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- Carney, P. (2015, December). *Project SYNC (Sex among Youth in Nassau County): Strategies for Intervention*. Paper presented at the Hofstra University and Pride for Youth Ending the AIDS Epidemic Symposium, Hempstead, NY.

# Ending the AIDS Epidemic by 2020:

## *Project SYNC -- Determining Risk Factors and Barriers to Engagement for Young MSM in Nassau County*





Department  
of Health

GET TESTED.  
TREAT EARLY.  
STAY SAFE.

**End AIDS.**

[health.ny.gov/ete](http://health.ny.gov/ete)



# Ending the Epidemic: From Blueprint to Action

GET TESTED.  
TREAT EARLY.  
STAY SAFE.

**End AIDS.**

[health.ny.gov/ete](http://health.ny.gov/ete)



December 6, 2015



**Department  
of Health**

**AIDS  
Institute**

• HIV/AIDS • STD • VIRAL HEPATITIS • LGBT HEALTH • DRUG USER HEALTH •



**Governor Andrew Cuomo  
announcing his new initiative to  
combat the AIDS epidemic  
before the  
2014 NYC Gay Pride Parade.**

*Credit: Michael Appleton for The New York Times*

# Defining the End of AIDS

## Goal

**Reduce from 3,000 to 750 new HIV infections  
per year by the end of 2020.**

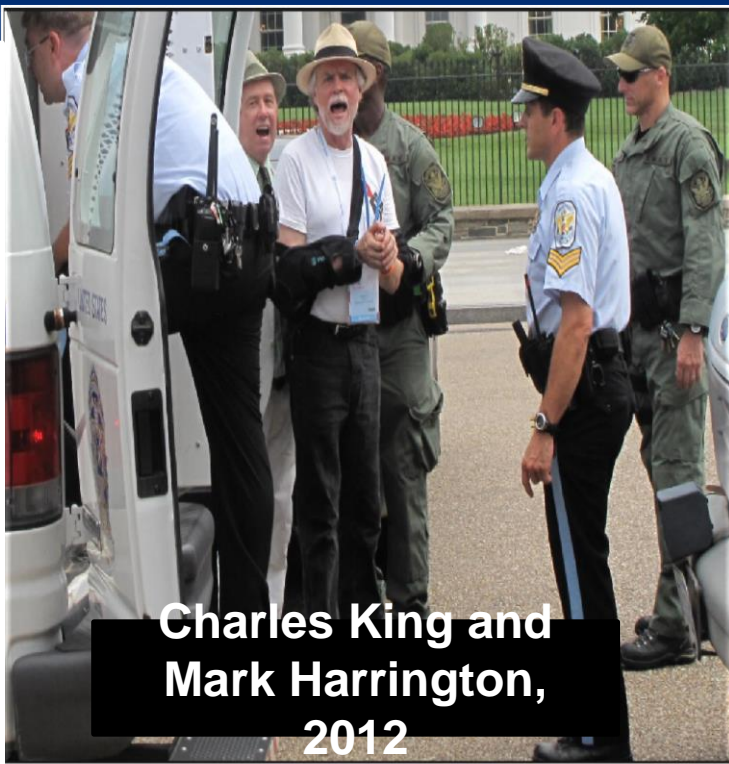
### Three Point Plan

1. Identify all persons with HIV who remain undiagnosed and link them to health care.
2. Link and retain those with HIV in health care, to treat them with anti-HIV therapy to maximize virus suppression so they remain healthy and prevent further transmission.
3. Provide Pre-Exposure Prophylaxis for persons who engage in high risk behaviors to keep them HIV negative.

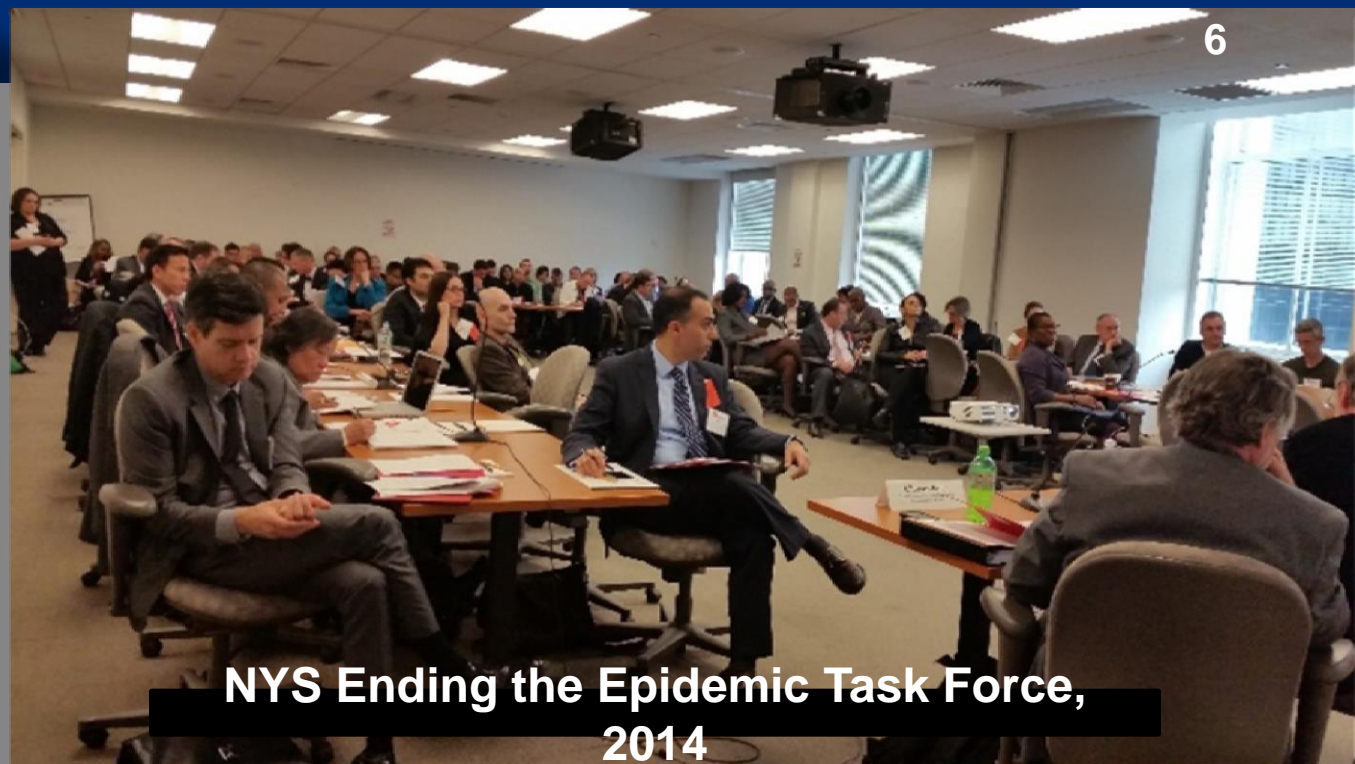


**Genesis  
of  
Ending  
the  
AIDS**

**Epidemic  
in  
NYS**



**Charles King and  
Mark Harrington,  
2012**



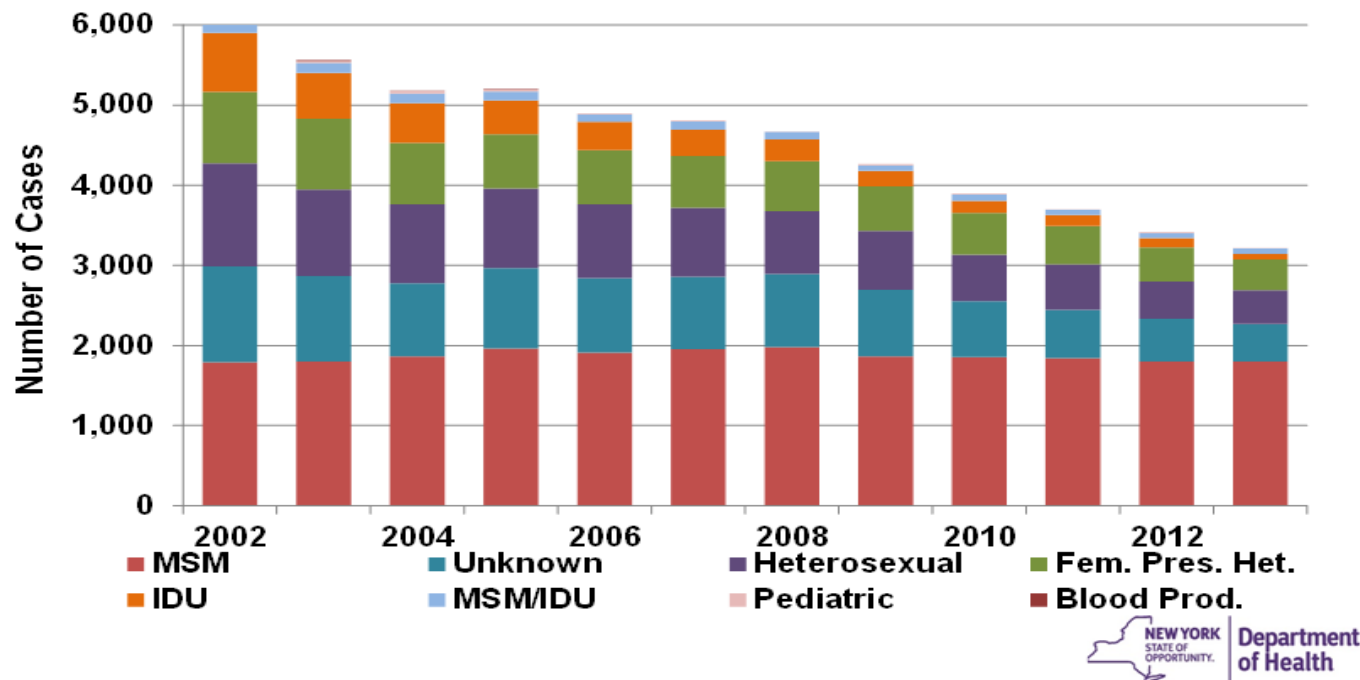
**NYS Ending the Epidemic Task Force,  
2014**



**Governor Andrew M. Cuomo accepting the NYS Ending the Epidemic  
Blueprint, 2015**

# Key Populations

**Newly Diagnosed HIV Cases by Year of Diagnosis and Transmission Risk, New York State, 2002-2013\***



The Task Force ensured that prioritizing the needs of key populations significantly impacted by HIV and AIDS became a central component of the final ETE Blueprint document.

Data as of February 2015; data for 2013 are provisional

NYS DOH/AI/BHAE




# Cuomo Announces Protections for Transgender New Yorkers

- On October 22, 2015 Governor Cuomo announced new regulations to protect all transgender New Yorkers from discrimination.
- The Governor will instruct state agencies and introduce regulations to prohibit harassment and discrimination on the basis of transgender identity, gender expression, and gender dysphoria in the areas of public and private housing, employment, credit, education and public accommodations.

Join the AIDS Institute of the New York State Department of Health and the Empire State Pride Agenda for a two-day health symposium  
Day 1 will focus on transgender health and  
Day 2 on the intersections of LGBT health and human services and HIV prevention




**July 13-15, 2015**  
**Hilton Garden Inn, Troy, New York**



Keynotes: Cara Page Scout, PhD Carrie Davis, MSW Kenyon Farrow

Registration is free. A limited number of travel scholarships are available for those who are not AIDS Institute grantees.

**To register, please visit**  
**[prideagenda.org/LGBTHealth](http://prideagenda.org/LGBTHealth)**

 Department of Health  AIDS Institute 

Held Transgender Health Symposium July  
13-15, 2015



Igniting Equality.  
Advancing Justice.





# Article VII Amendments

## Article VII

### 2014 - 2015 Amendments

- Elimination of written consent for HIV testing.
- Expand data sharing between state and local health departments and health care providers for linkage and retention efforts.
- Implementation of a “30% rent cap” affordable housing protection. This includes \$27 million a year new money for State and City.

## Article VII

### 2015 - 2016 Amendments

- Elimination of written consent for HIV testing in correctional facilities.
- Limiting the admission of condoms in criminal proceedings for misdemeanor prostitution offenses.
- Addressing the legality of syringes obtained through syringe exchange programs.

# The Investment

**\$10 Million towards Ending the Epidemic services and expenses in the 2015-2016 Budget**

**NYS continues its more than \$2.5 billion a year investment in HIV care, support and prevention services**

**Governor Commits an Additional \$200 Million to Support HIV/AIDS Efforts – November 30, 2015**

For Immediate Release: 11/30/2015



GOVERNOR ANDREW M. CUOMO

**GOVERNOR CUOMO ANNOUNCES NEXT PHASE OF STATE'S PLAN TO END THE AIDS EPIDEMIC**

***Governor Commits an Additional \$200 Million to Support HIV/AIDS Efforts, Supplementing the \$2.5 Billion the State Currently Directs to Address HIV/AIDS***

***Governor Also Calls on Federal Government for Additional Support to Address HIV/AIDS***

***Milestones Reached: No New Cases of Mother to Child Transmission in More Than a Year; State Cited as National Leader in Expanding Use of Medication to Prevent New Infections***

# Council Details \$6.6 Million in Funding for Plan to End AIDS

November 23, 2015

“Moving on the Plan to End AIDS, the City Council will spend \$6.6 million to fund pre-exposure and post-exposure prophylaxis programs and efforts to aid people with HIV in staying on anti-HIV drugs so they remain non-infectious.”

<http://gaycitynews.nyc/council-details-6-6-million-plan-end-aids/>



City Councilmember Corey Johnson, the chair of the Health Committee. | DONNA ACETO

# New and Expanded Programs

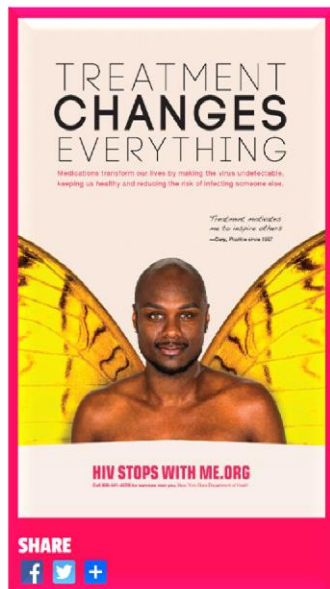
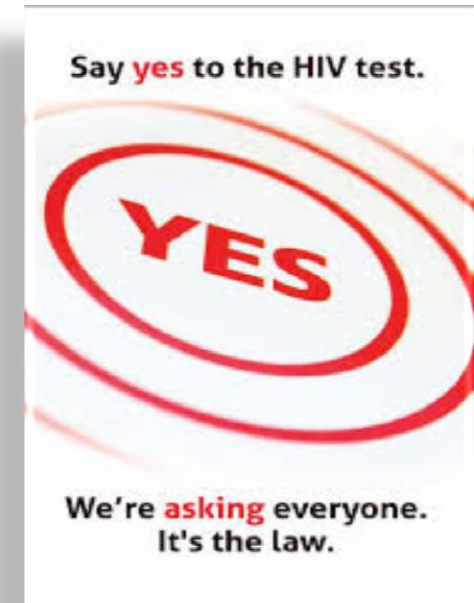
- **NY Links**, improves systems for linking to and retention in care.
- **Expanded Partner Services Program (ExPS)** uses HIV surveillance data to identify and re-engage individuals in medical care.
- The **Linkage, Retention and Treatment Adherence Initiative** facilitates patient entry into treatment, promotes adherence to antiretroviral treatment (ART), and viral suppression.
- **Positive Pathways**, working with HIV-positive incarcerated persons to encourage the initiation of medical care.
- Development of a **Peer Certification** program for persons with HIV/AIDS.
- **Hospital reviews** for HIV testing conducted by IPRO.
- Utilize the **new HIV testing algorithm** to diagnose asymptomatic early HIV infections.
- Use of **surveillance data** for both Medicaid and DOCCS matches.
- **New syringe exchange program sites** and use of peers to work with young injectors.
- Expand **targeted health care services** to young MSM and transgender persons.
- **PrEP RFA** to fund the linkage of up to 1,000 people from the populations at greatest risk for HIV/AIDS to PrEP.
- January 1, 2015 start up of **PrEP – AP** to provide reimbursement for necessary primary care services for eligible individuals.
- Use of targeted **social marketing and messaging** efforts to identify persons with HIV.



# Advancing the Plan

## NYS Intensifies actions to ensure compliance with the HIV testing law

State is reviewing thousands of patient admission records across hospital emergency departments to ensure compliance with the mandatory offer of HIV testing to individuals ages 13-64.



## NYS Launches Medicaid Managed Care Program to Promote Patient Linkage and Retention in Care

6,000 HIV positive patients into care and provide support to achieve viral suppression

# What is Harm Reduction?

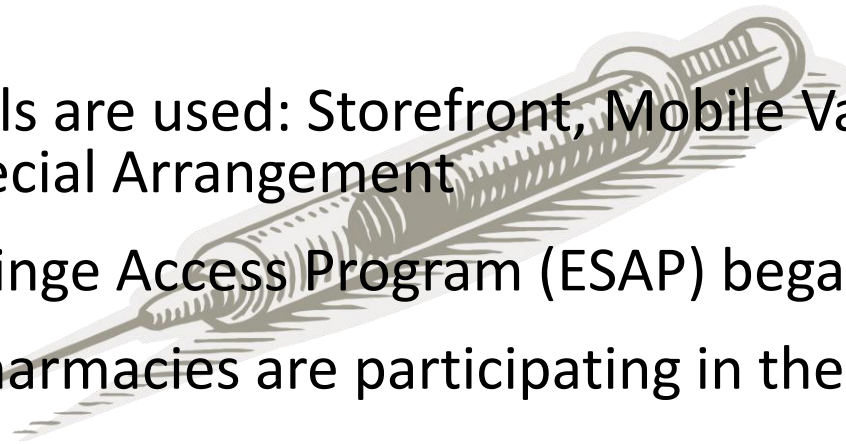
Harm reduction is a process which seeks over time to **reduce personal risk**, with the ultimate goal of optimal health outcomes based on individual circumstances.

Harm reduction programs offer interventions which **maximize risk reduction** when absolute risk elimination is not a current option.



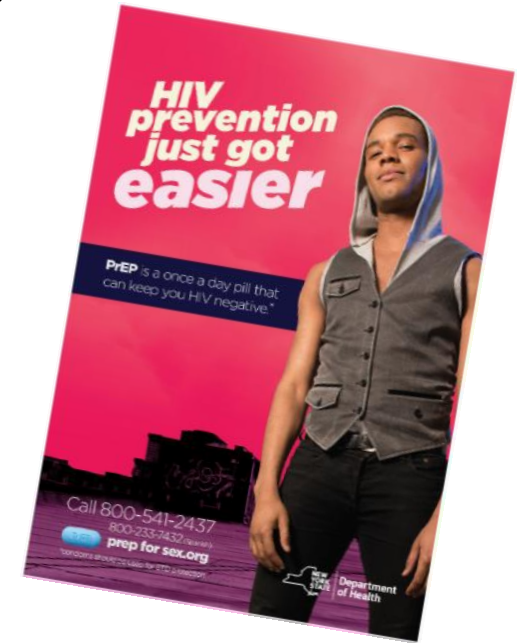
# Syringe Access in New York State

- Syringe Exchange Programs (SEPs) first authorized in 1992
- 24 Authorized Syringe Exchange Programs in NYS (14 in NYC and 10 elsewhere)
- Various models are used: Storefront, Mobile Van, Peer Delivered Syringe Exchange, Special Arrangement
- Expanded Syringe Access Program (ESAP) began January 2001
- Over 3,000 pharmacies are participating in the Expanded Syringe Access Program
- Approximately 8 million syringes furnished annually through the SEPs and ESAP.



# Current PrEP Initiatives

- ✓ PrEP Education Campaign: “**HIV Prevention Just Got Easier**”
- ✓ Implementation of a **PrEP pilot** in six sites
- ✓ Enhancements to 23 provider contracts to include on-site **PrEP Specialists**
- ✓ \$1 Million to fund “**One Stop STD Clinics**” in NYC
- ✓ \$3 million directed toward **linking up to 1,000 people** from the populations at greatest risk for HIV/AIDS to PrEP
- ✓ A Community Health Center **survey on PrEP** is underway



[www.prepforsex.org](http://www.prepforsex.org)



# What is PEP?

PEP (post-exposure prophylaxis) is medicine that you can take if you are HIV-negative and you believe you have just been exposed to HIV. If you take PEP as directed, it can stop the HIV virus from infecting your body.

Individuals assessed for nPEP should also be assessed for PrEP.



Save this information  
to your mobile device  
in case of emergency.

[www.hivguidelines.org/what-is-pep](http://www.hivguidelines.org/what-is-pep)



## PEP

**Sex Condom?**

**Don't Know Partner's HIV Status?**

**WHAT IS PEP?**

PEP (post-exposure prophylaxis) is medicine that you can take if you are HIV-negative and you believe you have just been exposed to HIV. If you take PEP as directed, it can stop the HIV virus from infecting your body.

**Do not delay. You need to take PEP as soon as possible after the exposure.**

**I MIGHT HAVE BEEN EXPOSED TO HIV... WHAT SHOULD I DO?**

Exposure to HIV is a Medical Emergency. You may be able to stop the infection by taking PEP.

**Emergency Room 24 Hours For Medicine (Post-Exposure Prophylaxis or PEP) to Prevent HIV Infection.**

[health.ny.gov/pep](http://health.ny.gov/pep)

Save this information to your mobile device in case of emergency.

[www.hivguidelines.org/what-is-pep](http://www.hivguidelines.org/what-is-pep)

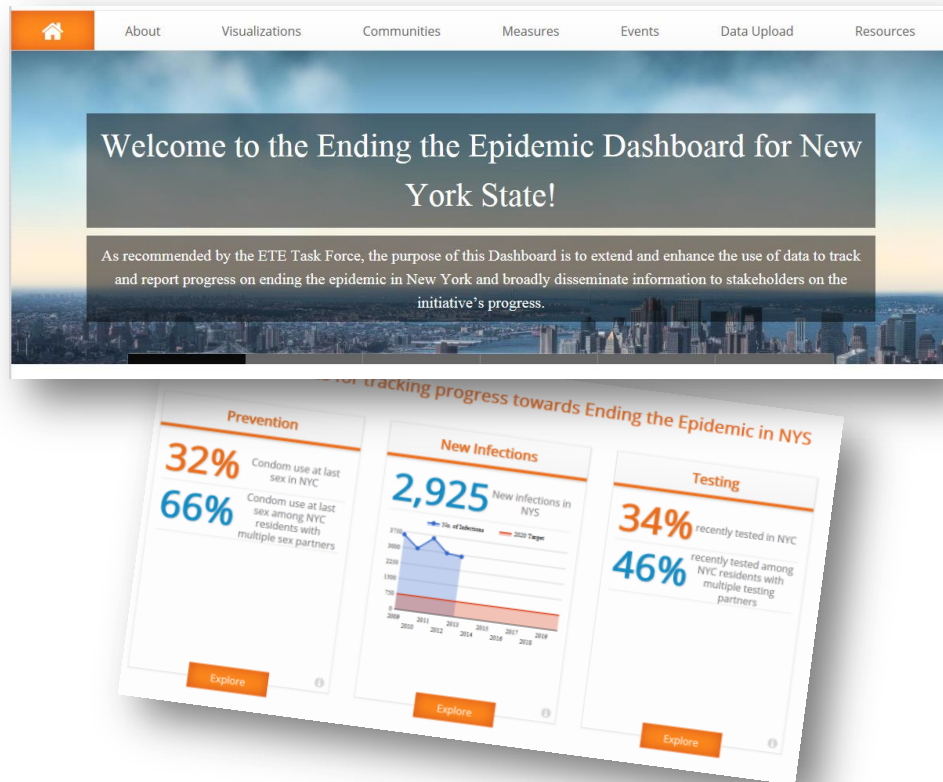
NEW YORK STATE DEPARTMENT OF HEALTH AND THE NEW YORK CITY DEPARTMENT OF HEALTH AND MENTAL HYGIENE

- ❑ Since January the program has received 249 applications for coverage.
- ❑ Uptake on enrollment has steadily increased and as word of mouth spreads, requests from providers for in-service training are increasing.
- ❑ 52 providers with 107 sites are enrolled, 57 labs are enrolled.
- ❑ PrEP-AP participant demographics indicate that 81% of enrollees are uninsured, 96% are male, 67% are 35 years of age or younger with 15% younger than 25.
- ❑ 81% of enrollees are from New York City, 34% are white, 41% Latino, 7% African American and 9% Asian.
- ❑ Most, 92%, are single and most, 74%, have incomes above 100% of the federal poverty level.

