
STATEWIDE FOCUS GROUP RESULTS

**HIV Prevention Needs of
Men Who Have Sex with Men (MSM)**

HIV Prevention Community Planning Support and
Development Initiative
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February 2004

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Research Methodology

Project Background: The HIV Prevention Community Planning Support and Development Initiative (CPSDI) was assigned by the New Jersey Department of Health and Senior Services, Division of HIV/AIDS Prevention and Control (DHAS) to design and implement a series of focus groups documenting the HIV prevention needs of Men Who Have Sex with Men (MSM) in New Jersey. The goal of the project was to work in conjunction with the thirteen grantees funded by DHAS statewide to conduct focus groups with members of MSM subpopulations to determine appropriate regional venues and strategies for recruiting MSM subpopulations into prevention programming.

Geographic Locations of Grantees: The thirteen grantees providing MSM prevention services are located in the following nine New Jersey cities:

City	Agency Name
Asbury Park	Visiting Nurse Association of Central Jersey
Atlantic City	South Jersey AIDS Alliance
Camden	Camden, AHEC
Elizabeth	Puerto Rican Organization for Community Education and Economic Development
Jersey City	Horizon Health Center
Newark	African American Office of Gay Concerns El Club Del Barrio Hyacinth AIDS Foundation North Jersey Community Research Initiative
New Brunswick	Hyacinth AIDS Foundation
Paterson	Hispanic Multi-Purpose Center
Plainfield	Planned Parenthood

Determination of MSM Subpopulations: For the purpose of the focus groups, CPSDI made initial contact with HIV prevention grantees to determine the MSM subpopulations that grantees were currently providing services to. From the results of the initial contacts, CPSDI developed a comprehensive listing of MSM subpopulations being served in New Jersey including: (1) MSM; (2) Gay, (3) Bisexual, (4) Transgender, (5) Heterosexual, (6) Down Low (DL) and (7) Questioning.

Development of Focus Groups: CPSDI staff next contacted HIV/AIDS Program Coordinators at each agency to discuss the coordination of a focus group to be held at each agency. CPSDI staff discussed with the contact person the goals and objectives of the focus group, scheduled a time to conduct the focus group, and discussed strategies to recruit focus group participants. Each agency was encouraged to recruit up to fifteen MSM to participate in the focus group. CPSDI staff also worked with the contract person to determine a local restaurant to serve a meal during the focus group and identification of an appropriate store to purchase \$15 gift certificates as incentives for each participant.

Development of Focus Group Questions: CPSDI worked in coordination with DHAS staff to develop a list of focus group questions. The questions were developed to gather the following information from the MSM interviewed:

- Previous attendance at HIV prevention programming.
- Why program was chosen.
- What worked or did not work about the program.
- What specific needs for HIV prevention are not being met.
- How interested are MSM in learning more about HIV prevention.
- Where information on HIV prevention is currently being obtained.
- Components of an effective HIV prevention program for MSM.
- Barriers that keep MSM from attending HIV prevention sessions.
- Other needed services to assist MSM in reducing their risk of getting HIV, being reinfected or transmitting HIV.

Focus Group Implementation: Thirteen focus groups were conducted between October 31 – November 20, 2003. A total of 119 MSM were interviewed.

Demographic Information for Focus Group Participants

Demographic information is provided for focus group participants in two ways: (1) for all focus group participants (n=119) and (2) for participants by focus group location.

All Focus Group Participants

Ethnicity: Of those participating in the focus groups, 24 (21%) were Hispanic or Latino.

Race: The majority of focus group members were African American (55%). Twenty eight (24%) were Caucasian, and thirteen (11%) reported they were of mixed race. Two individuals were American Indian/Alaskan native and nine did not report their race.

Age: Twenty two (18%) of the individuals participating in the focus group were under the age of 19. Sixteen (14%) were between the ages of 20 and 29, forty (33.6%) were between the ages of 30 and 39, and thirty-four (28.6%) were between the ages of 40 and 49. Six individuals (5%) were aged 50 or over. One individual did not provide his age.

Self-Identification: Individuals were asked to identify the sup-population that they identified with. Participants could indicate if they identified as more than one Subpopulation.

- **Number of Subpopulations Self-identified:** Of the 119 people participating in focus group, 116 reported self identifying with at least one subpopulation. Of those 116, 80 (69%) reported having affiliation with one category only. Thirty three (28%) indicated self identification with two categories and three (3%) reported self identification with three categories.

- **Participants by Subpopulations Reported**

- **MSM:** Seventeen individuals reported that they were MSM with no other subpopulation self identification.
- **Gay:** Forty-five individuals reported that they were MSM with no other subpopulation self identification.
- **Bisexual:** Twelve individuals reported that they were bisexual with no other subpopulation self identification.
- **Transgender:** Five individuals reported that they were transgender with no other subpopulation self identification.
- **Heterosexual:** Three individuals reported that they were heterosexual with no other subpopulation self identification.
- **Down Low:** No individuals reported that they were on the down low with no other subpopulation self identification.
- **Questioning:** Two individuals reported that they were questioning with no other subpopulation self identification. One individual reported being questioning and MSM and one reported being bisexual.
- **Other:** Two individuals reported a category other than those listed and no other subpopulation. One indicated that he was “accommodating” and the other indicated he was “just me.”
- **More than subpopulations identified:** Twenty-nine individuals chose two subpopulations and four individuals chose three subpopulations. Table 1 shows the subpopulation identification for those individuals choosing more than one subpopulation.

Table 1. Number of Individuals Choosing Multiple Subpopulation Self Identification

Subpopulation Self Identification	Number of Individuals
MSM and Gay	22
MSM and Bisexual	1
Bisexual and DL	2
Bisexual and Heterosexual	1
Transgender and Heterosexual	2
Questioning and MSM	1
MSM, Gay and Transgender	1
MSM, Bisexual and DL	2
Gay, Transgender, Questioning	1

Participants by Focus Group Location: Demographic data and focus group responses from each of the thirteen focus groups are presented, by focus group, in the following chapters.

African American Office of Gay Concerns (AAOGC)

Newark, NJ

African American Office of Gay Concerns (AAOGC)

A focus group was held on 11/05/03 at the African American Office of Gay Concerns in Newark, New Jersey. There were ten MSM in attendance.

Race: Eight MSM were African American, one was Caucasian and one indicated they were of mixed race (but did not indicate the racial mix).

Ethnicity: Three of the MSM were Latino.

Age: Two of the group members were under 19 years of age. Five of the group members were between the ages of 20 and 29, 1 member was between 30 and 39, one was between 40 and 49 and one reported being over 50.

Zip Code: Five of the group members lived in Newark (in zip codes 07102, 07103, and 07106). Three lived in Paterson (zip codes 07501, 07503, and 07524), one lived in East Orange (zip code 07107) and one lived in Hillside (07205).

Subpopulation: Focus group members were asked to identify the Subpopulation that they identified with. Participants could indicate if they identified as more than one subpopulation. The following chart shows how each participant self-identified.

Participant	MSM	Gay	Bisexual	Transgender	Heterosexual	Down Low (DL)	Questioning
#1							x
#2							x
#3		x					
#4					x		
#5		x					
#6		x					
#7			x				
#8		x					
#9	x						
#10		x					

In the past have you attended any HIV prevention programs?

Many of the group members reported having attended an HIV prevention program in the past. (Note: Several of the group members currently or previously worked in the field of HIV prevention/outreach). Members reported attending programs at:

- UMDNJ (New Brunswick)
- Paterson Collaborative Support Program (Paterson)
- Division of HIV/AIDS Services training sessions including HE/RR

- Center for Disease Control training courses
- Union County College (Elizabeth)

What worked or didn't work about the program you attended?

Group members reported that the programs that worked provided information on:

- General HIV prevention
- Condom use
- Condom management (condom negotiation skills with partners)

What specific needs for HIV prevention do you have that are not being met?

Group members did not identify any specific needs for HIV prevention that were not being met.

Where is the best place (location) to go to reach other MSM to give them HIV prevention information?

Participants reported the following locations as places to recruit subpopulations into HIV prevention programming:

Subpopulation	Venue	Location	Type of Venue
MSM	Weequahic Park	Newark	Public parks near the pay phones. When the phone rings, someone is setting up a date with the person on the other end of the phone.
	Liberty Park	Newark	Public park payphones
	Military Park	Newark	Public park payphones

Subpopulation	Venue	Location	Type of Venue
MSM	Halsey Street	Newark	Hangout for older MSM and sex workers
	Chestnut Street	Newark	Hangout for younger MSM and sex workers
	Munn Avenue	Newark	Hangout for younger MSM and sex workers
	Truck turn off	Elizabeth	Off highway
	Prince Street	Paterson	Hangout for MSM and sex workers
	Newark Public Library	Newark	Restrooms and in the stacks
	Central Avenue	Newark	Hangout for MSM and sex workers
	South Orange Avenue	Newark	Hangout for MSM and sex workers
	Penn Station	Newark and New York	Restrooms
	Shopping malls	Jersey Gardens in Elizabeth	Restrooms
	Raven Chat Line	201-716-7764	Phone chat line
	Internet	Yahoo, Blackplanet, Google	Chat rooms and search engines
	Church	Various locations in Newark	Subtle – asking MSM to join organizations
Bisexual Men or B-Curious	Murphy's	59 Edison Place Newark, NJ	Club
	Albert's	366 Marin Blvd. Jersey City, NJ	Club
	The African Globe	1028 Broad Street Newark, NJ	Club
	Euphoria	17 Academy Street Newark, NJ	Clubs for people in the music industry
Homo-thugs Who are on the Down Low	Arcades	Various locations in Newark including one down the street from AAOGC	Game room
	Drug corners	Various locations in Newark	Street corners where drugs are being sold
Transgender	Fantasia	Newark	Club
	Branchford Park	Newark	Public park
	Club DeMario	Newark	Club
	The Towers	Paterson	Housing project

Subpopulation	Venue	Location	Type of Venue
Men on the Down Low	Church	Various locations in Newark	DLs pass notes to new members asking for dates or sex
	Malls	Jersey Gardens in Elizabeth	Restrooms
	Movie Theatres	Various locations	Restrooms

How interested in learning more about HIV prevention are the MSM you know?

Focus group members reported that they felt many MSM were interested in learning more about HIV prevention. They commented:

- “Very interested. It feels that the more you hear about HIV prevention, the more a person can get the message...the more you hear it, the more you can drill it into someone’s head.”
- “You can become more aware about the new ways the people are trying to spread the disease because they are angry.”
- “Information is constantly changing because the disease is still new.”
- “People are not honest, they should be honest with themselves and their mates...you can learn more about how to do this by attending HIV prevention classes.”

Where do you get the information you need about HIV prevention?

Group members reported that they got the information they needed about HIV prevention from Project WOW (NJCRI) and AAOGC.

If you could design an HIV prevention program for MSM, what would it look like?

- Services that are not “clinically” oriented.
- Services should not label MSM – “Get rid of the labeling”.
- Services should deliver/articulate the messages at the community level.
- Services should be part of events such as rap or gospel shows. After the performance there should be a message about HIV prevention.

- Services should be held in a place where a person feels comfortable about disclosing their sexuality.

As an MSM, what might keep you from attending HIV prevention sessions?

Group members indicated that they felt that providing one-shot interventions for HIV prevention were more effective than “trying to require people to come to a set series of things.”

Other group members reported that a barrier to MSM attending HIV prevention sessions is that programs have tried for too long to “single out a certain group” of people when “you need to work on everybody.” They discussed the fact that HIV prevention information needs to be directed towards the general population instead of trying just to target men who identify themselves as being MSM.

