Gay, bisexual, and other men who have sex with men (MSM) represent approximately 2% of the United States population, yet are the population most severely affected by HIV. In 2010, young gay and bisexual men (aged 13-24 years) accounted for 72% of new HIV infections among all persons aged 13 to 24, and 30% of new infections among all gay and bisexual men. At the end of 2011, an estimated 500,022 (57%) persons living with an HIV diagnosis in the United States were gay and bisexual men, or gay and bisexual men who also inject drugs.

Estimated New HIV Infections in the United States for the Most-Affected Subpopulations, 2010

<table>
<thead>
<tr>
<th>Subpopulation</th>
<th>New Infections</th>
</tr>
</thead>
<tbody>
<tr>
<td>White MSM</td>
<td>11,200</td>
</tr>
<tr>
<td>Black MSM</td>
<td>10,600</td>
</tr>
<tr>
<td>Hispanic/Latino MSM</td>
<td>6,700</td>
</tr>
<tr>
<td>Black Heterosexual Women</td>
<td>5,300</td>
</tr>
<tr>
<td>Black Heterosexual Men</td>
<td>2,700</td>
</tr>
<tr>
<td>White Heterosexual Women</td>
<td>1,300</td>
</tr>
<tr>
<td>Hispanic/Latino Heterosexual Women</td>
<td>1,200</td>
</tr>
<tr>
<td>Black Male IDUs</td>
<td>1,100</td>
</tr>
</tbody>
</table>


HIV and AIDS Diagnoses

- In 2013, in the United States, gay and bisexual men accounted for 81% (30,689) of the 37,887 estimated HIV diagnoses among all males aged 13 years and older and 65% of the 47,352 estimated diagnoses among all persons receiving an HIV diagnosis that year.
- In 2013, gay and bisexual men accounted for 55% of the estimated number of persons diagnosed with AIDS among all adults and adolescents in the United States. Of the estimated 14,611 gay and bisexual men diagnosed with AIDS, 40% were blacks/African Americans; 32% were whites; and 23% were Hispanics/Latinos.
- By the end of 2011, an estimated 311,087 gay and bisexual men with AIDS had died in the United States since the beginning of the epidemic, representing 47% of all deaths of persons with AIDS.
- In 2011, CDC data showed that 80.6% of MSM with diagnosed HIV infection were linked to care, 57.5% were retained in care, 52.9% were prescribed antiretroviral therapy (ART), and 44.6% had achieved viral suppression.
Prevention Challenges

The large percentage of gay and bisexual men living with HIV means that, as a group, gay and bisexual men have an increased chance of being exposed to HIV. Results of HIV testing conducted in 20 cities as part of the National HIV Behavioral Surveillance System (NHBS) indicated that 18% of gay and bisexual men tested in 2011 had HIV and that HIV prevalence increased with increasing age.

Many gay and bisexual men with HIV are unaware they have it. Even though the NHBS study showed that the overall percentage of gay and bisexual men with HIV who knew of their HIV infection increased from 56% in 2008 to 66% in 2011, there were still many who did not know they had HIV. Among those infected, only 49% of young gay and bisexual men aged 18 to 24 years knew of their infection, whereas 76% of those aged 40 and older were aware of their HIV infection. Fifty-four percent of black/African American gay and bisexual men knew of their infection, compared with 63% of Hispanic/Latino gay and bisexual men, and 86% of white gay and bisexual men. People who don’t know they have HIV cannot get the medicines they need to stay healthy and may infect others without knowing it. The Centers for Disease Control and Prevention (CDC) recommends that all gay and bisexual men get tested for HIV at least once a year. Sexually active gay and bisexual men may benefit from more frequent testing (e.g., every 3 to 6 months).

Sexual risk behaviors account for most HIV infections in gay and bisexual men. Most gay and bisexual men acquire HIV through anal sex, which is the riskiest type of sex for getting or transmitting HIV. For sexually active gay and bisexual men, the most effective ways to prevent transmitting or becoming infected with HIV are to be on antiretroviral medications (to either treat or prevent infection) and to correctly use a condom every time for anal or vaginal sex. Gay men are at increased risk for sexually transmitted diseases (STDs), like syphilis, gonorrhea, and chlamydia, and CDC recommends that all sexually active gay and bisexual men be tested at least annually for these infections and obtain treatment, if necessary.

Having more sex partners compared to other men means gay and bisexual men have more opportunities to have sex with someone who can transmit HIV or another STD. Similarly, among gay men, those who have more partners are more likely to acquire HIV.

Homophobia, stigma, and discrimination may place gay men at risk for multiple physical and mental health problems and affect whether they seek and are able to obtain high-quality health services.

What CDC Is Doing

CDC awarded $55 million over 5 years to 34 community-based organizations to provide HIV testing to more than 90,000 young gay and bisexual men of color and transgender youth of color with the goals of identifying more than 3,500 previously unrecognized HIV infections and linking those who have HIV to care and prevention services. Additionally, CDC’s MSM Testing Initiative seeks to identify at least 3,000 MSM with HIV who were previously unaware of their infection and link at least 85% to care.

CDC is aligning surveillance and program activities more closely. For example, more people living with HIV should be linked to care, receive continuous care and antiretroviral treatment, and achieve a suppressed HIV viral load—the most important goal for maximizing a person’s health as well as reducing the risk of transmission. By increasing the reporting of CD4 and viral load data across the country, CDC will aid health departments and clinicians in monitoring treatment progress toward viral load suppression. Currently, CDC estimates that only 25% of the 1.1 million individuals with HIV have their viral loads adequately suppressed.

CDC supports biomedical approaches to HIV prevention. Pre-exposure prophylaxis (PrEP), which involves taking antiretroviral medications prior to becoming exposed to HIV, can reduce the risk of HIV infection in individuals at substantial risk of infection. Post-exposure prophylaxis, which involves taking antiretroviral medications soon after possible exposure to HIV, also plays a role in HIV prevention, but should not be considered a primary means of HIV prevention. Also, while HIV treatments can dramatically improve the health of HIV-positive persons who are treated, they also have prevention benefits: individuals whose HIV viral loads are suppressed have a greatly reduced chance of transmitting the virus to their partners.

Through its Act Against AIDS campaigns, CDC aims to provide MSM with effective and culturally appropriate messages about HIV prevention. The Reasons/Razones testing campaign features Latino gay and bisexual men sharing their reasons for getting an HIV test. Testing Makes Us Stronger encourages black gay and bisexual men to get tested for HIV. Let’s Stop HIV Together focuses on raising awareness of HIV and AIDS and combatting complacency and stigma by increasing support for people living with the disease. Start Talking. Stop HIV. encourages gay and bisexual men to communicate about testing and other HIV prevention issues.

CDC also funds state and local health departments and community-based organizations to support HIV prevention services for MSM.

Read more about CDC activities to reduce HIV risk and improve the health of MSM (www.cdc.gov/msmhealth/msm-programs.htm.)

Additional Resources

CDC-INFO
1-800-CDC-INFO (232-4636)
www.cdc.gov/info

CDC HIV Website
www.cdc.gov/hiv

CDC Act Against AIDS Campaign
www.cdc.gov/actagainstaids