HIV/AIDS Among Gay and Bisexual Men in New Jersey

Prevention & Treatment Needs for Men who have Sex with Men (MSM)

Despite significant declines in HIV infection since the early years of the epidemic, men who have sex with men (MSM) at the national level continue to be the population at highest risk for HIV and many sexually transmitted diseases (STD’s). The HIV epidemic, which began primarily among white gay men, is now dramatically affecting African American and Hispanic/Latino MSM. Although there is reduction in high-risk behaviors among MSM, motivating individuals to maintain long-term behavior change is required. In addition, recent outbreaks of STD’s, including syphilis, have occurred among MSM in urban areas, signifying the presence of unsafe behaviors that make this population vulnerable to continued STD and HIV transmission. Prevention efforts must be expanded to reach MSM of all races, and these efforts must be sustained over time.

In 2014, gay and bisexual men made up an estimated 2% of the all U.S. population, but accounted for 70% of new HIV infections. From 2010 to 2014, annual HIV infections remained stable but increased 23% among gay and bisexual men aged 25 to 34 and increased 14% among Hispanic/Latino gay and bisexual men.

As of 12/31/2017, there are 21,091 MSM (18,515 MSM, 2,576 MSM&IDU) diagnosed cumulatively total HIV/AIDS in NJ. It is 26% of all accumulative HIV/AIDS cases in NJ. MSM is the only risk group in New Jersey in which MSM percentage in men’s HIV infection reported has been steadily increasing from 2008 (40%) to 2017 (49%) for 10 years.

Prevention Efforts Must Focus on MSM High-Risk Behaviors

♦ Men in the MSM exposure (MSM & MSM/IDU) mode accounted for 38% of the adult/adolescent in HIV/AIDS cases reported in 2017 for NJ. Compared with Other mode, IDU reported in 2017 accounted for only 3%, heterosexual exposure categories (29%) and other/unknown risk categories (29%) among 2017 cases reported.

♦ Men of color have been especially hit hard and represent the majority (61%) of HIV infections of all years among MSM (particularly 36.5% is Black non-Hispanic, 24.5% is Hispanic).

♦ Black account for 38% and Hispanic account for 40.6% of HIV/AIDS cases diagnosed in 2015 among all MSM or MSM&IDU men. In 2015, there were 1,170 new HIV/AIDS in NJ. The three most-affected subpopulation: Hispanic MSM (include MSM&IDU) had 207 new HIV/AIDS in 2015. Black MSM (include MSM&IDU) had 194 new HIV/AIDS in 2015. Black Heterosexual Women had 130 new HIV/AIDS in 2015.

♦ Many MSM with HIV/AIDS are residing in poor areas, with low income and face limited access to health care system and experience disparities in receipt of care and treatment.

MSM reported HIV/AIDS till December 31, 2017 in New Jersey account for:

♦ 31% of all people living through 2017 with HIV/AIDS in the state, MSM (include MSM&IDU comprise) accounts more than one in every three persons living with HIV/AIDS.

♦ MSM account for 45% (n=11,549) of 2017 living HIV/AIDS cases among men (It comprise 877 MSM&IDU).
Current Trends (Data as of December 31, 2017)

The number of MSM living with HIV/AIDS has increased steadily in New Jersey over the past 5 years. By contrast, the number of men who reported injection drug use (IDU) has leveled off largely due to a decrease in new reports. The numbers of HIV infection attribute to IDU have decreased 80% in the recent 10 years. The MSM among the risk categories is the only exposure where the numbers of new patients do not decrease in recent 10 years. The percentages of MSM in the HIV infection risk categories are increasing between 2006 and 2015. MSM continue to bear the greatest burden of HIV infection which is back to the beginning of the epidemic. Age of MSM diagnosed HIV/AIDS become younger in current decade. Median age of all MSM only in NJ diagnosed HIV/AIDS in 2016 is 29 which down from 34 in 2007, while median age of other men (not MSM only) diagnosed HIV/AIDS in 2016 is 39 which down from 44 in 2007.

Among races/ethnicity, Africans continue to be disproportionately affected, especially young black MSM, are at a particularly high risk for HIV infection. (Media age of Black MSM diagnosed HIV/AIDS in 2016 is 26 which down from 30 in 2007, while media age of White diagnosed HIV/AIDS in 2016 is 36 which down from 40 in 2007).

MSM Hard hit areas in New Jersey

- Essex County has the highest number (2,206) of MSM 2017 living with HIV/AIDS among New Jersey 21 counties, followed by Hudson (2,136), Union (802), Camden (744) and Bergen (704).

- Hunterdon County has the highest proportion of MSM (77, 61.1%) among men 2017 living with HIV/AIDS, followed by Gloucester (202, 55%), Hudson (2136, 56.5%), Camden (744, 56%), Burlington (352, 55.7%), Cap-May (84, 55.3%), Ocean (283, 53.7%), Bergen (704, 53.6%) and Monmouth (695, 52.8%). Although Essex County has the State’s highest number (2,206) of MSM living with HIV/AIDS among New Jersey’s 21 counties, but Essex County has the lowest proportion of MSM (37.5%) among adult/adolescent men living with HIV/AIDS.

- Top 10 Cities with highest number of MSM 2017 living with HIV/AIDS in NJ are Newark (1,249), Jersey City (1,212), Trenton (325), Paterson (325), Elizabeth (318,11% increase from # in 2016), East Orange(305), Camden (210), Atlantic City (199), Union City(195) and Asbury Park(188) have the highest number of MSM living with HIV/AIDS in the state through 2017.

- Among those cities with 50 or more MSM persons living with HIV/AIDS, the cities with highest percentage of MSM over all men are Collingswood(51, 87.9),Weehawken (MSM#:56, 69.1%), Hoboken (111, 65.3%), Cherry Hill (56, 63.6%), Winslow(62,61.4%), West New York (156, 60.6%), North Bergen(143,60.1%), Englewood(58,58.6%), Jersey City (1212, 57.4%), Asbury Park (188, 57.3%), Belleville(51,57.3%), Union City (195, 56.5%), and Pennsauken (52, 54.7%). Six of these 13 cities are in Hudson County and 4 in Camden County.

For more information

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