Summary and Charts





National Center for Primary Care/Kaiser Family Foundation Survey of Georgia Residents on HIV/AIDS

Methodology

The National Center for Primary Care/Kaiser Family Foundation *Survey of Georgia Residents on HIV/AIDS* is a cooperative effort of the National Center for Primary Care at the Morehouse School of Medicine and the Kaiser Family Foundation. The survey was designed and analyzed by researchers at the Kaiser Family Foundation. Fieldwork was conducted by telephone by Princeton Survey Research Associates between April 16 and May 31, 2004, among a statewide representative random sample of 800 respondents 18 years of age and older living in the state of Georgia, including 566 White respondents and 186 African Americans. Results for all groups have been weighted to reflect their actual distribution in the state of Georgia.

The margin of sampling error for the survey is plus or minus 4 percentage points. For results based on White respondents the margin of sampling error is plus or minus 4 percentage points; for African Americans it is plus or minus 8 percentage points. For results based on subsets of respondents the margin of error is higher. Note that sampling error is only one of many potential sources of error in this or any other public opinion poll.

"Vol." indicates that a response was volunteered by respondent, not an explicitly offered choice.

Full question wording and results, including national comparison data, are available separately at www.kff.org.

SURVEY FINDINGS

The public in Georgia, and particularly African Americans, are concerned about HIV/AIDS as a problem facing the nation. Most believe that the U.S. is losing ground when it comes to HIV/AIDS, and most would like to see the government increase spending to fight the disease in the U.S.

- About a quarter of Georgia residents (24%) name HIV/AIDS as the most urgent health problem facing the nation, ranking second behind cancer (38%) (Chart 1). However, among African Americans in Georgia, HIV/AIDS is most often mentioned as the most urgent health problem, named by more than four in ten (44%).
- Nearly half of Georgians (46%) think that the U.S. is losing ground when it comes to the problem of HIV/AIDS today, while nearly four in ten (37%) think the U.S. is making progress, and about one in ten (11%) say the problem is about the same as it has been (Chart 2). African Americans (62%) are more likely than whites (39%) to say the U.S. is losing ground.
- About six in ten adults in Georgia (61%) say the federal government spends too little money on HIV/AIDS, while a quarter (26%) say it spends the right amount, and just 6% say it spends too much (Chart 3). When asked about federal government spending on HIV/AIDS compared with other health problems like heart disease and cancer, a somewhat smaller share say spending on AIDS is too low (45%), and a somewhat larger share say it's about right (42%) (Chart 4). In both cases, African Americans are more likely than whites to say that spending on HIV/AIDS is too low.
- A majority of Georgians (57%) believe that spending more money on HIV/AIDS prevention in the U.S. will lead to meaningful progress in slowing the epidemic, while about a third (35%) think that spending money won't make much difference (Chart 5).

In addition to being concerned about HIV/AIDS as a problem facing the nation, Georgians are personally concerned about the disease, both in terms of themselves and their children. Although most Georgians say they would be comfortable working with someone who is HIV-positive, more than half believe there is a lot of discrimination against people living with HIV in the U.S. today.

- More than one in five Georgians (22%) say they are very concerned personally about becoming infected with HIV, and another 13% say they are somewhat concerned (Chart 6). African Americans (43%) are much more likely than whites (14%) to say they are personally very concerned about becoming infected.
- Nearly half (45%) of Georgians with children under the age of 21 say they are very concerned about their son or daughter becoming infected with HIV, and another 25% say they are somewhat concerned (Chart 7). Again, African Americans (66%) are more likely than whites (39%) to say they are very concerned about this.
- Almost half of Georgia residents (48%) say they personally know someone who currently has or has died from HIV or AIDS (Chart 8). While most say they would be very (38%) or somewhat comfortable (34%) working with someone who is HIV-positive, nearly a quarter say they would be very (11%) or somewhat uncomfortable (15%) working with such a person (Chart 9).

• More than half (53%) think there is a lot of discrimination against people living with HIV and AIDS in the U.S. today, and an additional three in ten (29%) say there is some discrimination. Just over one in ten (12%) say there is only a little or no discrimination at all against people living with HIV (Chart 10).

Georgians are more likely to see HIV/AIDS as a problem for the state of Georgia than they are to see it is a problem for their local community in Georgia. Most say they would like to see more action on AIDS from a variety of leaders in the state.

- When it comes to the problem of AIDS in Georgia, about half (49%) think that AIDS is a more urgent problem for the state of Georgia than it was a few years ago, while fewer than one in ten (8%) think it is a less urgent problem, and about a third (35%) think the problem is about the same (Chart 11). African Americans (74%) are more likely than whites (39%) to think the problem is more urgent today.
- When asked about the problem of AIDS in their *local* community, about a quarter (27%) think that AIDS is a more urgent problem for their community than it was a few years ago, eight percent think the problem is less urgent, another quarter (26%) think it is about the same, and three in ten (30%) say AIDS has never been a problem in their local community (Chart 12). African Americans are more likely than whites, and younger Georgians are more likely than their older counterparts, to say that the problem is more urgent for their local community today (Chart 13).
- Most people say that a variety of groups are not doing enough when it comes to solving the problem of AIDS in Georgia, including Georgia business leaders (61%), local governments in Georgia (57%), the Georgia state legislature (55%), the federal government (53%), public schools in Georgia (52%), and Governor Sonny Perdue and his administration (51%) (Chart 14).
- While Georgians say they expect more action from a variety of people and organizations, fewer than one in six (15%) say they have personally donated money or volunteered time for and HIV/AIDS service organization or charity in the past year (Chart 15).

A variety of misconceptions about how HIV is transmitted, and about other aspects of the epidemic, exist among the public in Georgia.

- Georgia residents are well-informed about certain aspects of the HIV epidemic large shares know that there is no cure for AIDS (90%), that there are drugs that can lengthen the lives of those with HIV (89%), that as many as one in every three HIV-positive people in the U.S. don't know they are infected (84%), and that there is not currently an HIV vaccine available (76%). People are less well-informed about other aspects just over half know that a pregnant woman with HIV can take drugs to reduce the risk of her baby being born infected (55%), and just over four in ten know that having other sexually transmitted diseases increases a person's risk for HIV (44%) (Chart 16).
- Virtually all Georgians know that HIV can be transmitted by having unprotected intercourse (99%), sharing an IV needle (99%), and having unprotected oral sex (90%). However, significant minorities say that it is possible (or they don't know if it's possible) to transmit HIV through various forms of casual contact, including kissing (40%), sharing a drinking glass (25%), and touching a toilet seat (18%) (Chart 17).

