

Men, Sexuality and Health in the Context of HIV & AIDS

Part 1

Background, Objectives and Results



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Overview

- ❖ Background to the Study
- ❖ Objectives of the Study
- ❖ Highlights of the Results
- ❖ Conclusion
- ❖ Plans for moving forward

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Background (1)

- ❖ Adult (15-49 yrs) Nigerian HIV prevalence increased from 1.8% in 1991 to 5.4% in 2004 and is currently 3.9%.
- ❖ ~ 40% of HIV cases in Nigeria are among men (15-49yrs).
- ❖ HIV prevalence is highest (~60%) in young Nigerians age 15 to 29 years.

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Background (2)

- ❖ HIV/AIDS and related infections have reversed previous life expectancy trends.
- ❖ Life expectancy of men has decreased from 52.6 years in 1991 to 47 years in 2007.
- ❖ The feminization of the HIV/AIDS pandemic has led to a tendency to overlook men's sexuality and its impact on men's well-being.

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Background (3)

Modes of Transmission of HIV in Nigeria

KNOWN:

- ❖ 80% through heterosexual (vaginal) sex
- ❖ 10% through blood transfusion
- ❖ ~10% through mother-to-child transmission

UNKNOWN:

- ❖ Homosexual sex
- ❖ Anal Sex

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Developmental Study & Needs Assessment

Allman, Adebajo, Myers, Odumuye, Ogunsola (2007)
*Challenges for the Sexual Health and Social Acceptance
of Men Who have Sex with Men in Nigeria.*
Culture, Health and Sexuality, 9 (2) pp. 153–168.

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Homosexuality in Nigeria

- ❖ The epidemiology of HIV/STIs in MSM is understudied across sub-Saharan Africa despite considerable evidence of a long-standing history in Africa.
- ❖ In Nigeria, male same-sex sexual behavior is criminalized.
- ❖ As a result, lives of MSM are characterized by denial, secrecy, violence, stigmatization and marginalization.
- ❖ With regards to research, MSM are an invisible and hard-to-access population.

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Study Goal

To examine male same-sex sexual activities in Lagos and Ibadan and their potential associations with HIV and other STI acquisition and transmission.

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Objectives

- ☐ To characterize the study population
 - o Socio-demographics
 - o Self-reported sexual identities
 - o Sex partner preferences
- ☐ To determine the prevalence and patterns of sexual-risk behaviours
- ☐ To estimate the prevalence of HIV, Syphilis, Hepatitis B and C

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Methods

- ❖ Recruitment of study participants through multiple sampling techniques
 - Respondent driven sampling method (RDS)
 - Mobilization through outreaches, parties
 - Word-of-mouth
- ❖ Interviewer-assisted questionnaire administration
- ❖ Optional anonymous venous blood collection

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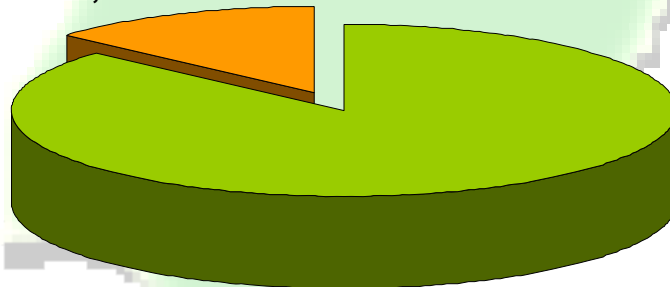
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Study Locations

(Total Number of Participants = 1125)

Ibadan,
151, 13%



Lagos,
974, 87%

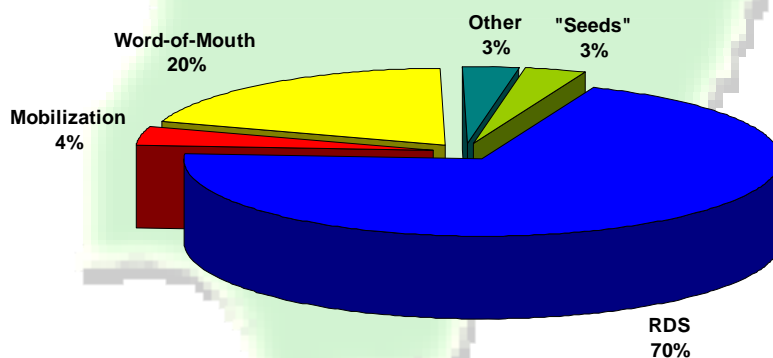
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Methods of Recruitment of Respondents



