FACT SHEET

GEORGIA HIV BEHAVIORAL SURVEILLANCE (GHBS)
2014 Survey of Metro Atlanta Men who Have Sex with Men (MSM): Findings for MSM Ages 18-24 Years

What is GHBS?
Each year throughout the United States, health departments serving the cities with the highest HIV prevalence collaborate with the Centers for Disease Control and Prevention (CDC) to implement the National HIV Behavioral Surveillance System (NHBS). NHBS assesses and monitors HIV-related risk behavior, testing behavior, and use of prevention programs among three populations at heightened risk for HIV infection: men who have sex with men (MSM), persons who use injection drugs, and heterosexual men and women at increased risk of HIV infection. In 2014, the Georgia Department of Public Health implemented the NHBS survey with a focus on MSM in the Atlanta area. Time-location sampling methods were used to develop a random schedule of survey recruitment events from September to December 2014. Men were individually approached by trained recruiters at 32 venues frequented by MSM on 45 separate occasions. Men received basic information about the survey and were screened for eligibility after providing voluntary consent. Surveys were conducted by trained interviewers with hand-held touch-screen computers. HIV testing was conducted using the INSTI™ HIV-1/HIV-2 Rapid Antibody Test among some survey participants. The results were immediately given to consenting participants.

Background: HIV among young MSM
According to the U.S. Centers for Disease Control and Prevention (CDC), MSM only account for approximately 4% of the male population in the United States, but account for more than three-fourths of new HIV diagnoses among men and nearly two-thirds of all new HIV infections nationwide in 2012 (CDC, 2015). In Georgia, approximately 1600 new HIV diagnoses were attributed to male-to-male sexual contact in 2013, and of these about one third were among males 13-24 years old (Georgia Department of Public Health, 2015).
Who were the participants in the 2014 GHBS?
A total of 631 MSM met the eligibility criteria, consented to participate, and completed the entire survey. Of these, 102 were ages 18-24 years (referred to as young MSM in this report). Eighty-one percent (n=83) of the young MSM described themselves as “homosexual or gay” while 19% (n=19) described themselves as “bisexual”.

Approximately 21% (n=22) of those with no health insurance had not seen a healthcare provider within the last year. Approximately 9% (n=6) of the men indicated they had been homeless in the past 12 months, including living on the street, in a shelter, in a Single Room Occupancy hotel, or in a car. One young man (1%) said he was currently homeless.

Most men were recruited from either dance clubs (42%) or bars (23%). Other randomly-selected venues included social organizations, gyms, sex environments, gay pride events, restaurants, parks and other settings.

Highest educational attainment was also diverse among participants. Approximately 15% had completed a Bachelor’s degree (n=15), 43% had completed a 2-year degree or some college (n=44), and 36% had completed a high school diploma or a General Equivalency Degree (GED) (n=37) while 6% did not have at least a high school diploma or equivalent (n=6).

Approximately half of the men (47%) said they earned less than $20,000 (n=48) annually. Almost one-third of the men (29%) said they earned $20,000 to $49,999 (n=30) and 23% of men surveyed (n=24) said they earned $50,000 or more annually.

The majority of men said they lived in Fulton County (46%), followed by DeKalb (15%), Cobb (14%) and Gwinnett counties (12%).

Most men (51%; n=52) said they currently had private health insurance coverage, followed by 32% of men saying they had no current health coverage at all. Approximately 12% of men said their health care expenses were paid for by a publicly-funded program such as Medicaid or Medicare. Thirty-one percent (n=22) of those with no health insurance had not seen a healthcare provider within the last year.

Approximately 9% (n=9) of men indicated they had been homeless in the past 12 months, including living on the street, in a shelter, in a Single Room Occupancy hotel, or in a car. One young man (1%) said he was currently homeless.

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KEY FINDINGS

Seeing a Healthcare provider
Young MSM were asked if they had visited a healthcare provider in the last 12 months. Approximately 79% (n=81) of the men had; 21% (n=21) had not seen a healthcare provider in the last 12 months. Approximately 21% (n=21) of the 102 young MSM (18-24 years) said they have never told a healthcare provider about their sexual orientation.

