

The epidemiology of HIV in gay men and other men who have sex with men

This fact sheet provides a snapshot of the HIV epidemic in Canada among gay men and other men who have sex with men (MSM). It is one of a series of fact sheets on the epidemiology of HIV and hepatitis C.

All epidemiological information is approximate, based on the best available data. Most of the data in this fact sheet come from a population-specific surveillance system (M-Track), the *HIV/AIDS Epi Updates Chapter 1: National HIV prevalence and incidence estimates for 2011* and the *Summary: Estimates of HIV prevalence and incidence in Canada, 2011* published by the Public Health Agency of Canada (PHAC). More information can be found in the section “Where do these numbers come from?” at the end of the fact sheet.

MSM represent an estimated 2.6% of the Canadian population.¹

According to 2011 national HIV estimates there are 369,500 MSM in Canada. This represents 2.6% of the Canadian population 15 years and older.

MSM are 71 times more likely to get HIV than men who do not have sex with men.¹

According to 2011 national HIV estimates:

- The HIV incidence rate was 443 per 100,000 MSM.
- The HIV incidence rate was 6.2 per 100,000 men who do not have sex with men.

- MSM are 71 times more likely to get HIV than men who do not have sex with men.

Half of all new HIV infections in Canada are in MSM (incidence). This varies considerably across Canada.¹

According to 2011 national HIV estimates:

- 50% of all new HIV infections in Canada are in MSM. This means there are 1,560 new HIV infections in MSM in Canada. These numbers include:
 - 47% of new HIV infections whose HIV status was attributed to sex between men (1,480 new infections); and
 - 3% of new HIV infections whose HIV status was attributed to the combined category

of injection drug use or sex between men since both behaviours were reported at testing (80 new infections).

- The proportion of new HIV infections in MSM varies across Canada:
 - 57% in British Columbia (218 MSM);
 - 40% in Alberta (99 MSM);
 - 8% in Saskatchewan (17 MSM);
 - 26% in Manitoba (30 MSM);
 - 52% in Ontario (725 MSM);
 - 59% in Quebec (445 MSM); and
 - 69% in the Atlantic Provinces (24 MSM).

The number of new HIV infections in MSM has remained relatively stable since 2008.¹

According to 2011 national HIV estimates:

- The number of new HIV infections attributed to sex between men in 2011 (1,480 new infections) has remained stable since 2008 (1,470 new infections).
- The number of new HIV infections attributed to the combined category of sex between men or injection drug use in 2011 (80 new infections) has remained stable since 2008 (90 new infections).

Half of all people living with HIV in Canada are MSM (prevalence).¹ This varies considerably across Canada.

According to 2011 national HIV estimates:

- 50% of people living with HIV in Canada are MSM. This means there are 35,490 MSM living with HIV in Canada. These numbers include:
 - 47% of people living with HIV whose HIV status was attributed to sex between men (33,330 people); and
 - 3% of people living with HIV whose HIV status was attributed to the combined category of injection drug use or sex between men since both behaviours were reported at testing (2,160 people).

- The proportion of people living with HIV who are MSM varies across Canada:
 - 45% in British Columbia (5,320 MSM);
 - 32% in Alberta (1,600 MSM);
 - 10% in Saskatchewan (210 MSM);
 - 25% in Manitoba (520 MSM);
 - 56% in Ontario (16,800 MSM);
 - 54% in Quebec (10,480 MSM); and
 - 54% in the Atlantic Provinces (537 MSM).

One in five people living with HIV whose HIV status was attributed to sex between men remain undiagnosed.²

According to 2011 national HIV estimates, 20% of HIV infections attributed to sex between men remain undiagnosed. This represents an estimated 6,666 men.

Among MSM, approximately 16% are living with HIV but this varies by city.^{3,4}

According to M-Track, HIV prevalence among MSM in Canadian cities is approximately 16%. This varies from 11% to 23%. In select Canadian cities the HIV prevalence rates are:

- 18% in Vancouver
- 14% in Victoria
- 19% in Winnipeg
- 23% in Toronto
- 11% in Ottawa
- 13% in Montreal

Only two-thirds of MSM who report being HIV positive are currently on HIV treatment.³

According to M-Track, 66% of MSM who self-report they are HIV positive are currently taking prescribed HIV drugs.

MSM are at risk of hepatitis C.³

According to M-Track:

- 5% of MSM had evidence of either a current or past hepatitis C infection.
- Up to 2% of MSM are co-infected with HIV and hepatitis C.

Key definitions

HIV prevalence—the number of people who are living with HIV at a point in time. Prevalence tells us how many people have HIV.

HIV incidence—the number of new HIV infections in a defined period of time (usually one year). Incidence tells us how many people are getting HIV.

Where do these numbers come from?

All epidemiological information is approximate, based on the best available data. Most of the data in this fact sheet come from a population-specific surveillance system (M-Track) or the 2011 HIV prevalence and incidence estimates published by the Public Health Agency of Canada (PHAC).

Population-specific surveillance

As part of the Federal Initiative to Address HIV/AIDS in Canada, PHAC monitors trends in HIV prevalence and associated risk behaviours among key vulnerable populations identified in Canada through population-specific surveillance systems. These surveillance systems, also known as the “Track” systems, are comprised of periodic cross-sectional surveys conducted at selected sites within Canada.

M-Track is the national surveillance system of gay, bisexual and other men who have sex with men (MSM). For this surveillance system, information is collected directly from MSM through a questionnaire and a biological specimen collected for testing for antibodies against HIV, hepatitis C and syphilis. As of December 31, 2009, a total of six sites had participated in M-Track across Canada. M-Track was first implemented in Montreal in 2005 (via linkage with the Argus Survey). Between 2006 and 2007, four additional sites joined M-Track: Toronto and Ottawa (Lambda Survey), Winnipeg and Victoria. More than 4,500 men participated in M-Track between 2005 and 2007. In 2008, Vancouver also implemented M-Track (ManCount Survey).

Limitation—MSM from selected urban sites participated on a volunteer basis; therefore, the information presented does not represent all MSM in Canada.

National estimates of HIV prevalence and incidence

National HIV estimates are produced by PHAC and published every three years. Estimates of HIV prevalence and incidence are produced by PHAC using statistical methods which take into account some of the limitations of surveillance data (number of HIV diagnoses reported to PHAC) and also account for the number of people living with HIV who do not yet know they have it. Statistical modelling, using surveillance data and additional sources of information, allows PHAC to produce HIV estimates among those diagnosed and undiagnosed. The most recent estimates available are for 2011. The next set of estimates will be available in 2015 and will pertain to the year 2014.

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References

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Author(s): Challacombe L

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information

Contact us

by telephone
1.800.263.1638
416.203.7122

by fax
416.203.8284

by e-mail
info@catie.ca

by mail
505-555 Richmond Street West
Box 1104
Toronto ON M5V 3B1

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