Another barrier to HIV prevention that was discussed was that many times people do not “pursue prevention” because they fear that prevention messages are abstinence only messages.

The final barrier that was discussed is that for agencies, there is a tremendous turnover in “the population of interest” (i.e., target populations). One group member described that it was hard to reach individuals as there is a “summer crew, a winter crew and a hungry crew” of people who attend programs during specific times or for specific reasons.

What other services do you need to help you reduce your risk of getting HIV, being reinfected or transmitting HIV to another person?

Group members indicated that there needed to be an increased focus on the drug epidemic and its role in HIV/AIDS.

Camden AHEC

Camden, New Jersey

Camden Area Health Education Center (AHEC)

A focus group was held on 11/21/03 at the Camden Area Health Education Center (AHEC) in Camden, New Jersey. There were six MSM in attendance.

Race: Five of the MSM were African-American. One MSM reported that they were of mixed race (African American and American).

Ethnicity: One of the MSM was Latino.

Age: Four of the group members were between the ages of 30 and 39 and two were between 40 and 49 years of age.

Zip Code: All of the group members lived in the Camden area (zip codes 08102, 008103 and 08014).

Subpopulation: Focus group members were asked to identify the Subpopulation that they identified with. Participants could indicate if they identified as more than one subpopulation. The following chart shows how each participant self-identified.

Participant	MSM	Gay	Bisexual	Transgender	Heterosexual	Down Low (DL)	Questioning
#1		x					
#2		x					
#3		x					
#4		x					
#5				x			
#6					x		

In the past have you attended any HIV prevention programs?

Of the six group members, three reported attending HIV prevention programming in the past. (Note: One of the members reported teaching HIV prevention programs in the Philadelphia area). When asked why they had attended the program, the group members indicated attending:

- As an HIV prevention program peer educator/outreach worker to learn about what prevention is and to increase awareness about the disease.
- As an HIV+ person who did not have any education about the disease prior to diagnosis.

What worked or didn't work about the program you attended?

The group member who reported attending the program due to his HIV diagnosis indicated that he thought the program worked well because it provided information for individuals who had just discovered they were HIV infected. The participant who was a peer educator had a different view of the program he attended. He indicated that the information presented was redundant for someone who had any type of previous HIV education. He indicated that the only new information presented at the session was HIV/AIDS statistics from the health department.

What specific needs for HIV prevention do you have that are not being met?

Group members reported that they believed HIV prevention programming needed to:

- Focus upon “meeting people where they are”
- Discuss HIV prevention material in laymen’s terms
- Be more interactive in order to maintain participant’s attention
- Focus more on reaching high school students. One group member reported that many inner city school children do not feel that they are affected by HIV because their environment tells them that “It is cool to have sex saying if I have sex, I can get drugs and if I have sex, I can eat...so being protected is not an issue or concern when their main priority is to eat or to have a place to live.”

Where is the best place (location) to go to reach other MSM to give them HIV prevention information?

Participants reported the following locations as places to recruit subpopulations into HIV prevention programming:

Subpopulation	Venue	Location	Type of Venue
MSM	Paradise Alley	624-628 N. Front St. Philadelphia, PA 19123	Club
	Bounce	1102 US Hwy. 130 West Deptford Township, NJ 08093	Club
	Key West	207 South Juniper Street Philadelphia, PA 19107	Club
	Backyard	Philadelphia	Club
	Shampoo	417 N. Eighth St. Philadelphia, PA 19123	Club

Subpopulation	Venue	Location	Type of Venue
MSM	Blackplanet	www.blackplanet.com	Internet site
	AOL	Aol.com	Internet provider with instant messaging services that target MSM subpopulations
	Art Museum	Benjamin Franklin Parkway and 26 th Street Philadelphia, PA 19130	Public building
	Train stations	Camden and Philadelphia	Train station terminal restrooms
	Greyhound Bus Terminal	Philadelphia	Bus terminal restroom
	Art galleries	Various locations in Philadelphia	Businesses
	City Hall	Philadelphia	Public restrooms
	Tower Records	Cherry Hills Mall	Outside of store
	Coffee shops	Various locations in Philadelphia and Cherry Hills	Restaurants
	Malls	Cherry Hills	Mall restrooms
Men on the Down Low (DL)	Pegasus	Philadelphia	Club
	Gyms	Various locations in Philadelphia	Health clubs

How interested in learning more about HIV prevention are the MSM you know?

Focus group members reported that they did not feel many of the MSM they knew would be interested in learning about HIV prevention. Reasons for this apparent lack of interest included:

- People are in denial about being at risk for HIV prevention.
- Some people are offended if you ask them to use a condom. They say “Does it look like something is wrong with me?”.
- People are not interested in using condoms because they do not think that a person can be infected with HIV based on their physical appearance.
- Some people will not use condoms because of the lack of sensation during sex.
- The group also discussed other barriers to providing HIV prevention to MSM including:

- The stigma associated with the organization delivering the message about HIV. Group members indicated that if the organization is “known” to be a “gay organization”, people may not be interested in going there for HIV prevention information.
- People do not know how to negotiate safer sex with their partners (especially related to condom use).

Group members did, however, indicate that people are interested in HIV prevention as long as it is accepted in their current environment and it is endorsed by their peer group.

Where do you get the information you need about HIV prevention?

Group members indicated that they get information about HIV prevention from:

- Camden AHEC
- Billboards
- Brochures at the medical center

If you could design an HIV prevention program for MSM, what would it look like?

Group members reported that a prevention program for MSM would have the following components:

- Using comic books that demonstrate various safer sex or high risk behavior scenarios. These comic books should have the telephone numbers and locations of where people can go to obtain information on HIV prevention.
- Using a famous rapper to get the HIV prevention message across. Group members suggested using the rapper in a scenario such as a young man or woman having unprotected oral sex with the rapper. The scenario could then illustrate the “good” and the “bad” outcomes of the sexual interaction including contracting HIV and/or other sexually transmitted diseases.
- Using a radio personality (such as Wendy Williams) to host an HIV prevention party in a club.
- Offering incentives for people to come to the program.
- Distributing condoms kits (in a variety of colors) along with mints at both gay and straight clubs.

- Distributing HIV prevention literature to the drug dealers on the street corners in Camden.
- Create public service announcements (PSAs) using popular R&B or rap music as a backdrop for the announcements. One group member indicated that a local church used this marketing technique effectively.

Focus group members also suggested that to engage MSM effectively, outreach and HIV prevention education needs to happen at the same time. One member indicated that “HIV prevention literature needs to be distributed on the street...during all hours of the day.”

As an MSM, what might keep you from attending HIV prevention sessions?

Participants indicated the success of any HIV prevention program depends upon where the prevention session is being hosted and how individuals are recruited from the community to participate in the sessions. Group members discussed that a barrier to participation is that an agency is stigmatized as being a “gay agency” and that the agency marketing HIV prevention to “gay people.” One of the members discussed that many people might not attend a session if they feared “they would lose money or lose friends” by attending programming that was marketing toward MSM. Another group member indicated that to avoid stigmatizing individuals, the best approach to marketing is not to explicitly state that HIV prevention is only for MSM.

What other services do you need to help you reduce your risk of getting HIV, being reinfected or transmitting HIV to another person?

All of the group members agreed that there needed to be more visibility of HIV prevention programs. One of the individuals suggested that outreach workers needed to become a visible part of street culture so that people could expect to see the individual daily so that they could count on being able to obtain condoms and other supplies from them.

El Club del Barrio

Newark, NJ

El Club del Barrio

A focus group was held on 11/12/03 at El Club del Barrio in Newark, New Jersey. There were twelve MSM in attendance. Four of the MSM spoke only Spanish so translation was available for them during the focus group.

Race: Eight of the MSM were African American, two were Caucasian and two reported being of mixed race. Of those reporting being of mixed race, one did not identify his racial heritage and the other reported he was Hispanic-American.

Ethnicity: Four of the MSM were Latino.

Age: One of the group members was between the ages of 20 and 29, four were between the ages of 30 and 39, and six were between the ages of 40 and 49 and one reported being over 50.

Zip Code: Seven of the group members lived in Newark (zip codes 07102, 07103, 07108, 07112, and 07114). One of the members lived in Harrison (zip code 07029), one in Orange (zip code 07050), one in Irvington (zip code 07111), and one in Elizabeth (zip code 07114). One group members did not provide his zip code.

Subpopulation: Focus group members were asked to identify the Subpopulation that they identified with. Participants could indicate if they identified as more than one subpopulation. The following chart shows how each participant self-identified.

Participant	MSM	Gay	Bisexual	Transgender	Heterosexual	Down Low (DL)	Questioning
#1		x					
#2	x	x					
#3		x					
#4	x	x		x			
#5			x				
#6		x					
#7	x						
#8		x					
#9	x	x					
#10			x				
#11			x				
#12				x			

In the past have you attended any HIV prevention programs?

Only a few of the group members reported attending HIV prevention programs in the past. Those who did reported attending programs at NJCRI in Newark.

What worked or didn't work about the program you attended?

Of those attending NJCRI's programming, they reported that worked was:

- Learning about being reinfected with HIV.
- Learning how to be more careful about practicing safer sex.

What specific needs for HIV prevention do you have that are not being met?

Group members reported that they needed:

- Education about the virus to deal with being stigmatized because of being HIV+.
- Information on the definition of full blown AIDS related to T-cell count and secondary infections.

Where is the best place (location) to go to reach other MSM to give them HIV prevention information?

Participants reported the following locations as places to recruit subpopulations into HIV prevention programming:

Subpopulation	Venue	Location	Type of Venue
MSM	Halsey Street	Newark	Hangout for MSM and sex workers
	Branch Brook Park	Newark	Hangout for MSM and sex workers
	Penn Station	Newark and New York	Train station restrooms
	Kinney Street	Newark	Hangout for MSM and sex workers
	City Hall	Newark	Public building
Men on the Down Low (DL)	The African Globe	1028 Broad Street, Newark NJ	Club

Where do you get the information you need about HIV prevention?

Focus group members reported that they received their HIV prevention information from NJCRI and El Club del Barrio.

If you could design an HIV prevention program for MSM, what would it look like?

MSM HIV Prevention Programming: When discussing the design of HIV prevention programming, focus group members commented that programs for MSM need to provide information about bisexual men and women because of the large number of MSM who are on the DL.

One group member commented that even the use of the term DL is “archaic” because “nobody is stupid...everybody knows if you are laying with someone.” Another group member agreed indicating that “it’s easy to distinguish or target men on the DL because you can just go approach them on the corner.” A third group member reported that to him, the only reason that “...straight people stigmatize gay men is because it’s a learned behavior in society to know that this is the way you are supposed to act (i.e., being straight). Thus the group concluded instead of trying to “label” the men who need to hear HIV prevention information, programs need to focus upon providing information on the “sexual behaviors” of both men and women to all men.

Focus group members also discussed that information needed to be provided to MSM related to re-infection. They indicated many MSM do not realize that they can become reinfected or infected with different strains of the virus.

HIV Prevention Programming Components Specifically for Latino MSM: The four Spanish speaking individuals indicated that an HIV prevention program for Latino MSM needed to have a component that dealt with assisting the families of HIV+ Latinos deal with HIV. One of the individuals indicated that there was a need to “Help the family of people who are HIV+ to learn how to deal with the disease including the physiological changes that occur as part of the disease” such a night sweats and changes in the way the body looks. Another individual reported that he believed that HIV prevention programming needs to provide psychological support for the family members of those who are HIV+ to help them better deal with the family member who is HIV+. A third member indicated that many Latino families “have been in the state of denial” about the disease and need to have education provided to them. He indicated that one of the ways of helping support the MSM with HIV was to provide him with the educational tools to be able to discuss HIV disease (including transmission risks) with his family.

