

# HIV-Infected MSM Are Less Likely to Receive Prevention Services Despite Greater Risks of HIV Transmission

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## Background

Men who have sex with men (MSM) are an important group to include in Prevention with Positives programs.

- In 2003, 32% of all HIV infections in the US were attributed to male-to-male sexual contact.
- Recent studies document increases in risk behaviors among MSM.

## Purpose

We used baseline data from a multi-site intervention trial to investigate whether

1. HIV-infected MSM report receipt of prevention services as frequently as other individuals.
2. The provision of these services is associated with risk behaviors.

## Healthy Living Project

- Multi-site trial of a cognitive-behavioral intervention to reduce transmission risk among a diverse sample of HIV-infected individuals.
- Study was conducted in Los Angeles, Milwaukee, New York, and San Francisco.
- Data for this presentation are drawn only from the baseline assessment.
- Baseline assessed sexual behaviors in the last three months.

- This assessment was done partner-by-partner for the last five male and female partners.
- Used data from the last five partners to identify HIV transmission risk acts—unprotected vaginal or anal intercourse with an HIV-seronegative or unknown serostatus partner.
- Baseline also assessed receipt of medical services in the previous three months.
  - Participants indicated whether or not they had received prevention services, “programs that work with HIV-positive persons to help reduce the spread of HIV.”
- For analyses, participants were divided into three groups:
  - MSM: individuals who (1) reported their gender as male and (2) reported sex with other men or, among sexually abstinent men, reported a gay or bisexual orientation
  - Heterosexual men: individuals who (1) reported their gender as male and (2) reported sex only with women or, among sexually abstinent men, who self-identified as heterosexual
  - Women: individuals who identified their gender as female.

- Analyses used Generalized Estimating Equations (GEE) to examine associations among groups (MSM, women, heterosexual men), risk behaviors, and receipt of prevention counseling.
- Models controlled for clustering by city.

## Participant Characteristics

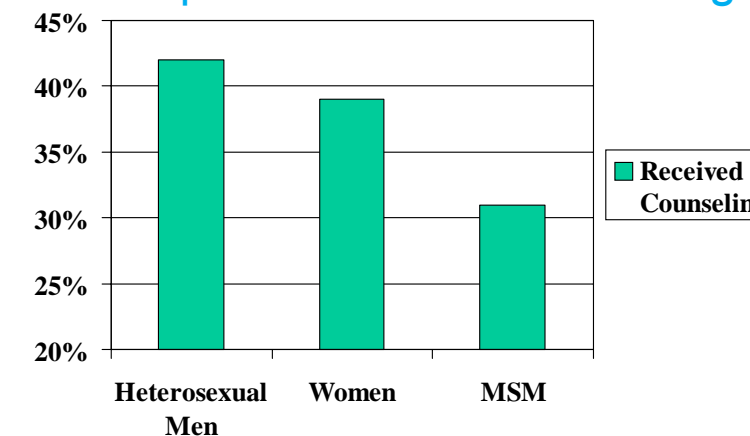
Group	N (%)
MSM:	1910 (51%)
Heterosexual men:	863 (23%)
Heterosexual women:	979 (26%)

**Total:** 3752

- Most participants were African American (48%), White (26%), or Hispanic/Latino (19%).
- Most had not been to college (53%).
- Most were not employed (69%).
- Most were on antiretroviral therapy (83%).

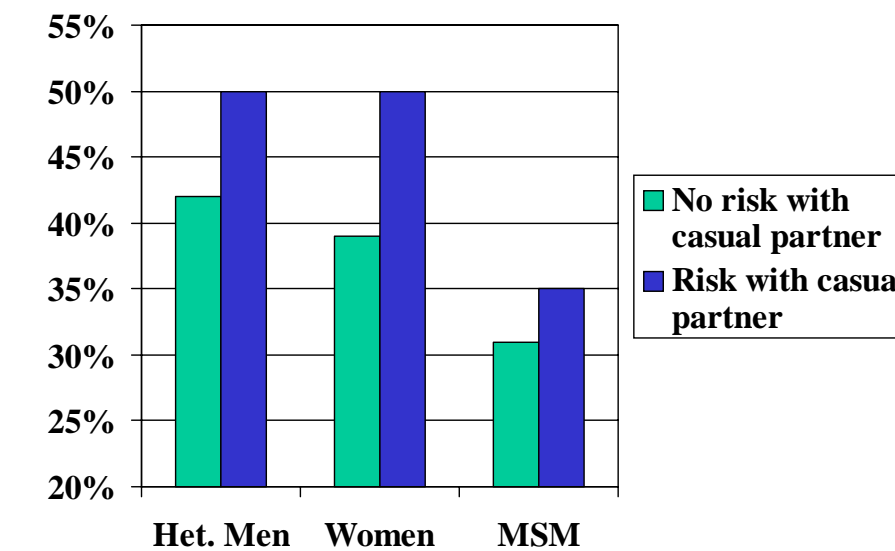
## Results

Receipt of Prevention Counseling



- MSM were significantly less likely to receive HIV prevention counseling than women (OR = 0.70, 95% CI: 0.58, 0.85) and heterosexual men (OR = 0.61, 95% CI: 0.50, 0.75).

Prevention Counseling, by Group and Risk Behavior



- Individuals who reported risk behaviors with casual partners were more likely to report prevention counseling (OR 1.25, 95% CI: 1.04, 1.39).
- MSM were less likely to receive counseling even though they were more likely than heterosexual men (OR = 2.22, 95% CI: 1.41, 3.50) and women (OR = 2.13, 95% CI: 1.43, 3.18) to report risk behaviors with casual partners.

Group differences in counseling were not explained by race, ethnicity, age, education, employment, CD4 cell count, ART use, or risk behaviors.

Predictor of counseling	OR	95% CI
MSM (vs. het. male)	0.62	0.50, 0.77
Female (vs. het. Male)	0.96	0.85, 1.09
Age (continuous variable)	1.00	0.98, 1.02
College (vs. no college)	0.86	0.76, 0.98
Employed (vs. not employed)	0.83	0.65, 1.05
CD4 above 200 (vs. 200 or below)	0.92	0.78, 1.08
ART use (vs. not using)	0.79	0.74, 0.85
Risk w/steady partners (vs. no risk)	0.77	0.53, 1.12
Risk w/casual partners (vs. no risk)	1.33	1.09, 1.63

## Conclusions

- HIV-infected MSM are less likely than women and heterosexual men to receive prevention counseling, even though they are more likely to report risk behaviors with casual partners.
- Efforts must be made to understand and eliminate barriers to delivering Prevention with Positives services to MSM.