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Participation

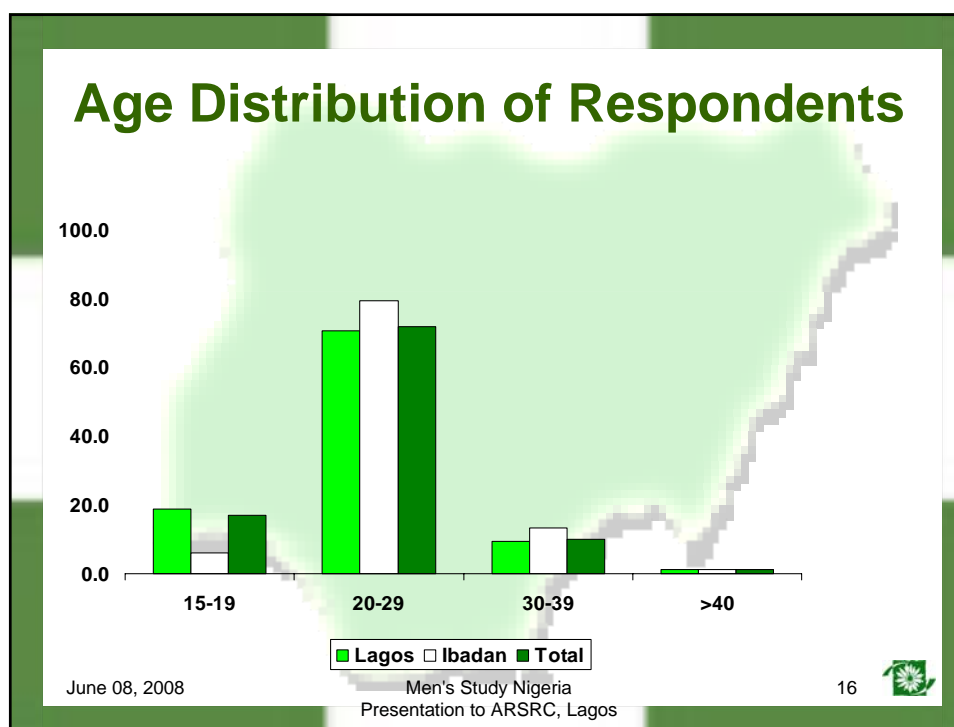
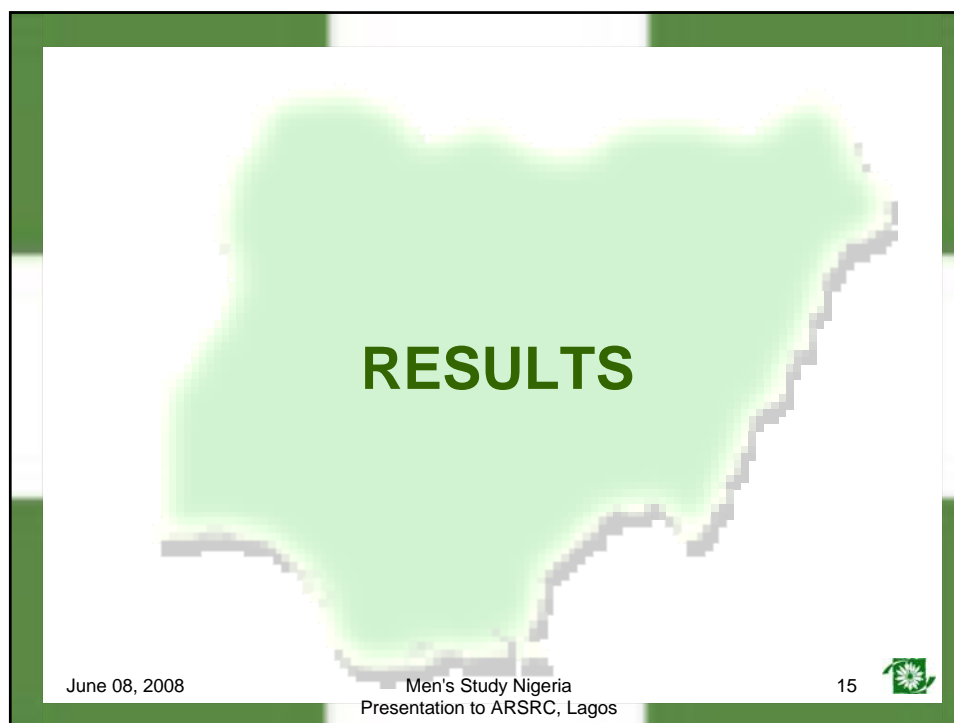
	N	%
Questionnaire	1125	
Provision of Blood Sample	1085	96.4

