

MSM + HIV + Africa

Outline

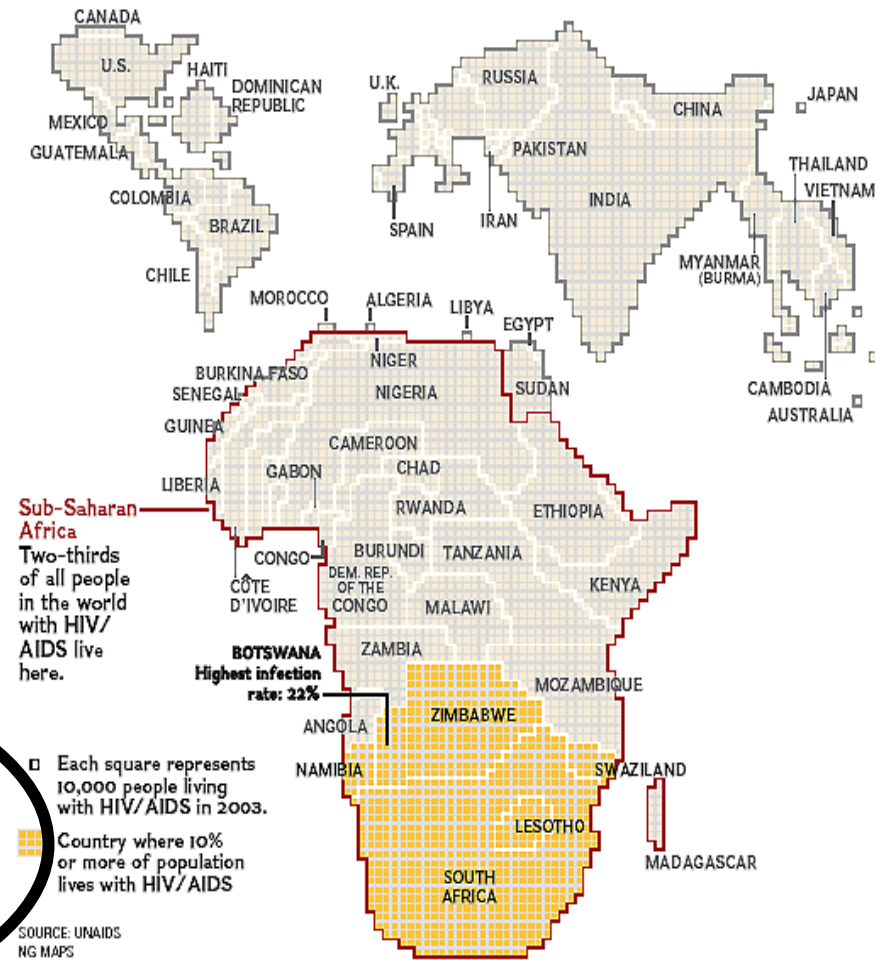
- ▶ What do we mean by MSM?
- ▶ Prevalence of HIV among MSM
- ▶ How (and why) are MSM at risk of HIV?
- ▶ Three Country Study (MSM)

Africa!

- ▶ Only continent to contain all 4 types of HIV epidemics: Low, Concentrated, Generalised and Hyper-endemic
- ▶ Diversity within and between countries
 - Culture and norms
 - Social structures
 - Behavioural expression
 - Historical development

2008 Epidemic Update

	2001	2007
People living with HIV (Africa, ESA)	29 million (19.7 million)	33 million (22 mil, 67%) (16.9 mil (51%))
New HIV infections (Africa, ESA)	3.2 million (2.2 million)	2.7 million (1.9 mil, 70%) (1.5 mil 57%)
Deaths due to AIDS (Africa, ESA)	1.7 million (1.4 million)	2 million (1.5 mil, 75%) (1.2 mil, 60%)



Africa is global epi-centre
 ➤ 2/3 of PLWHA, 3/4 of deaths

ESA is home to half global PLWA,
 and > 1/2 of global deaths and new infections

Why MSM?

- ▶ “Men who have sex with men”
 - Describes behaviour and not identity
 - Used to describe broad range of identities e.g. gay, bi-sexual, transgender (not all identify as men)
 - Men who describe themselves as heterosexual but who have sex with men
 - “Situational sex” e.g. prisons, schools, military
 - Sex workers who may define themselves as heterosexual but primarily sell sex to men

MSM are not just MSM

- ▶ People are more than how they use their genitals
- ▶ MSM is a neutral term to describe sexual behaviour but identity is also important
- ▶ Gay, transsexual and many other terms are used by MSM to describe their identity
 - Can be stigmatised but also celebrated
 - Often had/have elevated status within communities
 - Have been hard won by generations of leaders and advocates

How/why are MSM at increased risk of HIV?