As an MSM, what might keep you from attending HIV prevention sessions?

Group members reported that the main barrier for MSM in attending HIV prevention programming is the lack of incentives. One MSM reported “You won’t be able to sell the idea in the community unless you give people an incentive. You got to give them something.” Another MSM agreed and stated “Here, with outreach, you need something to give people. You have to take people by the hand.” However the Latino MSM disagreed and expressed that they were in such need of education and HIV prevention information that they “don’t need to come for a sandwich or a gift card.”

What other services do you need to help you reduce your risk of getting HIV, being reinfected or transmitting HIV to another person?

Group members did not respond to this question.

Hispanic Multi-Purpose Center

Paterson, New Jersey

Hispanic Multi-Purpose Center

A focus group was held on 11/19/03 for the Hispanic Multi-purpose Center in Paterson New Jersey. There were five MSM in attendance.

Race: Four of the MSM were African American. One of the individuals indicated they were “Asiatic”.

Age: Four of the MSM were under the age of 19. One of the MSM reported being between the ages of 20 and 29.

Zip Code: All of MSM lived in Paterson (zip codes 07501, 07502 and 07522).

Subpopulation: Focus group members were asked to identify the Subpopulation that they identified with. Participants could indicate if they identified as more than one subpopulation. The following chart shows how each participant self-identified.

Participant	MSM	Gay	Bisexual	Transgender	Heterosexual	Down Low (DL)	Questioning
#1		x					
#2			x			x	
#3	x		x			x	
#4	x		x			x	
#5	x	x					

In the past have you attended any HIV prevention programs?

Of the five group members, only two reported attending an HIV prevention program. (Note: One of the group members who attended the program also led the HIV prevention program at the Hispanic Multipurpose Center). When asked why they had attended the program, the group members indicated they wanted to learn: (1) about the virus and (2) how to use condoms.

What worked or didn't work about the program you attended?

Group members reported that the sessions were fun because there were so many things about HIV that they did not know. One of the participants indicated that after attending the sessions, he was able to provide information to family members and friends who were not as knowledgeable about the disease. Both individuals also expressed surprise at the amount of information that they were able to learn including the “15 steps” needed to correctly put on a condom.

What specific needs for HIV prevention do you have that are not being met?

Group members reported that they believed HIV prevention programming needed to:

- Provide educate about the various ways that HIV is contracted.
- Outline what behaviors are more risky than others (using a continuum of risk).
- Clarify the risk of oral sex related to HIV transmission.
- Educate about the dangers of being reinfected with different strains of HIV (noting that Young Men Who Have Sex with Men or YMSM, who have HIV believe it is okay to have unprotected sex with a partner with HIV).

Where is the best place (location) to go to reach other MSM to give them HIV prevention information?

Participants reported the following locations as places to recruit subpopulations into HIV prevention programming:

Subpopulation	Venue	Location	Type of Venue
YMSM	African Globe	1028 Broad Street Newark, NJ 07102	Club
	Dell Avenue	Street in downtown Paterson	Location for male sex workers
	Rosa Parks Arts High School	413 12 th Avenue Paterson, NJ 07514	Identified as the “gay” high school
	Churches	Various churches in Paterson	Religious organizations
	“Blackplanet”	www.blackplanet.com	Internet chat rooms
	Raven chat line	201-716-7764	Phone chat line
	McDonalds	Various locations in Paterson	Restaurant
	Garden State Plaza	One Garden State Plaza Paramus, NJ 07652	Mall
	White Castle	220 Broadway Paterson, NJ 07501	Restaurant
Men on the Down Low (DL)	The Warehouse	New York	Club
	Old Navy	Garden State Plaza	Clothing Store
	Farleigh Dickinson University	1000 River Road Teaneck, NJ 07666	College Campus

Subpopulation	Venue	Location	Type of Venue
Transgender	The Globe	NYC (The Village)	Club
Questioning (Bi-Curious)	House parties	Paterson	YMSM hangout in the house of another (usually older) MSM

How interested in learning more about HIV prevention are the MSM you know?

Focus group members reported that they did not feel many of the YMSM they knew would be interested in learning about HIV prevention. Reasons for this apparent lack of interested given included:

- YMSM do not seem interested in changing their current sexual behaviors.
- YMSM who have HIV do not disclose their status to potential partners.
- YMSM are afraid to get tested (specifically due to having to wait a long period of time wondering if the HIV test is going to come back positive).

Where do you get the information you need about HIV prevention?

Group members indicated that they get information about HIV from attending groups at the Hispanic Multipurpose Center.

If you could design an HIV prevention program for MSM, what would it look like?

Group members reported that a prevention program for YMSM should have the following components:

- Held in a social environment where YMSM would feel comfortable and free to be themselves.
- Provide general HIV/AIDS transmission information.
- Discuss the levels of risk associated with various sexual acts.
- Have group sessions versus classroom style lecturing.
- Show graphic pictures of how HIV can disfigure a person's penis or vagina.

As an MSM, what might keep you from attending HIV prevention sessions?

Participants indicated that using the term “gay” in advertising or recruitment for health education/risk reduction (HE/RR) programs would be a barrier for many young people to attend an HIV prevention session. Group members reported that many young people aren’t comfortable with labeling themselves as being gay even though they are having sex with other men.

What other services do you need to help you reduce your risk of getting HIV, being reinfected or transmitting HIV to another person?

Many of the group members indicated that the services they needed were places they could hangout and be themselves (similar to the programs they attend at the Hispanic Multipurpose Center). Group members also indicated that they needed access to free condoms to help them prevent HIV.

Horizon Health Center

Jersey City, New Jersey

Horizon Health Center

A focus group was held on 11/14/03 at Horizon Health Center in Jersey City, New Jersey. There were six MSM in attendance.

Race: Three were African American and three did not provide their race.

Ethnicity: Three MSM were Latino.

Age: Two of the group members were between the ages of 20 and 29 and four between the ages of 30 and 39.

Zip Code: Three of the MSM lived in Jersey City (zip codes 07302, 07304, 07307); one lived in Paterson (07502), one in Newark (07103) and one in Bayonne (07002).

Subpopulation: Focus group members were asked to identify the Subpopulation that they identified with. Participants could indicate if they identified as more than one subpopulation. The following chart shows how each participant self-identified.

Participant	MSM	Gay	Bisexual	Transgender	Heterosexual	Down Low (DL)	Questioning
#1	x	x					
#2	x						
#3	x						
#4	x						
#5	x	x					
#6			x				

In the past have you attended any HIV prevention programs?

Of the six group members, four current work in the field of HIV prevention and reported that they had attended various HIV programming, but did not list specific agencies.

What worked or didn't work about the program you attended?

Group members discussed several issues related to the types of programming they attended over the years including:

- Traditional HIV programming needs to “Treat the person, not the label.” Group members discussed that many programs recruit participants based upon a sexuality label. They indicated that they felt the person needed not to be labeled but educated about his risk of HIV according to his behaviors. They indicated that it doesn't matter if he doesn't categorize himself (as being gay, as being an IV drug user) if the educational program focuses upon his risky behaviors.

What specific needs for HIV prevention do you have that are not being met?

Group members reported that they believed HIV prevention programming needed to:

- Offer more education about sexuality and HIV. Through more open and honest communication, men on the down low (DL) might learn to be more honest about their sexuality.
- Address self-esteem for gay men. All of the group members indicated that the self-esteem of gay men is low because only negative connotations are made towards gay men. One of the group members felt that these negative connotations influence many gay men’s “negligent sexual behaviors.” He stated “Perhaps this is why a lot of them do not care to protect themselves...it is a way of suicide. A lot of people do not want to live this gay life because of the stigma behind it. So at least getting infected, 10 years down the road, they have a guarantee of being out.”
- Education to instill teenagers with morals and how to respect themselves.
- Graphically show what happens to the body when a person is HIV+ and “HIV takes over.”
- Not focus on “glamorizing” HIV by focusing on how long a person can live with the disease. Group members indicated to a person living a street life or for a young person 10-15 years seems like a lifetime which leads the person to believe HIV isn’t as serious as it is.

Where is the best place (location) to go to reach other MSM to give them HIV prevention information?

Participants reported the following locations as places to recruit subpopulations into HIV prevention programming:

Subpopulation	Venue	Location	Type of Venue
YMSM	Block behind Christopher Street	NYC	YMSM sex workers
MSM IDU	Reed Street	Jersey City	Around 6:00 a.m.

Subpopulation	Venue	Location	Type of Venue
MSM Sex Workers	Welfare Building	100 Newkirk Street Jersey City, NJ	Public building between 11:00 p.m. – 4:00 am
	Journal Square	Jersey City	Public area between 11:00 p.m. – 4:00 am
	Jones Street	Jersey City	Public area between 11:00 p.m. – 4:00 am
	Enos Place	Jersey City	Public area between 11:00 p.m. – 4:00 am
MSM	Journal Square Train Station	Jersey City	Public restrooms
Men on the Down Low (DL) and Homo-Thugs	Tonnele Avenue	Jersey City	Less visible public areas between 3:00 – 4:00 am
	Central Avenue	Jersey City	Less visible public areas between 3:00 – 4:00 am
	State Highway	Jersey City	Less visible public areas between 3:00 – 4:00 am

Note: Focus group members reported that the proximity of Jersey City to New York means that the majority of MSM (who have the financial means and the access to transportation) socialize in New York, thus there are a limited number of Jersey City venues.

How interested in learning more about HIV prevention are the MSM you know?

Focus group members reported that they did not feel many of the MSM they knew would be interested in learning about HIV prevention because they did not want to be identified as being “gay” or on the “down low.” One of the MSM commented that one way around this would be to provide an HIV prevention “party” or a “community get together” advertised for “men in general.” He indicated that once men feel comfortable enough to come to this type of party that HIV prevention messages can be targeted toward the “behaviors” that individuals engage in without labeling the person.

Where do you get the information you need about HIV prevention?

Group members indicated that they already had the HIV prevention information that they needed and did not list additional sources of information.

If you could design an HIV prevention program for MSM, what would it look like?

Group members reported that a prevention program for MSM would have the following components:

- **Consistent incentives.** One individual commented on the importance of being consistent in providing incentives if you offer incentives on day one. He indicated that inconsistency leads to program retention problems. Programs need to offer a variety of facilitators who are honest about their own sexuality.
- **Late night and weekend hours.** The group members noted that no HIV prevention programs are open past 5:30 (noting that NJCRI's Project WOW is the only program they knew with evening hours until 8:00). Participants indicated that one reason HIV prevention programs have not been successful is that they aren't available in the hours when people are out and risky behavior is taking place.

As an MSM, what might keep you from attending HIV prevention sessions?

Participants indicated the success of any HIV prevention program depends upon where the prevention session is being hosted and how individuals are recruited from the community to participate in the sessions. Group members discussed that HIV prevention programs need to be "camouflaged." One suggested that an HIV prevention program could be marketed as a movie night for a couple of weeks to establish to participants that the agency was a safe and open environment before providing HIV prevention information. Another individual suggested that the program needed to be conducted in a social or casual setting or that men would not be willing to attend. He said the atmosphere should suggest that "We are not worried about who you are sleeping with...we are more worried about what your risk is...and how to keep you from being infected."

What other services do you need to help you reduce your risk of getting HIV, being reinfected or transmitting HIV to another person?

