013 to 2017 (16.9 per 100,000 compared to 32.5 per 100,000) ([Figure 12](#)).
- Trends in congenital syphilis usually follow trends for total early syphilis among women, with a lag of 1-2 years (CDC, 2016). From 2013 to 2017, the number of total early syphilis cases among women increased by 285% ([Figure 15](#)). During 2017, a total of 4 (67.7 per 100,000 live births) cases of congenital syphilis were detected ([Figure 14](#)). This is a 300% (15.2 per 100,000 compared to 67.7 per 100,000) ([Figure 14](#)) increase since 2013. Congenital syphilis can have devastating effects on the baby if left untreated such as: neurological or ocular symptoms, low birth weight, miscarriage, and stillbirth.



OVERVIEW OF STDs IN LONG BEACH

Figure 1. Chlamydia, gonorrhea, total early syphilis, and late latent syphilis incidence rates per 100,000 population, Long Beach, 2013-2017



Note: Incidence rates are per 100,000 population.

Source: California Department of Public Health, STD Control Branch

State of California, Department of Finance, *California County Population Estimates and Components of Change by County*, July, 1, 2013-2017. Sacramento, California, December 2017.

Table 1. Chlamydia, gonorrhea, total early syphilis, and late latent syphilis cases and incidence rates per 100,000 population, Long Beach, 2013-2017

	2013		2014		2015		2016		2017	
	Cases	Rate								
Chlamydia	2,256	479.5	2,422	513.6	3,346	703.9	3,863	801.6	4,321	901.1
Gonorrhea	451	95.9	685	145.3	980	206.1	1,489	309.0	1,690	352.4
Total Early Syphilis	137	29.2	183	38.8	273	57.4	307	63.7	343	71.5
Late Latent Syphilis	112	23.7	80	16.9	99	20.8	115	23.9	156	32.5

Note: Incidence rates are per 100,000 population.

Source: California Department of Public Health, STD Control Branch

State of California, Department of Finance, *California County Population Estimates and Components of Change by County*, July, 1, 2013-2017. Sacramento, California, December 2017.



Table 2. State ranking by disease (chlamydia, gonorrhea, total early syphilis, and late latent syphilis), Long Beach, 2013-2017

	2013		2014		2015		2016		2017	
	Rate	Rank	Rate	Rank	Rate	Rank	Rate	Rank	Rate	Rank
Chlamydia	479.5	-	513.6	-	703.9	2 nd	801.6	2 nd	901.1	2 nd
Gonorrhea	95.9	-	145.3	-	206.1	4 th	309.0	3 rd	351.5	2 nd
Total Early Syphilis	29.2	-	38.8	-	57.4	2 nd	63.7	3 rd	71.0	3 rd
Late Latent Syphilis	23.7	-	16.9	-	20.8	-	23.9	-	32.5	-

Note: Incidence rates are per 100,000 population.

Source: California Department of Public Health, STD Control Branch

State of California, Department of Finance, *California County Population Estimates and Components of Change by County*, July, 1, 2013-2017. Sacramento, California, December 2017.

*If data was not available, values were left blank.

Table 3. Percent change by disease (chlamydia, gonorrhea, total early syphilis, and late latent syphilis), Long Beach, 2013-2017

	2013-2014	2014-2015	2015-2016	2016-2017	2013-2017
	Percent change				
Chlamydia	7.1%	37.1%	13.9%	12.4%	87.9%
Gonorrhea	51.5%	41.8%	49.9%	14.1%	266.5%
Total Early Syphilis	32.9%	47.9%	11.0%	12.2%	143.2%
Late Latent Syphilis	-28.7%	23.1%	14.9%	36.0%	37.1%

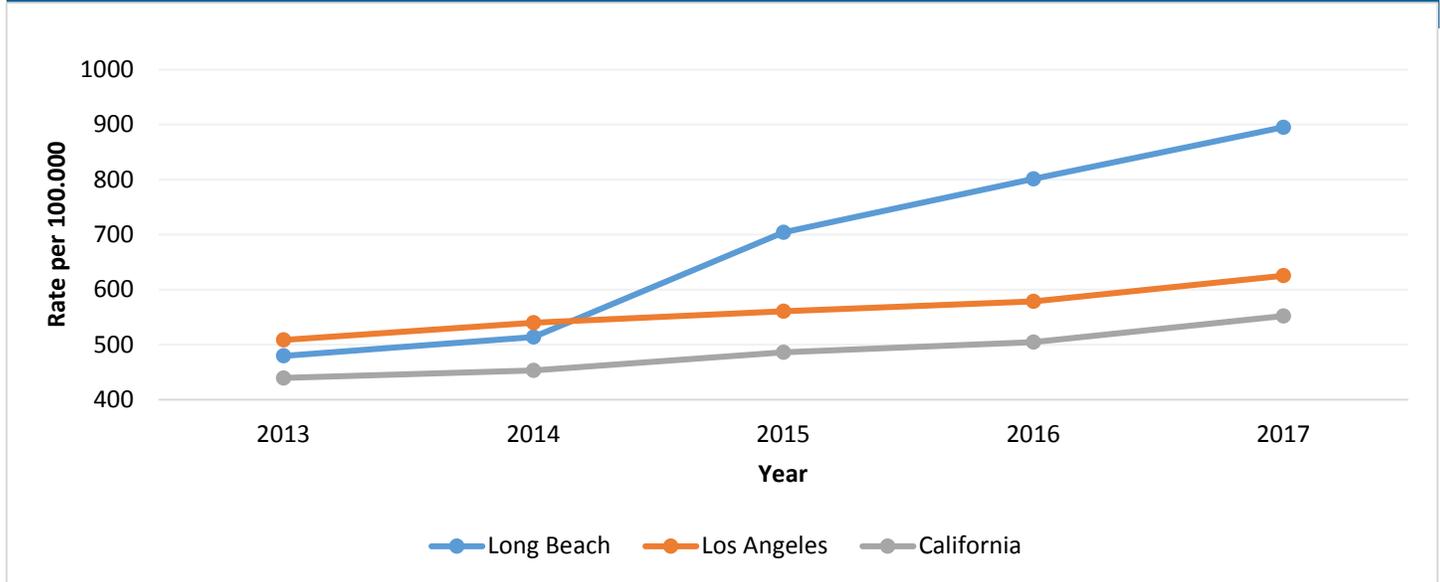
Source: California Department of Public Health, STD Control Branch

State of California, Department of Finance, *California County Population Estimates and Components of Change by County*, July, 1, 2013-2017. Sacramento, California, December 2017.



CHLAMYDIA IN LONG BEACH

Figure 2. Chlamydia incidence rates per 100,000 population, Long Beach, Los Angeles, and California, 2013-2017



Note: Incidence rates are per 100,000 population.

Source: California Department of Public Health, STD Control Branch

State of California, Department of Finance, *California County Population Estimates and Components of Change by County*, July, 1, 2013-2017. Sacramento, California, December 2017.

Table 4. Chlamydia cases and incidence rates per 100,000 population, Long Beach, Los Angeles, and California, 2013-2017

	2013		2014		2015		2016		2017	
	Cases	Rate								
Long Beach	2,256	479.5	2,422	513.6	3,346	703.9	3,863	801.6	4,321	901.1
Los Angeles	50,949	508.5	54,363	539.9	57,134	560.6	59,176	578.5	64,225	625.3
California	167,916	439.5	174,557	453.4	189,937	486.1	198,503	504.4	218,710	552.1

Note: Incidence rates are per 100,000 population.

Source: California Department of Public Health, STD Control Branch

State of California, Department of Finance, *California County Population Estimates and Components of Change by County*, July, 1, 2013-2017. Sacramento, California, December 2017.



Table 5. Chlamydia cases and incidence rates per 100,000 population by sex and age group, Long Beach, 2013-2017

	2013		2014		2015		2016		2017	
	Cases	Rate	Cases	Rate	Cases	Rate	Cases	Rate	Cases	Rate
LONG BEACH TOTAL	2,256	479.5	2,422	513.6	3,346	703.9	3,863	801.6	4,321	901.1
Male at Birth Total	710	307.9	885	383	1,156	496.2	1,349	571.2	1,690	719.2
0-9	<5	-	<5	-	<5	-	<5	-	<5	-
10-14	<5	-	<5	-	<5	-	<5	-	<5	-
15-19	96	534.8	113	628.2	123	678.3	136	739.7	171	934.8.0
20-24	219	1,131.2	273	1,407.0	342	1,748.5	399	2,012.1	478	2,422.7
25-29	168	865.9	195	1,002.8	258	1,316.1	294	1,479.4	370	1,871.2
30-34	94	544.9	99	572.6	147	843.4	162	916.8	221	1,257.0
35-44	71	208.4	116	339.8	151	438.7	199	570.3	254	731.6
45+	56	76.2	75	101.8	109	146.8	148	196.6	182	243.0
Not Specified	5*	-	10*	-	25	-	11*	-	12*	-
Female at Birth Total	1,538	641	1,526	634.6	2,178	898.4	2,489	1,012.70	2,605	1,065.3
0-9	<5	-	<5	-	<5	-	<5	-	<5	-
10-14	9*	56.6	9*	56.5	<5	-	7*	43.0	8*	49.4
15-19	408	2,221.5	382	2,075.4	496	2,673.1	534	2,838.7	607	3,243.1
20-24	648	3,188.5	628	3,083.2	882	4,295.5	938	4,506.1	996	4,808.9
25-29	262	1,307.1	273	1,359.0	419	2,069.0	550	2,679.0	508	2,486.9
30-34	107	592.8	111	613.6	182	998.1	222	1,200.9	256	1,391.7
35-44	65	187.8	76	219.1	112	320.2	154	434.3	145	411.0
45+	18*	22.2	26	31.9	40	48.7	64	76.9	71	85.7
Not Specified	19*	-	17*	-	42	-	20	-	14*	-

Note: Incidence rates are per 100,000 population.

Source: California Department of Public Health, STD Control Branch

State of California, Department of Finance, *California County Population Estimates and Components of Change by County*, July, 1, 2013-2017. Sacramento, California, December 2017.

Gender specific age groups and race/ethnicity rate calculations exclude "Not Specified" from the denominator.

*Any indicators with less than 20 cases do not meet the requirement for a minimum degree of accuracy outlined by the National Center for Health Statistics. Case counts/rates are included for reporting purposes only.



Table 6. Chlamydia cases and incidence rates per 100,000 population by sex and race/ethnicity, Long Beach, 2013-2017

	2013		2014		2015		2016		2017	
	Cases	Rate	Cases	Rate	Cases	Rate	Cases	Rate	Cases	Rate
LONG BEACH TOTAL	2,256	479.5	2,422	513.6	3,346	703.9	3,863	801.6	4,321	901.1
Male at Birth Total	710	307.9	885	383	1,156	496.2	1,349	571.2	1,690	719.2
Native American/Alaska Native	<5	-	<5	-	<5	-	9*	1,342.5	10*	1,499.2
Asian/Pacific Islander	24	80.4	34	113.7	26	86.3	41	134.2	56	184.2
African American	131	469	136	485.8	155	549.3	208	727.1	248	871.3
Latino	192	200	136	141.4	208	214.5	218	221.7	274	280.1
White	82	118	87	124.9	105	148.4	130	181.3	157	220.0
Other/Multi/Not Specified	277	-	490	-	658	-	743	-	945	-
Female at Birth Total	1,538	641	1,526	634.6	2,178	898.4	2,489	1,012.7	2,605	1,065.3
Native American/Alaska Native	<5	-	<5	-	7*	964.1	8*	1,086.9	8*	1,092.4
Asian/Pacific Islander	100	290	90	260.5	99	284.2	129	365.3	92	261.8
African American	262	792.4	241	727.2	331	990.8	317	936.0	292	866.5
Latina	406	423.8	361	376	479	494.9	533	543.2	418	428.2
White	107	155.9	103	149.7	175	250.2	164	231.2	172	243.8
Other/Multi/Not Specified	659	-	728	-	1,087	-	1,338	-	1,623	-

Note: Incidence rates are per 100,000 population.

Source: California Department of Public Health, STD Control Branch

State of California, Department of Finance, *California County Population Estimates and Components of Change by County*, July, 1, 2013-2017. Sacramento, California, December 2017.

*Any indicators with less than 20 cases do not meet the requirement for a minimum degree of accuracy outlined by the National Center for Health Statistics. Case counts/rates are included for reporting purposes only.

CHLAMYDIA SITE TESTING

Table 7. Positive chlamydia site testing by sex, Long Beach, 2013-2017

	2013		2014		2015		2016		2017	
	Cases	%								
LONG BEACH TOTAL	2,256		2,422		3,346		3,863		4,321	
Male at Birth Total	710	32%	885	37%	1,156	35%	1,349	35%	1,690	39%
Urine	434	80%	423	88%	614	84%	551	78%	515	76%
Urethral	40	7%	16*	3%	39	5%	30	4%	24	4%
Rectal	62	11%	38	8%	63	9%	102	15%	121	18%
Throat	<5	-	6*	1%	11*	2%	20	3%	20	3%
Unknown Site	170	-	402	-	429	-	646	-	1,010	-
Female at Birth Total	1,538	68%	1,526	63%	2,178	65%	2,489	65%	2,605	61%
Urine	769	63%	663	64%	1,050	68%	1,097	73%	759	71%
Urethral	69	6%	22	2%	44	3%	38	3%	25	2%
Rectal	<5	-	<5	-	<5	-	<5	-	12*	1%
Throat	<5	-	<5	-	<5	-	6*	0.4%	<5	-
Cervical	291	24%	282	27%	358	23%	256	17%	182	17%
Vaginal	93	8%	62	6%	91	6%	100	7%	87	8%
Unknown Site	314	-	496	-	633	-	988	-	1,536	-

Source: California Department of Public Health, STD Control Branch

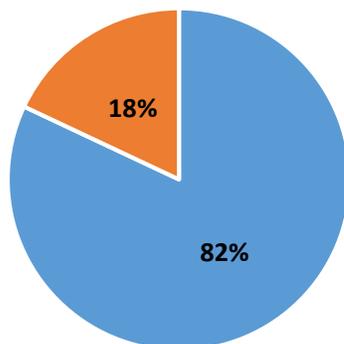
State of California, Department of Finance, *California County Population Estimates and Components of Change by County*, July, 1, 2013-2017. Sacramento, California, December 2017.

*Percentages may not add to 100% due to rounding and not displaying data when less than 5 cases.

*Gender and site test percent calculations exclude "Unknown" from the denominator.

*Any indicators with less than 20 cases do not meet the requirement for a minimum degree of accuracy outlined by the National Center for Health Statistics. Case counts/rates are included for reporting purposes only.

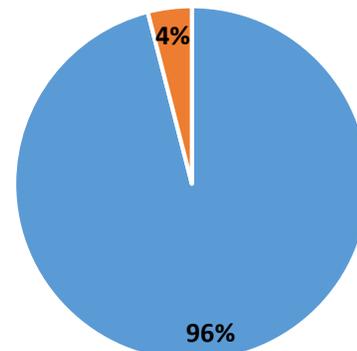
Figure 3. Positive throat site testing by sex, Long Beach, 2013-2017



See Table 7.

■ Male ■ Female

Figure 4. Positive rectal site testing by sex, Long Beach, 2013-2017



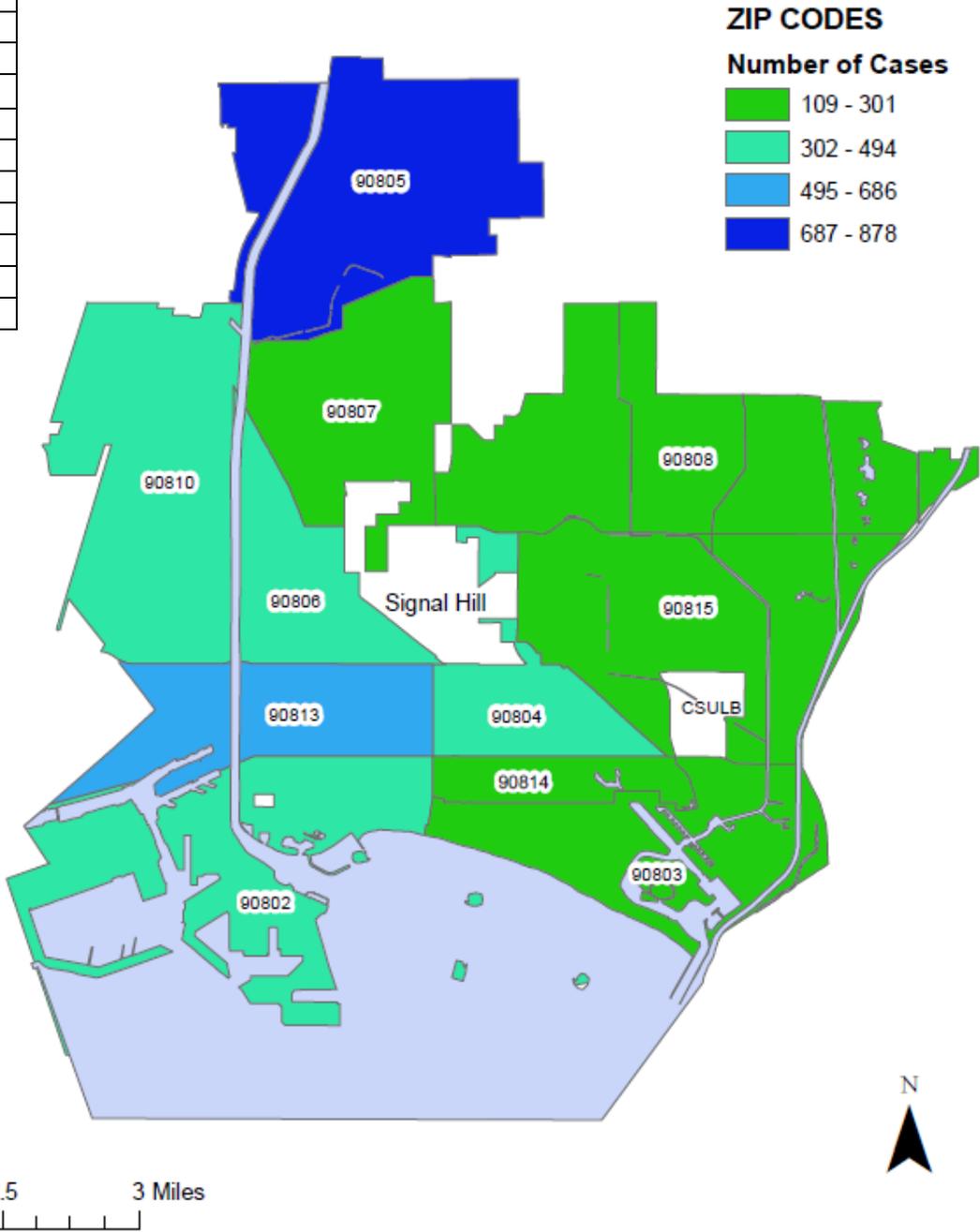
*See Table 7.

■ Male ■ Female



Figure 5. Chlamydia cases by zip code, Long Beach, 2017

Zip code	Num. of Cases
90802	481
90803	169
90804	447
90805	878
90806	445
90807	187
90808	125
90910	383
90813	625
90814	109
90815	186

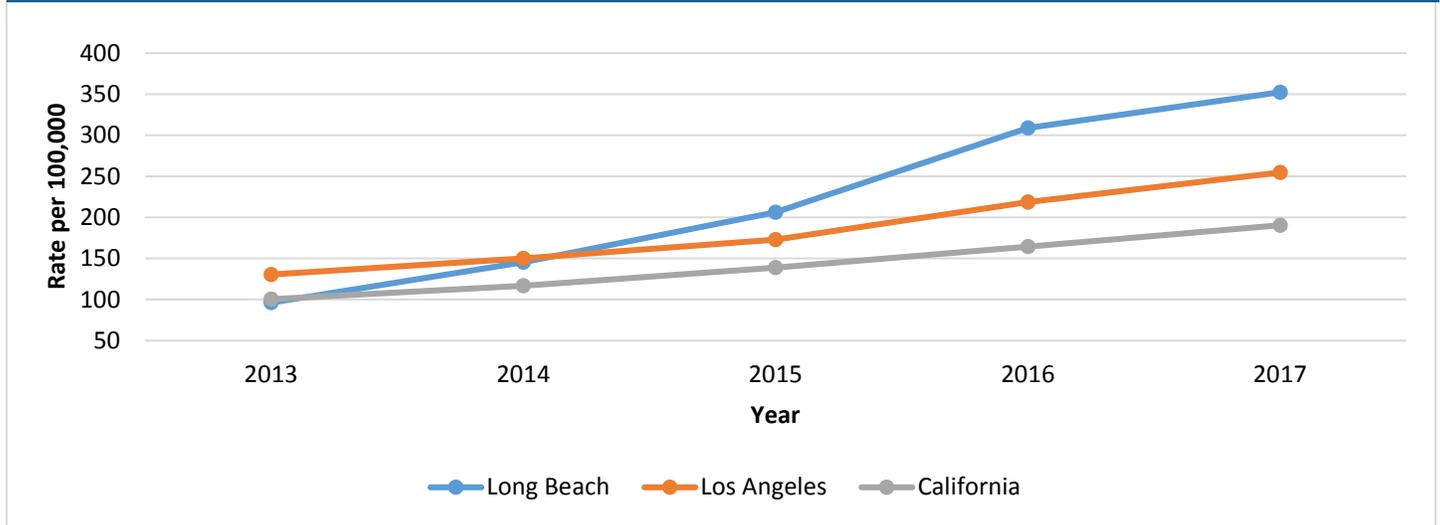


*Map does not include people experiencing homelessness or individuals who did not provide a zip code.
 Source: California Department of Public Health, STD Control Branch.