- More than four in ten (43%) Georgians know that about half of all new HIV infections in the U.S. occur among African Americans, and the same share (43%) know that half of all new infections in the U.S. occur among people under age 25 (Chart 18).
- About four in ten Georgians know that African Americans (37%) and Hispanics (41%) with HIV have more difficulty in getting the care and treatment they need compared with people of other backgrounds. However, just one in ten (11%) know that women with HIV have more difficulty than men accessing care and treatment, while 9% think that women have less difficulty, and 75% think that men and women's ability to access care and treatment for HIV is about the same (Chart 19).

More than half the public in Georgia say they have been tested for HIV at some point, and these rates are higher among African Americans and younger people. Most adults who have not been tested say that they don't feel they are at risk. Stigma and misconceptions about HIV testing remain as issues among the public.

- More than half of Georgians (55%) say they have ever been tested for HIV, including 25% who say they have been tested sometime in the last year (Chart 20). More than three-quarters (77%) of African Americans say they have ever been tested (including 43% in the last year), compared with fewer than half (46%) of whites who have ever been tested (17% in the last year). Younger individuals are also much more likely to say they've been tested for HIV, both ever and in the past year (Chart 21).
- Among those who were tested in the past 12 months, six in ten (62%) say they were tested in a private doctor's office, one in six (17%) went to a general health clinic, and the same share (17%) said they were tested someplace else. Two percent reported going to an HIV clinic to be tested (Chart 22).
- Among the 40% of Georgians who say they have *never* been tested for HIV, the most often cited reason for not being tested is not feeling at risk (74%). Fewer than ten percent say they haven't been tested because they don't like needles or giving blood (9%), they don't know where to get tested (7%), they worry about confidentiality (5%), and they're afraid they'll test positive (2%) (Chart 23).
- Misconceptions about HIV testing exist among the public in Georgia. Among the 55% who say they've ever been tested for HIV, nearly three in ten (29%) say they had the impression their test was done as a routine part of an exam (Chart 24). While more than six in ten (62%) know that you have to ask a doctor to perform an HIV test when having blood drawn as part of a routine physical exam, 22% think that it is standard practice to perform an HIV test as part of a routine physical, and another 17% are not sure (Chart 25).
- Stigma also persists around HIV testing. About three in ten said they would be very (17%) or somewhat (12%) concerned that people would think less of them if they found out they had been tested for HIV (Chart 26).

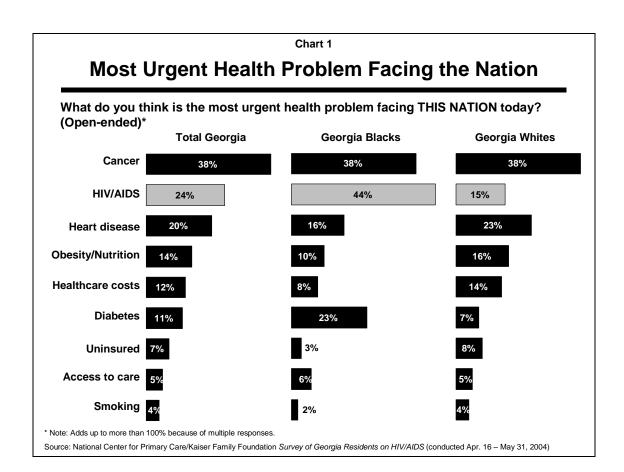
Most adults in Georgia say that they get their information about HIV/AIDS mainly from the media. Half report having ever talked to a partner about HIV/AIDS, and about four in ten say they have talked to their doctor about it. Many people say they need more information about different aspects of the disease.

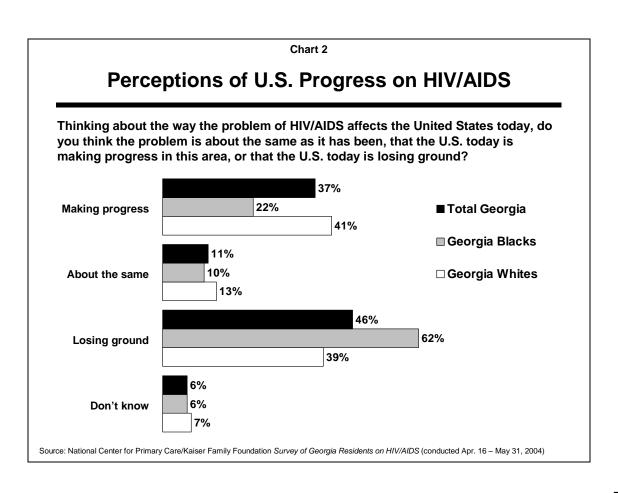
- A large majority of adults in Georgia (70%) say that most of what they know about HIV/AIDS comes from the media, while nine percent say it comes from their doctor or other health professional, seven percent say friends and family, and five percent say the Internet (Chart 27). Georgians ages 18-29 are less likely to say their information about HIV/AIDS comes from the media, and more likely to say it comes from some other source (Chart 28).
- About four in ten adults (38%) in Georgia report having ever talked with a doctor or other health care provider about HIV/AIDS (Chart 29). More than half (57%) of African Americans say they have talked with a doctor about the disease, compared with three in ten whites (29%). Half of Georgians ages 18-29 say they have talked with a doctor about HIV, compared with 44% of those ages 30-49, a third of those ages 50-64, and fewer than one in ten (9%) of those ages 65 and over (Chart 30).
- About half (49%) of adults in Georgia say they have ever talked to a partner about HIV or AIDS. Half (50%) also say they have ever talked to a partner about other sexually transmitted diseases, while three-quarters (75%) say they have talked to a partner about birth control or condoms (Chart 31). African Americans (67%) are much more likely to report having talked to a partner about HIV/AIDS than are whites in Georgia (43%). Younger Georgians are also more likely than older Georgians to say they have talked with a partner about these issues (Chart 32).
- Many people say they need more information about various aspects of HIV testing, including the different kinds of tests available (38%), how much testing costs (29%), where to go to get tested for HIV (22%), and whether test results are confidential (20%) (Chart 33). In addition, many people say they need more information about how to talk with children (34%), their doctor (16%), and their partner (15%) about HIV/AIDS, and 12% say they need more information about how to use condoms to protect against the disease (Chart 34). African Americans in Georgia are much more likely than whites to say they need more information about HIV.

The public in Georgia sees global HIV/AIDS as a serious problem, and they particularly recognize the impact of the epidemic in Africa. In general, people are somewhat supportive of the United States spending money to aid in the fight against global HIV/AIDS. However, most think the U.S. currently spends too much on foreign aid in general, and a strong majority believes we should address problems at home first rather than spending more money on the global HIV/AIDS epidemic.

- Georgians are somewhat more likely to name HIV/AIDS as the most urgent health problem facing the world (35%) than facing the nation (24%), however, HIV still ranks second to cancer (39%) as the most urgent health problem facing the world (Chart 35).
- More than half of Georgians (55%) say they have seen a lot about the problem of AIDS in Africa in the last year. Fewer say they have seen a lot about the problem of AIDS in the U.S. (42%), Asia (9%), Latin America (8%), and Eastern Europe (6%) (Chart 36).

