Purpose of this study
Young gay, bisexual, and other MSM (YMSM) in the U.S. (especially YMSM of color) are at highly disproportionate risk for HIV acquisition and transmission. This study aimed to better understand how social, environmental, and individual risks—including mental health burden and substance use—interact to create unprotected sexual risk for MSM.

How was the study conducted and who was involved?
Project staff recruited almost 600 sexually active gay, bisexual, and other 18-19 year old MSM who lived in the New York City metro region. Description of participants:

- >70% non-White
- Represented a range of socioeconomic status (SES)
- Almost 9 in 10 born in the U.S.
- >85% enrolled in school
- >15% reported arrest history
- >80% reported exclusive or predominant homosexuality
- Averaged >4 days past month alcohol use and >4 days marijuana use

What were the key findings of the study?
- Substance use, mental health burden, and unprotected sex are co-occurring and overlapping, creating a “syndemic.”
- 19% reported unprotected anal intercourse (UAI) with a same-sex partner.
  - When examining the effects of individual, psychosocial, and social factors on UAI, engaging in past-month UAI was:
    - Almost 5 times more likely if in a current relationship with another man
    - 3 times as likely if unstably housed or homeless
    - 2 times more likely if there is an arrest history
    - Almost 2 times more likely if residentially unstable (i.e., many moves since birth)
- In examining the relationship between sociodemographic characteristics and UAI, findings indicated that:
  - US-born participants were less likely to have UAI than non-US born participants
  - Participants who felt they belonged to middle- or high-SES groups were less likely to engage in UAI than those who perceived they were in a low-SES group

What might this mean for organizations and institutions working with young gay, bisexual, and other YMSM?
- For programs to be most effective, they should be holistically enacted, integrating mental health and substance use services into HIV prevention and treatment programs.
- While individual-level HIV prevention efforts remain important, structural-level interventions are needed, given the vulnerabilities these youth face in regard to such factors as homelessness and arrest history.

For more information about this study, see the references on page 2 or contact Perry Halkitis, PhD, MS, MPH at perry.halkitis@nyu.edu.

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Where can you find more information about the findings in this Fact Sheet?


Where can more results from this study be found?

