

CROSS-PORTFOLIO MESSAGES

Men who have sex with men and HIV prevention

EHPA'S MSM PORTFOLIO

Evidence for HIV Prevention in Southern Africa (EHPA) is a catalytic intervention, contributing to HIV prevention for adolescents and key populations through generating evidence of what works and why, and developing strategies to inform policymaking processes.

EHPA has funded three research studies and several reviews on topics related to scaling up services for men who have sex with men (MSM). They include:

- *Together Tomorrow*: a study of minority stressors among MSM couples in Namibia and South Africa. Human Sciences Research Council (HSRC);
- *Anza Mapema*: a study of the burden of STIs among MSM in Kisumu Kenya. Nyanza Reproductive Health Society;
- *TRANSFORM*: advancing sexual health for MSM in Johannesburg, South Africa and Nairobi, Kenya. Wits Reproductive Health Institute;
- *Critical Review of sexual health services for MSM in eastern and southern Africa*. HSRC;
- *Change for Kisumu*: a case study of the process that led to greater inclusion of, and appropriate services for MSM in Kisumu, Kenya. Nordic Consulting Group; and
- *KP manual for Swazi health workers*: a case study of the process that led to a government-endorsed manual for key populations in Swaziland. Nordic Consulting Group.

COMMON THEMES

EHPA researchers from the MSM portfolio met in Johannesburg in March 2018 to discuss the common themes that have arisen from their research. They identified and discussed three key themes that recurred throughout their research in different communities in the region:

- Limited uptake by MSM of testing, prevention and pre-exposure prophylaxis (PrEP);
- The need to train health workers to provide sensitive and clinically competent care for MSM; and
- The high burden of mental health issues for MSM and the impact of this on HIV and health-seeking behaviour.



EHPsa SHORTS

MSM CROSS-PORTFOLIO MESSAGES | MAY 2018

MESSAGES

The three messages sets are as follows:

MESSAGE 1: MSM are not taking up HIV prevention opportunities

- MSM are reluctant to test for HIV, particularly as couples
- Condom use in anal sex is low and inconsistent, particularly with primary partners
- There is little understanding of PrEP, and low PrEP uptake in countries where it is available

MESSAGE 2: Health workers need training to deliver appropriate MSM HIV services

- Health worker attitudes can drive MSM away from HIV services
- Health worker training is fundamental to scaling up HIV services
- There are many successful models for health worker MSM training in the region

MESSAGE 3: Mental health services are essential for a holistic HIV prevention package for MSM

- MSM in the region have high levels of mental health issues
- Mental health issues make MSM more vulnerable to HIV
- Mental health services should be built in to HIV services for MSM

ADDITIONAL FINDINGS

Other common findings of significance include:

- High levels of STIs among MSM.
- A high proportion of MSM (of up to 54%) who also have sex with women.
- A lack of focus on services for adolescent MSM.
- The association of HIV with sexual positioning: receptive or versatile positioning confers higher risk on MSM. Prevention education for MSM should include this more granular messaging.
- The difficulty of reaching hidden populations of MSM including older men, middle class men, white men, and men who do not identify as gay.
- The high use of social media by MSM, which presents opportunities for HIV prevention.
- Ambivalence towards specialised MSM services: some study participants strongly advocate MSM-targeted services while others show a clear preference for integrated services in public sector facilities. More analysis is needed to understand these differences.
- A tension around language, with many participants finding the term MSM exclusionary or even offensive. This is an important factor to consider in programming, particularly for transgender women.
- The important role of MSM staff and peer educators in improving usage of, and quality of services.

CONCLUSION

MSM constitute an important key population that is currently 'left behind' in HIV prevention strategies of the ESA region. Together, the three key messages emerging from EHPsa research throw a light on critical supply- and demand-side challenges in reaching MSM with HIV prevention services. Additional findings also provide important information for HIV prevention services for MSM. In this way, EHPsa makes a modest contribution towards the achievement of the SDGs and fast-track HIV goals of ending AIDS by 2030.

More information on EHPsa's MSM portfolio and further detail on the three key messages is provided in accompanying message documents at <http://www.ehpsa.org/research/msm>



More about EHPsa: www.ehpsa.org