- About seven in ten adults in Georgia (69%) say that the HIV/AIDS problem worldwide is best described as an epidemic, while about a quarter (26%) say it is a serious problem, but it's an exaggeration to call it an epidemic (Chart 37). Eight in ten (81%) correctly choose Africa as the part of the world that has been hardest hit with HIV/AIDS (Chart 38).
- When asked about a variety of things the U.S. helps fund around the world, more than half (56%) say the U.S. government currently does not spend enough on stopping the spread of HIV (compared with 26% who say it spends the right amount and nine percent who say it spends too much). This is higher than the share saying the U.S. doesn't spend enough on world hunger (53%), treating and preventing tuberculosis and malaria (37%), peacekeeping (29%), and international economic development (17%) (Chart 39).
- In discussing views of the global HIV/AIDS epidemic, and what the public thinks about the role of the U.S. in helping solve this global problem, it's important to set the context with their views on foreign aid in general. More than six in ten Georgians (66%) think the U.S. currently spends too much on foreign aid, while about one in six (16%) say it spends about the right amount, and fewer than one in ten (8%) say the U.S. spends too little on foreign aid (Chart 40).
- Georgians are more supportive of spending on foreign aid to fight HIV in developing countries than they are of spending on foreign aid in general. When asked about foreign aid specifically to deal with the problem of HIV/AIDS in developing countries, a third (33%) say the U.S. currently spends too little, about four in ten (38%) say it spends about the right amount, and 19% say it spends too much (Chart 40).
- Half of Georgians (53%) agree with the statement that the U.S. is a global leader and has a responsibility to spend more money to fight HIV/AIDS in developing countries (Chart 41). However, when forced to choose, a quarter (25%) say they agree more strongly with this statement, while, perhaps not surprisingly, about two-thirds (66%) say they agree more with the statement that the U.S. should address problems at home first rather than spending more money to fight HIV/AIDS in developing countries (Chart 42).
- Despite their concerns about addressing problems at home first, more than half (53%) think that spending more money on HIV/AIDS prevention in developing countries will lead to meaningful progress in slowing the epidemic, while about four in ten (38%) think that such spending won't make much difference (Chart 43).

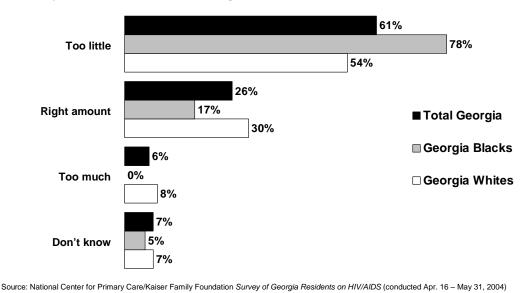






Views of U.S. Spending on Domestic HIV/AIDS

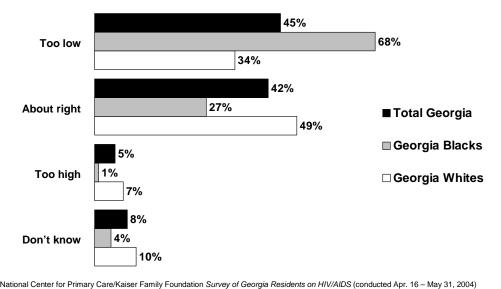
Thinking about the HIV/AIDS epidemic in the United States specifically, in general, do you think the federal government spends too much money on HIV/AIDS, too little money on HIV/AIDS, or about the right amount?





Views of U.S. Spending on Domestic HIV/AIDS **Compared with Spending on Other Health Problems**

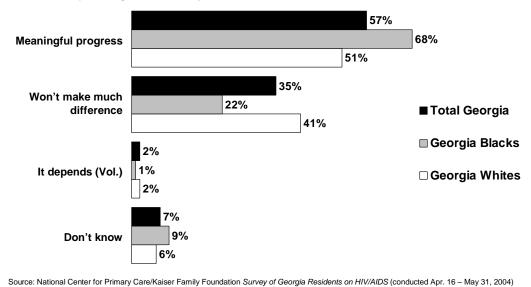
Compared with the amount of money the federal government spends on other health problems, such as heart disease and cancer, do you think federal spending on HIV/AIDS is too high, too low, or about right?

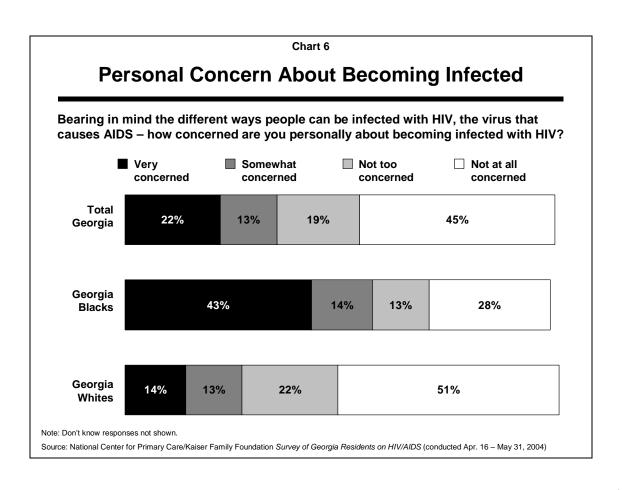


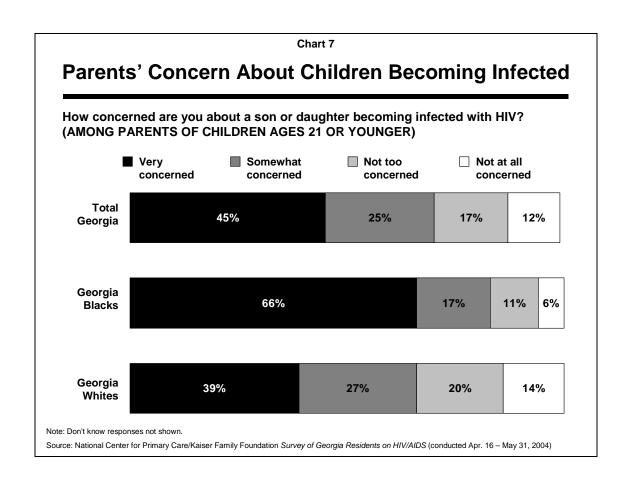


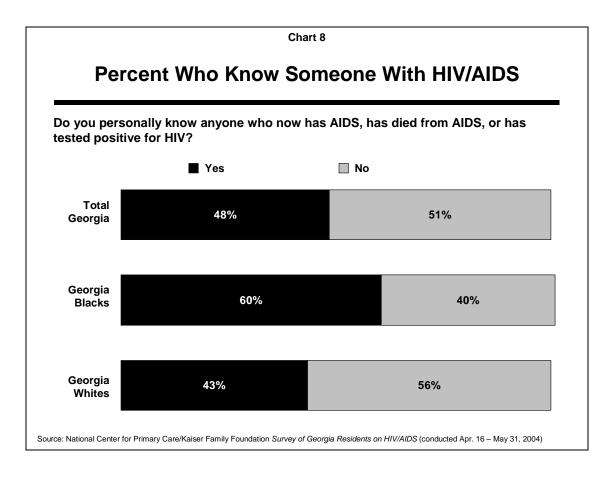
Will Spending on HIV/AIDS Prevention in the U.S. Lead to Progress?