All of the group members agreed that there needed to be more visibility of HIV prevention programs in the evening hours when people are going out or hanging on the street. One individual commented that if HIV prevention is truly going to reach men

where they are at, it has to be located where men congregate during a time when they would normally be out on the street. One individual suggested providing a safe space, in a drop in center setting, where individuals can wash their clothing, take care of personal hygiene or just come to socialize would provide a service that would attract men to the space where they can then be given HIV prevention information.

Hyacinth AIDS Foundation

Newark, New Jersey

**Hyacinth AIDS Foundation
Project POW, Newark**

A focus group was held on 11/13/03 for Project POW at their offices in Newark, New Jersey. There were fourteen MSM in attendance.

Race: Eleven of the MSM were African American, and two indicated being of mixed race (Black and Puerto Rican, and Black and American Indian/Alaskan Native).

Ethnicity: Two of the MSM were Latino.

Age: Four of the group members were between the ages of 20 and 29, four between the ages of 30 and 39 and six between the ages of 40 and 49.

Zip Code: Eleven of the MSM lived in Newark (zip code 07078, 07102, 07103, 0704, 07105, and 07108). One of the members lived in Orange (07050), one in Short Hills (07078) and one in Hillside (07205).

Subpopulation: Focus group members were also asked to identify the subpopulations that they identified with. Participants were able to indicate they identified as more than one subpopulation. The following chart shows how each participant self-identified.

Note: One individual chose not to self identify indicating that “I’m just me.”

Participant	MSM	Gay	Bisexual	Transgender	Heterosexual	Down Low (DL)	Questioning
#1		x					
#2		x					
#3	x						
#4		x					
#5			x				
#6	x						
#7				x			
#8			x				
#9	x						
#10	x						
#11		x					
#12			x				
#13		x		x			

In the past have you attended any HIV prevention programs?

Several of the group members indicated that they had attended HIV prevention programming in the past. Group members reported receiving HIV prevention education at:

- Project WOW (Newark)
- St. Michael's Hospital (Newark)
- St. Bridget's Hospital (Newark)
- NJCRI (Newark)

What worked or didn't work about the program you attended?

Group members did not respond to this question.

What specific needs for HIV prevention do you have that are not being met?

Group members reported that they believed HIV prevention programming needed to:

- Deal with mental illness and HIV.
- Having all HIV services in the same location. The individual who made that comment indicated "It is more stressful because all services for HIV infected persons are not being in one place."
- Bisexual and Transgender need a place where they can go to be themselves. One MSM indicated that there should be a place for bisexuals to meet and a separate place for Transgender to meet. He indicated that these groups needed to be separate because "I don't want to be in a room full of drag queens."
- HIV should not be categorized according to how you self-identify, because as one member put it "Because once you get HIV, you are no longer gay, straight or lesbian...you are all together now."
- HIV prevention programs must present an atmosphere where everyone respects and accepts the participants of the group for whom and what they are.
- Group must offer a shared experience, not someone telling people what they should and should not do. Groups needed to be a learning and teaching

experience. They should just not be about education but also be about support. One group member stated “It should be about education and then support...90% of the time, we need support.”

- There should be diversity in HIV prevention programs. The example given was that there should be one program for people who have just found that at they are HIV positive and one for people who have been positive for many years.

Where is the best place (location) to go to reach other MSM to give them HIV prevention information?

Participants reported the following locations as places to recruit subpopulations into HIV prevention programming:

Subpopulation	Venue	Location	Type of Venue
MSM	Homeless shelters	Various locations in Newark	Transitional housing
	Jails	County jails in Newark area	Correctional facilities
	Churches	Various churches in Newark	Religious organizations
	Osborne Terrace	Newark	Housing project
	Bradley Court	Newark	Housing project
Men on the Down Low (DL)	Clinton Avenue	Newark	Hangouts for DLs seeking sex with men
	Hawthorne Avenue	Newark	Hangouts for DLs seeking sex with men
	Lyons Avenue	Newark	Hangouts for DLs seeking sex with men
	Chadwick Street	Newark	Hangouts for DLs seeking sex with men
	Seymour Street	Newark	Hangouts for DLs seeking sex with men
	Bergen Street	Newark	Hangouts for DLs seeking sex with men

How interested in learning more about HIV prevention are the MSM you know?

One of the group members reported that she knew that other transgenders would be willing to come out to HIV prevention programs if they knew “how we were going to benefit.” When asked to discuss this further, she indicated that the transgender community would come to a program that “discusses real problems.” She elaborated that “You can’t just come in, take the food, say you are bisexual and leave without achieving anything” if you want people to participate. She further stated that “If you want to reach me, reach me for real.”

Where do you get the information you need about HIV prevention?

Several of the individuals reported that they received HIV prevention information from:

- Project POW
- NJCRI
- Homeless shelters

If you could design an HIV prevention program for MSM, what would it look like?

Group members discussed that HIV prevention designed for MSM should have several components including:

- HIV should not be categorized according to how you self-identify.
- HIV prevention programs must present an atmosphere where everyone respects and accepts the participants of the group for whom and what they are.
- Group must offer a shared experience, not someone telling people what they should and should not do. Groups needed to be a learning and teaching experience. They should just not be about education but also be about support.
- There should be diversity in HIV prevention programs. The example given was that there should be one program for people who have just found out that they are HIV positive and one for people who have been positive for many years.

As an MSM, what might keep you from attending HIV prevention sessions?

Group member reported that they felt a barrier to attending prevention programs was the type of programming offered. One group member commented “It has to be an open discussion. You don’t want to go sit and hear the same thing over and over. People will stop coming. People don’t want to talk about “what’s going on inside my body” but rather “what is going on inside me...how I am feeling?”

What other services do you need to help you reduce your risk of getting HIV, being reinfected or transmitting HIV to another person?

One group member reported the need for more support group for people to discuss their feelings and what is going on with them. Another individual agreed but stated that it was time that incentives were reduced because “You shouldn’t have to feed people so that they can come to support groups. There is a problem with that in NJ...you need to stop holding people by the hand. By providing, you’re not giving people support; you are getting a number every week to come into an agency.”

Hyacinth AIDS Foundation

New Brunswick, New Jersey

**Hyacinth, AIDS Foundation
Project POW, New Brunswick**

A focus group was held on 11/17/03 at the Project POW offices in New Brunswick, New Jersey. There were five MSM in attendance.

Race: Two of the MSM were African-American, and one was American Indian/Alaskan Native. One individual indicated he was of mixed race (White and Jewish) and one individual did not respond to the question.

Ethnicity: Two of the MSM were Latino.

Age: One of the group members was between the ages of 30 and 39. Three of the members were between the ages of 40 and 49 and one reported being over 50 years of age.

Zip Code: Three of the members lived in New Brunswick (zip code 08901). One of the members lived in Newark (07104) and one in Califon (07830).

Subpopulation: Focus group members were also asked to identify the subpopulations that they identified with. Participants were able to indicate they identified as more than one subpopulation. The following chart shows how each participant self-identified.

Participant	MSM	Gay	Bisexual	Transgender	Heterosexual	Down Low (DL)	Questioning
#1		x					
#2		x					
#3	x	x					
#4				x			
#5		x					

In the past have you attended any HIV prevention programs?

Several of the group members reported attending HIV prevention programming in the past. (Note: Three of the focus group members were currently working in HIV prevention/outreach). When asked where they had attended the prevention program, the members reported attending at:

- Hyacinth in New Brunswick
- St. Columba Neighborhood Club (Newark)
- Planned Parenthood

What worked or didn't work about the program you attended?

One of the group members indicated that what worked about the program he had attended was the \$50 gift certificate that was given as an incentive. Another indicated that the program he attended worked because it increased his awareness about the problem of HIV infection in the elderly (a population he was working with at the time).

What specific needs for HIV prevention do you have that are not being met?

Group members discussed four HIV prevention needs they had that were not being met including:

Mental Health: One group member reported that he felt prevention programs were not effective as they do not place emphasis on the high risk behavior that led to the need for HIV prevention in the first place, i.e., internalized homophobia. He stated that internalized homophobia leads MSM to feel that their lives are not valuable and eventually causes them to do drugs, drink alcohol and have unprotected sex. He further stated "A Band-Aid is given to treat the symptoms of promiscuous behavior...we are not trying to figure out when this started or why people get into this terrible cycle of behavior that they just can't break out of."

Hours of Program: Another unmet need discussed was that many of the HIV prevention (and care and treatment) programs available for people occur only between the hours of 9:00 a.m. – 5:00 p.m. He indicated that the people who work during the day can not access these services.

Clarification of Behavior Risks: One of the group members reported that the chances of transmitting HIV through oral sex needs to be clarified in HIV prevention curriculums. He indicated that many HIV prevention messages "focus on this aspect of transmission, and it is discouraging and the sense of credibility is lost in the organization that focuses on that message. This scares a lot of people into thinking that "If I can't even do this, then I am going to do everything..."

Promotion of Masturbation: One of the group members indicated that there needs to be increased promotion of masturbation as a method of safer sex, especially for those who are HIV+ "...because you can not be infected/reinfected with your own semen."

Where is the best place (location) to go to reach other MSM to give them HIV prevention information?

Participants reported the following locations as places to recruit subpopulations into HIV prevention programming:

Subpopulation	Venue	Location	Type of Venue
MSM	French Street	New Brunswick	Public street between the hours of 2:00 a.m. and 5:00 a.m.
	Airport	Newark	Restrooms
	Washington Park	Newark	Public park
	The Coliseum	Rt. 9 & 35 North Sayerville, NJ	Club for younger crowd
	Manhood	New York	Club
	Internet	Crusingforsex.com	Website listing cruising sites
	The Pride Center	1048 Livingston Avenue North Brunswick, NJ 08902	Gay/lesbian center
	Short Hills Mall	Route 24 and JFK Parkway Short Hills, NJ 07078	Restrooms
Transgender	Dunkin' Donuts	Highland Park	Restaurant
	Barnes and Noble	Menlo Park	Bookstore

How interested in learning more about HIV prevention are the MSM you know?

Group members indicated that very few of the MSM they knew were interested in learning more about HIV prevention.

Where do you get the information you need about HIV prevention?

As group members were all currently working in the field of HIV or were Hyacinth clients, they reported that they received their HIV prevention from the agency.

If you could design an HIV prevention program for MSM, what would it look like?

Group members reported that a prevention program for MSM should have the following components:

- Have a gay HIV+ dating service component of the program.

- Have ads for HIV prevention in public restrooms stalls. One group member indicated that programs should “Scare people who hang around these bathrooms to have sex.”
- Prevention messages should focus on the “sexual behaviors that can lead to HIV instead of labeling people.” One group member commented that “Society is obsessed with labeling individuals.”
- Have mandatory health education/risk reduction (HE/RR) sessions for Rutgers freshmen.
- Host “jack-off” parties for gay men to promote masturbation as safer sex.
- Provide an outlet for men where they can feel free to be gay. A group member commented “Society’s homophobic beliefs have forced gay men to be confined to expressing themselves in areas such as men’s bathroom in rest areas, therefore, society is responsible for a number of HIV/AIDS cases.”
- Advertise the program with slogan such as “It is okay to be gay.”

As an MSM, what might keep you from attending HIV prevention sessions?

Group members agreed on several barriers that keep individuals from attending HIV prevention sessions including:

- The sessions are too long.
- The sessions are boring.
- It is difficult to retain someone from the community in a program that takes weeks to complete.

What other services do you need to help you reduce your risk of getting HIV, being reinfected or transmitting HIV to another person?

One of the group members felt strongly that the most important service to provide to reduce the risk of HIV infection was to have services that dispel conflicting messages about sex and choice of sexual orientation. He indicated that these are concepts that are “...negatively reinforced by society, parents and religious affiliation. This can cause children to be raised to feel as though their life is not valuable if their actions deviate from the norms, thus resulting in promiscuous behavior.”