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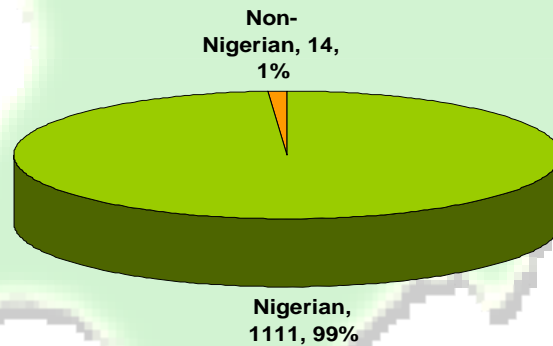
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Respondent's Nationalities



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Ethnicities and States of Origin

- ❖ Typifies the cosmopolitan nature of the study sites
- ❖ Ethnicities: Yorubas (58.0%); Igbos (24.5%); Hausas (1.8%); Others (14.5%)
- ❖ Respondents were from 26 states in Nigeria except (Bauchi, Bornu, Gombe, Niger, Plateau, Sokoto, Taraba, Yobe and Zamfara)

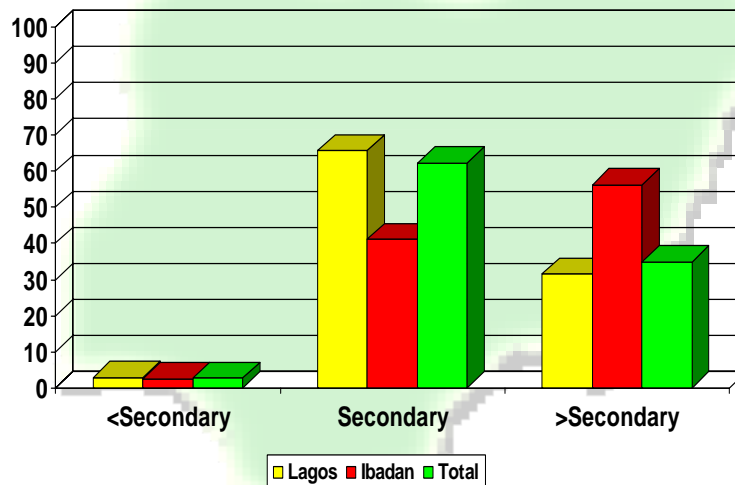
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Educational Levels of Respondents



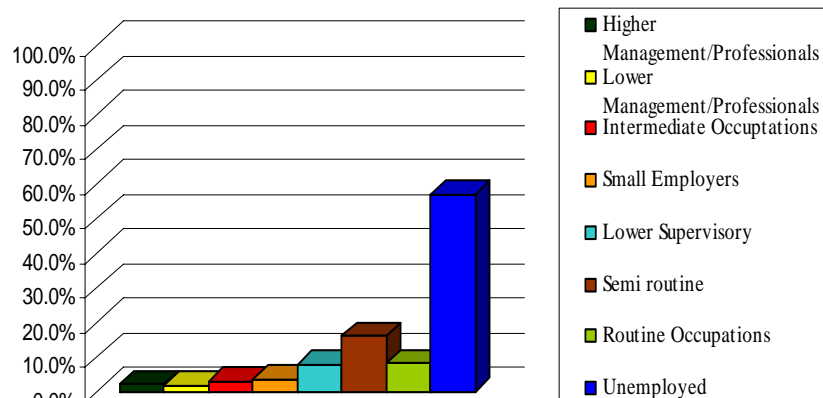
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Occupations of Respondents