*PrEP-AP is serving a younger, slightly higher income and predominantly uninsured group of people.*

## NYS PrEP Assistance Program (PrEP-AP)

# ETE Dashboard – Now Live!



- Key metrics will be systematically tracked at the state and local levels, with publicly available results.
- HIV prevention, HIV incidence, testing, new diagnoses and linkage, prevalence and care, AIDS diagnoses, and deaths compiled from various data sources and presented in one place.
- **ETEDASHBOARDNY.ORG**

# Implementation: AAC ETE Subcommittee

**AIDS Advisory Council (AAC) Ending the Epidemic (ETE) Subcommittee:** The Subcommittee will ensure on-going formal involvement of the AAC in follow-up and recommendations on the implementation of the Ending the Epidemic Task Force (ETE TF) recommendations.

- 16 Members: The selection of members to the Subcommittee was conducted as part of the completion of the work of the ETE TF and is representative of each ETE TF Committee
- Bi-Monthly meetings
- Co-Chairs: Charles King, President and CEO, Housing Works, Inc.  
Marjorie Hill, PhD, CEO, Joseph Addabbo Family Health Center
- Ending the Epidemic Website:  
<https://health.ny.gov/EndingtheEpidemic>





# NYS Regional Discussions

- Receive updated information about HIV/AIDS in your region/borough.
- Provide input on identified service gaps in your region/borough.
- Participate in regional/borough discussions about ending the epidemic.



## NYS Regional Discussion Dates

<input checked="" type="checkbox"/>	Syracuse	August 3
<input checked="" type="checkbox"/>	Buffalo	August 12
<input checked="" type="checkbox"/>	Rochester	August 13
<input checked="" type="checkbox"/>	Albany	August 18
<input checked="" type="checkbox"/>	Hudson Valley	August 24
<input checked="" type="checkbox"/>	Bronx	August 31
<input checked="" type="checkbox"/>	Manhattan, Upper	September 21

Manhattan, Lower	September 22 <input checked="" type="checkbox"/>
Brooklyn	September 24 <input checked="" type="checkbox"/>
Queens	October 13 <input checked="" type="checkbox"/>
Staten Island	October 14 <input checked="" type="checkbox"/>
Nassau County	November 12 <input checked="" type="checkbox"/>
Suffolk County	November 13 <input checked="" type="checkbox"/>



# Blueprint Alignment with NHAS 2020

## NATIONAL HIV/AIDS STRATEGY for the UNITED STATES:

UPDATED TO 2020

JULY 2015



## STRATEGY GOALS

1. Reduce New Infections
2. Increase Access to Care and Improve Health Outcomes for People Living with HIV
3. Reduce HIV-Related Health Disparities and Health Inequities
4. Achieve a More Coordinated National Response to the HIV Epidemic

## POLICY AND ACTION

“Several jurisdictions have, through focused efforts, seen decreasing trends in HIV, including the States of New York and Massachusetts and the cities of San Francisco and Los Angeles. In addition, some States and local areas have put forth their own plans to “end AIDS,” such as **New York State**, Washington State, and San Francisco.” – NHAS 2020 Pg. 17

<https://aids.gov/federal-resources/national-hiv-aids-strategy/nhas-update.pdf>



# POZ Survey Says...

POZ magazine surveyed 148 individuals about their thoughts on current Ending the AIDS Epidemic initiatives happening in places like New York, Minnesota and Washington. Here are some of their responses.



**49%** of you were aware that New York, Minnesota and Washington had announced plans to end the AIDS epidemic in their states.

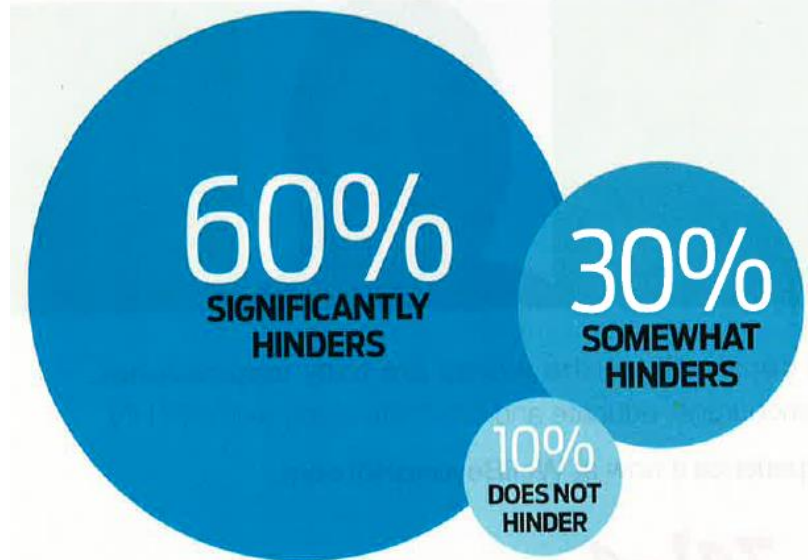


**40%** believe these initiatives to end the AIDS epidemic will be successful.

IF AN INITIATIVE TO END THE AIDS EPIDEMIC WERE ANNOUNCED IN YOUR STATE, HOW LIKELY WOULD YOU BE TO ADVOCATE ON ITS BEHALF?



How much do you think HIV-related stigma hinders your state's ability to end the AIDS epidemic?



**Karen Hagos**  
**[Karen.Hagos@health.ny.gov](mailto:Karen.Hagos@health.ny.gov)**

**<https://health.ny.gov/EndingtheEpidemic>**

**<https://health.ny.gov/ete>**

**<http://ETEdashboardNY.org>**



# Project SYNC

(Sex among Youth in Nassau County)  
**Research Findings**

**Anthony J. Santella**

December 4, 2015



**This project was funded by the Hofstra University  
Office of the Provost LGBTQQIA Research Grant**

# Acknowledgements

- **Hofstra University**

- Sarah Novak, PhD
- Eugenia Boye-Codjoe
- Craig Dalton, PhD
- Citadel Meija
- Neena Samuel
- *MPH Program*
- *National Center for Suburban Studies*
- *Office of the Provost*

- **Pride for Youth/LICC**

- Pete Carney
- Victor Granados
- Mario Manaseri
- Fran Karliner



# Methods

- 78-item online survey instrument developed from:
  - National HIV Behavioral Surveillance Survey (U.S.)
  - Youth Risk Behavioral Surveillance Survey (U.S.)
  - Gay Community Periodic Survey (Australia)
- Respondents participated by:
  - Social media (Facebook, Grindr, and others)
  - In-person sessions on I-Pad
  - Computers at PFY
- Data collection took place from June-August 2015
- Data cleaned and analyzed
  - Total sample = 215 (258 - 39 incomplete - 4 non NY zip codes)
    - Keep a dozen NY zip codes (college?)



# Online Surveys

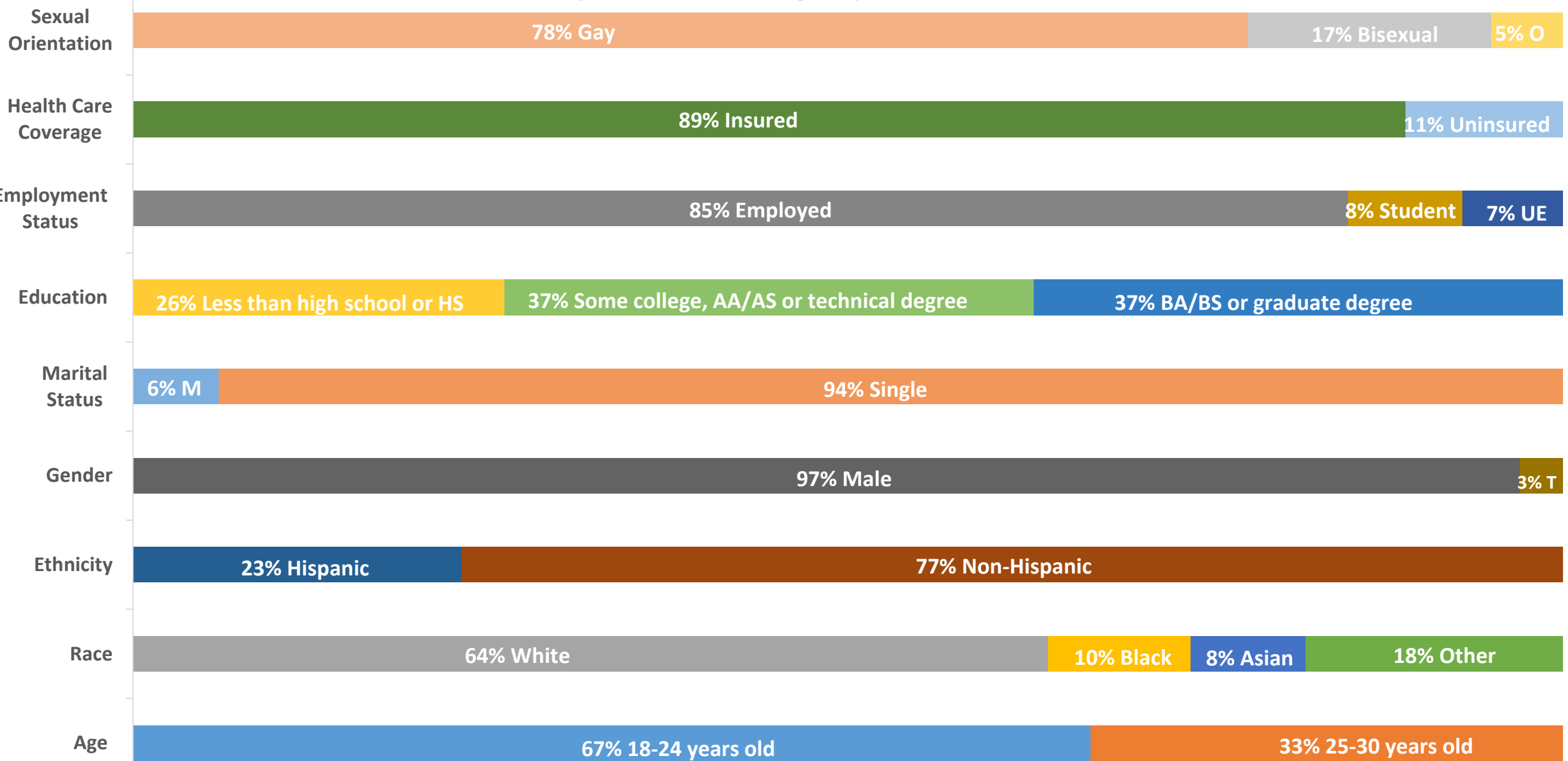
- **Advantages:**

- Low costs
- Automation and real-time access
- Less time needed
- Convenience for respondents
- Design flexibility, surveys can be programmed even if they are very complex.
- No interviewer, respondents may be more willing to share information

- **Disadvantages:**

- Limited sampling and respondent availability
- Possible cooperation problems
- No interviewer, respondents cannot be probed

# Participant Demographics (N=215)

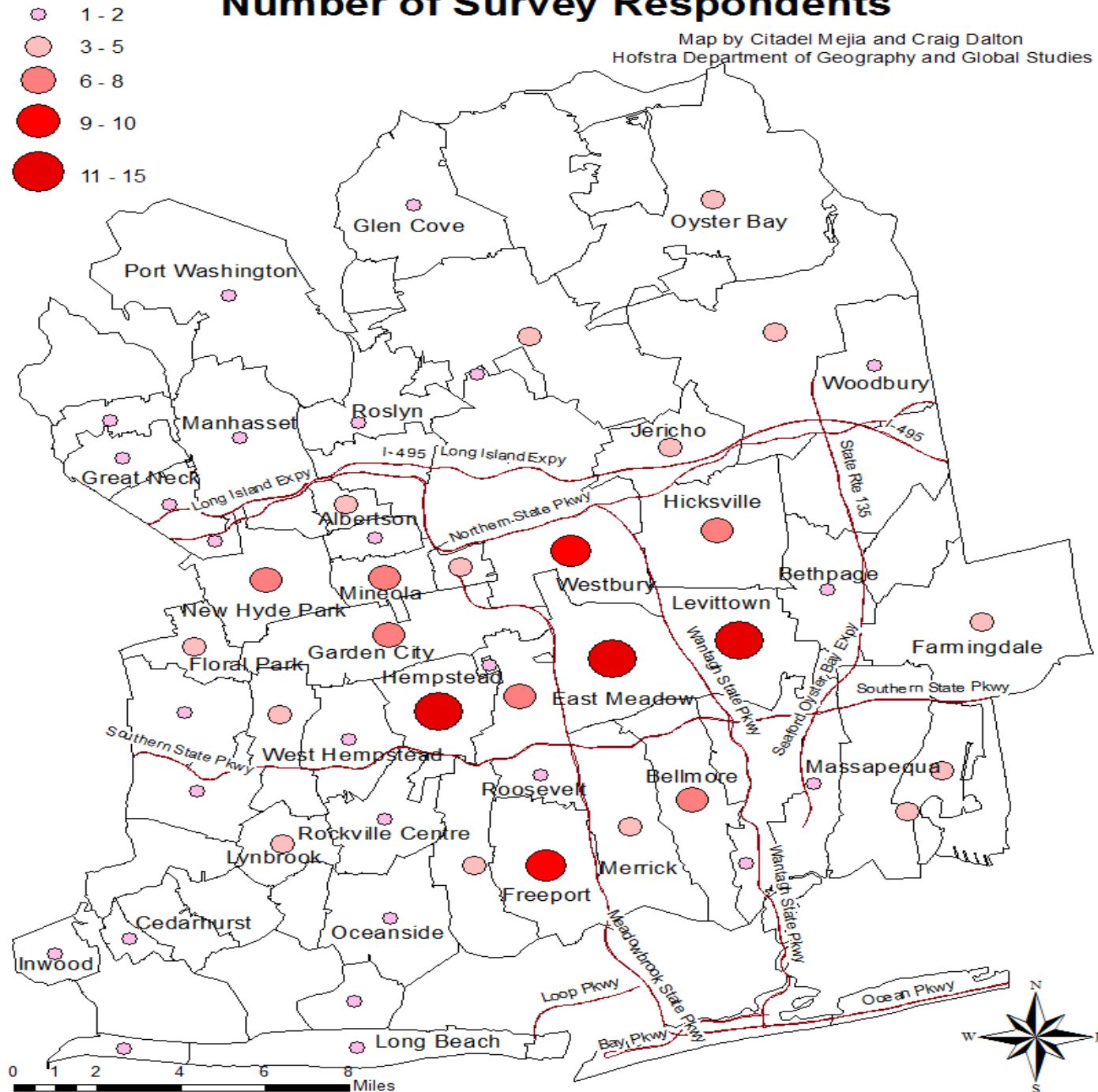


O = Other, UE = Unemployed, M = Married, T= Trans

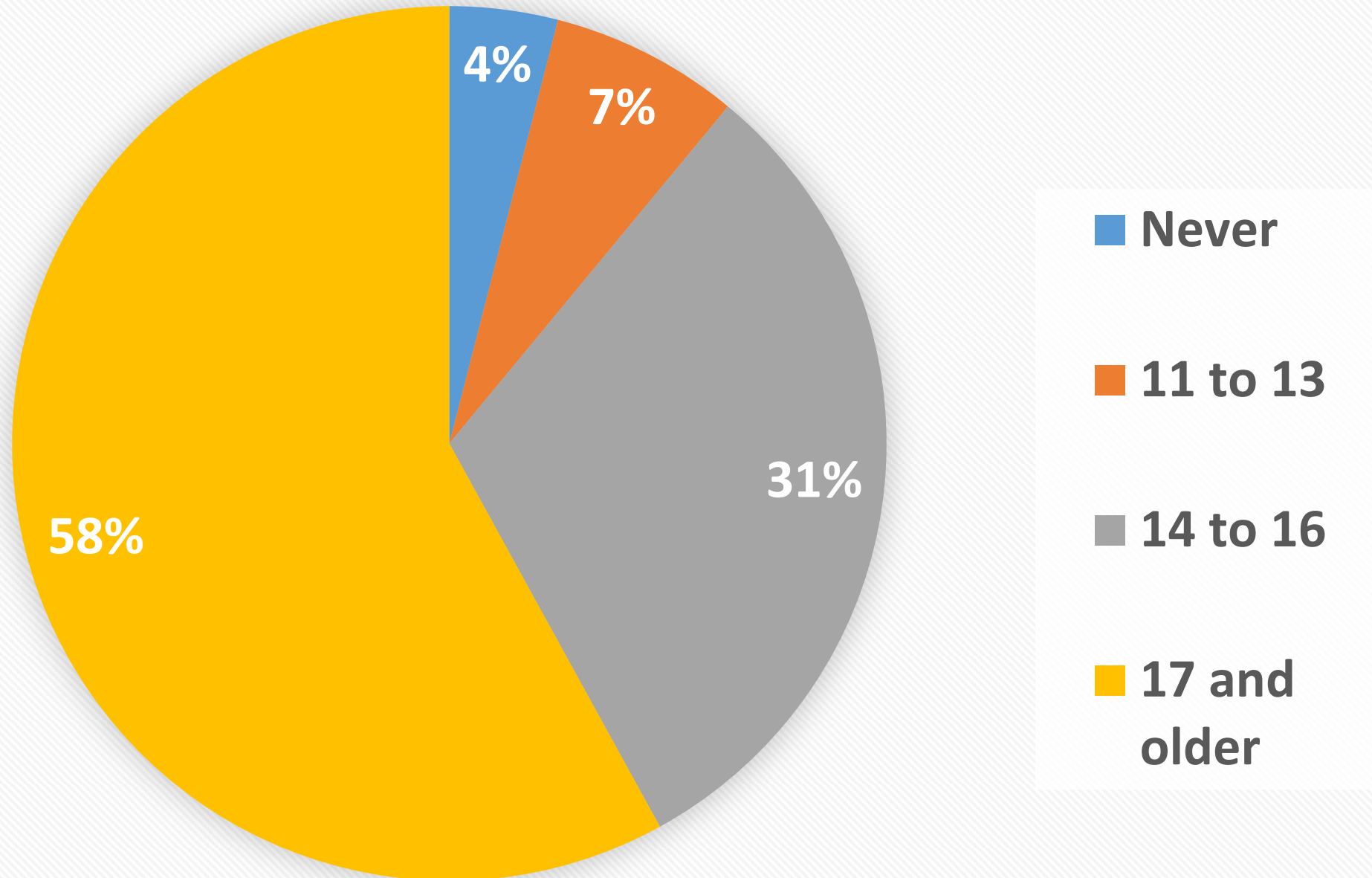


# Number of Survey Respondents

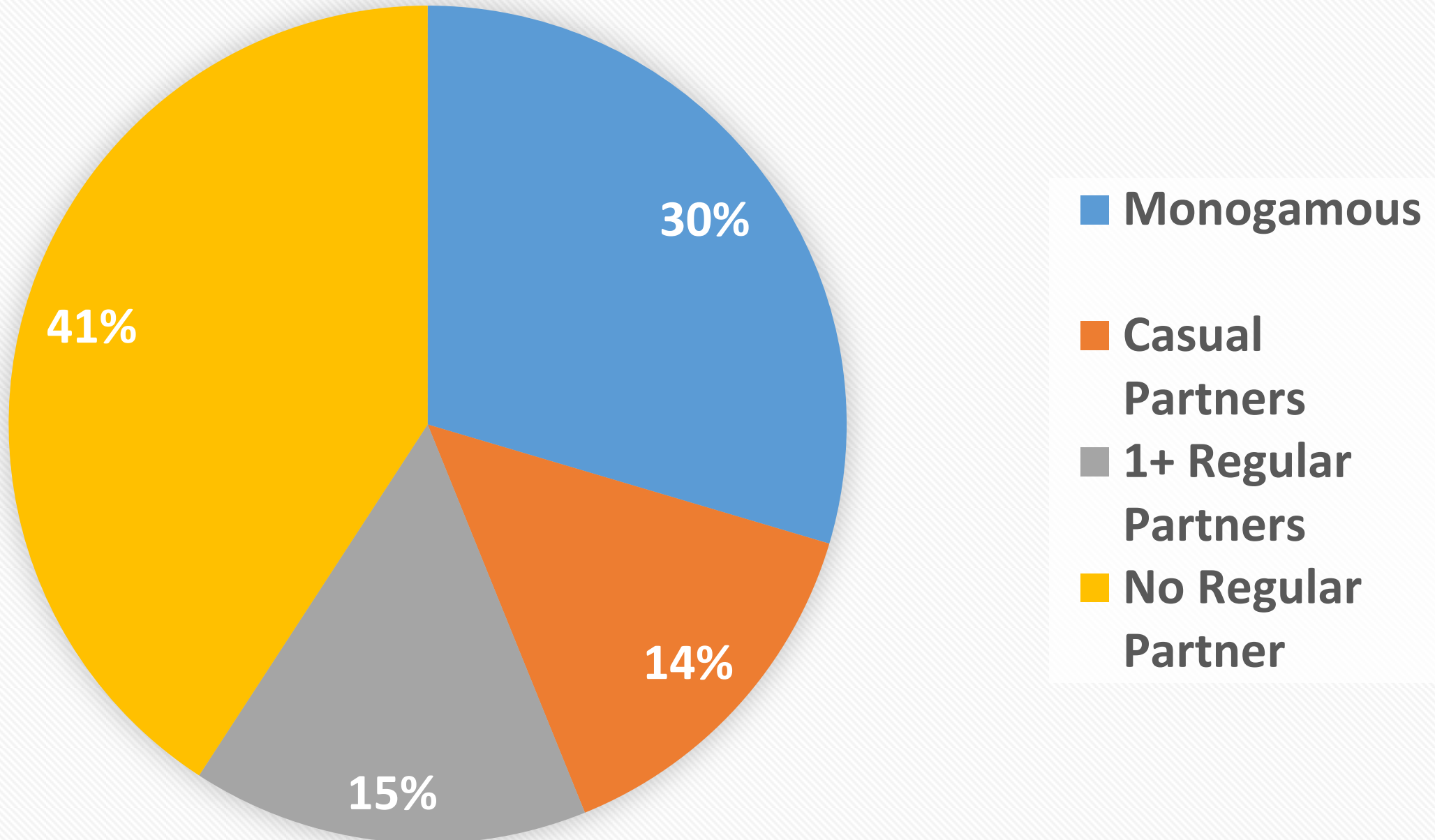
Map by Citadel Mejia and Craig Dalton  
Hofstra Department of Geography and Global Studies



