

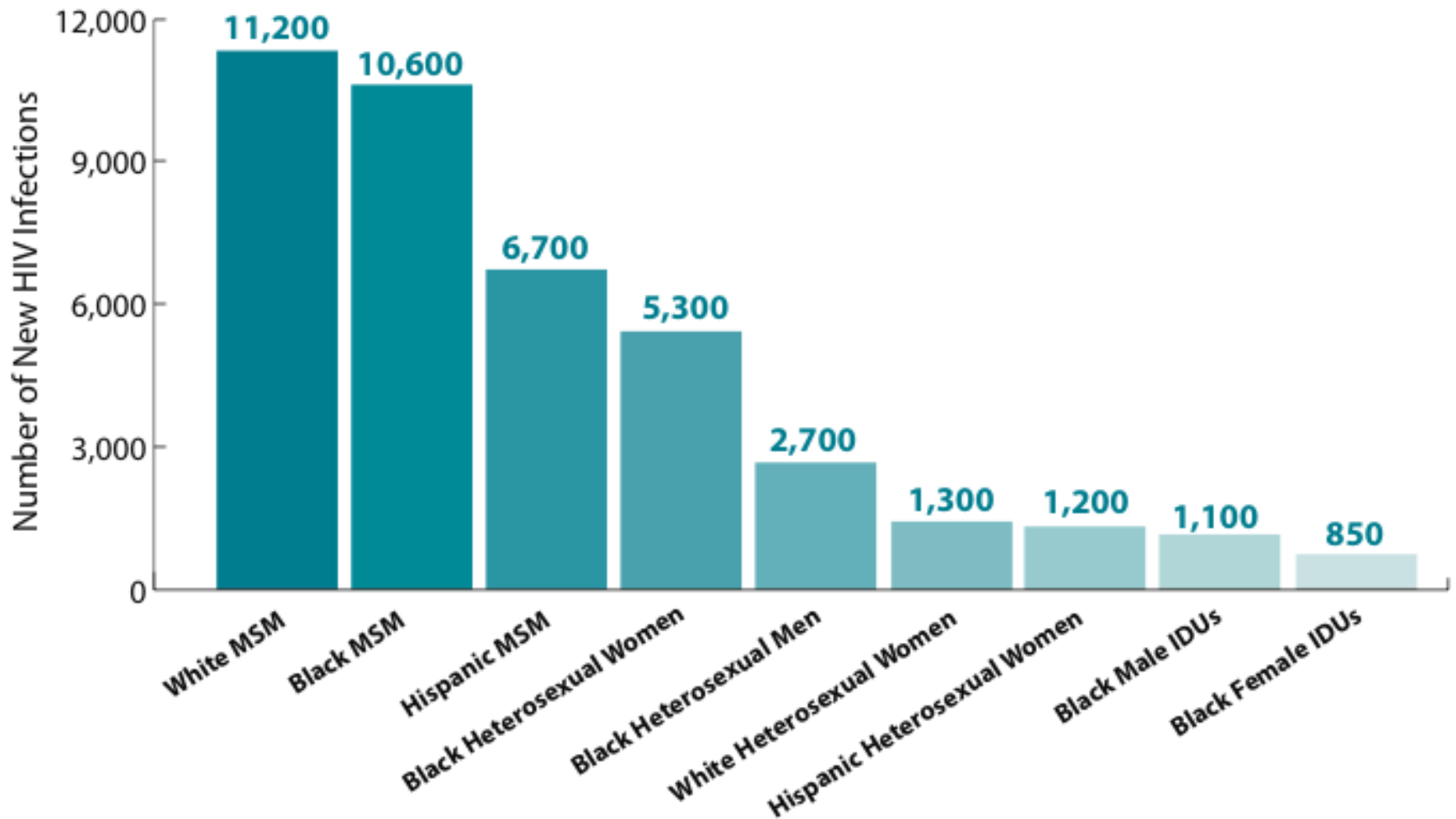
# HIV Prevention Needs Among Gay, Bisexual, and Other MSM in Small Urban Areas