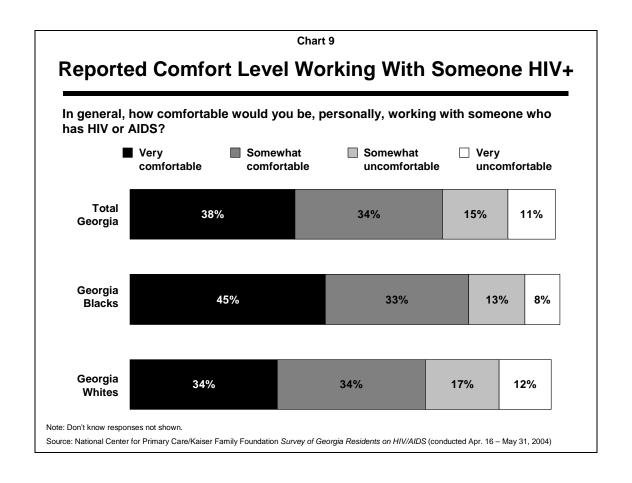
In general, do you think that spending more money on HIV/AIDS prevention in the United States will lead to meaningful progress in slowing the epidemic, or that spending more money won't make much difference?

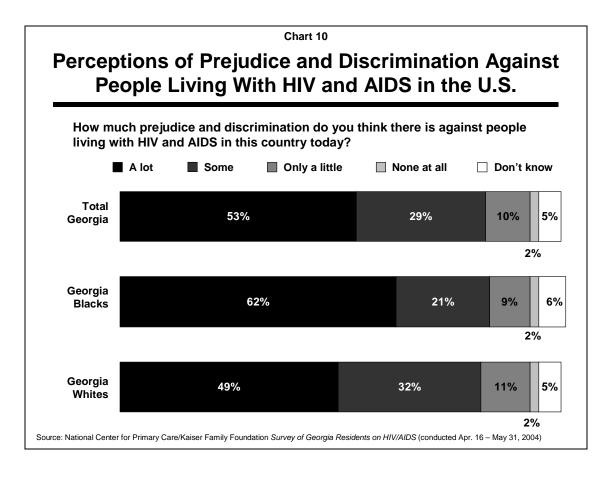








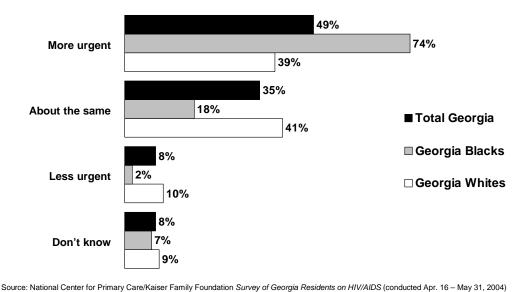


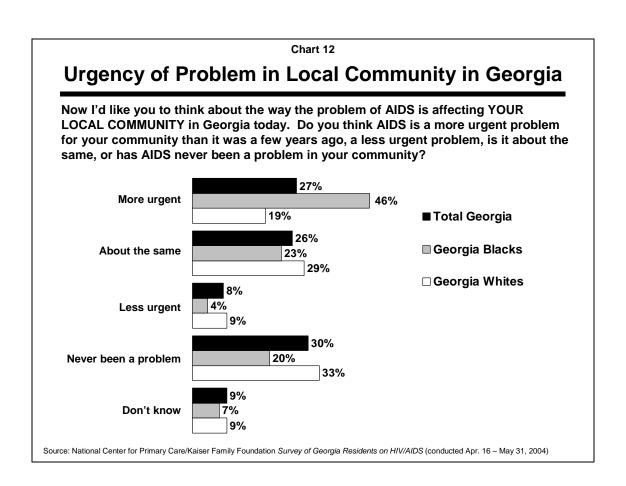




Urgency of Problem in Georgia

Now I'd like you to think about the way the problem of AIDS is affecting THE STATE OF GEORGIA today. Do you think AIDS is a more urgent problem for Georgia than it was a few years ago, a less urgent problem, or is about the same?

