To cite these presentations, please use these citations.


• Santella, AJ. (2015, December). *Project SYNC (Sex among Youth in Nassau County): Survey Research Findings*. 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
Ending the Epidemic: From Blueprint to Action
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
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.
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.

Held Transgender Health Symposium July 13-15, 2015
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/
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 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

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.
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
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.hlvguidelines.org/what-is-pep
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.
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

<table>
<thead>
<tr>
<th>Location</th>
<th>Date</th>
<th>Location</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Syracuse</td>
<td>August 3</td>
<td>Manhattan, Lower</td>
<td>September 22</td>
</tr>
<tr>
<td>Buffalo</td>
<td>August 12</td>
<td>Brooklyn</td>
<td>September 24</td>
</tr>
<tr>
<td>Rochester</td>
<td>August 13</td>
<td>Queens</td>
<td>October 13</td>
</tr>
<tr>
<td>Albany</td>
<td>August 18</td>
<td>Staten Island</td>
<td>October 14</td>
</tr>
<tr>
<td>Hudson Valley</td>
<td>August 24</td>
<td>Nassau County</td>
<td>November 12</td>
</tr>
<tr>
<td>Bronx</td>
<td>August 31</td>
<td>Suffolk County</td>
<td>November 13</td>
</tr>
<tr>
<td>Manhattan, Upper</td>
<td>September 21</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Blueprint Alignment with NHAS 2020

“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

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.

Source: Poz.com December 2015
Karen Hagos
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)

Sexual Orientation
- 78% Gay
- 17% Bisexual
- 5% O

Health Care Coverage
- 89% Insured
- 11% Uninsured

Employment Status
- 85% Employed
- 8% Student
- 7% UE

Education
- 26% Less than high school or HS
- 37% Some college, AA/AS or technical degree
- 37% BA/BS or graduate degree

Marital Status
- 6% M
- 94% Single

Gender
- 97% Male
- 3% T

Ethnicity
- 23% Hispanic
- 77% Non-Hispanic

Race
- 64% White
- 10% Black
- 8% Asian
- 18% Other

Age
- 67% 18-24 years old
- 33% 25-30 years old

O = Other, UE = Unemployed, M = Married, T= Trans
How old were you when you had anal sex for the first time?

- Never: 4%
- 11 to 13: 7%
- 14 to 16: 31%
- 17 and older: 58%
How would you describe your sexual relationship with your current regular male partner?

- Monogamous: 30%
- Casual Partners: 14%
- 1+ Regular Partners: 15%
- No Regular Partner: 41%
If you are in a regular relationship with a man, for how long has it been? (%)

- Less than 6 months: 16%
- 6-11 months: 14%
- 1+ years: 21%
- Not in a regular relationship: 49%
Do you have a clear (spoken) agreement with your *regular partner* about anal sex within your relationship? (%)

- No agreement: 11%
- Agreement: No sex: 8%
- All anal sex with a condom: 23%
- Anal sex without a condom: 13%
- Not in a regular relationship: 45%
Do you have a clear (spoken) agreement with your regular partner about sex with *casual partners*? (%)

- No agreement: 14%
- Agreement: No sex: 14%
- Agreement: All anal sex is with a condom: 32%
- Agreement: Anal sex can be without a condom: 5%
- Do not have casual sex partners: 40%
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?

- Yes: 55%
- No: 45%
During anal sex the last time, did you use a condom? (of people who had anal sex at last sex)

- Yes: 66%
- No: 34%
Did you use the condom the whole time? (of people that used a condom)

- No: 40%
- Yes: 60%
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:

- Alcohol: 12%
- Drugs: 10%
- Both alcohol & drugs: 10%
- Neither one: 68%
- Total: 32%
In the past 12 months, how often did you have 5 or more alcoholic drinks in one sitting?

- 50% Never
- 28% 1+ times a week
- 19% 1+ times a month
- 3% 1+ times a day
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?

- Yes: 76%
- No: 24%
What was his HIV status?

- 78% HIV-negative
- 20% Indeterminate/Unknown
- 2% HIV-positive
Where do you regularly meet sex partners? (n =215)

- Internet: 125
- Mobile/Social App: 124
- Bar/Club: 87
- School: 51
- Cruising Area: 22
- Chat Line: 16
- Adult Bookstore: 15
- Bathhouse/Sex Club: 15
- Circuit Party/Rave: 12
- Private Sex Party: 12
In the past 12 months, how often have you used the internet to meet or socialize with gay men either for *friendship* or *sex*?

