Parsing the Variables That Raise HIV Risk Among Black MSM

February 25, 2014

Various factors, including employment status, sexually transmitted infections (STIs) and sexual behavior are linked to recent HIV infection among black men who have sex with men (MSM) when compared with other black MSM, aidsmap reports. Publishing their findings in PLOS ONE, researchers enrolled 1,553 black MSM between July 2009 and October 2010 in the HPTN 061 "Brothers" study. To be included in the study, the men must have reported having intercourse without a condom with at least one man in the six months before entering the study.

In the United States, no demographic has a higher rate of HIV infection than black MSM.

The men in the study received HIV and STI testing and provided information about their age, employment status, income, sexual behavior and drug use.

The group had a median age of 40 years old. Thirty percent of the men identified as gay and 29 percent as bisexual. Three percent identified as transgender.

Sixteen percent of the men (262) had already been diagnosed with HIV before entering the study. Eight percent (96) were diagnosed with the virus during the study and thus considered newly diagnosed.

Compared to the HIV-negative men, the newly diagnosed participants were less likely to be employed (21 percent vs. 35 percent) and to be college educated (35 vs. 46 percent). The newly diagnosed men were more likely to have rectal gonorrhea (5 vs. 3 percent), rectal chlamydia (15 vs. 6 percent) and more likely to have at least one STI in general (31 vs. 14 percent) than the HIV-negative participants.

Taking into account various factors when comparing the newly diagnosed to the previously diagnosed men, the researchers found that the newly diagnosed participants were 2.9-times more likely to be younger, 2.6-times more likely to be unemployed, 2.3-times as likely to have reported receptive intercourse without a condom and 3.8-times as likely to have had at least one HIV-positive partner.

The researchers concluded that "[c]ulturally tailored programs that address disenfranchisement, increase engagement in care, screen for STIs, in conjunction with safer sex prevention

interventions, may help to decrease further transmission in this heavily affected community.”

To read the aidsmap story, click here.

To read the study, click here.

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http://beta.docker.poz.com/article/black-MSM-risk-25211-1193