

HIV | SURVEILLANCE REPORT

SPECIAL REPORT

**HIV Infection Risk, Prevention, and
Testing Behaviors Among Men
Who Have Sex with Men
National HIV Behavioral Surveillance
19 U.S. Cities, 2023**



**Centers for Disease
Control and Prevention**
National Center for HIV,
Viral Hepatitis, STD, and
TB Prevention

This HIV Surveillance Special Report is published by the Behavioral and Clinical Surveillance Branch of the Division of HIV Prevention, National Center for HIV, Viral Hepatitis, STD, and TB Prevention, Centers for Disease Control and Prevention (CDC), U.S. Department of Health and Human Services, Atlanta, Georgia.

This HIV Surveillance Special Report is not copyrighted and may be used and copied without permission. Citation of the source is, however, appreciated.

Suggested citation

Centers for Disease Control and Prevention. *HIV Infection Risk, Prevention, and Testing Behaviors Among Men Who Have Sex With Men—National HIV Behavioral Surveillance, 19 U.S. Cities, 2023*. HIV Surveillance Special Report 37. <https://stacks.cdc.gov/view/cdc/162349>. Published September 2024. Accessed [date].

On the Web: <https://www.cdc.gov/hiv-data/nhbs/index.html>

Confidential information, referrals, and educational material on HIV

CDC-INFO

1-800-232-4636 (in English, en Español)

1-888-232-6348 (TTY)

<https://wwwn.cdc.gov/dcs/ContactUs/Form>

Acknowledgments

This report was prepared by the following CDC staff and contractors: Elana Morris, Dafna Kanny, Anna Teplinskaya, Amy Baugher, Teresa Finlayson, Danielle Lonbong Njiometio, Catlainn Sionean, Johanna Chapin-Bardales, Dita Broz, Jonathan Feelemyer, Evelyn Olansky, Jeff Todd, and Cyprian Wejnert, for the National HIV Behavioral Surveillance (NHBS) Study Group.

We thank the NHBS participants and the DHP editorial staff (Michael Friend) for their effort in making this report possible.

NHBS Study Group

Atlanta, GA: Genetha Mustaafaa, Jenna Gettings

Baltimore, MD: Colin Flynn, Danielle German, Molly Gribbin

Chicago, IL: Antonio D. Jimenez, Irina Tabidze

Denver, CO: Alia Al-Tayyib, Jessica Forsyth, Megan Duffy

Detroit, MI: Emily Higgins, Vivian Griffin, Corrinne Sanger

Houston, TX: Salma Khuwaja, Paige Padgett, Osaro Mgbere

Indianapolis, IN: Daniel Hillman, Conner Tiffany, Manuel Gonzalez-Carrasco

Los Angeles, CA: Ekow Kwa Sey, Yingbo Ma, Hugo Santacruz

New Orleans, LA: William T. Robinson, Narquis Barak, Meredith Booth

New York City, NY: Pablo Martinez, Alexis Rivera, Kristina Rodriguez

Newark, NJ: Afework Wogayehu, Anindita Fahad, Corey Rosmarin-DeStefano

Philadelphia, PA: Kathleen A. Brady, Tanner Nassau, David Tomlinson

Portland, OR: Timothy W. Menza, Matthew Town, Lauren Lipira

San Diego, CA: Vivian Trang, Stuart Watson, Stephanie Sanz

San Francisco, CA: Willi McFarland, Moranda Tate, Erin C. Wilson

San Juan, PR: Yadira Rolón-Colón, Jesus Vargas-Franco, María Pabón Martínez

Seattle, WA: Sara Glick, Aleks Martin, Courtney Moreno

Virginia Beach–Norfolk, VA: Jennifer Kienzle, Jamell James, Gregg Fordham

Washington, DC: Kate Drezner, Irene Kuo, Hannah Latif

CDC: Behavioral Surveillance Team

Commentary	4
Figures	
1 National HIV Behavioral Surveillance project areas—United States, 2023	5
2 Gender distribution of men who have sex with men—National HIV Behavioral Surveillance, 19 U.S. cities, 2023	6
3 Age distribution of men who have sex with men—National HIV Behavioral Surveillance, 19 U.S. cities, 2023	6
4 Race/ethnicity distribution of men who have sex with men—National HIV Behavioral Surveillance, 19 U.S. cities, 2023	7
5 Social determinants of health among men who have sex with men—National HIV Behavioral Surveillance, 19 U.S. cities, 2023	7
6 Health care insurance and use among men who have sex with men—National HIV Behavioral Surveillance, 19 U.S. cities, 2023	8
7 Prevalence of HIV overall and by race/ethnicity among men who have sex with men—National HIV Behavioral Surveillance, 19 U.S. cities, 2023	9
8 HIV testing in the 12 months before interview among men who have sex with men—National HIV Behavioral Surveillance, 19 U.S. cities, 2023	10
9 Sexual behaviors among cisgender men who have sex with men—National HIV Behavioral Surveillance, 19 U.S. cities, 2023	11
10 Preexposure prophylaxis (PrEP) awareness and use in the 12 months before interview among men who have sex with men who tested HIV-negative—National HIV Behavioral Surveillance, 19 U.S. cities, 2023	11
11 Preexposure prophylaxis (PrEP) use in the 12 months before interview overall and by race/ethnicity among men who have sex with men who tested HIV-negative—National HIV Behavioral Surveillance, 19 U.S. cities, 2023	12
12 Preexposure prophylaxis (PrEP) use in the 12 months before interview by city among men who have sex with men who tested HIV-negative—National HIV Behavioral Surveillance, 19 U.S. cities, 2023	12
13 Diagnosis of sexually transmitted infections (STIs) in the 12 months before interview among men who have sex with men—National HIV Behavioral Surveillance, 19 U.S. cities, 2023	13
14 Injection drug use stratified by HIV status among men who have sex with men—National HIV Behavioral Surveillance, 19 U.S. cities, 2023	14
15 Receipt of HIV care and treatment among men who have sex with men and who self-reported being HIV-positive—National HIV Behavioral Surveillance, 19 U.S. cities, 2023	14
Technical Notes	15
References	17
Tables	
1 Selected characteristics of men who have sex with men—National HIV Behavioral Surveillance, 19 U.S. cities, 2023	19
2 Social determinants of health among men who have sex with men—National HIV Behavioral Surveillance, 19 U.S. cities, 2023	20
3 HIV prevalence among men who have sex with men, by gender—National HIV Behavioral Surveillance, 19 U.S. cities, 2023	21
4 HIV testing among men who have sex with men—National HIV Behavioral Surveillance, 19 U.S. cities, 2023	22
5 Setting of most recent HIV test among men who have sex with men and who were tested for HIV in the 12 months before interview—National HIV Behavioral Surveillance, 19 U.S. cities, 2023	23
6 Anal sex with a male sex partner at last sex among cisgender men who have sex with men—National HIV Behavioral Surveillance, 19 U.S. cities, 2023	24
7 Sexual behavior with female and male sex partners in the 12 months before interview among cisgender men who have sex with men—National HIV Behavioral Surveillance, 19 U.S. cities, 2023	25
8 Receptive sexual behavior with men in the 12 months before interview among transgender men and nonbinary persons assigned male at birth—National HIV Behavioral Surveillance, 19 U.S. cities, 2023	26
9a HIV prevention activities in the 12 months before interview among men who have sex with men—National HIV Behavioral Surveillance, 19 U.S. cities, 2023	27
9b HIV prevention in the 12 months before interview among men who have sex with men, by city—National HIV Behavioral Surveillance, 19 U.S. cities, 2023	28
10 Diagnosis of sexually transmitted infections among men who have sex with men—National HIV Behavioral Surveillance, 19 U.S. cities, 2023	29
11 Drug use in the 12 months before interview among men who have sex with men—National HIV Behavioral Surveillance, 19 U.S. cities, 2023	30
12 Receipt of HIV care and treatment among men who have sex with men who self-reported being HIV-positive—National HIV Behavioral Surveillance, 19 U.S. cities, 2023	31
Appendix: Measurement Notes	32
Participating Metropolitan Statistical Areas, 2023	36