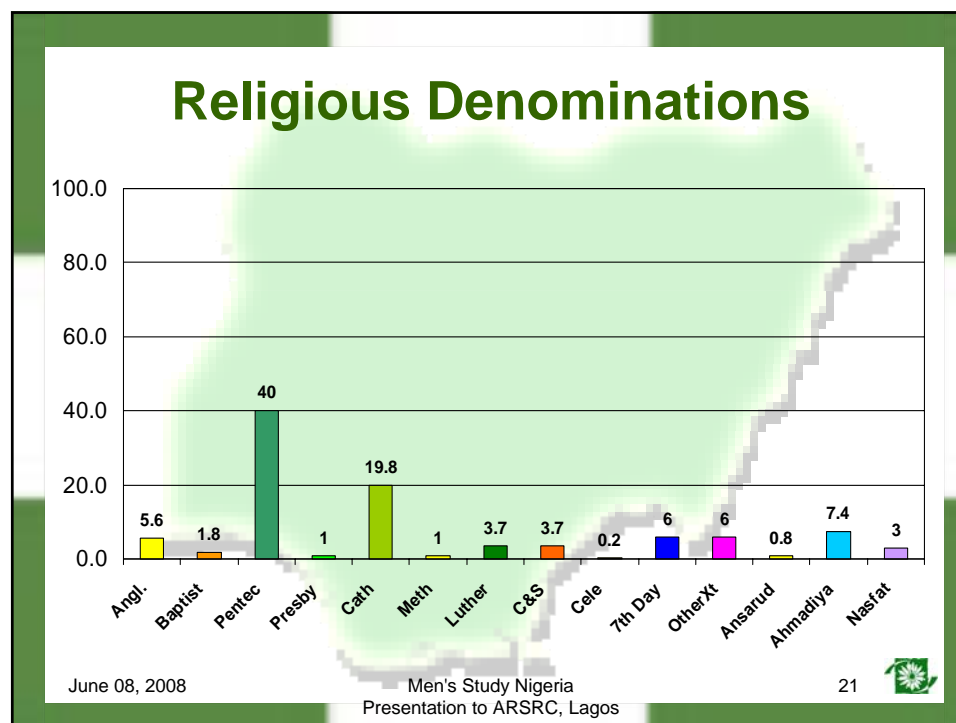


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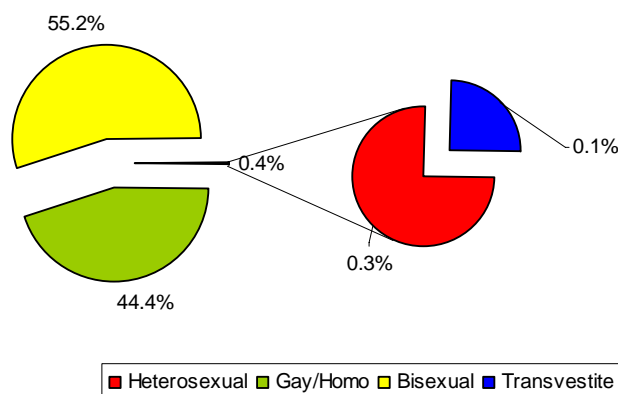


Marital Status

	N	%
Married	33	2.9
Previously Married	6	.5
Never Married	1,086	96.0

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Self-reported Sexual Identities



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First Sexual Experience

	Total Sample
Who Respondent had First Sex With?	
A man	559 (49.7%)
A woman	566 (50.3%)
Age at sexual debut	
Mean age at first sex with a man	17.57 (SD 3.95) yrs
Mean age at first sex with a woman	16.67 (SD 3.54) yrs
Duration of MSM sexual activities	
Mean	6.10 (SD 5.11) yrs
Median duration of MSM sexual activities	5 (IQR = 5) yrs

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Nationalities of Respondent's Male Partners

(n= 1125)

	Lagos	Ibadan	OR[95%CI]
Nigerian men from same ethnic groups	71.5%	81.5%	0.60[0.37-.88]
Nigerian men from other ethnic groups	76.9%	70.2%	1.33[0.97-2.08]
Black men from other African countries	12.4%	5.3%	2.54[1.22-5.26]
White men from other African countries	6.1%	2.0%	3.21[1.0-10.4]
Non-African White men	14.1%	8.6%	1.74[1.0-3.15]
Non-African Black men	6.5%	1.3%	5.18[1.26-21.3]