GONORRHEA IN LONG BEACH

Figure 6. Gonorrhea incidence rates per 100,000 population, Long Beach, Los Angeles, and California, 2013-2017



Note: Incidence rates are per 100,000 population.

Source: California Department of Public Health, STD Control Branch

State of California, Department of Finance, *California County Population Estimates and Components of Change by County*, July, 1, 2013-2017. Sacramento, California, December 2017.

Table 8. Gonorrhea cases and incidence rates per 100,000 population, Long Beach, Los Angeles, and California 2013-2017

	2013		2014		2015		2016		2017	
	Cases	Rate	Cases	Rate	Cases	Rate	Cases	Rate	Cases	Rate
Long Beach	451	95.9	685	145.3	980	206.1	1,489	309.0	1,690	352.4
Los Angeles	13,065	130.4	15,135	150.3	17,614	172.8	22,361	218.6	26,160	254.7
California	38,365	100.4	44,974	116.8	54,255	138.9	64,677	164.3	75,450	190.5

Note: Incidence rates are per 100,000 population.

Source: California Department of Public Health, STD Control Branch

State of California, Department of Finance, *California County Population Estimates and Components of Change by County*, July, 1, 2013-2017. Sacramento, California, December 2016.



Table 9. Gonorrhea cases and incidence rates per 100,000 population by sex and age group, Long Beach, 2013-2017

	2013		2014		2015		2016		2017	
	Cases	Rate	Cases	Rate	Cases	Rate	Cases	Rate	Cases	Rate
LONG BEACH TOTAL	451	95.9	685	145.3	980	206.1	1,489	309.0	1,690	352.4
Male at Birth Total	275	119.3	446	193	627	269.2	1,031	436.6	1,125	478.8
0-9	<5	-	<5	-	<5	-	<5	-	<5	-
10-14	<5	-	<5	-	<5	-	<5	-	<5	-
15-19	17*	94.7	45	250.2	44	242.6	66	359.0	53	289.7
20-24	62	320.2	95	489.6	148	756.6	209	1,054.0	261	1,322.8
25-29	54	278.3	96	493.7	132	673.4	222	1,117.1	232	1,173.3
30-34	35	202.9	67	387.5	88	504.9	158	894.2	188	1,069.3
35-44	61	179.1	82	240.2	114	331.2	206	590.4	215	619.3
45+	40	54.4	57	77.4	94	126.6	161	213.9	173	231.0
Not Specified	<5	-	<5	-	7*	-	8*	-	<5	-
Female at Birth Total	174	72.5	227	94.4	343	141.5	440	179.0	550	224.9
0-9	<5	-	<5	-	<5	-	<5	-	<5	-
10-14	<5	-	<5	-	<5	-	<5	-	<5	-
15-19	46	250.5	50	271.7	74	398.8	76	404.0	128	683.9
20-24	55	270.6	82	402.6	112	545.5	138	663.0	150	724.2
25-29	34	169.6	46	229	50	246.9	90	438.4	113	553.2
30-34	19*	105.3	21	116.1	36	197.4	47	254.2	72	391.4
35-44	13*	37.6	17*	49	41	117.2	51	143.8	55	155.9
45+	<5	-	10*	12.3	17*	20.7	34	40.9	25	30.2
Not Specified	<5	-	<5	-	11*	-	<5	-	6*	-

Note: Incidence rates are per 100,000 population.

Source: California Department of Public Health, STD Control Branch

State of California, Department of Finance, *California County Population Estimates and Components of Change by County*, July, 1, 2013-2017. Sacramento, California, December 2017.

Gender specific age groups and race/ethnicity rate calculations exclude "Not Specified" from the denominator.

*Any indicators with less than 20 cases do not meet the requirement for a minimum degree of accuracy outlined by the National Center for Health Statistics. Case counts/rates are included for reporting purposes only.



Table 10. Gonorrhea cases and incidence rates per 100,000 population by sex and race/ethnicity, Long Beach, 2013-2017

	2013		2014		2015		2016		2017	
	Cases	Rate	Cases	Rate	Cases	Rate	Cases	Rate	Cases	Rate
LONG BEACH TOTAL	451	95.9	685	145.3	980	206.1	1,489	309.0	1,690	352.4
Male at Birth Total	275	119.3	446	193	627	269.2	1,031	436.6	1,125	478.8
American Indian/Alaska Native	<5	-	<5	-	5*	756.1	10*	1,491.7	16*	2,398.8
Asian/Pacific Islander	11*	36.9	10*	33.4	13*	43.1	18*	58.9	23	75.6
Black/African American	76	272.1	111	396.5	132	467.8	191	667.6	206	723.7
Latino	51	53.1	60	62.4	78	80.4	153	155.6	165	168.7
White	43	61.9	78	112	84	118.7	121	168.7	151	211.6
Other/Multi/Not Specified	94	-	186	-	315	-	538	-	564	-
Female at Birth Total	174	72.5	227	94.4	343	141.5	440	179.0	550	224.9
American Indian/Alaska Native	<5	-	<5	-	<5	-	<5	-	5*	682.7
Asian/Pacific Islander	<5	-	6*	17.4	16*	45.9	10*	28.3	10*	28.5
Black/African American	57	172.4	61	184.1	95	284.4	78	230.3	112	332.4
Latina	28	29.2	35	36.5	42	43.4	83	84.6	64	65.6
White	11*	16	23	33.4	30	42.9	40	56.4	64	90.7
Other/Multi/Not Specified	73	-	101	-	159	-	228	-	295	-

Note: Incidence rates are per 100,000 population.

Source: California Department of Public Health, STD Control Branch

State of California, Department of Finance, *California County Population Estimates and Components of Change by County*, July, 1, 2013-2017. Sacramento, California, December 2017.

*Any indicators with less than 20 cases do not meet the requirement for a minimum degree of accuracy outlined by the National Center for Health Statistics. Case counts/rates are included for reporting purposes only.



GONORRHEA SITE TESTING

Table 11. Positive gonorrhea site testing by sex, Long Beach, 2013-2017

	2013		2014		2015		2016		2017	
	Cases	%	Cases	%	Cases	%	Cases	%	Cases	%
LONG BEACH TOTAL	451		685		980		1,489		1,690	
Male at Birth Total	275	61%	446	66%	627	65%	1,031	70%	1,125	67%
Urine	141	68%	227	75%	273	71%	366	63%	307	57%
Urethral	27	13%	8*	3%	26	7%	30	5%	33	6%
Rectal	22	11%	35	12%	53	14%	96	16%	113	21%
Throat	18*	9%	32	11%	35	9%	90	15%	85	16%
Unknown Site	67	-	144	-	240	-	449	-	587	-
Female at Birth Total	174	39%	227	34%	343	35%	440	30%	550	33%
Total										
Urine	88	64%	85	57%	172	75%	184	73%	190	76%
Urethral	5*	4%	<5	-	<5	-	6*	2%	<5	-
Rectal	<5	-	<5	-	<5	-	<5	-	5*	2%
Throat	<5	-	<5	-	5*	2%	7*	3%	7*	3%
Cervical	35	26%	44	29%	29	13%	39	15%	26	10%
Vaginal	9*	7%	18*	12%	17	7%	15*	6%	22	9%
Unknown Site	37	-	77	-	114	-	188	-	299	-

Source: California Department of Public Health, STD Control Branch

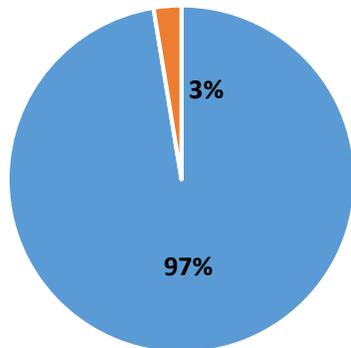
State of California, Department of Finance, *California County Population Estimates and Components of Change by County*, July, 1, 2013-2017. Sacramento, California, December 2017.

*Percentages may not add to 100% due to rounding and not displaying data when less than 5 cases.

* Gender and site test percent calculations exclude "Unknown" from the denominator.

*Any indicators with less than 20 cases do not meet the requirement for a minimum degree of accuracy outlined by the National Center for Health Statistics. Case counts/rates are included for reporting purposes only.

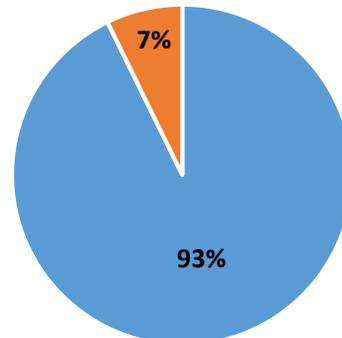
Figure 7. Positive throat site testing by sex, Long Beach, 2013-2017



*Table 11.

■ Male ■ Female

Figure 8. Positive rectal site testing by sex, Long Beach, 2013-2017



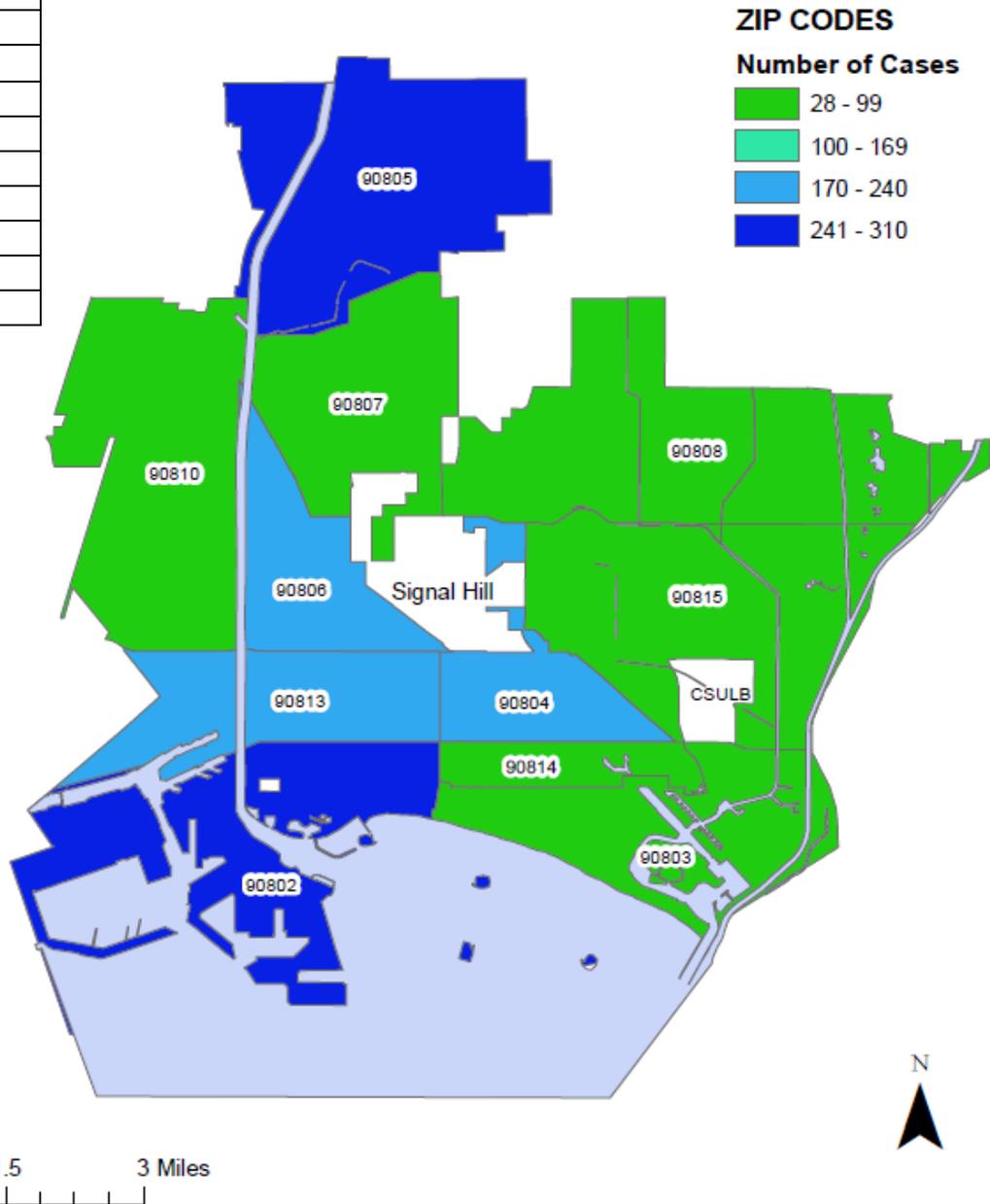
*Table 11.

■ Male ■ Female



Figure 9. Gonorrhea cases by zip code, Long Beach, 2017

Zip code	Num. of Cases
90802	288
90803	67
90804	186
90805	310
90806	171
90807	71
90808	28
90910	83
90813	236
90814	72
90815	51

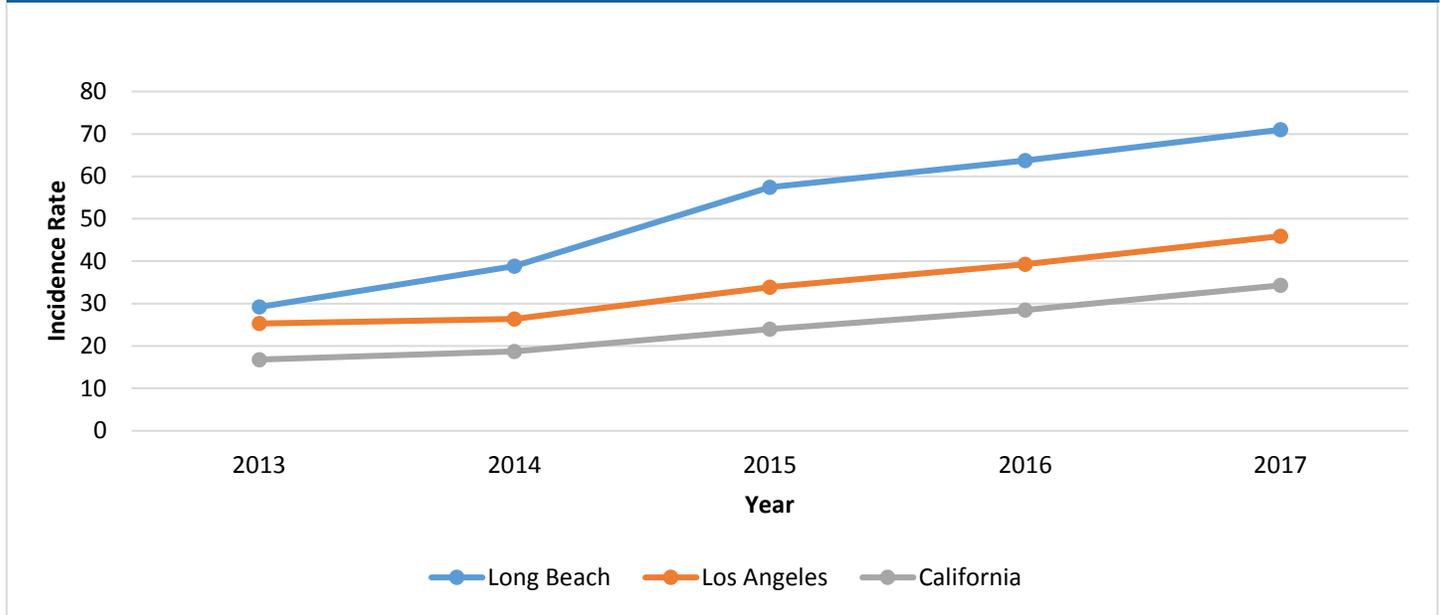


*Map does not include people experiencing homelessness or individuals who did not provide a zip code.
Source: California Department of Public Health, STD Control Branch



SYPHILIS IN LONG BEACH

Figure 10. Total early syphilis¹ incidence rates per 100,000 population, Long Beach, Los Angeles, and California, 2013-2017



¹Total Early syphilis includes primary, secondary and early latent syphilis.

Note: Incidence rates are per 100,000 population.

Source: California Department of Public Health, STD Control Branch

State of California, Department of Finance, *California County Population Estimates and Components of Change by County*, July, 1, 2013-2017. Sacramento, California, December 2017.

Table 12. Total early syphilis¹ cases and incidence rates per 100,000 population, Long Beach, Los Angeles, and California, 2013-2017

	2013		2014		2015		2016		2017	
	Cases	Rate								
Long Beach	137	29.2	183	38.8	273	57.4	307	63.7	343	71.5
Los Angeles	2,531	25.3	2,662	26.4	3,454	33.9	4,018	39.3	4,717	45.9
California	6,433	16.8	7,256	18.7	9,359	24	11,222	28.5	13,605	34.3

¹Total Early syphilis includes primary, secondary and early latent syphilis.

Note: Incidence rates are per 100,000 population.

Source: California Department of Public Health, STD Control Branch

State of California, Department of Finance, *California County Population Estimates and Components of Change by County*, July, 1, 2013-2017. Sacramento, California, December 2017.

Table 13. Total early syphilis¹ cases and incidence rates per 100,000 population by sex and age group, Long Beach, 2013-2017

	2013		2014		2015		2016		2017	
	Cases	Rate	Cases	Rate	Cases	Rate	Cases	Rate	Cases	Rate
LONG BEACH TOTAL	137	29.2	183	38.8	273	57.4	307	63.7	343	71.5
Male at Birth Total	130	56.4	175	75.7	256	109.9	295	124.9	315	134.1
0-9	<5	-	<5	-	<5	-	<5	-	<5	-
10-14	<5	-	<5	-	<5	-	<5	-	<5	-
15-19	<5	-	<5	-	5*	27.6	<5	-	6*	32.8
20-24	15*	77.5	14*	72.2	27	138	39	196.7	38	192.6
25-29	26	134	29	149.1	36	183.6	48	241.5	50	252.9
30-34	10*	58	22	127.2	31	177.9	49	277.3	42	238.9
35-44	35	102.7	50	146.4	80	232.4	64	183.4	80	230.4
45+	40	54.4	57	77.4	77	103.7	92	122.2	99	132.2
Not Specified	<5	-	<5	-	<5	-	<5	-	<5	-
Female at Birth Total	7*	2.9	8*	3.3	17*	7.0	12*	4.9	27	11.0
0-9	<5	-	<5	-	<5	-	<5	-	<5	-
10-14	<5	-	<5	-	<5	-	<5	-	<5	-
15-19	<5	-	<5	-	<5	-	<5	-	5*	26.7
20-24	5*	24.6	<5	-	5*	24.4	5*	24.0	9*	43.5
25-29	<5	-	<5	-	<5	-	<5	-	7*	34.3
30-34	<5	-	<5	-	6*	33	<5	-	<5	-
35-44	<5	-	<5	-	<5	2.9	<5	-	<5	-
45+	<5	-	<5	-	<5	1.2	<5	-	<5	-
Not Specified	<5	-	<5	-	<5	-	<5	-	<5	-

¹ Total early syphilis includes primary, secondary and early latent syphilis.

Gender specific age groups and race/ethnicity rate calculations exclude "Not Specified" from the denominator.

