



Describing Western Australia's (WA) men who have sex with men (MSM)

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A definition of MSM

According to the UNAIDS Action Framework, the term 'men who have sex with men' is used to describe those males who have sex with other males, regardless of whether or not they have sex with women or have a personal or social identity associated with that behaviour, such as being 'gay' or 'bisexual'.¹

MSM is a term which is behaviourally and epidemiologically driven. It ignores the complexity of social and cultural identities, self-determined sexual identities, and can obscure elements of sexual behaviour that are important for public health research and intervention.² This can include developing a clearer understanding of how MSM engage in sexual behaviours, such as whether they are gay identifying or not.



1. UNAIDS. UNAIDS Action Framework: Universal Access for Men who have Sex with Men and Transgender People. 2009: Geneva
2. Young R, Meyer I. The Trouble With "MSM" and "WSW": Erasure of the Sexual-Minority Person in Public Health Discourse. 2005. American Journal of Public Health; (95)7: 114-1149.

Overview of presentation

1. Population and context of MSM in WA
2. What our epidemiology highlights
3. Our understanding of MSM in WA: theories; assumptions; program experiences; social research
4. Public health considerations
5. Research moving forward



Estimating the WA MSM (WAMSM) population



23,741 male same-sex couples in Australia in 2016

12-13,000 unique Grindr users in WA per month

6,116 unique M Clinic clients from 2011-present

3,753 HIV-negative men in WA who engage in 'high-risk' practices, placing them at risk of acquiring HIV

1. Australian Bureau of Statistics. Census of Population and Housing: Reflecting Australia- Stories from the Census, 2016: <http://www.abs.gov.au/ausstats/abs@.nsf/Lookup/by%20Subject/2071.0-2016-Main%20Features-Same-Sex%20Couples-85> (Accessed May; 2018)
2. Australian Federation of AIDS Organisations: Estimates of PrEP eligibility in high-risk HIV negative gay men aged 16-69 by jurisdiction. 2017. <https://www.afao.org.au/wp-content/uploads/2018/04/jurisdictional-PrEP-estimates-2017.pdf> (Accessed May; 2018)
3. Selvey L, Slimings C, Adams E et al. The impact of a sexual health clinic targeting men who have sex with men (M Clinic) on HIV testing and risk behaviour. 2017.