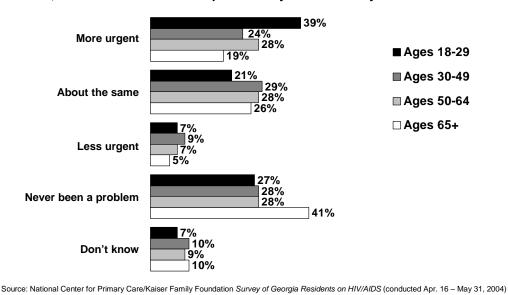


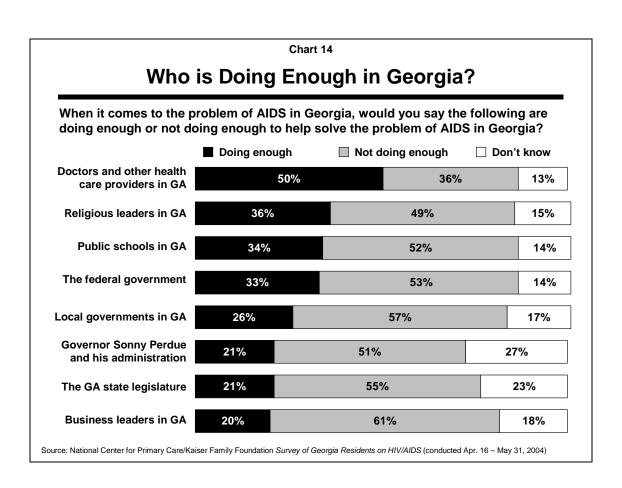


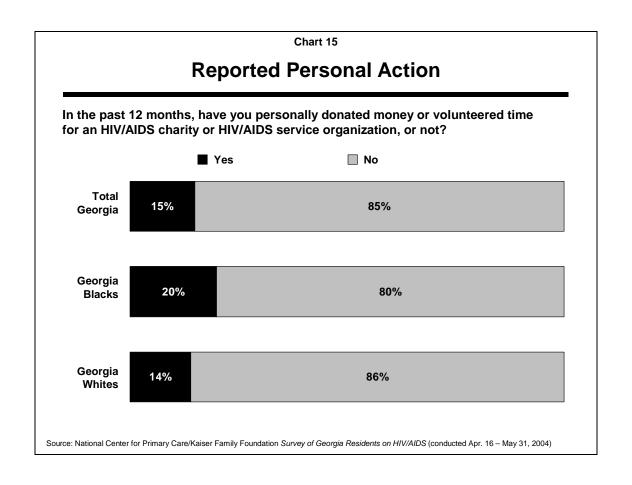


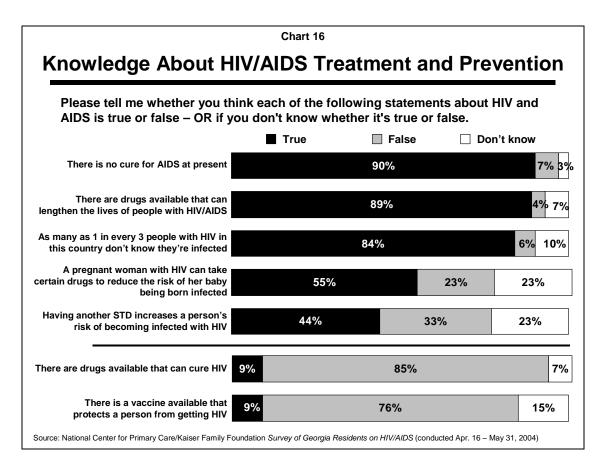
Urgency of Problem in Local Community in Georgia

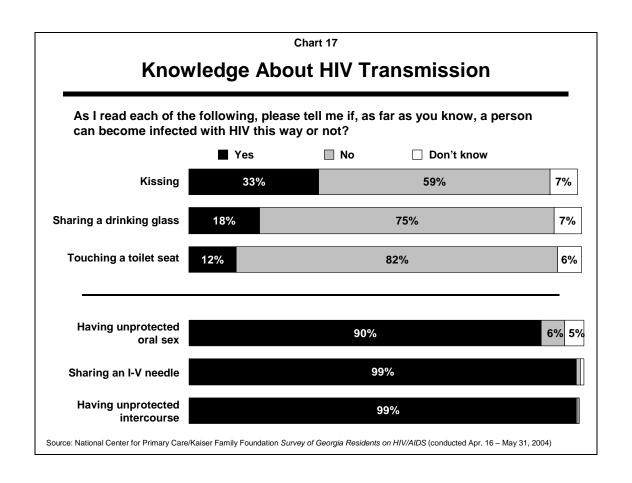
Now I'd like you to think about the way the problem of AIDS is affecting YOUR LOCAL COMMUNITY in Georgia today. Do you think AIDS is a more urgent problem for your community than it was a few years ago, a less urgent problem, is it about the same, or has AIDS never been a problem in your community?