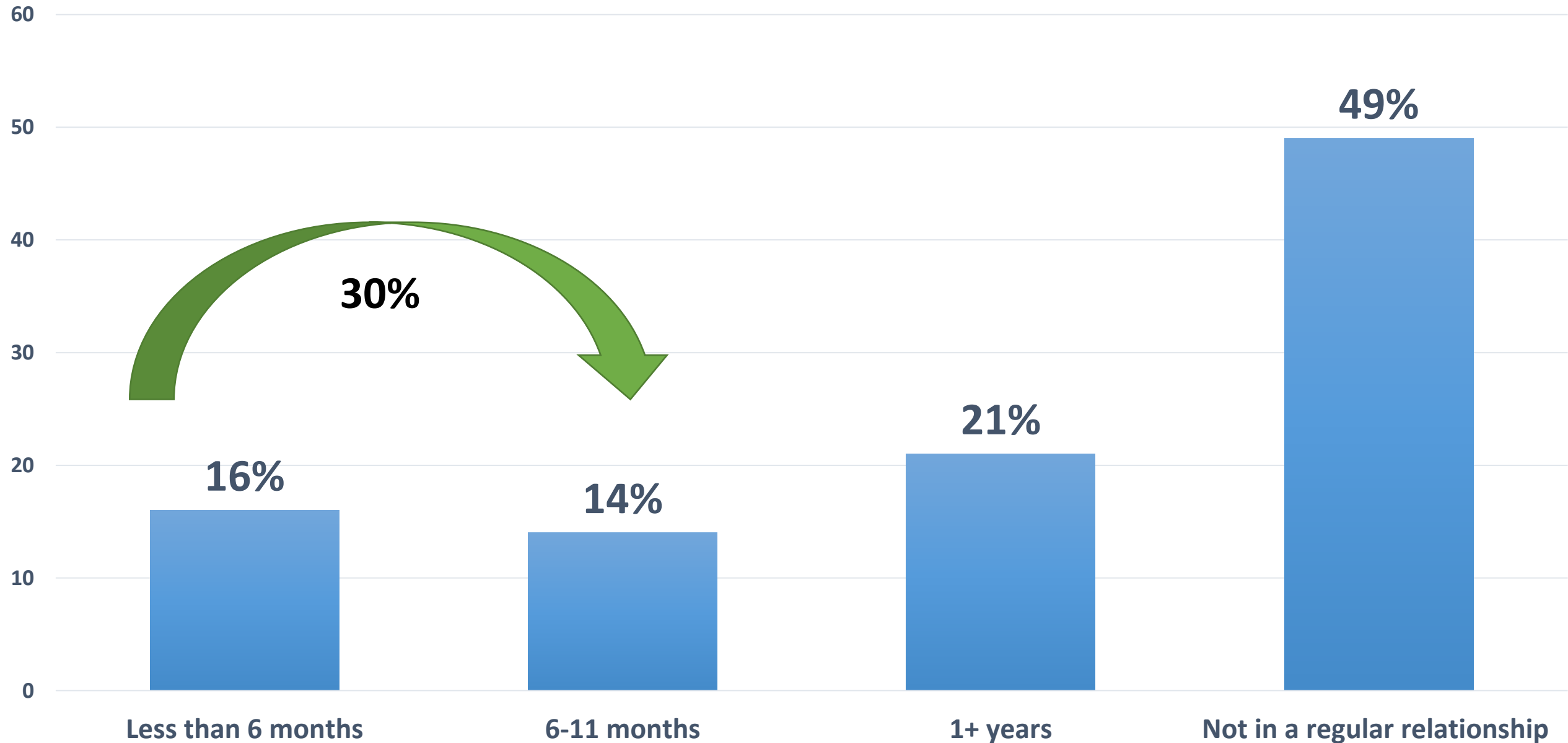
## How old were you when you had anal sex for the first time?



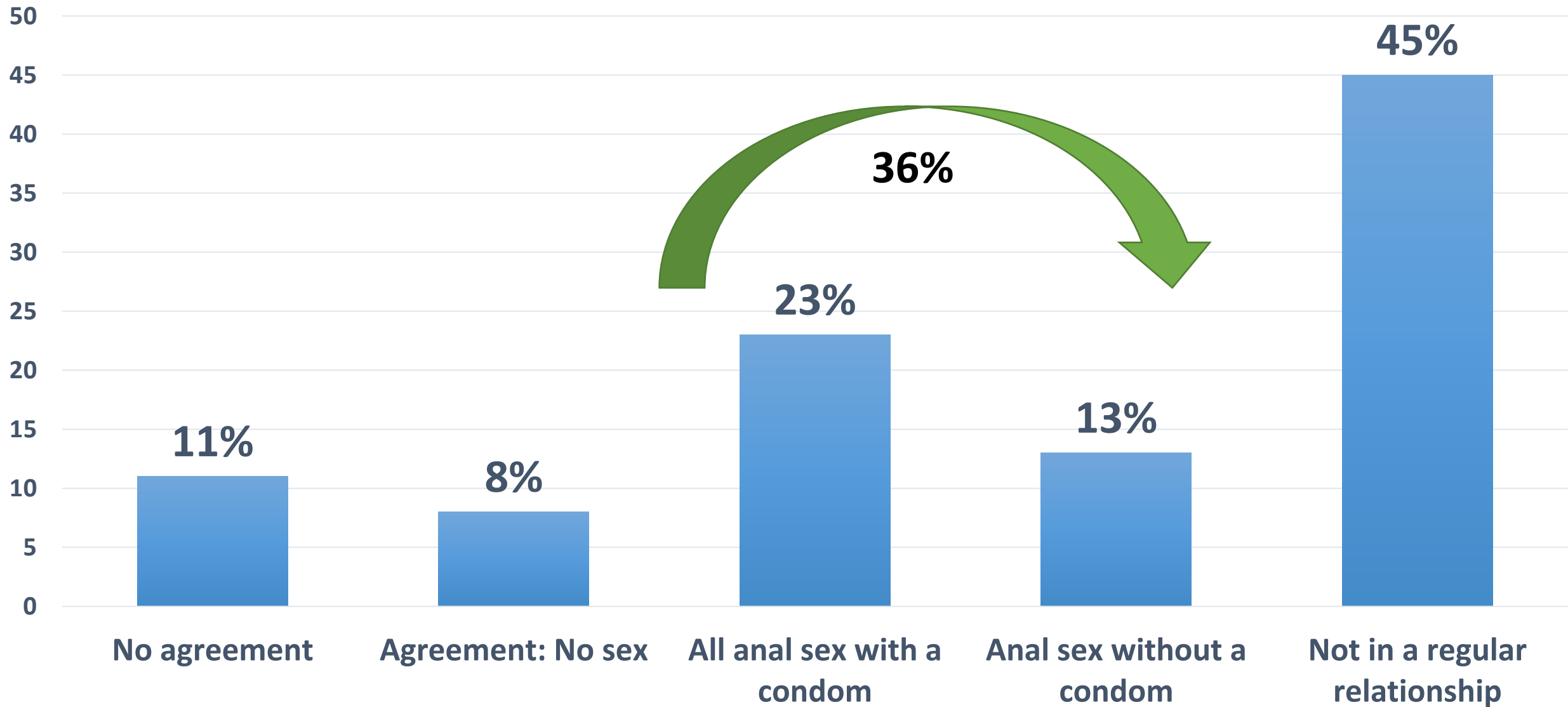
How would you describe your sexual relationship with your  
current regular male partner?



# If you are in a regular relationship with a man, for how long has it been? (%)

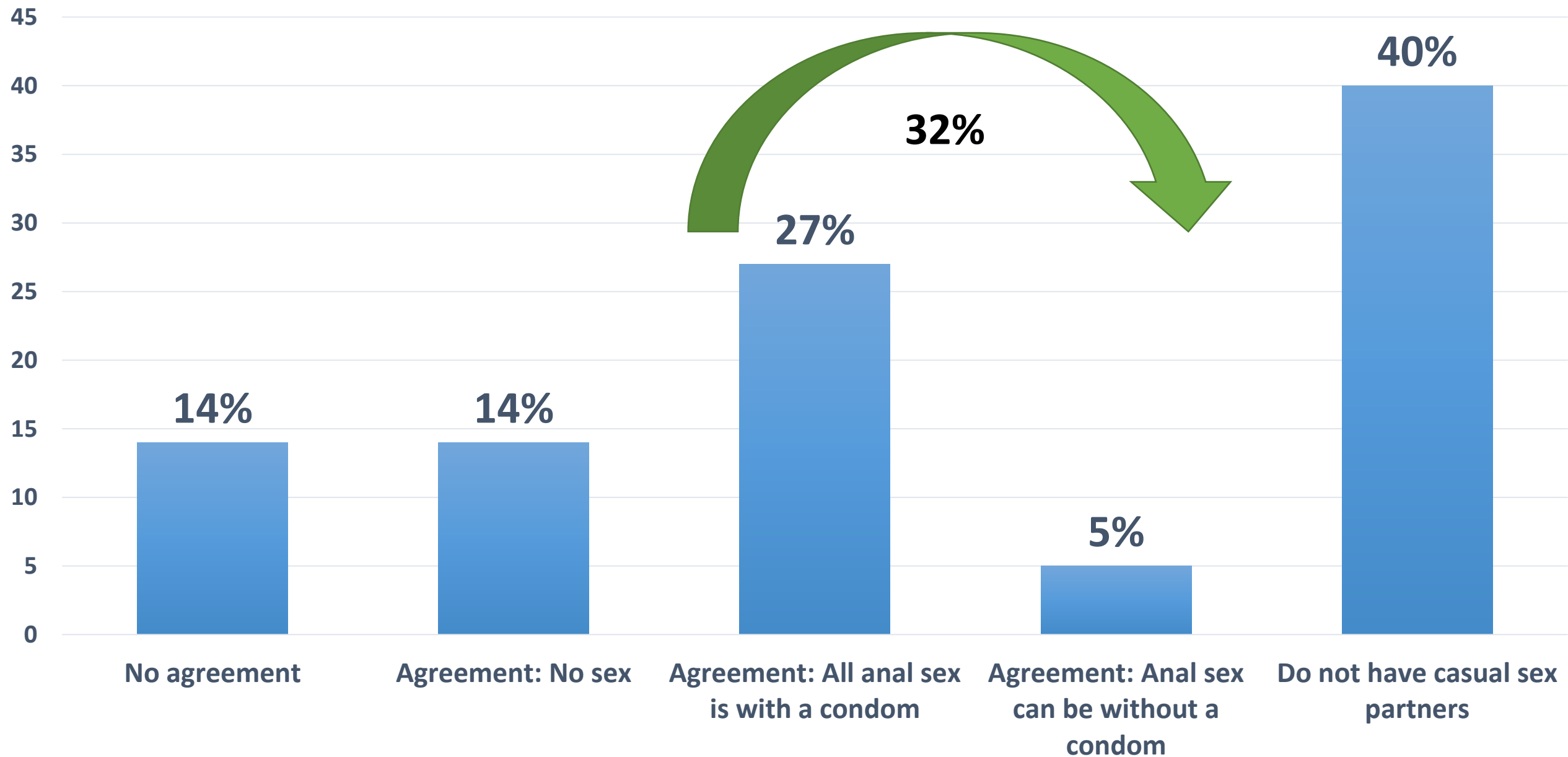


Do you have a clear (spoken) agreement with your regular partner about anal sex within your relationship? (%)

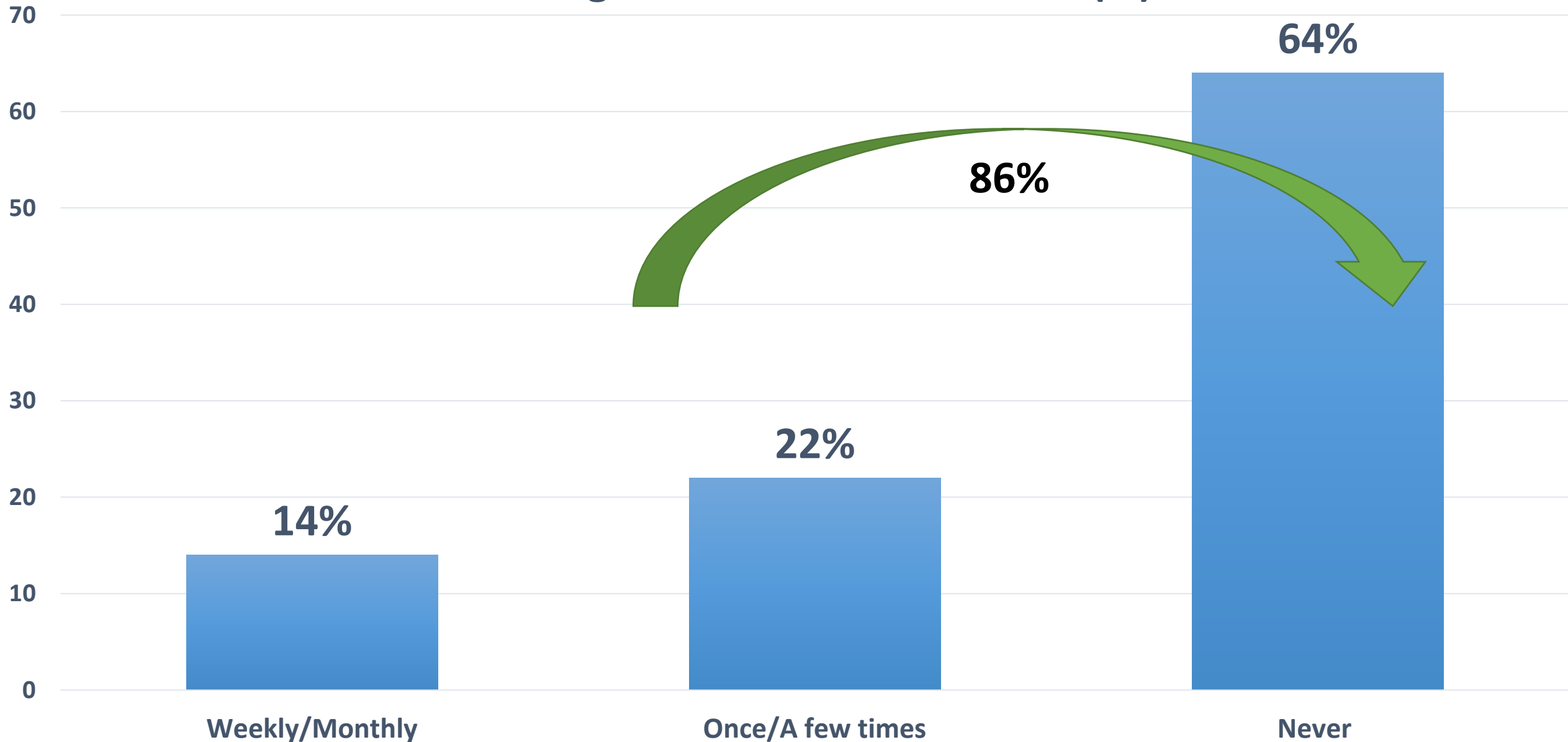




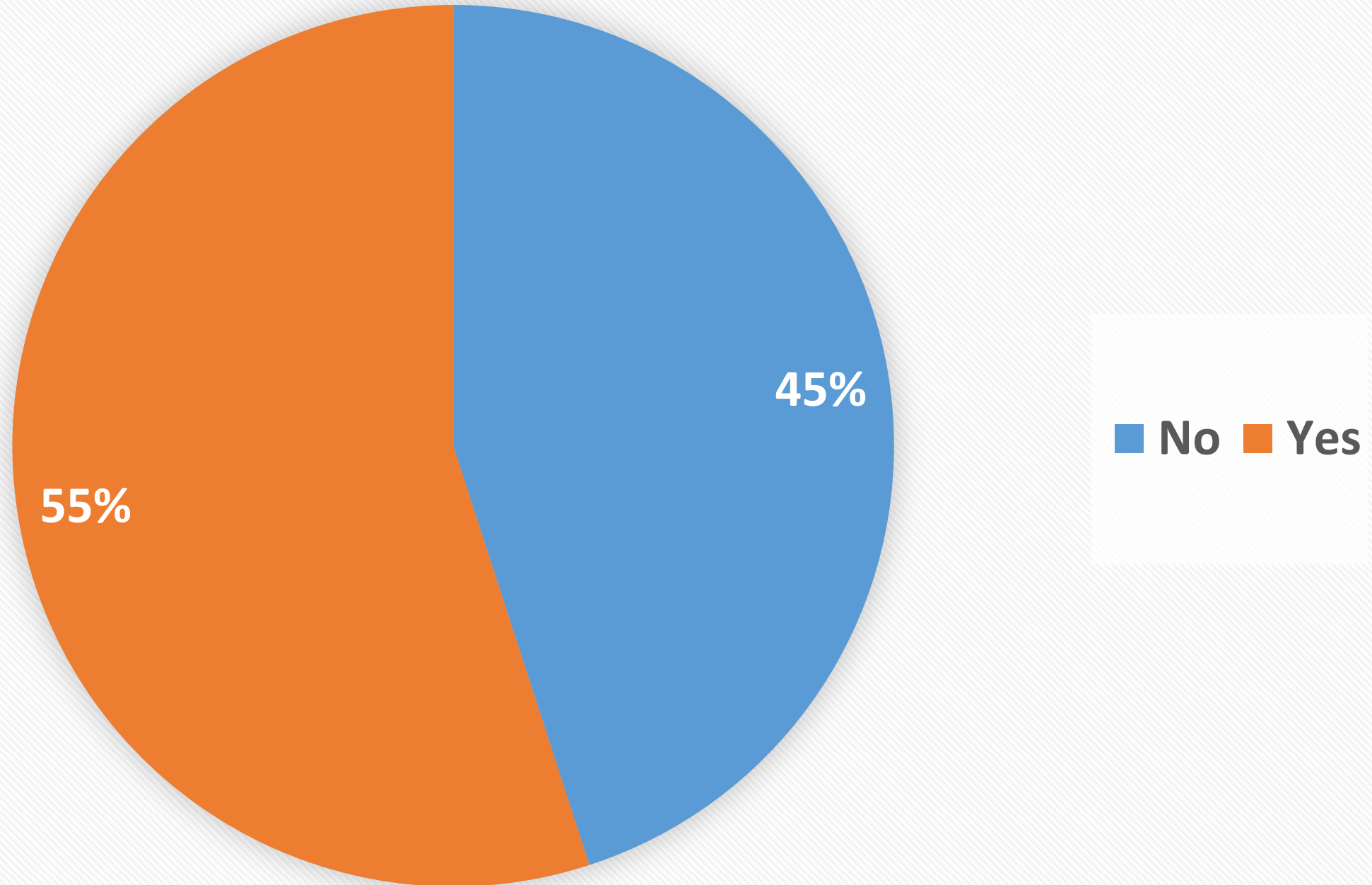
Do you have a clear (spoken) agreement with your regular partner  
about sex with casual partners? (%)



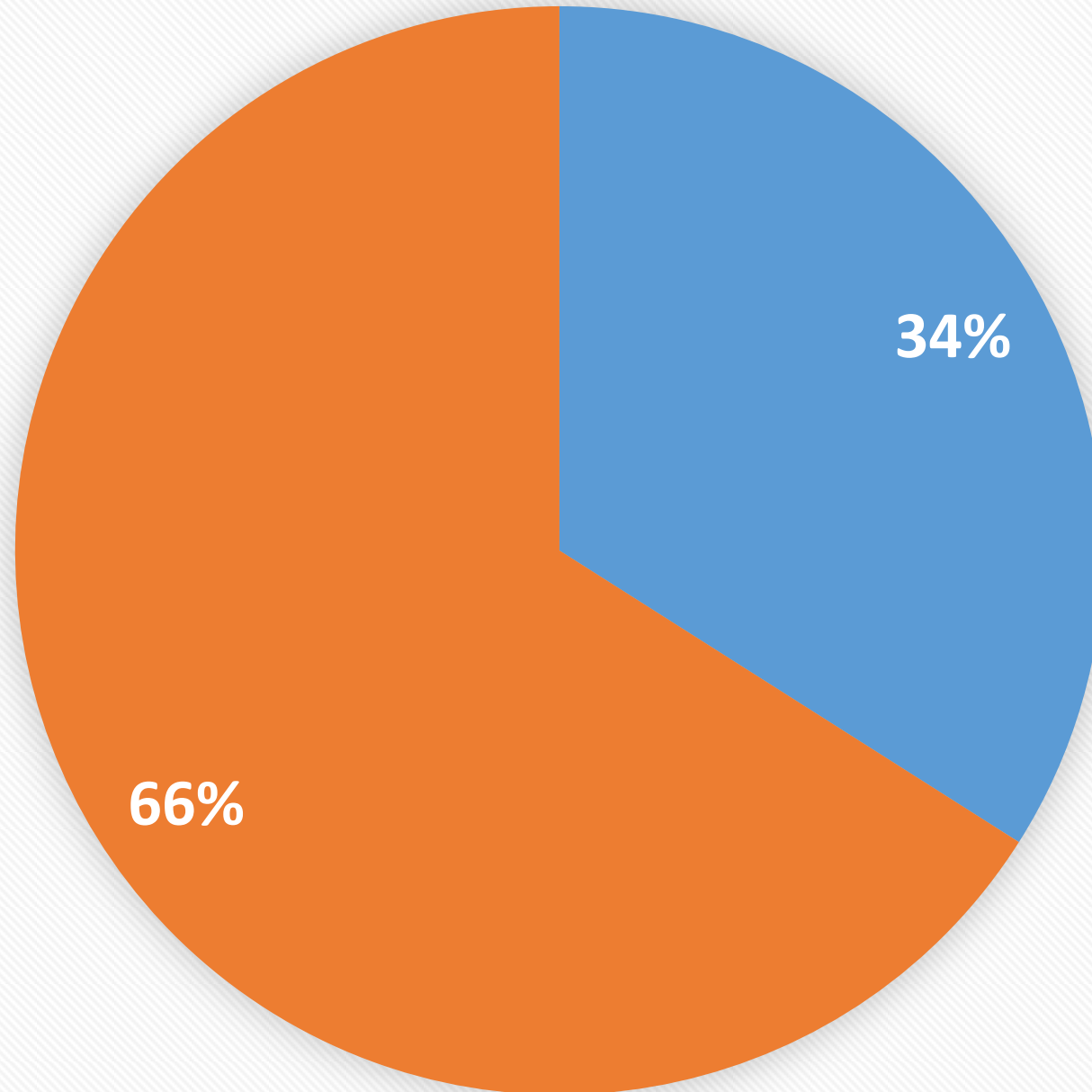
In the last 6 months, how often did you have group sex involving at least two other men? (%)



When you had sex the last time, did you have anal sex?



