

Portrait of the Health and Well-being of Gay, Bisexual and Other Men Who Have Sex with Men in Greater Montreal

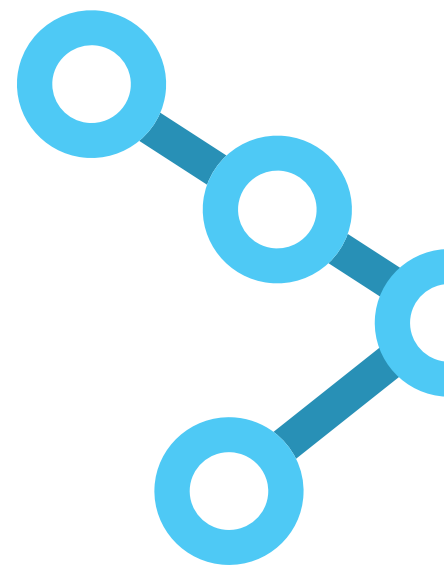
Montreal site of the national Engage study (2017-2018)



The Engage Montreal study surveyed a total of 1,179 cisgender and transgender gay, bisexual and other men who have sex with men (GBM) from February 2017 to June 2018 to understand the health and well-being of GBM in Montreal. The information collected will support prevention and treatment interventions for HIV and other sexually transmitted infections (STIs).

Overall, we are seeing some positive health and well-being outcomes among GBM in Montreal. The city is on target to meet its UNAIDS goals for 2025 with a significant number of GBM living with HIV engaged in the cascade of care. GBM with multiple partners are also accessing PrEP at a higher rate and being tested more regularly for STIs.

More work is required, though, on a number of fronts. Further education around U=U is needed in order to reduce stigma and improve the health and well-being of Montreal's GBM population. More also needs to be done to test, treat and prevent syphilis, as well as to inform GBM about the effects and availability of PrEP. GBM continue to use substances, sometimes requiring culturally competent harm reduction programs and treatment options. This community report presents key findings from our baseline data, however, for the full technical report, you can visit: https://www.engage-men.ca/wp-content/uploads/2019/04/Engage_Highlights_ENG_Mars-2019.pdf



About Engage

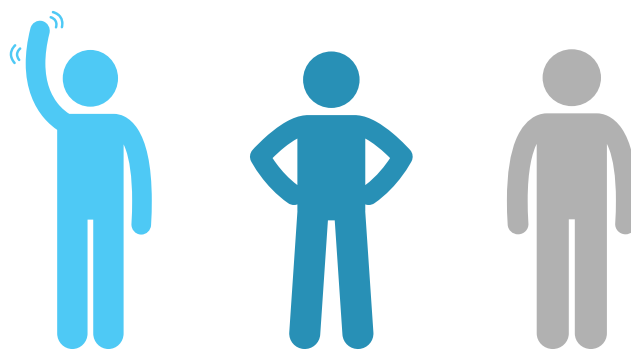


The Engage study is a longitudinal cohort of GBM from the community that collects detailed sociodemographic, behavioural, attitudinal, and biological information related to sexual health, HIV, Hepatitis C, other STIs, substance use, and psychosocial health. Recognizing the significant lack of understanding of the needs of GBM across Canada—and that GBM continue to be affected by HIV and STIs at alarming rates—the study was designed to address critical knowledge gaps in HIV and STI prevention. With study sites in Vancouver, Toronto and Montreal, Engage represents a national partnership of researchers, public health leaders, and community leaders whose shared goal is to conduct, support, and facilitate high-quality and policy-relevant HIV and STI research on GBM.



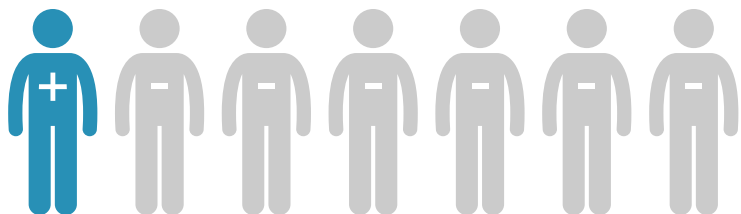
Our Sample

Almost a third (32.6%) of participants reported being under the age of 30 years old. The rest of the participants (67.4%) were between 30 and 80 years old. In terms of annual income before taxes, more than half (57.5%) reported an income of less than \$30,000. 29.9% of participants indicated their highest level of completed education as either elementary school, high school, or a trade/vocational/technical/institute. The majority of participants (69.6%) were born in Canada, with more than a third of participants (37.8%) reporting as identifying with an ethnic group other than French- or English-Canadian. In terms of gender identity, 2.1% of participants identify as trans men and 4.5% identify as genderqueer.

