



UNSW
Centre for
Social Research
in Health

Increasing prevention coverage among Australian gay and bisexual men but elevated HIV risk among younger and bisexual men: analysis of national behavioural surveillance data 2017–21

m.holt@unsw.edu.au

@martinxholt

Martin Holt¹, Timothy Broady¹, Curtis Chan², James MacGibbon¹, Limin Mao¹, John Rule³, Patty Whatley⁴, Benjamin Bavinton²

¹Centre for Social Research in Health, UNSW Sydney, Australia; ²The Kirby Institute, UNSW Sydney, Australia; ³National Association of People With HIV Australia, Sydney, Australia; ⁴Health Equity Matters (formerly Australian Federation of AIDS Organisations), Sydney, Australia

Background

Gay and bisexual men (GBM) in Australia increasingly use biomedical HIV prevention methods. Rising 'net prevention coverage' (the use of any effective strategy e.g. condoms, PrEP or undetectable viral load, UVL) is associated with declining HIV infections. However, disparities in prevention coverage are believed to exist. We analysed variations in prevention coverage to identify opportunities for intervention.

Methods

Behavioural surveillance data were collected during 2017–21 from gay venues, events and online in seven states/territories. Trends in net prevention coverage and HIV risk (condomless anal sex with casual partners unprotected by PrEP or UVL) were assessed with logistic regression, stratifying by age, country of birth, sexual orientation, and the proportion of gay residents in participants' residential suburbs.

Results

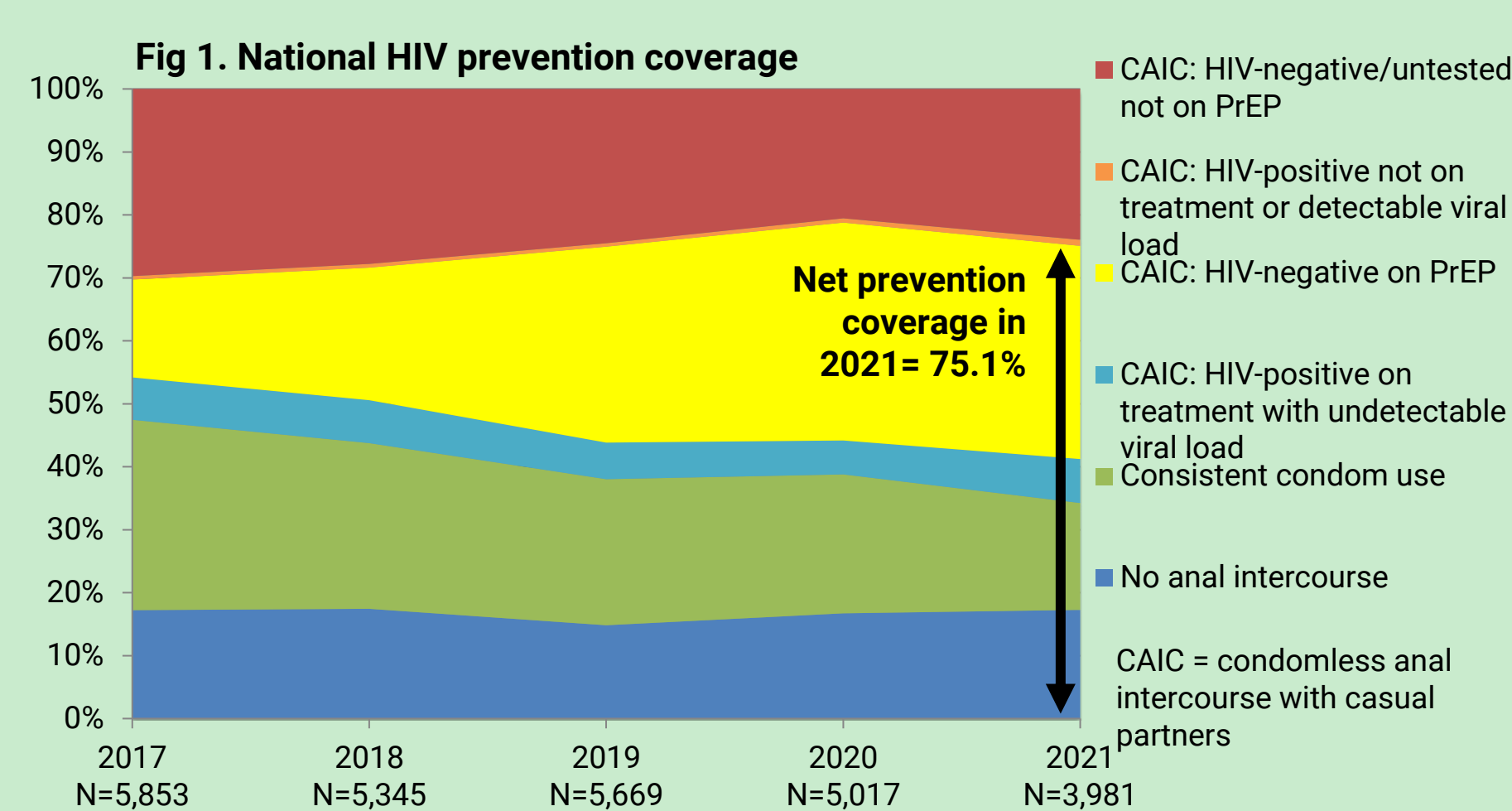
25,865 survey responses from participants with casual male partners were included. The mean age was 37.6 years, 69.8% were Australian-born, 88.2% gay-identified, and 9.7% living with HIV.

