

UNDERSTANDING HIV RISK FACTORS AMONG BISEXUAL AND PANSEXUAL MEN IN AN AUSTRALIAN GAY COMMUNITY-CONNECTED SAMPLE

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Background:

Bisexual- and pansexual-identified men (BPM) have not been a priority in HIV prevention and research in Australia, despite increased HIV risk compared to the general population. We examined characteristics of BPM compared to gay men (GM) in the Gay Community Periodic Surveys.

Method:

We recruited men at LGBTQ venues/events and online. We included data from the last available round for participating jurisdictions. BPM and GM were compared using chi-square/t-tests.

Results:

9,300 survey responses were included (BPM=11.6%, GM=88.4%). BPM were more likely to be recruited online than GM (52.0% vs 35.3%, $p<0.001$). BPM were younger (mean=35.8 vs 38.2, $p<0.001$), more likely to be Australian-born (71.3% vs 67.1%, $p<0.001$), and less likely to be university educated (44.3% vs 58.5%, $p<0.001$) or full-time employed (49.4% vs 66.0%, $p<0.001$). BPM were less socially engaged with gay men (mean=5.1 vs 6.2, $p<0.001$). BPM had fewer male partners than GM: 23.2% vs 13.1% had none in the last 6 months ($p<0.001$); 27.9% vs 38.6% had recent condomless anal intercourse with casual male partners (CLAIC; $p<0.001$). Among BPM, 3.4% were HIV-positive, 71.0% were HIV-negative, and 25.7% were untested, compared to 7.6%, 84.1%, and 8.4% among GM ($p<0.001$). Among non-HIV-positive participants ($n=8,641$), BPM were less likely to have tested for HIV in the last year (51.4% vs 67.5%, $p<0.001$) or used PrEP (17.8% vs 33.1%, $p<0.001$). Even among those reporting CLAIC, testing (70.5% vs 89.9%, $p<0.001$) and PrEP (40.7% vs 65.3%, $p<0.001$) were lower.

Conclusion:

Although this gay community-connected sample may not be representative of BPM, we found important differences. While BPM had fewer male partners, HIV risk was potentially higher among those reporting CLAIC due to lower PrEP use. Research is needed to understand these disparities both within and outside of gay community-connected samples, along with tailored efforts to engage higher-risk BPM in testing and prevention.

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