

HIV AND GAY MEN AND OTHER MEN WHO HAVE SEX WITH MEN

OVERVIEW

Gay men and other men who have sex with men are one of the populations that are disproportionately affected by HIV. In 2022, the relative risk of acquiring HIV was 23 times higher for gay men and other men who have sex with men than in the wider population globally (1). Trans men who have sex with men may also be at increased risk, although there are few data (2, 3). Annual numbers of new HIV infections among gay men and other men who have sex with men increased by 11% between 2010 and 2022. Outside of sub-Saharan Africa, the proportion of new HIV infections among this key population has increased, but it has decreased among the remaining population. Despite the disproportionate burden, coverage of HIV services among gay men and other men who have sex with men in many settings continues to be below the 2025 target, with only 40% of them reporting in median accessing at least two HIV prevention options in the past three months in 2023¹.

1 Unless otherwise specified, the source for all quantitative data is UNAIDS Global AIDS Monitoring, 2024 (<https://aidsinfo.unaids.org/>) or UNAIDS epidemiological estimates, 2024 (<https://aidsinfo.unaids.org/>).

Analysis of data from 10 countries in sub-Saharan Africa found that HIV prevalence among gay men and other men who have sex with men who live in countries that criminalize same-sex relations is five times higher than in non-criminalized settings. Where there have been recent prosecutions, prevalence is 12 times higher than in countries without prosecutions (4). Programmes may also need to take into account that gay men and other men who have sex with men may have also have sex with women. One study found that the pooled proportion of men who have sex with men who also had sex with women was 58% [33–83%] in eastern Africa (in the previous three months), and 27% (13–48%) in southern Africa and 50% [39–62%] in western Africa (in the previous six months) (5).

Criminalization and discrimination against gay men and other men who have sex with men drive these populations underground and out of reach of services. Criminalization, stigma and discrimination, and violence based on sexual orientation remain significant barriers to accessing HIV prevention, testing and treatment, and to ensuring health for all without discrimination. These barriers, which are increasing in some countries, drive the significant disparity in health outcomes, and lead to the denial of social justice and equality for gay men and other men who have sex with men.

KEY MESSAGES

- National responses should prioritize tailored HIV prevention programmes to address the disproportionate (unequal) impact of HIV among key populations, including gay men and other men who have sex with men.
- Intersecting inequalities related to race, age, poverty, drug use, engagement in sex work, or migration status result in increased risk of HIV acquisition for some communities of gay men and other men who have sex with men. Better-tailored, extensive, equitable and effective HIV prevention, testing and linkages to treatment programmes are needed to respond to the specific vulnerabilities and needs of gay men and other men who have sex with men.
- Community-led HIV programmes and services are needed to reach the most marginalized communities of gay men and other men who have sex with men, which are often excluded or discriminated in other health services.
- Laws that criminalize same-sex sexual relations violate human rights and drive people away from the support and services that can help them protect their health. Such laws, together with stigma and discrimination, combine to increase the risk of acquiring HIV. Programmes to address stigma and discrimination within health-care, law enforcement and educational settings are critical to improving health outcomes for gay men and other men who have sex with men.

- Organizations led by gay men and other men who have sex with men are increasingly under threat due to new or strengthened repressive laws, harmful policing practices, violence, discrimination and shrinking civic space (6). These organizations play a critical role in the HIV response in the provision of accessible services and information, peer support and political advocacy. Laws, policies and practices should be shaped to ensure a safe and supportive civic space and adequate funding for such organizations to operate effectively and safely.
- Programmes for key populations, including gay men and other men who have sex with men, are gravely under-resourced. Only 1.3% of national and 4.4% of international funding is dedicated to prevention programmes for key populations. More funds are needed, but they also need to be used more efficiently, prioritizing the most impactful programmes across all areas of the HIV response, including for structural interventions and community systems strengthening. Increased and more sustained funding is needed for organizations led by gay men and other men who have sex with men to deliver HIV services, advocate for their rights, and conduct community-led monitoring and research.
- Community led organizations play essential roles to ensure delivery of good-quality services for gay men and other men who have sex with men and to train health-care providers. Examples of this critical work can be found in the following accounts:
 - In Chile and Paraguay, community-led organizations Asociacion Chile Positivo and SomosGay are implementing programmes to increase access of gay men and other men who have sex with men to pre-exposure prophylaxis (PrEP) and promoting health and well-being of their communities (7).
 - In Viet Nam, the youth-led LGBTQI+ organization Lighthouse offers community-based testing, distribution of condoms and lubricants, PrEP and post-exposure prophylaxis. Lighthouse also offers sensitization training for health-care providers to make public health services more attractive to people from key populations (8).