Prevention coverage by suburb

During 2017–21, net prevention coverage increased more in suburbs with $\geq 10\%$ gay residents (73.4% to 88.3%, $p < .001$) and less in suburbs with $< 10\%$ gay residents (68.9% to 73.7%, $p < .001$).

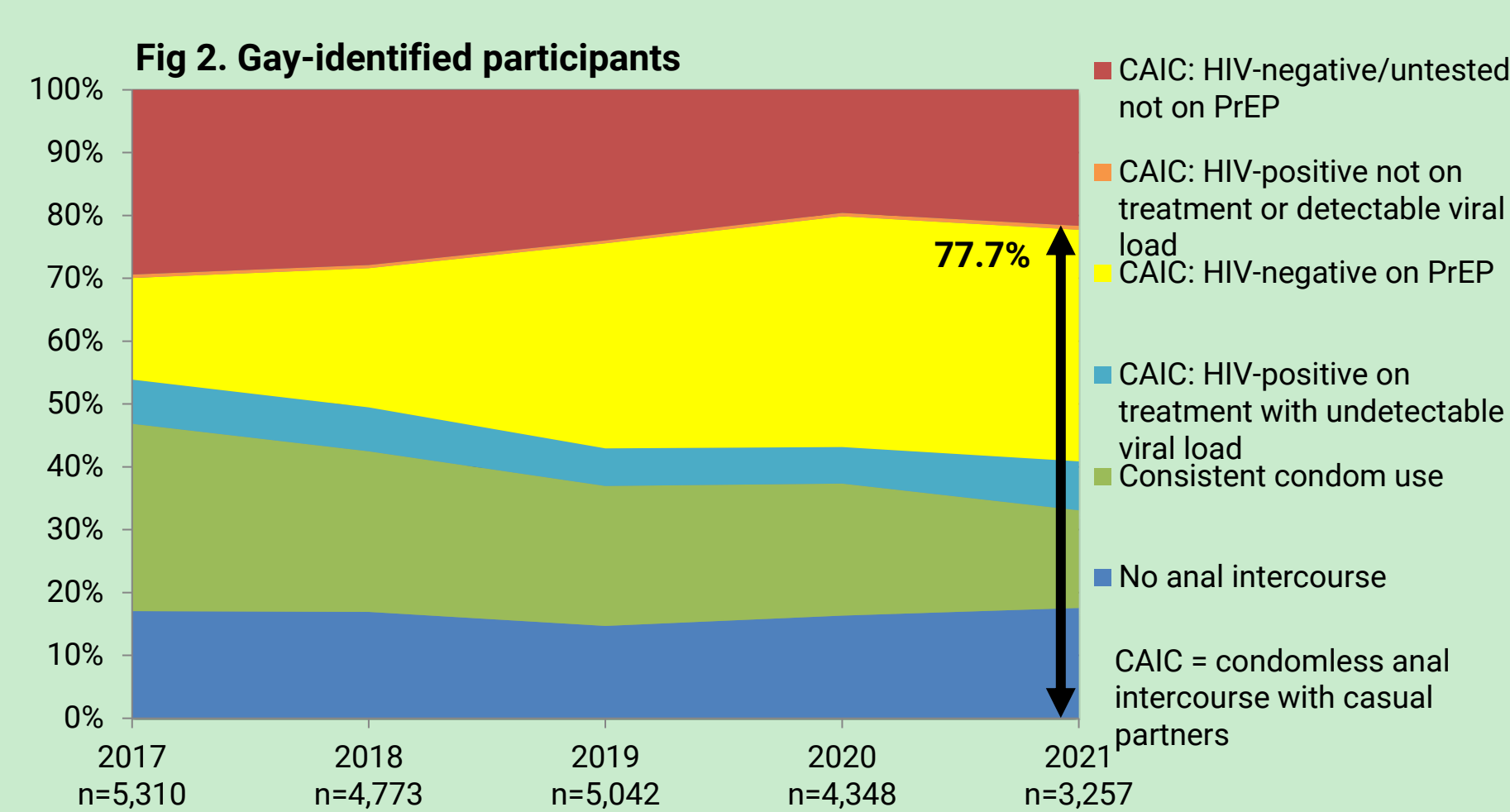
National HIV prevention coverage

Nationally, net prevention coverage increased from 69.8% in 2017 to 75.1% in 2021 ($p < .001$), and HIV risk declined from 30.2% to 24.9% ($p < .001$), influenced by rising PrEP use (15.6% to 33.9%, $p < .001$). See Fig 1.