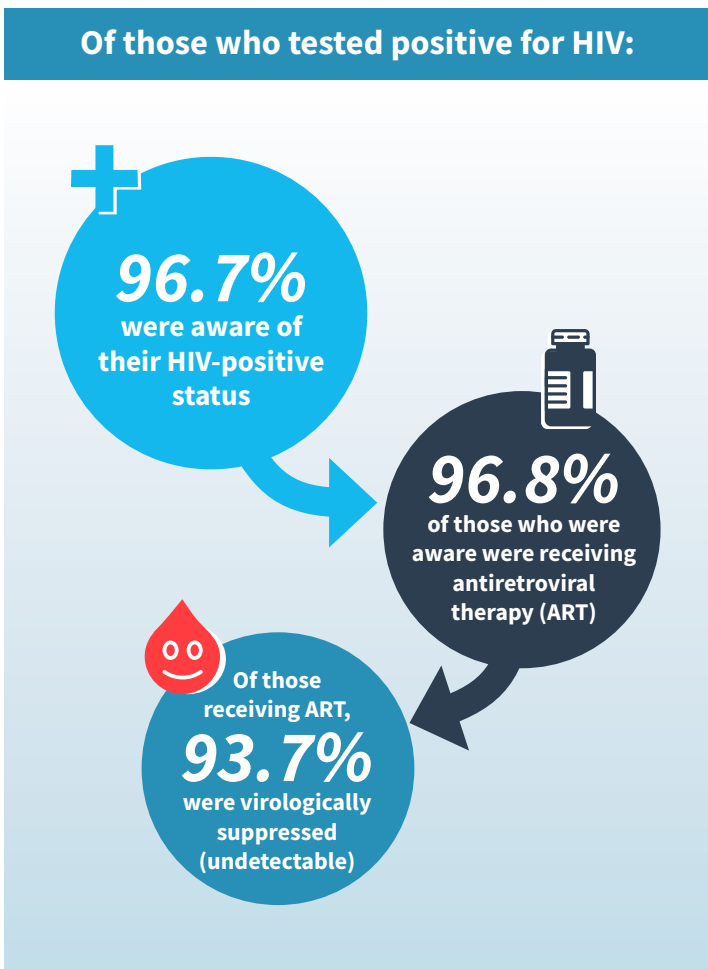


HIV Cascade of Care

The HIV cascade of care is a model that outlines the steps of care that people living with HIV go through from initial diagnosis to viral suppression (becoming undetectable). The cascade shows the proportion of individuals living with HIV who are engaged at each step. One goal of the model is to identify any gaps in services for people living with HIV. Our study measured key cascade of care indicators for GBM living with HIV in Montreal.



These results are encouraging, as it shows that GBM in Montreal are well engaged with HIV testing and treatment and are on track to meet the 95-95-95 UNAIDS goals for 2025 (whereby 95% of individuals living with HIV are aware of their HIV-positive status, of whom 95% are receiving ART and of whom 95% reach viral suppression).

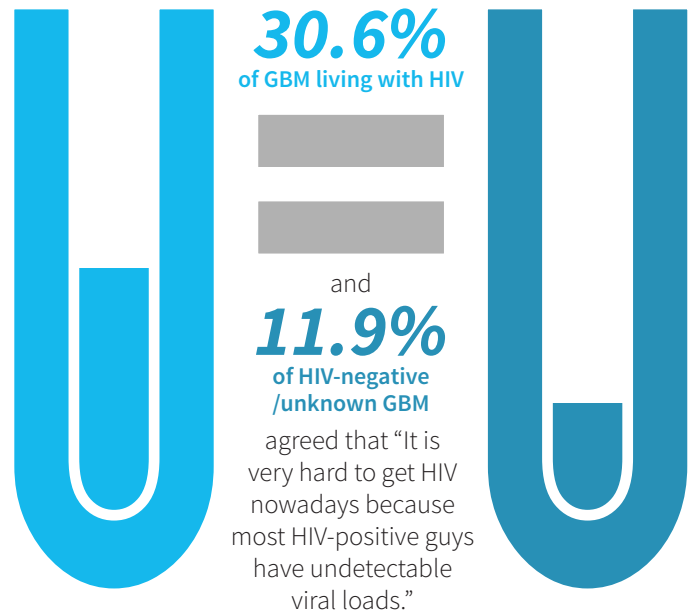


U = U

U=U (undetectable = untransmittable) means that people with HIV who achieve and maintain an undetectable viral load—the amount of HIV in the blood—by taking antiretroviral therapy (ART) cannot sexually transmit the virus to others.

