

SEXUAL TRANSMISSION BEHAVIORS, HIV STATUS DISCLOSURE, AND ILLICIT DRUG USE AMONG HIV-POSITIVE MSM

Chongyi Wei, DrPH

Graduate School of Public Health

University of Pittsburgh

**Co-authors: Thomas Guadamuz, Sin How Lim,
& Stuart Koe**

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INTRODUCTION

- Prevention with Positives (PWP) is a key component of the overall HIV prevention agenda
 - Risk reduction (sexual and other HIV-related behaviors);
 - HIV status disclosure;
 - Linkage to care and treatment; adherence to ART;
- Little is known about HIV-related risk behaviors among HIV-positive MSM in Asia
- It is critical to improve our understanding of HIV-positive MSM to:
 - Develop appropriate PWP interventions
 - Advocate support and services



OBJECTIVES

- Identify correlates of unprotected anal intercourse (UAI) and describe sexual practices within serodiscordant regular partnerships
- Describe practices of HIV status disclosure and factors influencing non-disclosure
- Describe patterns and levels of recent illicit drug use



SAMPLE

○ Eligibility


- Self-reported being HIV-positive; ≥ 18 years old; biologically male; and have had one or more male sex partners in the past 6 months.

○ Sample characteristics

- $N = 416$;
- Country: 20.2% Taiwan, 15.9% Thailand, 14.9% Singapore, 11.1% Malaysia, 10.1% China, 9.4% Japan;
- Age: 27.6% 18-29, 44.0% 30-39, 28.4% 40+;
- Employment: 81.5% employed full-time/student;
- Education: 60.4% college/graduate, 28.1% tech/some college, 11.5% \leq high school or less;
- Sexual orientation: 92.6% gay, 7.4% bi/hetero/other;
- Relationship status: 38.9% had a regular partner.



MEASURES

- UAI and its correlates
 - UAI: non-consistent condom use during URAI or UIAI with any male partners in the past 6 months;
 - Correlates: Socio-demographics, other risk-related behaviors, time of HIV diagnosis, whether or not on ART, and viral load status;
 - Sexual practices within serodiscordant regular partnerships
 - Current regular partners' HIV status: “Don't Know” (potentially serodiscordant), “Yes-Negative” (serodiscordant), “Yes-Positive” (seroconcordant).
 - Sexual agreement: “No agreement,” “No anal sex at all,” “All anal sex is with a condom,” “Anal sex can be without a condom.”
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MULTIVARIABLE CORRELATES OF UAI

	UAI in the past 6 months (74.8%)	
	%	AOR (95% CI)
Number of partners		
One	50.0%	1.0
2-5	74.6%	2.50 (1.16, 5.39)*
6-10	81.8%	3.81 (1.50, 9.67)**
More than 11	83.3%	3.83 (1.53, 9.57)**
Main way meeting partners		
Bar/dance party/gym/friend	57.6%	1.0
Internet	76.1%	2.58 (1.08, 6.15)*
Public cruising/sex party/sauna	76.7%	2.43 (0.94, 6.29)
Drug before sex		
Never	67.1%	1.0
Once or a few times	81.7%	1.76 (0.96, 3.22)
More than monthly	93.7%	4.86 (1.64, 14.40)*
Viral load		
Undetectable	72.9%	1.0
Detectable	71.6%	1.04 (0.61, 1.78)
DK/Unsure	85.7%	2.66 (1.20, 5.93)*

BEHAVIORAL CHARACTERISTICS BETWEEN MEN IN SERODISCORDANT VS. SEROCONCORDANT PARTNERSHIPS

	Seroconcordant N = 51 (31.5%)	Serodiscordant N = 111 (68.5%)	X²
Sexual agreement			33.81**
No anal sex	2 (3.9%)	3 (2.7%)	
Anal sex with condom	14 (27.5%)	63 (56.8%)	
Anal sex without condom	22 (43.1%)	7 (6.3%)	
No agreement	13 (25.5%)	38 (34.2%)	
Condom use with IAI			22.34**
Always	4 (9.3%)	39 (41.1%)	
Most of the time	4 (9.3%)	15 (15.8%)	
Sometimes	9 (20.9%)	19 (20.0%)	
Never	26 (60.5%)	22 (23.2%)	
Condom use with RAI			13.17**
Always	5 (11.6%)	34 (35.8%)	
Most of the time	7 (16.3%)	17 (17.9%)	
Sometimes	8 (18.6%)	20 (21.1%)	
Never	23 (53.5%)	24 (25.3%)	