Commentary



Lowering the annual number of new HIV infections is a major HIV prevention goal [1], and to reach that goal, the Ending the HIV Epidemic in the U.S. initiative (EHE) focuses on scaling up science-based strategies across 4 pillars [2, 3]:

- (1) **Diagnose** all people with HIV as early as possible;
- (2) **Treat** people with HIV rapidly and effectively to reach sustained viral suppression;
- (3) **Prevent** new HIV transmissions by using proven interventions, including preexposure prophylaxis (PrEP) and syringe services programs (SSPs);
- (4) **Respond** quickly to potential HIV outbreaks to get vital prevention and treatment services to people who need them.

It is critical to prioritize HIV prevention efforts to reduce HIV-related health disparities and inequities among populations disproportionately affected by HIV, including gay, bisexual, and other men who have sex with men (hereafter referred to as MSM); Black or African American (hereafter referred to as Black) women; transgender women; youth aged 13–24 years; and persons who inject drugs (PWID) [1]. State and local health departments, as well as federal agencies, are expected to monitor progress toward HIV prevention goals [1].

National HIV Behavioral Surveillance (NHBS) provides data for monitoring behaviors among populations disproportionately affected by HIV and identifies the populations for whom scientifically proven, cost-effective, and scalable interventions are most appropriate. Monitoring key indicators among members of populations disproportionately affected by HIV is vital to achieving the HIV prevention goals [1] and informing the Centers for Disease Control and Prevention (CDC)'s high-impact prevention approach [4]. NHBS has previously proven effective at monitoring key indicators, such as behavioral risk factors, HIV testing, linkage to care, and HIV-related health disparities; access to and use of prevention interventions, including PrEP and SSPs; and prevalence of HIV in areas with high HIV prevalence among 3 populations disproportionately affected by HIV: MSM, PWID, and heterosexually active persons at increased risk for HIV infection [5–7].

Male-to-male sexual contact continues to be the most common route of HIV transmission in the United States among adults and adolescents, accounting for approximately 70% of the HIV infections diagnosed in 2022, including those attributed to male-to-male sexual contact *and* injection drug use [8]. Data from previous MSM cycles of NHBS have been published elsewhere [9–14]. This report summarizes findings from the 2023 NHBS data collection among MSM.

The report provides descriptive, unweighted data that can be used to describe HIV infection among MSM and the percentages reporting specific behavioral risk factors, HIV testing, and participation in prevention programs. Monitoring these outcomes is useful for assessing behavioral risk factors and the use of prevention efforts over time and for identifying new HIV prevention opportunities for this population.

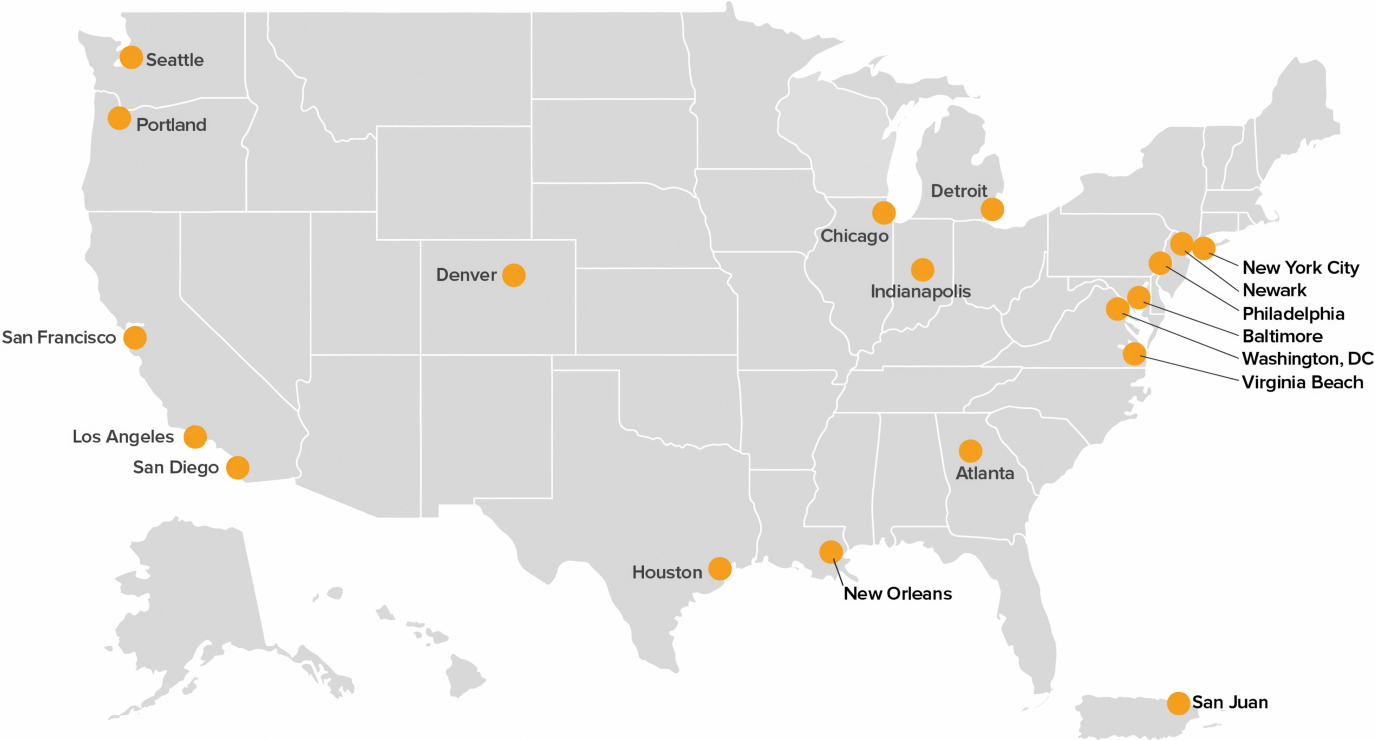
REPORT CHANGES

CDC routinely assesses NHBS reports to ensure the content and methods meet the information needs of the nation. The following reporting changes were made:

- This report includes 19 metropolitan statistical areas (MSAs) (Figure 1).
- The eligibility criteria for NHBS participants in this cycle were modified. Previously, potential participants were eligible if they were male at birth and reported their gender as man. In 2023, potential participants were eligible if they either identified as a man, or were assigned male at birth and identified as nonbinary.
- Those who reported male sex at birth and reported man as their gender were considered cisgender men. Those who reported female sex at birth and reported man as their gender were considered transgender men. Those who reported male sex at birth and reported nonbinary as their gender were considered nonbinary.
- Table 7 was modified to exclude “Partner type (main and casual).”
- Table 8 was added to present sexual behaviors with men in the 12 months before interview among transgender men and nonbinary persons assigned male at birth.
- Table 9b was added to include MSA-specific receipt of HIV prevention activities in the 12 months before interview by HIV status (HIV-negative and HIV-positive).
- Table 11 was modified to exclude “Binge drinking (past 30 days)” and to include “Marijuana” as its own category and not as part of “Any noninjected drugs.”
- The “number of male sex partners” was excluded from this report.

Some modifications to “measure definitions” are made routinely to describe the outcome or characteristic of interest more accurately; measure definitions are described in the appendix of this report.

Figure 1. National HIV Behavioral Surveillance project areas—United States, 2023

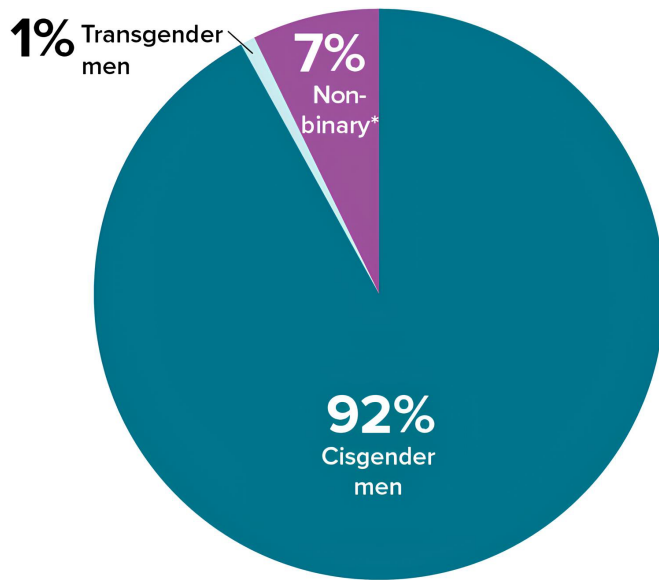


HIGHLIGHTS

Demographic Characteristics, Social Determinants of Health, and HIV Prevalence

This report describes data from 6,552 MSM who participated in NHBS in 2023, of whom 92% were cisgender men, 1% transgender men, and 7% nonbinary persons (Figure 2); 30% were aged 29 years or younger and 38% were aged 30–39 years (Figure 3); 30% were Black, 29% Hispanic or Latino, and 32% were White (Figure 4); 32% reported having a disability (Table 1).

Figure 2. Gender distribution of men who have sex with men—National HIV Behavioral Surveillance, 19 U.S. cities, 2023



* Limited to participants who reported assigned male at birth and identified as nonbinary.

Figure 3. Age distribution of men who have sex with men—National HIV Behavioral Surveillance, 19 U.S. cities, 2023

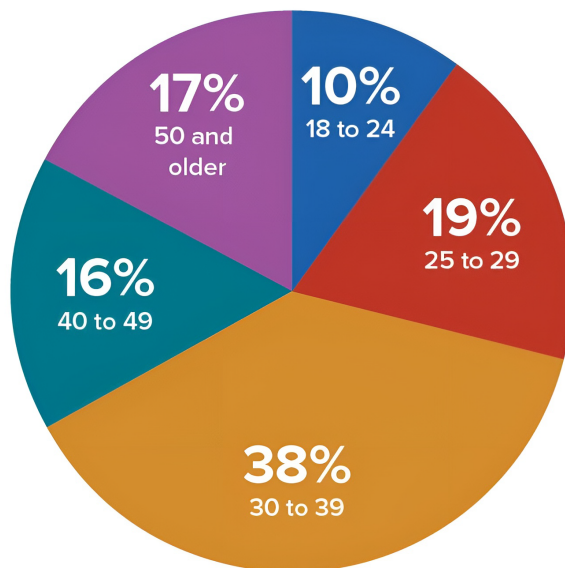
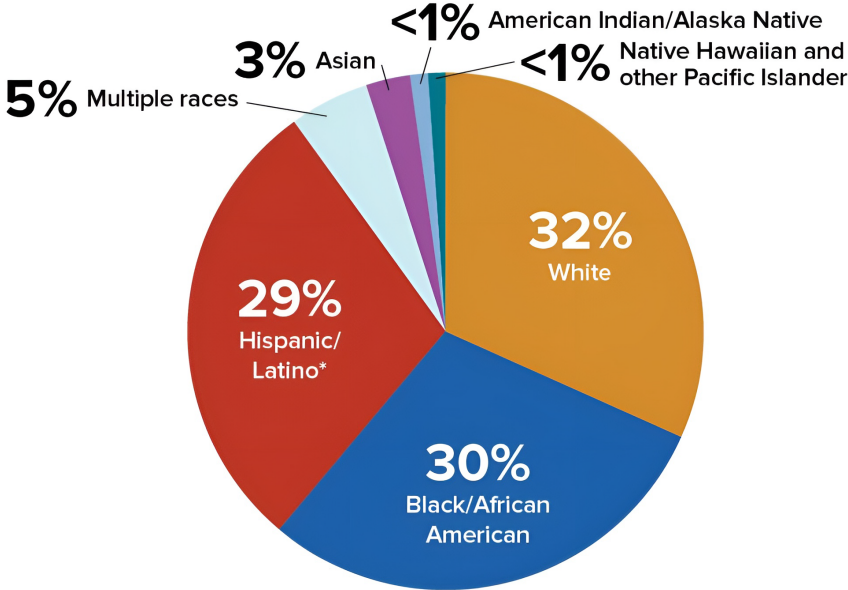


Figure 4. Race/ethnicity distribution of men who have sex with men—National HIV Behavioral Surveillance, 19 U.S. cities, 2023



* Hispanic/Latino persons can be of any race.