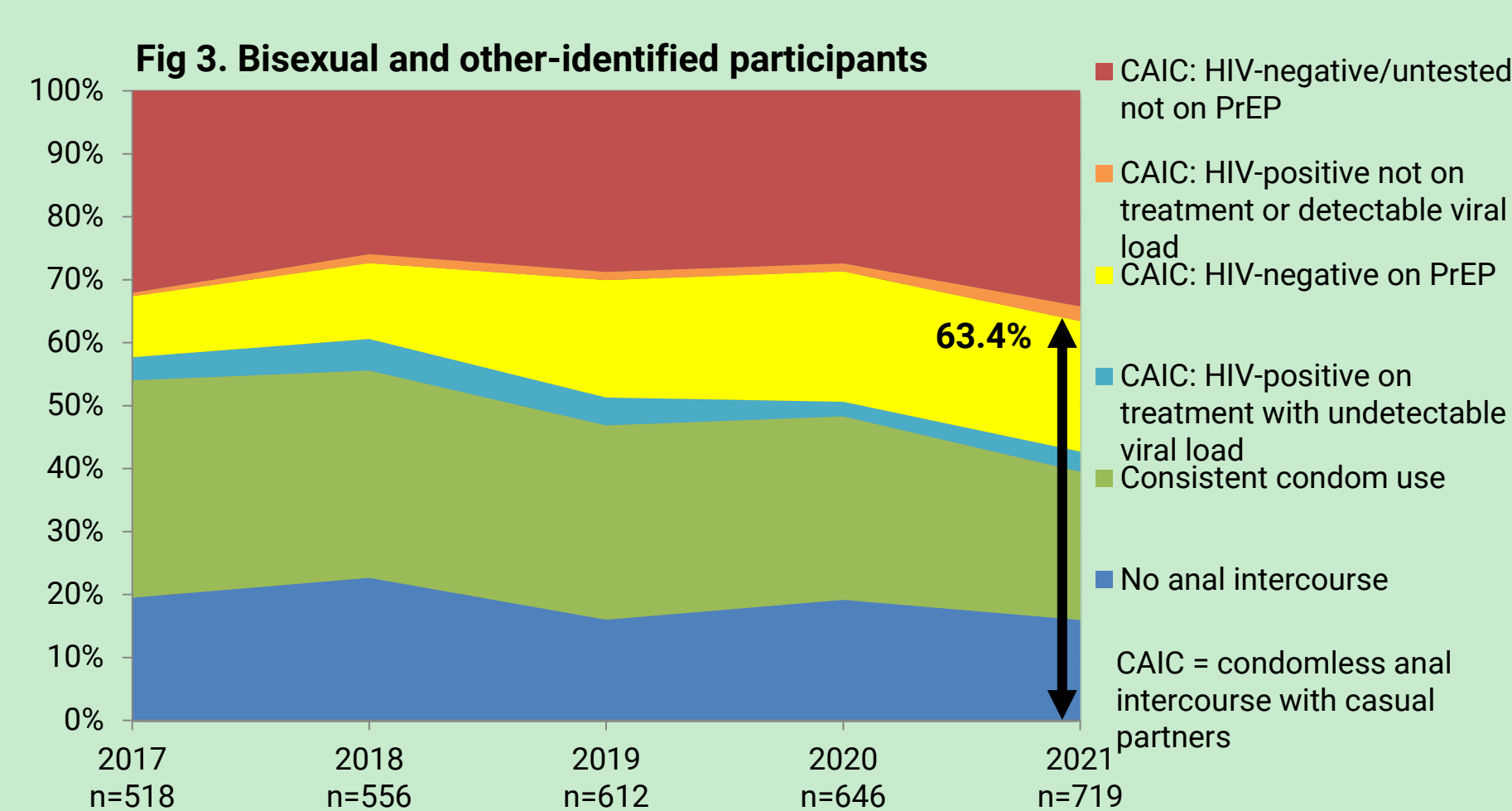


Sexual orientation

Prevention coverage (& PrEP use) was higher among gay men than other participants, increasing from 70.1% in 2017 to 77.7% in 2021 ($p < .001$). Fig 2.