Community context of MSM in WA



2 LGBTIQ Nightclubs

1 LGBTIQ Print Magazine

15 Gay Men Accepting Community Groups

3 Registered Sex On Premise Venue

~90 Active beats

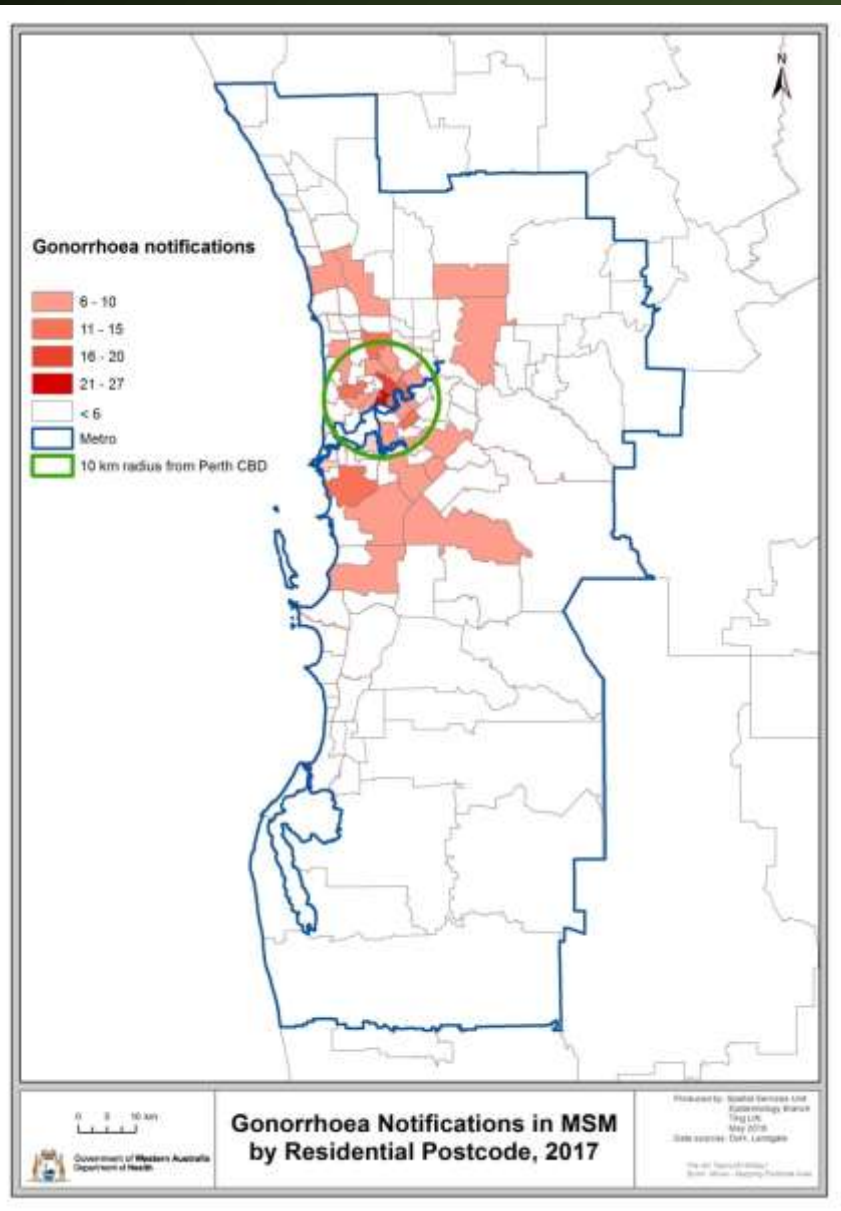
Popular Social Networking

Grindr, Scruff, Tinder

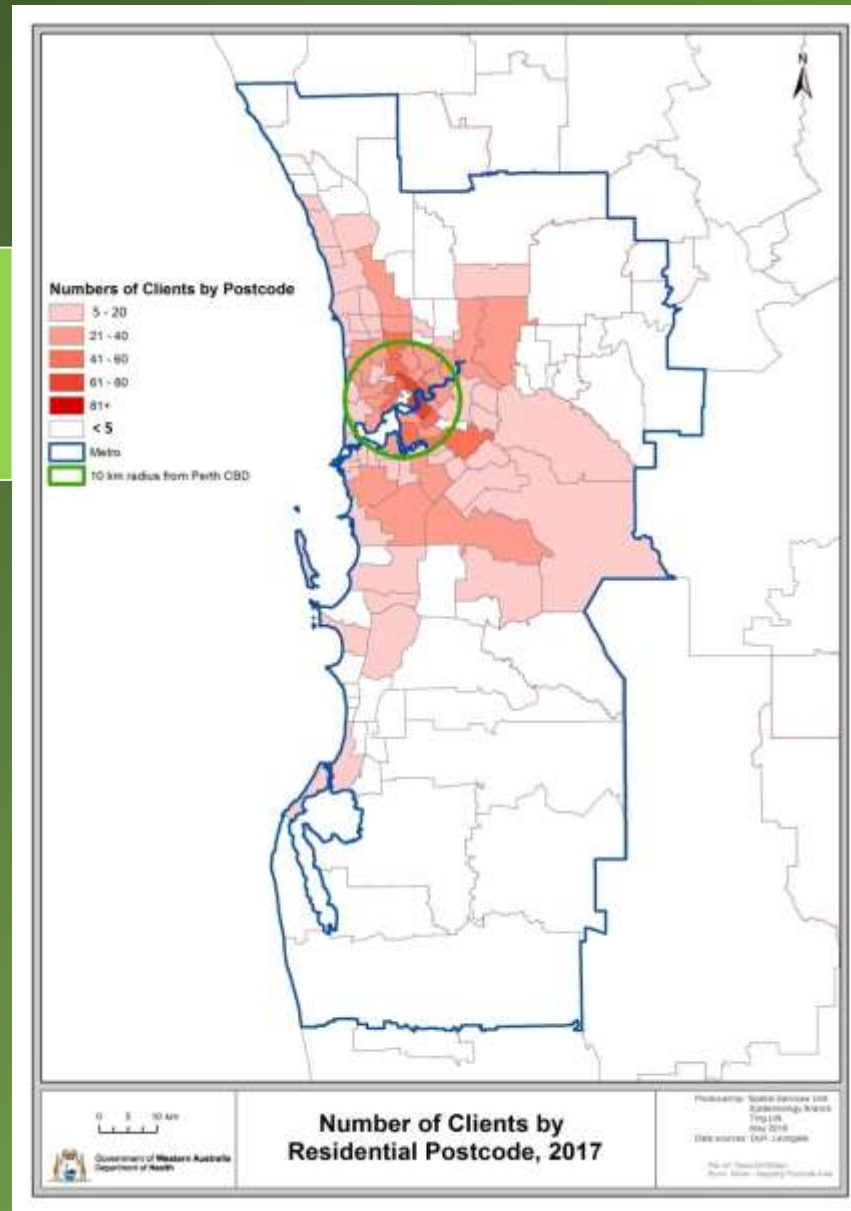
Instagram = 51,479 posts #gayperth

Mapping of MSM in metropolitan area by residential postcode

Gonorrhoea notifications in MSM, 2017
(n=454)