Note: Incidence rates are per 100,000 population.

Source: California Department of Public Health, STD Control Branch

State of California, Department of Finance, *California County Population Estimates and Components of Change by County*,

July, 1, 2013-2017. Sacramento, California, December 2017.

*Any indicators with less than 20 cases do not meet the requirement for a minimum degree of accuracy outlined by the National Center for Health Statistics. Case counts/rates are included for reporting purposes only.



Table 14. Total early syphilis¹ cases and incidence rates per 100,000 population by sex and race/ethnicity, Long Beach, 2013-2017

	2013		2014		2015		2016		2017	
	Cases	Rate	Cases	Rate	Cases	Rate	Cases	Rate	Cases	Rate
LONG BEACH TOTAL	137	29.2	183	38.8	273	57.4	307	63.7	343	71.5
Male at Birth Total	130	56.4	175	75.7	256	109.9	295	124.9	315	134.0
American Indian/Alaska Native	<5	-	<5	-	<5	-	<5	-	<5	-
Asian/Pacific Islander	<5	-	7*	23.4	12*	39.8	14*	45.8	23	75.6
Black/African American	21	75.2	23	82.2	38	134.7	51	178.3	61	214.3
Latino	46	48	60	62.4	93	95.9	102	103.7	124	126.8
White	26	37.4	41	58.9	79	111.7	89	124.1	87	121.9
Other/Multi/Not Specified	33	-	44	-	34	-	38	-	19*	-
Female at Birth Total	7*	2.9	8*	3.3	17*	7.0	12*	4.9	27	11.0
American Indian/Alaska Native	<5	-	<5	-	<5	-	<5	-	<5	-
Asian/Pacific Islander	<5	-	<5	-	<5	-	<5	-	<5	-
Black/African American	<5	-	<5	-	6*	18	5*	14.8	8*	23.7
Latina	5*	5.2	<5	-	5*	5.2	6*	6.1	14*	14.3
White	<5	-	<5	-	<5	-	<5	-	<5	-
Other/Multi/Not Specified	<5	-	<5	-	<5	-	<5	-	<5	-

¹Total early syphilis includes primary, secondary and early latent syphilis.

Note: Incidence rates are per 100,000 population.

Source: California Department of Public Health, STD Control Branch

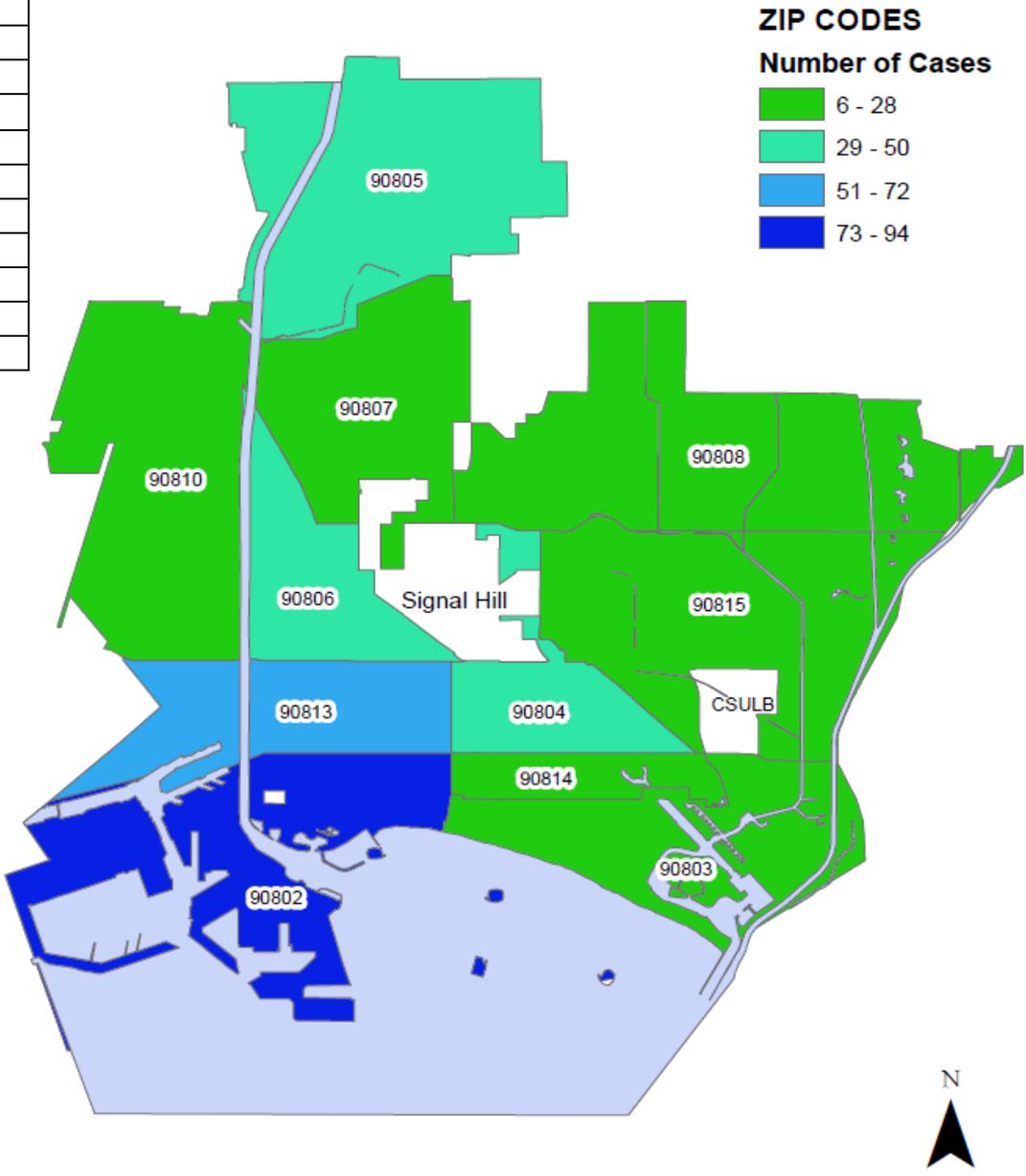
State of California, Department of Finance, *California County Population Estimates and Components of Change by County*, July, 1, 2013-2017. Sacramento, California, December 2017.

*Any indicators with less than 20 cases do not meet the requirement for a minimum degree of accuracy outlined by the National Center for Health Statistics. Case counts/rates are included for reporting purposes only.



Figure 11. Total early syphilis¹ cases by zip code, Long Beach, 2017

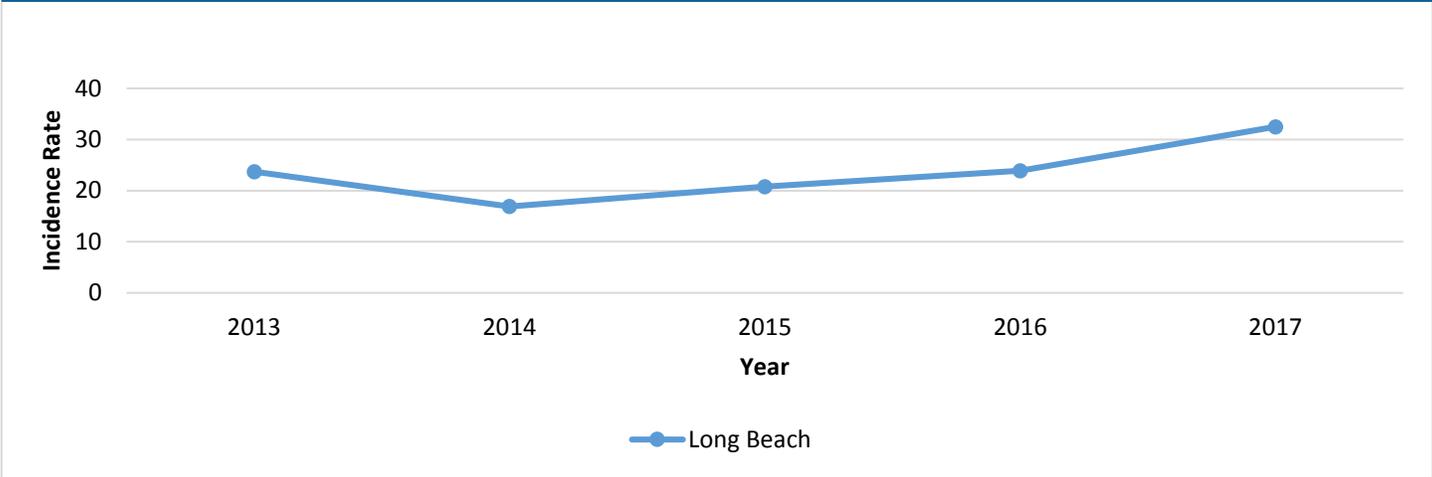
Zip code	Num. of Cases
90802	94
90803	13
90804	35
90805	37
90806	36
90807	14
90808	6
90810	10
90813	52
90814	24
90815	9



*Map does not include people experiencing homelessness or individuals who did not provide a zip code.
 Source: California Department of Public Health, STD Control Branch
¹Total early syphilis includes primary, secondary and early latent syphilis.



Figure 12. Late latent syphilis incidence rates per 100,000 population, Long Beach, 2013-2017



Note: Incidence rates are per 100,000 population.

Source: California Department of Public Health, STD Control Branch

State of California, Department of Finance, *California County Population Estimates and Components of Change by County*, July, 1, 2013-2017. Sacramento, California, December 2017.

*County and State level data was not available for late latent syphilis comparison.

Table 15. Late latent syphilis cases and incidence rates per 100,000 population, Long Beach, 2013-2017

	2013		2014		2015		2016		2017	
	Cases	Rate	Cases	Rate	Cases	Rate	Cases	Rate	Cases	Rate
Long Beach	112	23.7	80	16.9	99	20.8	115	23.9	156	32.5

Note: Incidence rates are per 100,000 population.

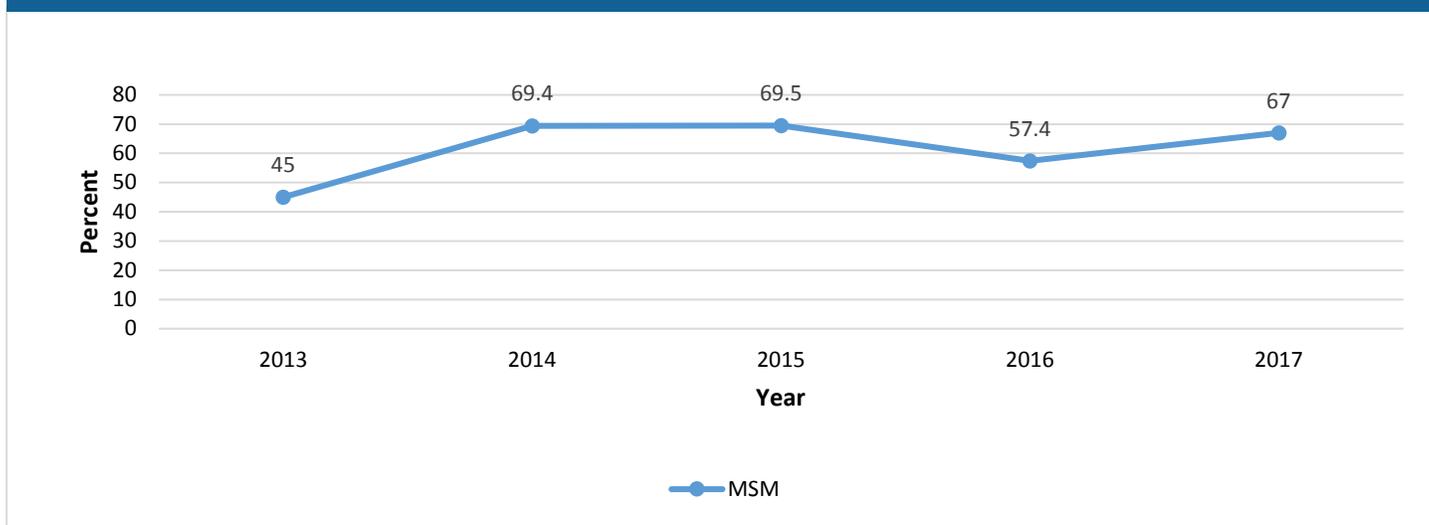
Source: California Department of Public Health, STD Control Branch

State of California, Department of Finance, *California County Population Estimates and Components of Change by County*, July, 1, 2013-2017. Sacramento, California, December 2017.

*County and State level data was not available for late latent syphilis comparison.



Figure 13. Percent of male syphilis¹ cases who have sex with men²(MSM), Long Beach, 2013-2017



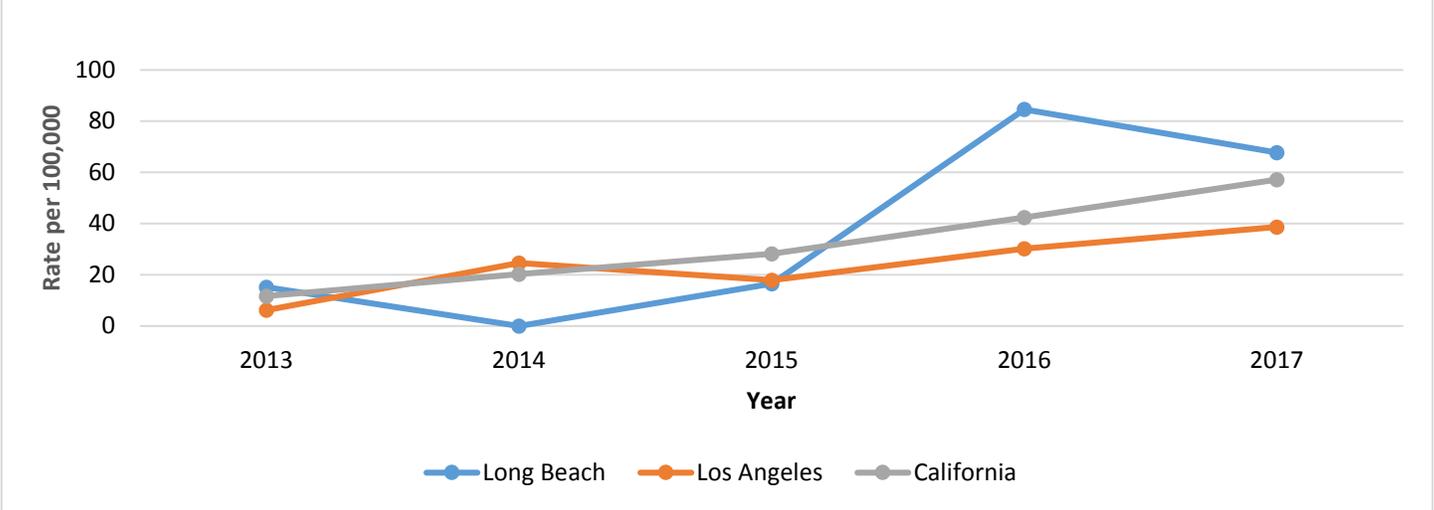
Source: California Department of Public Health, STD Control Branch
State of California, Department of Finance, *California County Population Estimates and Components of Change by County*,
July, 1, 2013-2017. Sacramento, California, December 2017.

¹Includes primary, secondary, early latent, and late latent cases.

²This percent does not include males with unknown or missing sex partner information.



Figure 14. Congenital syphilis incidence rates per 100,000 population, Long Beach, Los Angeles, and California, 2013-2017

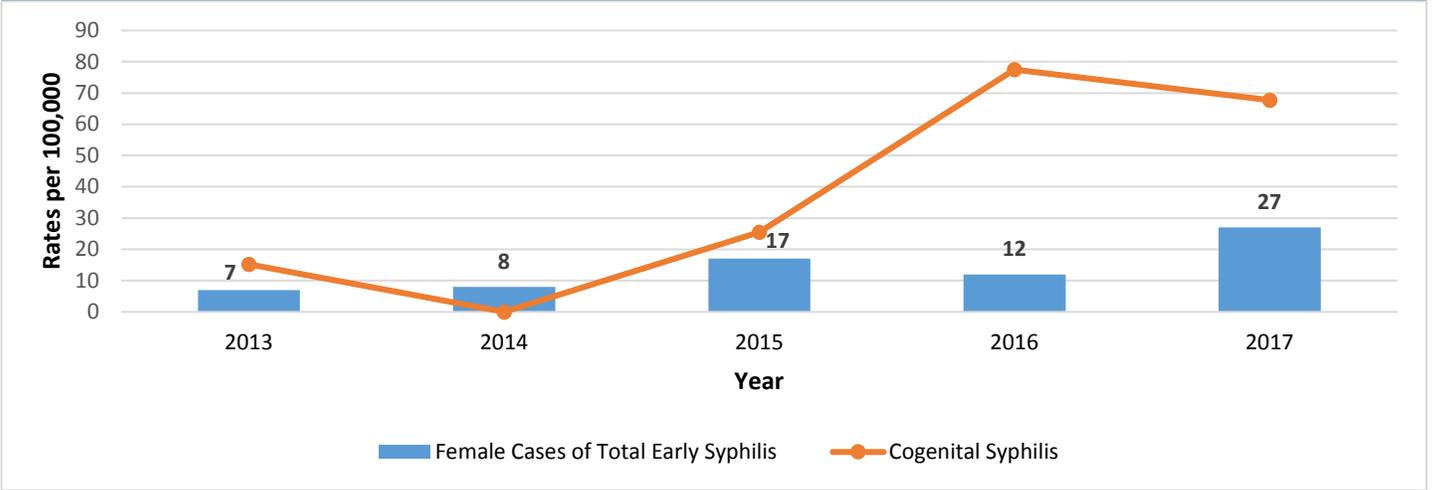


Note: Incidence rates are per 100,000 population.

Source: California Department of Public Health, STD Control Branch

State of California, Department of Finance, *California County Population Estimates and Components of Change by County*, July, 1, 2013-2017. Sacramento, California, December 2017.

Figure 15. Congenital syphilis incidence rates per 100,000 population, and female cases of total early syphilis¹, Long Beach, 2013-2017



¹ Total early syphilis includes primary, secondary and early latent syphilis.

Note: Incidence rates are per 100,000 population.

Source: California Department of Public Health, STD Control Branch

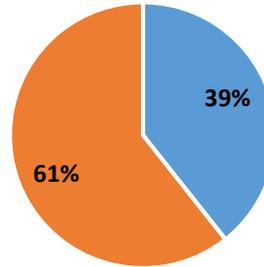
State of California, Department of Finance, *California County Population Estimates and Components of Change by County*, July, 1, 2013-2017. Sacramento, California, December 2017.



ADDITIONAL STD FIGURES

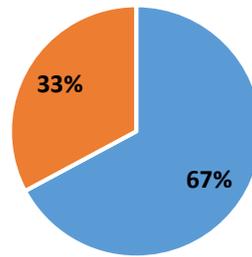


Figure 16. Chlamydia cases by sex, Long Beach, 2017



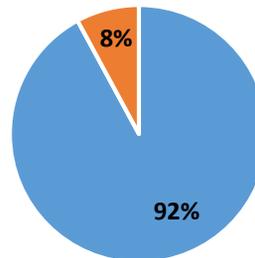
*See Table 5. ■ Males ■ Females

Figure 17. Gonorrhea cases by sex, Long Beach, 2017



*See Table 9. ■ Males ■ Females

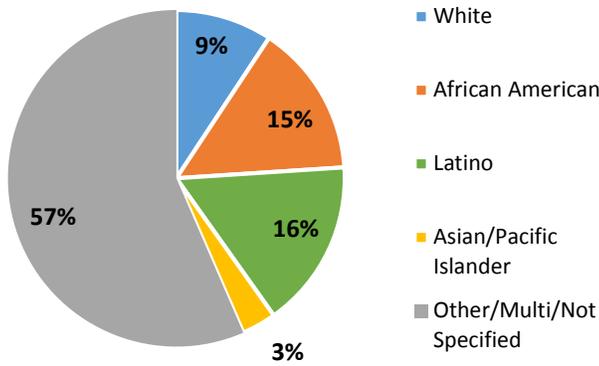
Figure 18. Total early syphilis cases by sex, Long Beach, 2017



*See Table 13. ■ Males ■ Females

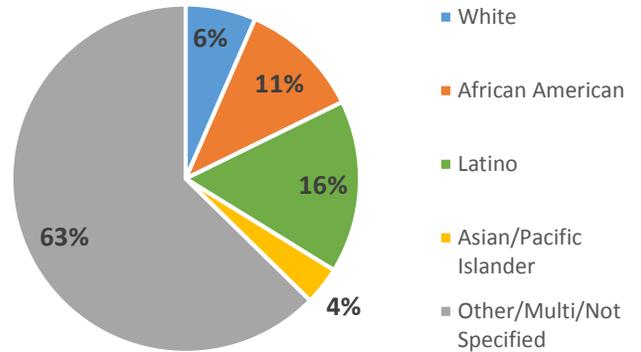


Figure 19. Male chlamydia cases by race/ethnicity, Long Beach, 2017



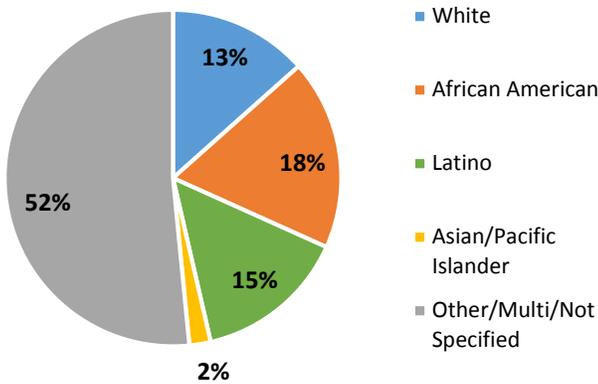
*See Table 6.