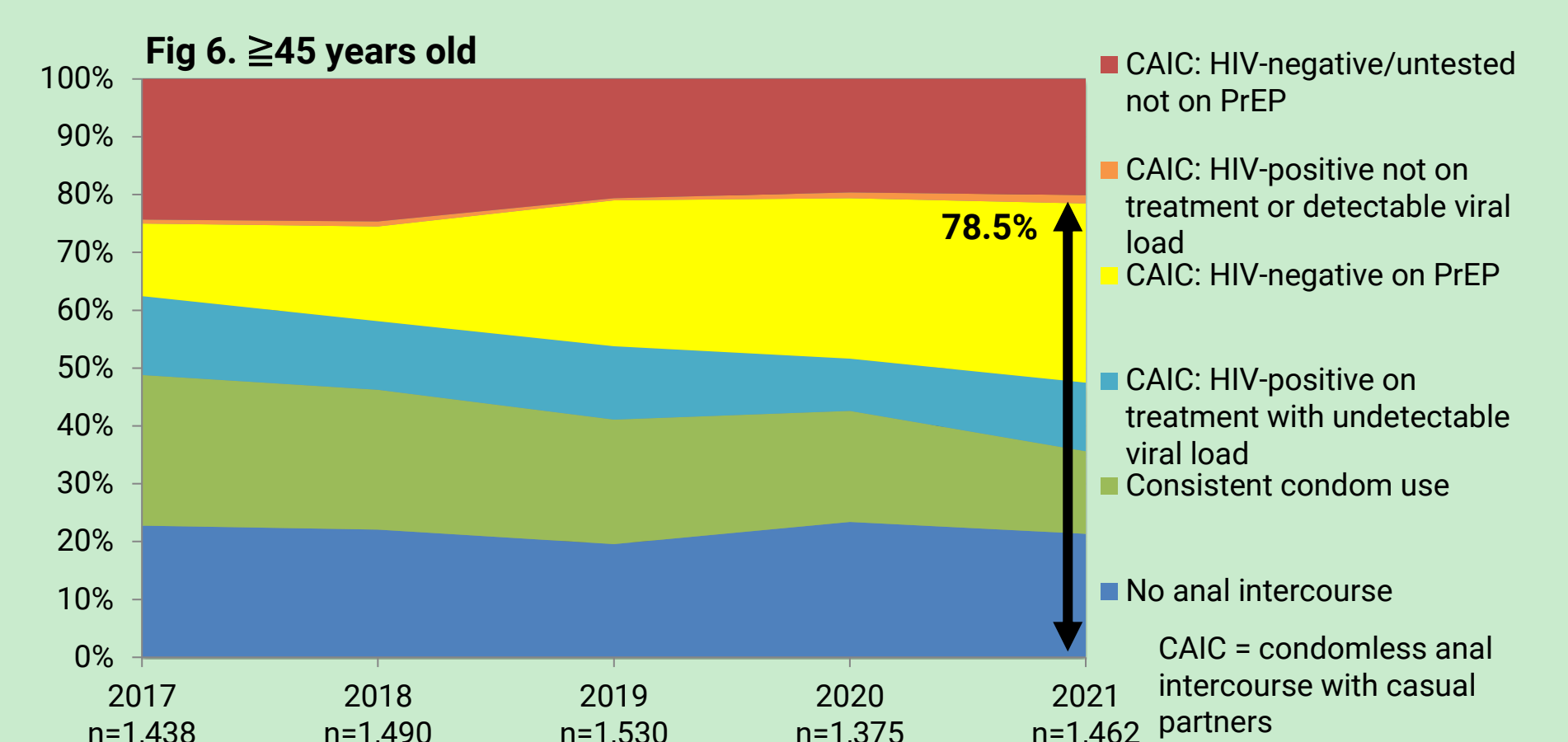
