

**"I Don't Believe Testing is Everything:"
Beliefs, Attitudes, and Experiences with
PrEP, HIV Status Disclosure, and other HIV-
related Issues among MSM in New York City**

Jose Nanin, EdD, MCHES, CSE
Kingsborough Community College, City University of New York

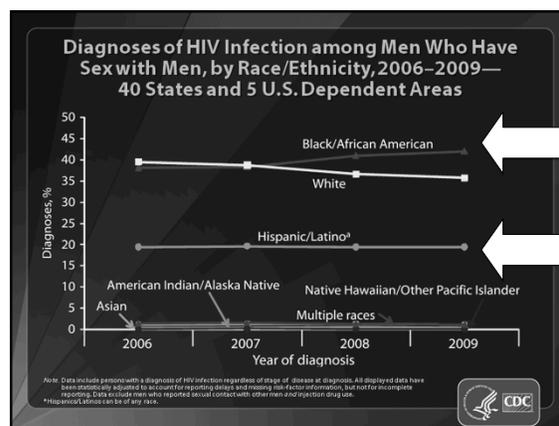
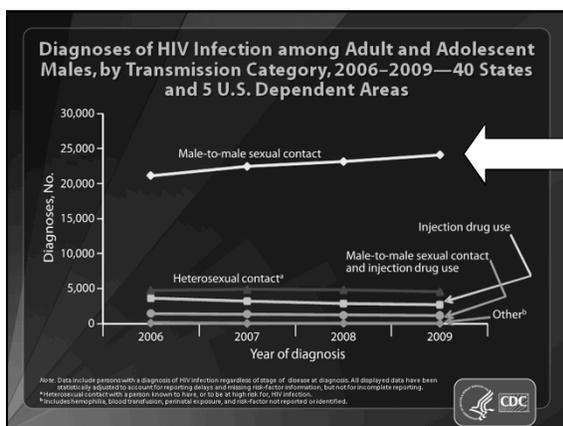
Mary Ann Chiasson, DrPH, Public Health Solutions
Francine Shuchat Shaw, PhD, New York University
Dena Simmons, EdD candidate, Teachers College, Columbia University



Presenter Disclosures

Jose Nanin, EdD, MCHES, CSE

“No personal financial relationships to disclose”



Background

- HIV continues to disproportionately affect men who have sex with men (MSM), especially Black and Latino MSM (CDC, 2011).



METHOD



- “Ask Me, Tell Me/Pregúntame, Dime”
- Funded by NYC AIDS Fund in 2010
- Three NYC focus groups in Summer 2010
- Total N = 26 MSM
- Assess beliefs, attitudes, & experiences with PrEP and nPEP, HIV status disclosure, and other issues
- Responses used to guide script development for video

Definitions

- **Pre-exposure prophylaxis (PrEP)** - part of comprehensive HIV prevention in which high risk HIV- people take daily antiretroviral medication to try to lower chances of infection (CDC, 2010).

Definitions

- **Post-exposure prophylaxis (PEP)** - taking anti-HIV drugs as soon as possible (> 72 hours) after being exposed to HIV to try to reduce the chance of infection (HHS, 2010).
 - **nPEP** - potentially exposed to HIV outside the health care-based workplace (e.g., condom breakage, sexual assault, etc.)

Sample Demographics (N = 26)

- 79% African-American- or Latino-identified
 - 18% identified as other.
- Mean age = 41
 - Range = 25-61
- Gay (77%)
 - other (12%), bisexual (10%), and straight (1%).
- 77% HIV-positive
 - 23% HIV-negative or unknown status.

Measures

- Structured group interview guide
- Original items
 - emerging prevention efforts (e.g., PrEP and nPEP)
 - HIV disclosure
 - other relevant issues

Interview Guide Items

1. *Over the past few years, a lot of news has come out highlighting the very high HIV infection rates among gay and bisexual men. What are your thoughts about this? What do you think are some reasons for this?*
2. *How important is it for gay and bisexual men to get tested for HIV? Please explain why. How often should that be?*
3. *What are your ideas about HIV risk? What behaviors can put you most at risk? Do you believe everyone looks at HIV risk in the same way? Why or why not?*
4. *Talk to us about the ways in which you prevent HIV transmission.*
5. *What have you heard about ways to prevent HIV that involve taking HIV medications before and/or after risky sex [i.e., Pre-exposure Prophylaxis (PrEP) and/or post-exposure prophylaxis (PEP)]? What do you think about this?*
6. *What messages about HIV disclosure should be spread in your neighborhoods and in the places where you meet and have fun?*
7. *What else would you like to say about any of these topics?*