**North Jersey Community
Research Initiative (NCJRI)
Focus Group #1**

Newark, New Jersey

North Jersey Community Research Initiative (NJCRI)

A focus group was held on 10/30/03 at the North Jersey Community Research Initiative (NJCRI). There were six MSM in attendance.

Ethnicity: There were no Latinos in the focus group.

Race: Five of the MSM were African-American and one was Caucasian.

Age: Three of the MSM were between the ages of 30 and 39, two were between the ages of 40 and 49 and one was over 50 years of age.

Zip Code: Four of the MSM lived in Newark (zip codes 07102, 07107, and 07112), one lived in East Orange (07018) and one lived in Maplewood (07040).

Subpopulation: Focus group members were also asked to identify the subpopulations that they identified with. Participants were able to indicate they identified as more than one Subpopulation. The following chart shows how each participant self-identified.

Participant	MSM	Gay	Bisexual	Transgender	Heterosexual	Down Low (DL)	Questioning
#1	x						
#2	x						
#3	x						
#4	x						
#5			x				
#6					x		

In the past have you attended any HIV prevention programs?

Several of the group members reported attending HIV prevention programming in the past. When asked where they had attended the program, the members reported:

- St. Columba Neighborhood Club (Newark)
- Hyacinth (Newark)
- St. Bridget Hospital (Newark)
- Liberation in Truth (Newark)
- North Jersey Community Research Initiative (Newark)
- South Florida AIDS Network
- Online on the Internet

When asked why they had attended the program, the group members indicated they had attended because: (1) it was a required training program for case management prevention and (2) it was a group setting of people where people with different experiences could learn from each other.

What worked or didn't work about the program you attended?

Group members who had attended HIV prevention programming indicated they liked the following things about the program:

- Learning more about HIV prevention and was able to take off {of work} for two days.
- Learning what to do and what not to do (to prevent HIV).
- Learning what agencies to go to and what agencies to avoid {for prevention information.
- Having discussions about sexual partners partners and how to protect yourself from being infected.
- Learning about how to have sex with someone who is not HIV positive.
- Having a psychologist at one of the agencies who was able to provide information about prevention.
- Discussing how one can be infected by the new strands of HIV.

When asked to discuss what did not work about the HIV prevention programs they attended, group members reported: (1) messages about abstinence and (2) messages about condom management.

What specific needs for HIV prevention do you have that are not being met?

Group members reported that they believed HIV prevention programming needed the following components:

- Discussion about secondary prevention. One MSM indicated “I think facilitators are assuming that you do not need to know about prevention because you already have HIV.”
- Discussion of being reinfected with different strain of HIV.
- Discussion about using condoms on a consistent basis.
- Have components for more than one age group as programs need to reach out to everyone including you and senior citizen.
- Having programming for people who have HIV and people who are not infected.
- Provide information about the quality of life available for long term survivors – the reality of gonorrhea, shingles, pain and suffering, pneumonia, TB, being hospitalized for 3 to 4 months at a time, loneliness, and isolation.
- Discussion of the “lifestyles” that put someone at risk including heterosexuals with multiple partners.
- Discussion of how medications have been marketed as a cure for the disease. One individual described it as the attitude of “If I get HIV, I can take this {medicine} and I will be all right.”

Where is the best place (location) to go to reach other MSM to give them HIV prevention information?

Participants reported the following locations as places to recruit subpopulations into HIV prevention programming:

Subpopulation	Venue	Location	Type of Venue
MSM	Halsey Street	Newark	Hangout for MSM and sex workers
	Branch Brook Park	Newark	Hangout for MSM and sex workers
	Cherry Blossom Street	Newark	Hangout for MSM and sex workers
	Cameo Theater	Newark	Adult movie theater

Subpopulation	Venue	Location	Type of Venue
	NJCRI's Project WOW	Newark	HIV prevention program for YMSM
	The African Globe	1028 Broad Street, Newark	Dance club
	Yahoo chat rooms	Yahoo.com	Internet chat rooms and instant messaging with MS for all subgroups
YMSM	Video arcades	Various locations in Newark	Game rooms populated by YMSM and homo-thugs
	NJCRI's Project WOW	Newark	Support groups for YMSM and people with alternative lifestyles
	High schools	Various locations in Newark	After school programs
Bisexual Men	Strip clubs	Various locations in Newark	Club
	Newark Penn Station	Newark and New York	Train station terminal restrooms
	Gay clubs	New York (in the Village)	Club
	Shopping malls	Short Hills, Jersey Gardens Mall	Mall restrooms
	Halfway houses	Various locations in Newark	Transitional living facilities
	Homeless shelters	Various locations in Newark	Transitional living facilities
Men on the Down Low (DL)	Club Euphoria	17 Academy Street	Club
	YMCA	Need address	Gym facility
	Supermarkets	Various locations in Newark	Food stores
	Shopping malls	Short Hills, Jersey Gardens Mall	Mall restrooms
	Cameo Theater	Newark	Adult movie theater
	Housing projects	Bradley Court in Newark	Low income housing

Subpopulation	Venue	Location	Type of Venue
Heterosexuals	Straight dance clubs	Various locations in Newark	Club
	Prospect Street	East Orange	Hangout for MSM and sex workers
	New Jersey Raven Chat Line	201-716-7764	Phone chat line with different phone lines for MSM subpopulations
	Gangs	Newark	During initiation where potential members have sex with someone who is HIV positive as part of initiation in the gang
	Supermarkets	Various locations in Newark	Food stores
	Housing projects	Bradley Court in Newark	Low income housing

How interested in learning more about HIV prevention are the MSM you know?

When asked if group members thought other MSM were interested in learning more about HIV prevention programming, one individual indicated that people felt they did not need to go to a prevention program because it is "...common sense....where you get {HIV} from."

Where do you get the information you need about HIV prevention?

Group members indicated that they received information about HIV prevention from:

- AOGC
- NJCRI (Project WOW and alternative lifestyle groups)

If you could design an HIV prevention program for MSM, what would it look like?

Group members reported that a prevention program for MSM should have the following components:

- Design the agency to have a support group life atmosphere.
- Design the agency to be a hangout with music and video games.

- Coordinate with a large event/concert for the agency with icons like Puff Daddy and 50 Cent who would pass out information about HIV.
- Design the program to include discussion of STD prevention as well as HIV prevention.
- A drug abuse prevention component as many of the group members believed that unprotected sex was due to drug use. One individual commented that “Drugs came before the lifestyle.”
- A mental health issues component that dealt with anxiety, stress and depression.
- Recruitment for the program using billboards and 30-second commercial spots.
- Limit the HIV prevention to one time outreach.

As an MSM, what might keep you from attending HIV prevention sessions?

The majority of the group members indicated that what keeps YMSM from attending HIV prevention programming is that the programs are marketed as programs for MSM. Many of the individuals reported that by “stereotyping” and approaching only men who look “gay” for programming, the program doesn’t reach the people who need it the most. Many of the group members also reported that men are offended if someone approached them during the initial outreach interaction by asking them if they are gay.

What other services do you need to help you reduce your risk of getting HIV, being reinfected or transmitting HIV to another person?

One of the group members indicated that HIV prevention trainers from the State should visit support groups on an ongoing basis, to spread the message about HIV prevention because there is a lot of participant turnover in individuals who go to HIV prevention agencies.

**North Jersey Community
Research Initiative (NCJRI)
Project WOW**

Newark, New Jersey

Project WOW
North Jersey Community Research Initiative

A focus group was held on 11/06/03 at North Jersey Community Research Initiative’s Project WOW offices in Newark, NJ. There were ten MSM in attendance.

Race: Five were African-American, one was American Indian/Alaska Native and one was Native Hawaiian/Pacific Islander. Three of the members reported being of mixed race (Spanish/Italian/Black; American Indian and Black; and Black and Haitian).

Ethnicity: Two of the MSM were Latino

Age: Nine of the group members were under the age of 19. Only one of the group members reported being between the ages of 20 and 29.

Zip Code: Three of the members lived in Elizabeth (zip codes 07201, 07206, and 07208). Two lived in Newark (zip codes 07108, and 07112). One of the members lived in Irvington (zip code 07111) and one lived in East Orange (zip code 07017/07018/07019).

Subpopulation: Focus group members were also asked to identify the subpopulations that they identified with. Participants were able to indicate they identified as more than one subpopulation. The following chart shows how each participant self-identified.

Participant	MSM	Gay	Bisexual	Transgender	Heterosexual	Down Low (DL)	Questioning
#1			x				
#2	x	x					
#3							x
#4				x			
#5				x			
#6		x					
#7		x					
#8		x				x	
#9		x					
#10	x	x					

In the past have you attended any HIV prevention programs?

All group members who had previously attended HIV prevention programs did so at Project WOW. When asked why they went to Project WOW, group members reported:

- A friend brought him to learn about safer sex and how to prevent HIV.
- People around his age group attended the program.
- He was eager to learn more about HIV prevention.

What worked or didn't work about the program you attended?

Group members did not provide any responses to this question.

What specific needs for HIV prevention do you have that are not being met?

Group members did not provide any responses to this question.

Where is the best place (location) to go to reach other MSM to give them HIV prevention information?

Participants reported the following locations as places to recruit subpopulations into HIV prevention programming:

Subpopulation	Venue	Location	Type of Venue
MSM	Halsey Street	Newark	Hangout for MSM and sex workers
	Chicken Shack	By the African Globe- African Globe address: 1028 Broad Street Newark, NJ 07102	Restaurant (between 9:00 p.m. and 8:00 am)
	Churches	Various locations in Newark	Behind the church building
	New housing	Located close to McCarter Highway	Public housing
	Gold's Gym	Behind McCarter Highway	Health club
	Young Village	Newark	Public housing
	Society Hill	South Orange Avenue Newark, NJ 07101	Public housing
	Pathmark	By UMDNJ Hospital	Grocery store
	Seton Hall	400 South Orange Avenue South Orange, NJ 07079	College campus
	Rutgers University	249 University Avenue Newark, NJ 07102	College campus
	Penn Station	Newark and NYC	Restrooms
	Chestnut Street	Newark	Hangout for MSM and sex workers

Subpopulation	Venue	Location	Type of Venue
Bisexuals	City Hall	Newark	Restrooms
	Firehouses	Newark	Public buildings
	Police station	Newark	Public buildings
	Arcade	Various locations in Newark	Game rooms
	McDonalds	Downtown Newark	Restaurant
	Chicken Shack	By African Globe- African Globe address: 1028 Broad Street Newark, NJ 07102	Restaurant
	Green Acres	Newark	Public housing
	Mohammed Ali Avenue	Newark	Hangout for MSM and sex workers
Transgenders	Chicken Shack	By African Globe- African Globe address: 1028 Broad Street Newark, NJ 07102	Restaurant
	Chestnut Street	Newark	Hangout for MSM and sex workers
	Camp Street	Newark	Hangout for MSM and sex workers
	Elizabeth Avenue	Newark	Hangout for MSM and sex workers
	Short Hills Mall	Route 24 and JFK Pkwy Short Hills, NJ 07078	Restrooms
	Newport News Mall	Jersey City	Restrooms
	Bowling Alley	Irvington	Restrooms
	Loews Movie Theater	Various locations	Restrooms

How interested in learning more about HIV prevention are the MSM you know?