Figure 20. Female chlamydia cases by race/ethnicity, Long Beach, 2017



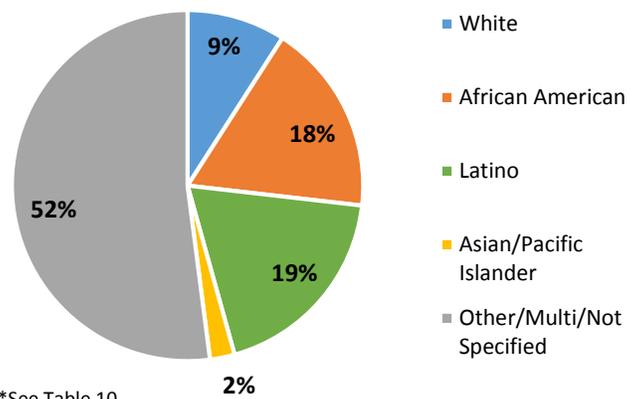
*See Table 6

Figure 21. Male gonorrhea cases by race/ethnicity, Long Beach, 2017



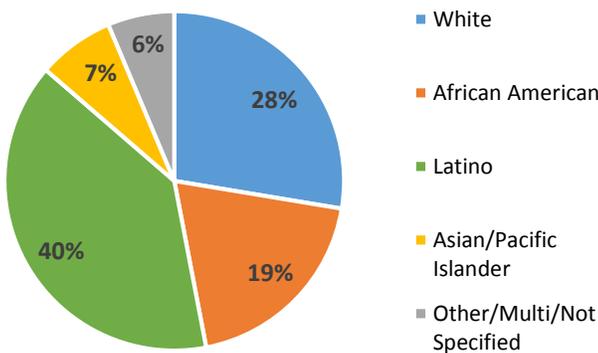
*See Table 10.

Figure 22. Female gonorrhea cases by race/ethnicity, Long Beach, 2017



*See Table 10.

Figure 23. Male total early syphilis cases by race/ethnicity, Long Beach, 2017



*See Table 14.

*Female total early syphilis cases were too small to report.



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HIV SURVEILLANCE

Annual Report
2017



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HIV LIMITATIONS

Health Insurance Data: There was a large amount of missing insurance data in our data set, potentially skewing percentages in Figures 19 and 20.

HIV Data: The electronic HIV/STD surveillance database utilized by the City of Long Beach is different from the databases used by Los Angeles County and the State of California. Some variation in data is to be expected.

The latest available HIV data for Los Angeles County, the State of California, and the United States is for 2016.

HIV Care Continuum: HIV Care Continuum report includes all persons diagnosed and living with HIV who were alive as of December 31, 2016 and living in Long Beach, and an estimate of the number of persons who are living, but not yet diagnosed with HIV. The data was extracted from the California HIV Surveillance System 12 months after the end of the calendar year to allow for delays in case and laboratory reporting. Specific populations with small numbers of diagnosed individuals were not reported to protect their personal health information.

Late Reporting: Due to reporting delays, the City of Long Beach's 2017 HIV case counts may be underestimated.

Suppression of Small Numbers: The Long Beach HIV/STD Surveillance program must balance providing data to the public, stakeholders, and policymakers while simultaneously protecting client confidentiality. Thus, when dealing with data concerning small and/or sensitive populations (e.g., number of female Native American chlamydia cases) in the report, cells containing 0–4 cases were suppressed to eliminate the possibility of identification. It is important to note that this data is still valuable and is used internally to evaluate STDs/HIV in Long Beach and make programmatic recommendations.

Unstable Rates: The National Center for Health Statistics considers rates based on 20 or fewer observations unstable. The Center for Health Statistics utilizes relative standard error (RSE):

$$RSE(X) = \sqrt{A + \frac{B}{X}}$$

Any RSE less than 30% does not meet the requirement for a minimum degree of accuracy.

The City of Long Beach acknowledges that data presented in this report may not meet the National Center for Health Statistics guidelines on stable rates. However, the City must utilize the available data for programmatic evaluation and recommendations. In the context of this report, unstable rates are displayed for reporting purposes only.

Year Totals: While case counts are continuously updated from previous years by the California Department of Public Health, Office of AIDS, year totals in this report are not updated. This report captures data as of the December 31st state deadline for reporting HIV cases and updates of the previous year.



HIV HIGHLIGHTS

- As of December 31, 2017, there were 4,520 Long Beach residents diagnosed and living with HIV ([Figure 24](#)). The indicator used to calculate residence has changed; as a result, number of total cases of HIV has decreased from previous editions of the annual report, but the overall trend has remained the same and should be considered a true reduction. The number of new HIV diagnoses declined by 33% overall from 151 individuals in 2013 to 101 individuals in 2017 ([Figure 24](#)). There was a total of 37 recorded deaths in 2017 ([Figure 24](#)). In 2017, 92% of persons newly diagnosed with HIV were male; 41% were Latino; 36% were between the age range of 30-39; and 67% of persons newly diagnosed reported their transmission risk as MSM (men who have sex with men) ([Table 17](#)).
- In 2016, Long Beach had a rate of 26 new HIV infections per 100,000 population ([Figure 26](#)). This rate is higher than the new infection rates of Los Angeles County (19 per 100,000) and the State of California (13 per 100,000) ([Figure 26](#)). In 2017, men in Long Beach had a new infection rate of 40 per 100,000, which is about 13 times higher than that of women (3 per 100,000) ([Table 18](#)). Although African Americans have the lowest number of individuals who were newly infected with HIV in 2017, African Americans have the highest rate (34 per 100,000) when compared to their White and Latino counterparts ([Table 18](#)).
- In 2017, persons living with HIV were predominately White, aged 50-59 years, and MSM ([Table 19](#)). In 2017, African American women represented only 14% of the total female population in Long Beach, but accounted for 36% of females living with HIV in the city ([Table 20](#)).
- In 2017, 15% of individuals were simultaneously diagnosed with HIV and AIDS at the time of diagnosis ([Table 17](#)). In Long Beach, 2,518 (56%) of persons living with HIV have been diagnosed with stage 3 HIV (AIDS) ([Table 19](#)).
- Between 2013 and 2017, 297 deaths occurred among Long Beach people living with HIV (PLWH) ([Table 23](#)); however, deaths declined during this time. The largest decline in deaths was seen among White persons, followed by African Americans from 2016 to 2017 ([Table 23](#)). In 2017, most deaths occurred among persons aged 50-59 years ([Table 23](#)). In 2017, White men and African American women experienced the highest mortality rates ([Figures 35, 36](#)).
- Latinos were the only race/ethnicity who did not experience an increase in public funding for health insurance between 2013-2017; however, rates of obtaining private insurance increased for the Latino population ([Figure 37](#)). In 2016, more males were insured by Private Insurance/HMO than females (29% for males and 12% for females) ([Figure 38](#)).
- Between 2015 and 2017, the number of total early syphilis cases increased by 39% (94 compared to 131 cases) among HIV+ MSM ([Figure 40](#)).
- In 2017, 100% of transgender persons living with HIV stated they are male-to-female. A majority of the known race/ethnicity are Latino (41%) followed by African American (33%) ([Figure 41](#)). Most reported being over the age of 50 (36%) and were diagnosed with HIV only (54%) ([Table 24](#)).
- In 2016, 71% of newly diagnosed HIV patients were retained in HIV care and 67% achieved viral suppression in the City of Long Beach ([Figure 42](#)). African Americans newly diagnosed with HIV had the lowest percentages of HIV care retention and viral suppression in 2016 ([Figure 43](#)). For all persons living with HIV in Long Beach in 2016, 57% were retained in HIV care and 60% achieved viral suppression ([Figure 44](#)). These percentages were higher than that of California (47% retained in care and 54% achieved viral suppression). In 2016, African Americans living with HIV had the lowest percentages of HIV care retention and viral suppression ([Figure 45](#)).
- Most persons living with HIV in Long Beach reside in the 90802 zip code ([Figure 28](#)).



OVERVIEW OF HIV IN LONG BEACH

Table 16. Characteristics of persons living with HIV and persons newly diagnosed with HIV in Long Beach¹, California², and the United States³, 2016

	Living with HIV Cases		Newly Diagnosed HIV Cases		
	Long Beach	California	Long Beach	California	United States
Sex at Birth ^{4 5}					
Male	3,969	116,825	106	4,469	32,563
Female	453	15,576	21	592	7,639
Race/Ethnicity					
White	1,731	53,310	41	1,347	10,349
African American	879	23,124	28	955	17,533
Latino	1,489	46,746	49	2,269	10,292
Asian/Pacific Islander	179	5,483	6*	966	1,032
Native American/Alaska Native	8*	405	<5	23	243
Other/Unknown	136	3,337	<5	121	875
Transmission Category					
MSM	3,246	88,251	83	3,212	26,844
PWID	184	7,979	<5	188	2,285
MSM-PWID	280	9,218	6*	155	1,210
Heterosexual	327	19,529	<5	953	9,776
Other/Unidentified	385	7,428	34	554	209

¹ All HIV data taken from California Office of AIDS eHARS database.

² California data are reported through December 2017, for cases living as of December 31, 2016. California data taken from California Department of Public Health HIV Surveillance Report – 2016; https://www.cdph.ca.gov/Programs/CID/DOA/Pages/OA_case_surveillance_reports.aspx. Published October 2017.

³ U.S. data are reported through July 31, 2016 and reflect cases diagnosed through December 31, 2015. U.S. data reflect unadjusted numbers for 50 states and 6 dependent areas and may be found in the CDC HIV Surveillance Report, 2016; vol. 28

<https://www.cdc.gov/hiv/library/reports/hiv-surveillance.html>. Published November 2017.

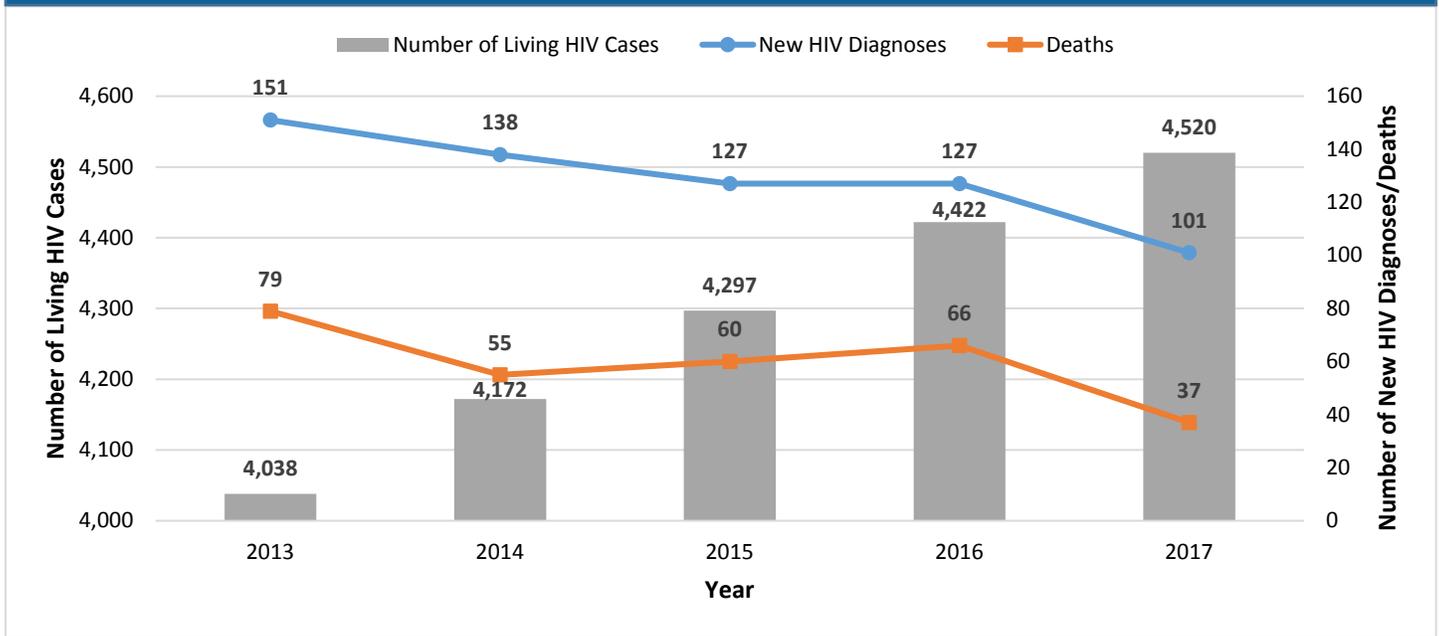
⁴ Transgender data are not reported by the United States. See Technical Notes “Transgender Status.”

⁵ U.S. gender data does not include children living with HIV; the CDC counts those number separately. Long Beach and California aggregate gender data with children, adolescents, and adults.

*Any indicators with less than 20 cases do not meet the requirement for a minimum degree of accuracy outlined by the National Center of Health Statistics. Case counts/rates are included for reporting purposes only.



Figure 24. New HIV diagnoses¹, deaths, and prevalence, Long Beach², 2013-2017



¹ See Technical Notes "Date of Initial HIV Diagnosis."

² All HIV data taken from California Office of AIDS eHARS database.



Table 17. Number of persons newly diagnosed¹ with HIV infection by year, Long Beach², 2013-2017

	2013		2014		2015		2016		2017	
	Num.	%								
Total	151		138		127		131		101	
Sex at Birth²										
Male	135	89%	117	85%	112	88%	106	84%	93	92%
Female	16*	11%	21	15%	15*	12%	21	17%	8*	8%
Race/Ethnicity										
White	41	27%	37	27%	31	24%	41	32%	24	24%
African American	30	20%	29	21%	30	24%	28	22%	21	21%
Latino	63	42%	59	43%	60	47%	49	39%	41	41%
Asian/Pacific Islander	10*	7%	7*	5%	5*	4%	6*	5%	7*	6%
Native American/Alaska Native	<5	-	<5	-	<5	-	<5	-	<5	-
Other/Unknown	6*	4%	6*	4%	<5	-	<5	-	6*	6%
Age at HIV Diagnosis (years)										
0-12	<5	-	<5	-	<5	-	<5	-	<5	-
13 - 17	<5	-	<5	-	<5	-	<5	-	<5	-
18 - 24	18*	12%	20	15%	30	24%	17*	13%	15*	15%
25 - 29	26	17%	17*	12%	23	18%	22	17%	12*	12%
30 - 39	44	29%	51	37%	34	27%	42	33%	36	36%
40 - 49	41	27%	26	19%	21	17%	25	20%	21	21%
50+	21	14%	23	17%	19*	15%	21	17%	15*	15%
Transmission Category										
MSM	106	70%	83	60%	75	59%	83	65%	68	67%
PWID	<5	-	<5	-	9*	7%	<5	-	<5	-
MSM-PWID	<5	-	<5	-	<5	-	6*	5%	5*	5%
Heterosexual	<5	-	<5	-	<5	-	<5	-	<5	-
Other/Unidentified	36	24%	46	33%	35	28%	34	27%	24	24%
HIV Disease Stage										
HIV only	94	62%	107	78%	106	84%	97	76%	81	80%
HIV and later AIDS	17*	11%	14*	10%	9*	7%	6*	5%	5*	5%
HIV and AIDS diagnosed simultaneously	40	27%	17*	12%	12*	9%	24	19%	15*	15%

¹Data include persons newly diagnosed with HIV infection in any stage and reported as of December 31, 2017.

²All HIV data taken from California Office of AIDS eHARS database.

³ Transgender cases are reported separately in Table 24.

⁴For how the HIV Disease Stage is determined, see Technical Notes "Stage of Disease at Diagnosis of HIV Infection."

*Percentages may not add to 100% due to rounding and not displaying data when less than 5 cases.

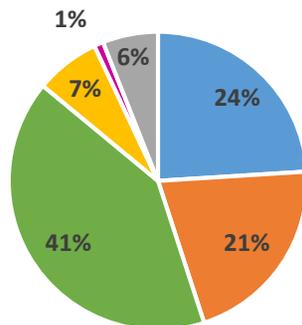
*Any indicators with less than 20 cases do not meet the requirement for a minimum degree of accuracy outlined by the National Center for Health Statistics. Case counts/rates are included for reporting purposes only.



Figure 25. Persons newly diagnosed with HIV infection by demographic and transmission category, Long Beach, 2017

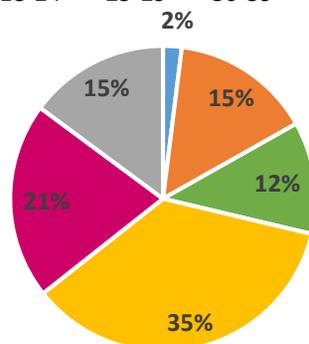
Persons newly diagnosed with HIV by race/ethnicity

■ White ■ African American ■ Latino ■ Asian/Pacific Islander ■ Native American/Alaska Native ■ Other/Unknown



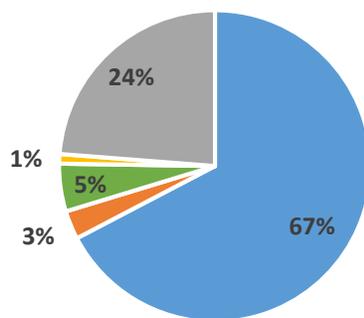
Persons newly diagnosed with HIV by age

■ 13-17 ■ 18-24 ■ 25-29 ■ 30-39 ■ 40-49 ■ 50+



Persons newly diagnosed with HIV by transmission category

■ MSM ■ PWID ■ MSM-PWID ■ Heterosexual ■ Other/Unidentified



*See Table 17. The "Other" race/ethnicity category includes Other/Unknown.