Individual level risk (Saavedra et al. 2008)

- ▶ Unprotected anal intercourse (increased risk with receptive UAI)
- ▶ High frequency of male partners (>3 sexual contacts/ week)
- ▶ High number of lifetime male partners (>10)
- ▶ Untreated STI (syphilis, HSV-2)
- ▶ Drug
 - Injection drug use
 - Non injection drugs
 - Methamphetamines (increased sexual exposure)

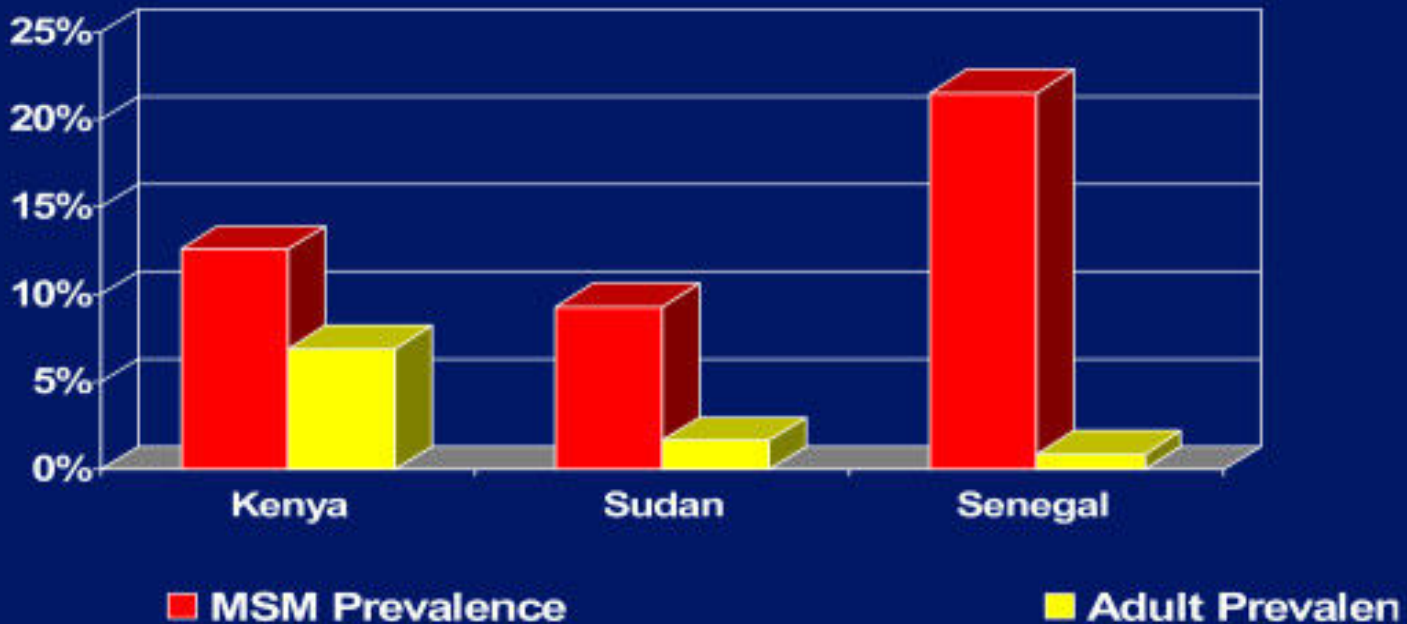
How are MSM at increased risk of HIV?

- ▶ Impact of the following on self-esteem and well-being
 - Behaviour/identity often hidden
 - Hostile socio-cultural environment
 - Denial of human rights e.g. Sex between men criminalised; no safe place to meet/socialise
 - Stigma: often leading to violence – verbal and physical
 - Discrimination: e.g. Housing; access to, and denial of, health promotional support and services
 - Health services not respondent to needs
 - Lack of targeted funding for MSM

What do we know about the prevalence of HIV among MSM?

- ▶ Higher among MSM than general population across the world, including Africa
- ▶ Higher among transgender population
- ▶ Until recently not considered important in Africa and therefore least studied and understood in African countries
- ▶ Prevalence among MSM influences prevalence in general population, including Africa

Prevalence among MSM compared to General Population?



Source: Wade et al. 2005; Girault et al. 2004; van Grievsven et al. 2005; Action for AIDS Singapore, 2006; Go et al. 2004; Pando et al. 2006; UNAIDS, 2006; Caceres et al. 2005; Strathdee et al. 2006. GENSIDA, CA State Office of AIDS; Patterson et al. AS, 2006; Strathdee et al. pers. comm; Valler et al. 2006.



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Risk of HIV infection (MSM)