Focus group members reported that they did not feel many of the MSM they knew would be interested in learning about HIV prevention. Reasons for this apparent lack of interest included:

- MSM are not too interested “...because everyone knows to put a condom on every time you have sex.”
- People are in denial. One group member indicated “If you don’t have it, you do not have to deal with it – maybe it will go away.”
- “People don’t care anymore.”
- People think “...that a person looks clean so they must not be infected with HIV according to the way they look.”

Where do you get the information you need about HIV prevention?

Group members indicated that they get information about HIV prevention from:

- Project WOW

If you could design an HIV prevention program for MSM, what would it look like?

Group members reported that a prevention program for MSM would have the following components:

- Activities that are spiritual that can be conducted within a church setting.
- Activities that can take place in a school setting.
- Have incentives such as food, movie passes, Pathmark and McDonald's gift certificates for MSM who participate. Group members indicated, however, that for YMSM to attend a six-week health education/risk reduction (HE/RR) session, it would take receiving a \$50 gift certificate or a ticket to a Beyonce or Britney Spears concert at the end of the series to draw YMSM to the program.
- Have fun activities like "Wear a Condom" parties that could describe different ways to have safer sex. There should also be the opportunity to purchase these safe sex items at the party.
- Focus on activities that YMSM like to do such as play video games and watch TV.
- Program should be in a social group setting where new MSM would be invited to attend the sessions.
- Recruitment for the program should not focus on HIV prevention but perhaps be marketed with other functions or an event where "you can be yourself."
- Use chat lines to do recruitment for groups and advertise people to (especially YMSM on the DL) "Come forward if you can not tell your family you are. Join others who feel the same way as you do."

As an MSM, what might keep you from attending HIV prevention sessions?

Group members gave the following barriers that would keep MSM from attending prevention sessions:

- “Too much drama” between individuals in a session.
- People become bored or tired when the topic of the group deviates from the theme or when other opinions, not relating to the themes are discussed.
- If MSMs feel that they could be making money doing something else during the session time.

What other services do you need to help you reduce your risk of getting HIV, being reinfected or transmitting HIV to another person?

Group members did not respond to this question.

Planned Parenthood

Plainfield, New Jersey

Planned Parenthood

A focus group was held on 11/18/03 at the Planned Parenthood offices in Plainfield, New Jersey. There were eight MSM in attendance.

Race: Eight of the MSM were African American.

Ethnicity: One individual reported being of mixed race (Black-Trinidadian).

Age: Six of the MSM were under the age of 19. One of the individuals was between 20 and 29 and one between 30 and 39 years of age.

Zip Code: All of the MSM live in Plainfield (zip codes 07060, 07062, and 07063).

Subpopulation: Focus group members were asked to identify the Subpopulation that they identified with. Participants could indicate if they identified as more than one Subpopulation. The following chart shows how each participant self-identified.

Participant	MSM	Gay	Bisexual	Transgender	Heterosexual	Down Low (DL)	Questioning
#1	x	x					
#2	x	x					
#3	x		x				
#4			x			x	
#5	x	x					
#6			x			x	
#7	x						
#8	x	x					

In the past have you attended any HIV prevention programs?

Several of the group members reported attending HIV prevention programming in the past. When asked what programs they attended they reported: (1) Planned Parenthood and (2) Rutgers's Upward Bound program (where they received HIV education through Planned Parenthood).

What worked or didn't work about the program you attended?

When asked to report what worked about the programs they attended, they indicated they were:

- Able to obtain knowledge about the “new things” that have been discovered about HIV.
- Able to learn about how to eroticize safer sex when using a condom.

When asked to report what did not work about the programs, one of the YMSM indicated that the HIV prevention retreat he attended focused on gay men who felt “forced to give up their sexual behaviors.” He also indicated that it consisted mostly of older men and there were very few YMSM present.

What specific needs for HIV prevention do you have that are not being met?

Focus group members did not specifically discuss HIV prevention needs they had that were not being met.

Where is the best place (location) to go to reach other MSM to give them HIV prevention information?

Participants reported the following locations as places to recruit subpopulations into HIV prevention programming:

Subpopulation	Venue	Location	Type of Venue
YMSM	Plainfield High School	950 Park Avenue Plainfield, NJ 07060	“Take Time Out for Unity” meetings at the school that are a safe place for gay and lesbians teens to meet to discuss their issues
	Rushmore Street	Plainfield	Hangout for YMSM
	3 rd Street	Plainfield	Hangout for YMSM
	On the train tracks	Plainfield	Hangout for YMSM
	Train stations	Various locations on NJ Transit	Hangout for YMSM

Subpopulation	Venue	Location	Type of Venue
	The Village	NYC	Hangout for YMSM
	The African Globe	1028 Broad Street Newark, NJ 07102	Club
	Woodbridge Mall	Woodbridge New Jersey	Mall
	Flea market	Downtown Plainfield	Weekend hangout for YMSM

How interested in learning more about HIV prevention are the MSM you know?

Focus group members reported that they felt that the YMSM they knew would be very interested in learning more about HIV prevention. Group members indicated that they would be willing to attend six-weeks of health education/risk reduction (HE/RR) sessions to gain more education about HIV prevention.

Where do you get the information you need about HIV prevention?

Group members indicated that they get information about HIV prevention from:

- Planned Parenthood
- The medical clinic on Rock Avenue.
- School nurses' office.
- Online on the Internet.

If you could design an HIV prevention program for MSM, what would it look like?

Group members reported that a prevention program for MSM would have the following components:

- Education around eroticizing sex.
- Provide information and education to people who are not HIV+.
- Provide programming that is both interactive and fun. One individual indicated the program needed to be like a "human experience".
- Provide food and gift certificates as an incentive for participating in the program.
- Distribute a variety of condoms for use during safer sex.

- Bring in a facilitator who is a peer of the YMSM attending the program.
- Have a “famous guest speaker” as a draw for participation.

As an MSM, what might keep you from attending HIV prevention sessions?

Focus group members indicated that there were three things that would be a barrier for them attending an HIV prevention session:

- Having a mixed crowd of participants. They indicated that a barrier would be having “straight people who harass gay people” in the program.
- Having a program that “labels people” versus a program where behaviors are discussed.
- Repetition.

What other services do you need to help you reduce your risk of getting HIV, being reinfected or transmitting HIV to another person?

Focus group members did not report any other services needed to help them reduce their risk of becoming HIV infected, reinfected and transmitting HIV.

**Puerto Rican Organization
for Community Education
and Economic Development
PROCEED**

Elizabeth, New Jersey

**Puerto Rican Organization for Community Education and Economic Development
(PROCEED)**

A focus group was held on 11/20/03 for the Puerto Rican Organization for Community Education and Economic Development (PROCEED) at a hair salon in Elizabeth, New Jersey. There were six MSM in attendance. This focus group was conducted in Spanish.

Race: Four MSM were Caucasian, one indicated he was more than one race (Spanish) and one did not respond.

Ethnicity: All MSM were Latino.

Age: Three of the group members were between the ages of 30 and 39, two between the ages of 40 and 49 and one group member did not respond.

Zip Code: Five of the group members reported living in Elizabeth (zip codes 07202 and 07208). One individual did not give zip code information.

Subpopulation: Focus group members were asked to identify the Subpopulation that they identified with. Participants could indicate if they identified as more than one Subpopulation. The following chart shows how each participant self-identified.

Participant	MSM	Gay	Bisexual	Transgender	Heterosexual	Down Low (DL)	Questioning
#1	x	x					
#2		x					
#3		x					
#4		x					
#5		x					
#6	x	x					

In the past have you attended any HIV prevention programs?

All of the group members reported that they had attended HIV prevention programs in the past. They indicated that PROCEED visits the beauty salon every couple of months to test the employees, and provide HIV prevention education (including condom distribution).

What worked or didn't work about the program you attended?

Group members indicated that they looked forward to the visits from PROCEED outreach workers. When asked what works well about the training they receive, they indicated that "They have shown us about prevention, talked about different diseases and how to prevent them and given us education to prevent HIV/AIDS." A group member

did indicate, however, that they would like to receive additional training on how to prevent someone getting infected through work related activities at the salon....”You know if somebody gets cut.”

What specific needs for HIV prevention do you have that are not being met?

When asked to report their specific needs for HIV prevention that are not being met, the only comment from a group member was “I think now there are more diseases, they are mentioned briefly and then forgotten.”

Where is the best place (location) to go to reach other MSM to give them HIV prevention information?

Participants reported two locations as places to recruit subpopulations into HIV prevention programming. However the group members were quick to point out that “Nowadays, it’s more open than before...there is no need for specific locations to find MSM” and that MSM can be found at “work, home...in the streets.” One group member reported “There is more sexuality everyday, not like before where you had to go find MSM.” One member summed up discussion by stating “It doesn’t matter if it’s a place designated for “gays” or places designated for “heterosexuals”...you can find MSM anywhere.”

Subpopulation	Venue	Location	Type of Venue
MSM	Coco Bongo	Elizabeth	Club with Monday night “Gay Night.”
	Landy’s Beauty Salon	Elizabeth	Landy’s is a convenient place to provide education because of the shop’s popularity and that many MSM hangout there.

How interested in learning more about HIV prevention are the MSM you know?

When asked if group members thought other MSM were interested in learning more about HIV prevention programming, one member said “We are always geared up to learn more” while another commented the wanted to learn “Whatever you want to teach us.”

Where do you get the information you need about HIV prevention?

Group members indicated that they received information about HIV prevention from:

- P.R.O.C.E.E.D
- Articles in newspapers
- Television (Spanish language)

If you could design an HIV prevention program for MSM, what would it look like?

Group members reported that a prevention program for MSM should have the following components:

- Information with respect to protection against HIV infection.
- More intense/concentrated information for youth. One group member indicated that youth that are naïve are more likely to be involved in sexual behaviors without protection.
- Information involving the relationship between drug and alcohol use and engaging in unprotected sex. Group members reported that when people are involved with drugs and alcohol, they forget about protection.
- Information for people who still refuse to use condoms.
- Information for men that pay for sex. Group members also reported that this type of information needs to target men who offer to pay more for sex without a condom.
- Information on condom use for men who use Viagra. One of the group members indicated that men using Viagra “lose control over their sexual activities and forget to use protection.”

Group members indicated that they feel that current HIV prevention activities they are involved with are successful noting their participation in providing education and condoms in clubs (Coco Bongo in Elizabeth) and at private parties. They indicated that currently PROCEED outreach workers bring boxes of condoms and they are handed out the club and at parties that the stylists at Landy’s are often are called up to organize. At these parties condoms and informational flyers are distributed. The focus group members indicated that the flyers should always detail proper condom use (using graphic drawings), discuss other STI’s (in addition to HIV/AIDS) and provide a phone number for people to call for more information about HIV prevention.

As an MSM, what might keep you from attending HIV prevention sessions?

Focus group members indicated that barriers to MSM attending programs include:

- People are embarrassed to be associated with HIV, even if they do not have it.
- People do not want to be associated with being gay.
- Men on the down low want identity security and do not want to be known.
- Traveling or financial problems are barriers to attending programs.
- People who do not have any education about HIV/AIDS think they will get infected if they hangout or hug someone who they think is infected.

What other services do you need to help you reduce your risk of getting HIV, being reinfected or transmitting HIV to another person?

Group members indicated that the one of the most important services needed is publicity about HIV prevention. One group member indicated that he felt it was also important to have “Involvement from those who are infected so that their experiences can reach out to others.”

Other group members discussed the financial aspect of HIV prevention noting that “Protection is expensive. If I purchase condoms, I don’t have enough money for the hotel.” He indicated one service that would be of assistance is to make condoms less expensive or distribute them for free. Another member noted that this would be good as many people are still embarrassed when they have to purchase condoms, which is a barrier to their use.