Social determinants of health (SDOH) refer to the conditions in which people are born, grow, work, live, and age that influence health outcomes [15]. Addressing SDOH and structural inequities is integral to the 2022–2025 National HIV/AIDS Strategy [1]. Overall, 3% of participants had less than a high school education, 19% had a household income at or below the federal poverty level, 11% reported being unemployed, 9% experienced homelessness and 5% were incarcerated in the 12 months before interview (Figure 5; Table 2); 13% had no health insurance and 10% had not visited a health care provider in the 12 months before interview (Figure 6).

Figure 5. Social determinants of health among men who have sex with men—National HIV Behavioral Surveillance, 19 U.S. cities, 2023

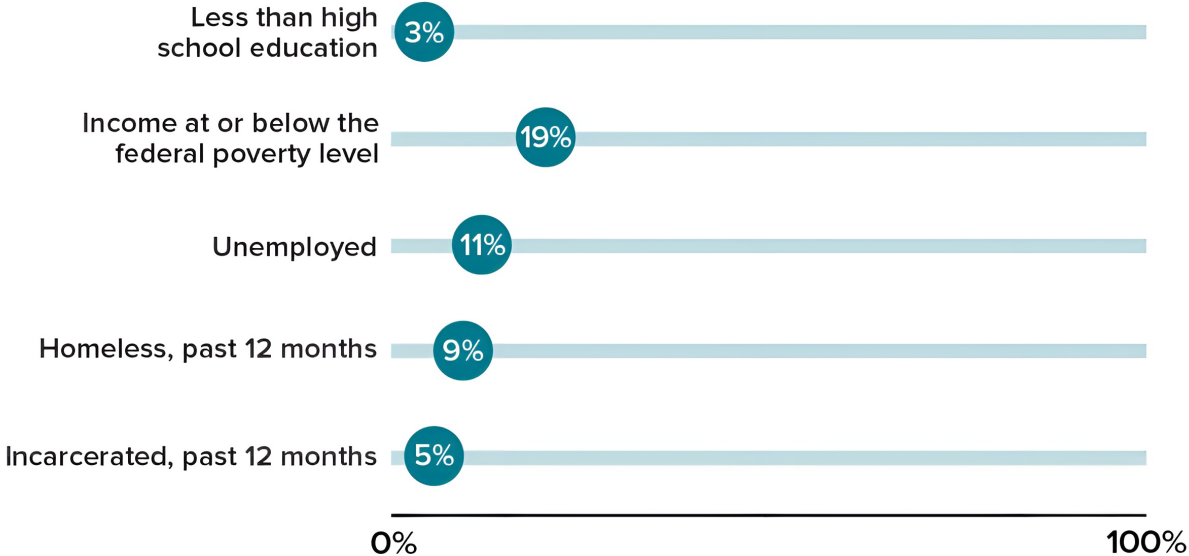
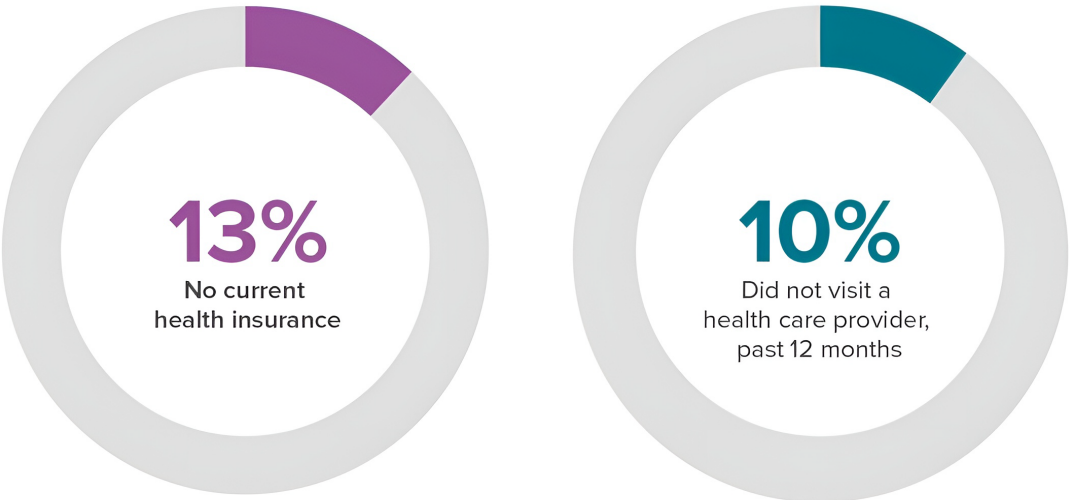
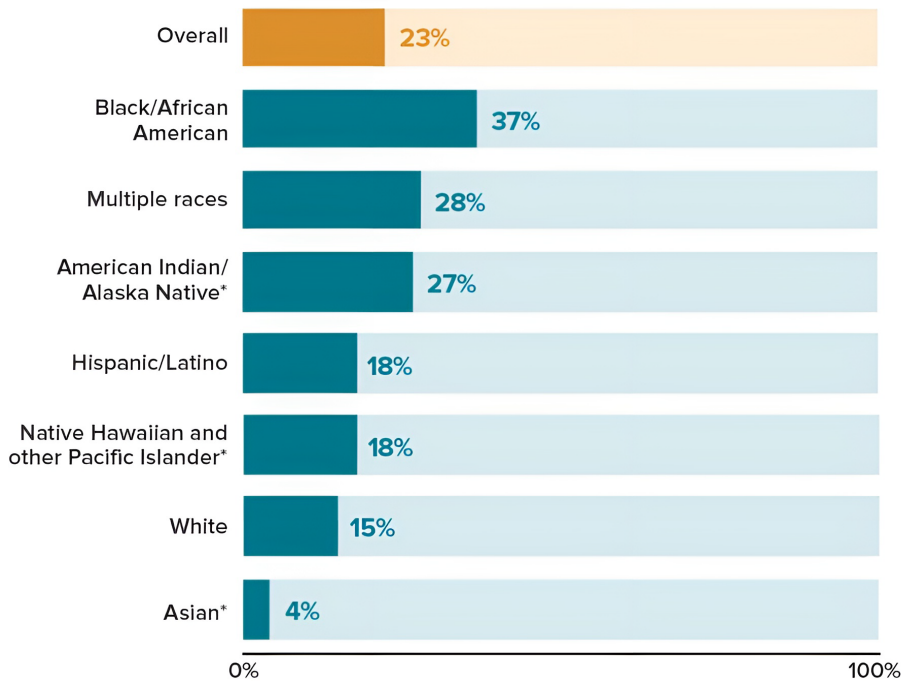