Interview Guide Items

1. *Over the past few years, a lot of news has come out highlighting the very high HIV infection rates among gay and bisexual men. What are your thoughts about this? What do you think are some reasons for this?*
2. *How important is it for gay and bisexual men to get tested for HIV? Please explain why. How often should that be?*
3. *What are your ideas about HIV risk? What behaviors can put you most at risk? Do you believe everyone looks at HIV risk in the same way? Why or why not?*
4. **Talk to us about the ways in which you prevent HIV transmission.**
5. *What have you heard about ways to prevent HIV that involve taking HIV medications before and/or after risky sex [i.e., Pre-exposure Prophylaxis (PrEP) and/or post-exposure prophylaxis (PEP)]? What do you think about this?*
6. *What messages about HIV disclosure should be spread in your neighborhoods and in the places where you meet and have fun?*
7. *What else would you like to say about any of these topics?*

ANALYSIS

- Only first pass was conducted so far
 - Knowledge and attitudes about...
 - PrEP
 - PEP
 - prevention methods
 - Disclosing HIV status
- *More detailed qualitative analysis based on structured coding and grounded theory will be conducted for publication.*

RESULTS (N = 26)

- 50% (n = 13) reported being aware of PrEP.
 - ~25% of those aware of PrEP (n = 3) ambivalent about it and believed that it may facilitate risky behaviors among MSM.
- *“I have heard about this... because I am in the field.... just giving more people options in being risky and having...unprotected sex. I don't know if that's a good or bad thing...I'm really kind of in between...” (age 46, gay, AA, HIV+)*

- *“...tell them they can do that [i.e., do PrEP] and they won't get HIV and all of a sudden you see syphilis going through the roof. I don't necessarily agree with changing people's behaviors either way...whether or not I had the [PrEP]... If I use protection, I'm gonna use protection. If I don't use protection, it's the same thing with the harm reduction model. If you give people safe needles, is it gonna make more people use intravenous drugs? No...at least you're giving people who are shooting up an option... there's not enough education about the [PrEP].” (age 30, gay, AA, HIV-)*

RESULTS (N = 26)

- > 50% (n=14) aware of nPEP also and agreed that it is a viable prevention option along with PrEP.
 - *“...everybody would rather have sex without condoms. Why...don't they give out pills?!...Why don't we give out pills instead of condoms?[P]eople are having sex every day so they'll just pop a pill. I wish, when I did have unprotected sex, when I thought that, oh s**t, I may be in danger, if I knew that, okay, if I went to my doctor and said hi... can you give me a pill real quick?” (age 31, gay, African-American [AA], HIV+)*

- *“I mean, it [PrEP and nPEP] should be for everybody. HIV exists ... You know, having just like birth control pills... having HIV pills, accessible for anybody who's sexually active. Especially when you're young, you know.” (29, gay, AA, HIV+)*

RESULTS (N = 26)

- Lastly, > 80% (n=21) agreed that HIV disclosure is important.
- But some others did not...
 - “For me personally, I don't feel that I need to disclose [I'm HIV+] to every person... 'Cause every person that I meet is not someone that I'm going to ultimately have sex with...” (age 46, gay, AA, HIV+)*

RESULTS (N = 26)

- **100%** agreed services in their communities need to be improved.
- *One respondent contextualized the direction HIV prevention messages were going:*

"[A]fter awhile it gets old. It sounds [like] I heard it yesterday. You say it with another voice, you get an entertainer to say it, it's the same message. It's not reaching anybody. I think [like] when I fly, the stewardess... her job... who listens to her? She or he has to come to you, if you're in the emergency row, and do [that] schpeel. But most people are asleep or... completely tune her out. We've heard that before. I think that's part of the numbing, the over-saturation." (age 56, gay, Latino/AA, HIV-)

- **NOTE:** This unique perspective was integrated into the video's script.

Discussion

- High awareness of PrEP and nPEP... *but not complete agreement on its feasibility.*
- Most men are frustrated with prevention efforts... some have difficulty with disclosure, and are ambivalent about the future of HIV prevention.
- PrEP, nPEP, and discussion of disclosure need contextualizing with other culturally-appropriate messages.

Limitations

- Small sample size, volunteers
- Skewed HIV+ and older (over age 45)
- Only conducted in Manhattan and participants are mostly from NYC
- Only first pass of data analysis

Conclusion

- Addresses National HIV/AIDS Strategy priorities
- Results helpful for enhancing current HIV primary and secondary prevention efforts for urban MSM, especially for assessing how PrEP and nPEP will work as HIV prevention for Black and Latino MSM.

"Ask Me Tell Me" video

www.hivbigdeal.org



Contact Information

Jose Nanin, EdD, MCHES
Kingsborough Community College, CUNY
jnanin@kingsborough.edu