South Jersey AIDS Alliance

Atlantic City, New Jersey

South Jersey AIDS Alliance

A focus group was held on 11/18/03 at the Oasis Center of the South Jersey AIDS Alliance in Atlantic City, NJ. There were fourteen MSM in attendance.

Race: Five MSM were African-American, and seven were White. Two individuals did not answer the question.

Ethnicity: One of the MSM was Latino.

Age: One of the MSM was under the age of 19, five were between the ages of 30 and 39 and eight were between 40 and 49.

Zip Code: Five of the MSM lived in Atlantic City (08401). Two lived in Tuckerton (08087), two in Absecon (08201), two in Elwood (08217), two in Vineland (08360) and one in Millville (08360).

Subpopulation: Focus group members were asked to identify the Subpopulation that they identified with. Participants could indicate if they identified as more than one subpopulation. The following chart shows how each participant self-identified.

Participant	MSM	Gay	Bisexual	Transgender	Heterosexual	Down Low (DL)	Questioning
#1		x					
#2		x				x	
#3		x				x	
#4		x					
#5		x					
#6	x						
#7			x				
#8				x			
#9		x					
#10		x					
#11		x					
#12	x						
#13				x			
#14			x				

In the past have you attended any HIV prevention programs?

Only one of the group members indicated that he had attended an HIV prevention program, noting it was conducted at the Ocean County Health Department.

What worked or didn't work about the program you attended?

The group member who reported attending the program did not specify what worked and what did not work about the program.

What specific needs for HIV prevention do you have that are not being met?

Group members reported that they believed HIV prevention programming needed to:

- Provide education related to the risk of being reinfected with the virus. Group members reported that many individuals did not believe this was possible if your viral load was undetectable.
- Provide HIV prevention education to homeless people. Group members reported that many homeless individuals practice unsafe sex in order to obtain shelter for the night. In addition, they noted that there is a serious drug problem among the homeless population.
- Educational brochures and pamphlets need to be created in a different style that attracts people to want to read the message. At the same time, brochures still need to be conservative so they can be distributed in more conservative areas.
- Provide more HIV prevention education in the school system including condoms distribution. One group member stated that condoms should be distributed in high schools for free as students can not afford to buy them on their own and their parents are not giving them condoms.

Where is the best place (location) to go to reach other MSM to give them HIV prevention information?

Participants reported the following locations as places to recruit subpopulations into HIV prevention programming:

Subpopulation	Venue	Location	Type of Venue
MSM	Paradise	Asbury Park	Club
	Through other people	Atlantic City and proximity	“Word of mouth”
Bisexual Men	Casinos	Atlantic City	Gaming
	Homeless shelters	Atlantic City	Transitional housing
	“On the job”	Atlantic City	Employment

Subpopulation	Venue	Location	Type of Venue
IDUs	Brown's Park	Atlantic City	Public park
	Alleys	Atlantic City	Dark, private, secluded places
	Maryland Avenue	Atlantic City	Public street
Male Sex Workers	Public areas	Various locations in Atlantic City	Restrooms
	Bookstores	Various locations in Atlantic City	Adult bookstores
	Boardwalk	Atlantic City	Public area
	Casinos	Atlantic City	Gaming floors, lobbies and lounges
	Large restaurants	Various locations in Atlantic City	Restrooms
	Hotels	Various locations in Atlantic City	Restrooms
Female Sex Workers	Casinos	Atlantic City	Gaming lobbies, floors and lounges
Transgender	On Atlantic and Pacific Avenue	Atlantic City	Outside of club venues

How interested in learning more about HIV prevention are the MSM you know?

Focus group members reported that they did not feel many of the MSM they knew would be interested in learning about HIV prevention. Reasons for this apparent lack of interest included:

- People are in denial about being at risk for HIV prevention. Group members indicated that people still do not think they can contract the virus.
- Many people do not want to be identified as having interest in wanting to know more about HIV prevention.
- People who are HIV+ think that if their viral load is undetectable, it is safe for them to have unprotected sex.
- People who are HIV+ do not believe they can be reinfected by other strains of the HIV virus.

Where do you get the information you need about HIV prevention?

Group members indicated that they received information through their support group at Oasis (South Jersey AIDS Alliance).

If you could design an HIV prevention program for MSM, what would it look like?

Group members reported that a prevention program for MSM would have the following components:

- **Provide outreach in clubs.** If the program provides outreach in clubs, outreach workers need to be subtle in their approach. Group members suggested that they approach an individual and strike up a casual conversation with the individual to determine whether they would be interested in receiving HIV prevention outreach.
- **Provide incentives for program participation.** Group members noted that this is especially important if the program involves HIV testing. Group members indicated that in the case of HIV testing, incentives should be distributed when the individual comes back for their HIV test results.
- **Use mobile screening vans:** Group members indicated that the mobile screening vans could be used for HIV testing but should also conduct a variety of other health screening tests.
- **Use radio ads for recruitment.** Group members suggested recruiting individuals for the programs through advertising on various radio stations.

As an MSM, what might keep you from attending HIV prevention sessions?

Group members did not indicate any barriers from attending HIV prevention sessions other than what was reported while answering other questions.

What other services do you need to help you reduce your risk of getting HIV, being reinfected or transmitting HIV to another person?

Group members reported that there needs to be more information provided to MSM about STIs. One of the MSM indicated that people are consumed with the issues of transmitting HIV but STIs such as Hepatitis C, gonorrhea and herpes go ignored. He indicated that this is problematic as many HIV+ individuals think that HIV is the worst infection that they could get and do not understand how difficult it is to live with other STIs such as herpes.

**Visiting Nurse Association of
Central New Jersey**

Asbury Park, New Jersey

Visiting Nurses Association of Central New Jersey

A focus group was held on 11/11/03 for the Visiting Nurses Association (VNA) at Georgie’s Bar in Asbury Park, New Jersey. There were seventeen MSM in attendance.

Race: Thirteen of the MSM were White, two were African American and two indicated being of mixed race (American Indian, and White, Asian, Hawaiian and White).

Ethnicity: One of the MSM was Latino.

Age: One of the group members was between the ages of 20 and 29, ten were between the ages of 30 and 39, four between the ages of 40 and 49 and two reported being over 50 years of age.

Zip Code: Eleven of the members lived in Asbury Park (zip code 07112). Two lived in Belmar (07719), two lived in Keansburg (zip code 07734), one lived in Ocean Grove (07756) and one lived in Lakewood (zip code 08701).

Subpopulation: Focus group members were also asked to identify the subpopulations that they identified with. Participants were able to indicate they identified as more than one subpopulation. The following chart shows how each participant self-identified.

Participant	MSM	Gay	Bisexual	Transgender	Heterosexual	Down Low (DL)	Questioning
#1		x					
#2			x				
#3		x					
#4		x					
#5	x						
#6	x	x					
#7	x	x					
#8	x	x					
#9	x						
#10	x	x					
#11		x					
#12	x	x					
#13		x					
#14		x					
#15		x					
#16	x	x					
#17	x						

In the past have you attended any HIV prevention programs?

Only a few of the group members reported attending HIV prevention programs in the past. Of those reporting attending HIV programs, two individuals reported the locations of the programs as being: (1) the VNA clinic in Asbury Park and (2) Gay Men's Health Crisis in Manhattan.

What worked or didn't work about the program you attended?

The group members who reported attending the programs reported attending to learn more about HIV prevention or wanting updated information about what was safe and what was not safe to do sexually. All of the respondents indicated that they felt these programs were adequate to meet their needs.

What specific needs for HIV prevention do you have that are not being met?

Group members reported that their unmet HIV prevention needs included:

- Knowing "Exactly what I can do to keep myself safe since I am living with HIV."
- Needing more information about new medications including the side effects of the meds and how they affect a person physically and psychologically.
- Information on Hepatitis A, B, and C (including information on how the infection is passed and the different treatments available for the different strains).
- Information on syphilis and gonorrhea.
- Information on T-Cells and viral loads.
- Clarification of the symptoms of HIV. One group member indicated that he felt that "You do not know who is infected because of the advances" in medications.
- Listings of available educational resources that include information on preventing HIV.

Where is the best place (location) to go to reach other MSM to give them HIV prevention information?

Participants reported the following locations as places to recruit subpopulations into HIV prevention programming:

Subpopulation	Venue	Location	Type of Venue	
MSM	Georgie's	810 5 th Avenue Asbury Park, NJ 07712	Club	
	Bistro Ole	280 Main Street Asbury park, NJ 07712	Restaurant	
	Paradise	101 Asbury Avenue Asbury Park, NJ 07712	Club	
	Gay Owned Business	At various locations in Asbury Park	Local business	
	Cookman Avenue	Asbury Park	Hangout for MSM	
	Gay Pride Festival	Asbury Park	June	
	Beaches	Various beaches located in Monmouth and Ocean counties	On the boardwalk	
	Coffee houses	Various locations in Asbury Park	Restaurants	
	Farmers Market	Asbury Park	Public area	
	2 nd Avenue Beach	Belmont	Public area	
	2 nd Avenue Boardwalk	Belmont	Public area	
	Men on the Down Low (DL)	Internet chat rooms	Various providers	Online services
Movie theaters		Various locations	Public entertainment	
Rest stops		Various locations on the Garden State Parkway and Turnpike	Public areas	
Bookstores		Asbury Park	Businesses	
Police call sheet		Monmouth and Ocean County	Men who have been arrested for prostitution	
Parole officers		Monmouth and Ocean County	Provide information to men just released from jail	

How interested in learning more about HIV prevention are the MSM you know?

Focus group members reported that they did not feel many of the MSM they knew would be interested in learning about HIV prevention.

Where do you get the information you need about HIV prevention?

Group members indicated that they get information about HIV prevention from:

- VNA (indicating familiarity with Frank Englebert with VNA as HIV prevention outreach specialist).
- Check Mate Van

If you could design an HIV prevention program for MSM, what would it look like?

Group members reported that a prevention program for MSM should have the following components:

- Placing prevention messages in public places such as putting signs behind bathroom doors all over the city.
- Providing educational materials about homosexuality for the community. One suggested the slogan “You are gay...be proud, be educated.”
- Conducting benefits for the VNA in bars. One member suggested offering a cocktail drink special and HIV prevention information discussion/distribution at the same time.
- Holding health education/risk reduction (HE/RR) components in a bar, church or school instead of in a classroom setting.
- Reduce the number of required HE/RR sessions.
- Condensing HIV prevention programs (such as HE/RR) to make them more practical.
- Educate the community on the fact that HIV prevention makes an impact on their health.
- Provide HIV education through videos and on line so that people could have house parties for education or learn at their own pace.

- Focus HIV prevention not just on gay people but the community at large.
- Use local advocates as a resource (including as presenters) because they can reach a lot of people.

As an MSM, what might keep you from attending HIV prevention sessions?

Group members indicated several barriers that might keep MSM from attending HIV prevention sessions including:

- Men might be embarrassed disclosing that they are having sex with other men.
- Thinking that knowing your HIV status will impact you economically. One group member indicated that he felt "...some people do not get tested because in the back of their minds, a positive diagnosis means \$1,000 per month in medications." He suggested that perhaps knowing what the state government would fund (in terms of medications) might take the pressure off of being tested.

What other services do you need to help you reduce your risk of getting HIV, being reinfected or transmitting HIV to another person?