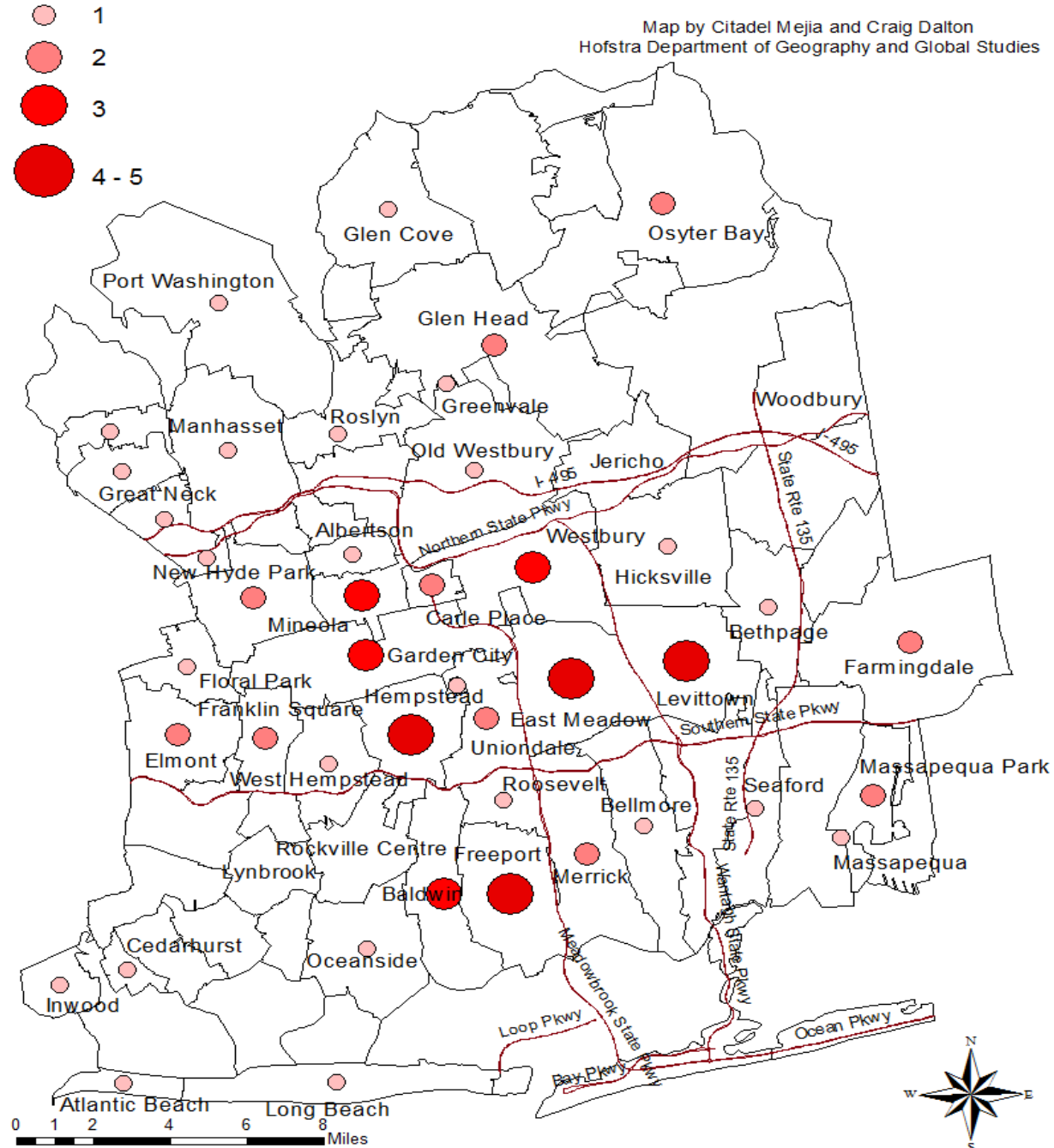
**During anal sex the last time, did you use a condom?  
(of people who had anal sex at last sex)**



■ No ■ Yes

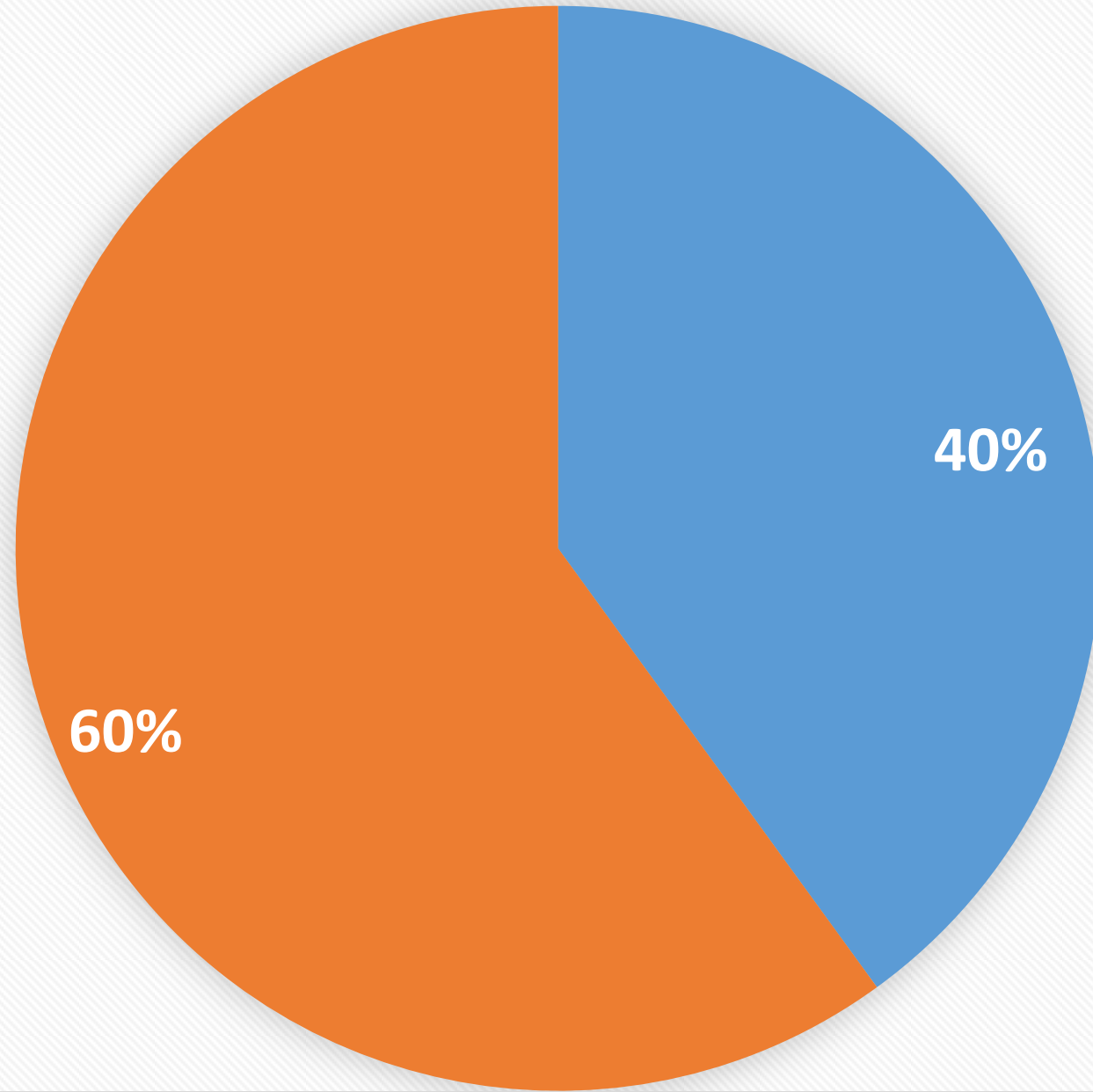
# Respondents Who Used a Condom

Map by Citadel Mejia and Craig Dalton  
Hofstra Department of Geography and Global Studies





**Did you use the condom the whole time?  
(of people that used a condom)**



■ No ■ Yes

In the past 12 months with how many different men have you had oral sex?



Mean: 21



Mode: 3

Range: 0 -100

# Oral Sex

- I performed oral sex and **he DID NOT orgasm** in my mouth
  - Occasionally or Often: **81%**
- I performed oral sex and **he DID orgasm** in my mouth
  - Occasionally or Often: **70%** 
- **He** performed oral sex on me and **I DID NOT orgasm** in his mouth
  - Occasionally or Often: **79%**
- **He** performed oral sex on me and **I DID orgasm** in his mouth
  - Occasionally or Often: **77%** 

In the past 12 months with how many different men have you had anal sex?


Mean: 23

Mode: 1


Range: 0 -100



## Anal Sex (participant as “top”)

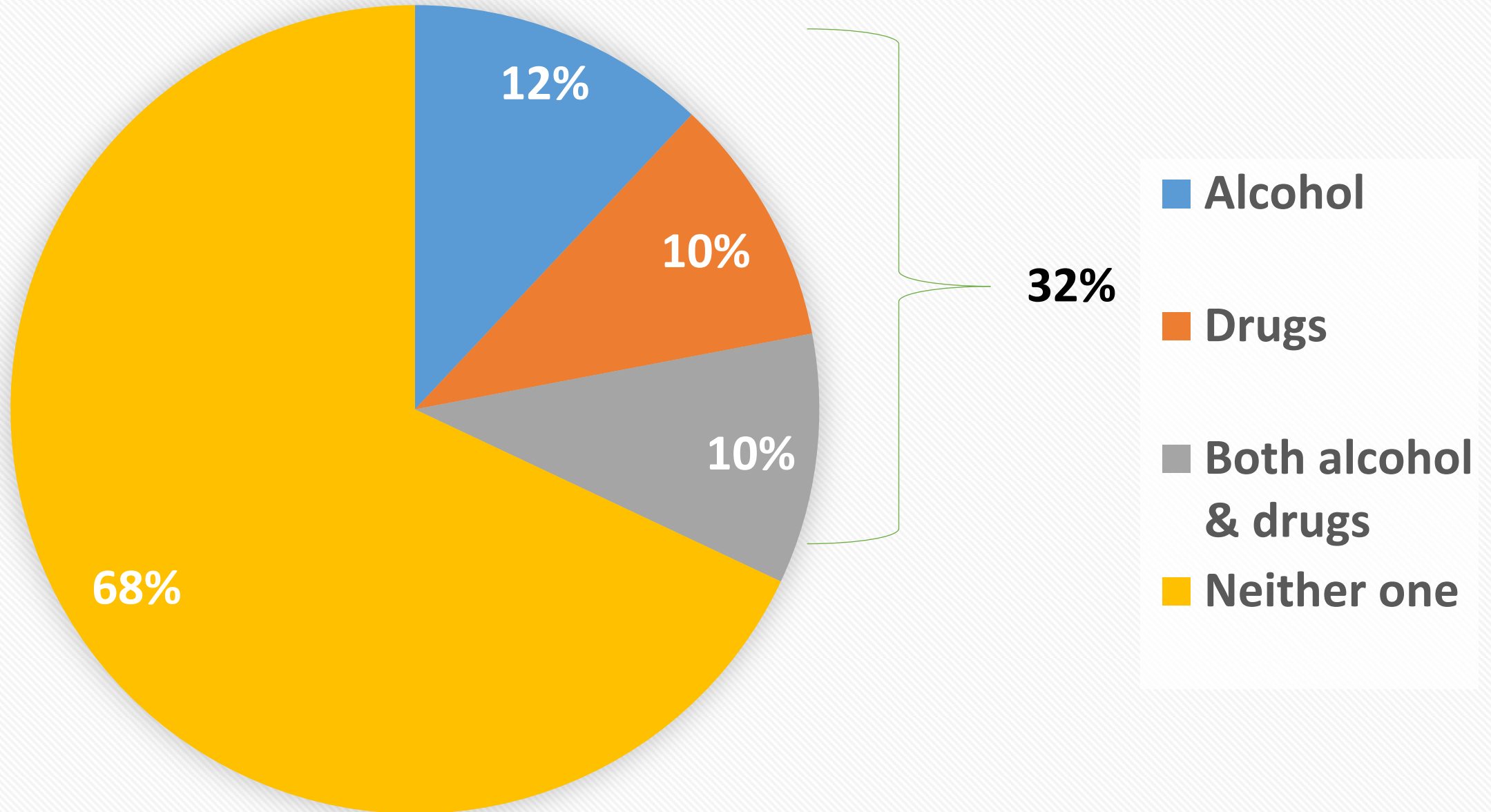
- I had anal sex with him **with a condom**
  - Occasionally or Often: **66%**
- I had anal sex with him **without a condom and withdrew before orgasm**
  - Occasionally or Often: **41%**
- I had anal sex with him **without a condom and orgasmed inside him**  
Occasionally or Often: **38%** 

## Anal Sex (participant as “bottom”)

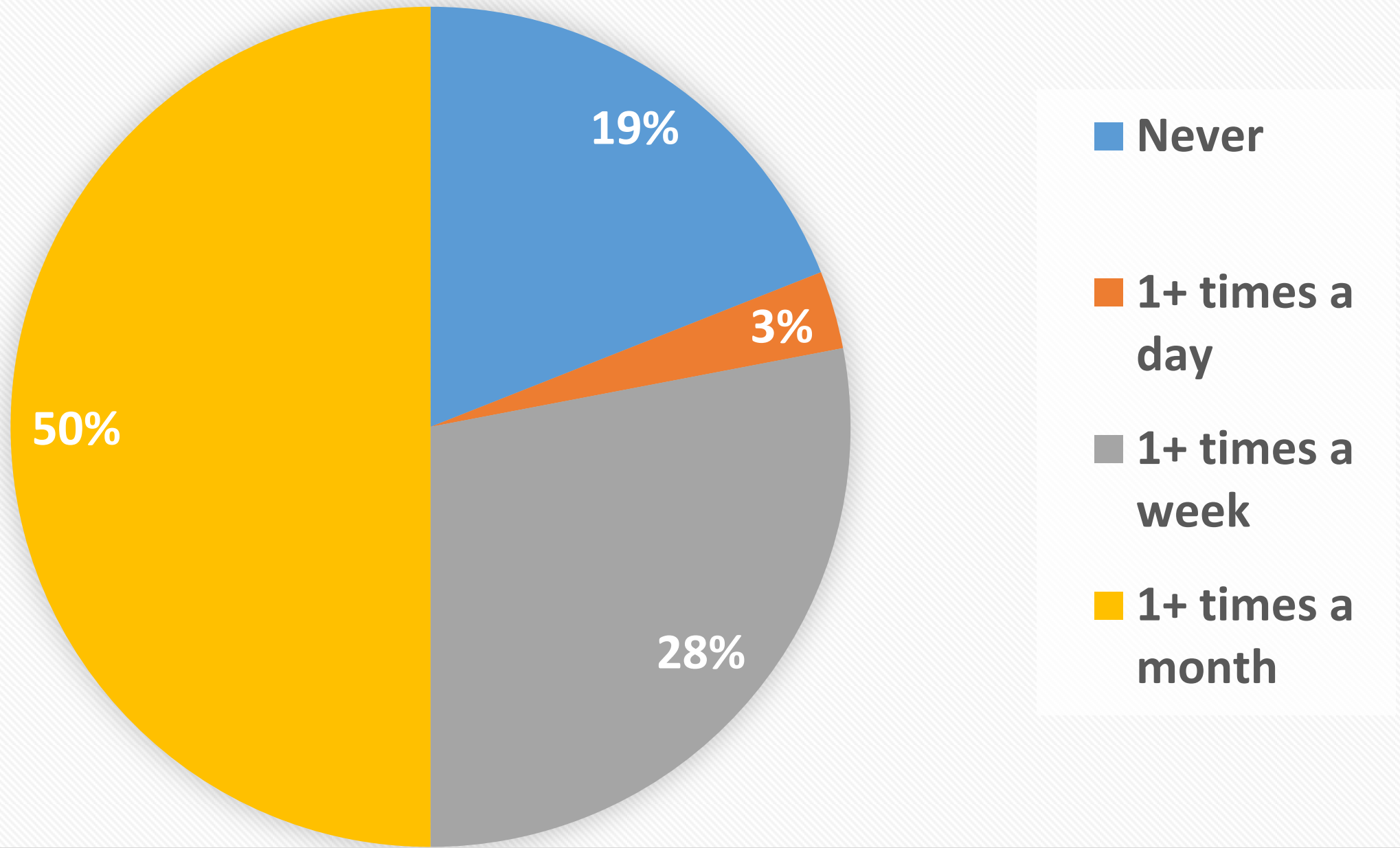
- **He** had anal sex with me **without a condom and withdrew before orgasm**
  - Occasionally or Often: **39%**
- **He** had anal sex with me **without a condom and orgasmed inside me**
  - Occasionally or Often: **39%** 



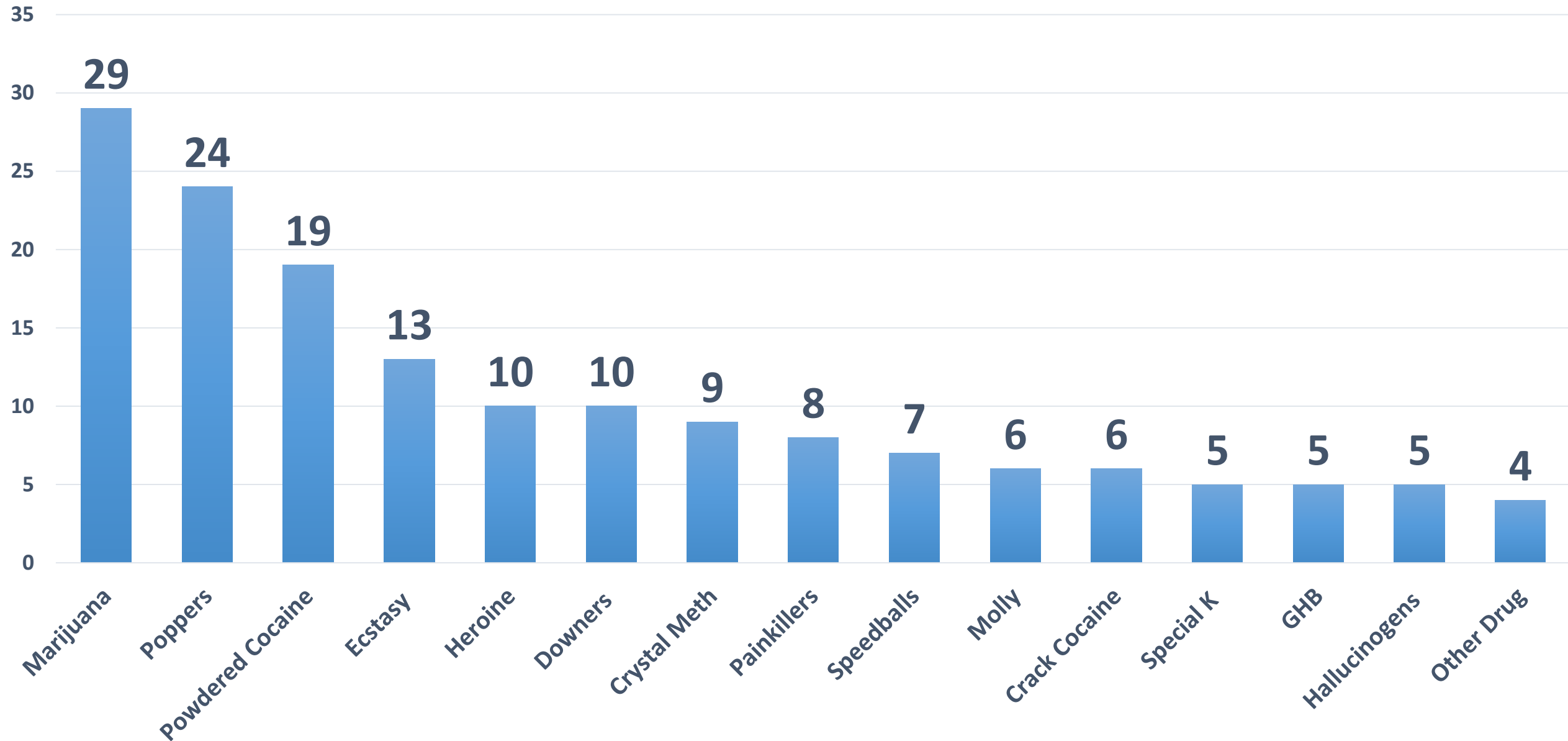
**Before or during the last time you had sex with a partner,  
did you use:**



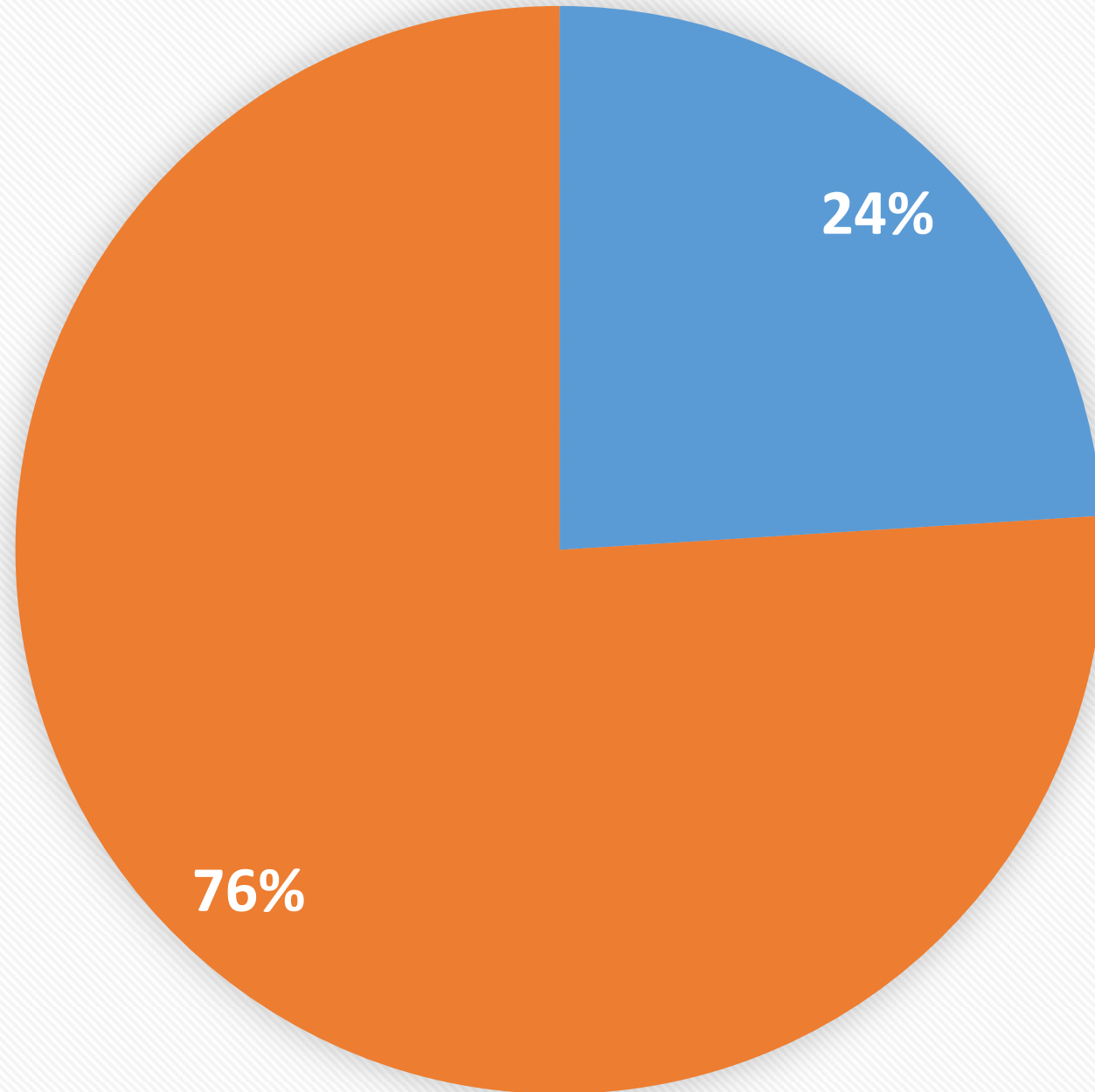
**In the past 12 months, how often did you have 5 or more alcoholic drinks in one sitting?**