Figure 6. Health care insurance and use among men who have sex with men—National HIV Behavioral Surveillance, 19 U.S. cities, 2023



In 2023, 23% of participants with a valid NHBS HIV test result tested positive for HIV (Table 3). HIV prevalence increased with increasing age: 12% (18–24 years), 16% (25–29 years), 22% (30–39 years), 27% (40–49 years), and 34% (≥ 50 years). By gender, HIV prevalence was as follows: 23% among cisgender men, 3% among transgender men, and 20% among nonbinary participants; however, HIV prevalence among transgender men should be interpreted with caution due to small sample size. By race and ethnicity, HIV prevalence was as follows: 37% among Black participants, 18% among Hispanic or Latino participants, 28% among multiracial participants, and 15% among White participants (Figure 7).

Figure 7. Prevalence of HIV overall and by race/ethnicity among men who have sex with men—National HIV Behavioral Surveillance, 19 U.S. cities, 2023



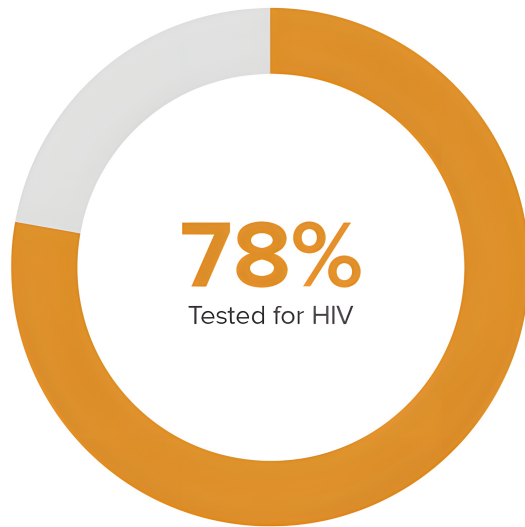
Note. Hispanic/Latino persons can be of any race.

* Reported numbers less than 12, and percentages based on these numbers, should be interpreted with caution because the numbers are considered unreliable.

HIV Testing

CDC recommends that persons at increased risk for HIV infection, including sexually active MSM, receive HIV testing at least annually [16]. Of participants who did not report a previous HIV-positive test result or who had received their first HIV-positive test result less than 12 months before interview, 78% reported that they had been tested for HIV in the 12 months before interview (Figure 8), and 96% reported that they had ever been tested (Table 4).

Figure 8. HIV testing in the 12 months before interview among men who have sex with men—National HIV Behavioral Surveillance, 19 U.S. cities, 2023



Among participants who reported having received an HIV test in the 12 months before interview, 67% reported their most recent test was performed in a clinical setting while 28% reported being tested in a non-clinical setting, such as an HIV counseling and testing site, an HIV street outreach program or mobile unit, an SSP, or at home (Table 5).

Sexual Behaviors

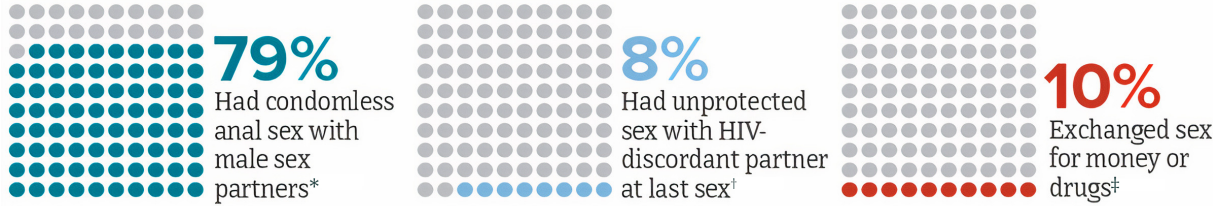
Overall, 8% of cisgender MSM reported unprotected sex with an HIV-discordant partner at last sex (Figure 9). “Unprotected sex” refers to sex without the participant’s use of either condoms or HIV medications (i.e., HIV PrEP or antiretrovirals). “HIV-discordant partner” refers to a sex partner of different or unknown HIV status. The percentage of cisgender MSM reporting unprotected sex with an HIV-discordant partner at last sex was lower among participants who tested HIV-positive (4%) as compared with participants who tested HIV-negative (9%) (Table 6).

Condomless anal sex with male partners in the 12 months before interview was common among cisgender MSM (79%) (Figure 9; Table 7) and was reported similarly by participants who tested HIV-negative and HIV-positive. Exchange sex with a male partner in the 12 months before interview was reported by 10% of cisgender men (Figure 9). Among cisgender MSM, 9% reported condomless vaginal sex and 4% reported condomless anal sex with female sex partners.

Among transgender MSM, 26% reported condomless receptive anal sex with a man and 61% reported condomless receptive vaginal/frontal sex with a man in the 12 months before interview. Among nonbinary persons, 66% reported condomless receptive anal sex with a man in the 12 months before interview (Table 8).

The high percentages of MSM who engaged in condomless sex underscore the importance of using effective, evidence-based, scalable combination HIV prevention strategies that include access to and use of condoms, PrEP, risk-reduction counseling, and HIV testing [3, 17].