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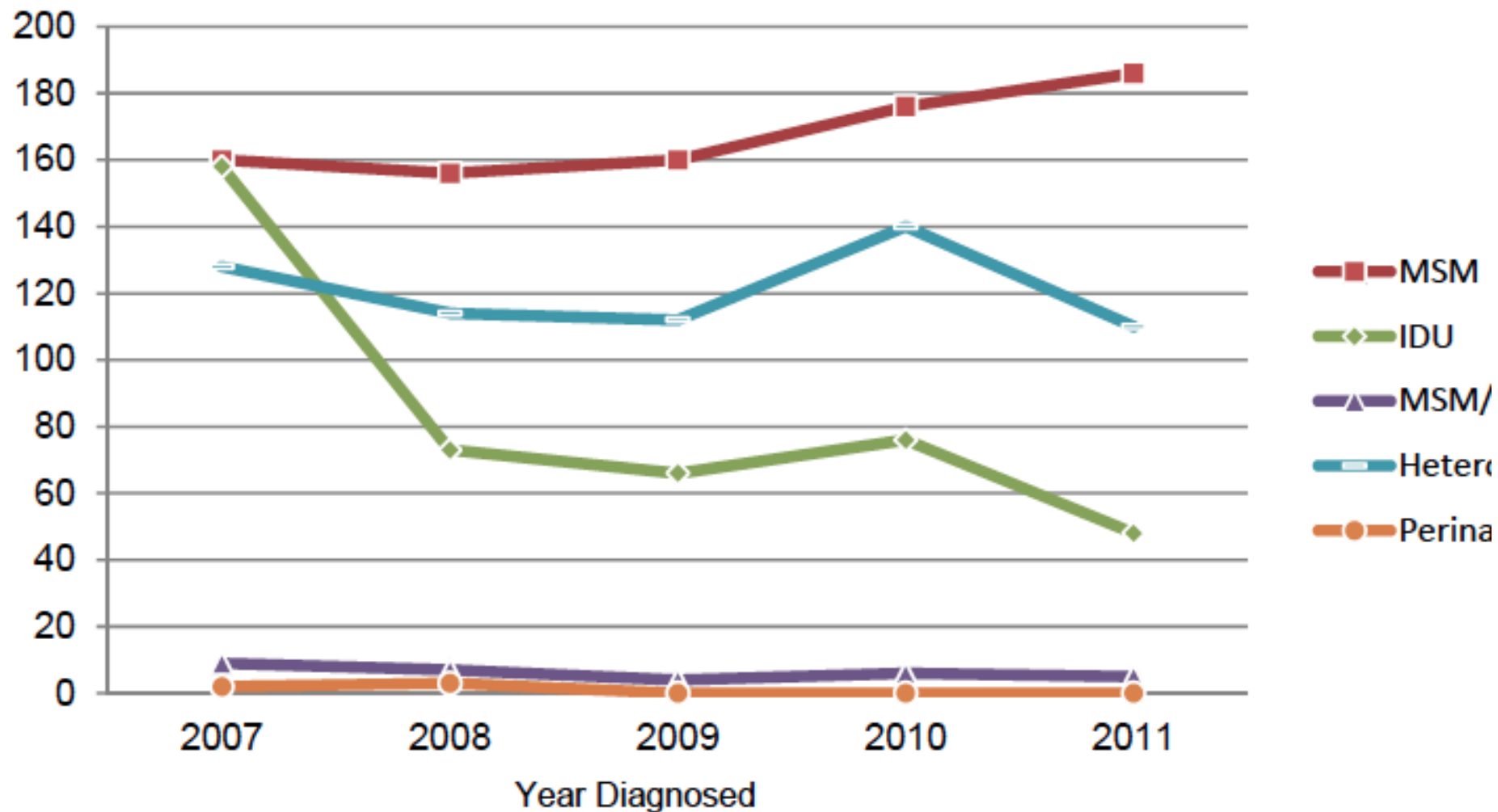
# HIV Trends

New HIV Infections By Risk Category (CDC, 2012)



# HIV Trends

HIV Infection Trends By Risk Category in Connecticut (CT DOPH, 2013)



# MSM's Risk Ecology

- Explanations of MSM's increasing HIV risk mostly derive from urban studies (e.g., CDC's 12 Cities Project)
- Yet, the 12 largest cities are home to  $< 1/2$  of U.S. HIV/AIDS cases
- MSM in small urban areas are also at disproportionate risk, although understudied

# MSM's Risk Ecology

- Most prevention studies focus on the individual level, for example:
  - Risk complaisance
  - HIV prevention fatigue among older MSM
  - Lack of direct experience with the crisis among younger MSM
- Yet, individual behavior change interventions yield modest results (Herbst et al., 2007; Johnson et al., 2008)
- A full prevention approach would also address structural determinants through a complete assessment of structural determinants by locale