Group members had a variety of ideas about what other services were needed to reduce the risk of individuals in becoming infected including:

- Making sex education, including HIV education, mandatory for people being released from prison, for people being arrested for prostitution, and for people graduating high school or college.
- Develop prevention materials that are created in "street language" so more people can relate to them.
- Provide a refresher course on HIV that would include new information on the disease for people who have already learned the basis of HIV 101. Group members felt that since HIV prevention is not in the news as much, people are not talking about the problem of HIV infection anymore.
- Should be advertised as "Just like you can catch a cold, you can get HIV" to reach people that feel that HIV cannot happen to them.
- Would be effective in reaching those people outside of the traditional gay community.

Recommendations Across All Focus Groups

Recommendations

Information Across all Focus Groups

Based on the information gathered from the focus groups, the following recommendations are offered for the development of HIV prevention programs for MSM regardless of subpopulation.

Eliminate Barriers to Program Participation
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Labeling Consumers and Programs: Focus group members discussed problems in program recruitment and retention related to labeling. Specifically–

- **Labeling Consumers by Sexual Behaviors:** HIV prevention programming should rely less on labeling people by the sexual behaviors they engage in (i.e. using the term MSM and/or labeling individuals by MSM subpopulations) and instead broaden the focus to men and the sexual behaviors they engage in. Several focus group members indicated that labeling services as targeting MSM is a deterrent to program participation as many men do not identify themselves as being “men having sex with men” and would not attend a program that was labeled as such.
- **Labeling Consumers as “Gay”:** Other individuals do not want to be labeled as being “gay” or “on the down low” due to the stigma associated with being gay in society. Group members indicated that in general, the self-esteem of gay men is low because of the negative connotations made towards gay men. Several of the focus group members reported that there is a link between the negative connotations, lack of self esteem and unsafe sexual behaviors. Thus, group members advocated for HIV prevention programming that included components that address the development of self-esteem.
- **Labeling Programs as HIV Programs:** Focus group members also indicated that men will not attend programs that are directly labeled as HIV prevention programs because they do not want to be stigmatized as having or likely to contract HIV. Group members felt that the stigma surrounding HIV can cause HIV+ individuals to be lax in protecting themselves as well as making attendance for men who are HIV- difficult.

Outdated Recruiting Strategies: Group members reported that many men are offended if someone approaches them during an initial outreach interaction by asking them if they are “gay.” They also reported that that many times men who need HIV prevention education are not targeted because they do not “look gay” to an outreach worker. Group members stated that using labels to determine who is approached in outreach is outdated as many men do not identify their behaviors with labels or may participate in different

behaviors depending on circumstances and opportunity. Focus group members indicated that one of the ways to eliminate this problem is to develop outreach strategies that target all men and discuss HIV prevention in context of all types of sexual behaviors that men may engage in.

Lack of Awareness of Risk: Focus group members commented that while there is a wealth of information available about HIV, many individuals still have barriers that need to be addressed before behavior change can occur. Focus group members mentioned the following barriers:

- Denial regarding the individual’s perceived risk for becoming infected with HIV.
- Belief that individuals with an undetectable viral load cannot transmit the virus.
- Belief that one can tell by appearance whether an individual is HIV+.
- Lack of education regarding re-infection risk.

Glamorization of HIV: In the mind of focus group participants, the influx of medicines to treat HIV has “glamorized” HIV to the point that many believe that if they get HIV, they are “fine” because medicines are available to manage the disease. As drug company advertisements tout longevity due to medications, the fear is that people believe HIV is not serious and that leads to being careless in adopting or continuing prevention behaviors. Focus group members indicated that one way to deglamorize HIV is to discuss healthcare management issues for people who are HIV+ in prevention interventions.

Access to Programs: Focus group members indicated that programs need to address the barriers that keep consumers from accessing programs. Transportation to program and financial constraints often keep people from attending programs. HIV prevention programming should have built-in components to offset these barriers including providing:

- Free transportation to programs (bus passes or tokens).
- Programming at community locations through the use of mobile vans or by bringing programming to community locations such as churches, schools, clubs.
- Incentives for participation in programming.

Tailor Programs to Meet the Needs of Participants
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Develop Programs Using Easy to Understand Language and Concepts: Focus group members reported that HIV prevention programming “needs to reach people where they are.” HIV prevention material should be discussed in laymen’s terms and be more

interactive in order to maintain participants' attention. Several focus group members advocated for the development of programs with explicit, graphic information that show the reality of HIV and its effects on the body.

Create A Basic Framework for HIV Prevention Programs for Men: Focus group participants indicated that new frameworks for HIV prevention programs for men would include:

- Providing services that do not label men as MSM.
- Targeting HIV prevention messages at both the individual and community level.
- Offering incentives for men to participate in the program.
- Providing detailed information to men on HIV risks for both men and women.
- Offering extended hours of operation (including late night hours).
- Providing programming at places where high risk behavior is taking place.
- Providing programming that is interactive and enjoyable.
- Providing outreach and education during the interaction with the individual.
- Providing programming at places where people can be themselves.

Develop Innovative HIV Prevention Programming for Men
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Program Components: Focus group members indicated that HIV prevention programs for men need to focus on:

- Using condoms.
- Developing sexual negotiation skills with partners.
- Educating consumers on the dangers of being re-infected with HIV or infected with a secondary strain of HIV.
- Developing safer sex practices for individuals who are HIV+ and those who are HIV-.
- Addressing issues of homophobia.

- Addressing mental health issues including anxiety, stress, and depression.
- Increasing self-esteem of gay men.
- Educating consumers on the effects of HIV on the body.
- Discussing the myths of HIV transmission (including the risks associated with various sexual acts).
- Educating consumers on the medical aspects of HIV including information on T-cells, viral loads, medications and medical care management.
- Providing referral services for those who test positive for HIV.
- Educating consumers on the transmission of STD's, TB and Hep A/B/C.
- Providing information on the effects of drug and alcohol related to ability to practice safer sex behavior.
- Providing consumers with information on HIV testing including the types of tests available and the length of time it takes to receive test results.

Educational Materials: Focus group members advocated creating innovative HIV prevention educational materials including:

- Creating comic books to demonstrate both various safer sex and high risk behavior scenarios.
- Creating role playing activities involving the use of a famous person with whom the target population could identify.
- Developing easy to read educational materials to be given to drug dealers on the street corners.
- Developing ads for HIV prevention to be placed in public restrooms stalls.
- Developing materials for HIV- individuals that discuss risks associated with various sexual acts.
- Developing materials on the correct use of condoms.
- Developing materials related to safe sex negotiation with partners.

Marketing Plans: Programs should take an aggressive marketing approach to promote HIV prevention programs including:

- Using a famous rapper to provide the HIV prevention message during concerts.
- Using a radio personality to host an HIV prevention party in a club.
- Creating HIV prevention public service announcements using popular R&B or rap music as a backdrop for the announcements.
- Marketing HIV programs in bars, clubs, and churches; using mobile screening vans.
- Making HIV prevention programs visible where men congregate during a time when they would normally be out on the street.

Specific Recommendations for MSM Subpopulations

Specific Recommendations For MSM Subpopulations

Based on the information gathered from focus groups, the following are recommendations for the development of an HIV prevention program for subpopulations of Men Who Have Sex with Men. **Note:** *Information provided in this section is limited to the information provided by focus group participants. In some cases information was not provided for all questions or all subpopulations.*

Young Men Who Have Sex with Men (YMSM)

What worked or didn't work about the program you attended?

Support groups should provide a haven where YMSM can congregate, since their issues may be different from older MSM.

What specific needs for HIV prevention do you have that are not being met?

- There needs to be education about the dangers of being reinfected with different strains of HIV.
- Some YMSM who have HIV believe it is okay to have unprotected sex with a partner with HIV.

How interested in learning more about HIV prevention are the MSM you know?

Focus group members reported that they did not feel many of the YMSM they knew would be interested in learning about HIV prevention. Reasons for this apparent lack of interested given included:

- YMSM do not seem interested in changing their current sexual behaviors.
- YMSM who have HIV do not disclose their status to potential partners.
- YMSM are afraid to get tested (specifically due to having to wait a long period of time wondering if the HIV test is going to come back positive).

If you could design an HIV prevention program for MSM, what would it look like?

Program Design: Several elements of program design were discussed including:

- Programs for YMSM should provide general HIV/AIDS transmission information and discuss the levels of risk associated with various sexual acts.
- Programs should engage participants by having group sessions versus classroom style lecturing. In addition, a prevention program for YMSM should be held in a social environment where YMSM would feel comfortable and free to be themselves.
- Chat lines can serve as a means of recruitment for groups such as YMSM on the down low.
- Having a facilitator who is a peer of the YMSM to attend the program can be very effective.

Program Activities: There should be a focus on activities that YMSM like to do such as play video games and watch TV.

Incentives: Incentives are a good way to draw YMSM to the program. Food, movie passes, Pathmark and McDonald's gift certificates, and concert tickets are ideas for rewarding participants.

As an MSM, what might keep you from attending HIV prevention sessions?

- The majority of the group members indicated that what keeps YMSM from attending HIV prevention programming is that the programs are marketed as programs for MSM.
- Many of the individuals reported that by stereotyping and approaching only men who "look gay" for programming, the program does not reach the people who need it the most.

Men on the Down Low (DL)

What specific needs for HIV prevention do you have that are not being met?

More education needs to be offered about sexuality and HIV. Through more open and honest communication, men on the DL might learn to be more honest about their sexuality.

If you could design an HIV prevention program for MSM, what would it look like?

Avoid Labeling When Recruiting: It was stated that the use of the term DL is “archaic” because it is easy to distinguish or target men on the DL by approaching them on the “corner” or other areas where they congregate.

Program Information: Information needs to be provided to MSM related to re-infection. Many MSM do not realize that they can become reinfected or infected with different strains of the virus.

Bisexual and Transgender

What specific needs for HIV prevention do you have that are not being met?

- Bisexual and Transgender need a place where they can go to be themselves.
- There should be separate programs for bisexuals and transgenders as each group is unique and has different programming needs.

Latino MSM

If you could design an HIV prevention program for MSM, what would it look like?

Include a Family Component: HIV prevention programs for Latino MSM need to have a component that assists the families of HIV+ Latinos deal with HIV including:

- Helping the family of people who are HIV+ to learn how to deal with the disease including the physiological changes that occur as part of the disease such a night sweats and changes in body appearance.

- Providing psychological support for the family members of HIV+ individuals.
- Provide the HIV+ family member with the educational tools to be able to discuss HIV disease (including transmission risks) with their family.

Summary

Report Summary

This effort documents the input of 119 men over the course of a three-week period. Information obtained from members of the focus group documents: (1) venues where MSM congregate, (2) suggestions for appropriate interventions for MSM subpopulations; (3) suggestions for development of HIV prevention programming components, and (4) suggestions for social marketing strategies to recruit individuals into programming.

Readers of this document are encouraged to use it as a guide when implementing recruitment, marketing and programmatic strategies in the development of future HIV prevention programming efforts.

This document brings a voice to the MSM population by taking an in-depth look at their needs and concerns. By conducting interviews in nine cities throughout the state of New Jersey, this report aims to streamline attempts to better reach the MSM population. The report elicits responses to such issues as the best way to reach other MSM and give them HIV prevention information, barriers that can keep MSM from attending HIV prevention sessions, and services that can reduce the risk of getting and transmitting HIV.

This report was developed under a Memorandum of Agreement between the New Jersey Department of Health and Senior Services (NJDHSS), Division of HIV/AIDS Services (DHAS), and Rutgers, The State University of New Jersey, HIV Prevention Community Planning Support and Development Initiative. Funding was provided through the NJDHSS, DHAS, Centers for Disease Control and Prevention Cooperative Agreement.



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Approved for publication by the New Jersey Department of Health and Senior Services, February 2004.

Electronic version made available, September 2004.