Table 18. Number and rate per 100,000¹ population of new HIV infections by year, Long Beach², 2013-2017

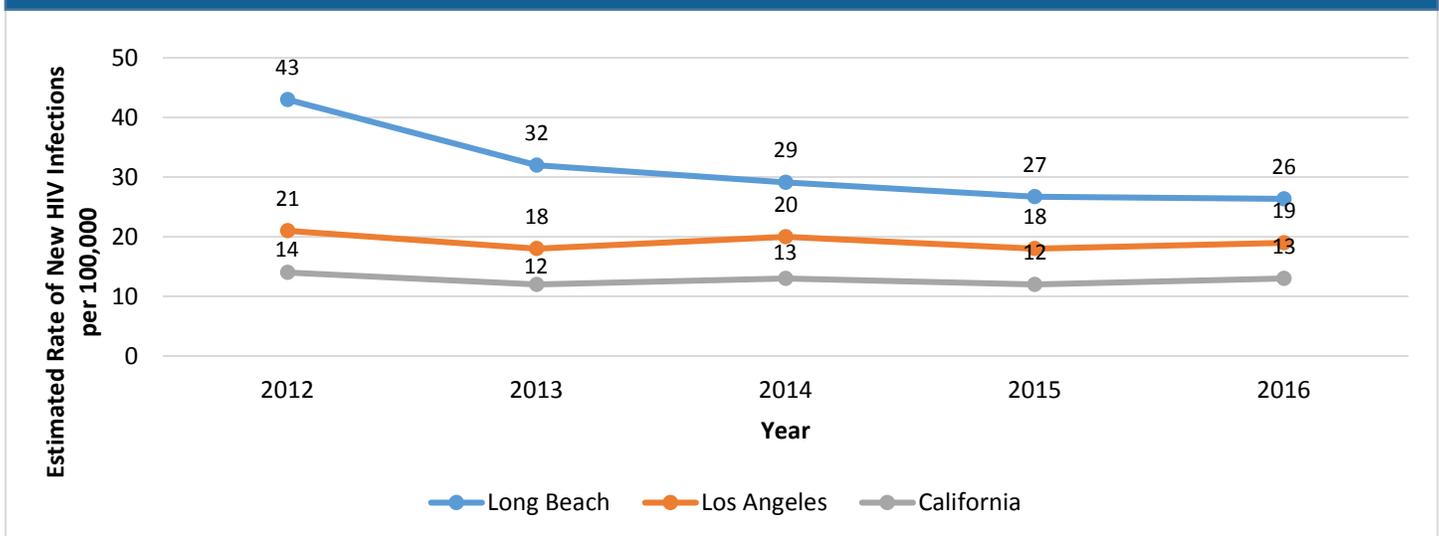
	2013		2014		2015		2016		2017	
	Number	Rate								
Total	151	32	138	29	127	27	127	26	101	21
Sex at Birth										
Male	135	58	117	50	112	48	106	45	93	40
Female	16*	7	21	9	15*	6	21	9	8*	3
Race/Ethnicity										
White	41	29	37	26	31	22	41	29	24	17
African American	30	49	29	47	30	48	28	45	21	34
Latino	63	32	59	31	60	30	49	24	41	21

¹Population data taken from California Department of Finance Demographic Research Unit Report P-3 State and County total population projections by race/ethnicity and detailed age; www.dof.ca.gov/Forecasting/Demographics/projections/.

²All HIV data taken from California Office of AIDS eHARS database.

*Any indicators with less than 20 cases do not meet the requirement for a minimum degree of accuracy outlined by the National Center for Health Statistics. Case counts/rates are included for reporting purposes only.

Figure 26. Incidence rates per 100,000 population of new HIV infections, Long Beach, Los Angeles, and California. 2012-2016



¹Population data taken from California Department of Finance Demographic Research Unit Report P-3 State and County total population projections by race/ethnicity and detailed age; www.dof.ca.gov/Forecasting/Demographics/projections/.

²Long Beach HIV data taken from California Office of AIDS eHARS database.

³The latest available HIV data for Los Angeles County and California is for 2016. Therefore, 2012-20016 data was used for the figure to create a 5-year comparison.



Table 19. Number of persons living with HIV¹ by year, Long Beach², 2013-2017

	2013		2014		2015		2016		2017	
	Num.	%								
Total	4,038		4,172		4,297		4,422		4,520	
Sex at Birth³										
Male	3,641	90%	3,755	90%	3,865	90%	3,969	90%	4,059	90%
Female	397	10%	417	10%	432	10%	453	10%	461	10%
Race/Ethnicity										
White	1,626	40%	1,662	40%	1,692	40%	1,731	39%	1,755	39%
African American	792	20%	821	20%	851	20%	879	20%	900	20%
Latino	1,324	33%	1,381	33%	1,440	34%	1,489	34%	1,527	34%
Asian/Pacific Islander	162	4%	168	4%	173	4%	179	4%	186	4%
Native American/ Alaska Native	8*	0.2%	8*	0.2%	8*	0.2%	8*	0.2%	9*	0.2%
Other/Unknown	126	2%	132	3%	133	3%	136	3%	142	3%
Age in Years										
0 - 12	<5	-	<5	-	<5	-	<5	-	<5	-
13 - 17	<5	-	<5	-	<5	-	<5	-	<5	-
18 - 24	13*	0.3%	20	.4%	41	1%	54	1%	69	2%
25 - 29	132	3%	149	4%	173	4%	189	4%	201	4%
30 - 39	541	13%	588	14%	622	15%	668	15%	699	16%
40 - 49	977	24%	1,013	24%	1,037	24%	1,062	24%	1086	24%
50 - 59	1512	37%	1532	37%	1550	36%	1570	36%	1580	35%
60 - 69	700	17%	706	17%	711	17%	713	16%	716	16%
70+	150	4%	151	4%	152	4%	153	4%	155	3%
Transmission Category										
MSM	3,011	75%	3,092	74%	3,165	74%	3,246	74%	3,312	73%
PWID	168	4%	172	4%	181	4%	184	4%	187	4%
MSM-PWID	268	7%	270	7%	274	6%	280	6%	285	6%
Heterosexual	319	8%	322	8%	326	8%	327	8%	327	7%
Transfusion/ Hemophilia	8*	0.2%	8*	0.2%	8*	0.2%	8*	0.2%	8*	0.2%
Other/Unidentified	264	7%	308	7%	343	8%	377	9%	400	9%
HIV Disease Stage⁴										
HIV only	1,434	36%	1,539	37%	1,644	38%	1,741	39%	1,822	40%
HIV and later AIDS	1,656	41%	1,669	40%	1,678	39%	1,684	38%	1,689	37%
HIV and AIDS diagnosed simultaneously	768	19%	784	19%	795	18%	817	19%	829	18%
Unknown	180	5%	180	4%	180	4%	180	4%	180	4%

¹ Persons living with HIV at the end of each year. Data include persons living with HIV infection in any stage and reported as of December 31, 2017.

² All HIV data taken from California Office of AIDS eHARS database.

³ Transgender cases are reported separately in Table 24.

⁴ For how the HIV Disease Stage is determined, see Technical Notes "Stage of Disease at Diagnosis of HIV Infection."

*Percentages may not add to 100% due to rounding and not displaying data when less than 5 cases.

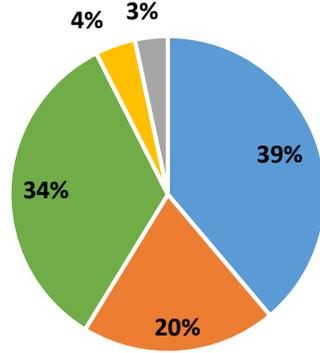
*Any indicators with less than 20 cases do not meet the requirement for a minimum degree of accuracy outlined by the National Center for Health Statistics. Case counts/rates are included for reporting purposes only.



Figure 27. Persons living with HIV by demographic and transmission category, Long Beach, 2017

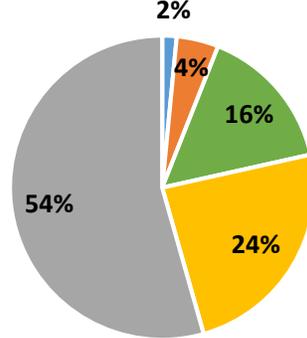
Persons living with HIV by race/ethnicity

■ White ■ African American ■ Latino ■ Asian/Pacific Islander ■ Other/Unknown



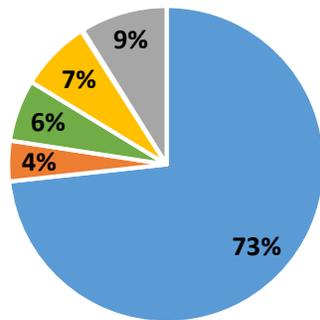
Persons living with HIV by age

■ 18-24 ■ 25-29 ■ 30-39 ■ 40-49 ■ 50+



Persons living with HIV by transmission category

■ MSM ■ PWID ■ MSM-PWID ■ Heterosexual ■ Other/Unidentified



*See Table 19.

*The "Other" race/ethnicity category includes Native American/Alaska Native and Other/Unknown.



Table 20. Characteristics of persons living with HIV by race/ethnicity, Long Beach¹, 2017

	Race/Ethnicity											
	White		African American		Latino		Asian/Pacific Islander		Other/Unknown ²		Total	
	Num.	%	Num.	%	Num.	%	Num.	%	Num.	%	Num.	%
Total	1,755		900		1,527		186		151		4,520	
Male at Birth												
Transmission Category												
MSM	1,408	85%	546	75%	1,118	82%	138	85%	102	76%	3,312	82%
PWID	50	3%	28	4%	29	2%	<5	-	7*	5%	116	3%
MSM-PWID	129	78%	68	9%	73	5%	<5	-	14*	10%	285	7%
Heterosexual	12*	0.7%	30	4%	28	2%	6*	4%	<5	-	79	2%
Transfusion/Hemophilia	<5	-	<5	-	<5	-	<5	-	<5	-	<5	-
Other/Unidentified	62	4%	59	8%	114	8%	14*	9%	10*	7%	259	6%
Age in Years												
0 - 12	<5	-	<5	-	<5	-	<5	-	<5	-	<5	-
13 - 17	<5	-	<5	-	<5	-	<5	-	<5	-	<5	-
18 - 24	7*	0.4%	22	3%	30	2%	<5	-	<5	-	62	2%
25 - 29	33	2%	57	8%	72	5%	7*	4%	11*	8%	180	4%
30 - 39	131	8%	147	20%	293	22%	40	25%	23	17%	633	16%
40 - 49	306	18%	148	20%	407	30%	48	30%	36	27%	945	23%
50 - 59	736	44%	225	31%	389	29%	45	28%	43	59%	1,438	36%
60 - 69	353	21%	120	16%	143	10%	15*	9%	20	15%	651	16%
70+	91	5%	13*	2%	28	2%	<5	-	<5	-	138	3%
Male at Birth Subtotal	1,658		732		1,362		162		134		4,048	
Female at Birth												
Transmission Category												
PWID	21	23%	23	14%	23	14%	<5	-	<5	-	71	15%
Heterosexual	42	46%	83	50%	99	60%	18	75%	6*	5%	248	54%
Transfusion/Hemophilia	<5	-	<5	-	<5	-	<5	-	<5	-	<5	-
Other/Unidentified	28	30%	55	33%	42	26%	<5	-	5*	4%	139	30%
Age in Years												
0 - 12	<5	-	<5	-	<5	-	<5	-	<5	-	<5	-
13 - 17	<5	-	<5	-	<5	-	<5	-	<5	-	<5	-
18 - 24	<5	-	<5	-	<5	-	<5	-	<5	-	<5	-
25 - 29	6*	7%	10*	6%	<5	-	<5	-	<5	-	21	5%
30 - 39	8*	9%	22	13%	29	18%	5*	21%	<5	-	66	14%
40 - 49	29	32%	48	29%	51	31%	8*	33%	5*	4%	141	31%
50 - 59	30	35%	53	32%	48	29%	6*	25%	5*	4%	142	31%
60 - 69	12*	13%	29	17%	20	12%	<5	-	<5	-	65	14%
70+	5*	5%	<5	-	7*	4%	<5	-	<5	-	17*	4%
Female at Birth Subtotal	92		167		164		24		13*		461	

¹ All HIV data taken from California Office of AIDS eHARS database.

² Numbers for persons who identify as Native American/Alaska Native were included in this category due to the small number of cases. This number also includes persons with multiple race or whose racial/ethnic information is not available.

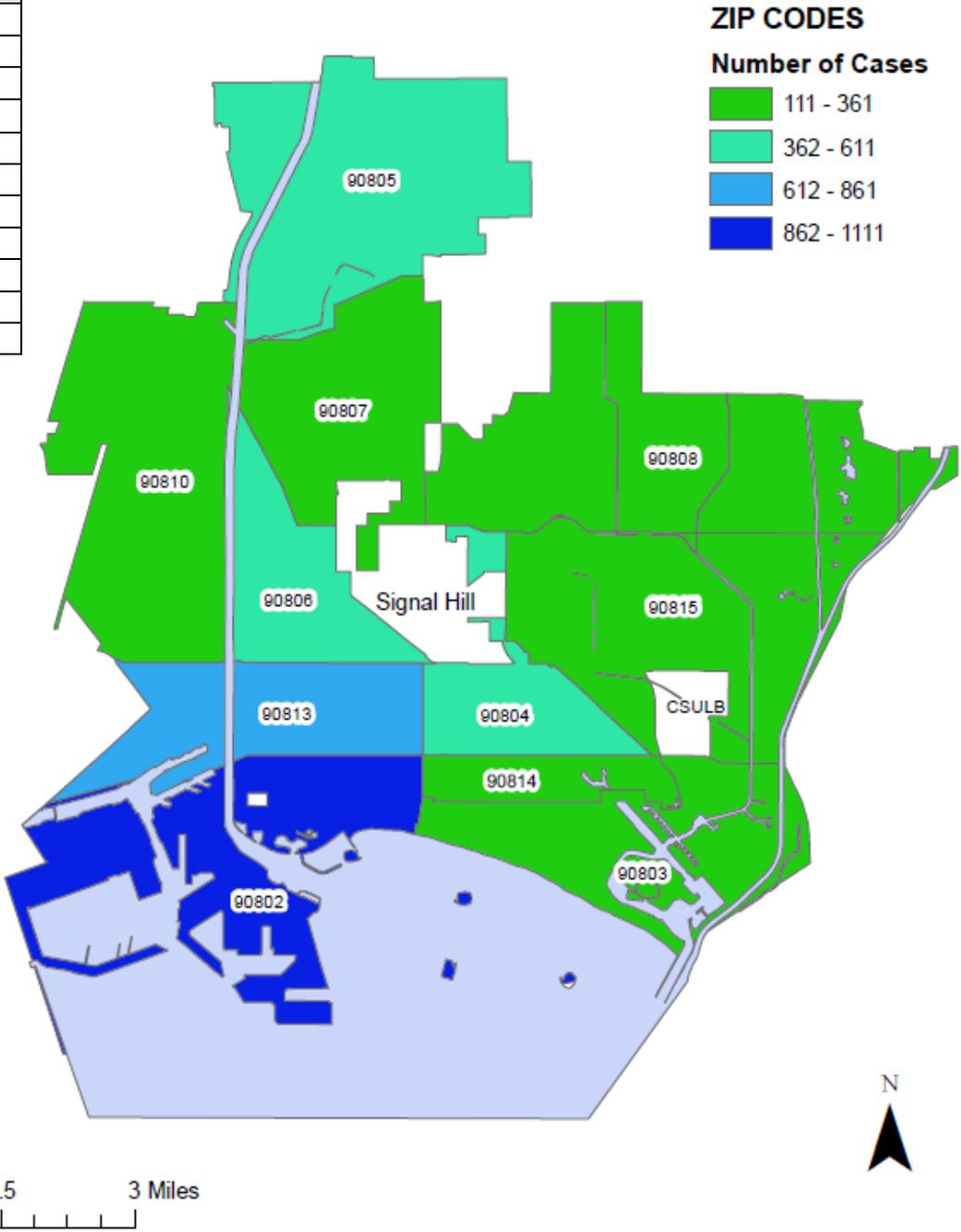
* Percentages may not add to 100% due to rounding and not displaying data when less than 5 cases.

*Any indicators with less than 20 cases do not meet the requirement for a minimum degree of accuracy outlined by the National Center for Health Statistics. Case counts/rates are included for reporting purposes only.



Figure 28. Persons living with HIV in Long Beach, cases by zip code, 2017

Zip code	Num. of Cases
90802	1,111
90803	326
90804	473
90805	455
90806	380
90807	256
90808	111
90810	131
90813	722
90814	275
90815	199

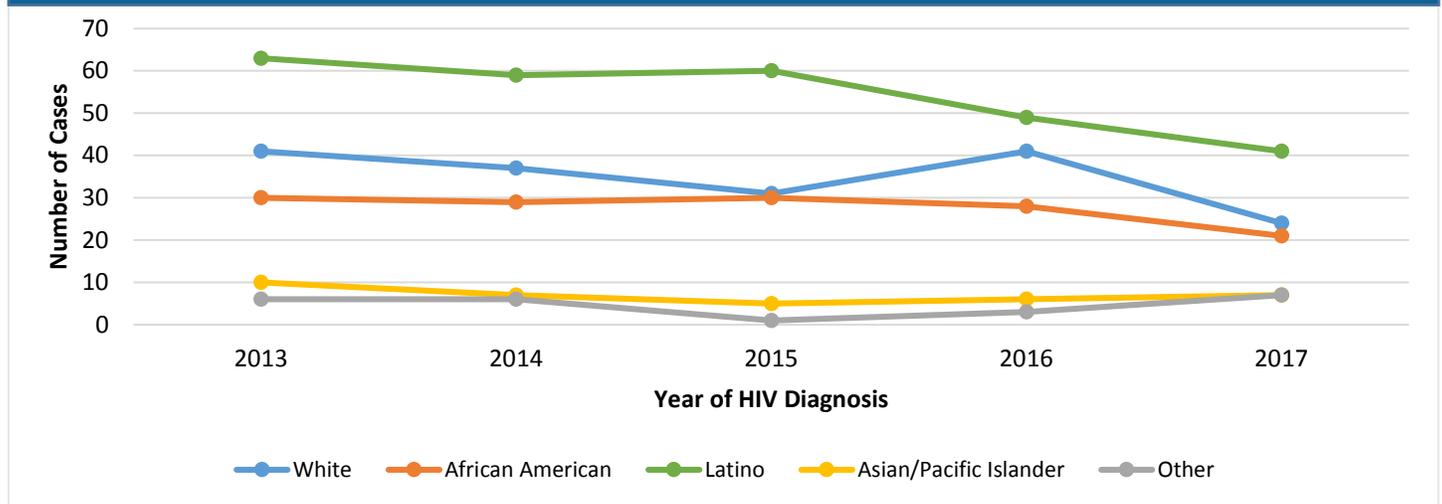


*Map does not include people experiencing homelessness or individuals who did not provide a zip code.
 Source: California Department of Public Health, STD Control Branch



TRENDS IN HIV DIAGNOSES

Figure 29. Number of persons newly diagnosed¹ with HIV infection by race/ethnicity², Long Beach³, 2013-2017

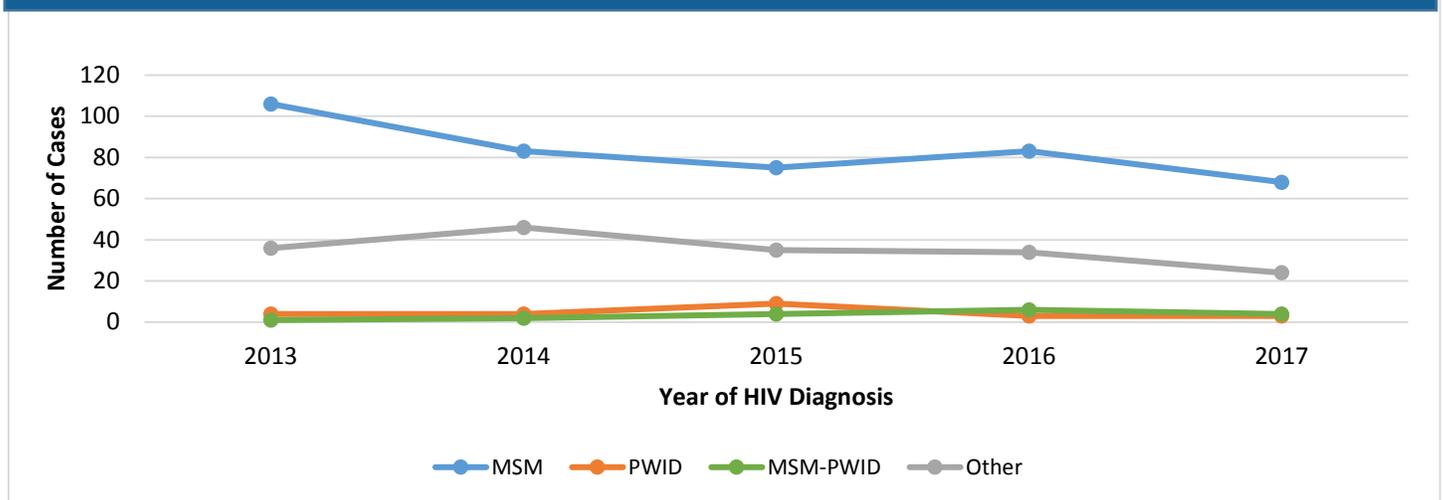


¹ See Technical Notes "Date of Initial Diagnosis."

² Cases in the "Other" racial/ethnic category include Native American/Alaska Native, Multi-race, and unknown.

³ All HIV data taken from California Office of AIDS eHARS database.