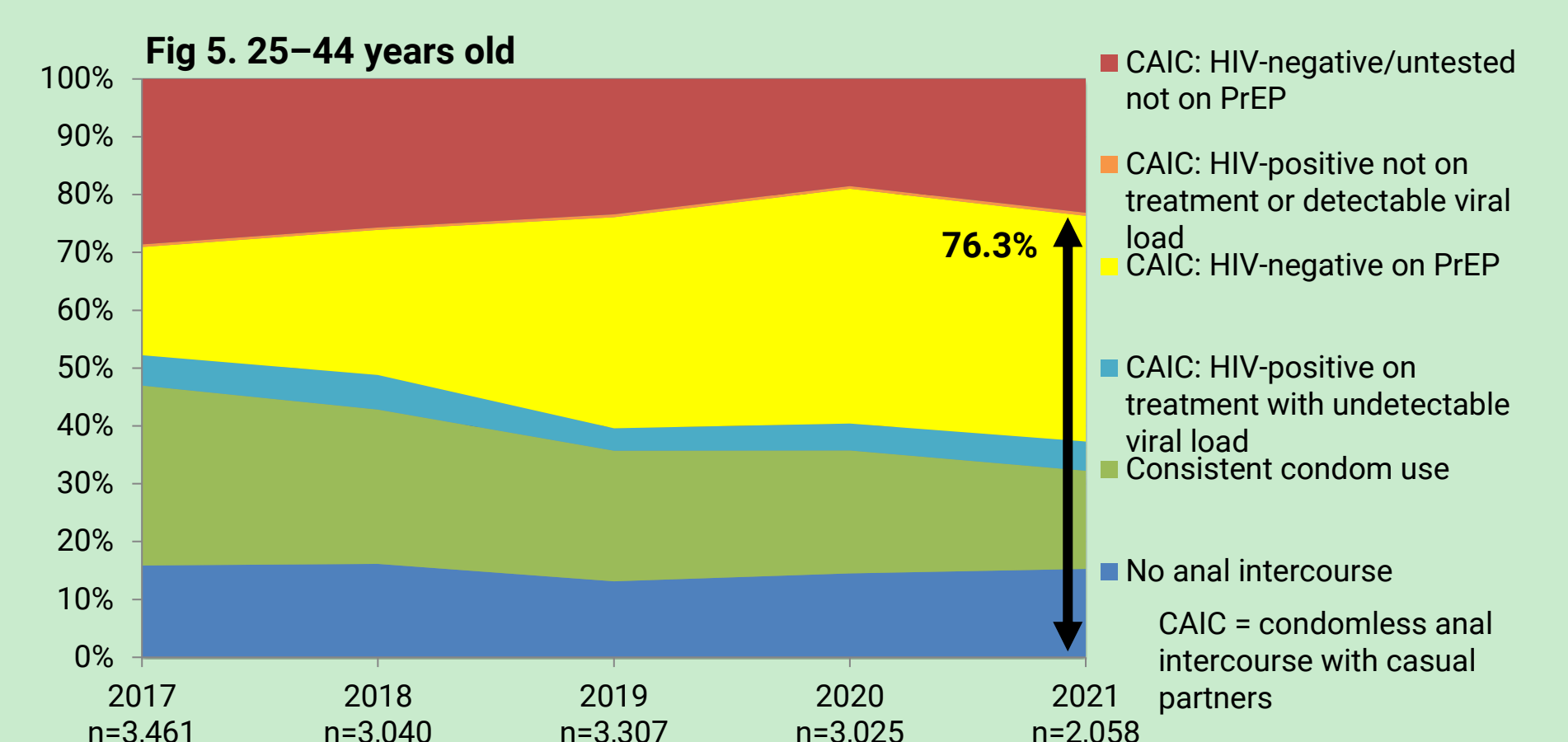