# Which drugs did you use before or during the last time you had sex with a partner? (n = 215)

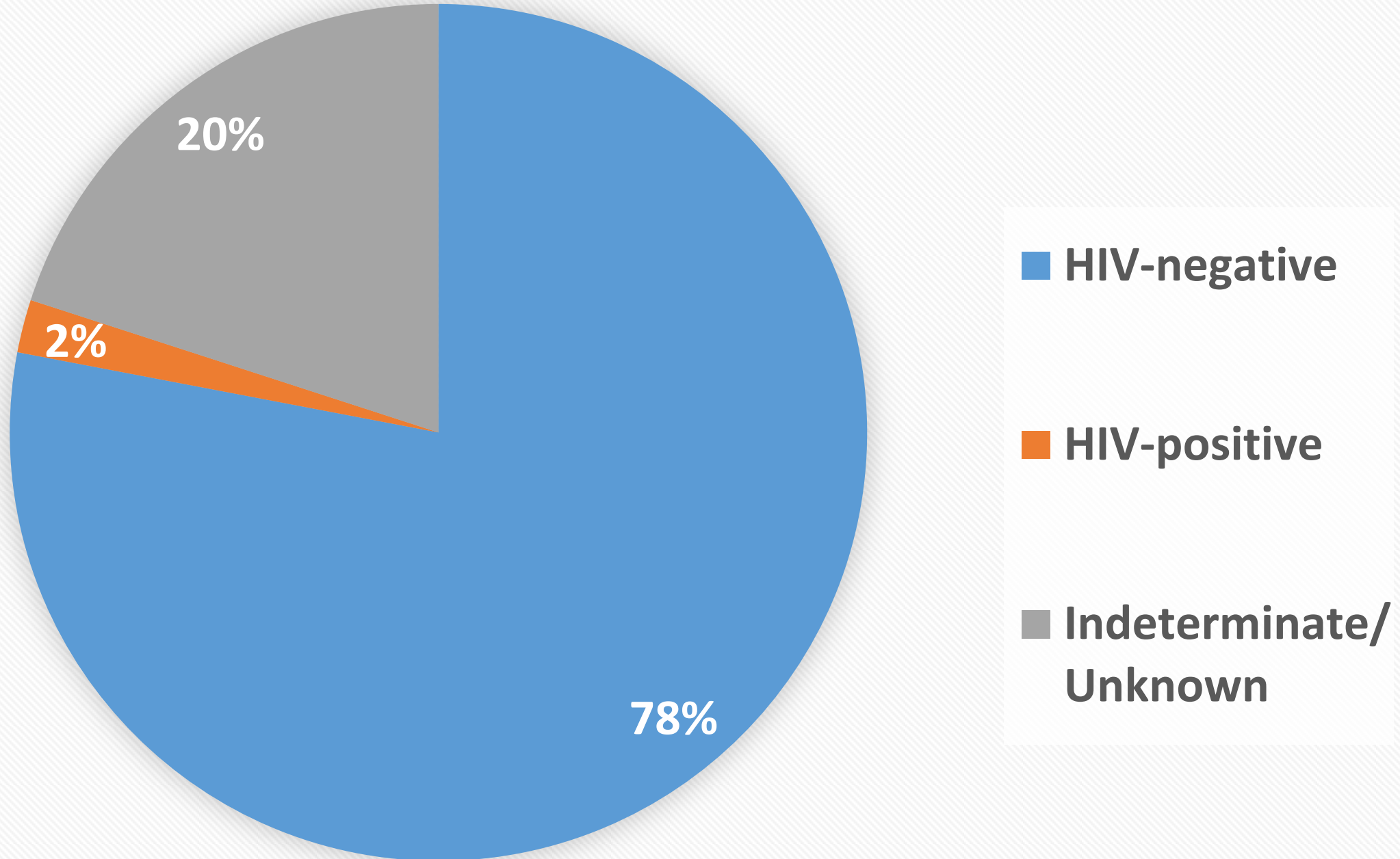


The last time you had anal sex, did you know his HIV status?



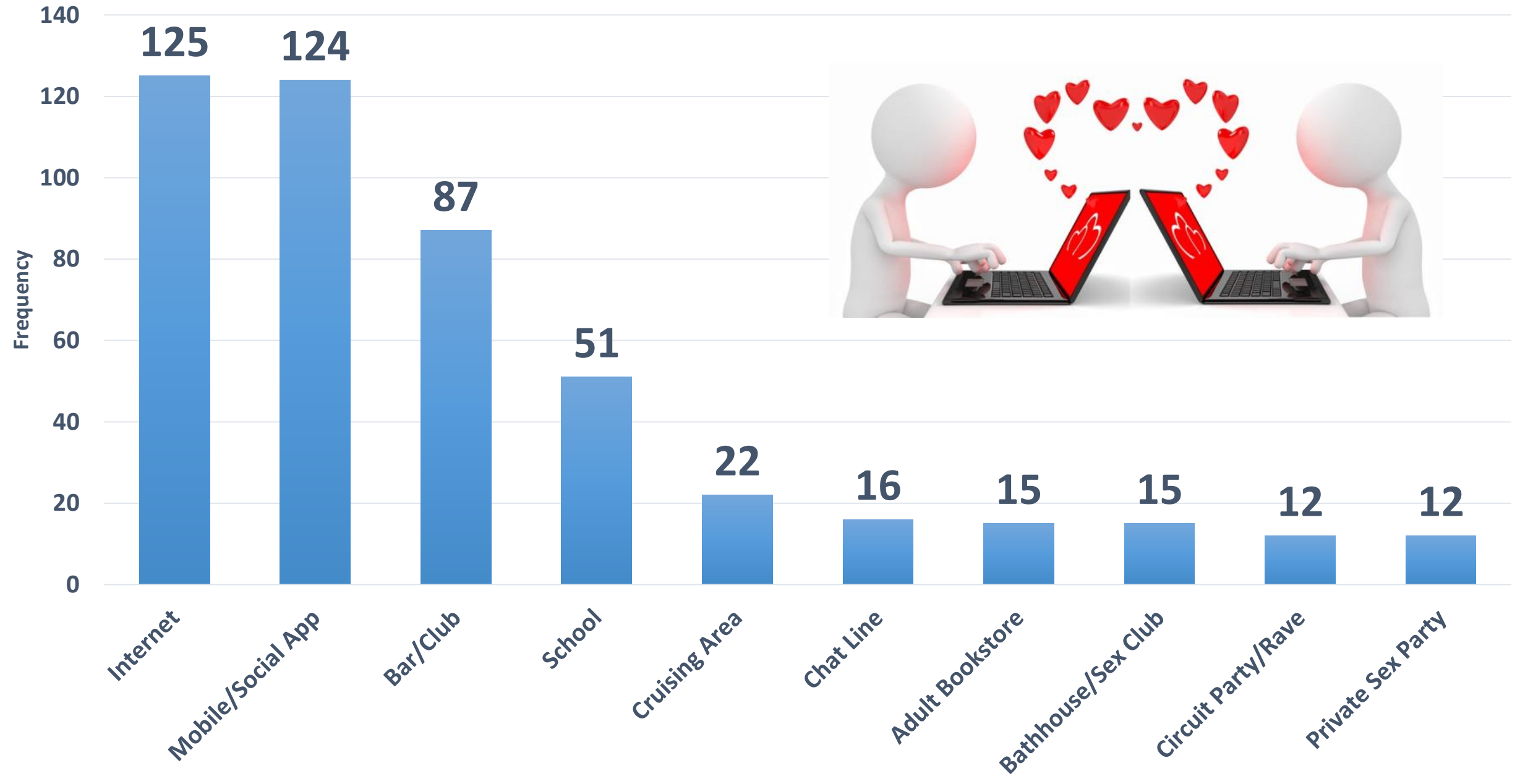
■ No ■ Yes

## What was his HIV status?

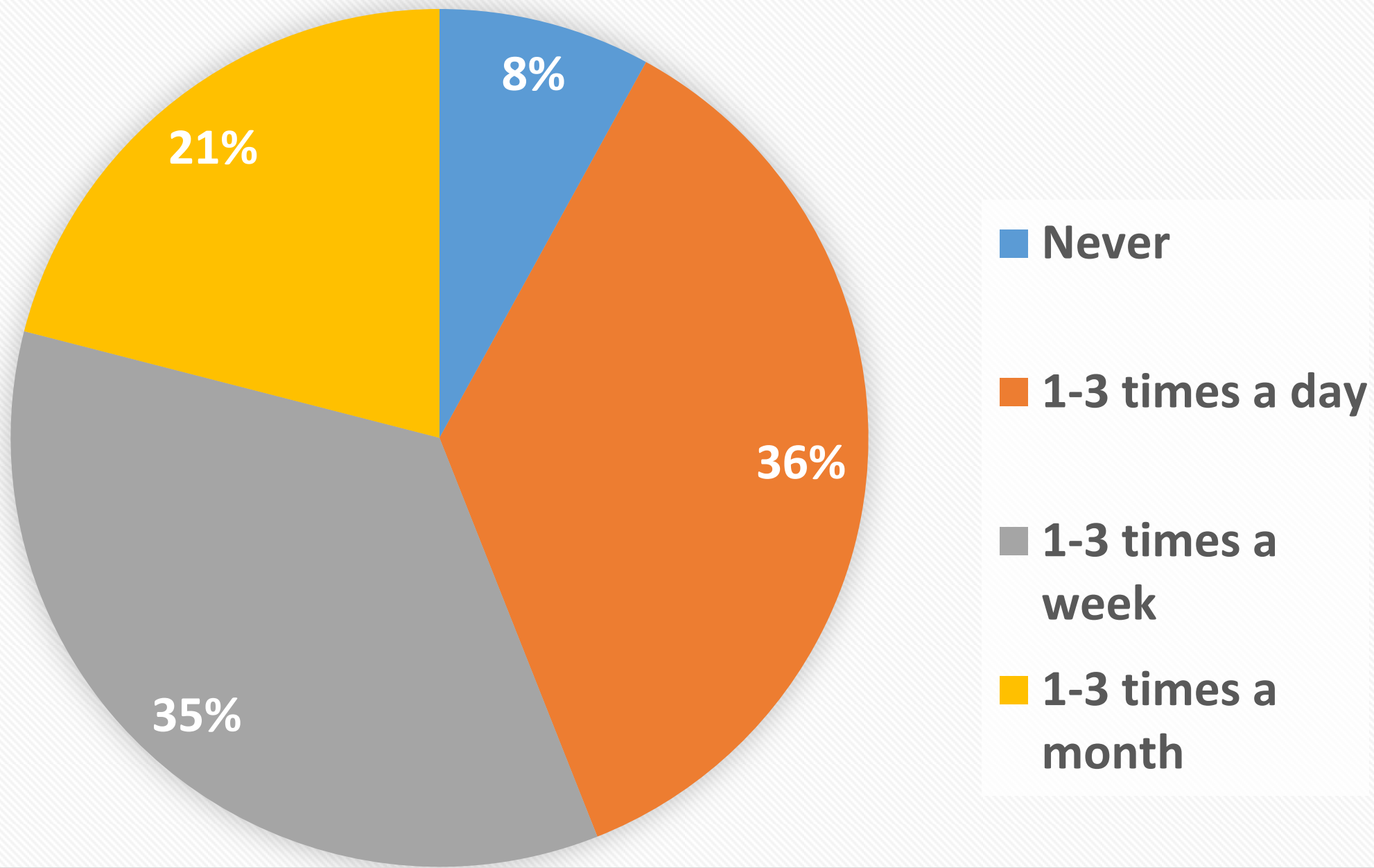




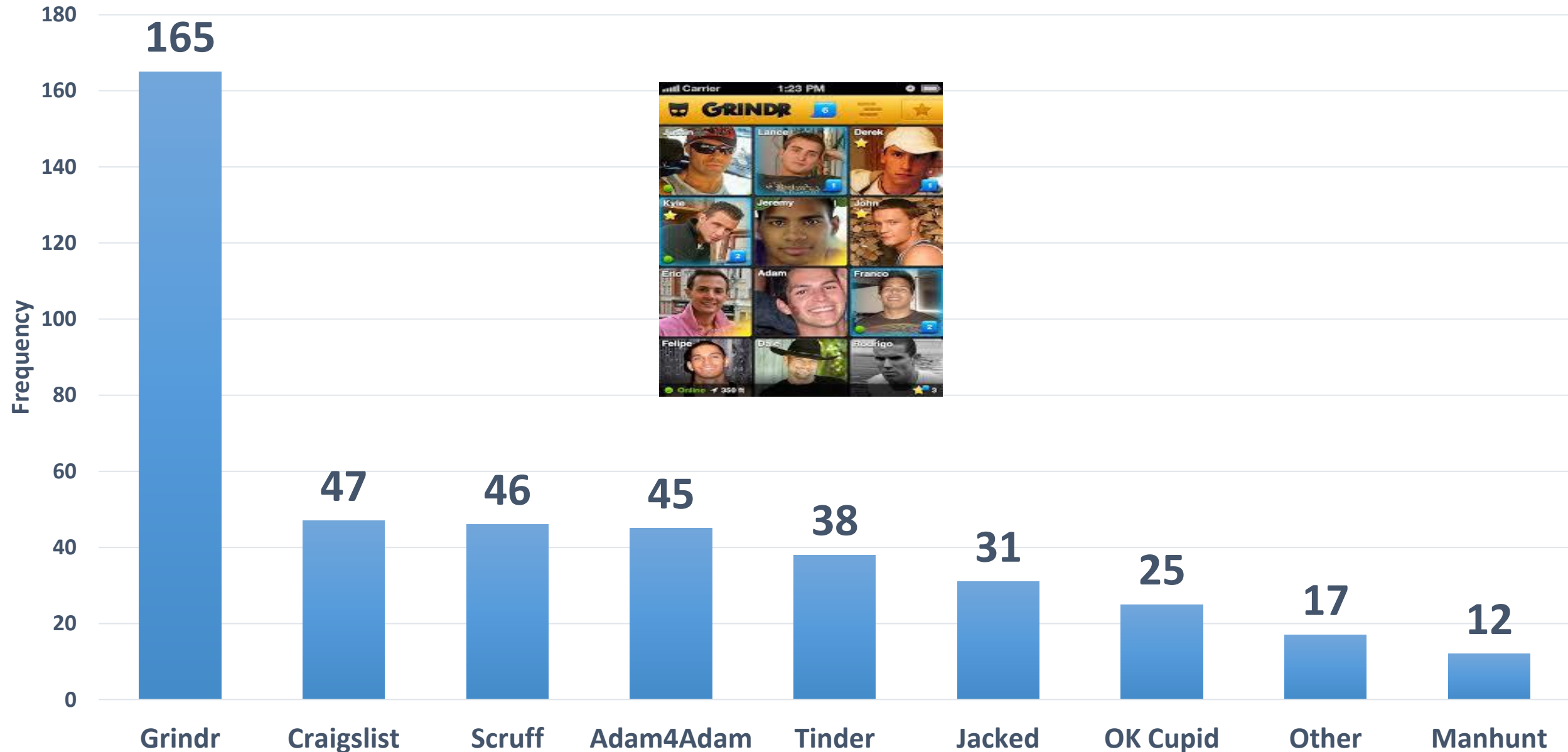
# Where do you regularly meet sex partners? (n =215)



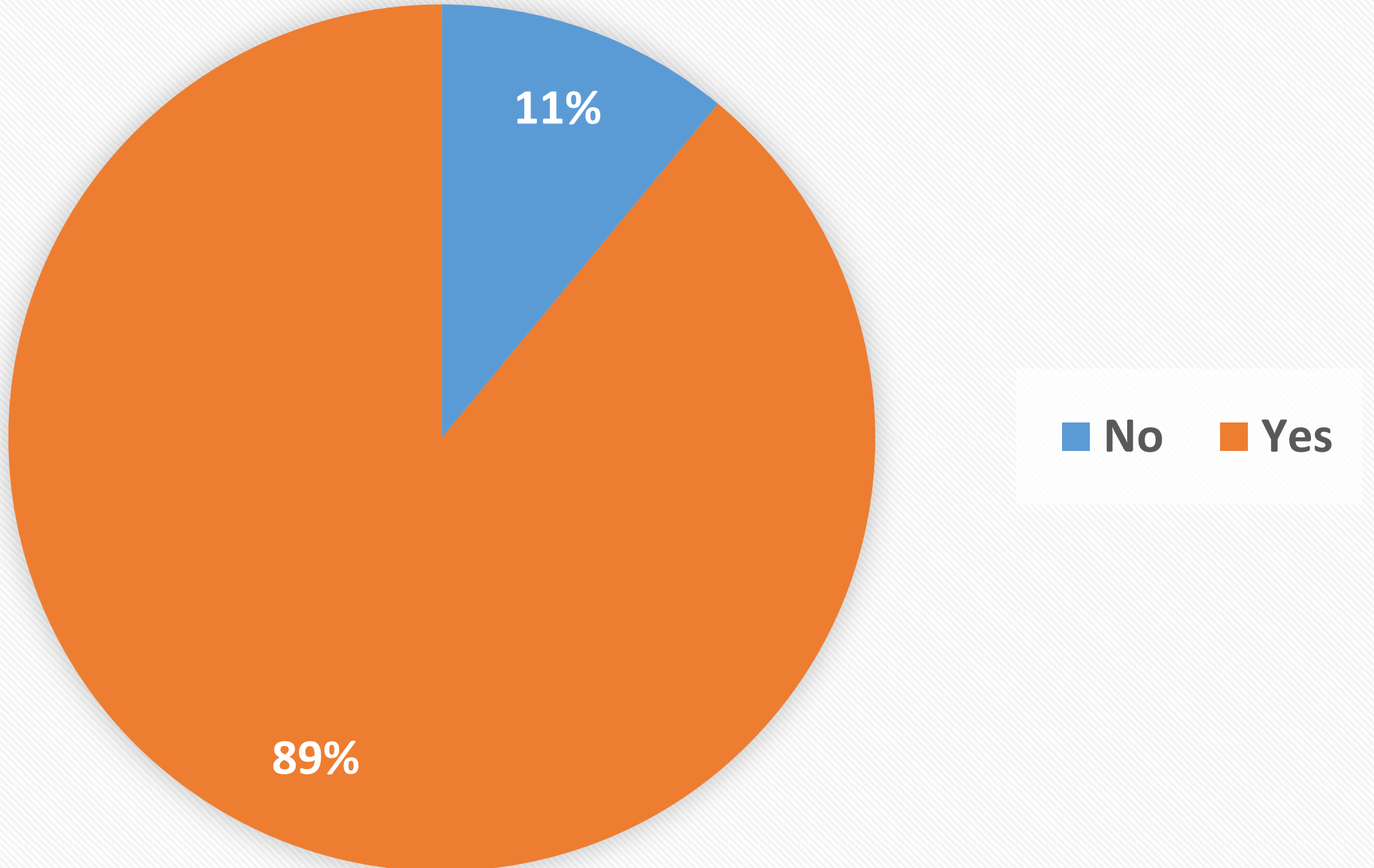
In the past 12 months, how often have you used the internet to meet or socialize with gay men either for *friendship* or *sex*?



# Which social media applications do you use most often to meet sex partners? (n= 215)

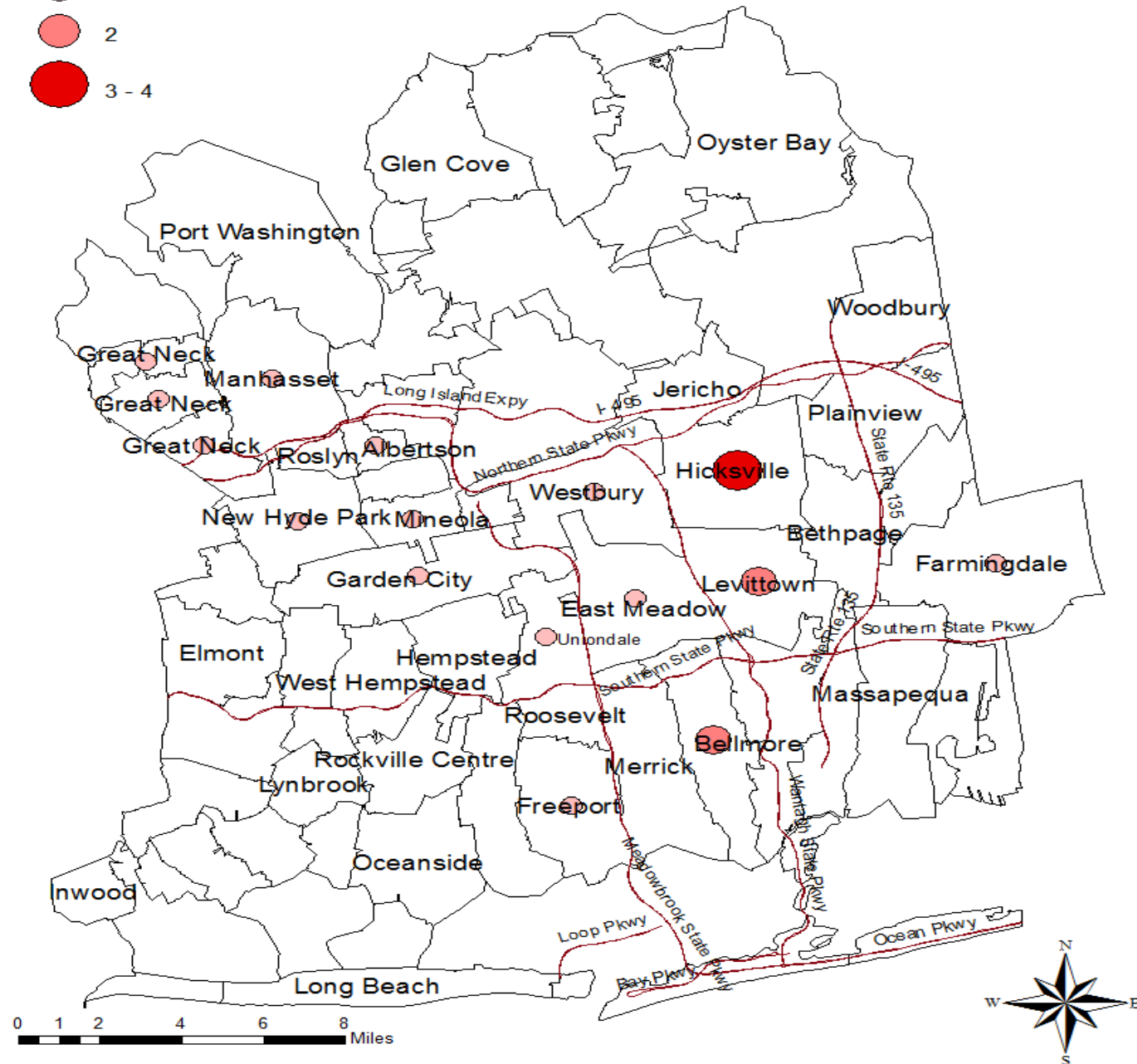
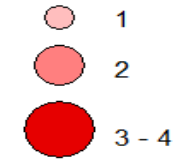