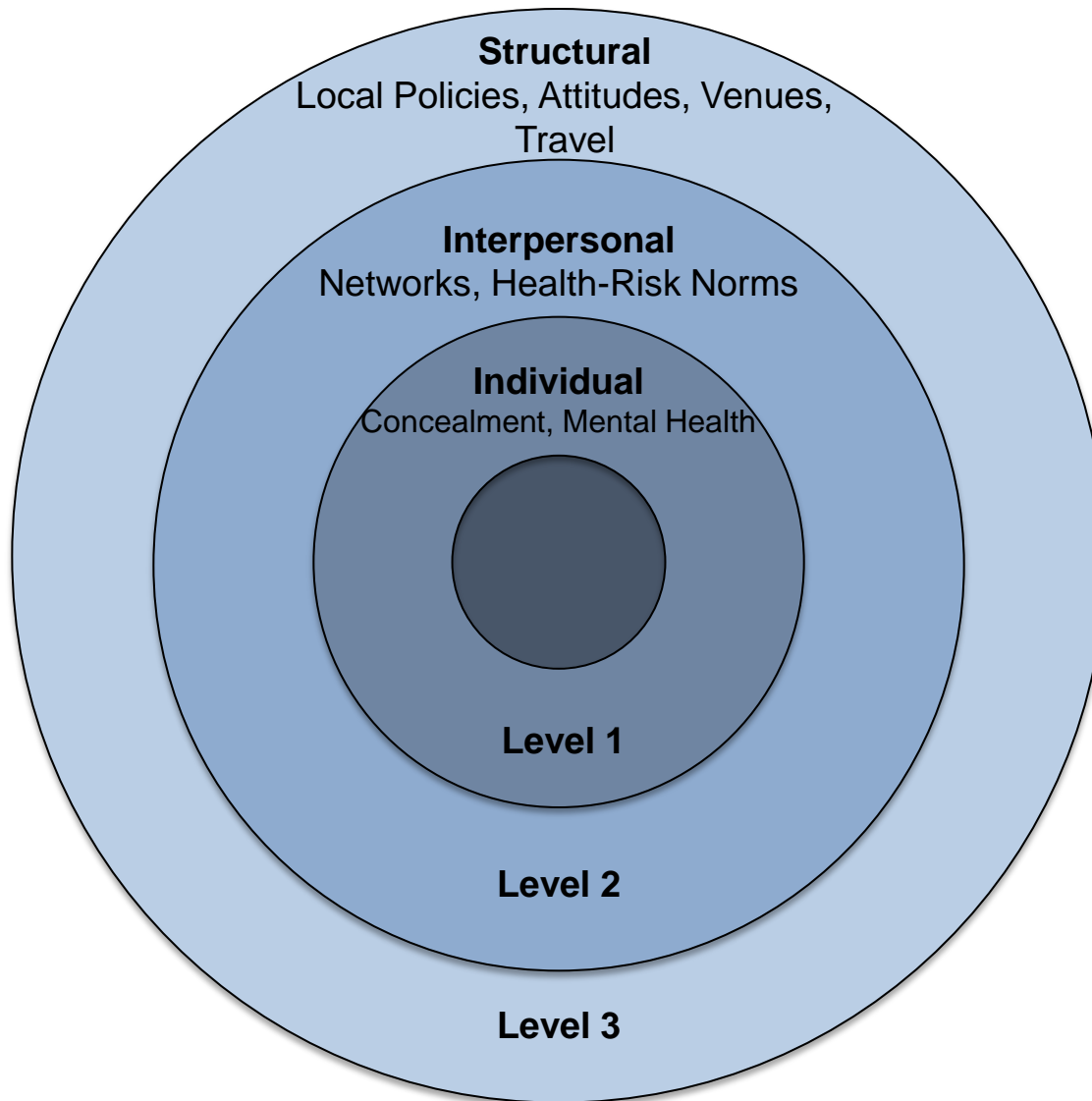
# MSM's Urban Risk Ecology

- Risk determinants in large urban areas include:
  - Sexual minority stigma
  - Normative perceptions of risk, including substance use, in the gay community
  - Internet and mobile sex-seeking apps
  - Lack of engaging prevention programs
- However, risk environments vary by locale

# MSM's Small Urban Risk Ecology

- Risk determinants in small urban areas *might* include:
  - Small urban social networks, communities, and policies
  - Risk venues
  - Gay community norms
  - Common use of internet and mobile apps
  - LGBT stigma
- Travel between geographic areas, including to/from NYC
  - NYC/CT travel has been shown to be implicated in the spread of other STIs among MSM (Niccolai et al., 2007)
  - NYC may be a source of risk and resources
  - Small urban areas may also serve as a destination themselves

# MSM's Small Urban Risk Ecology





# Our Aims

- Engage the community to paint a complete picture of the local risk ecology in CT to aid in the development of local HIV prevention for MSM
- Aim 1: Engage nine key informants across the three small urban areas in Connecticut that have the highest prevalence of HIV among MSM (i.e., New Haven, Hartford, Bridgeport) to gather input into our interview guide, suggestions for participant recruitment, and interpretation of results.

# Our Aims

- Aim 2: Conduct semi-structured interviews with a racially/ethnically diverse sample of 30 MSM (15 HIV positive, 15 HIV negative) from these same three areas to yield an in-depth profile of the social ecological determinants of HIV infection in small urban areas located within close proximity to a national epicenter of HIV infection among MSM.

# Our Aims

- Aim 3: Disseminate findings to the original key informants and community organizations to inform outreach and prevention services and future research with MSM living in small urban areas

# Innovation

- Describe small urban HIV risk ecology among MSM
- Qualitative examine latent phenomenon
- Two-way community engagement

# Progress

- Met with representatives at AIDS CT, APNH, New Haven Pride Center, local gay bars
- Current interview guide assesses:
  - Being gay/bisexual in New Haven, Bridgeport, Hartford
  - Sexual orientation stigma
  - Social networks
  - Sexual networks and sexual spaces
  - Local travel
  - Sexual behavior and HIV risk
  - HIV experiences and stigma
  - Poverty / race inequality
  - Experiences with HIV prevention and case management

# Emerging Themes

- HIV stigma
- Efficiency and anonymity of sex-seeking apps
- Resource inequalities