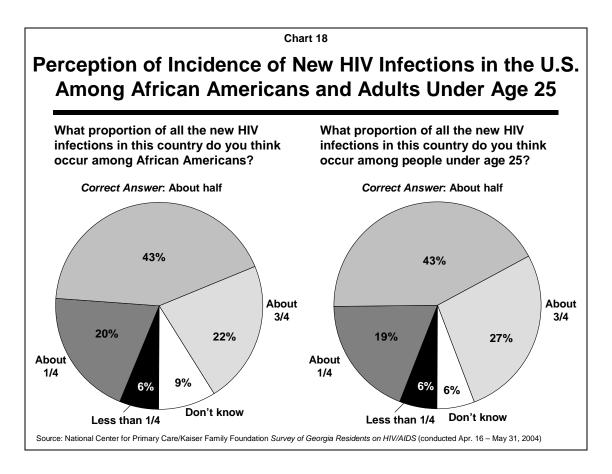


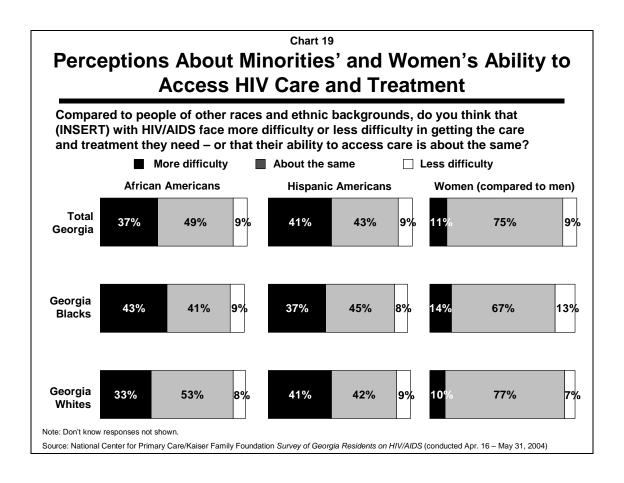


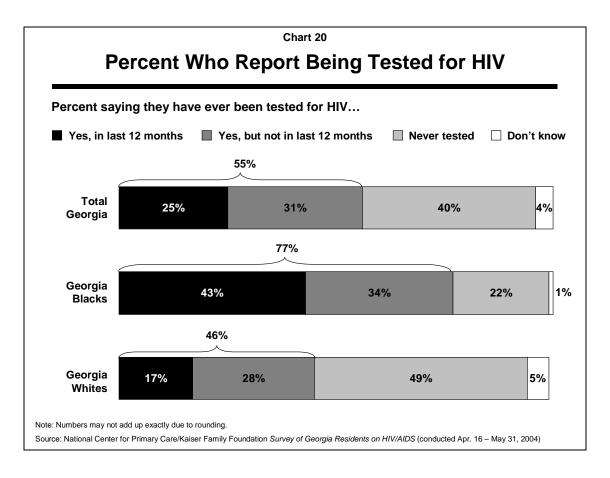


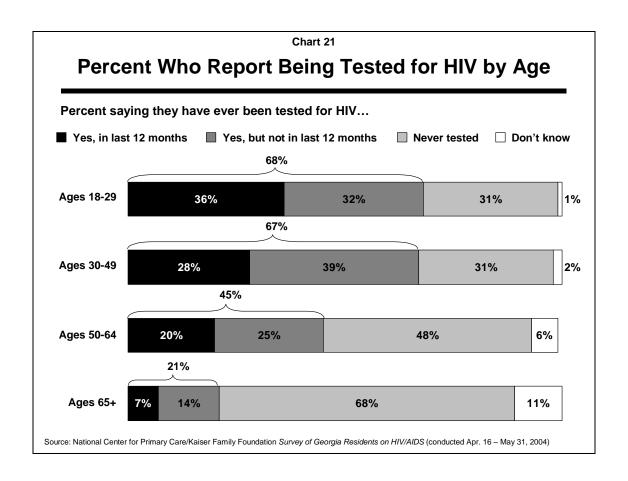


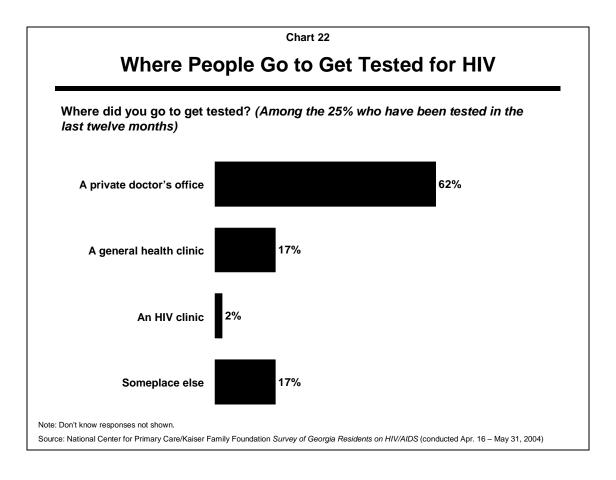


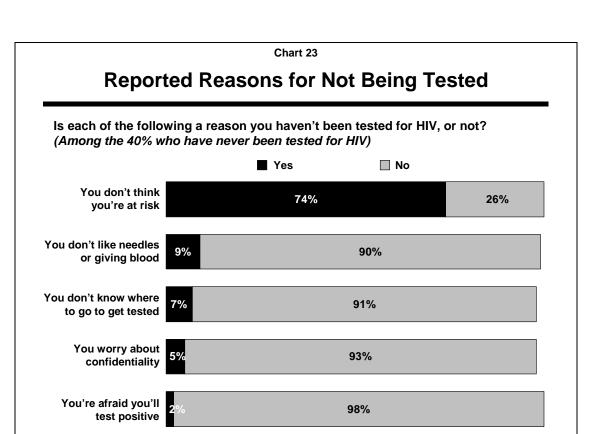




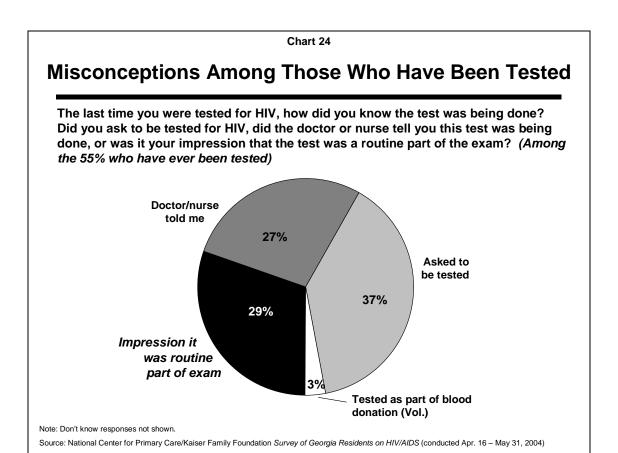






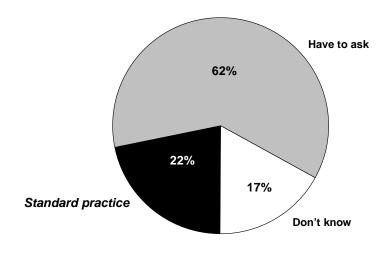


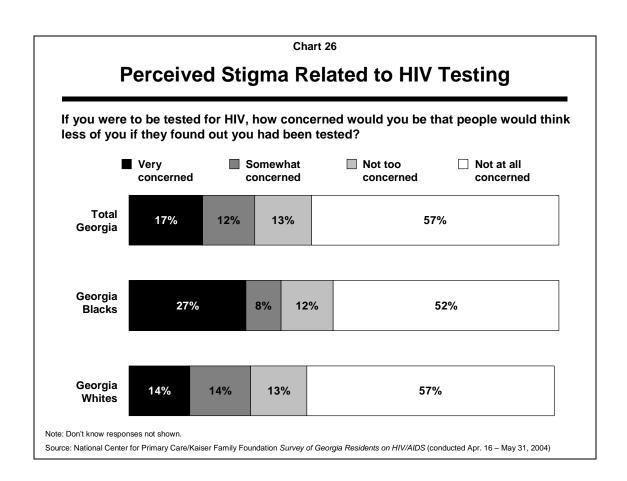
Note: Don't know responses not shown.

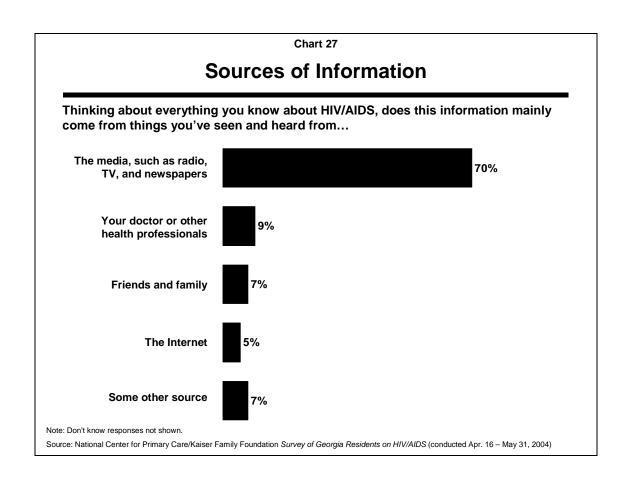


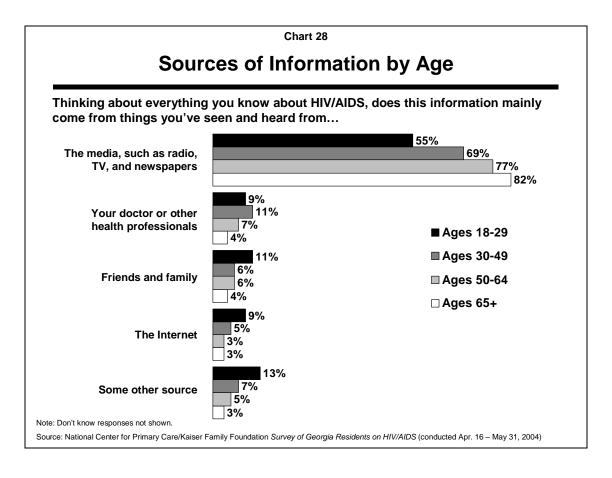
Misconceptions About HIV Testing

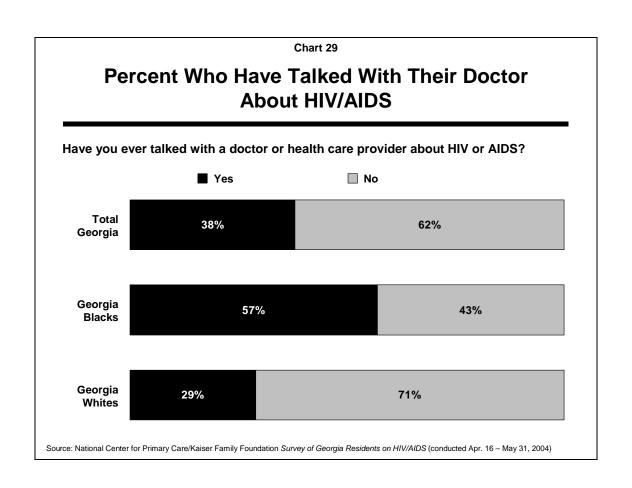
As far as you know, when you have blood drawn at your doctor's office as part of a routine physical or annual exam, is it standard practice to perform a test for HIV, or do you have to ask your doctor to perform this test?