Heavy alcohol consumption
Overall, 69% (n=70) of respondents met the criteria for “heavy drinking” in the past 30 days, which was defined as an average of two or more drinks per sitting. Of the 69% who met criteria, the majority were Blacks (46%, n=47), men with high school diploma or GED and some college or technical school education (53%, n=54), and men with an annual household income of less than $20,000 (27%, n=28).

Non-injection drugs
Overall, 56% (n=57) of respondents reported using non-injection drugs in the past 12 months. The majority of the young men (91%, n=55) reported using marijuana in the past 12 months.

Alcohol and drugs during sex
Approximately 20% (n=19) of men said they used alcohol during their most recent sex with a man, while 4% (n=4) of men said they used drugs only and 4% said they used both alcohol and drugs during their most recent sex with another male.

Number of male sex partners
Young MSM were asked about the number of male sex partners they had in the past 12 months. Approximately 3% (n=3) reported have no sexual partners, 18% (n=18) reported one, 57% (n=57) reported 2-5 partners, 14% (n=14) reported 6-10 partners, and 8% (n=8) reported having >10 partners in the past 12 months.

Most recent HIV test
The young MSM were also asked about the date of their most recent HIV test. Among the 86 men who either described themselves as HIV negative or who said they did not know their HIV status, the vast majority (66%) said they had been tested in the past 12 months. However, 21% said their most recent HIV test was more than 12 months ago and 13% said they had never been tested for HIV before.

Reasons for not having a recent HIV test
Among the young MSM who said they were not tested for HIV during the past 12 months (n=31), the most common reasons were “thought to be at low risk for HIV infection” (35%) and “didn’t have time” (35%), followed by “afraid of learning they were infected with HIV” (23%), and “no particular reason” (8%).
Key Findings (cont.)

Prevalence of HIV infection
Among the 102 young MSM ages 18-24, 101 men consented to HIV testing as part of the survey. Twenty-two percent of these men had an HIV-positive test result (n=22); of these 86% were Black and 5% white. Among men with an HIV-positive result, 32% indicated they were not aware of their HIV-positive status before taking the survey (n=18).

<table>
<thead>
<tr>
<th>Men Tested for HIV (n=101)</th>
<th>Among Men with Positive HIV Test Results (n=22): Percent Already Aware</th>
</tr>
</thead>
<tbody>
<tr>
<td>HIV Negative: 76%</td>
<td>Unaware: 32%</td>
</tr>
<tr>
<td>HIV Positive: 22%</td>
<td>Aware: 68%</td>
</tr>
<tr>
<td>Indeterminate: 2%</td>
<td>Percent Already Aware: 68%</td>
</tr>
</tbody>
</table>

Stigma and discrimination
Twenty-five percent of young MSM respondents said they had experienced name-calling and insults in the past 12 months because of their attraction to men. Sixteen percent said they received poorer services than other people in restaurants, stores, other businesses or agencies and 14% said they were treated unfairly at work and/or school because of their sexual orientation. Respondents were asked if they agreed or disagreed with a list of statements. The percentage who either "agreed" or "strongly agreed" is shown below.

<table>
<thead>
<tr>
<th>Statement</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>&quot;Most people in Atlanta would discriminate against someone with HIV.&quot;</td>
<td>63%</td>
</tr>
<tr>
<td>&quot;Most people in Atlanta would support the rights of a person with HIV to live and work wherever they wanted to.&quot;</td>
<td>59%</td>
</tr>
<tr>
<td>&quot;Most people in Atlanta would not be friends with someone with HIV.&quot;</td>
<td>23%</td>
</tr>
<tr>
<td>&quot;Most people in Atlanta think that people who got HIV through sex or drug use have gotten what they deserve.&quot;</td>
<td>23%</td>
</tr>
</tbody>
</table>

Notable Racial Disparities
Sixty-six percent of Hispanic young MSM had no health insurance compared to 27% of Black males and 27% of White males. Among respondents who had an HIV-positive test result as part of their survey (n=22), 86% of Black males were not aware of their infection compared to only 14% of Hispanic males.

Hepatitis
Only 4% (n=4) of the young MSM respondents had ever been told by a health care provider that he had hepatitis. 14% had been vaccinated for Hepatitis B and 86% had been vaccinated for Hepatitis A & B in their lifetime.

