

Role of immigration in HIV infection among Asian immigrants living with HIV in New York City

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Background on API Population

- In the US, the Asian & Pacific Islander (API) population continues to increase rapidly.
- The API population in NYC grew by 71% between 1990 and 2000.
- 78% of the API population in NYC is foreign born.

Asia/Pacific

- The Asia/Pacific region is home to 60% of the world's population and 20% of persons living with HIV/AIDS.
- Prevalence rates are relatively low compared to Africa, but number of persons living with HIV/AIDS is high.
 - 8.3 million total as of end of 2005
 - 2 million women
 - 1.1 million new infections in 2005

New York City, API

- Approximately 1,147 cumulative API AIDS cases through 2005.
- Transmission:
 - Among men: almost 60% MSM; 51% overall.
 - Women: 11% of total diagnoses.
 - Injection Drug Use: 11% overall.
 - Unknown: 26% Male; 20% Female

New York City, API

- At least 66% of cumulative API cases are known to be among those born outside of the U.S.
- 16% are of unknown country of birth.
- Sending countries accounting for most cases:
 - China
 - Philippines
 - India

Recent Trends

- While HIV/AIDS prevalence among APIs in the US remains fairly low, there are signs of rapid increase.
- Between 2001 and 2004, APIs had the only statistically significant percentage increase in HIV/AIDS diagnosis rates in the US.
- In the same period, NYCDOH reported that in NYC “the number of new HIV diagnoses each year has declined in all racial/ethnic groups except Asian/Pacific Islander.”

Methods

- January 2005 through July 2005
- 89 quantitative surveys in partnership with Columbia/CHAIN study
- 35 qualitative in-depth interviews
- This analysis relies on 27 of the 35 qualitative interviews

Methods

- Most participants recruited through client populations of the Asian and Pacific Islander Coalition on HIV/AIDS and Chinese American Planning Council
- Additional recruitment through GMHC introduced more English-speaking participants

Immigration and HIV Infection

- Undocumented Chinese heterosexual male immigrants: during the migration process
- Gay men: soon after coming to the US
- Female participants infected by male partners: the dynamics of immigration may have been a factor in at least one case

Undocumented Immigration

- 6 Chinese heterosexual men:
 - 5 out of 6 undocumented
 - 4 out of 5 – believed infected during migration process
 - 5th person saw 10 to 20 prostitutes in Thailand, but said that he used condoms 100% of the time because they wouldn't have sex with him otherwise

Undocumented Immigration

- Undocumented Chinese immigrants spending up to three years in Southeast Asia (Thailand and Cambodia) in transit to the US:
 - R: ...I was very bored and felt smothered at that time. It was one and a half years there; my friends asked me to go with them...
 - I: Did you use condoms?
 - R: Sometimes I did, sometimes I didn't.
 - I: Did you visit sex workers elsewhere besides Cambodia? How about in Thailand?
 - R: I did not visit sex workers in Thailand. I did that only in Cambodia.

Undocumented Immigration

- "I was in Thailand in 1990 for half a year. I had hired prostitutes. I had never done this at home, because my wife and children were home. I had contact with sex workers in Thailand, so I surmised that I was infected in Thailand. I would not have gotten it anywhere else."

Gay/bisexual men in the US

- 12 gay men / 3 bisexual men:
 - Varying ethnicities
 - 7 cases: immigration dynamic clearly a factor (sexual freedom issue)
 - 1 case: asylum issue

Gay/bisexual men in the US

- Coming to the US for sexual freedom:
 - "You know, because it was very easy – ... a lot of bars on the street, maybe next street, maybe over there, a theater, a bath house, a park, any sex place...too many kind[s of]...places – you know, [they] influence you."

Gay/bisexual men in the US

- "... so much different gay life in New York [is compared to Indonesia]. [In Indonesia] you feel like you don't tell anybody [you're] gay....When I got here really I'm like,... okay this is gay life, okay, come on let's go try this, try that. Maybe I don't realize that if you play around...[I didn't] feel like think[ing] about that. You feel like, oh this [is] New York . . . like that. So that [was what] I was thinking about...the first year.

Women re-uniting with male partners

- Women infected by male partners after joining them in the US after period of separation.
- One case:
 - Indian woman separated from husband for two years while he traveled in South Africa and then came to the US.
 - Joined him in 1990 and tested positive in 1992.
 - Unsure of how he was infected; believes he may have been infected during a blood transfusion after an accident in India.

Conclusion

- API immigrants may be at increased risk for HIV infection during the immigration process and immediately following.
- There may be strategic moments for providing education and support during the migration process that can reduce infection rates.
- Support and education for new API immigrants may be key to initiating early treatment for API immigrants living with HIV/AIDS and reducing risk for uninfected new immigrants and for partners of HIV-positive new immigrants.