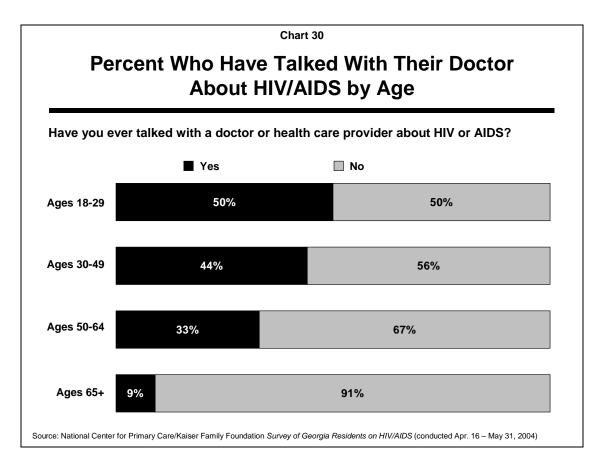


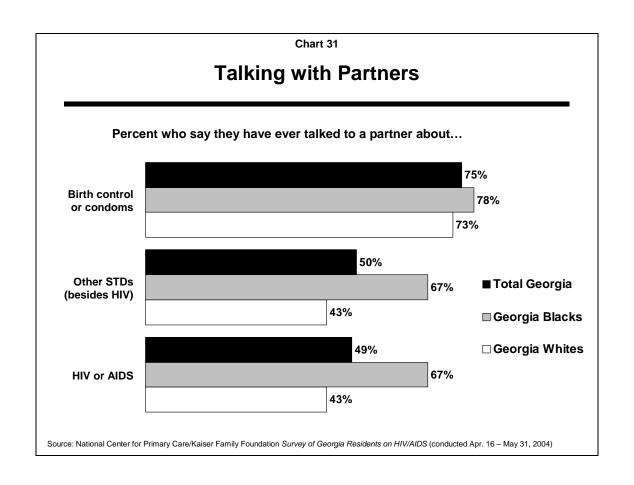


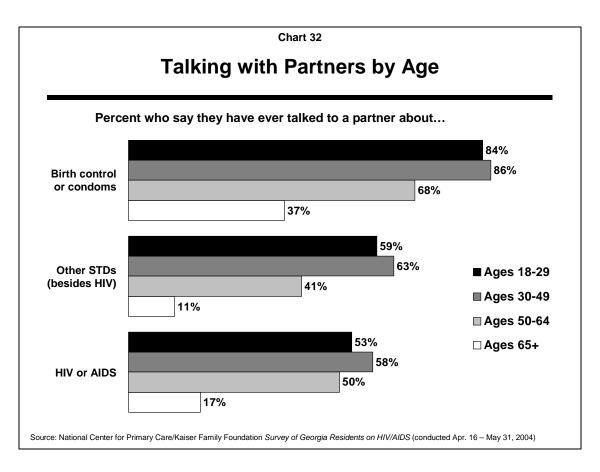


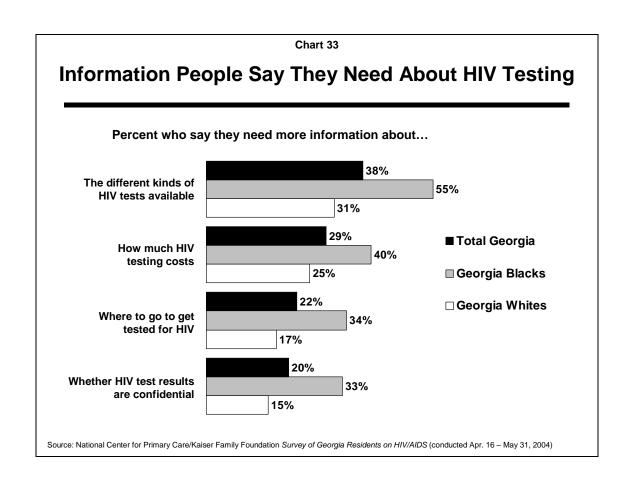


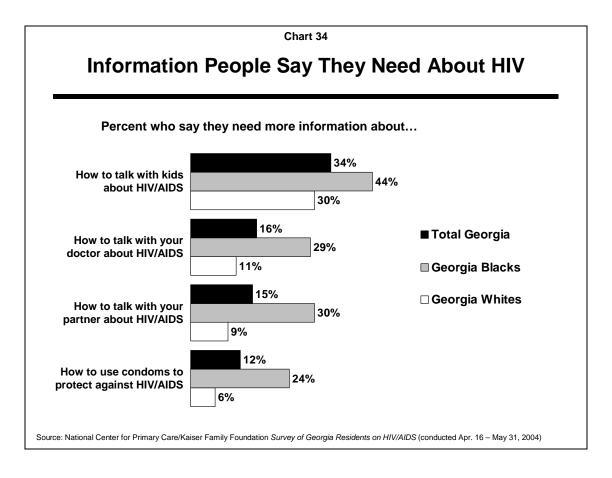


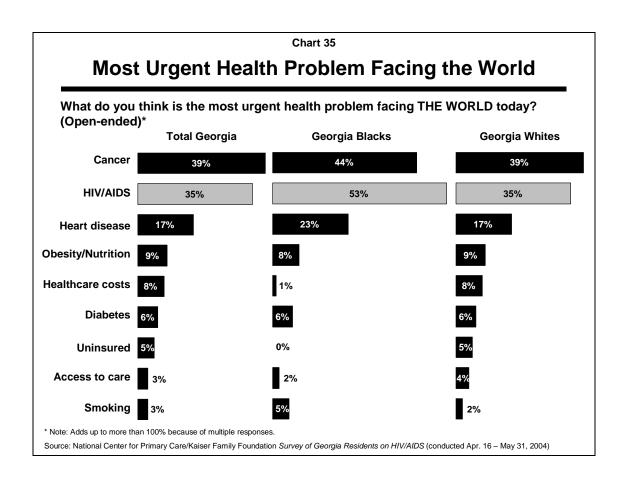


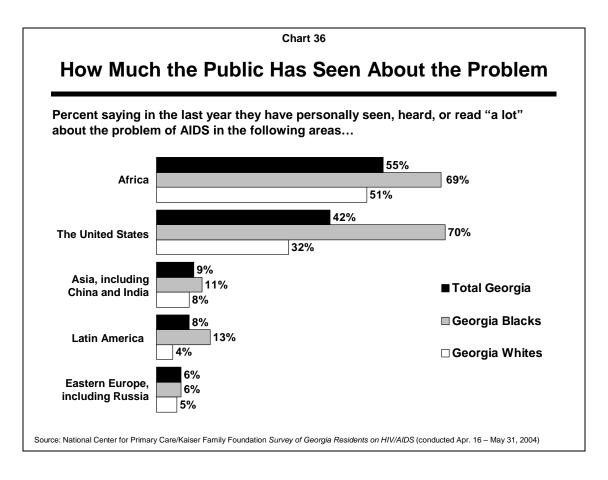






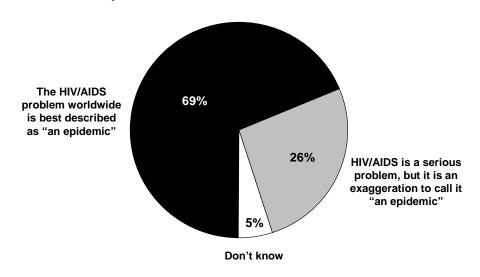






Is HIV/AIDS a Global Epidemic?

Now thinking about the issue of HIV/AIDS in countries outside the United States and the AIDS problem worldwide... Which ONE of the following two statements comes CLOSER to your views...

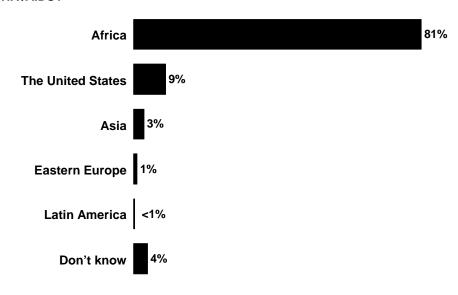


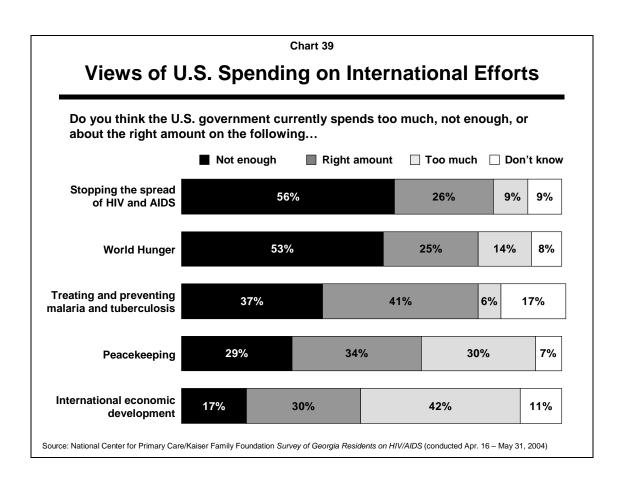
Source: National Center for Primary Care/Kaiser Family Foundation Survey of Georgia Residents on HIV/AIDS (conducted Apr. 16 - May 31, 2004)

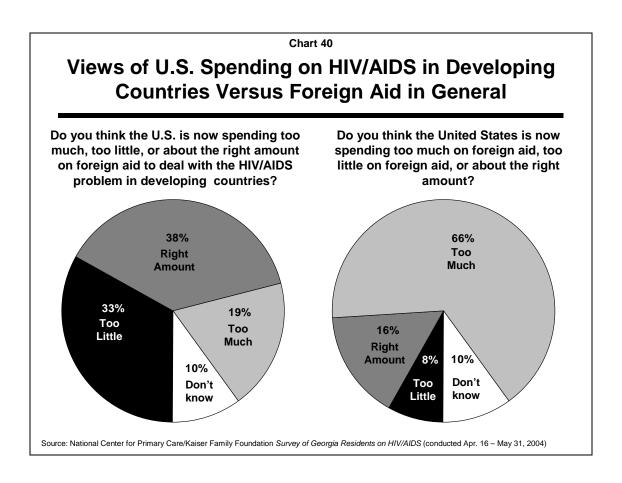
Chart 38

Perception of Areas Hardest Hit by HIV/AIDS

Which ONE of the following parts of the world today do you think has been hardest hit with HIV/AIDS?



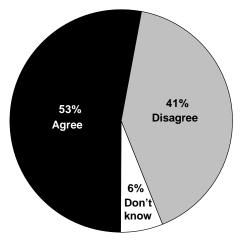


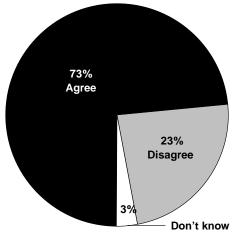


U.S. Responsibility as a Global Leader vs. Addressing Problems at Home First