Post-exposure prophylaxis (PEP)
Of young MSM, 63% (n=60) survey respondents said they were unaware of the existence of options for HIV post-exposure prophylaxis. Only 24% (n=23) of the young respondents knew where in Atlanta they could go to find out about PEP. The majority of the young men (94%, n=90) reported being willing to take anti-HIV medication after a high-risk sexual exposure event such as a condom break during anal sex with an HIV-positive partner.

Condom distribution
Approximately 72% (n=73) of the young MSM respondents said they had received free condoms in the community (not including those obtained from friends, family or sex partners) in the past 12 months. Of these men, 75% (n=55) used the free condoms received.

High-risk sexual behaviors
Forty-seven percent (n=28) of the respondents reporting receptive anal sex reported not using condoms during their last receptive anal sex and 49% of those reporting insertive anal sex (n=24) reported not using condoms during their last insertive anal sex. Thirty-four percent (n=33) of the respondents did not know the HIV status of their last sexual partner. Four percent (n=4) reported using drugs and alcohol at their last sexual encounter, while 20% (n=19) reported using only alcohol.

RECOMMENDATIONS
- Racial and ethnic disparities were noted throughout the survey. Programs for HIV testing, prevention and treatment should include components to address such health disparities and strategies tailored to the specific needs and circumstances among young MSM of color.
- There is a need to promote at least annual testing for HIV, syphilis and other sexually-transmitted infections among young MSM.
• Among all participants, opportunities should be explored for promoting awareness and access in areas surrounding PEP.

• There is a need to promote access to health care among young MSM with no health insurance, as many who had no insurance had not seen a healthcare provider within the past year. Education about available resources for health care and insurance programs should be a top priority.

• Health care providers may benefit from training in collecting and assessing HIV-related patient risk histories with a non-judgmental, open-ended approach when treating young men within the MSM community. Information on sexual orientation should be collected using the advised training, as many young MSM do not divulge their sexual orientation to their healthcare providers.

• Opportunities should be explored for strengthening and expanding the existing network of condom distribution programs in metro Atlanta.

• Because of the high percentages of “heavy drinkers” and non-injection drug use and the association between these activities and HIV-related risk behavior, programs for HIV prevention and treatment in metro Atlanta should factor into consideration the prevalence of drug use and heavy alcohol consumption among young MSM.

**Limitations**
Findings are not representative of all MSM in metro Atlanta because surveys were only conducted in bars, gyms, parks, sex clubs and other venues that met criteria for safety and had sufficient MSM attendance. Also, only sexually-active MSM were included in this analysis. Findings might not be generalizable to other cities. The number of men unaware of their HIV-positive status might be inflated because some men who knew their positive status may have described themselves as HIV-negative to the interviewer because of HIV-related stigma.
References


Acknowledgments

Special thanks to businesses that made their venues accessible to NHBS surveyors for the 2011 survey. In alphabetical order, these include: BJ Roosters • Burkhart's • Daiquiri Factory • El Sanctuary • Felix's on the Square • Flex • Friends on Ponce • Gravity Fitness • Heretic • Jason's Deli • LA Fitness Ansley Mall • Manifest4u • Mixx • Oscar's Atlanta • Piedmont Park • Rush Lounge (Chaparral)- AA Night • Starbucks' Coffee Ansley Mall • The Eagle

Brenda Fitzgerald, MD, Commissioner
J. Patrick O’Neal, MD, Director of Health Protection
Cherie L. Drenzek, DVM, MS, State Epidemiologist
Jane Kelly, MD, HIV Epidemiology Section Director
Jeffery D. Todd, MA, GHBS Team Lead
Kimi Sato, MPH, GHBS Project Coordinator
Sandi Brown, MPH, GHBS Program Consultant
Genetha Mustaafaa, MFT, GHBS Program Consultant
Shaniqua Smith, MPH, GHBS Intern

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Reported by: Jeff Todd, MA; Kimi Sato, MPH; Sandi Brown, MPH; Genetha Mustaafaa, MFT; Shaniqua Smith, MPH. For more information please contact: Jeff Todd, GHBS Team Lead, Georgia Department of Public Health, 2 Peachtree ST NW, Suite 14-464, Atlanta, GA 30303.

http://dph.georgia.gov

For resources related to HIV, syphilis and other infections including screening, treatment and supportive services please call the Georgia AIDS/STD InfoLine at 1-800-551-2728.