KEY DATA²

Size estimate

Gay men and other men who have sex with men continue to be excluded from or undercounted in national population estimates, denying or negating their existence and rendering them invisible. A total of 140 countries have ever reported population size estimates of gay men and other men who have sex with men. Among these, only 26 refer to national estimates derived by probabilistic methods within the past five years.

HIV prevalence

Global median HIV prevalence among gay men and other men who have sex with men is 7.7%, ranging from 0% in Samoa to 34% in the Bolivarian Republic of Venezuela (72 reporting countries). The global median prevalence among gay men and other men who have sex with men aged under 25 years is 4.6%, and 11% among those aged 25 years and over (46 reporting countries).

HIV incidence

Globally, annual numbers of new HIV infections among gay men and other men who have sex with men increased by 11% between 2010 and 2022. There were an estimated 210 000 new HIV infections among gay men and other men who have sex with men in 2022. In 2022, the relative risk of acquiring HIV was 23 times higher for gay men and other men who have sex with men than in the wider population globally.

HIV services

The coverage and use of combination HIV prevention among gay men and other men who have sex with men reported in recent years was low globally, with a median of 40% receiving at least two prevention services in the past three months (27 reporting countries).

An estimate of only half of the total global number of gay men and other men who have sex with men are aware of PrEP (9).

A median of almost 84% of gay men and other men who have sex with men globally either had taken an HIV test and received the results in the past 12 months or had previously tested positive for HIV (67 reporting countries).

Antiretroviral therapy coverage is low among gay men and other men who have sex with men, with a global median of 65%, ranging from 1.3% to 98% (42 reporting countries).

Laws and policies

As of June 2024, 63 countries criminalized consensual same-sex activity. There has been progress, with seven countries repealing such laws between 2022 and 2024—but other countries have introduced or passed laws criminalizing consensual same-sex activity or increased penalties.³

Stigma and discrimination

A median of 16.0% of gay men and other men who have sex with men have experienced stigma and discrimination in the past six months (21 reporting countries). A median of 9.4% of gay men and other men who have sex with men have avoided accessing health-care services due to stigma and discrimination in the past 12 months (29 reporting countries).

² Unless otherwise specified, the source for all quantitative data is UNAIDS Global AIDS Monitoring, 2024 (<https://aidsinfo.unaids.org/>) or UNAIDS epidemiological estimates, 2024 (<https://aidsinfo.unaids.org/>).

³ See also references in Laws and Policies Scorecard figures in the 2024 Global AIDS Update regional factsheets, www.unaids.org

Violence

A median of 8.4% of gay men and other men who have sex with men have experienced violence in the past 12 months (26 reporting countries).