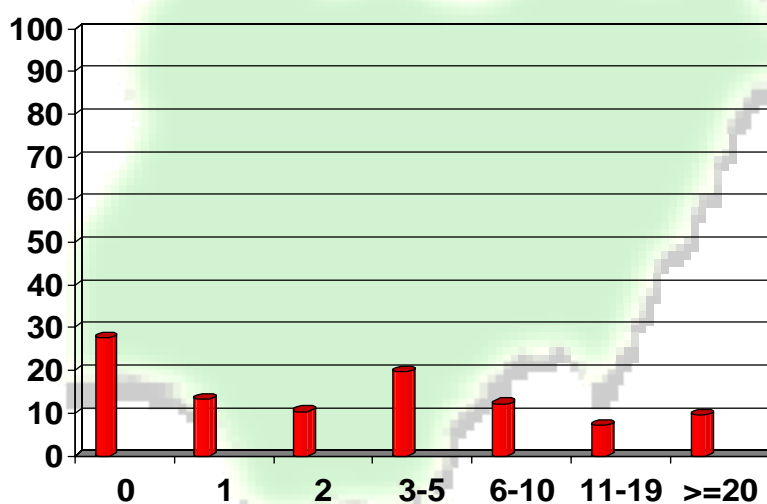
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Lifetime # of Female Sex Partners



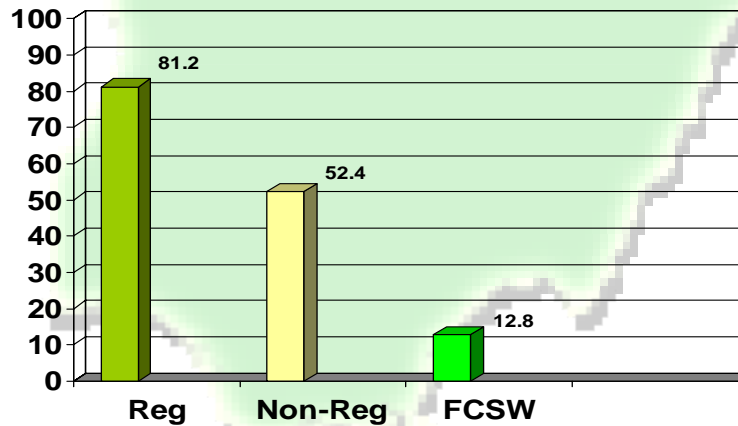
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Respondents who had *Female* Partners in Previous Year



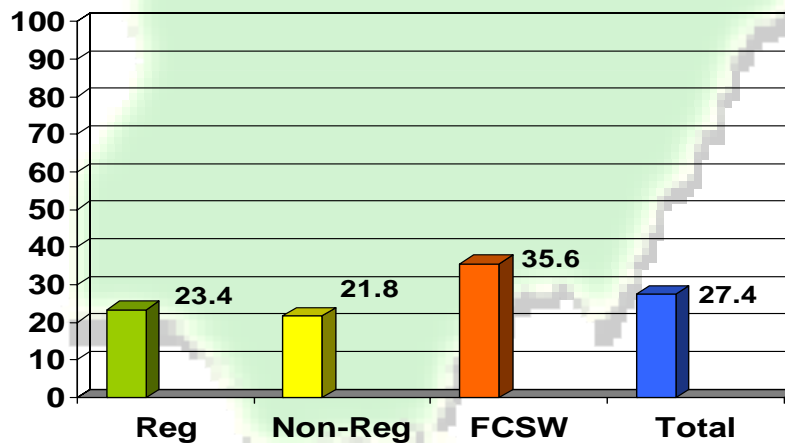
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Respondents who had Anal Sex with Female Partners Previous Yr



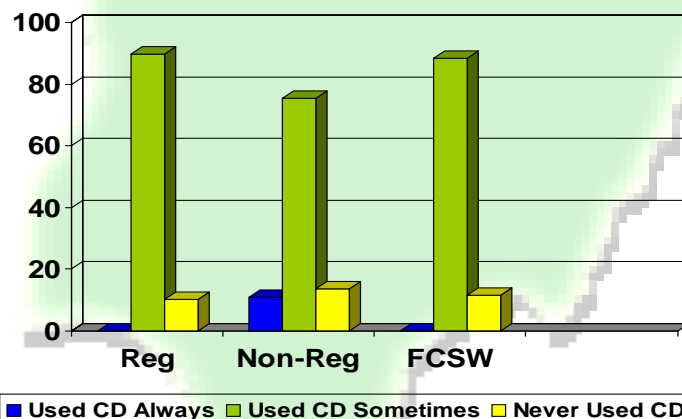
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Frequency of Condom Use for Anal Sex with Female Partners in Previous Year



