RISE Proud
Combating HIV Among Black Gay and Bisexual Men
North American Housing and HIV/AIDS Research Summit
Montreal, Quebec
September 25, 2013
“When new infections among young black gay men increase by nearly 50 percent in 3 years, we need to do more to show them that their lives matter.”

-- President Barack Obama, World AIDS Day, 2011
HIV Disparities among Black MSM vs. White MSM, Black Community, and U.S. Population

(Millett et al., The Lancet, 2012; Slide courtesy G Millett)
Young Black MSM and HIV

- MSM over 3/4 of HIV infections among youth
- In 2010, greatest number of new HIV infections (4,800) among MSM in young black/African American MSM aged 13–24.
  - 45% of new HIV infections among black MSM
  - 55% of new HIV infections among young MSM overall

<table>
<thead>
<tr>
<th>Demographic</th>
<th>General HIV incidence</th>
<th>HIV incidence (youth)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Black women (KwaZulu-Natal, South Africa)</td>
<td>4.7%</td>
<td>6.9%</td>
</tr>
<tr>
<td>Black gay/bisexual men (6 US cities)</td>
<td>3.8%</td>
<td>5.9%</td>
</tr>
</tbody>
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(Sources: Koblin, 2012; Abdool, 2012)

Risk factors for young people comparable among young men and women:
- Older sex partners
- Forced sex/sexual abuse
- Younger age of sex debut
- Undiagnosed HIV

(Slide courtesy G Millett)
Disparities persist between black and other MSM throughout treatment cascade (24 comparative studies)

Undiagnosed HIV OR, 6.38 (4.33-9.39)

HIV Detection

Diagnosed HIV+ OR, 3.00 (2.06-4.40)

ART utilization/access OR, 0.56 (0.41-0.76)

>200 CD4 cells/mm³ before ART initiation OR, 0.50 (0.33-0.76)

Healthcare visits OR, 0.61 (0.42-0.90)

HIV suppression OR, 0.51 (0.31-0.83)

Health insurance OR, 0.47 (0.29-0.77)

Lower income (<$20k) OR, 3.42 (1.94-6.01)

Viral Suppression

“To eliminate difference in viral suppression, an estimated additional 38,920 black MSM and 17,043 Latino MSM would need to be on treatment to raise viral suppression to levels on par with white MSM aware of their infection (56%).” (Hall, 2013)
Estimated probability of being exposed to HIV by at least 1 partner

Black MSM

White MSM

(Kelley, 2013; Slide courtesy G Millett)
**A lot** has been learned in a short period of time

<table>
<thead>
<tr>
<th></th>
<th>2006</th>
<th>2013</th>
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<tbody>
<tr>
<td>Sexual risk (generally not driving epidemic, except serosorting)</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Drug use (not driving epidemic)</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>STIs</td>
<td>X</td>
<td>X</td>
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<tr>
<td>Undiagnosed HIV</td>
<td>?</td>
<td>X</td>
</tr>
<tr>
<td>Disparities across tx cascade</td>
<td>?</td>
<td>X</td>
</tr>
<tr>
<td>Circumcision (not associated with HIV)</td>
<td>?</td>
<td>X</td>
</tr>
<tr>
<td>Partner characteristics (not concurrency)</td>
<td>?</td>
<td>X</td>
</tr>
<tr>
<td>Sexual networks (background prevalence, assortative mixing)</td>
<td>?</td>
<td>X</td>
</tr>
<tr>
<td>Social determinants and HIV infection (income, education, social support)</td>
<td>?</td>
<td>X</td>
</tr>
</tbody>
</table>

(Slide courtesy G Millett)
Syndemics are a set of mutually reinforcing epidemics that together lower the overall health profile of a population more than each epidemic by itself might be expected to do.
Structural-Level Experiences & Resiliency, U.S. Black MSM vs. Other MSM

HIV Prevalence Summary Odds Ratio

- < HS Education
- Lower Income
- Ever Incarcerated
- Unemployed
- Any Structural Barrier (Total)
- Any Resilient Behavior

(Millett, 2012; slide courtesy G Millett)
Foundational Research
HPTN 061:
The BROTHERS Study
The first and largest prospective study of BMSM conducted in the U.S.

