

Community Update

Disparities among MSM with HIV by Race/Ethnicity

Background:

The Nebraska Department of Public Health’s Infectious Disease Program recently participated in a technical assistance project through the Centers for Disease Control (CDC). The focus was to provide organizational assessment and strategic planning and to help integrate programs addressing the full continuum of care including HIV prevention, surveillance, Ryan White, HOPWA, Hepatitis and the STD Prevention and Partner Services Programs. The University of Washington’s Dr. Matthew Golden provided a thorough program assessment in February 2019 through an overview of program documents and a site visit.

Issue:

In Nebraska, disparities in HIV infection have been well established among men who have sex with men (MSM) and among minority populations. Dr. Golden recommended a new method to consider HIV surveillance data by race/ethnicity, to further describe this disparity. This method illustrates glaring disparities in HIV infection among minority populations – especially in the Black community, and these disparities represent both a health equity and social justice issue. Estimates show:

The proportion of Black MSM with HIV	37.3% (310/832)
The proportion of Hispanic MSM with HIV	12.5% (271/2,160)
The proportion of White MSM with HIV	6.8% (970/14,284)

Nebraska’s Integrated HIV Prevention and Care Plan 2017-2021, includes strategies to reduce HIV-related disparities and health inequities. Nebraska has set a goal to reduce the rate of new HIV diagnoses among gay and bisexual men by at least 15%. Nebraska as also outlined activities to expand services to reduce HIV-related disparities experienced by Black gay and bisexual men.

Next Steps:

DHHS is sharing this information with the community planning group and other partners, inviting input and feedback. DHHS will consult with these partners, as well as look for new partners in the impacted communities, to inform coordinated responses to these health disparities. DHHS seeks to work collaboratively to improve outreach activities and identify new evidence-based interventions.