- Never: 8%
- 1-3 times a day: 36%
- 1-3 times a week: 35%
- 1-3 times a month: 21%
Which social media applications do you use most often to meet sex partners? (n= 215)

<table>
<thead>
<tr>
<th>Application</th>
<th>Frequency</th>
</tr>
</thead>
<tbody>
<tr>
<td>Grindr</td>
<td>165</td>
</tr>
<tr>
<td>Craigslist</td>
<td>47</td>
</tr>
<tr>
<td>Scruff</td>
<td>46</td>
</tr>
<tr>
<td>Adam4Adam</td>
<td>45</td>
</tr>
<tr>
<td>Tinder</td>
<td>38</td>
</tr>
<tr>
<td>Jacked</td>
<td>31</td>
</tr>
<tr>
<td>OK Cupid</td>
<td>25</td>
</tr>
<tr>
<td>Other</td>
<td>17</td>
</tr>
<tr>
<td>Manhunt</td>
<td>12</td>
</tr>
</tbody>
</table>
Have you ever been tested for HIV?

89% Yes

11% No
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?

- 57% None
- 15% 1 - 5 Times
- 14% 6 - 10 Times
- 11% 11 - 15 Times
- 3% None

- None
- Once
- 2 - 5 Times
- 6 - 10 Times
- 11 - 15 Times
What was the result of your most recent HIV test?

- Negative: 90%
- Positive: 5%
- Never Obtained Results: 3%
- Indeterminate/Unknown: 2%
Where did you get tested for HIV? (%)

- Private doctor's office: 35%
- HIV counseling and testing site: 22%
- Health clinic/Health center: 16%
- Other: 15%
- HIV/AIDS street outreach: 6%
- Hospital/ER: 4%
- At home: 2%
Before today, have you heard of people who do not have HIV taking anti-HIV medicines (PrEP), to keep from getting HIV?

- **72%** No
- **28%** 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)?

- No: 80%
- Yes: 20%
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)?

- No: 84%
- Yes: 16%
Other STIs in past 12 months

• Gonorrhea: 13%

• Chlamydia: 15%

• Syphilis: 13%
Respondents Who Had Chlamydia

May by Citadel Mejia and Craig Dalton
Hofstra Department of Geography and Global Studies
Which people have you told about your sexual orientation? (%)

- Gay Friend: 98%
- Non-gay Friend: 86%
- Family: 76%
- Partner: 77%
- Provider: 64%
Which of these sexual health tests have you had in the last 12 months?
(n=215)

- None: 72 times
- Once: 81 times
- Twice: 59 times
- Three or more: 59 times

Tests:
- Anal Swab
- Throat Swab
- Penile Swab
- Urine Sample
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? (%)

- **During the past 12 months**: 73%
- **Between 12 - 24 months**: 30%
- **More than 24 months**: 20%
- **Never/Not sure**: 12%

**Legend**:
- **Dentist**
- **Doctor/Nurse Practitioner/Physician Assistant**
Where did you receive your dental check-up, exam, teeth cleaning or other dental work?

- 85% Private Dental Office
- 10% Community Health Center/Clinic
- 4% Mobile Dental Unit/Van
- 1% Dental School
Where did you receive your medical check-up or exam?

- Private Doctors Office: 79%
- Community Health Center/Clinic: 13%
- Mobile Dental Unit/Van: 4%
- Hospital/Medical School: 4%
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
(Sex among Youth in Nassau County)
Strategies for Effective Intervention

Pete Carney, LCSW
December 4th 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**