Enrolled a total of 1,553 who were male at birth in six U.S. cities and had at least one instance of UAI in the previous 6 months

First study to clearly define HIV incidence rate for BMSM in the U.S.
Study Population (n=1553)

- 34% were 30 years or younger
- 46% had some college education or more
- 31% worked full or part time
- 60% had annual income less than $20,000
- 2% transgender
- 30% identified as gay/homosexual
Household Status (n=1553)

- 33% Living alone
- 10% Living with a partner or spouse
- 23% Living with a room mate(s)
- 20% Living with relatives
- 10% Do not have a stable home
  - New York (Harlem)
  - Georgia
  - Boston
Study Findings

• 19% of participants with previously undiagnosed HIV infection had CD4 < 200 when diagnosed (late HIV diagnosis)

• In the largest prospective cohort of black MSM in the US, HIV incidence was high (2.8%; 95% CI: 1.8, 4.1). Higher among:
  – Young men, 18-30 years- 5.9% (95% CI: 3.6, 9.1)
  – Those reporting unprotected receptive anal intercourse- 4.9% (95% CI: 3.0, 7.4)
  – Gay/homosexual self-identified 4.3% (95% CI: 2.6, 6.7) and those with male partners only 3.8% (95% CI: 2.3, 5.9)
  – Those with STIs diagnosed at baseline- 6.0% (95% CI: 2.4, 12.5)
Mass Incarceration, Housing Instability and HIV/AIDS Findings

With the largest prison and jail population of any country in the world, the U.S. now accounts for just 5% of the world’s population but 25% of all incarcerated persons. (Pew, 2011).

Report from the National Minority AIDS Council and Housing Works; prepared by Ginny Shubert
Mass Incarceration, Housing Instability and HIV/AIDS Findings

• Disparities in HIV and incarceration overlap for individuals and communities of color
  – Among HIV-infected Black men, an estimated 22% - 28% pass through a correctional facility each year. (Spaulding, et al., 2009).
  – At the end of 2010, state and federal prison authorities reported that 1.4% of male inmates were known to have been diagnosed with HIV – rates that are 3 to 5 times higher than the general population
  – Black Americans, single men between the ages of 31 and 50, and people with disabilities were all at disproportionate risk of homelessness, compared to their representation in either the U.S. or the poverty population.
  – In New York State 5.2% of male prison inmates had an HIV diagnosis at the end of 2010. (Maruschak, 2012).
Mass Incarceration, Housing Instability and HIV/AIDS Findings

• Incarceration is linked to lack of stable housing among people living with HIV/AIDS
  – Multisite study of HIV-positive men entering jail found that 43% of those newly-diagnosed with HIV and 44% of those previously diagnosed were homeless at the time they entered jail. (de Vous, et al., 2012)
  – Connecticut study found that 25.9% of PLHIV being discharged were homeless and an additional 54.4% were “near homeless”. (Saber-Tehrani, 2012).
Mass Incarceration, Housing Instability and HIV/AIDS Findings

• Mass incarceration undermines the social stability and health of communities
  – At the end of 2010, 1 in 12 working-age Black was in prison or jail. (Pew, 2011).
  – Incarceration rates are highest for young Black men who are poorly educated and living in poverty – 7.3% of all Black males ages 20 to 34 were incarcerated with a sentence of more than one year, and those with HS diploma or GED (37%) represented more than those who were employed (26%). (Pew, 2010).
Housing Status, Incarceration and HIV Health Outcomes