Despite U=U campaigns, uptake of the message among GBM appears low. **When asked about the statement “It is very hard to get HIV nowadays because most HIV-positive guys have undetectable viral loads,” less than a third of HIV-positive and even fewer HIV negative GBM agreed.**

Further education around U=U, as well as additional anti-stigma campaigns are needed to better inform GBM of the impacts of antiretroviral therapy (ART) in reducing HIV transmission. You can read more about U=U here: positiveeffect.org.



PrEP

PrEP (pre-exposure prophylaxis) is medication that people take to prevent getting HIV. In Quebec, PrEP is covered by public health insurance and carries a maximum fee per month of approximately \$100. For some, this remains unaffordable.

Among all HIV negative/unknown status participants:

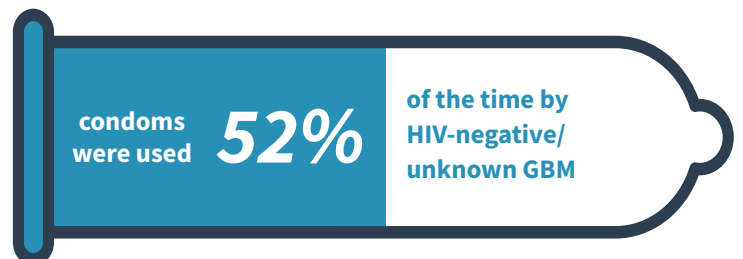
These results show that as of 2017-2018, only a small number of those considered at risk of getting HIV are taking advantage of this prevention option. More needs to be done to educate GBM about the benefits of PrEP, while removing barriers to access. For more information on PrEP, visit <https://maprep.org>

7.4% had taken PrEP at least once in the past 6 months

This number was greater, 18.4% for those who reported 6 or more male sexual partners in the past 6 months

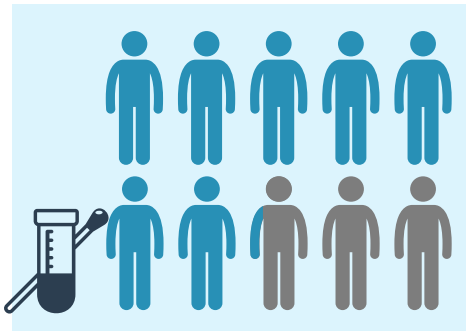
Condom Use

When it comes to condom use during anal sex, HIV-negative participants used a condom 52% of the time with their most recent partners. Participants living with HIV used a condom 26% of the time during anal sex with their most recent partners.

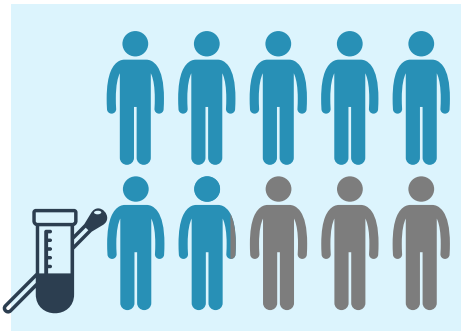


HIV/STI Testing

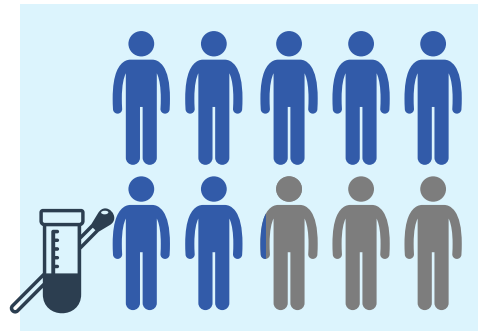
Testing for HIV and other STIs is free and confidential in Montreal's community clinics (CLSCs) and other medical clinics across the city.