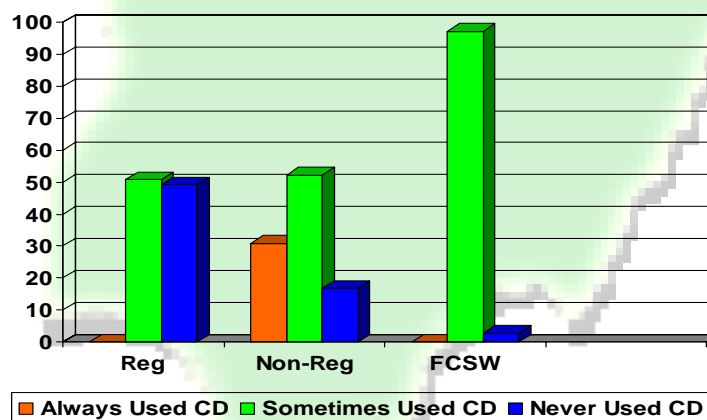
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Frequency of Condom Use for Vaginal Sex with Female Partners in Previous Year



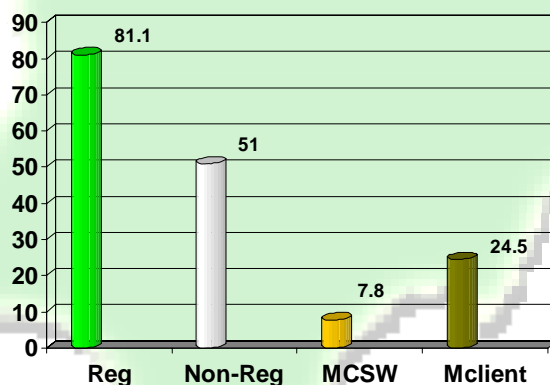
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Respondents who had Male Partners Last Year



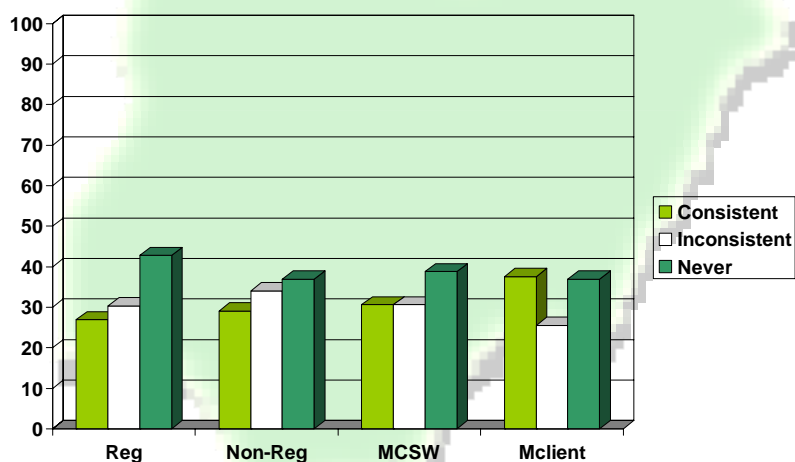
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Frequency of Condom Use during IAI with Male Partners Last Year