Figure 30. Number of men¹ newly diagnosed² with HIV infection by transmission category³, Long Beach³, 2013-2017



¹ Data for newly diagnosed women by transmission category was too small to report.

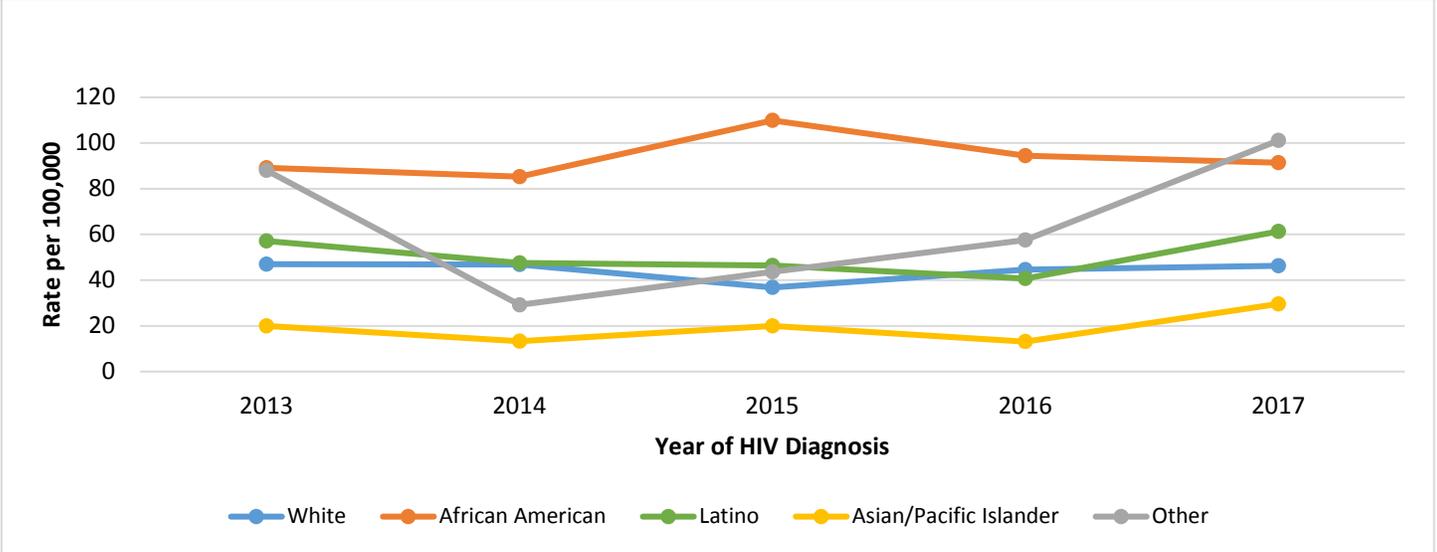
² See Technical Notes "Date of Initial Diagnosis."

³ The "Other" transmission category includes adult heterosexual contact and undetermined transmission method.

⁴ All HIV data taken from California Office of AIDS eHARS database.



Figure 31. Incidence rates per 100,000 population of men newly diagnosed¹ with HIV by race/ethnicity², Long Beach³, 2013-2017

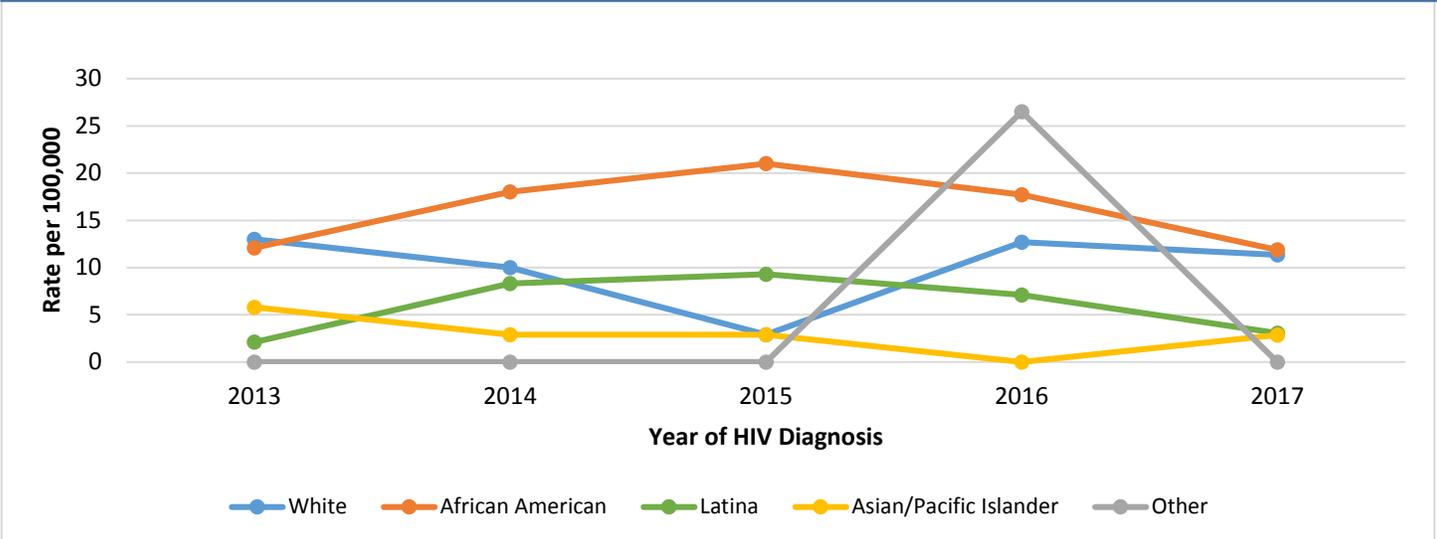


¹ See Technical Notes "Date of Initial Diagnosis."

² Cases in the "Other" racial/ethnic category include Native American/Alaska Native, Multi-race, and unknown.

³ All HIV data taken from California Office of AIDS eHARS database.

Figure 32. Incidence rates per 100,000 population of women newly diagnosed¹ with HIV by race/ethnicity², Long Beach³, 2013-2017



¹ See Technical Notes "Date of Initial Diagnosis."

² Cases in the "Other" racial/ethnic category include Native American/Alaska Native, Multi-race, and unknown.

³ All HIV data taken from California Office of AIDS eHARS database.



Table 21. Number of persons newly diagnosed with HIV by sex and age group, Long Beach¹, 2013-2017

	2013		2014		2015		2016		2017	
	Num.	%	Num.	%	Num.	%	Num.	%	Num.	%
Male at Birth (Years)										
0 - 12	<5	-	<5	-	<5	-	<5	-	<5	-
13 - 17	<5	-	<5	-	<5	-	<5	-	<5	-
18 - 24	<5	-	<5	-	20	23%	12*	12%	15*	17%
25 - 29	14*	11%	14*	12%	20	17%	16*	15%	12*	13%
30 - 39	47	36%	41	36%	31	26%	42	40%	28	31%
40 - 49	32	25%	30	22%	18*	20%	19*	18%	22	25%
50 - 59	23	18%	18*	16%	17*	15%	12*	12%	8*	9%
60 - 69	11*	9%	<5	-	<5	-	<5	-	<5	-
70+	<5	-	<5	-	<5	-	<5	-	<5	-
No age given										
Male Subtotal	129		114		110		104		89	
Female at Birth (Years)										
0 - 12	<5	-	<5	-	<5	-	<5	-	<5	-
13 - 17	<5	-	<5	-	<5	-	<5	-	<5	-
18 - 24	<5	-	<5	-	<5	-	<5	-	<5	-
25 - 29	<5	-	<5	-	<5	-	<5	-	<5	-
30 - 39	<5	-	6*	27%	<5	-	<5	-	<5	-
40 - 49	<5	-	6*	27%	6*	40%	6*	29%	<5	-
50 - 59	<5	-	<5	-	<5	-	8*	40%	<5	-
60 - 69	<5	-	<5	-	<5	-	<5	-	<5	-
70+	<5	-	<5	-	<5	-	<5	-	<5	-
No age given										
Female Subtotal	17*		20		15*		21		8*	

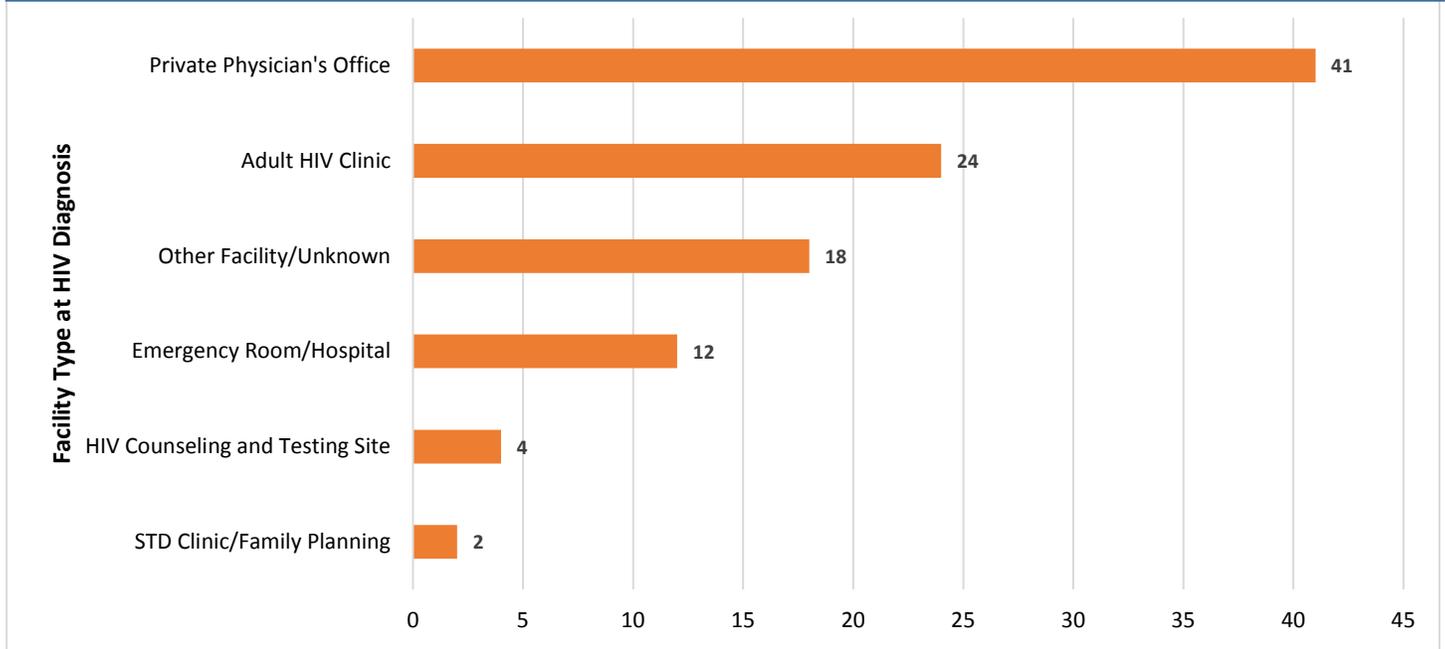
¹ All HIV data taken from California Office of AIDS eHARS database.

* Percentages may not add to 100% due to rounding.

*Any indicators with less than 20 cases do not meet the requirement for a minimum degree of accuracy outlined by the National Center for Health Statistics. Case counts/rates are included for reporting purposes only.



Figure 33. Type of facility at new HIV diagnosis, Long Beach¹, 2017



¹ All HIV data taken from California Office of AIDS eHARS database.

TRENDS IN INDIVIDUALS IN STAGE 3 (AIDS)

Table 22. Number of persons living with Stage 3 (AIDS) by year, Long Beach, 2013-2017

	2013		2014		2015		2016		2017	
	Num.	%								
Total	2,485		2,536		2,756		2,626		2,661	
Sex at Birth²										
Male	2,252	91%	2,298	91%	2,335	91%	2,376	90%	2,409	90%
Female	233	9%	238	9%	241	9%	250	10%	252	10%
Race/Ethnicity										
White	1,027	41%	1,044	41%	1,053	41%	1,070	41%	1,085	41%
African American	470	19%	480	19%	490	19%	499	19%	507	19%
Latino	824	33%	846	33%	863	34%	879	34%	888	33%
Asian/Pacific Islander	92	4%	93	4%	95	4%	99	4%	100	4%
Native American/ Alaska Native	<5	-	<5	-	<5	-	5*	0.2%	5*	0.2%
Other/Unknown	68	3%	69	3%	71	3%	74	3%	76	3%
Age in Years										
0 - 12	<5	-	<5	-	<5	-	<5	-	<5	-
13 - 17	<5	-	<5	-	<5	-	<5	-	<5	-
18 - 24	<5	-	<5	-	<5	-	<5	-	6*	0.2%
25 - 29	25	1%	28	1%	30	1%	36	1%	41	2%
30 - 39	179	7%	195	8%	208	8%	227	9%	231	9%
40 - 49	557	22%	572	23%	588	23%	599	23%	610	23%
50 - 59	1,092	44%	1,103	44%	1,110	43%	1,120	43%	1,126	42%
60 - 69	522	21%	527	21%	529	21%	530	20%	536	20%
70+	105	4%	106	4%	106	4%	107	4%	108	4%
Transmission Category										
MSM	1,822	73%	1,859	73%	1,886	73%	1,917	73%	1,939	73%
PWID	130	5%	131	5%	133	5%	135	5%	136	5%
MSM-PWID	196	8%	196	8%	199	8%	200	8%	204	8%
Heterosexual	205	8%	209	8%	210	8%	213	8%	212	8%
Transfusion/ Hemophilia	8*	0.3%	8*	0.3%	8*	0.3%	8*	0.3%	8*	0.3%
Other/Unidentified	124	5%	131	5%	140	5%	155*	6%	162	6%

¹ All HIV data taken from California Office of AIDS eHARS database.

² Transgender cases are reported separately in Table 24.

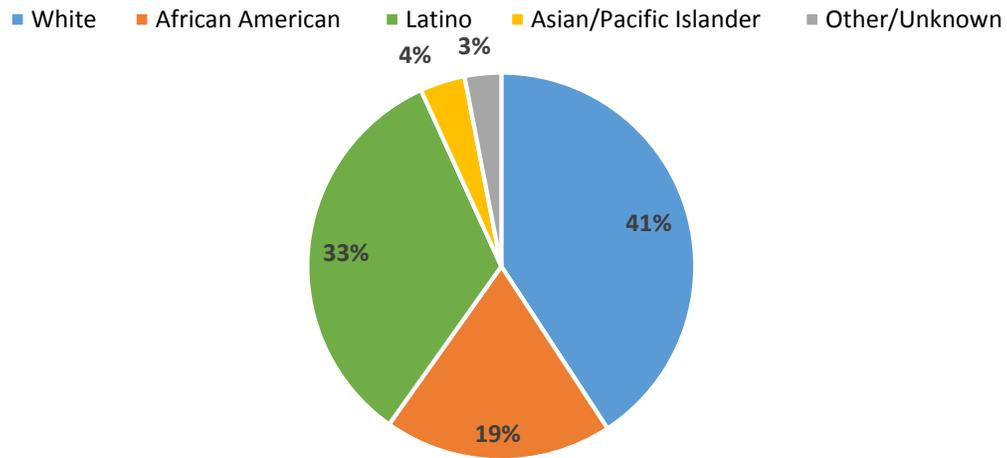
* Percentages may not add to 100% due to rounding.

* Any indicators with less than 20 cases do not meet the requirement for a minimum degree of accuracy outlined by the National Center for Health Statistics. Case counts/rates are included for reporting purposes only.

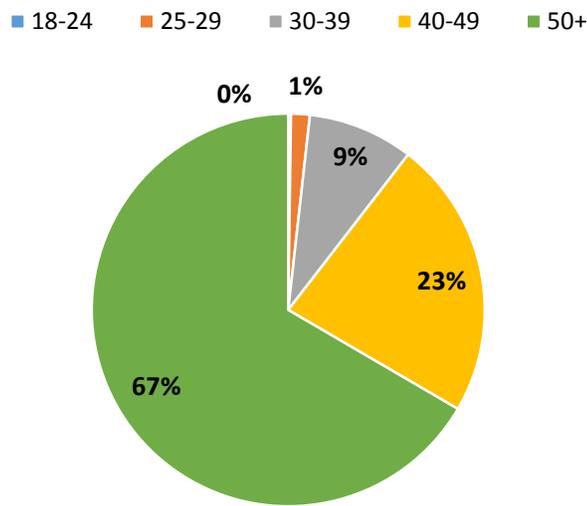


Figure 34. Persons living with Stage 3 (AIDS) by demographic, Long Beach, 2017

Persons living with AIDS by race/ethnicity



Persons living with AIDS by age



*See Table 22.

TRENDS IN HIV MORTALITY

Table 23. Deaths among persons living with HIV by year, Long Beach¹, 2013-2017

	2013		2014		2015		2016 ²		2017 ²		Cumulative Total 2013-2017	
	Num.	%	Num.	%	Num.	%	Num.	%	Num.	%	Num.	%
Sex at Birth												
Male	69	87%	48	87%	57	95%	60	91%	36	97%	270	91%
Female	10*	12%	7*	13%	<5	-	6*	9%	<5	-	27	9%
Race/Ethnicity												
White	42	53%	35	64%	28	47%	31	47%	17*	46%	153	52%
African American	19*	24%	14*	26%	10*	17%	18*	27%	6*	16%	67	23%
Latino	15*	19%	5*	9%	16*	27%	10*	15%	11*	30%	57	19%
Asian/Pacific Islander	<5	-	<5	-	<5	-	<5	-	<5	-	<5	-
Native American	<5	-	<5	-	<5	-	<5	-	<5	-	<5	-
Other/Unknown	<5	-	<5	-	6*	10%	<5	-	<5	-	14*	5%
Transmission Category³												
MSM	47	60%	33	60%	36	60%	38	58%	25	68%	179	60%
PWID	12*	15%	5*	9%	9*	15%	5*	8%	<5	-	35	12%
MSM-PWID	11*	14%	11*	20%	8*	13%	11*	17%	7*	19%	48	16%
Heterosexual	<5	-	<5	-	<5	-	5*	8%	<5	-	15*	5%
Other/ Unidentified	5*	6%	<5	-	<5	-	7*	11%	<5	-	20	7%
Age at Death (Years)												
0 - 29	<5	-	<5	-	<5	-	2	3%	<5	-	8*	3%
30 - 39	14*	18%	<5	-	<5	-	6*	9%	<5	-	30	10%
40 - 49	24	30%	18*	33%	13*	22%	11*	17%	6*	16%	72	24%
50 - 59	27	34%	18*	33%	28	47%	6*	25%	16*	43%	95	32%
60 - 69	7*	19%	11*	20%	11*	18%	9*	38%	7*	19%	45	15%
70+	5*	6%	<5	-	<5	-	5*	8%	<5	-	20	7%
HIV Disease Stage⁴												
HIV only	8*	10%	<5	-	6*	10%	8*	12%	6*	16%	30	10%
HIV and later AIDS	47	60%	39	71%	33	55%	36	55%	24	65%	179	60%
HIV and AIDS diagnosed simultaneously	21	27%	14*	26%	19*	32%	16*	24%	5*	14%	75	25%
Total	79		55		60		66		37		297	

¹ All HIV data taken from California Office of AIDS eHARS database.

² Data in recent years are incomplete due to reporting delays. In addition, deaths that occurred outside of Long Beach are primarily identified through matching with the National Death Index (NDI), which is complete through December 31, 2017.