7 out of 10 GBM (73.8%) who were HIV negative/unknown status **reported having an HIV test** in the past year, and **61.5% reported having been tested for an STI**



68.9% of HIV negative/unknown status GBM who reported 6 or more male sexual partners in the past 6 months **had an HIV test at least once in the past 6 months** and 59.0% had an STI test



For GBM living with HIV, **72.0% had an STI test** within the last year.

83.5% who reported 6 or more male sexual partners in the past 6 months had an STI test in the past 6 months.

Syphilis

Montreal, like other North American cities, has been experiencing steadily increasing rates of syphilis infections over the past 10 years, primarily among GBM. From our testing samples in the study, we found very high levels of GBM who tested positive for a past or current syphilis infection, including 39.2% of those living with HIV.

In comparison, 11.7% of GBM who were HIV negative or unknown status tested positive for a past or current syphilis

infection. Much more needs to be done to test, treat and prevent syphilis among the city's GBM population.

These findings show that there is a need to increase the rate of testing for both HIV and other STIs among GBM in Montreal. Testing, in addition to increasing knowledge on STI prevention and safer sex, is an integral step in getting more GBM effectively engaged in appropriate HIV and STI-related care.

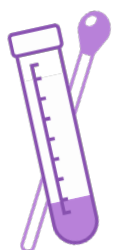
Other STIs

The prevalence of STIs other than HIV among the study participants was the following:

Gonorrhea prevalence was 12.8% among GBM living with HIV and 4.7% among HIV-negative/unknown GBM

Chlamydia prevalence was 4.2% among GBM living with HIV and 2.7% among HIV-negative/unknown GBM

Hepatitis C (HCV) prevalence was 17.4% among GBM living with HIV and 7.2% of the total sample



Substance Use

The Engage study also looked at substance use patterns in Engage Montreal participants. In the past 6 months preceding their study visit:



24.7%
reported using
cigarettes daily



1.8%
reported having
6 drinks of alcohol
or more at least
4 times a week



7.9%
reported using crystal
meth at least once



8.8%
reported using GHB or
crystal meth during
sexual encounters at
least once

In addition to rates of substance use, we found 39% of GBM living with HIV and 23% of HIV-negative/ unknown GBM had moderate or high risk of developing dependence or related problems to at least one of the following groups of drugs: cocaine, amphetamines, inhalants, sedatives, hallucinogens and opioids (ASSIST scale). GBM require culturally competent harm reduction and treatment services for those wanting to reduce or quit their use.

Discrimination & Mental Health

We asked participants to self-rate how they were feeling and if they had good mental health within the last twelve months.

These numbers suggest that discrimination facing the GBM community in Montreal remains pervasive.



GBM in Montreal reported experiencing discrimination by strangers or family and friends ranging from **42.3%** (being treated unfairly) to **59.7%** (being called derogatory names).



7.1%
reported suffering from
poor mental health



27.3%
had moderate or
severe anxiety scores



9.5%
had moderate or severe
depression scores

Moving Forward

Taken together, our findings highlight various health and well-being indicators among GBM in Montreal, including including HIV and other STI risk, prevention, testing and treatment, substance use, and psychosocial health. These baseline findings provide useful health data specific to GBM.

Overall, we are seeing some positive health and well-being outcomes among GBM in Montreal. The city is on target to meet its UNAIDS goals for 2025 with a significant number of GBM living with HIV engaged in the cascade of care. However, more work is needed to educate the community about U=U, and PrEP, and to increase the rate of testing for HIV and other STIs, especially syphilis. Gay, bisexual, and other men who have sex with men remain disproportionately affected by HIV in Canada, representing over half of all new HIV infections in the country in 2018, despite making up less than 5% of the population.

Ongoing data collection in the Engage study will allow us to follow and report on the sexual health of GBM. Of course, much has also changed since the start of the COVID-19 pandemic. COVID-19 findings will be available soon.

More information regarding the study and related publications are available at the national Engage website (www.engage-men.ca).

Acknowledgments

The principal investigators of the Engage study are: J Cox and G Lambert (Montréal), J Jollimore, N J Lachowsky and D Moore (Vancouver), and D Grace and T A Hart (Toronto). Engage-Montréal would like to thank all the cisgender and transgender men who participated in this study, as well as our local collaborators: RÉZO, Centre hospitalier de l'Université de Montréal laboratories, and Direction de la valorisation scientifique et des communications at Institut national de santé publique du Québec. We also note the important role of the local research team who contributed to **data collection in 2017-2018** and continue to support the implementation of Engage-Montréal.

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