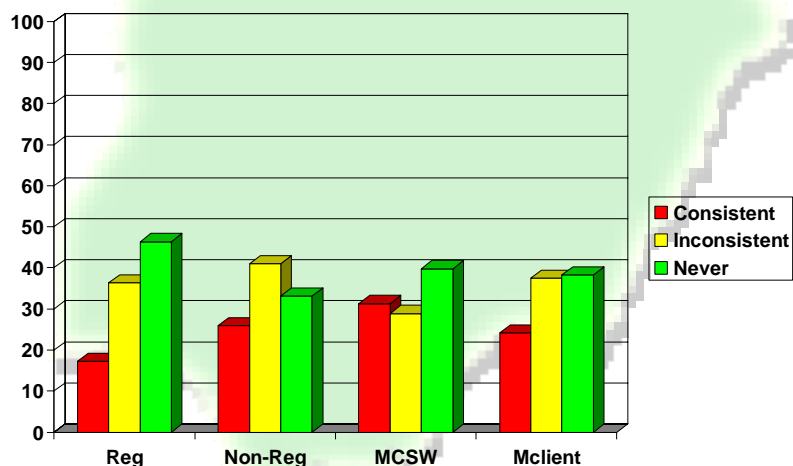
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Frequency of Condom Use during RAI with Male Partners Last Year



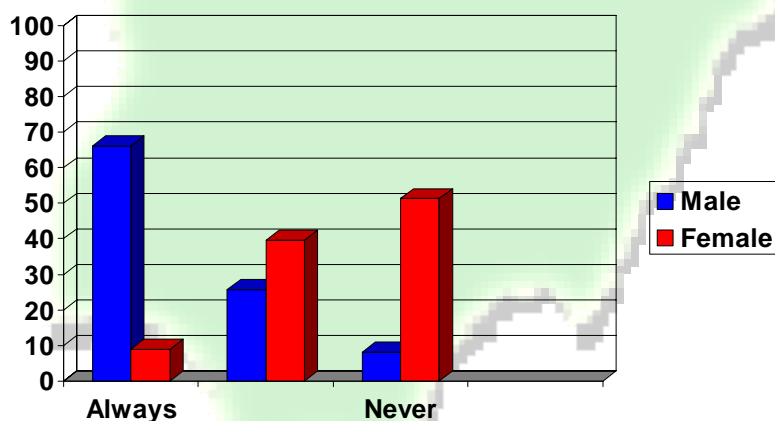
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Frequency of Lubricant use during Anal Intercourse with Sex Partners



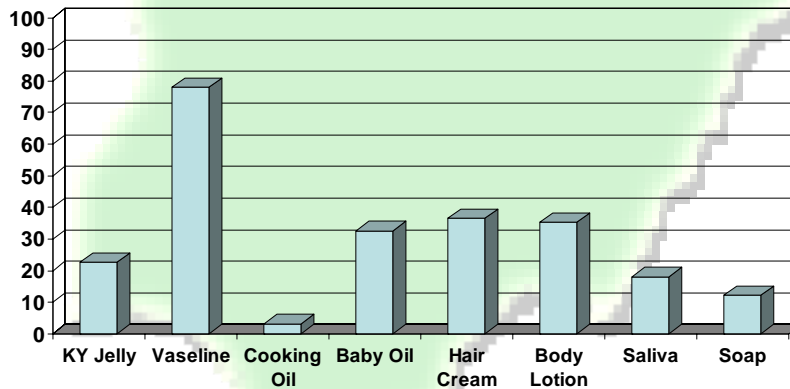
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Types of Lubricants Used by Respondents



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Some Misconceptions Respondents had about HIV

Spread of HIV is more likely from anal than vaginal sex	30%
Spread of HIV is less likely when a man has sex with other men than with women	31%
Eating healthy foods can protect against HIV	72.6%
There is a vaccine that prevents HIV	55.5%
Taking antibiotics prevents HIV	74.3%
Swimming in the same pool with an infected person can spread HIV	85.1%

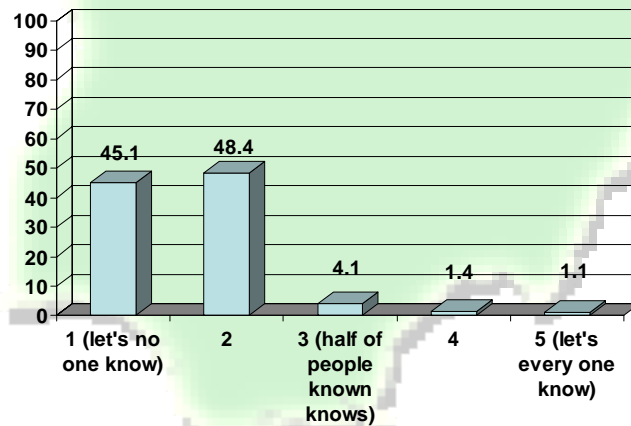
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Extent to which Respondents ("have Come Out") let others know about Sexuality