The United States is a global leader and has a responsibility to spend more money to help fight the HIV/AIDS epidemic in developing countries.

The U.S. should address problems at home first rather than spending more money to deal with the HIV/AIDS epidemic in developing countries.



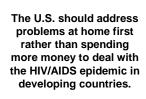


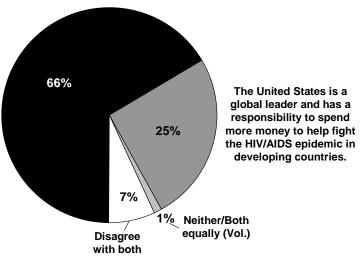
Source: National Center for Primary Care/Kaiser Family Foundation Survey of Georgia Residents on HIV/AIDS (conducted Apr. 16 - May 31, 2004)

Chart 42

U.S. Responsibility as a Global Leader vs. Addressing Problems at Home First

Which of these two statements do you agree with MORE STRONGLY?

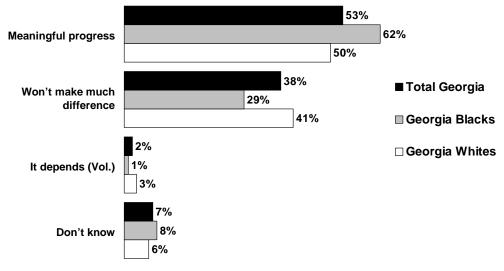




Note: Don't know responses not shown.

Will Spending on HIV/AIDS Prevention in Developing Countries Lead to Progress?

In general, do you think that spending more money on HIV/AIDS prevention in developing countries will lead to meaningful progress in slowing the epidemic, or that spending more money won't make much difference?





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