

PREP UPTAKE IS VARIABLE AND LOW AMONG GAY, BISEXUAL, AND OTHER MEN WHO HAVE SEX WITH MEN IN FIVE ASIAN COUNTRIES: RESULTS OF THE ASIA PACIFIC MSM INTERNET SURVEY

Benjamin Bavinton¹, Adam Hill², Natalie Amos², Sin How Lim³, Thomas Guadamuz⁴, Noriyo Kaneko⁵, Martin Holt⁶, Adam Bourne²

¹ Kirby Institute, UNSW Sydney

² Australian Research Centre in Sex, Health and Society, La Trobe University

³ University of Malaya

⁴ Mahidol University

⁵ Nagoya City University

⁶ Centre for Social Research in Health, UNSW Sydney

Background:

PrEP is highly effective at preventing HIV infection among gay, bisexual, and other men who have sex with men (GBM). However, across Asia, PrEP programs are limited, and uptake is highly variable.

Methods:

An online cross-sectional survey targeting GBM in Indonesia, Japan, Malaysia, Thailand, and Vietnam was conducted from May 2020–January 2021. Factors independently associated with current PrEP use were determined by multivariate logistic regression.

Results:

We recruited 10,953 HIV-negative/untested GBM who reported ≥ 1 male sexual partners in the previous year (Japan=5,856; Vietnam=2,413; Thailand=1,172; Indonesia=930; Malaysia=582). Overall, 65.3% had heard of PrEP (Thailand=83.9%; Vietnam=74.9%; Malaysia=74.2%; Japan=63.3%; Indonesia=23.1%). 7.0% were currently using PrEP (Thailand=13.4%; Vietnam=10.7%; Malaysia=6.7%; Japan=5.2%; Indonesia=1.7%). Of the 4,368 men reporting any condomless anal intercourse with casual partners (CLAIC) in the previous year, 10.9% were current PrEP-users (Thailand=24.0%; Vietnam=15.2%; Malaysia=14.7%; Japan=8.9%; Indonesia=2.6%). One-quarter of 989 PrEP-experienced respondents stated COVID-19 had made it harder to access PrEP (Indonesia=64.0%; Malaysia=37.7%; Thailand=36.4%; Japan=21.1%; Vietnam=16.8%). Compared to non-PrEP-users, current PrEP-users were more likely to have higher income (adjusted odds ratio/AOR=2.29, 95% confidence interval/CI=1.57-3.35, $p < 0.001$), > 20 male partners (AOR=2.36, 95%CI=1.74-3.21, $p < 0.001$), group sex (AOR=1.84, 95%CI=1.51-2.23, $p < 0.001$), HIV and STI testing in the previous year (AOR=5.4, 95%CI=4.07-7.17, $p < 0.001$ and AOR=2.86, 95%CI=2.23-3.68, $p < 0.001$, respectively), and experienced stigma in healthcare settings (AOR=1.43, 95%CI=1.03-1.99, $p = 0.032$). They were less likely to be bisexual-identified (compared to gay-identified; AOR=0.77, 95%CI=0.59-0.99, $p = 0.039$). STI diagnosis in the previous year, education, and age were not associated with current PrEP use.

Conclusion:

Although slightly higher among those at elevated risk, PrEP use overall was very low. Challenges in improving awareness of PrEP remain, especially in Indonesia. COVID-19 had disrupted access for some. It is critical that PrEP be scaled up consistently across Asia and steps taken to address sexuality-related stigma in healthcare settings.

Disclosure of Interest Statement:

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