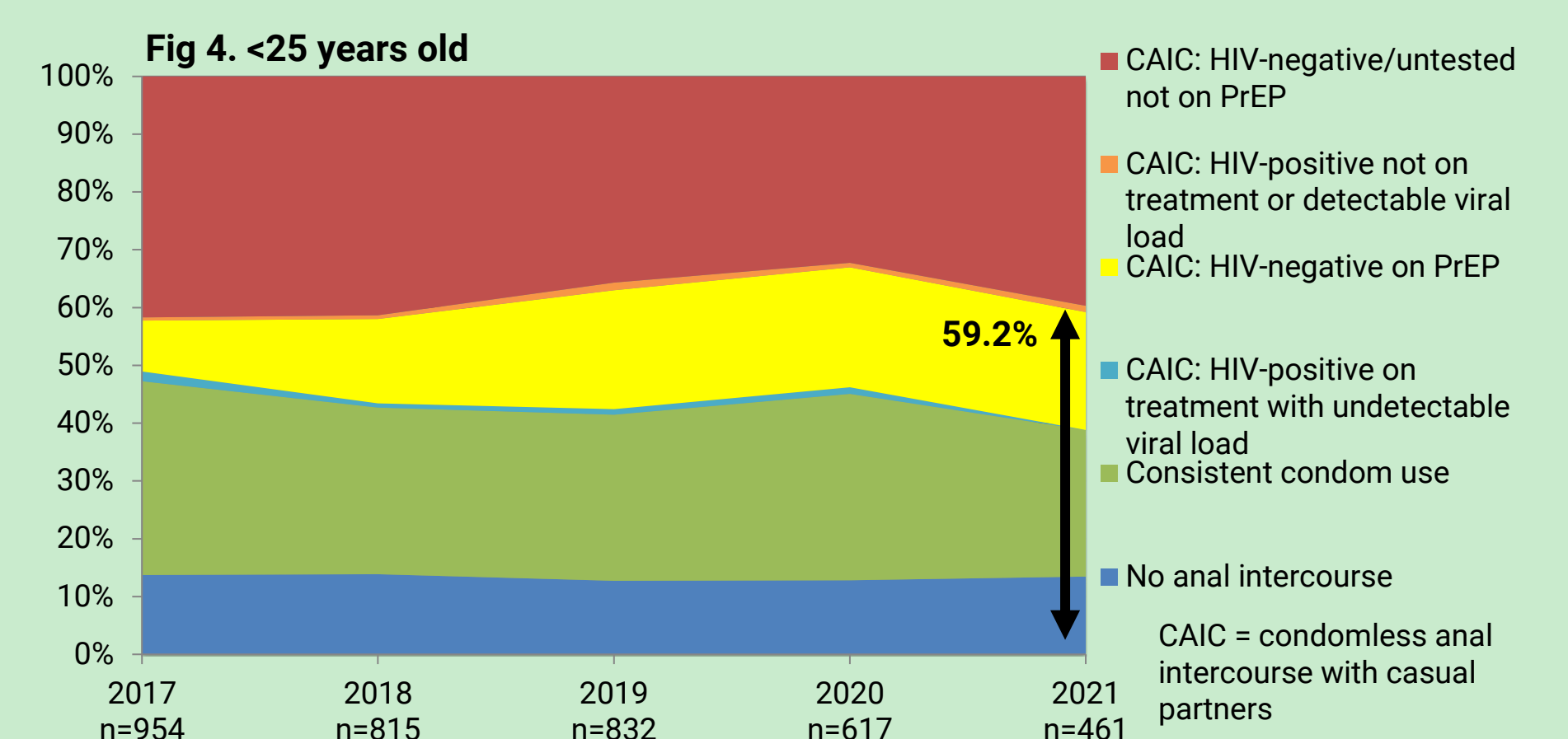