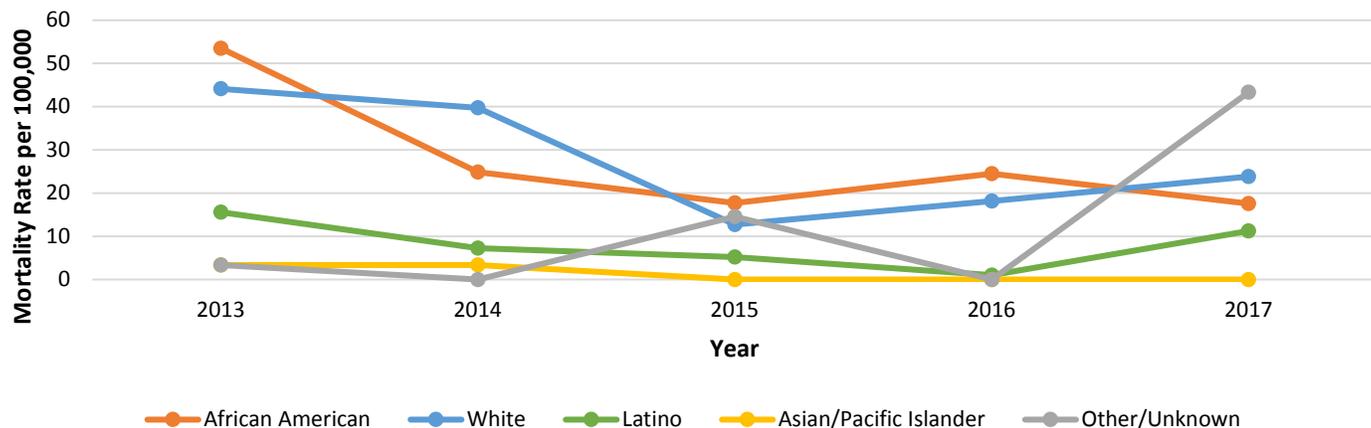
³ The "Other" category also includes unidentified transmission category.

⁴ For how the HIV Disease Stage is determined, see Technical Notes "Stage of Disease at Diagnosis of HIV Infection."

*Any indicators with less than 20 cases do not meet the requirement for a minimum degree of accuracy outlined by the National Center for Health Statistics. Case counts/rates are included for reporting purposes only.

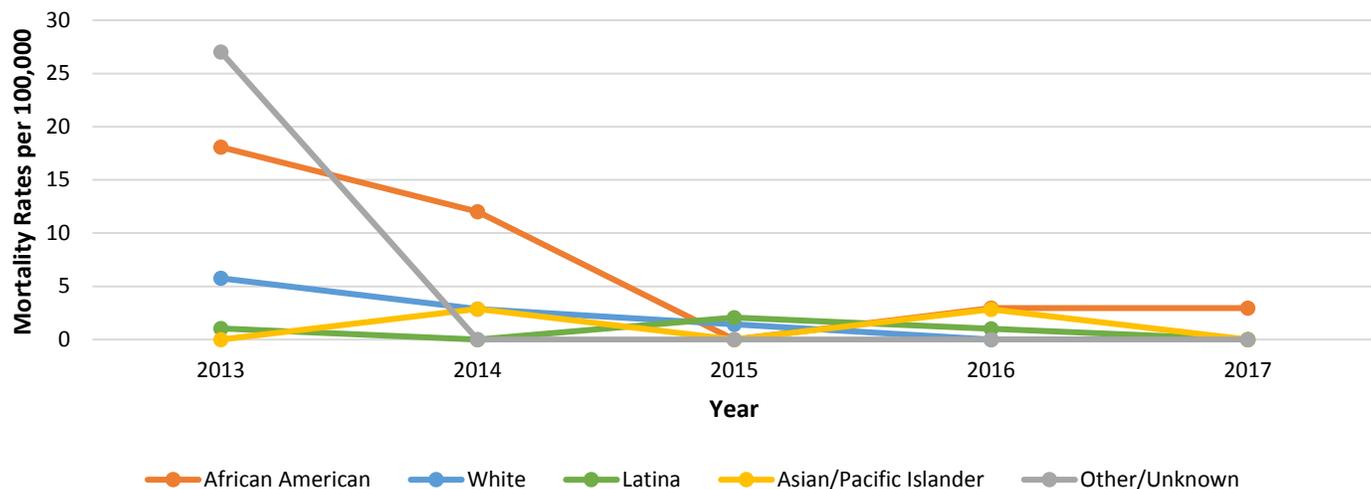


Figure 35. Mortality rates¹ per 100,000 population among men living with HIV by race/ethnicity², LongBeach³, 2013-2017



³ All HIV data taken from California Office of AIDS eHARS database.

Figure 36. Mortality rates¹ per 100,000 population among women living with HIV infection by race/ethnicity², Long Beach³, 2013-2017



Case Rates and HIV Mortality Rates.”

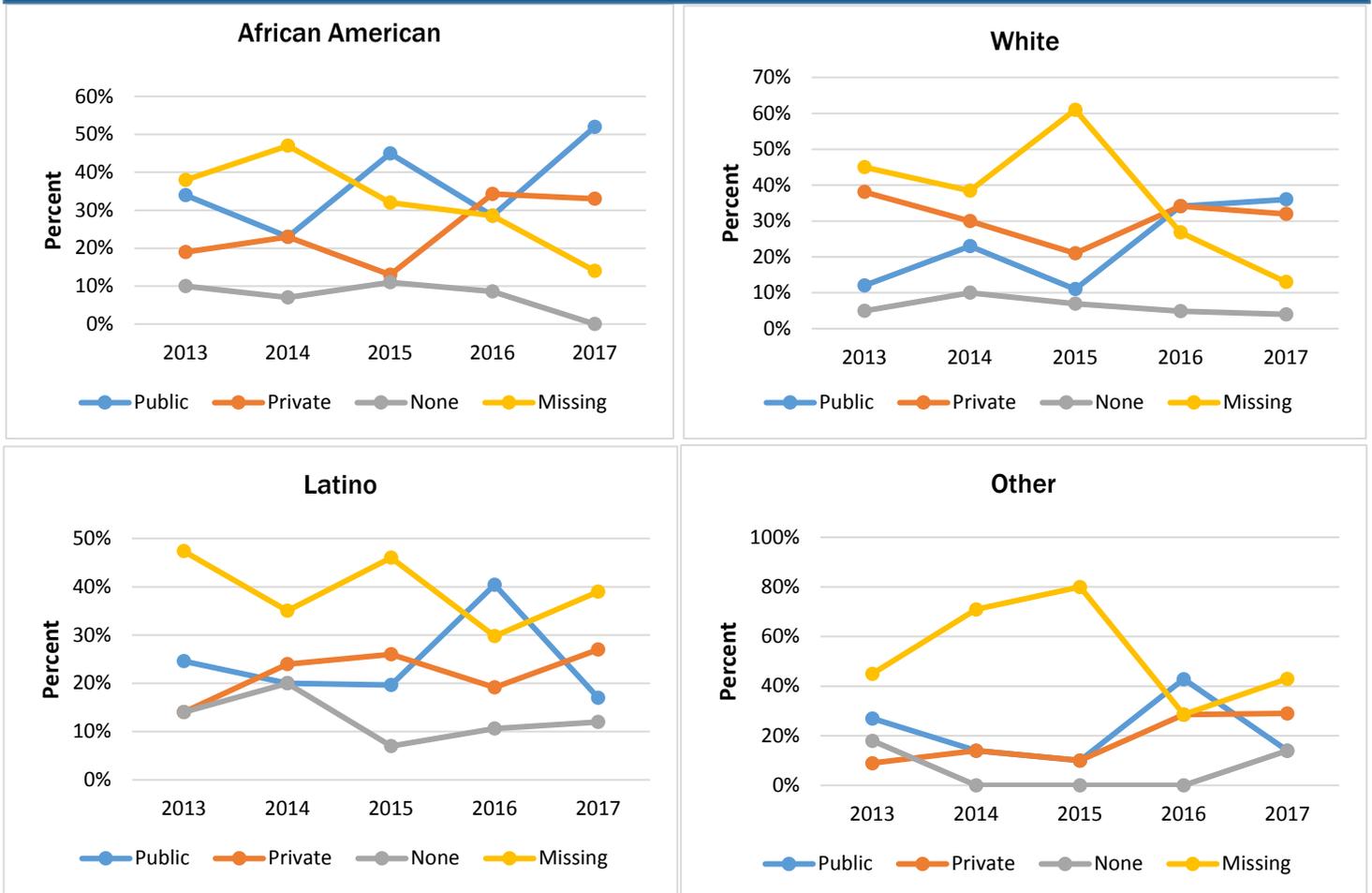
² Cases in the “Other” racial/ethnic category include Native American/Alaska Native, Multi-race, and unknown.

³ All HIV data taken from California Office of AIDS eHARS database.



HEALTH INSURANCE STATUS AT TIME OF HIV DIAGNOSIS

Figure 37. Health insurance status¹ at time of HIV diagnosis by race/ethnicity², Long Beach³, 2013-2017



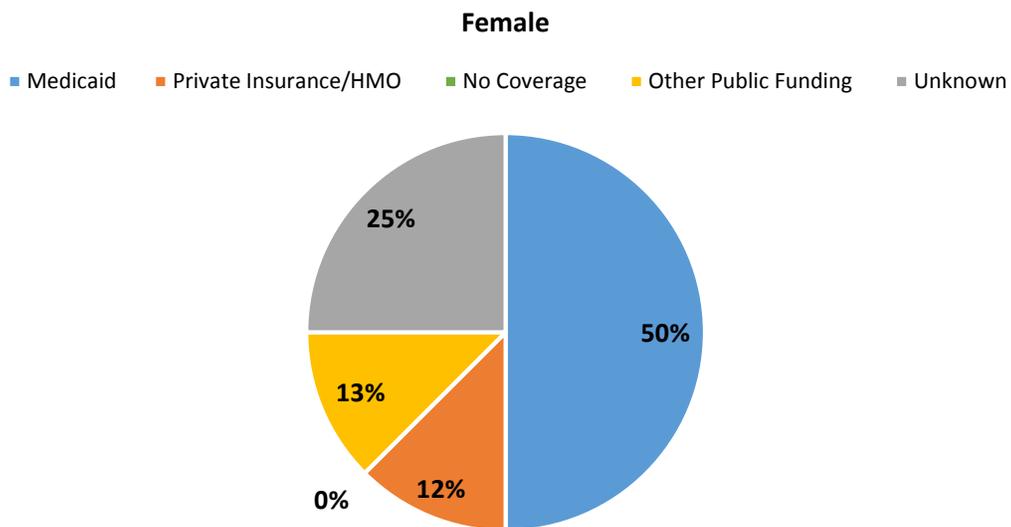
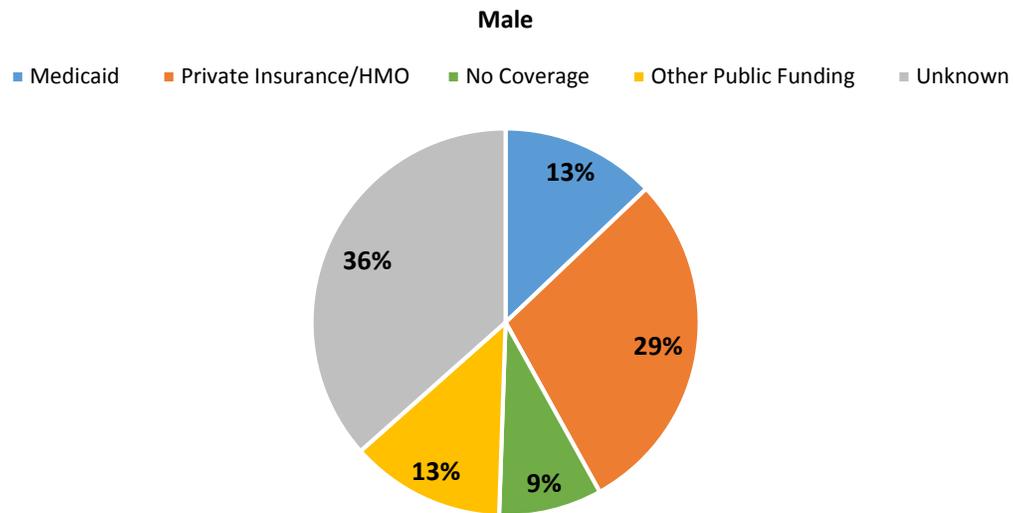
¹ "Public" insurance includes Medicaid, Medical, and other public funding sources. "Private" insurance includes both HMO and PPOs. "None" indicates patient reported having no insurance at time of diagnosis. "Missing" indicates that the insurance data for the patient was not given at time of diagnosis.

² Cases in the "Other" racial/ethnic category include Native American/Alaska Native, Multi-race, Asian, and unknown.

³ All HIV data taken from California Office of AIDS eHARS database.



Figure 38. Health insurance status at time of HIV diagnosis by sex¹, Long Beach², 2017



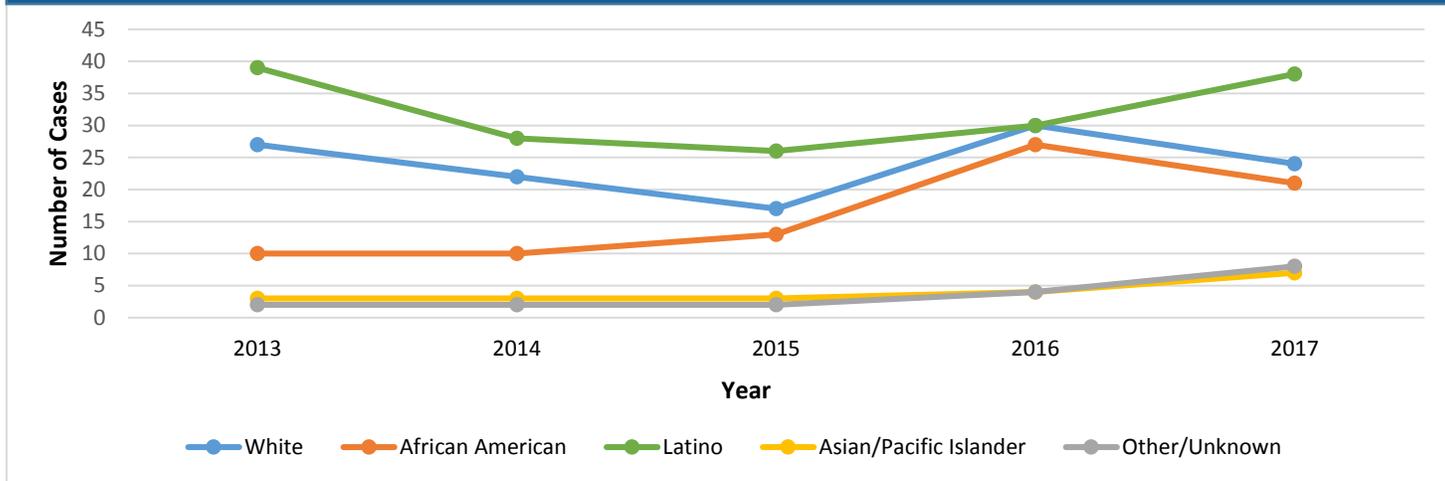
¹ Transgender data is not reported separately from other gender information due to small population size. See Technical Notes “Transgender Status.”

² All HIV data taken from California Office of AIDS eHARS database.



HIV AMONG MEN WHO HAVE SEX WITH MEN (MSM)

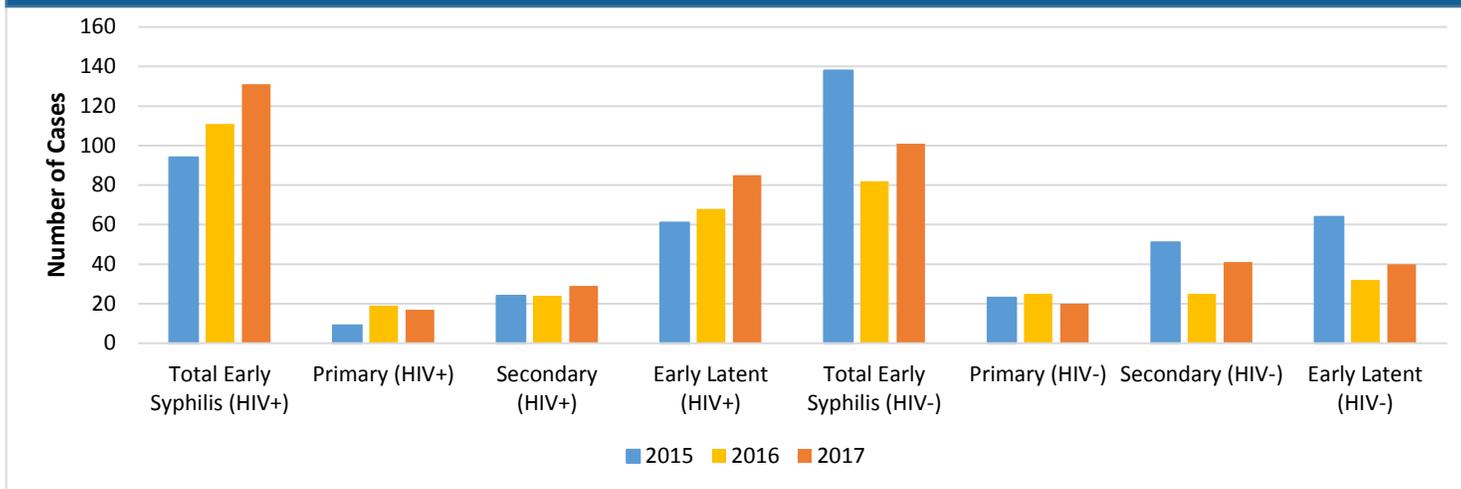
Figure 39. Number of MSM newly diagnosed with HIV infection by race/ethnicity¹, Long Beach², 2013-2017



¹ Cases in the "Other" racial/ethnic category include Native American/Alaska Native, Multi-race, and unknown.

² All HIV data taken from California Office of AIDS eHARS database.

Figure 40. Total early syphilis¹ among MSM by HIV serostatus, Long Beach², 2015-2017



¹ Syphilis data is taken from the CalREDIE statewide reporting system.

² All HIV data taken from California Office of AIDS eHARS database.



HIV AMONG TRANSGENDER PERSONS

Table 24. Number of transgender persons living with HIV¹ by year, Long Beach, 2013-2017

	2013		2014		2015		2016		2017	
	Num.	%								
Total	33		36		38		38		39	
Sex at Birth²										
Male to Female Transgender	33	100%	36	100%	38	100%	38	100%	39	100%
Female to Male Transgender	<5	-	<5	-	<5	-	<5	-	<5	-
Race/Ethnicity										
White	5*	15%	5*	14%	5*	13%	5*	13%	5*	13%
African American	11*	33%	12*	33%	13*	34%	13*	34%	13*	33%
Latino	14*	42%	15*	42%	15*	40%	15*	40%	16*	41%
Asian/Pacific Islander	<5	-	<5	-	<5	-	<5	-	<5	-
Native American/Alaska Native	<5	-	<5	-	<5	-	<5	-	<5	-
Other/Unknown	<5	-	<5	-	<5	-	<5	-	<5	-
Age at HIV Diagnosis (years)										
0-12	<5	-	<5	-	<5	-	<5	-	<5	-
13 - 17	<5	-	<5	-	<5	-	<5	-	<5	-
18 - 24	<5	-	<5	-	<5	-	<5	-	<5	-
25 - 29	<5	-	<5	-	<5	-	<5	-	<5	-
30 - 39	12*	36%	12*	33%	12*	32%	12*	32%	13*	33%
40 - 49	<5	-	7*	19%	8*	21%	8*	21%	8*	21%
50+	14*	42%	14*	39%	14*	37%	14*	37%	14*	36%
Transmission Category										
MSM	28	85%	31	86%	32	84%	32	84%	33	85%
PWID	<5	-	<5	-	<5	-	<5	-	<5	-
MSM-PWID	<5	-	<5	-	<5	-	<5	-	<5	-
Heterosexual	<5	-	<5	-	<5	-	<5	-	<5	-
Other/Unidentified	<5	-	<5	-	<5	-	<5	-	<5	-
HIV Disease Stage										
HIV only	15*	45%	18*	50%	20	53%	20	53%	21	54%
HIV and later AIDS	16*	49%	16*	44%	16*	42%	16*	42%	16*	41%
HIV and AIDS diagnosed simultaneously	<5	-	<5	-	<5	-	<5	-	<5	-

¹Data include persons newly diagnosed with HIV infection in any stage and reported as of December 31, 2017.

²All HIV data taken from California Office of AIDS eHARS database.