Figure 9. Sexual behaviors among cisgender men who have sex with men—National HIV Behavioral Surveillance, 19 U.S. cities, 2023

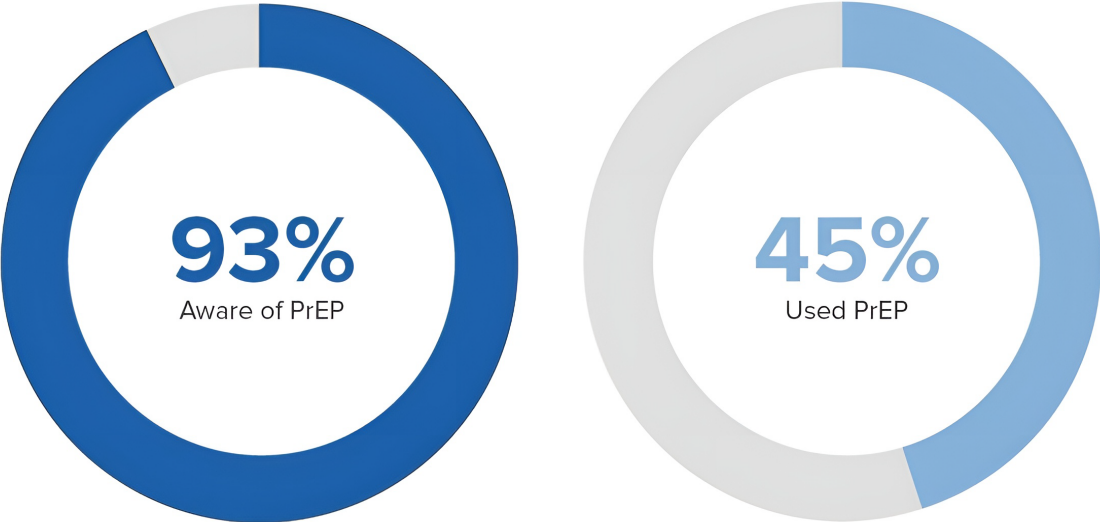


* In the 12 months before interview.
 † Unprotected sex refers to sex without the participant’s use of either condoms or HIV medications (i.e., HIV preexposure prophylaxis or antiretrovirals). HIV-discordant partner refers to a sex partner of different or unknown HIV status.
 ‡ From a male casual partner in the 12 months before interview.

HIV Prevention Activities

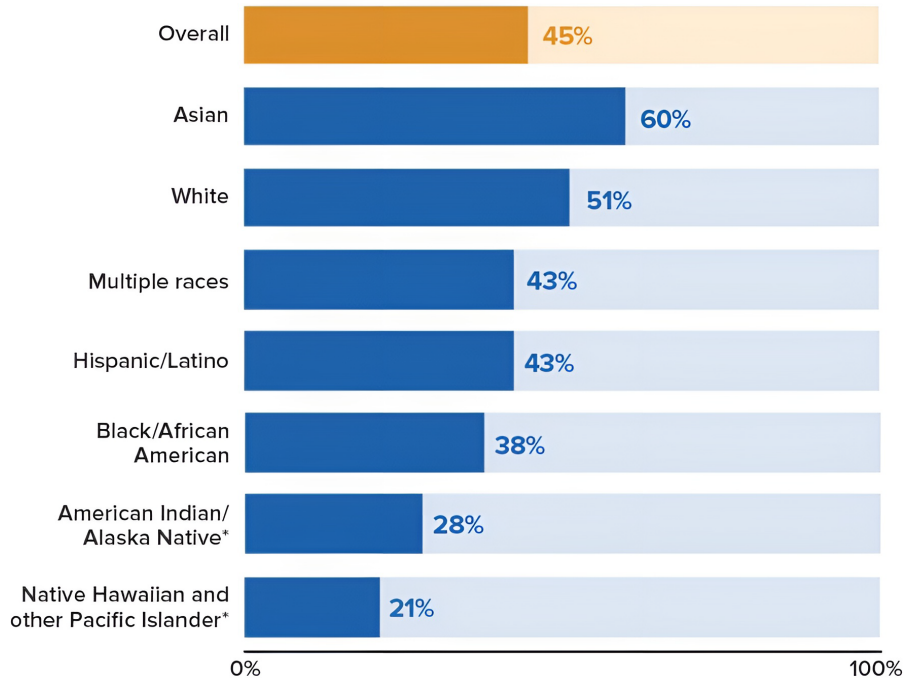
In 2021, CDC released updated clinical guidance recommending the use of PrEP for persons at increased risk of HIV acquisition, including MSM [17]. In 2023, the majority of MSM (93%) who tested HIV-negative were aware of PrEP, and 45% reported PrEP use in the 12 months before interview (Figure 10); 51% of White MSM reported taking PrEP, compared with 43% of Hispanic or Latino MSM and 38% of Black MSM (Figure 11; Table 9a). By city, PrEP use in the past 12 months among MSM who tested HIV-negative ranged from 27% to 70% (Figure 12; Table 9b).

Figure 10. Preexposure prophylaxis (PrEP) awareness and use in the 12 months before interview among men who have sex with men who tested HIV-negative—National HIV Behavioral Surveillance, 19 U.S. cities, 2023



Note. The PrEP use data in NHBS are separate from CDC’s official PrEP indicator. They are self-reported data from a sample in specific settings and should not be compared to CDC’s official PrEP indicator.

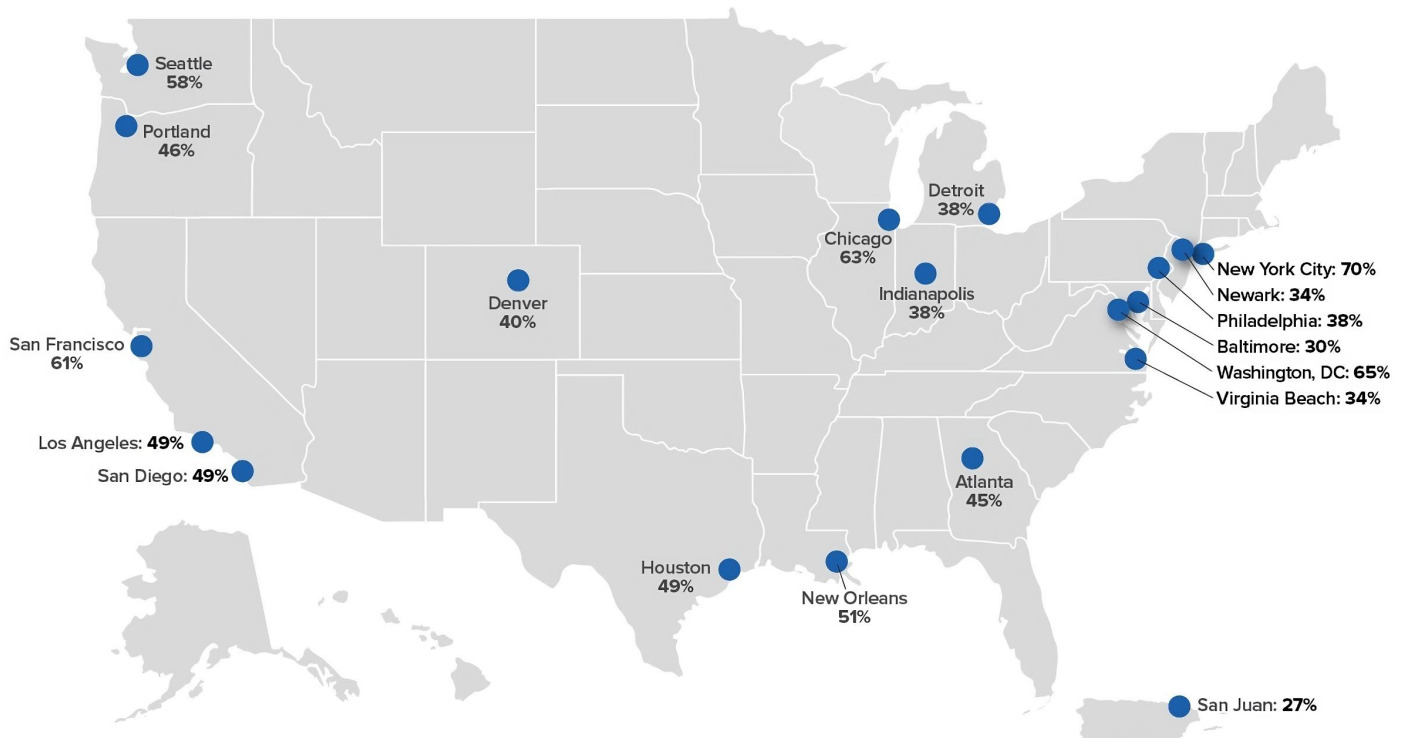
Figure 11. Preexposure prophylaxis (PrEP) use in the 12 months before interview overall and by race/ethnicity among men who have sex with men who tested HIV-negative—National HIV Behavioral Surveillance, 19 U.S. cities, 2023



