

# Young Men Who Have Sex With Men At Risk for HIV and STIs

Young men who have sex with men (YMSM) are at high risk for contracting HIV and other sexually transmitted infections (STI). In fact, men who have sex with men (MSM) accounted for more than half of all new infections in the United States in 2006, with young men ages 13-29 accounting for more than 1/3 of the infections among MSM.<sup>1</sup> HIV rates have risen steadily among MSM since the 1990s.

What accounts for these alarming statistics? Homophobia and ignorance about sexuality have created a culture of silence and stigma, leaving parents, educators, and service providers ill equipped to address the complex needs and social determinates that are fueling the high rates of HIV and STI transmission among YMSM. Effective HIV prevention with YMSM must address the complexities of their experiences and the socio-cultural influences that impact their decision-making.

## HIV/AIDS AND STI RATES ARE HIGH AMONG YMSM, YET MANY ARE UNAWARE THEY ARE INFECTED

- In 2006, young MSM (ages 13-29) accounted for over 10,000 of the 30,000 new infections among MSM overall.<sup>1</sup>
- From 2001 and 2006, the number of new HIV diagnoses among MSM 13-24 years old rose dramatically, whereas the number of new diagnoses among MSM in older age groups did not change appreciably.<sup>2,3</sup>
- From 2004 through 2007, most HIV/AIDS cases among adolescent and young adult males were attributed to male-to-male sexual contact.<sup>2</sup>
- A study of 21 major cities revealed that among YMSM who tested positive for HIV, 75 percent of young men ages 18-19 and 68 percent of young men ages 20-24 were unaware of their status.<sup>4</sup>
- Individuals infected with an STI are at least two to five times more likely than uninfected individuals to acquire HIV if exposed to the virus through sexual contact.<sup>5</sup> Although most STI statistics do not include questions about sexual behaviors or mode of transmission, available data from the CDC indicates that STI rates among MSM are rising.<sup>6</sup>

## YMSM OF COLOR ARE DISPROPORTIONATELY IMPACTED BY HIV

- Socioeconomic and cultural disparities, including and unemployment, decreased access to medical care, and greater likelihood of incarceration, contribute to a heightened HIV risk for youth of color as compared to white youth.<sup>7</sup>
- Studies have shown that among men who have sex with men, African American/black men are more at risk for HIV even when they have the same or fewer risk behaviors. An analysis of 53 studies found that black men were not more likely than whites to have unprotected anal sex, engage in commercial sex work, or have sex with a known HIV positive partner; and in fact reported having fewer partners than white men.<sup>8</sup>
- Seventy percent of all HIV/AIDS diagnoses among youth aged 13-19 in 2006 were among black youth, even though blacks represented only 17 percent of the population in that age group.<sup>2</sup>
- Of all YMSM, and among MSM of any age, young African American/Black men who have sex with men bear the greatest burden of new HIV infections. This group experienced 5,220 new infections in 2006 compared to 3330 among young White MSM and 2300 among young Hispanic MSM.<sup>1</sup>
- African-American/Black and Hispanic MSM have a greater likelihood of becoming infected with HIV at a younger age (13-29 years) than whites.<sup>8</sup>
- Young black MSM (12-24) experienced the highest increase in diagnoses—from 938 cases in 2001 to 1,811 cases in 2006, an increase of 93 percent.<sup>3</sup>

## HIGH RISK SEXUAL BEHAVIORS PUT MANY YMSM AT RISK

- According to the National HIV Behavioral Surveillance System, 89 percent of the young MSM reported anal intercourse with a male partner in the past year and 46 percent had unprotected anal intercourse (UAI). Seventeen percent had UAI with more than one male partner.<sup>10</sup>

THE FACTS

# The epidemic is worsening for young Black MSM: between 2001-2006, they experienced a 93 percent increase in HIV diagnoses.

- Compared to young men who had UAI with only one male partner, those who had UAI with multiple male partners were more likely to have engaged in UAI with a casual male partner\* (77 percent versus 16 percent). Thirty-one percent of young men in the study reported drug use during sex.<sup>20</sup>
- Many YMSM perceive AIDS to be a disease of older gay men, often lack peer or other social support to encourage safer sex behavior, often do not consider their peers to be at high risk, and believe they can determine the HIV status of others by their appearance.<sup>21</sup>
- Some YMSM lack adequate communication and assertiveness skills to negotiate safer sex. Some feel unable to refuse unwanted sex or feel compelled to exchange sex for money, food, or shelter.<sup>22</sup>

## SEXUAL ATTRACTION, SEXUAL BEHAVIOR, AND SEXUAL IDENTITY MAY NOT COINCIDE

According to CDC estimates in 2010, 4 percent of U.S. males engaged in same-sex behavior in the past 5 years, and 7 percent of U.S. males have ever engaged in same-sex behavior.<sup>23</sup>

Sexual identity, behavior, and desire are not always synonymous, but often conflated. Sexuality is fluid and most likely influenced by a combination of socio-cultural and biological factors.<sup>22,23</sup> In order to create effective programs, it is important to understand that not all YMSM identify as gay; they may fear the “gay” label, regard their same-sex behavior as temporary, or identify as bisexual.

## PREVENTION PROGRAMS CAN BE EFFECTIVE AMONG YMSM

Complex issues are fueling HIV transmission among YMSM—particularly for YMSM of color. In order to address those complexities, interventions must address individual behavior, and the sociocultural determinants that fuel HIV transmission.<sup>24</sup>

One intervention with gay men significantly reduced sexual risk-taking behavior in four cities by recruiting popular peers and training them to pass on behavior recommendations to friends through conversation. Surveys found that at one-year follow-up, unprotected anal intercourse in the cities decreased between 15-29 percent, condom use increased, and the number of sex partners decreased.<sup>25</sup>

One program found that YMSM were most likely to be reached effectively through outreach activities, such as dances, movie nights, picnics, gay rap groups, and volleyball.<sup>26</sup>

Peer-based interventions have been effective with YMSM in reducing unprotected anal intercourse and improving consistent use of condoms with new partners. One program showed 60 percent fewer YMSM reporting unprotected anal intercourse after sustained sexuality-related peer education.<sup>27</sup>

Like all young people, young men who have sex with men need culturally-competent, pragmatic, and inclusive prevention messages – as well as programs which address behavioral, cultural, and institutional barriers to sexual health information and services.

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## MISSION

Established in 1980 as the Center for Population Options, Advocates for Youth champions efforts to help young people make informed and responsible decisions about their reproductive and sexual health. Advocates believes it can best serve the field by boldly advocating for a more positive and realistic approach to adolescent sexual health.

## OUR VISION: THE 3RS

Advocates for Youth envisions a society that views sexuality as normal and healthy and treats young people as a valuable resource.

The core values of Rights. Respect. Responsibility.® (3Rs) animate this vision:

**RIGHTS:** Youth have the right to accurate and complete sexual health information, confidential reproductive and sexual health services, and a secure stake in the future.

**RESPECT:** Youth deserve respect. Valuing young people means involving them in the design, implementation and evaluation of programs and policies that affect their health and well-being.

**RESPONSIBILITY:** Society has the responsibility to provide young people with the tools they need to safeguard their sexual health, and young people have the responsibility to protect themselves from too-early childbearing and sexually transmitted infections (STIs), including HIV.

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