Bisexual and other-identified participants were more likely to rely on condoms than PrEP. Prevention coverage fell in this group from 67.4% in 2017 to 63.4% in 2021 ($p < .001$). See Fig 3.



Age

Participants aged < 25 years were the most likely to consistently use condoms (33.5% in 2017 to 25.4% in 2021, $p = .02$), but also reported the highest levels of HIV risk (42.2% in 2017 to 40.8% in 2021, $p = .01$). 25–44-year-olds were the most likely to use PrEP (18.7% to 39.0%, $p < .001$) and ≥ 45 -year-olds the most likely to use/report UVL (13.6% to 11.8%, $p = .02$). See Figs 4–6.



Conclusion

Recent increases in HIV prevention coverage in Australia are concentrated among older GBM and suburbs with more gay residents. Younger men and bisexual men remain more at risk of HIV, more reliant on condoms, and less likely to use PrEP or UVL. Encouraging greater prevention coverage in these groups is necessary to further reduce HIV risk in Australia.

GCPS

GAY COMMUNITY PERIODIC SURVEY

We thank all the participants of the GCPS, including people living with HIV, and the community organisations who make recruitment possible. The Centre for Social Research in Health, the Kirby Institute, NAPWHA, and Health Equity Matters are supported by the Australian Government Department of Health. The Gay Community Periodic Surveys are funded the Australian Government Department of Health, state and territory health departments, and the National Health and Medical Research Council (GNT2002625). No pharmaceutical grants were received for this research.



UNSW
SYDNEY