- For persons with HIV, release from incarceration is strongly associated with interruption in care, decreased access to HAART, poor health outcomes, and high rates of behaviors that can transmit HIV. (Meyer, et al., 2011; Rich, et al., 2011; Beckwith, et al. 2010)
- Many persons repeatedly cycle through jails, shelters, and other institutional settings as a result of lack of employment or income, housing instability, drug and alcohol dependence, mental illness and chronic health issues including HIV/AIDS (Metraux & Culhane, 2010; Solomon, et al., 2008).
- Federally funded reentry initiative found that re-incarceration happened at least once for 48% of participants.
  - Evaluation showed
    - 97% with high rates of substance use issues
    - 34% with mental health issues requiring medication
    - 86% reported living in unstable housing at baseline
RISE Proud: Combating HIV Vulnerability Among Black Gay and Bisexual Men

The National Minority AIDS Council (NMAC) is launching its Ford-funded program titled RISE: Resources to Improve, Strengthen, and Educate in an effort to lessen and ultimately end the HIV/AIDS epidemic among Black gay men.

• Action plans
  – Eight community engagement sessions to enlist regional support for and advance the recommendations of the RISE Proud
  – Two National Policy Summits focused on minority and GLBT policy
  – Two National Leadership Sessions for gay men of color at the United States Conference on AIDS
  – An interactive website
  – Presentations at four national conferences focused on GLBT, minority, and HIV/AIDS priorities.
RISE Proud: Combating HIV Vulnerability Among Black Gay and Bisexual Men

• LGBT youth are overrepresented in the homeless population, estimated in the range of 11 to 35 percent nationally. (National Coalition for the Homeless, 2009).

• Newly homeless LGBT youth have been shown to have greater sexual risk behaviors, including high numbers of sexual partners, decreased condom use, and greater rates of participation in transactional sex compared to their stably-housed counterparts (Solorio et al, 2008).

• With viral suppression reported at 21 percent among Blacks living with HIV in the U.S. and over 50 percent utilization at emergency shelters, the issue of housing especially salient for Black gay men already living with the disease (CDC, July 2012).
Unmet HIV Service Needs Among Black Men Who Have Sex with Men in the United States

David R. Holtgrave · J. Janet Kim · Chris Adkins · Cathy Maulsby · Kali D. Lindsey · Kim M. Johnson · Daniel C. Montoya · Robin T. Kelley
Summary: To estimate the investment required to serve unmet HIV service needs among Black MSM to meet the goals of the U.S. National HIV/AIDS Strategy

• Housing:
  – must be provided to 3,708 black MSM who are homeless or unstably housed (the NHAS goal of 21,800 persons to be housed times 17.0 %, the fraction of all PLWH who are black MSM).
  – $44.6 million in new or redirected resources is the level of investment needed (3,708 times $12,039)
Recommendations for all PLHIV

• Make appropriate, affordable housing available to all low-income people living with HIV/AIDS
• Remove post-incarceration barriers to subsistence income and health insurance
• Improve pre-release discharge planning for inmate with HIV/AIDS to meet housing and other essential needs
• Evaluate the effectiveness of housing-based interventions for formerly incarcerated people with HIV/AIDS
Recommendations to Address Housing Among Black Gay Men

• More research is needed to clearly document the relationship between housing instability and HIV acquisition and transmission (especially among BMSM and YBMSM)
• Increase service and shelter availability for victims of intimate partner violence
• Make appropriate, affordable housing available to all low-income people living with HIV/AIDS
• Remove post-incarceration barriers to subsistence income and health insurance
• Improve pre-release discharge planning for inmate with HIV/AIDS to meet housing and other essential needs
• Evaluate the effectiveness of housing-based interventions for formerly incarcerated people with HIV/AIDS
Recommendations to Address Housing Among Black Gay Men

- More research is needed to clearly document the relationship between housing instability and HIV acquisition and transmission (especially among BMSM and YBMSM)
- Legislation must be enacted to support the victims of intimate partner violence with shelter, food maintenance, and available counseling
- Safe and stable housing options must be made available to transitionally housed gay men to increase resilience and decrease behaviors that may transmit HIV
- Homeless shelters must be supported to create safe spaces for young Black gay men to discourage transactional sex work
Thank You!

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