Note. The PrEP use data in NHBS are separate from CDC’s official PrEP indicator. They are self-reported data from a sample in specific settings and should not be compared to CDC’s official PrEP indicator. Hispanic/Latino persons can be of any race.

* Reported numbers less than 12, and percentages based on these numbers, should be interpreted with caution because the numbers are considered unreliable.

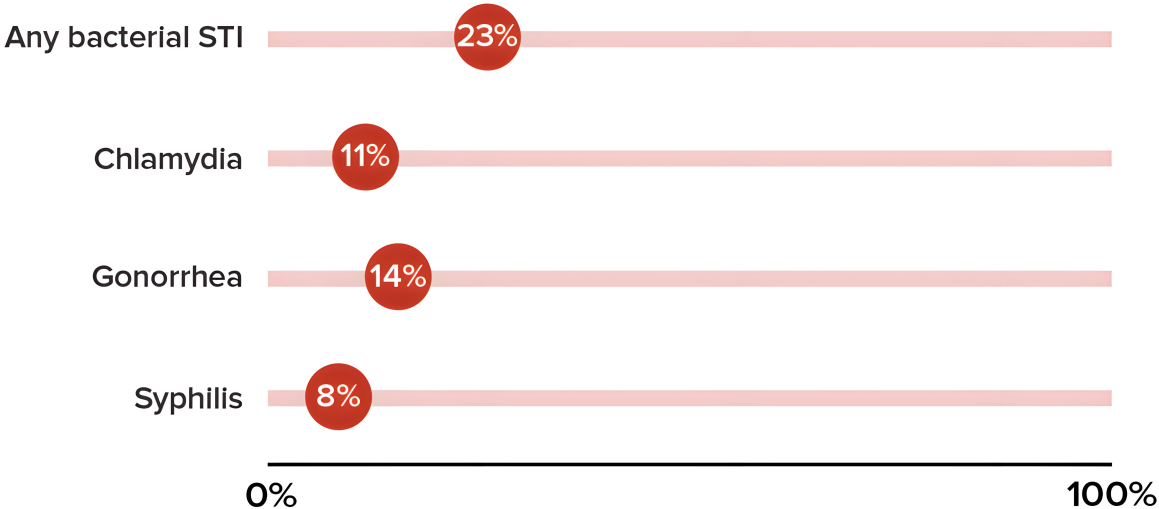
Figure 12. Preexposure prophylaxis (PrEP) use in the 12 months before interview by city among men who have sex with men who tested HIV-negative—National HIV Behavioral Surveillance, 19 U.S. cities, 2023



Sexually Transmitted Infections

Sexually transmitted infections (STIs) can increase the likelihood of acquiring and transmitting HIV [18]. The percentage of MSM who reported a diagnosis of any bacterial STI (e.g., chlamydia, gonorrhea, or syphilis) in the 12 months before interview was 23% overall (Figure 13) and was higher among MSM who tested HIV-positive (28%) than among MSM who tested HIV-negative (22%). Percentages of lifetime diagnosis of genital warts (9%) and genital herpes (10%) among MSM who tested HIV-positive were also higher than among MSM who tested HIV-negative (5% for genital warts and 6% for genital herpes) (Table 10).

Figure 13. Diagnosis of sexually transmitted infections (STIs) in the 12 months before interview among men who have sex with men—National HIV Behavioral Surveillance, 19 U.S. cities, 2023



Drug Use

Among MSM, drug use, particularly injection drug use and methamphetamine use, have been associated with behaviors that increase the chances of HIV transmission during sex [19]. More MSM who tested HIV-positive reported injection drug use (6%), compared to MSM who tested HIV-negative (2%) (Figure 14; Table 11). Both MSM who were HIV-positive and HIV-negative reported marijuana as the most common noninjection drug (66% and 67%, respectively). The most common noninjection drugs, excluding marijuana, reported by MSM who tested HIV-positive were cocaine (18%), methamphetamine (12%), and ecstasy (11%); for MSM who tested HIV-negative, commonly reported noninjection drugs, excluding marijuana, were cocaine (22%) and ecstasy (15%) (Table 11).

Figure 14. Injection drug use stratified by HIV status among men who have sex with men—National HIV Behavioral Surveillance, 19 U.S. cities, 2023



Receipt of HIV Care and Treatment

Current CDC treatment guidelines recommend antiretroviral treatment (ART) for all people with HIV [20, 21], which is essential for achieving an undetectable viral load (“viral suppression”). Achieving viral suppression helps people with HIV stay healthy, live longer, and have better quality of life, and prevents transmitting HIV to others [20–22]. The national goal is to link 95% of people with new HIV diagnoses to care within one month of diagnosis by 2025 [1]. Among MSM who self-reported being HIV-positive, 98% reported having ever visited a health care provider about HIV, 75% reported that they did so within one month after diagnosis, and 88% reported visiting a health care provider about HIV in the six months before interview (Figure 15; Table 12). Current use of ART was reported by 96% of MSM who self-reported being HIV-positive: 95% of Black MSM, 97% of Hispanic or Latino MSM, and 98% of White MSM.