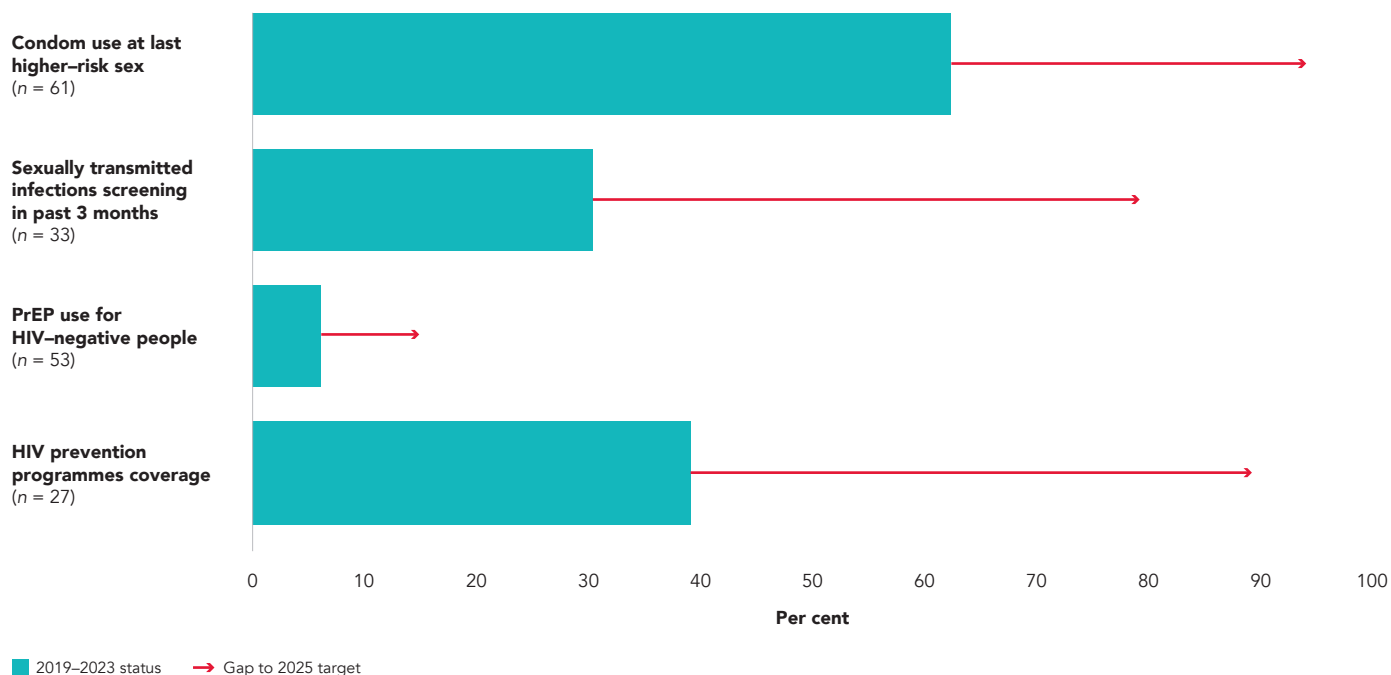
Financing

A total spending of US\$ 112 million was reported from 56 countries on HIV prevention interventions among gay men and other men who have sex with men.

Almost 60% of total spending on gay men and other men who have sex with men is from international resources.

Figure 1

Gap to achieve combination prevention targets among gay men and other men who have sex with men, by intervention, global, 2019–2023



Source: Global AIDS Monitoring, 2020–2024 (<https://aidsinfo.unaids.org/>); UNAIDS special analysis, 2024.

Note: The methods used are described under the section “Calculation of pre-exposure prophylaxis (PrEP) coverage for HIV-negative people” in the Annex. The graph shows median coverage among countries reporting except for PrEP use.

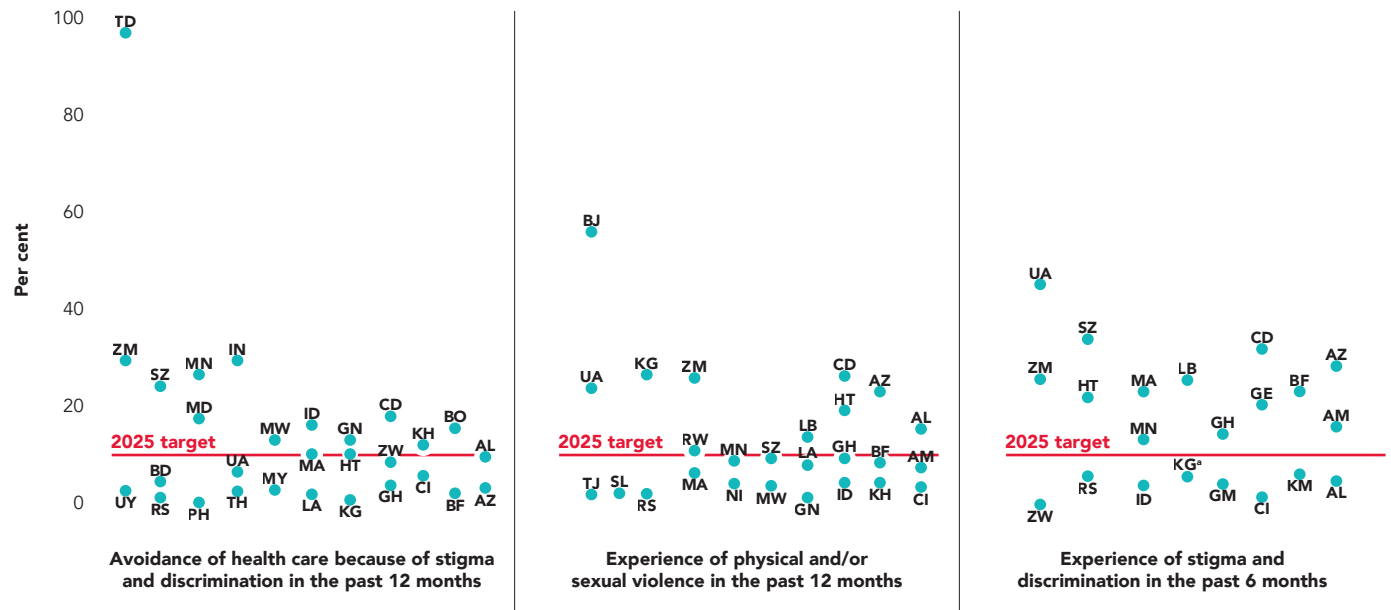
2025 targets are global. Coverage of interventions can be underestimated due to the lack of reporting from some countries.