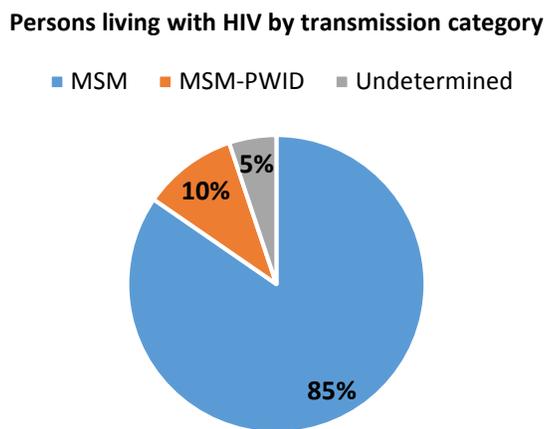
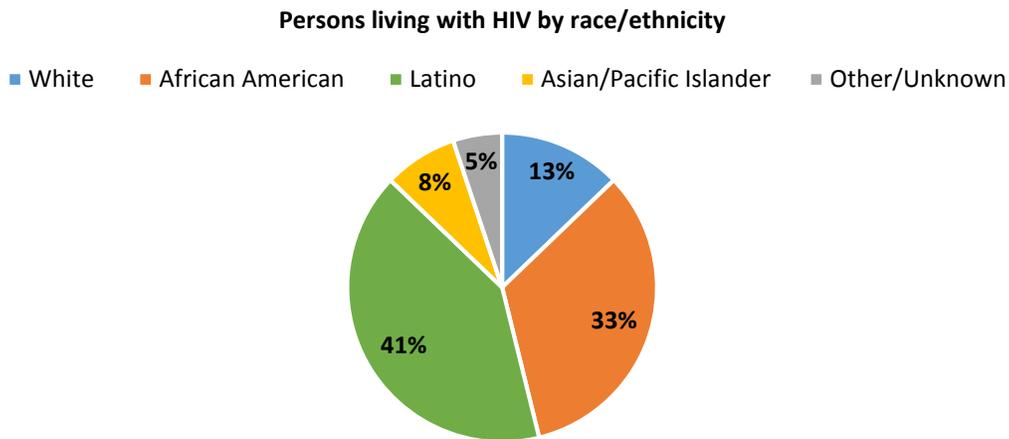
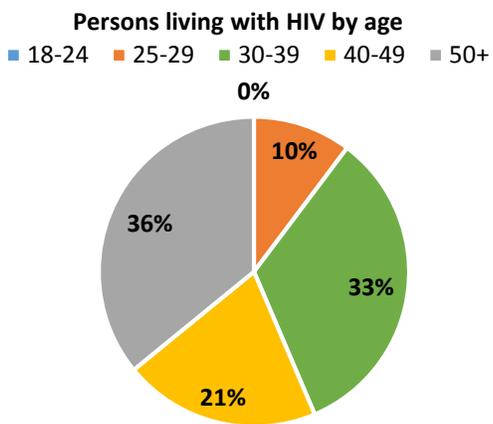
³For how the HIV Disease Stage is determined, see Technical Notes "Stage of Disease at Diagnosis of HIV Infection."

*Percentages may not add to 100% due to rounding and not displaying data when less than 5 cases.

*Any indicators with less than 20 cases do not meet the requirement for a minimum degree of accuracy outlined by the National Center for Health Statistics. Case counts/rates are included for reporting purposes only.



Figure 41. Demographics of transgender persons living with HIV by year, 2017



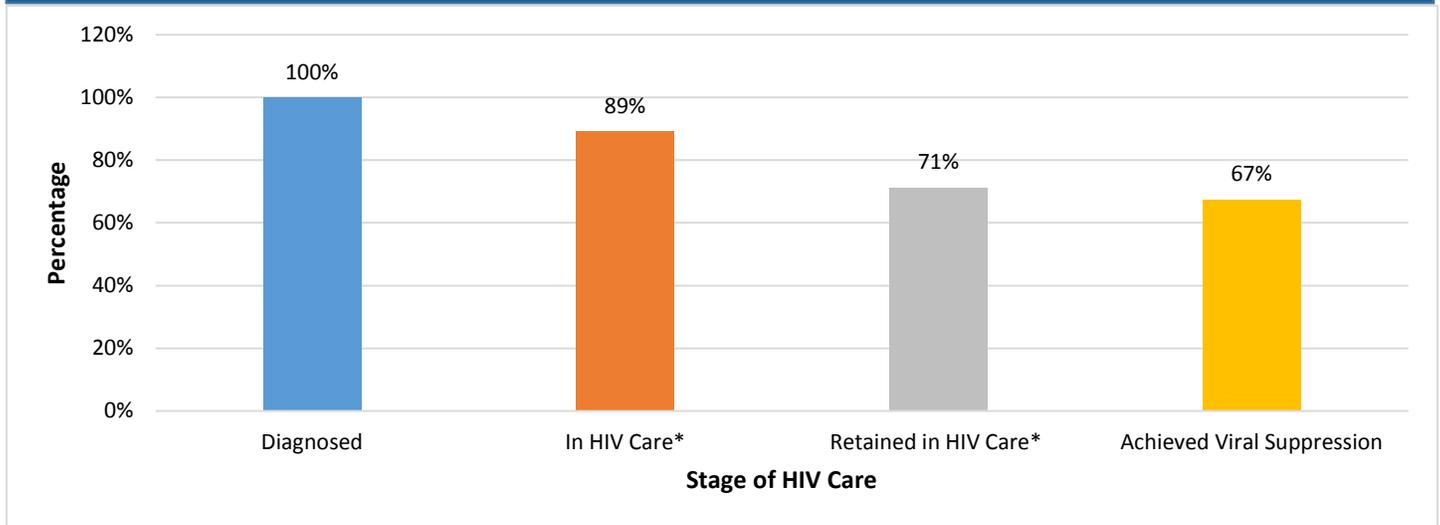
*See Table 24.

*The "Other" race/ethnicity category includes Native American/Alaska Native and Other/Unknown.



HIV CARE CONTINUUM

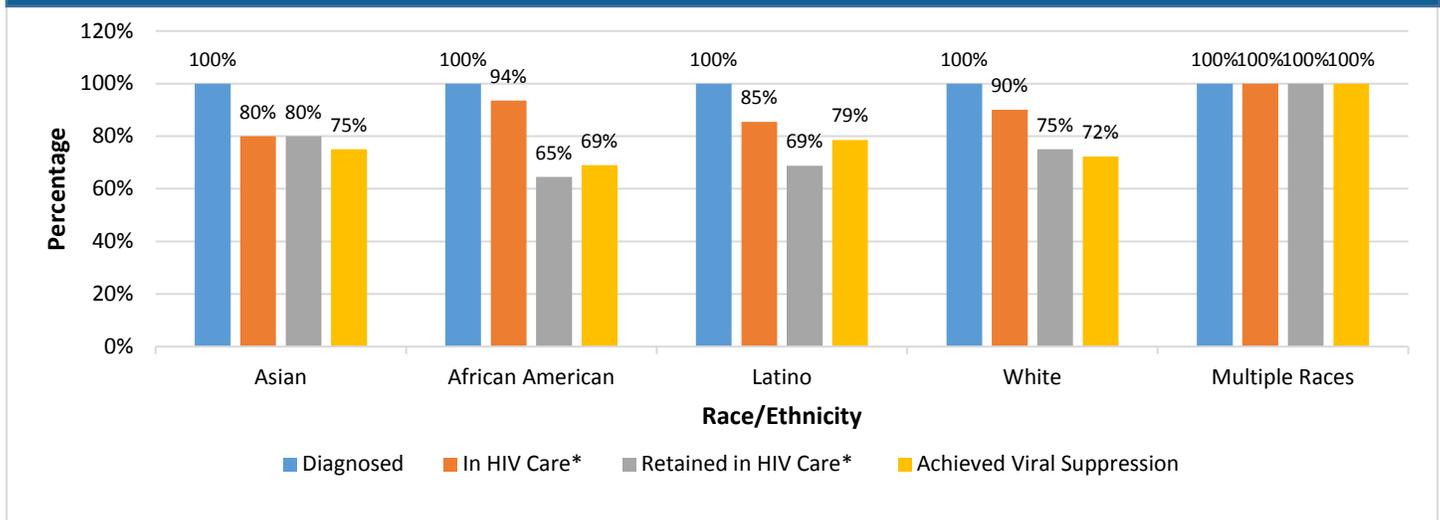
Figure 42. HIV care continuum for persons newly diagnosed with HIV, Long Beach¹, 2016



¹ All HIV data taken from California Office of AIDS eHARS database.

*See Technical Notes "HIV Care Continuum."

Figure 43. HIV care continuum for persons newly diagnosed with HIV by race/ethnicity¹, Long Beach², 2016



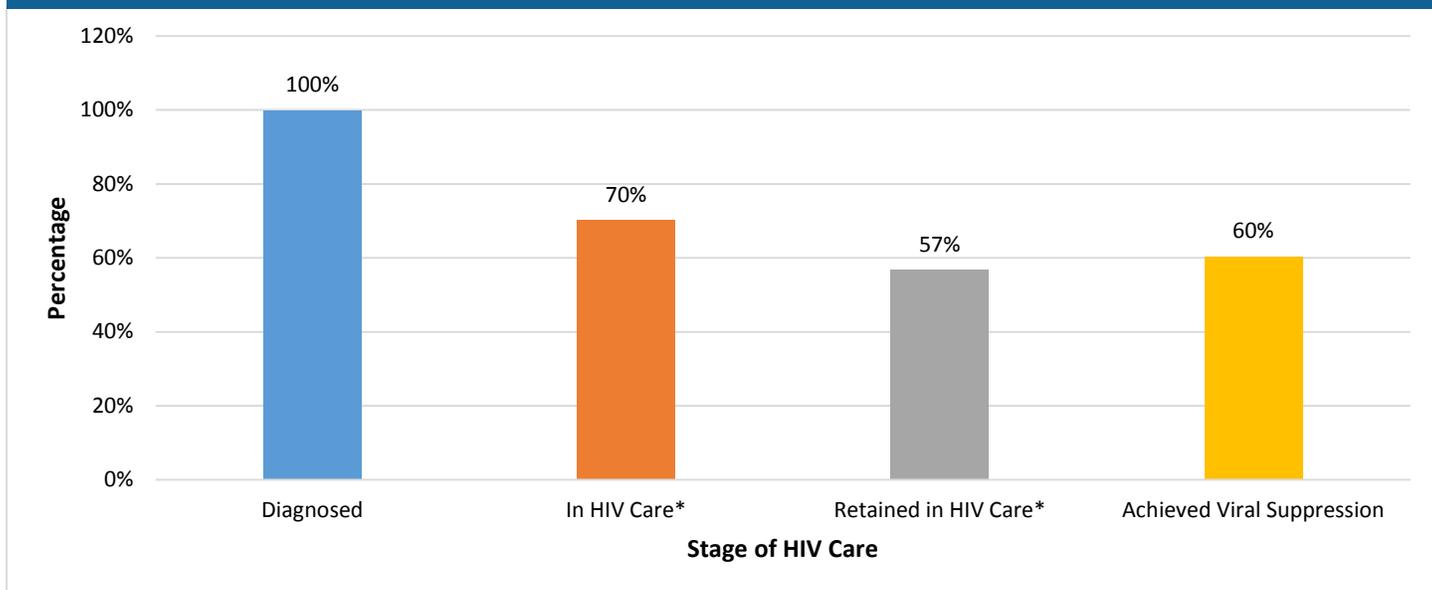
¹ In 2016 there were no newly diagnosed persons in the Native American/Alaska Native and Native Hawaiian/Pacific Islander racial/ethnic groups.

² All HIV data taken from California Office of AIDS eHARS database.

*See Technical Notes "HIV Care Continuum."



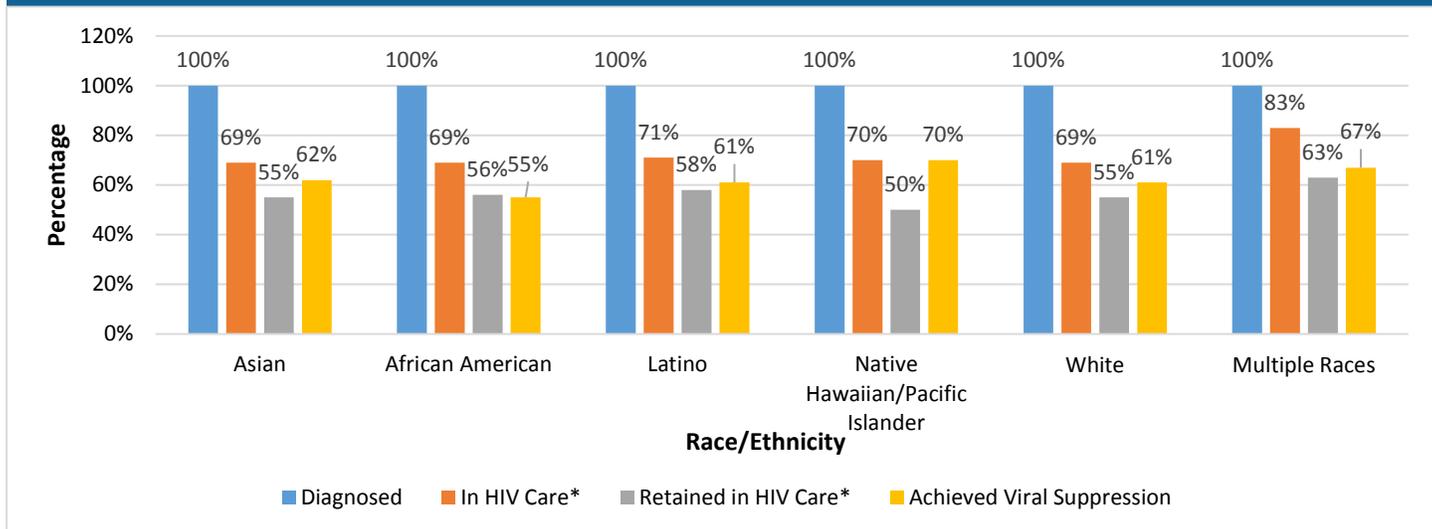
Figure 44. HIV care continuum for persons living with HIV, Long Beach¹, 2016



¹ All HIV data taken from California Office of AIDS eHARS database.

*See Technical Notes "HIV Care Continuum."

Figure 45. HIV care continuum for persons living with HIV by race/ethnicity, Long Beach¹, 2016



¹ All HIV data taken from California Office of AIDS eHARS database.

*See Technical Notes "HIV Care Continuum."

**American Indian/Alaskan Native numbers were not reported due to small numbers.



HIV TECHNICAL NOTES

Place of Residence: As of 2017, a more up-to-date indicator is now being used to differentiate city of residence. As a result, case counts and incidence rates will have changed from previous versions of the annual report and display different values for prior years.

Date of Initial HIV Diagnosis: The date of HIV diagnosis for newly diagnosed cases is determined based on the earliest date of any of the following: positive HIV antibody test, positive HIV antigen/antibody combination test, detectable viral load test, or physician-documented diagnosis in absence of sufficient laboratory evidence. The date of initial HIV diagnosis for assessing trends in new HIV diagnoses considers patient self-report of a positive HIV test as noted in the medical record that was prior to the confirmed HIV diagnosis made by laboratory or clinical evidence. However, CD4 or undetectable viral load tests prior to the confirmed HIV diagnosis are not used to determine date of initial HIV diagnosis.

Living with HIV: Those reported as living with HIV are those with a new diagnosis as well as those who have been diagnosed in previous years.

Grouping of Data Categories: Data in certain racial/ethnic or risk categories are grouped together when the number of persons with HIV in that group is small and/or does not present significant trends. For example, "Other" in the race/ethnicity breakdown in some tables or figures represents Asian/Pacific Islander, Native American, and people of mixed race. Whenever possible, this report presents the expanded racial/ethnic categories rather than an aggregate group labeled "Other." The label "Other" in the transmission category breakdown may include transfusion recipients, hemophiliacs, heterosexuals, persons acquiring HIV prenatally, or persons of unidentified risk.

HIV Case Rates and HIV Mortality Rates: Annual race-specific rates are calculated as the number of cases diagnosed for a racial/ethnic group during each year divided by the population for that race/ethnicity, multiplied by 100,000. These rates are calculated separately for males and females. The annual populations are not available for transgender persons. Population denominators by year are obtained from the State of California, Department of Finance, Demographic Research Unit (See References).

HIV Surveillance Methods: Long Beach HIV cases are reported primarily through active surveillance activities in which public health personnel review laboratory and pathology reports and medical records to identify cases and complete the case report forms. HIV cases are also identified through passive reporting, review of death certificates, validation studies using secondary data sources such as hospital billing records or other disease registries, and reports from other health departments. The surveillance system is evaluated regularly for completeness, timeliness, and accuracy.

The HIV data in this report include persons who were residents of Long Beach at the time they were diagnosed with HIV (all stages of infection) including Long Beach residents who were diagnosed in other jurisdictions. Long Beach started name-based case reporting for HIV cases in April 2006, as mandated by California law. Only cases reported confidentially by name are included in this report.

Data on diagnoses of HIV infection should be interpreted with caution. HIV surveillance reports may not be representative of all persons infected with HIV because not all infected persons have been tested. Furthermore, the results of anonymous tests are not required to be reported in California. Therefore, reports of confidential test results may not represent all persons with HIV infection. Many factors, including the extent to which testing is routinely offered



to specific groups and the availability of, and access to, medical care and testing services, may influence testing patterns. These data only provide a minimum estimate of persons known to be HIV infected.

Stage of Disease at Diagnosis of HIV Infection: In 2014, the United States surveillance case definition for HIV infection among adults and adolescents aged ≥ 13 years and children age < 13 was revised to expand the HIV infection classification staging system to five stages of HIV infection as described below.

- **HIV infection stage 0:** This stage is early HIV infection and is established by a sequence of discordant HIV test results indicative of early HIV infection in which a negative or indeterminate result was within 180 days of a positive result. This sequence of discordant results may be based on testing history (previous documented negative/indeterminate results), or by a HIV testing algorithm. If the criteria for stage 0 are met, the stage is 0 (supersedes other stages) regardless of criteria for other stages (CD4 T-lymphocyte test results and opportunistic illness diagnoses).
- **HIV infection stage 1-3:** HIV infection stage 1-3 is based on age-specific CD4 T-lymphocyte count or CD4 T-lymphocyte percentage of total lymphocytes. Data on persons with HIV infection, stage 3 (AIDS) include persons whose infection has ever been classified as stage 3 (AIDS).
- **HIV infection, stage unknown:** No information available on CD4 count or percentage and no reported information on AIDS-defining conditions (every effort is made to collect CD4 counts or percentages at time of diagnosis).

Transgender Status: In Long Beach HIV data, transgender individuals are listed as either male-to-female or female-to-male. Due to the small number of transgender cases in Long Beach and potential small population size, their data are included with their sex at birth category to protect confidentiality. Please note that there are several limitations of our transgender data. We believe that our report likely underestimated the number of transgender persons affected by HIV because data collected for HIV reporting are derived from medical records. Consequently, information that may be discussed with the health care provider but not recorded in the medical record is generally not available for the purposes of HIV case reporting.

CDC HIV Surveillance report data is based on a person's sex at birth. Data for transgender persons are not explicitly presented in their report because information on gender identity (a person's internal understanding of his or her gender or the gender with which a person identifies) is not consistently collected or documented in the data sources used by HIV reporting jurisdictions, like those of Long Beach.

Out-of-Jurisdiction Cases: Routine HIV case surveillance assigns case ownership by residence at diagnosis. HIV cases residing in Long Beach at time of diagnosis are considered Long Beach cases. HIV cases receiving care in Long Beach but who resided elsewhere at time of diagnosis are considered out-of-jurisdiction (OOJ) cases.

HIV Care Continuum: To direct HIV prevention resources most effectively, the CDC tracks the "HIV care continuum." The continuum is the series of steps from the time a person is diagnosed with HIV through the successful treatment of their infection with HIV medications. The goal of HIV treatment is to achieve viral suppression, meaning the amount of HIV in the body is very low or undetectable. The HIV care continuum consists of several steps required to achieve viral suppression.



HIV Care Continuum Continued:

- Diagnosed: Persons currently diagnosed and living with HIV.
- In HIV Care: Persons who have at least one CD4 or viral load or HIV-1 genotype test during the calendar year are considered to be engaged in care.
- Retained in HIV Care: Persons who have two or more CD4 or viral load or HIV-1 genotype tests that were performed at least 3 months apart during the calendar year are considered to be retained in care.
- Achieved Viral Suppression: Persons who have a most recent viral load test result ≤ 200 copies/ml during the calendar year are considered to be virally suppressed for HIV.

For further information on HIV, please visit: <https://www.cdc.gov/hiv/>



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