AIDS case rates in New York City have declined since 1993, yet thousands of new HIV cases are reported each year, indicating that individuals are still engaging in risk behaviors that may lead to transmission. An objective of CABS was to assess risk behaviors in HIV-infected patients at four hospital-based primary care HIV clinics in NYC.

DOHMH staff enrolled patients from June through December 2004. Eligible patients were on antiretroviral therapy, 18 years or older, and English literate. The survey was conducted with a tablet, laptop with mouse, or touch-screen device with an audio component. An anonymous, computerized survey was used to encourage more open reporting of risk behaviors.

Interviews from 752 sexually active respondents are included in this analysis. 59% were male and 41% were female, and the median age was 45 years. The race/ethnicity of the patients was predominantly black (42%) and Hispanic (38%). The majority of patients (62%) had at least a high school education.

**Definitions**

- Sexually active – one or more partners in the past 12 months
- Sexual behaviors:
  - MSM – men who have sex with men
  - MSW – men who have sex with women
  - WSM – women who have sex with men
- Unprotected sex – no condom use during anal or vaginal sex
- Serodiscordant partner – a partner of negative or unknown HIV status

**Unprotected Sex In Previous 12 Months**

<table>
<thead>
<tr>
<th>Sexually Active</th>
<th>N = 752</th>
</tr>
</thead>
<tbody>
<tr>
<td>445 Males</td>
<td>307 Females</td>
</tr>
</tbody>
</table>

- MSM (31%) n = 137 *
- MSW (77%) n = 341 *
- WSM n = 307

- 37% Unprotected Sex
- 38% Unprotected Sex
- 47% Unprotected Sex

* 33 (8%) male respondents reported both MSM and MSW behaviors and were counted in both behavior categories.

Sexually active females were more likely than sexually active males to report unprotected sex in the previous 12 months.

**Unprotected Sex with a Serodiscordant Partner During Most Recent Sexual Encounter**

<table>
<thead>
<tr>
<th>MSM</th>
<th>MSW</th>
</tr>
</thead>
<tbody>
<tr>
<td>48%</td>
<td>35%</td>
</tr>
</tbody>
</table>

Among respondents who had unprotected sex, 48 MSM, 113 MSW and 138 WSM reported their partner’s serostatus. During their most recent sexual encounter, WSM and MSM were more likely than MSW to have unprotected sex with a serodiscordant partner.

**Non-Injection Drug Use During Sex in Previous 12 Months**

<table>
<thead>
<tr>
<th>Any Drug</th>
<th>MSM (n=137)</th>
<th>MSW (n=341)</th>
<th>WSM (n=307)</th>
</tr>
</thead>
<tbody>
<tr>
<td>%</td>
<td>%</td>
<td>%</td>
<td></td>
</tr>
<tr>
<td>Marijuana</td>
<td>20</td>
<td>16</td>
<td>10</td>
</tr>
<tr>
<td>Crack</td>
<td>10</td>
<td>9</td>
<td>5</td>
</tr>
<tr>
<td>Cocaine</td>
<td>4</td>
<td>4</td>
<td>1</td>
</tr>
<tr>
<td>Heroin</td>
<td>0.7</td>
<td>6</td>
<td>2</td>
</tr>
<tr>
<td>Crystal</td>
<td>3</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>

MSM reported a higher percentage of non-injection drug use during sex compared to MSW and WSM.

**Conclusions**

- A high proportion of HIV-infected persons are at risk of transmitting HIV through unprotected sex with serodiscordant partners.
- Ongoing prevention efforts are needed to promote and maintain safe sex among HIV-infected persons.
- HIV care providers may require prevention training and assessment tools in order to implement targeted interventions aimed at reducing risk behaviors.

**Recommendations for incorporating HIV prevention into care**

Recommendations for incorporating HIV prevention into care are outlined in the following publication from the CDC, the Health Resources and Services Administration, the National Institutes of Health, and the HIV Medicine Association of the Infectious Diseases Society of America:

“Incorporating HIV Prevention into the Medical Care of Persons Living with HIV”

*MMWR July 18, 2003 / 52(RR12);1-24*

http://www.cdc.gov/mmwr/PDF/rr/rr5212.pdf