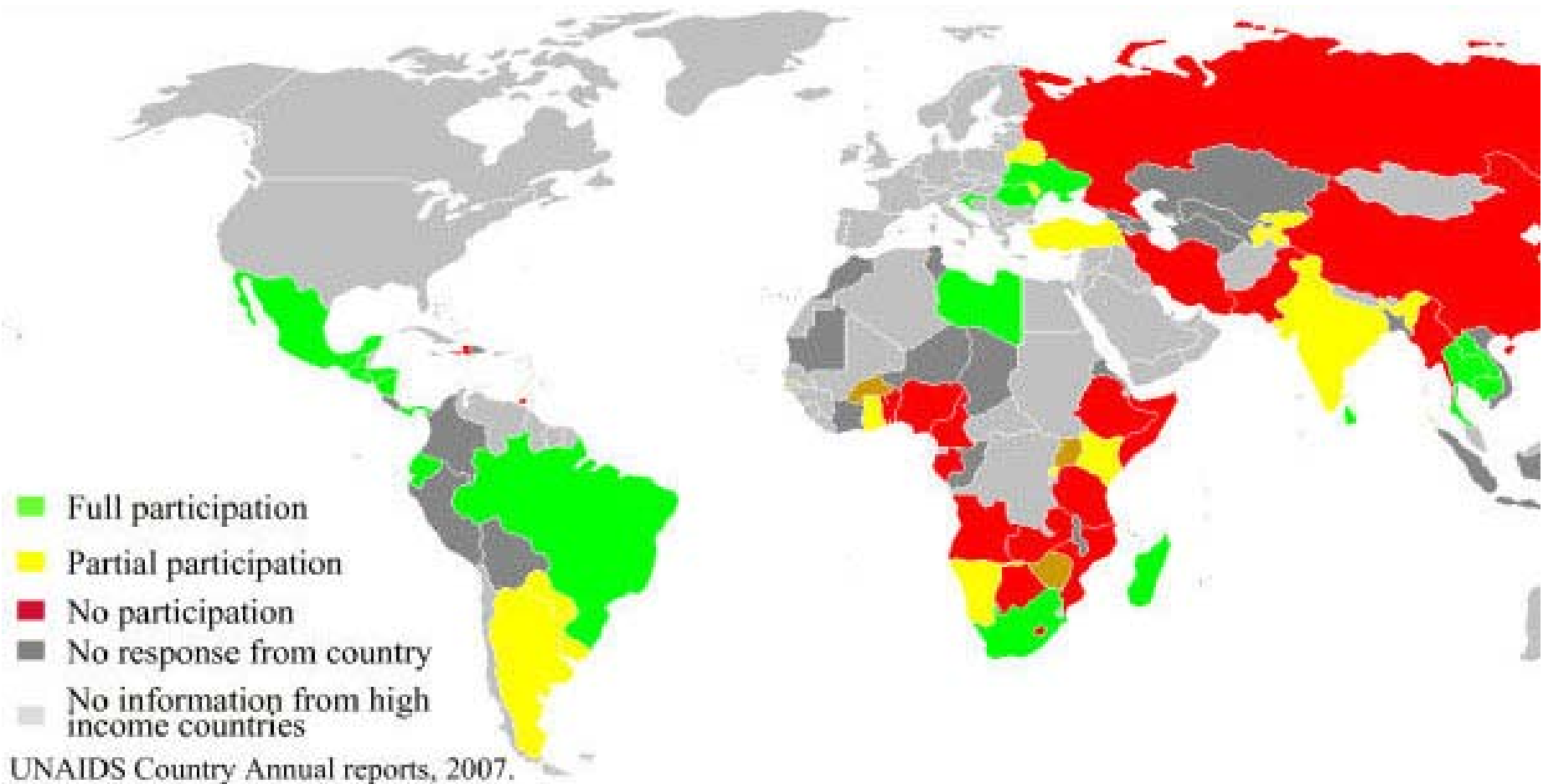
	Number of countries	Odds Ratios	Confidence Interval
Region			
Americas	15	33.3	32.3 -- 34.2
Asia	7	18.7	17.7 -- 19.7
Eastern Europe	12	1.3	1.06 -- 1.6
Africa	4	3.8	3.3 -- 4.3
Type of epidemic/prevalence level			
Very Low prevalence countries	23	58.4	56.3 -- 60.6
Low Prevalence	8	14.1	13.9 -- 14.9
Medium /High Prevalence	7	9.6	9.0 -- 10.2

Source: Baral, et al, 2007, PLOS Medicine.



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National Planning – Level of participation of the organisations representing MSM in national AIDS reviews in 38 low and middle income countries

HIV Prevalence, Risks of HIV Infection, and Human Rights among Men Who Have Sex with Men (MSM) in Malawi, Namibia, and Botswana

Baral S, Trapence G, Motimedi F, Umar E, Scholastika L,
Dausab F, Beyrer C
Plos ONE, 2009

3 Country Study: HIV Prevalence

- ▶ N = 600

- ▶ HIV Prevalence:
 - Age 18 – 23 8.3% (20/241)
 - Age 24 – 29 20% (42/210)
 - Age 30 – 49 35.7% (30/84)

 - Pooled prevalence = 17.4% (CI: 14.4 – 20.8)


3 Country Study

- ▶ Two-thirds had received MSM specific prevention information
- ▶ Oil-based lubricants – Vaseline and body/fatty creams used most often
- ▶ Condoms + water-based lubricants practised by less than 1 in 20
- ▶ One tenth reported the injection of illegal drugs

3 Country Study

- ▶ 17% in concurrent relationships with men and women
- ▶ > 50% sex with men and women in past 6 months
- ▶ 50 % of respondents across all countries used the internet to find sexual partners

3 Country Study

- ▶ Very low reporting of sexual orientation to one member of immediate or extended family or health care worker
 - ▶ Disclosure to family members significantly associated with blackmail and to a health care workers, being denied health care
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Thank You