## Have you ever been tested for HIV?

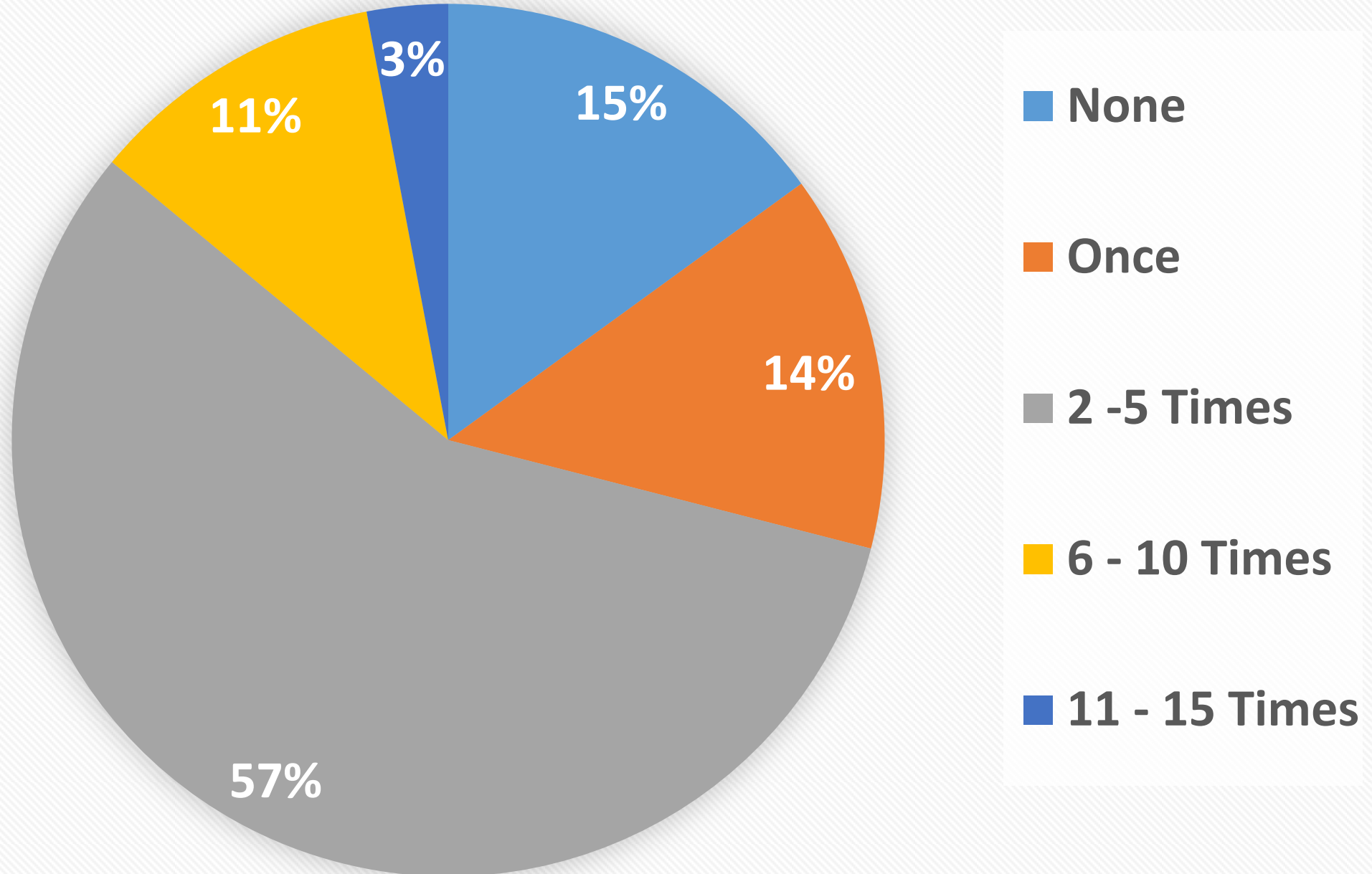


# Respondents Who Were Not Tested for HIV

Map by Citadel Mejia and Craig Dalton  
Hofstra Department of Geography and Global Studies

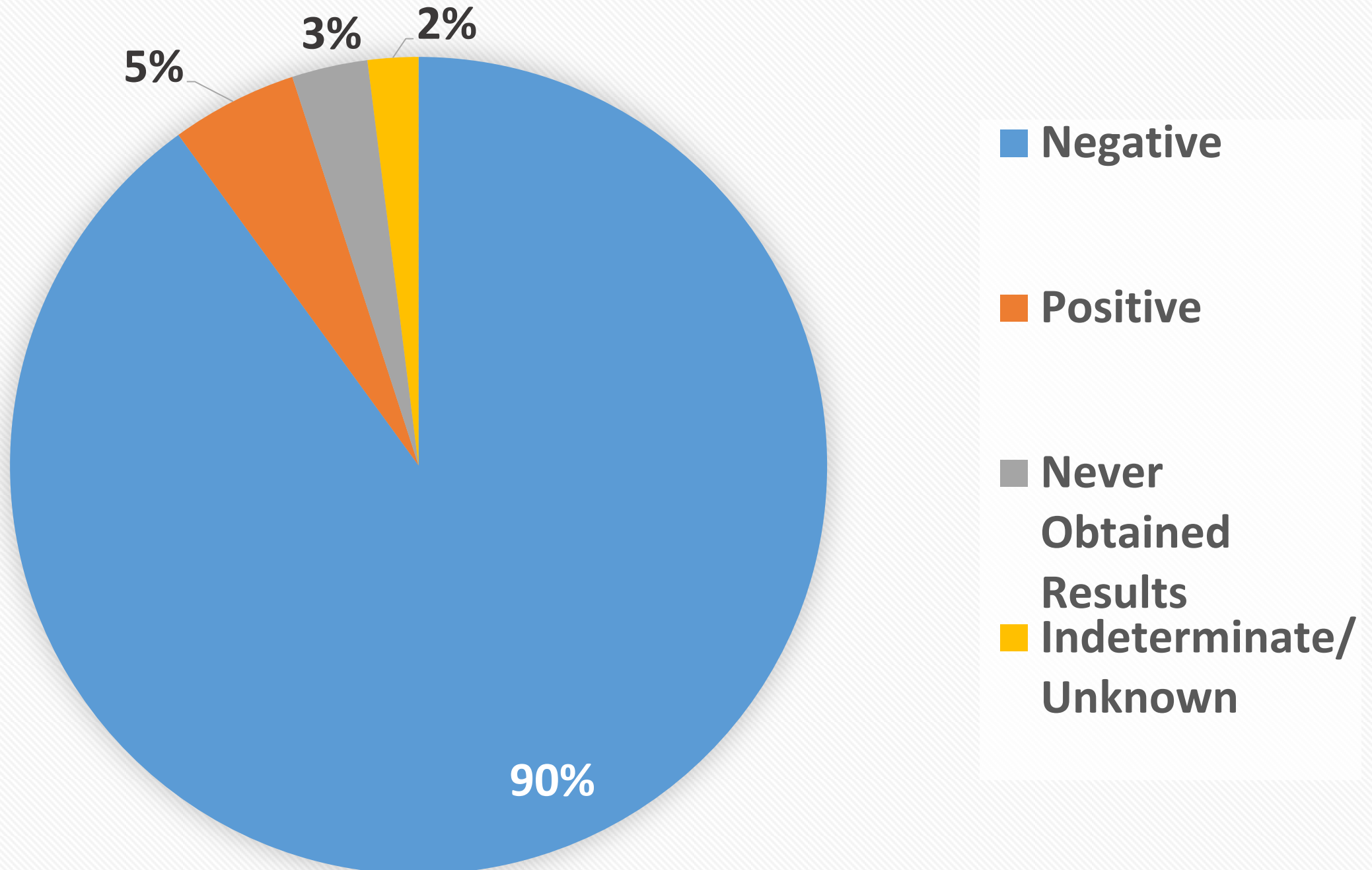


**In the past 2 years, that is, how many times have you been tested for HIV?**

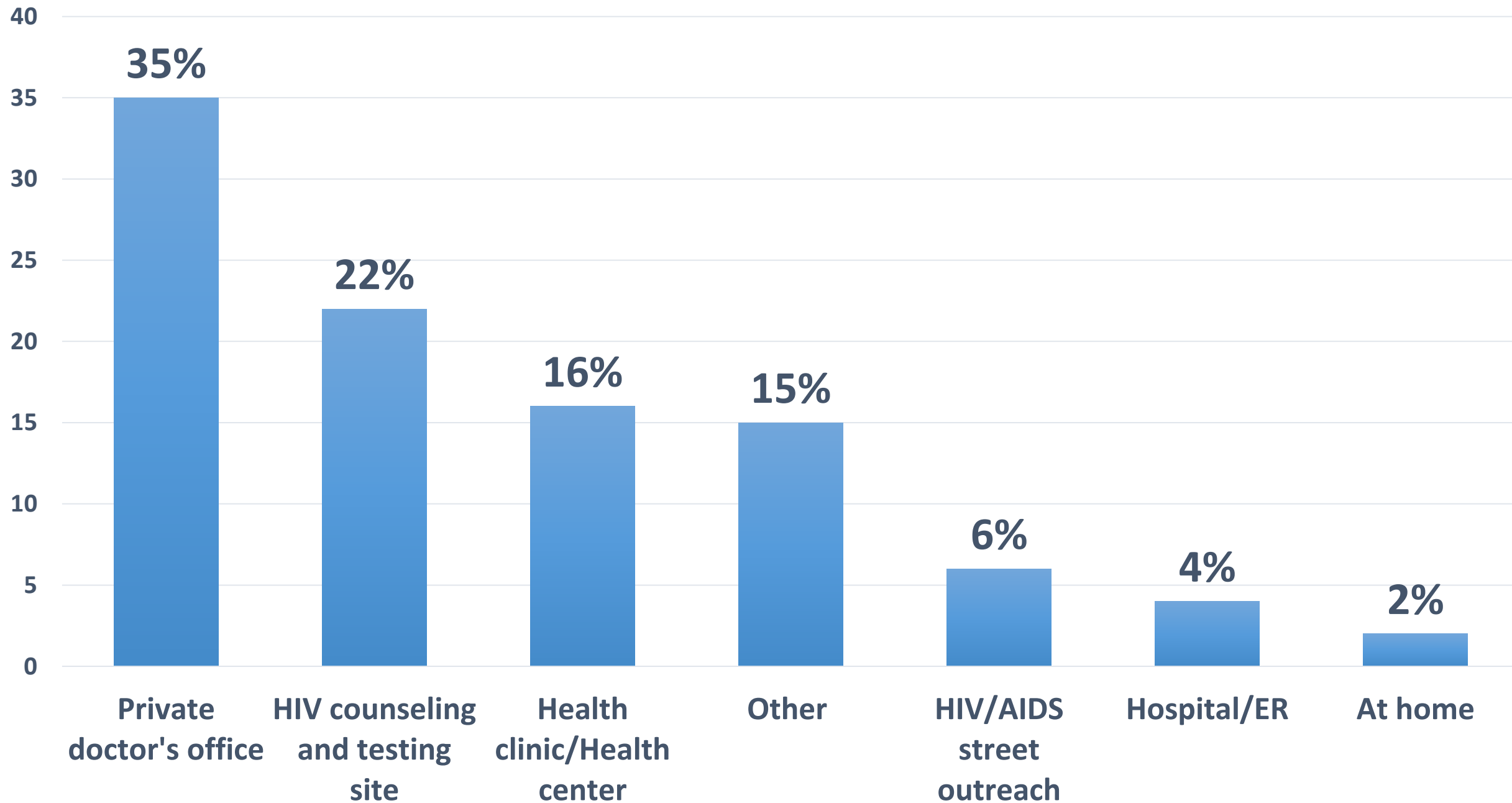




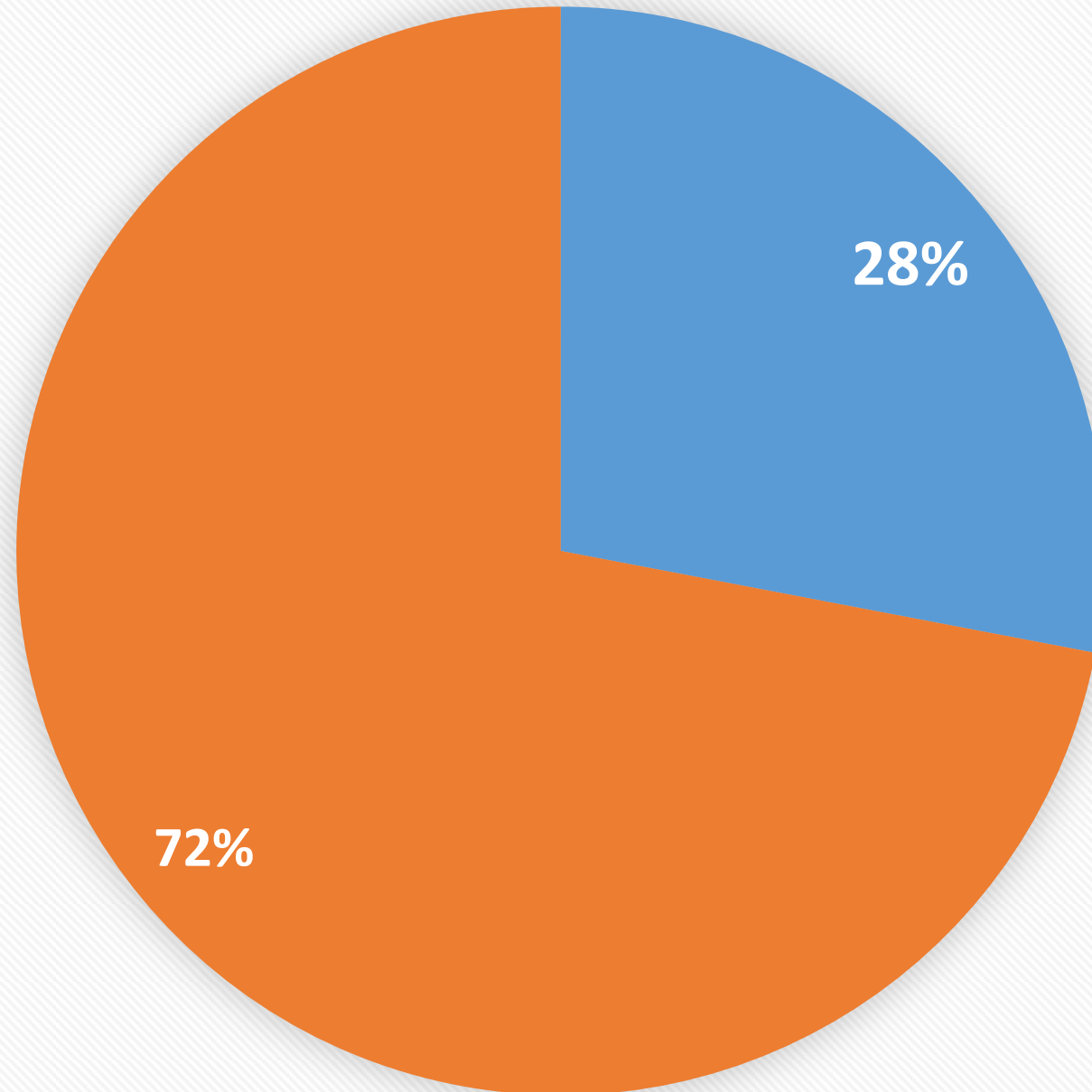
# What was the result of your most recent HIV test?



# Where did you get tested for HIV? (%)

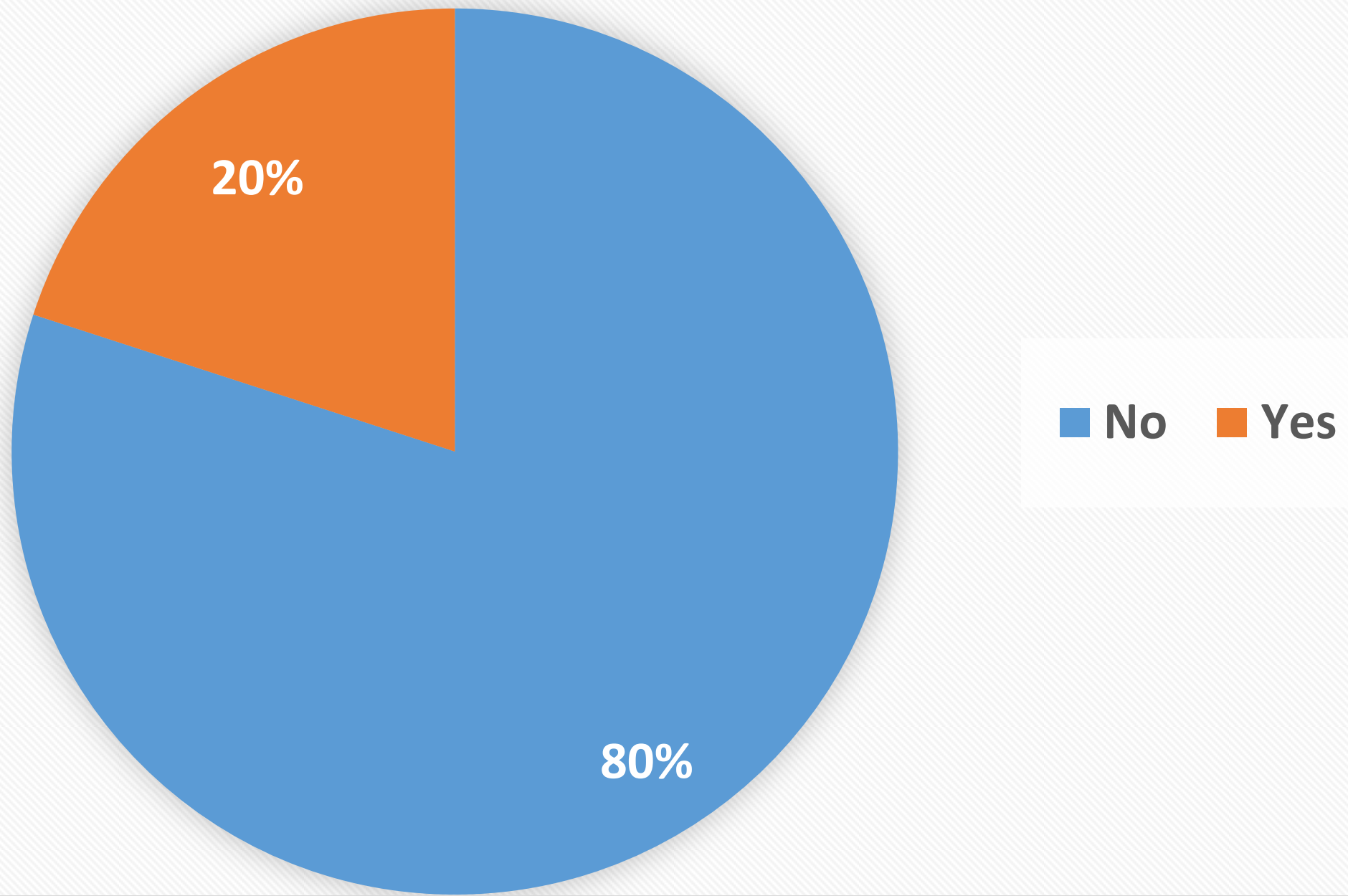


**Before today, have you heard of people who do not have HIV taking anti-HIV medicines (PrEP), to keep from getting HIV?**



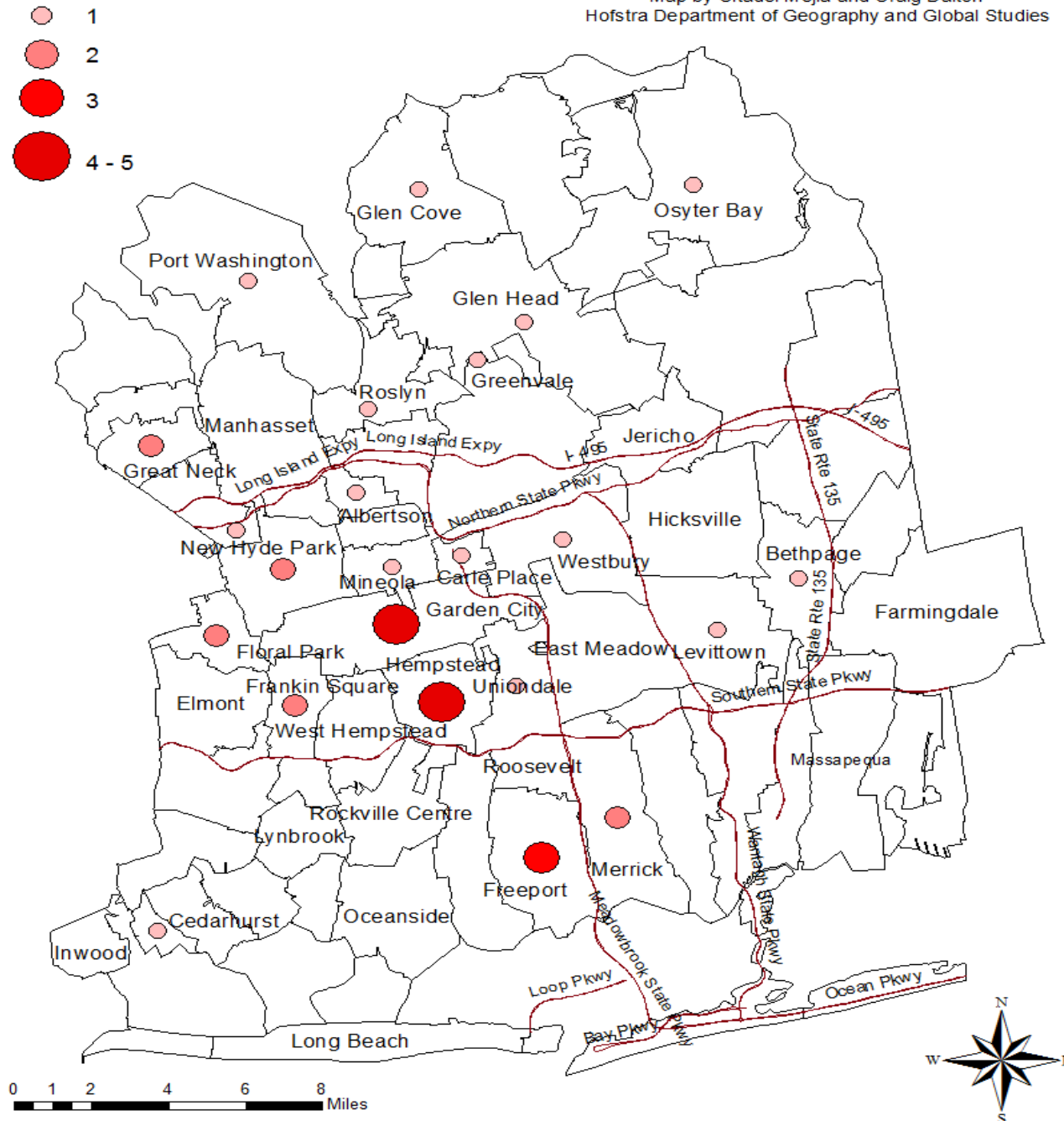
■ No ■ Yes

**In the past 12 months, have you taken anti-HIV medicines before sex because you thought it would keep you from getting HIV (PrEP)?**