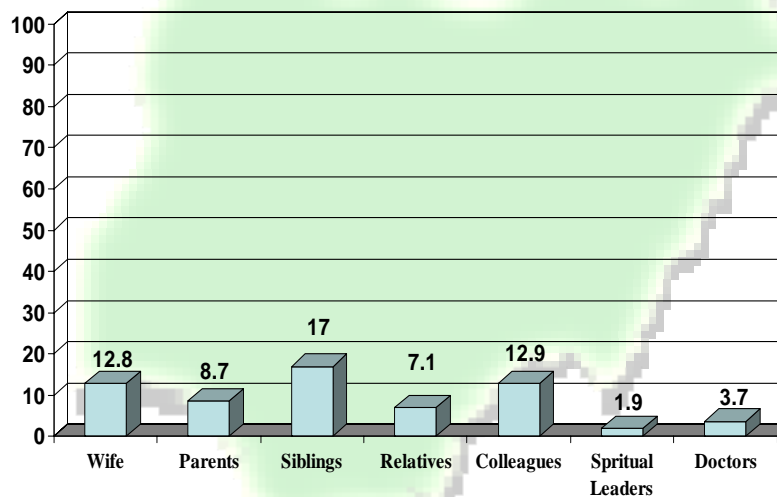
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Persons aware of Respondent's Sexualities



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Prevalence of HIV/STIs (n = 1085)

Sero-Positivity	Total	Lagos	Ibadan	OR [95%CI]
HIV	13.4%	13.6%	12.0%	1.20 [0.68-1.95]
Syphilis	0.3%	0.3%	0	0
Hepatitis B	11.7%	10.6%	18.7%	0.52 [0.33-0.82]*
Hepatitis C	3.2%	3.5%	1.3%	2.72 [0.65-11.5]

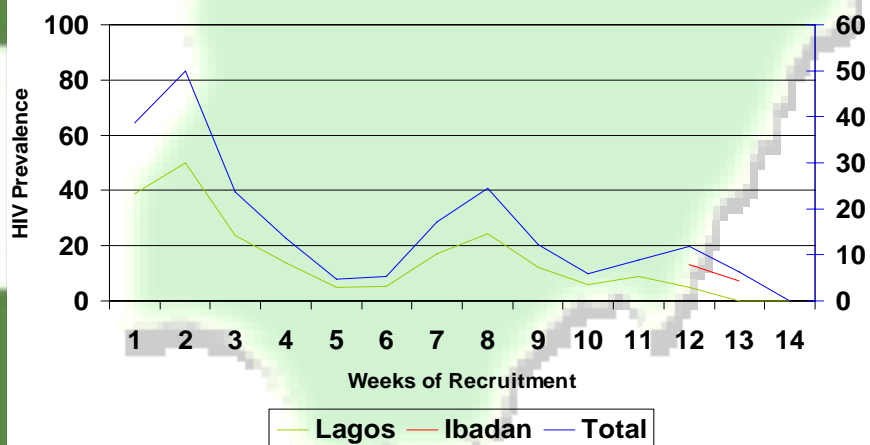
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Prevalence of HIV by Week and Site of Recruitment



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HIV Antibody Testing

	n	%
% Previously Tested for HIV (N=1125)	283	25.2
% Previously KNOWN Positive (N=1125)	10	0.9
% Testing Positive based on biological sample (N=1085)	144	13.4
% Who returned for results (N=1085)	112	10.3

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Limitations of the Study

- ❖ A single study can't say everything!
- ❖ Cross-sectional nature of the study
- ❖ Difficulty of recruitment of hard to reach population still an issue.
- ❖ No comparison group of men who are exclusively heterosexual
- ❖ Sexuality is not stationary. Generational differences/cohort differences are needed

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Conclusion

- ❖ The use of multiple sampling techniques has enabled the successful recruitment of the largest epidemiological study of 1125 MSM in SSA.
- ❖ Different recruitment methods were required to recruit a broader spectrum of men.
- ❖ This study serves as a catalyst to encourage more work on MSM in Nigeria and other countries in SSA.

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Acknowledgements

- ❖ Participants, volunteers, community organizations and staff
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- ❖ Co-investigators

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1966 - 2007