“HIV prevention programmes coverage” refers to people from key populations who reported receiving at least two prevention services in the past three months. Possible prevention services received include condoms and lubricants, counselling on condom use and safer sex, and testing for sexually transmitted infections. Condom use at last higher-risk sex does not take into account people taking PrEP and therefore may be underestimated.

PrEP targets were calculated based on the number of people who would most benefit from PrEP use, those with greatest vulnerability to HIV exposure within each key population. Reported numbers of PrEP users include all users regardless of vulnerability.

Figure 2

Experience of sexual and/or physical violence, stigma and discrimination, and avoidance of health care among gay men and other men who have sex with men, reporting countries, 2019–2023



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| AL: Albania | CI: Côte d'Ivoire | IN: India | ME: Montenegro | TH: Thailand |
| AM: Armenia | CD: Democratic Republic of the Congo | ID: Indonesia | MA: Morocco | UG: Uganda |
| AZ: Azerbaijan | ER: Eritrea | IR: Islamic Republic of Iran | NI: Nicaragua | UA: Ukraine |
| BD: Bangladesh | SZ: Eswatini | KG: Kyrgyzstan | PH: Philippines | UY: Uruguay |
| BJ: Benin | ET: Ethiopia | LA: Lao People's Democratic Republic | MD: Republic of Moldova | VE: Venezuela |
| BO: Bolivia | GM: Gambia | LB: Lebanon | RW: Rwanda | ZM: Zambia |
| BF: Burkina Faso | GE: Georgia | MW: Malawi | SN: Senegal | ZW: Zimbabwe |
| KH: Cambodia | GH: Ghana | MY: Malaysia | RS: Serbia | |
| CF: Central African Republic | GN: Guinea | MU: Mauritius | SL: Sierra Leone | |
| TD: Chad | HT: Haiti | MN: Mongolia | SS: South Sudan | |
| KM: Comoros | | | TJ: Tajikistan | |

Source: Global AIDS Monitoring, 2020–2024 (<https://aidsinfo.unaids.org/>).

Note: * In the past 12 months

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- 4 Lyons C. Utilizing individual level data to assess the relationship between prevalent HIV infection and punitive same sex policies and legal barriers across 10 countries in sub-Saharan Africa. Abstract OAF0403. Presented at the 23rd International AIDS Conference, 6–10 July 2020, virtual.
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- 6 We are facing extinction—escalating anti-LGBTI sentiment, the weaponization of law and their human rights implications in select African countries, Amnesty International, 2024, <https://www.amnesty.org/en/documents/afr01/7533/2024/en/>
- 7 Advancing combination prevention: an advocacy brief for community-led organisations. Brighton and Geneva: International HIV/AIDS Alliance and Joint United Nations Programme on HIV/AIDS; 2016 (https://hivpreventioncoalition.unaids.org/sites/default/files/attachments/web_AllianceUnaids_Comb_prevention_original-1.pdf).
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- 9 Increasing awareness of HIV pre-exposure prophylaxis (PrEP) and willingness to use HIV PrEP among men who have sex with men: a systematic review and meta-analysis of global data - Sun - 2022 - Journal of the International AIDS Society - Wiley Online Library. <https://doi.org/10.1002/jia2.25883>

For additional information and data on HIV and gay men and other men who have sex with men, see:

2024 global AIDS update. Geneva: Joint United Nations Programme on HIV/AIDS; 2024 (<https://www.unaids.org/en/resources/documents/2024/global-aids-update-2024>).

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New HIV infections data among key populations: proportions in 2010 and 2022. Geneva: Joint United Nations Programme on HIV/AIDS; 2024 (<https://www.unaids.org/en/resources/documents/2024/new-hiv-infections-data-among-key-populations-proportions>).

HIV and gay men and other men who have sex with men: human rights fact sheet series 2021. Geneva: Joint United Nations Programme on HIV/AIDS; 2021 (<https://www.unaids.org/en/resources/documents/2021/03-hiv-human-rights-factsheet-gay-men>).