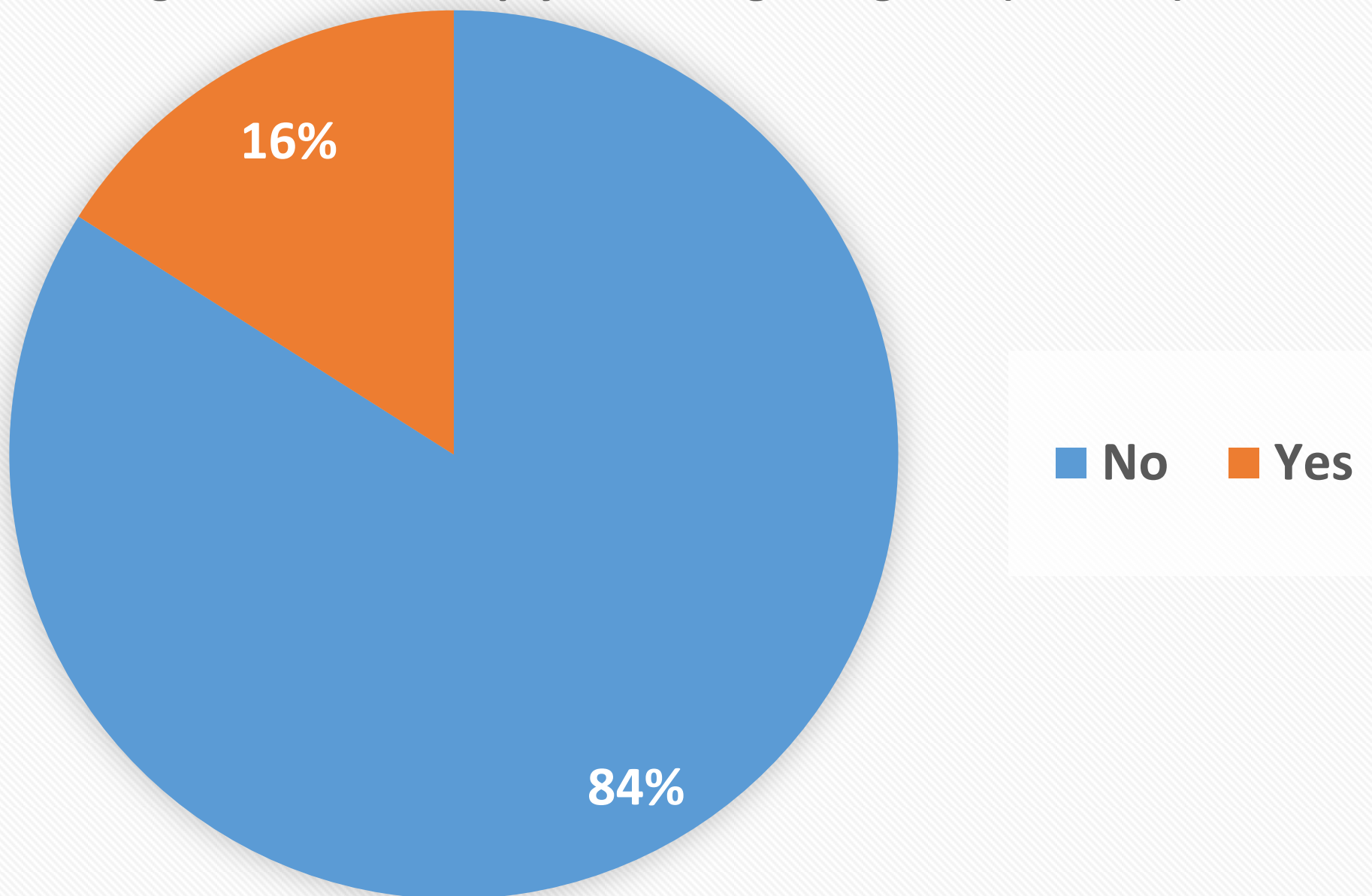


# Respondents who Used PrEP in the Past Year

Map by Citadel Mejia and Craig Dalton  
Hofstra Department of Geography and Global Studies



**In the past 12 months, have you taken anti-HIV medicines after sex because you thought it would keep you from getting HIV (i.e. PEP)?**



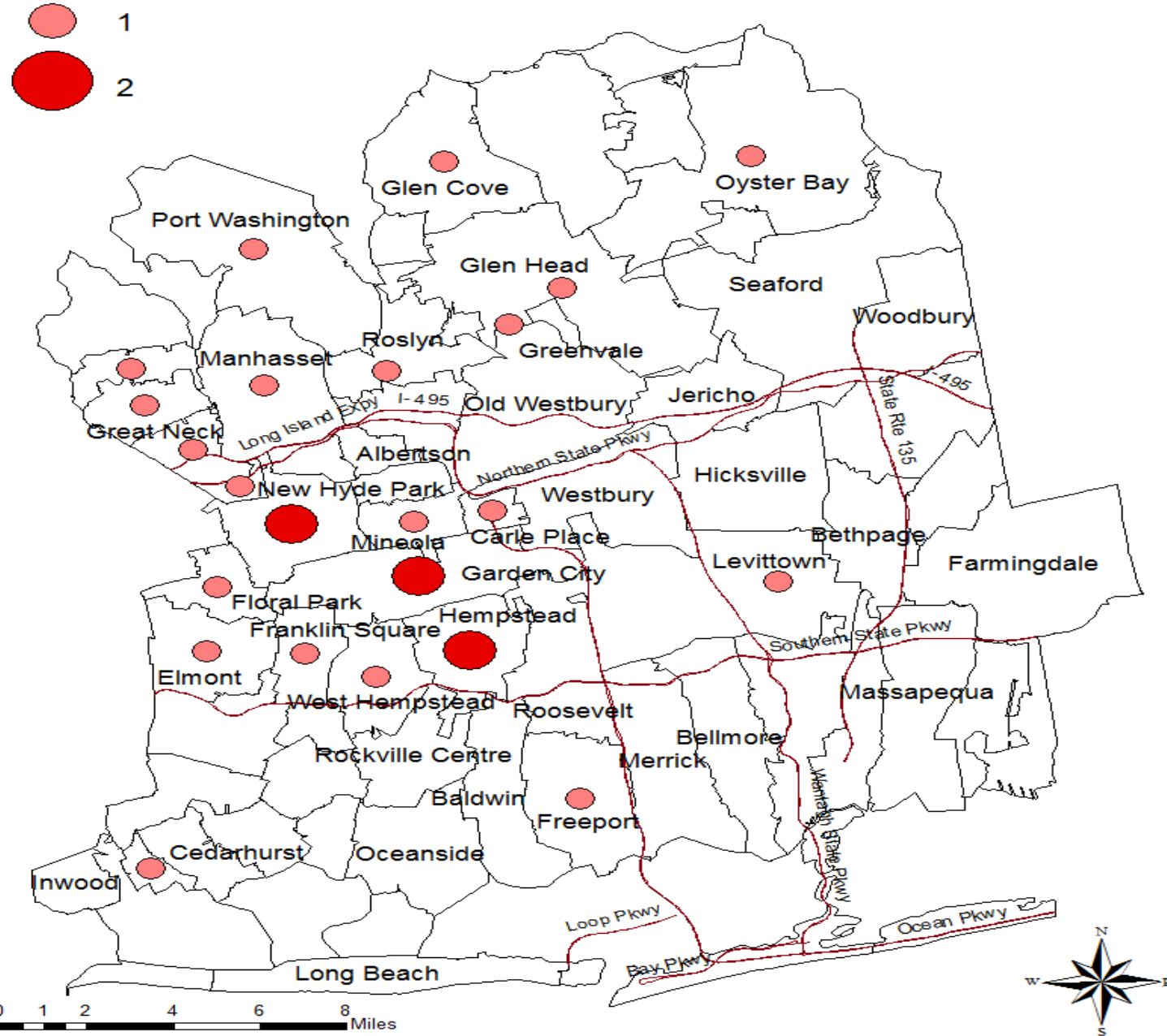
# Other STIs in past 12 months

- Gonorrhea: 13%
- Chlamydia: 15%
- Syphilis: 13%



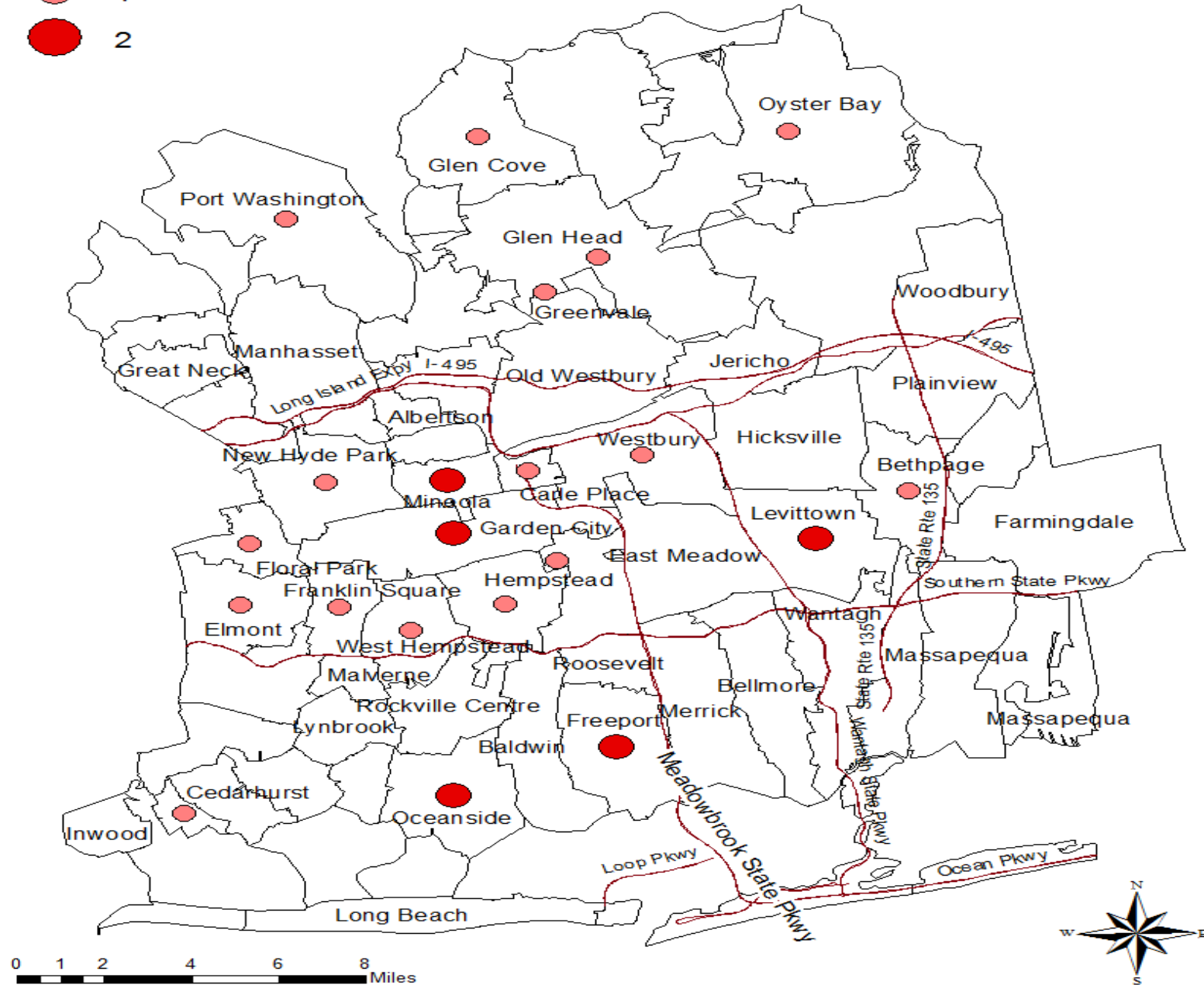
# Respondents Who Had Gonorrhea

Map by Citadel Mejia and Craig Dalton  
Hofstra Department of Geography and Global Studies



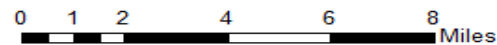
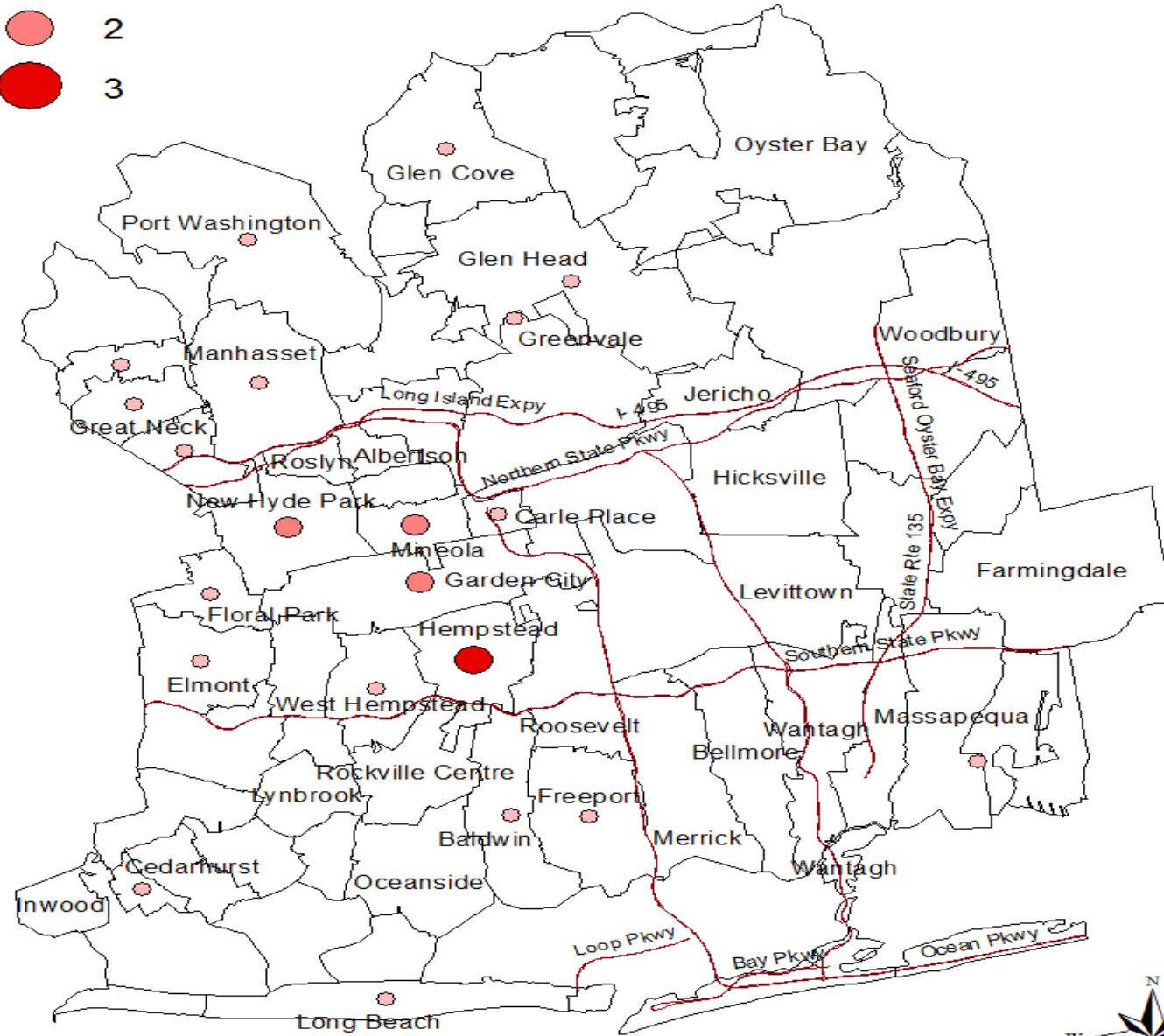
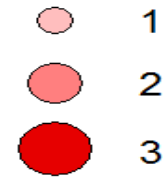
# Respondents Who Had Chlamydia

May by Citadel Mejia and Craig Dalton  
Hofstra Department of Geography and Global Studies

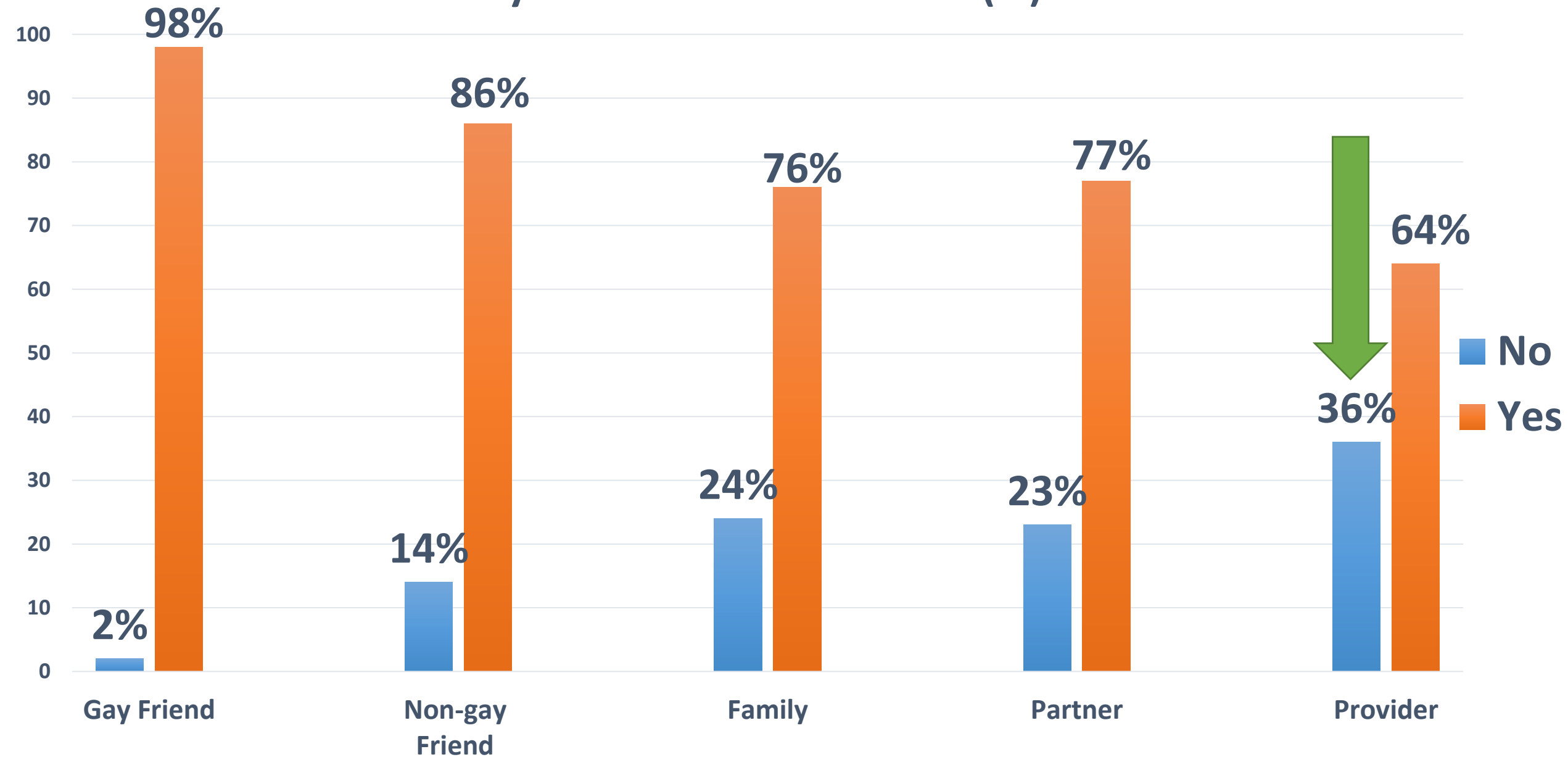


# Respondents Who Had Syphilis

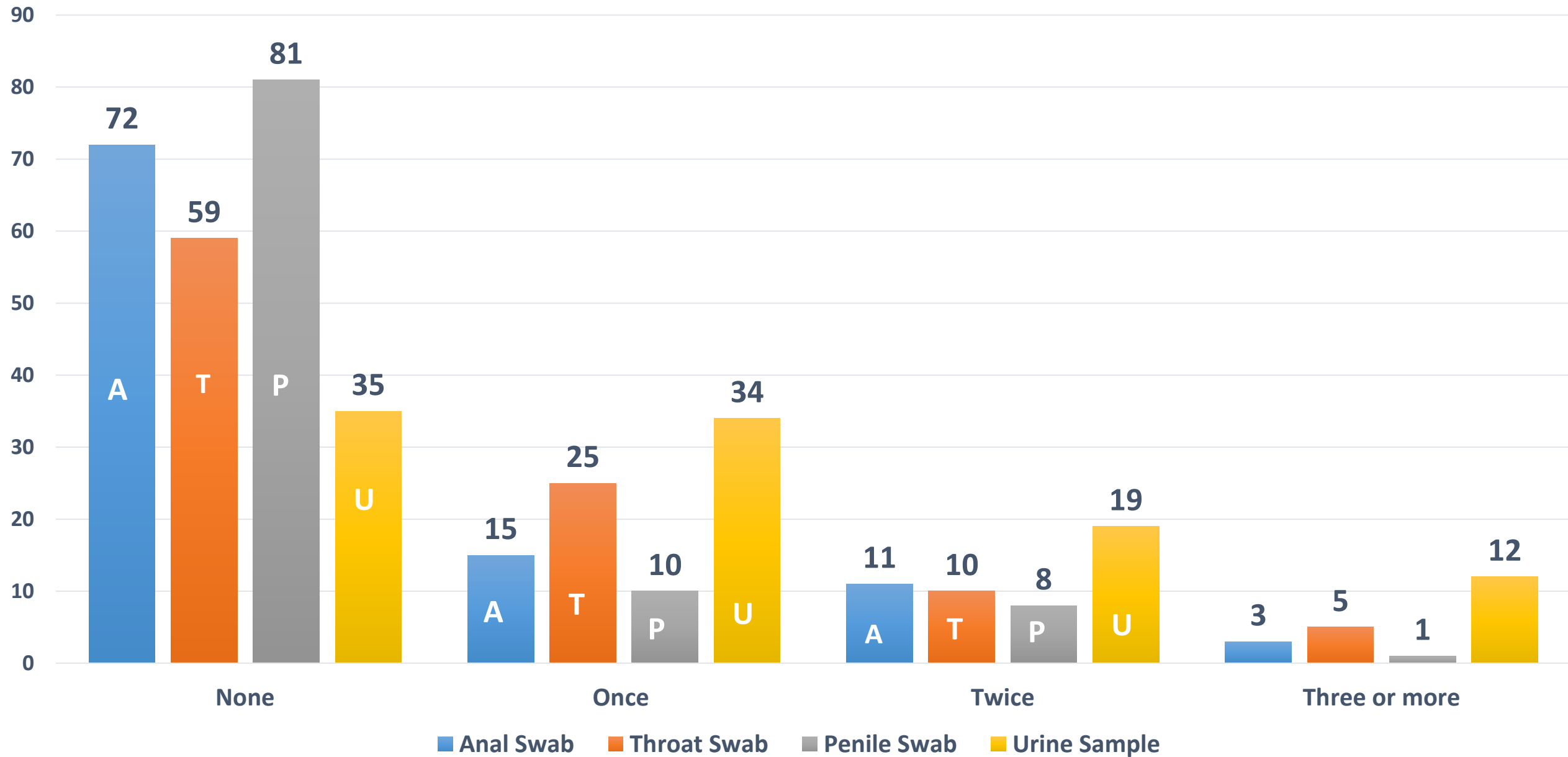
Map by Citadel Mejia and Craig Dalton  
Hofstra Department of Geography and Global Studies