<table>
<thead>
<tr>
<th></th>
<th>HIV Non-AIDS A</th>
<th>Concurrent HIV and AIDS B</th>
<th>Uncertain Concurrency C</th>
<th>All HIV Diagnoses** A+B+C</th>
<th>% Concurrent B+(A+B)*100</th>
<th>Case Rate† %</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Total</strong></td>
<td>163 100.0</td>
<td>61 100.0</td>
<td>10 100.0</td>
<td>234 100.0</td>
<td>8.5</td>
<td>27.2</td>
</tr>
<tr>
<td><strong>Sex at Birth</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Male</td>
<td>128 78.5</td>
<td>47 77.0</td>
<td>8 80.0</td>
<td>183 78.2</td>
<td>13.5</td>
<td>26.9</td>
</tr>
<tr>
<td>Female</td>
<td>35 21.5</td>
<td>14 23.0</td>
<td>2 20.0</td>
<td>51 21.8</td>
<td>3.6</td>
<td>28.6</td>
</tr>
<tr>
<td><strong>Age at Diagnosis</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>12 &amp; under</td>
<td>1 0.6</td>
<td></td>
<td></td>
<td>1 0.4</td>
<td>0.2</td>
<td></td>
</tr>
<tr>
<td>13-19</td>
<td>5 3.1</td>
<td></td>
<td></td>
<td>5 2.1</td>
<td>1.8</td>
<td></td>
</tr>
<tr>
<td>20-24</td>
<td>33 20.2</td>
<td>4 6.6</td>
<td>1 10.0</td>
<td>38 16.2</td>
<td>20.8</td>
<td>10.8</td>
</tr>
<tr>
<td>25-29</td>
<td>38 17.2</td>
<td>5 8.3</td>
<td>3 30.0</td>
<td>46 21.1</td>
<td>16.7</td>
<td>15.2</td>
</tr>
<tr>
<td>30-39</td>
<td>34 20.9</td>
<td>17 27.9</td>
<td>3 30.0</td>
<td>54 27.1</td>
<td>33.3</td>
<td></td>
</tr>
<tr>
<td>40-49</td>
<td>22 13.5</td>
<td>17 27.9</td>
<td>4 40.0</td>
<td>43 18.4</td>
<td>10.3</td>
<td>43.6</td>
</tr>
<tr>
<td>50-59</td>
<td>24 14.7</td>
<td>9 14.8</td>
<td>2 20.0</td>
<td>35 15.0</td>
<td>8.0</td>
<td>27.3</td>
</tr>
<tr>
<td>60+</td>
<td>16 9.8</td>
<td>9 14.8</td>
<td></td>
<td>25 10.7</td>
<td>4.1</td>
<td>36.0</td>
</tr>
<tr>
<td><strong>Race/Ethnicity</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>White Not-Hispanic</td>
<td>45 27.0</td>
<td>23 37.7</td>
<td>3 30.0</td>
<td>73 30.3</td>
<td>3.9</td>
<td>33.8</td>
</tr>
<tr>
<td>Black Not-Hispanic</td>
<td>49 30.1</td>
<td>13 21.3</td>
<td>3 30.0</td>
<td>65 27.8</td>
<td>23.8</td>
<td>21.0</td>
</tr>
<tr>
<td>Hispanic</td>
<td>50 30.7</td>
<td>24 39.3</td>
<td>3 30.0</td>
<td>77 32.9</td>
<td>15.6</td>
<td>32.4</td>
</tr>
<tr>
<td>Asian/PI</td>
<td>2 1.2</td>
<td></td>
<td></td>
<td>2 0.9</td>
<td>1.1</td>
<td></td>
</tr>
<tr>
<td>Native Am</td>
<td></td>
<td></td>
<td></td>
<td>1.6</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Multi Race‡</td>
<td>17 10.4</td>
<td>1 1.6</td>
<td>1 10.0</td>
<td>19 8.1</td>
<td>5.6</td>
<td></td>
</tr>
<tr>
<td>Unk</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Risk</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>MSM</td>
<td>88 54.7</td>
<td>30 49.2</td>
<td>2 20.0</td>
<td>113 48.3</td>
<td>27.0</td>
<td></td>
</tr>
<tr>
<td>IDU</td>
<td>6 3.7</td>
<td></td>
<td>1 10.0</td>
<td>7 3.0</td>
<td></td>
<td></td>
</tr>
<tr>
<td>MSM/IDU</td>
<td>8 4.9</td>
<td></td>
<td></td>
<td>8 3.4</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Heterosexual</td>
<td>23 14.1</td>
<td>5 8.2</td>
<td></td>
<td>28 12.0</td>
<td>17.9</td>
<td></td>
</tr>
<tr>
<td>Fem., Presumed Hot.</td>
<td>20 12.3</td>
<td>9 14.8</td>
<td>2 20.0</td>
<td>31 13.2</td>
<td>31.0</td>
<td></td>
</tr>
<tr>
<td>Blood Prod</td>
<td></td>
<td></td>
<td></td>
<td>1 0.4</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pediatric Risk</td>
<td>1 0.6</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Unk</td>
<td>24 14.7</td>
<td>17 27.0</td>
<td>5 50.0</td>
<td>46 19.7</td>
<td>41.5</td>
<td></td>
</tr>
</tbody>
</table>
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)
Interventions that Work

- Comprehensive Sexual Health Screening and Treatment provided by culturally competent professionals
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
www.prideforyouth.org
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