MEASURES

- HIV status disclosure and its correlates
 - Disclosure to partners: “How many of your sex partners did you tell your HIV status before sex in the past 6 months?” (“None,” “Some,” or “All.”);
 - Correlates:
 - *Socio-demographics,
 - *Disclosure from partners,
 - *Sexual transmission behaviors (URAI & UIAI [with or without internal ejaculation], number of male partners, drug or alcohol use before sex),
 - *Time of HIV diagnosis, whether or not on ART, and viral load status;
 - *Main source of social/emotional support.



MULTIVARIABLE CORRELATES OF NON-DISCLOSURE

	Did not disclosure to any partners (67.3%)	
	%	AOR (95% CI)
Relationship status		
Regular partners	56.2%	1
Non-regular partners	74.4%	1.91 (1.03, 3.53)*
Partner disclosed		
All/some	15.8%	1
None	82.5%	37.13 (17.22, 80.07)**
Drug before sex		
Never	71.1%	1
Once or a few times	64.4%	1.36 (0.64, 2.89)
At least monthly	52.1%	0.93 (0.34, 2.55)
Every week	73.3%	6.48 (0.99, 42.50)*
Time of diagnosis		
>= 5 years ago	59.4%	1
Between 1-5 years ago	69.8%	2.23 (1.05, 4.74)*
Within the past year	70.3%	1.92 (0.79, 4.63)
Viral load		
Undetectable	64.4%	1
Detectable	65.4%	0.99 (0.51, 1.93)
DK/Unsure	77.9%	2.80 (1.00, 7.83)*

MEASURES

- Any recreational drug use in the past 6 months and frequency of use
- Specific types of drugs used:
 - Stimulants: Crystal meth, ecstasy, and cocaine;
 - Non-stimulants: Poppers, marijuana, Viagra, GHB, and Ketamine
 - Polydrug use: ≥ 2 of the above



PATTERNS AND LEVELS OF ILLICIT DRUG USE BY PARTICIPANTS' HIV STATUS

	HIV-neg/unknown n (%)	HIV-positive n (%)	χ^2
Stimulant drugs			
Crystal meth	350 (3.4%)	83 (20.2%)	294.19**
Ecstasy	738 (7.1%)	136 (33.2%)	363.46**
Cocaine	171 (1.6%)	26 (6.3%)	49.04**
Any of the above	877 (8.4%)	151 (36.8%)	372.32**
Non-stimulant drugs			
Poppers	599 (5.7%)	58 (14.2%)	49.15**
Marijuana	355 (3.4%)	39 (9.5%)	42.20**
Viagra	723 (6.9%)	137 (33.4%)	379.88**
GHB	186 (1.8%)	62 (15.1%)	314.76**
Ketamine	475 (4.6%)	102 (24.9%)	324.25**
Any of the above	1,225 (11.7%)	166 (40.4%)	292.35**
Frequency of use			
Never	8,823 (84.4%)	229 (55.9%)	284.18**
Once or a few times	1,208 (11.6%)	107 (26.1%)	
Monthly	262 (2.5%)	52 (12.7%)	
Weekly	158 (1.5%)	22 (5.4%)	
Polydrug use (≥ 2)	995 (9.5%)	157 (38.3%)	344.45**

MAIN FINDINGS

- High prevalence of UAI, serodiscordant partnerships, and unprotected sex serodiscordant partners
 - But a significant proportion also adopt protective measures
- Lack of HIV status disclosure
 - Influenced by individual, interpersonal, situational, and structural factors
- Higher level of drug use
- Not knowing one's viral load was associated with UAI and lack of disclosure



IMPLICATIONS FOR PWP

- Sexual risk reduction interventions
 - Improve communications skills around HIV status and sexual risk negotiation;
 - Different sexual practices that can reduce transmission risk;
 - Interventions on disclosure should not solely focus on HIV-positive men.
- Address co-morbidity factors such as drug use
 - Cognitive behavioral therapies incorporating appropriate cultural components.
- Early linkage to care and treatment
 - Reduce morbidity and mortality
 - Reduce sexual transmission



IMPLICATIONS FOR PWP

- Reducing and combating community-wide HIV/AIDS-related stigma and discrimination.

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Thank you!

