

Qualitative insights into overseas-born gay and bisexual men living in Australia from non-english speaking countries recently diagnosed with HIV

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Background:

Although HIV notifications among Australian-born gay, bisexual, and other men who have sex with men (GBM) decreased in 2019, notifications among overseas-born GBM increased. There is a need to understand the sociocultural issues affecting these increases.

Methods:

Semi-structured interviews with 24 recently-diagnosed GBM from non-English speaking countries were conducted between October 2018 and January 2020. Recruitment occurred through sexual health clinics across Sydney. Interviews were analysed thematically.

Results:

Nine participants acquired HIV in their country of birth, seven in Australia, and eight were unsure. For many, their first HIV test in Australia was their diagnosis. The main barrier to HIV testing was a low perception of risk. Some rarely had sex and described themselves as sexually conservative. Others had little engagement with gay networks and identity, so did not see themselves as part of an 'at-risk' population. Some did not test because they were anxious they had already acquired HIV and preferred not to find out, particularly if their visa status may be threatened. In the belief that sexual partners were low risk, discussion of HIV status, condoms, and PrEP was generally low. Some felt pressured to forego condoms to retain sexual currency. Similarly, relationships were an idealised trajectory, so some tended not to discuss HIV risk with partners because they feared it might present a barrier to a relationship. Many only found out about PrEP once they were diagnosed. Others believed they were too low risk to warrant a 'potentially toxic' medication.

Conclusion:

Preventing HIV in this population requires encouraging earlier HIV testing upon arrival in Australia, and prevention messaging that fosters sexual health negotiation and increases awareness of HIV generally, and PrEP. This messaging should be within and beyond gay community and tailored to the population's HIV knowledge and understandings of culture, identity, and community.

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