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[TITLE:] STIMULANT USE AS POTENTIAL PREDICTORS OF HIV RISK TAKING BEHAVIOR AMONG MEN WHO HAVE SEX WITH MEN-- NATIONAL HIV BEHAVIORAL SURVEILLANCE IN DALLAS

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BACKGROUND: Stimulant use has historically been considered an antecedent to high-risk sexual behaviors among men who have sex with men (MSM). This presentation describes frequent stimulant use, risk behaviors, and HIV status among MSM sampled by National HIV Behavioral Surveillance conducted in Dallas.

METHODS: The National HIV Behavioral Surveillance system (NHBS) is a cross-sectional, venue-based sampling survey developed by CDC with collaborating researchers. NHBS is conducted under the title Health Information Survey (HIS) in Dallas. HIS collect(ed) demographic, behavioral, and HIV serological data from MSM who are 18 years of age and older. For the present analyses, 951 MSM were examined. HIV test results were available for 278 of these participants. The present analyses explore the use of speed, cocaine and crack. Frequent stimulant use (FSU) is defined as using cocaine, crack, or speed at least once per week in the past 12 months. Associations between FSU and demographic characteristics, HIV status, and HIV risk behaviors such as being high during the last sexual encounter and knowledge of partner's HIV status are explored.

RESULTS: 20% of all MSM sampled reported using powder cocaine, making it the most used stimulant reported in the last 12 months. 13% reported using speed and 7% crack. FSU was similar across race/ethnicity, with 9% of Whites, 9% of Blacks, and 11% of Hispanics reporting use. The majority of FSU occurred among MSM 30-39 years of age, who represented 55% of users ($p < .0001$). 16% of FSU were 23-29, 14% were 18-22, and 13% were 40-49. FSU were 4 times more likely to be HIV positive than non-FSU [OR: 4.061 (1.86, 8.87)]. 70% of FSU reported being high or buzzed the last time they had sex,

making them almost seven times more likely than non-FSU to report being high or buzzed the last time they had sex [OR: 6.9 (4.32, 11.03)]. FSU were also 2.4 times more likely to report not knowing their last sex partner's most recent HIV test result than non-FSU [OR: 2.36 (1.5, 3.7)]. Frequent speed users were 2.8 times more likely to report unprotected anal sex the last time they had sex than non-frequent speed users [OR: 2.82 (1.51, 5.25)].

CONCLUSIONS: These analyses demonstrate relationships between stimulant use and HIV risk taking behaviors among MSM, including being unaware of their partner's HIV status and having unprotected anal sex. Results also show a significant relationship between stimulant use and HIV status. These preliminary results suggest the need to further understand HIV risk taking behavior among MSM who are stimulant users, in order to better guide the selection of appropriate interventions for this risk group. For example, the high proportion of stimulant use among MSM 30-39 years of age has implications for prevention messages targeted to this age group.



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