Rising HIV/AIDS in Asian Pacific Islanders

The relatively low prevalence of HIV/AIDS among Asian Pacific Islanders (APIs) in the United States, accounting for only 1% of the total cases of AIDS, has resulted in the neglect of the API community in the political and research arenas. However, studies have demonstrated that AIDS incidence in APIs has outpaced those of other minority groups in recent years. Also, a steady rise in HIV infection among APIs is anticipated given the escalating HIV prevalence in Asia, with an estimated 8.3 million cases of HIV infection, and the influx of immigrants from these regions to New York City (Sy, et al, 1998).

Community Mapping Study

In early 2006, APICHA carried out a community mapping study designed to improve the understanding of the health needs and barriers facing Asian and Pacific Islanders in New York City at risk for HIV/AIDS. The study sought to assess sexual health knowledge, attitudes, and behaviors, health-seeking behaviors, and awareness of APICHA in New York City in an effort to characterize HIV/AIDS risk and ways APICHA can link high-risk groups to its health services more effectively.

The study targeted men who have sex with men (MSM) and women from five Asian/Pacific Islander language groups in New York City: Chinese, Hindi, Japanese, Korean and Vietnamese. Separate questionnaires collecting sexual knowledge, attitudes, and behaviors, health-seeking behaviors, awareness of APICHA, and demographic data were developed for MSM and women. Both sets of questionnaires were bilingual, featuring English and parallel translations of each of the five target languages. At the end of the three-week period, interviewers had recruited 157 MSM and 165 women to complete questionnaires.

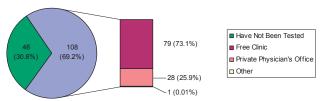
Key Findings

The data collected differed markedly between MSM and women on sexual knowledge and behavior.

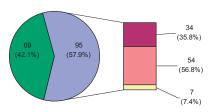
Among Men Who Have Sex with Men (MSM):

- MSM typically reported a higher number of sexual partners; most frequently, they reported having had 4-10 sexual partners in the past 12 months (31.8%), followed by 10 or more partners (24.2%).
- 14.6% of MSM reported also having had sex with women.
- 68.2% of MSM reported that their partner always wore a condom during sex; only 52.2% of the men reported that they always wore condoms themselves.
- 68.8% of MSM reported ever having been tested for HIV or other sexually transmitted infections (STIs). Of these men, a majority had been tested in a free clinic (73.1%), while 25.9% were tested in a private physician's office.

Reported Testing Sites among MSM

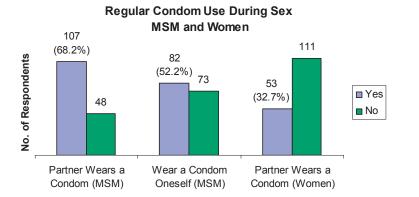


Reported Testing Sites among Women



Among Women:

- 70.3% of women reported having had only one sexual partner in the last 12 months.
- Two-thirds of the women responded that their partners did not always wear condoms during sex, and less than 10% had ever used a female condom.
- 57.9% of women reported having ever been tested for STIs or HIV; of these, 56.8% were tested at a private physician's office and 35.8% were tested at a free clinic.



Risk Factors among Asian and Pacific Islanders

Further analysis of the data revealed factors, often counterintuitive, within the study population that were related to higher rates of unprotected sex and lower rates of HIV testing. We report on selected findings below.

Unprotected Sex among Men Who Have Sex with Men:

- Number of Partners: Rates of MSM wearing condoms themselves generally decreased as the number of reported partners increased. While only 52.2% of MSM reported always wearing a condom during sex overall, only 34.2% of those with ten or more partners reported always wearing a condom.
- Testing for HIV or other STIs: Surprisingly, a greater proportion of men wore condoms every time during sex among those who had not tested for HIV or other STIs than those who had been tested. 66.7% of the untested reported wearing a condom every time during sex, while only 46.3% of the tested reported the same. Men who had been tested for HIV or other STIs were 2.73 times more likely to engage in sex without wearing a condom.

Testing for HIV or other STIs among Men Who Have Sex with Men

 Health Insurance: MSM who had health insurance were 3.77 times as likely to have been tested for HIV or other STIs; however, most men reported that they received testing in free clinics.

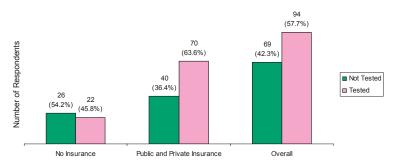
Unprotected Sex among Women

 Income: Unprotected sex was pervasive among women with only 32.6% reporting regular condom use among their male partners; however, a surprisingly high percentage of women with incomes between \$20,001-\$30,000 (52.6%) reported regular condom use which may also reflect condom use as a low-cost contraceptive method.

Testing for HIV or other STIs among Women

 Health Insurance: As with MSM, testing was higher among women with health insurance; 63.6% of the women with health insurance had been tested compared to 45.8% of women without health insurance.

Testing for HIV and other STIs among Women by Insurance Status



Conclusion and Recommendations

The data provide valuable insights to understanding health behaviors and HIV risk in the API community. Also, it provides a basis for developing more effective HIV-prevention programs by defining ways that APICHA can better position itself to serve APIs in New York City. We found high rates of high-risk sexual behaviors and low rates of testing among API MSM and women. A high level of knowledge about HIV/AIDS and methods of HIV/AIDS prevention among MSM and women did not translate into safer sex practices for either group.

- Because a large proportion of APIs in New York City are immigrants—nearly 3/4 of our sample are foreign-born—HIV prevention programs must address economic difficulties and the difficulties in accessing healthcare that face this community. Our study found that HIV testing was higher among insured individuals, implying an elevated level of risk among uninsured individuals. Thus, the uninsured are a good target for HIV prevention efforts.
- One challenge of developing culturally sensitive programs for the API community is the diversity even between ethnic groups. However, a value prominent in most of these groups is the centrality of family. Educational campaigns construing safe sex behaviors as a family value (e.g., promoting condom use as "protecting" one's family) may be more resonant and effective.
- Additionally, our data shows a disturbing correlation among MSM who have been tested for HIV or other STIs and higher rates of unprotected sex. This may suggest the need for more thorough post-test counseling and follow-up prevention efforts.
- Knowledge of APICHA among API women was much lower than among API MSM. This may reflect a less cohesive social network among API women, the notion of APICHA as a clinic primarily serving the gay community, or the preference among women to receive healthcare from private physicians. Targeting educational campaigns toward women about universality of HIV risk and promoting APICHA's services to all individuals may help address this gap.
- Many of women's current health behaviors, particularly being tested for HIV/AIDS, seem incidental to general health activities.
 Thus, building bridges between APICHA, other free clinics, and private healthcare providers where many women currently seek care. This may be a means to reach this underserved community.

These findings help to build a platform on which APICHA and other groups can build more effective HIV prevention programs. As the nature of the HIV/AIDS epidemic and the populations afflicted change, so must the understanding of risk factors and health behaviors to build effective prevention strategies.

For more information about this study, please contact APICHA.

HIV/AIDS-related Knowledge, Attitudes and Behaviors Among Asian & Pacific Islander Men Who Have Sex with Men (MSM) and Women in New York City

A 2006 Survey



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