Male street workers and internet escorts having sex with men reported high HIV risk

Men who have sex with men (MSM) who participate in sex work have an elevated HIV risk-taking and seropositivity. Greater HIV prevalence and incidence has been found among MSM sex workers compared to their nonsex work counterparts. Research has found that over four of ten seropositive sex workers were unaware of their infection. Men engaging in sex work with other men were more likely to engage in unprotected sex with male and female nonsex work partners. Hence, these men may be an important “bridge” of HIV/STI to nonsex work partners.

The purpose of this study was to collect formative data on HIV risk behavior among MSM by sex worker type to assist in tailoring prevention interventions to this high-risk subgroup of MSM.

Methodology
Two groups of sex workers (street workers, n=19; internet escorts, n=13) were recruited in the Boston, MA area, January to March 2008.

Participants completed a semistructured qualitative interview concerning experiences with sex work in past 12 months, history of sex work, HIV/STI risk (perception of risk, risk behavior, sex work vs nonsex work partners, HIV serostatus disclosure, and communication about HIV/STIs), incarceration and depression.

Outcomes of the Study
63% were white, 16% Black/African American, 19% Hispanic/Latino, and 21% other. Mean age was 28 years for internet escorts and 43 years for street workers. Street workers had less education.

Major findings include:
• 31% were HIV infected.
• 69% reported at least one episode of unprotected serodiscordant anal sex (either insertive or receptive) with a mean of 11 male sex partners of unknown or different HIV serostatus in past 12 months.
• In past 12 months, substances were used during sex: 75% used marijuana, 53% cocaine, 31% crack, 22% crystal meth, 22% Viagra (nonprescribed), 22% painkillers, 19% poppers, 16% ecstasy, 16% downers, 9% GHB, 6% ketamine, 3% hallucinogens, and 3% heroin.
• 32% had a history of depression and 41% reported a history of child sexual abuse.

• inconsistent condom use, unprotected sex, low rates of HIV status disclosure were found for both groups.
• Offers of more money for unprotected sex were made.
• 25% of both groups had never been tested for STIs.
• There was a lack of trust on the part of sex work partners.
• Internet sex workers reported that they were more likely to engage in sexual risk-taking with nonsex workers partners than sex partners who pay.

Implications for Prevention
This study suggests that male sex workers who engage in sex with other men in exchange for money, drugs, housing, and other goods are a population at high risk for HIV transmission and acquisition.

Interventions for this high-risk subgroup of MSM must address contextual and psychosocial issues.

SOURCE:
Many US young persons engage in sexual risk behavior

Data from the U.S. National Vital Statistics System and other monitoring surveys indicate that many young persons in the U.S. have participated in sexual risk behavior.

In 2006, about 22,000 adolescents and young adults aged 10-24 years in 33 states were living with HIV/AIDS and about 1 million of those the same age were reported to have chlamydia, gonorrhea, or syphilis. One-quarter of females aged 15-19 years and 45% of those aged 20-24 years had evidence of HPV infection.

Though risk increased with age, persons in younger groups were also affected: among those 10-14 years, 16,000 females became pregnant in 2004 and nearly 18,000 males and females were reported to have STI in 2006.

In 2006 among persons 10-24 age, rates of chlamydia, gonorrhea, and syphilis were the highest among non-Hispanic blacks. Southern States had the highest rates of negative sexual and reproductive health outcomes.


Few sexually active Black adolescents have tested for HIV

About one in five of the estimated 1.1 million people living with HIV in the U.S. do not know they are infected. Routine testing provides early detection and treatment. Routine testing is recommended for all youth, ages 13 years or older.

This study reported the prevalence of HIV testing among Black adolescents and factors related to testing. Black adolescents ages 13 to 18 were recruited from community-based outreach in 4 U.S. cities. Only sexually active participants (N = 990, 52% female) were included.

Twenty-nine percent had ever been tested for HIV. The strongest predictor of HIV testing among Black adolescents and factors related to testing. Black adolescents ages 13 to 18 were recruited from community-based outreach in 4 U.S. cities. Only sexually active participants (N = 990, 52% female) were included.

Pap smear knowledge not higher after HPV vaccine arrived

This study assessed Pap smear knowledge of sexually active women (N = 145), age 18-24, attending a health clinic. Only 10% provided accurate definitions and only 12% checked appropriate Pap smear synonyms. 69% incorrectly responded that the Pap smear was same as “pelvic exam” and 42% indicated “STD test.” There does not appear to be improvement of women’s knowledge after introduction of the HPV vaccine.


Most AIDS cases are in Southern states

In 2007, 46% of the estimated 35,962 new AIDS diagnoses and 40% of the persons living with AIDS lived in the South. The South has the largest proportion of AIDS cases from less urban and nonurban areas.


RAP Time is a monthly AIDS/STD prevention bulletin published by the Rural Center for AIDS/STD Prevention (RCAP) at Indiana University, Bloomington. RCAP is a joint project of Indiana University, University of Colorado, and University of Kentucky. The major focus of RCAP is the promotion of HIV/STD prevention in rural America, with the goal of reducing HIV/STD incidence.

The opinions expressed here do not necessarily represent those of the cooperating universities.

Senior Director
William L. Yarber, H.S.D.
Indiana University, Bloomington

Co-Directors
Janet N. Arno, M.D.
IU School of Medicine, Indianapolis
Richard A. Crosby, Ph.D.
University of Kentucky
Susan L. Dreisbach, Ph.D.
University of Colorado, Denver
Mohammad R. Torabi, Ph.D.
Indiana University, Bloomington

Rural Center for AIDS/STD Prevention
Indiana University
801 East Seventh Street
Bloomington, Indiana
47405-3085

Phone, Fax, E-mail, web page:
Voice and TDD: (812) 855-7974
(800) 566-8644
FAX line: (812) 855-3936
aids@indiana.edu
http://www.indiana.edu/~aids