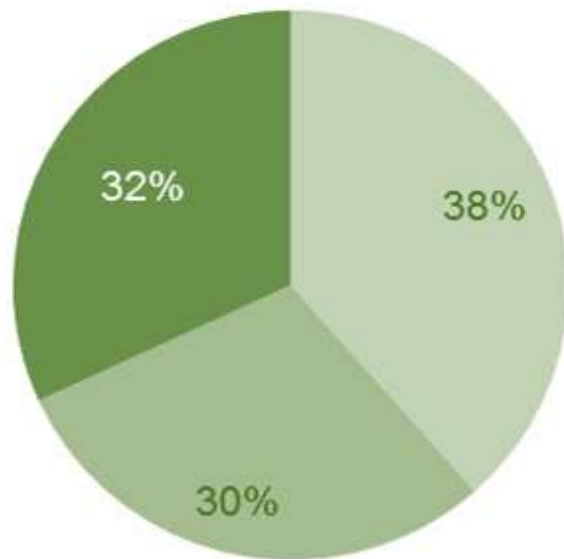
M Clinic clients, 2017
(n=2040)



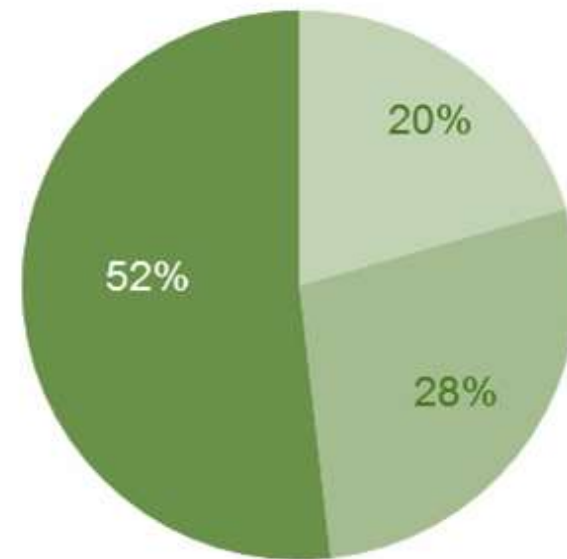
PrEPIT WA participants vs HIV notifications by area of residence (distance from Perth CBD)



PrEPIT WA participants
Nov 2017 to Jan 2018 (n=395)



HIV notifications in MSM,
WA residents 2015-2017 (n=454)



Distance from CBD

- < 5km
- 5-10km
- > 10km

General theories/assumptions about WAMSM



- Predominantly meet sexual partners through mobile applications and online^{1,2}
- Decreasing condom use and increasing condomless anal sex practices¹
- Generally higher frequency of HIV/STI testing across MSM^{1,2,3}
- Drug and alcohol use as a part of sexual practices ('chemsex') occurs across all age categories, with varying knowledge of harm reduction practices^{1,2,3,4,5}
- Not all WAMSM identify as gay or bisexual²

4 theories/assumptions about WAMSM

Theory/assumptions of WAMSM	Informed by		
	Anecdotal	Program experiences	Social research
1. Hard to reach MSM have different levels of engagement with the gay community, often influenced by their sexual identity.	<ul style="list-style-type: none">• Client profiles at M Clinic• Clinical anecdotal feedback• AIDSLine client feedback• WAAC peer profiles on Craigslist, Squirt, Grindr	<ul style="list-style-type: none">• Notes from meeting to address rise in HIV notifications amongst gay men and other men who have sex with men• The interplay between drug use, sexual activity, and risk of blood-borne viruses and sexually transmitted infections: A report from a policy discussion	

4 theories/assumptions about WAMSM

Theory/assumptions of WAMSM

Informed by

Anecdotal

Program experiences

Social research

2. Socially and geographically hard to reach MSM may experience incidences of stigma and discrimination (self/perceived/enacted) and have poorer health (STI/BBV) outcomes

- AIDSLine client feedback
- WAAC peer profiles on Craigslist, Squirt, Grindr

- 1. Notes from meeting to address rise in HIV notifications amongst gay men and other men who have sex with men

- Writing themselves in 3⁶
- Minority stress and community connectedness among gay, lesbian and bisexual Australians: a comparison of rural and metropolitan localities⁷
- National LGBTI Health Alliance, The statistics at a glance: The mental health of lesbian, gay, bisexual, transgender and intersex people in Australia⁸

4 theories/assumptions about WAMSM

Theory/assumptions of WAMSM

Informed by

Anecdotal

Program experiences

Social research

3. Gay and bisexual men are diversifying 'community' experiences away from once public spaces (ie nightclubs) to privately organised 'safe spaces.'