## Which people have you told about your sexual orientation? (%)



# Which of these sexual health tests have you had in the last 12 months? (n= 215)



# HIV Knowledge

**An 18-item assessment on HIV prevention, transmission, and detection.**

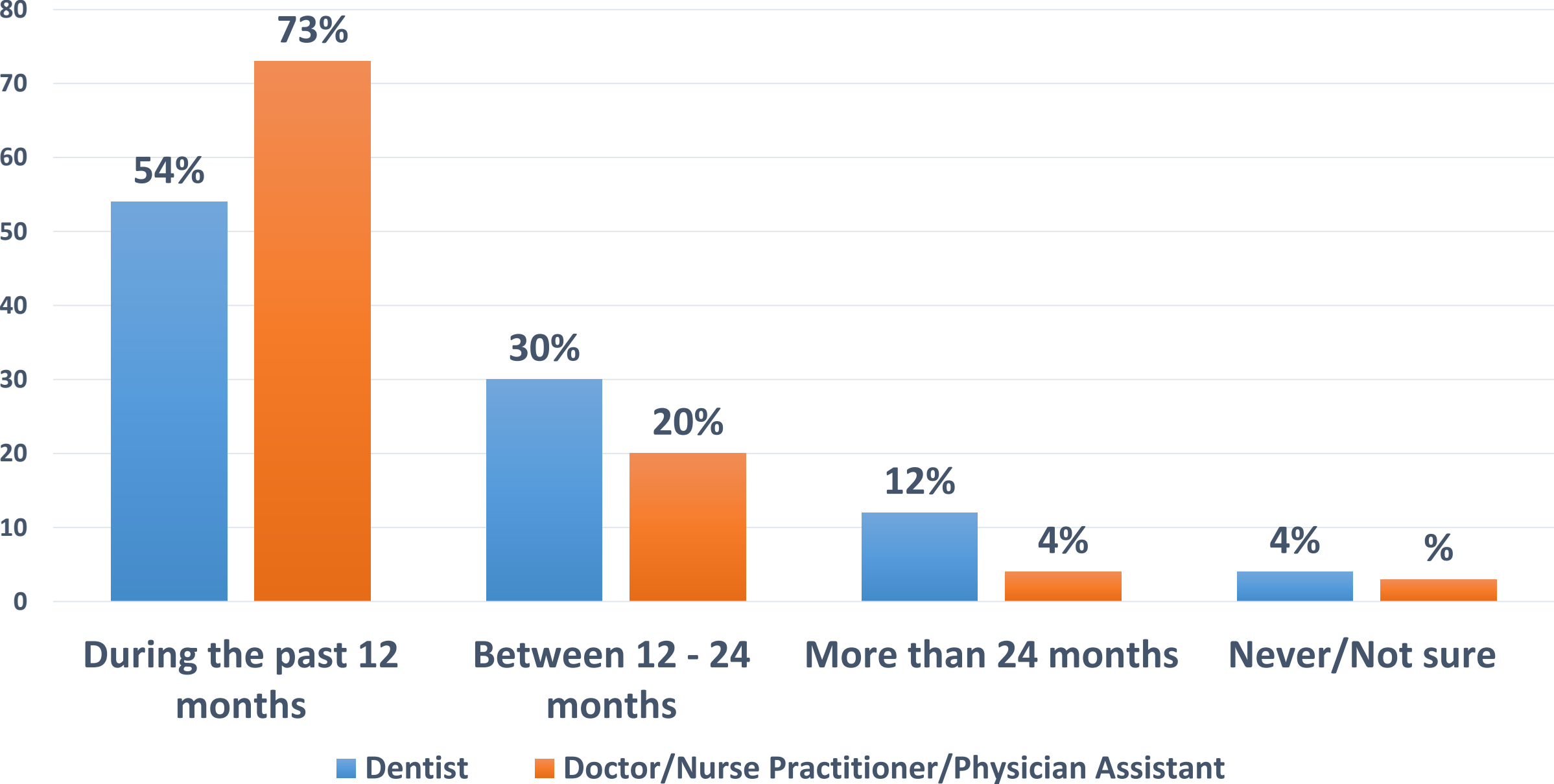
There is a vaccine  
that stops adults  
from getting HIV:  
**47% wrong**

There is a female condom  
that can help decrease a  
woman's chance of  
getting HIV: **46% wrong**

A natural skin condom  
works better against  
HIV than does a latex  
condom: **50% wrong**

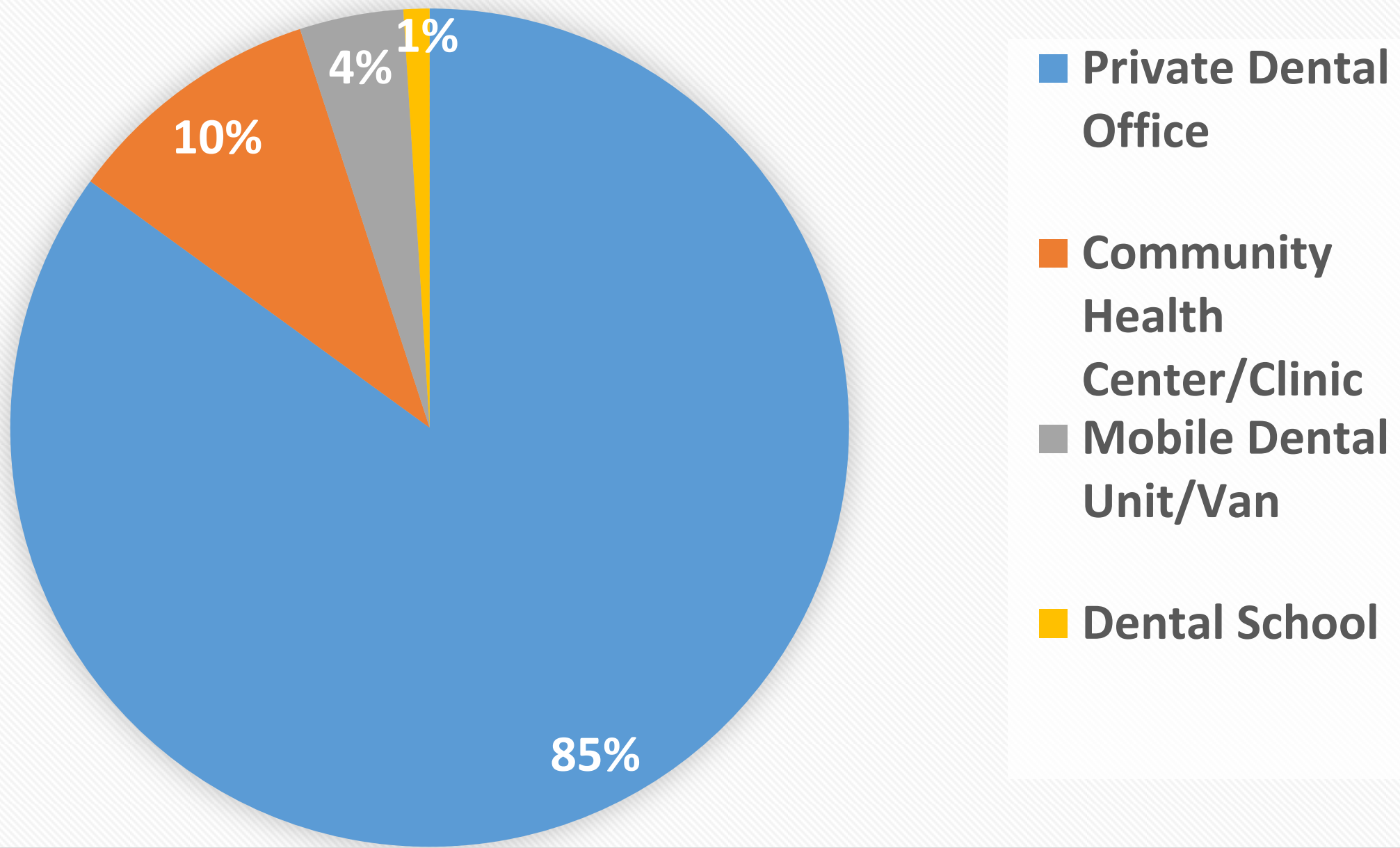
**High Knowledge (13-18 correct): 71.7%**

When was the last time you saw a dentist, doctor/nurse practitioner/physician assistant for a check-up exam? (%)

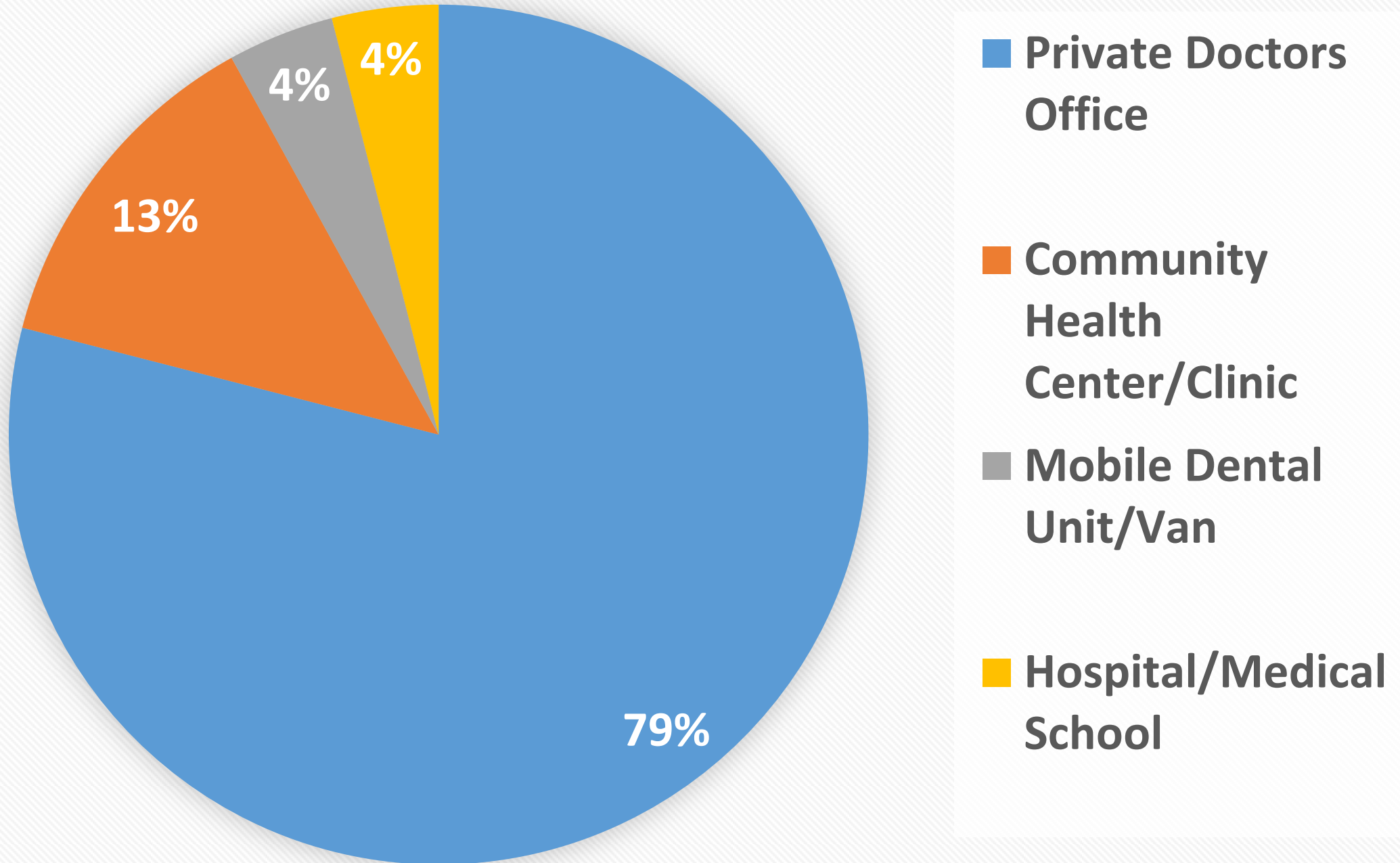




# Where did you receive your dental check-up, exam, teeth cleaning or other dental work?



# Where did you receive your medical check-up or exam?



# Final thoughts

- Keep in mind study limitations
- Send me your thoughts @  
**Anthony.Santella@hofstra.edu**
- Disseminate broader in 2016 (conference, paper)
- Where is HIV/STI prevention planning in Nassau County?
- My challenge to everyone here today – let's get in **SYNC** about HIV and STI prevention!

Thank  
You



# Project SYNC

## (Sex among Youth in Nassau County) Strategies for Effective Intervention

Pete Carney, LCSW

December 4<sup>th</sup> 2015



# Framing our Discussion

Between 2001 and 2011, the annual HIV diagnosis rate for the general American population dropped by a third, while new HIV diagnoses among gay and bisexual men between the ages of 13-24 increased by **132.5 percent**.

*\*Source — Centers for Disease Control*

Young MSM (YMSM) ages 13-29 make up a considerable percentage of new HIV diagnoses in New York State. More than a quarter, 27.9%, of new HIV diagnoses in 2013 were among YMSM, and between 2012 and 2013 YMSM was the only large risk group where new HIV diagnoses increased, up 5%.

*\*Source-NYS AIDS Institute*

# Long Island HIV Data (2013)

## NEW YORK STATE RYAN WHITE REGION: NASSAU/SUFFOLK (Includes counties of: Nassau, Suffolk)

**Newly Diagnosed HIV Cases\* (excluding prisoners) 2013 by Sex at Birth, Age, Race/Ethnicity and Risk**

		HIV Non-AIDS A		Concurrent HIV and AIDS B		Uncertain Concurrency C		All HIV Diagnoses** A+B+C			% Concurrent B÷(A+B)*100
		#	%	#	%	#	%	#	%	Case Rate†	%
Total		163	100.0	61	100.0	10	100.0	234	100.0	8.5	27.2
Sex at Birth	Male	128	78.5	47	77.0	8	80.0	183	78.2	13.5	26.9
	Female	35	21.5	14	23.0	2	20.0	51	21.8	3.6	28.6
Age at Diagnosis	12 & under	1	0.6	-	-	-	-	1	0.4	0.2	-
	13-19	5	3.1	-	-	-	-	5	2.1	1.8	-
	20-24	33	20.2	4	6.6	1	10.0	38	16.2	20.8	10.8
	25-29	28	17.2	5	8.2	-	-	33	14.1	20.5	15.2
	30-39	34	20.9	17	27.9	3	30.0	54	23.1	16.7	33.3
	40-49	22	13.5	17	27.9	4	40.0	43	18.4	10.3	43.6
	50-59	24	14.7	9	14.8	2	20.0	35	15.0	8.0	27.3
	60+	16	9.8	9	14.8	-	-	25	10.7	4.1	36.0
Race/Ethnicity	White Not-Hispanic	45	27.6	23	37.7	3	30.0	71	30.3	3.9	33.8
	Black Not-Hispanic	49	30.1	13	21.3	3	30.0	65	27.8	23.8	21.0
	Hispanic	50	30.7	24	39.3	3	30.0	77	32.9	15.6	32.4
	Asian/PI	2	1.2	-	-	-	-	2	0.9	1.1	-
	Native Am	-	-	-	-	-	-	-	-	-	-
	Multi Race‡	17	10.4	1	1.6	1	10.0	19	8.1	-	5.6
	Unk	-	-	-	-	-	-	-	-	-	-
Risk	MSM	81	49.7	30	49.2	2	20.0	113	48.3	-	27.0
	IDU	6	3.7	-	-	1	10.0	7	3.0	-	-
	MSM/IDU	8	4.9	-	-	-	-	8	3.4	-	-
	Heterosexual	23	14.1	5	8.2	-	-	28	12.0	-	17.9
	Fem. Presumed Het.	20	12.3	9	14.8	2	20.0	31	13.2	-	31.0
	Blood Prod.	-	-	-	-	-	-	-	-	-	-
	Pediatric Risk	1	0.6	-	-	-	-	1	0.4	-	-
	Unk	24	14.7	17	27.9	5	50.0	46	19.7	-	41.5



# What the data tells us

- Males accounted for 78% of all newly diagnosed HIV cases
- Youth, ages 13-29, accounted for 32% of all newly diagnosed HIV cases, with 30% between the ages of 20-29
- African Americans and Latinos accounted for 60% of all newly diagnosed HIV cases
- MSM risk accounted for 51% of all newly diagnosed HIV cases, with 20% of newly diagnosed HIV cases having an “unknown risk”

*\*Source-NYS AIDS Institute*

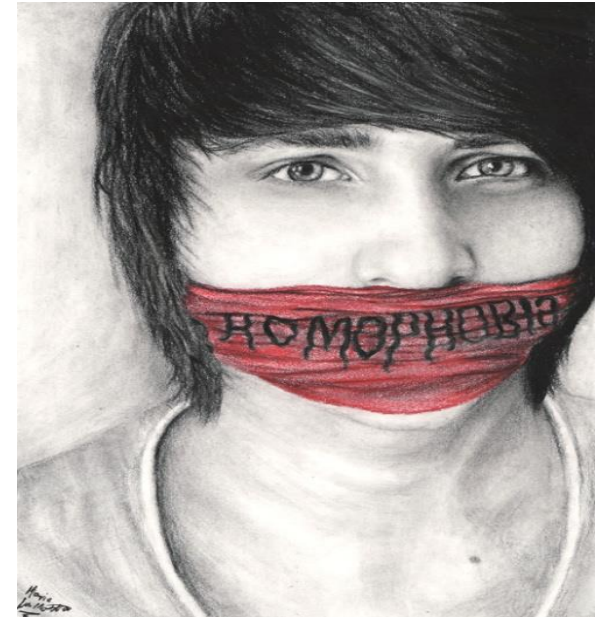
# Challenges faced by Young Men who have Sex with Men (YMSM)

- Condom Fatigue
- Lack of relevant sexual health education
- Over-education leading to fatal thinking
- Professionals resistance to Harm Reduction/ Sex Positive Environments
- Struggles with Maintaining Monogamy
- Social Networking/Mobile Apps
- Resurgence of Drug Use/Party n Play



# Challenges faced by Young Men who have Sex with Men (YMSM)

- Masculine Privilege/ Bottom shame/Intimate Partner Violence
- Suspended Adolescence
- Unresolved Trauma
- Lack of culturally competent health and human service providers
- Lack of “safe spaces ”and opportunities for community
- Homophobia/Racism/Stigma



# Interventions that Work

- Pre-exposure prophylaxis (PrEP) and post-exposure prophylaxis (PEP)



**Concerned about HIV?**

**Get **PrEP**ared.**  
Pride for Youth can now get you started on PrEP (Pre-Exposure Prophylaxis)\*

PrEP is a way for people who do not have HIV, but who are at risk of getting it, to prevent HIV infection by taking a pill every day.


Initial Assessments are free to all gay/bisexual men and trans\* individuals through age 30. (Insurance/Medicaid required to begin medical services.)

Have you been exposed to HIV in the past three days?

PEP (Post-Exposure Prophylaxis) is the use of antiretroviral drugs after a single high-risk event to stop HIV from making copies of itself through your body.

Initial Assessments for PEP are also available free to all gay/bisexual men and trans\* individuals through age 30. (Insurance/Medicaid required to begin medical services.)

\*When taken consistently, PrEP has been shown to reduce the risk of HIV infection in people who are at high risk by up to 92%. - CDC.gov

   Call (516) 679-9000 to speak to a counselor today!  
En Español, llame a Galo Cunto al 516-679-9000 ext. 15  
Correo electrónico: GCunto@longislandcrisiscenter.org



**Preocupado por el VIH?**

**¡PrEPárate!**  
Pride for Youth te puede ayudar a iniciar un régimen de PrEP (La Profilaxis Pre-Exposición)\*

PrEP es un método de prevención del VIH para las personas que son VIH-negativas. PrEP te ayuda a minimizar el riesgo de exposición al VIH usando un solo pastilla que se toma consistentemente al diario.

Consultas iniciales son gratis para los hombres que son gay, bisexuales o transgénero, y que tengan 30 años de edad o menos. (Seguro de Salud o Medicaid es necesaria para acceder a los servicios médicos.)

¿Has estado expuesto al VIH en los últimos tres días?

PEP (La Profilaxis Posterior a la Exposición) es el uso de medicamentos antiretrovirales, después de una sola exposición de VIH para prevenir la multiplicación del virus en tu cuerpo. Consultas iniciales de PEP son gratis para los hombres que son gay, bisexuales o transgénero, y que tengan 30 años de edad o menos. (Seguro de Salud o Medicaid es necesaria para acceder a los servicios médicos.)

\*Cuando se toma consistentemente, PrEP ha demostrado reducir el riesgo de infección de VIH hasta en 92%, en personas de alto riesgo. - CDC.gov

   Para más información, llame a Galo Cunto al 516-679-9000 ext. 15  
Correo electrónico: GCunto@longislandcrisiscenter.org



# Interventions that Work

- Comprehensive Sexual Health Screening and Treatment provided by culturally competent professionals

**PROJECT PLUS+**  
Protecting + Understanding Sexual Health

Health Services for Young Gay, Bisexual, and Queer Men (Trans\* Inclusive) through Age 30

**Services\* Include:**

- Initial Exams
- HIV Testing
- Vaccinations (HPV/Meningitis)
- PrEP/PEP Evaluations
- Screenings/Treatment for Gonorrhea, Chlamydia, Syphilis, and Herpes
- Screening for Hepatitis
- Anal Pap Smears
- Initial Eval for HIV Care

\*Insurance/Medicaid Required

**FREE HIV TESTING**

2nd and 4th Wednesday of Each Month from 3pm - 7pm  
Call (516) 679-9000 to Make an Appointment (Walk-ins Accepted)  
Pride for Youth  
2050 Bellmore Ave.  
Bellmore, NY 11710

Organized and Hosted by: **Pride for Youth**  
Creating Success Through Pride  
A Project of Long Island Crisis Center

Medical Services Provided by: **North Shore LIJ**

The poster features a brick wall background with three young men in the foreground. The man on the left is wearing a plaid shirt, the man in the center is wearing a grey t-shirt and has his hands behind his head, and the man on the right is wearing a dark v-neck shirt. The text is overlaid on the image in various colors and fonts.

# Interventions that Work

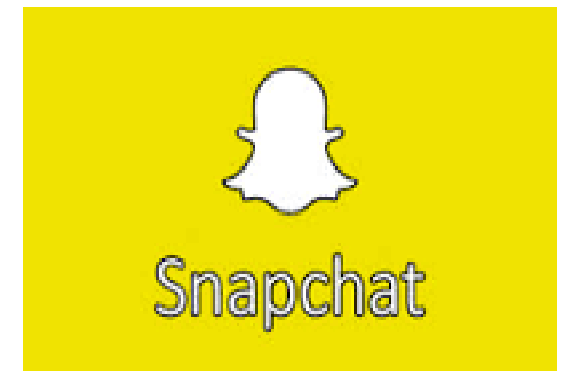
- Safe spaces and opportunities for community building
- Providing sexual health messaging and services in a sex positive social environment





# Interventions that Work

- Online, social media and mobile app sexual health messaging and outreach



# Interventions that Work

- Community based and peer driven outreach and engagement





# Interventions that Work

- Linkage to care
- HIV Testing & Counseling
- Condom Distribution



# Interventions that Work

Addressing needs beyond sexual health:

- Drug/alcohol abuse
- Domestic violence
- Mental Health issues
- Trauma
- Family rejection
- Housing/Employment/Education
- Access to full healthcare



To learn more.....

Contact Pride for Youth:

(516) 679-9000

[pcarney@longislandcrisiscenter.org](mailto:pcarney@longislandcrisiscenter.org)

[www.prideforyouth.org](http://www.prideforyouth.org)

[www.facebook.com/prideforyouth.pfy](https://www.facebook.com/prideforyouth.pfy)



# Questions



# Table Discussion and Talk Back

Each table will need one note taker and one reporter

Table Discussion:

11:15- 11:40am

- 1) Based upon today's discussion and your own professional experiences, what are the three greatest challenges facing young men who have sex with men in Nassau County?
- 2) What resources are available in your agency and the larger community that can be harnessed to address these challenges?
- 3) What resources are lacking or unavailable and what can be done to create these resources?

Talk Back:

11:40-11:55am

Report back

# Ending the AIDS Epidemic by 2020: *Project SYNC -- Determining Risk Factors and Barriers to Engagement for Young MSM in Nassau County*