- People engaging in workshops use this space as a way to meet people in situations they feel more comfortable.
- Workshop participants associated with numerous LGBTIQ community groups.

- Reach of campaigns through community groups.
- Workshop participants being recruited through alternate LGBTIQ spaces

- Perth Gay Community Periodic Survey¹
- E-Male Study²
- Changes in gay men's participation in gay community life: Implications for HIV surveillance and research⁹

4 theories/assumptions about WAMSM

Theory/assumptions of WAMSM

4. Methamphetamine is readily available in GBM networks, with high purity, and its use is often stigmatised

Informed by

Anecdotal

1. Assessments of profiles on apps while engaging in online outreach.
2. Consultation with MHC on MSM and Methamphetamine campaign.

Program experiences

1. Chemical Use Concurrent with Sexual Activity amongst Gay and Other Homosexually Active Men in WA: Discussion Paper
2. The interplay between drug use, sexual activity, and risk of blood-borne viruses and sexually transmitted infections: A report from a policy discussion meeting

Social research

1. Methamphetamine use among men who have sex with men in Australia: A literature review⁵
2. Perth Gay Community Periodic Survey¹

Public health considerations



1. There's a greater need for MSM to be health literate/aware of personal risk behaviours
2. Targeting all groups of MSM with health promotion messaging
3. Understanding the applicability of 'gay community engagement' across WA
4. Sexual fluidity, culture, and MSM that cross several epidemiological categories
5. Notification reporting at patient diagnosis- do we get accurate risk exposure information?
6. Health workforce upskilling to ensure holistic approaches to sexual and mental health of MSM
7. Scaling up responses and reaching the hard-to-reach

Research moving forwards



GBM community engagement survey

How do gay and bisexual men engage with community and how does this effect self-perception, confidence and health outcomes.

MSM scoping/surveillance activity

Assess the value and reach of creating a campaign project targeted at hard to reach MSM and assess which platforms and locations are relevant to do this.

References for theories/assumptions about WAMSM

1. Lee, E., Mao, L., Lea, T., et al. Gay Community Periodic Surveys: Perth 2016 and 2017. Sydney: Centre for Social Research in Health, UNSW Sydney.
2. Rawstone, P., Holt, M., Kippax, S., et al. E-male survey 2008: key findings from a national online survey of men who have sex with men in Australia. Sydney: National Centre in HIV Social Research, The University of New South Wales.
3. de Wit, J., Mao, L., Adam, P., & Treloar, C. (Eds.) (2014). HIV/AIDS, hepatitis and sexually transmissible infections in Australia: Annual report of trends in behaviour 2014. Sydney: Centre for Social Research in Health, UNSW Australia.
4. Down I, Triffitt K, Persson A, Ellard J, Brown G and Prestage G. (2012). Experiences of HIV: The Seroconversion Study Report 2012. The Kirby Institute, The University of New South Wales, Sydney Australia
5. Hopwood, M., Cama, E., & Treloar, C. (2016). Methamphetamine use among men who have sex with men in Australia: A literature review (for the WA Department of Health). Centre for Social Research in Health, Sydney: UNSW Australia
6. Hillier, L., Jones, T., Monagle, M., Overton, N., Gahan, L., Blackman, J., Mitchell, A. (2010). Writing themselves in 3. *Australian Research Centre in Sex, Health and Society*. 78.
7. Morandini, J., Blaszczynski, A., Dar-Nimrod, I., & Ross, m. (2015). Minority stress and community connectedness among gay, lesbian and bisexual Australians: a comparison of rural and metropolitan localities. *Australian and New Zealand Journal of Public Health*. 39(3).
8. National LGBTI Health Alliance. The statistics at a glance: The mental health of lesbian, gay, bisexual, transgender and intersex people in Australia. 2016. <https://lgbtihealth.org.au/statistics/> (Accessed May: 2018)
9. Zablotska, I., Holt, M., Prestage, G. (2011) Changes in gay men's participation in gay community life: Implications for HIV surveillance and research. *AIDS Behaviour*. 16(3).

Questions?