Figure 15. Receipt of HIV care and treatment among men who have sex with men and who self-reported being HIV-positive—National HIV Behavioral Surveillance, 19 U.S. cities, 2023



Technical Notes



NHBS conducts rotating cycles of biobehavioral surveys among MSM, PWID, and heterosexually active persons at increased risk of HIV infection [5]; data are collected in annual cycles from one population per year so that each population is surveyed once every 3 years. The same general eligibility criteria are used in each cycle: age 18 years or older, current residence in a participating city, no previous participation in NHBS in the current survey cycle, ability to complete the survey in either English or Spanish, and ability to provide informed consent. In addition to these basic NHBS eligibility criteria, participation in the 2023 NHBS cycle was limited to persons who (1) either identified as a man, or were assigned male at birth and identified as nonbinary; and (2) had ever had oral or anal sex with another man. Only participants who reported having oral or anal sex with another man in the past 12 months were included in this analysis of current MSM.

A standardized questionnaire is used to collect information about behavioral risks for HIV infection, HIV testing, and use of HIV prevention services. The anonymous survey is administered by a trained interviewer using a portable computer or tablet. All participants are offered an anonymous HIV test, which is linked to the survey data through a unique survey identifier.

Activities for NHBS were approved by CDC [23, 24] and by applicable institutional review boards in each participating city.

PARTICIPATING CITIES

State and local health departments selected to participate in NHBS are among those whose jurisdictions include an MSA or a specified division with the highest number of HIV infections diagnosed during the 3-year period 2017–2019 and reported to CDC. In 2023, NHBS was conducted in 19 MSAs (see list at the end of the report), which represented approximately 43% of all diagnoses reported to CDC in large MSAs (population $\geq 500,000$) in the United States from 2017 to 2019 [25–27].

Throughout this report, MSAs and divisions are referred to by the name of the principal city.

SAMPLING METHOD

Participants in the 2023 NHBS cycle were recruited using venue-based, time-space sampling [28]. The primary steps were identifying venues frequented by MSM, determining the best day and time for sampling at each venue and the number of sampling events to be conducted each month, and recruiting men at the sampling event. Venues included in-person spaces, such as bars, clubs, retail businesses, social organizations,

parks, and other places where MSM gather, and virtual spaces where MSM gather, such as dating apps or social media websites [29].

DATA COLLECTION

After recruitment, persons may have continued with the eligibility screener or scheduled a post-event appointment. Interviews were conducted in private areas either at the venue or post-event appointment location. If the person met eligibility requirements, the interviewer obtained informed consent and conducted the interview face-to-face. The interview took approximately 24 minutes and consisted of questions concerning participants' demographic characteristics, HIV testing history, sexual and substance use behaviors, STI testing and diagnosis, and use of HIV prevention services and programs. In exchange for the time spent taking part in the interview, participants received \$25–\$75 (amount determined locally).

For participants who consented to HIV testing, blood specimens were collected for rapid testing in the field with rapid or laboratory-based supplemental testing. Participants with a nonreactive rapid test result who did not self-report a previous HIV-positive test result were considered HIV-negative; participants who had a reactive rapid test result were considered HIV-positive if supported by a second rapid test, supplemental laboratory-based testing, or self-report of a previous HIV-positive test result. Participants received \$20–\$75 for HIV testing (amount determined locally).

Each participating city's goal was to interview 500 eligible participants who reported sex with another man in the 12 months before the interview.

DATA ANALYSIS

This surveillance report presents descriptive data; no statistical tests were performed. In addition, these data are cross-sectional; we did not attempt to infer causal relationships. Reported numbers less than 12, and percentages based on these numbers, should be interpreted with caution because the numbers are considered unreliable.

Data for this report are not weighted. The purpose of this report is to provide a detailed summary of surveillance data collected as part of the NHBS 2023 cycle; unweighted data provide an efficient and transparent way to do so. Further, unweighted analysis allows for detailed reporting of outcomes among small subgroups of the population of interest.

In 2023, 19 MSAs participated in NHBS among MSM. In total, 37,570 persons were approached at 480 venues; 7,615 persons were screened to participate in NHBS. Of those, 443 did not meet NHBS eligibility criteria or did not provide consent and were excluded from the survey. Finally, 620 eligible persons who did not complete the interview, provided survey responses of questionable validity, or did not report having sex with a man in the 12 months before interview were excluded from this report.

The full analysis sample for this report includes 6,552 participants from the 2023 NHBS cycle. Additional inclusion criteria were applied for certain analyses of HIV infection and of HIV-associated behaviors; details of each analysis sample can be found in the footnotes of each table.

References

1. The White House. *National HIV/AIDS Strategy (2022–2025)*. <https://www.hiv.gov/federal-response/national-hiv-aids-strategy/national-hiv-aids-strategy-2022-2025>. Updated December 2023. Accessed July 25, 2024.
2. Fauci AS, Redfield RR, Sigounas G, Weahkee MD, Giroir BP. Ending the HIV epidemic: a plan for the United States [editorial]. *JAMA* 2019;321(9):844–845. doi:10.1001/jama.2019.1343
3. CDC Ending the HIV Epidemic in the US (EHE). <https://www.cdc.gov/endhiv/index.html>. Updated May 2024. Accessed July 25, 2024.
4. CDC. High-Impact HIV Prevention: CDC’s approach to reducing HIV infections in the United States. <https://www.cdc.gov/hiv/policies/hip/hip.html>. Updated August 2017. Accessed July 25, 2024.
5. Kanny D, Broz D, Finlayson T, Lee K, Sionean C, Wejnert C; NHBS Study Group. A key comprehensive system for biobehavioral surveillance of populations disproportionately affected by HIV (National HIV Behavioral Surveillance): Cross-sectional survey study. *JMIR Public Health Surveill* 2022;8(11):e39053. doi: 10.2196/39053
6. DiNenno EA, Oster AM, Sionean C, Denning P, Lansky A. Piloting a system for behavioral surveillance among heterosexuals at increased risk of HIV in the United States. *Open AIDS J* 2012;6(suppl 1):169–176. doi:10.2174/1874613601206010169.
7. Gallagher KM, Sullivan PS, Lansky A, Onorato IM. Behavioral surveillance among people at risk for HIV infection in the U.S.: the National HIV Behavioral Surveillance System. *Public Health Rep* 2007;122(suppl 1):32–38.
8. CDC. Diagnoses, death, and prevalence of HIV in the United States and 6 territories and freely associated states, 2022. *HIV Surveillance Report, 2022*; vol. 35. <https://stacks.cdc.gov/view/cdc/156509>. Published May 2024. Accessed July 25, 2024.
9. CDC [Sanchez T, Finlayson T, Drake A, et al]. Human immunodeficiency virus (HIV) risk, prevention, and testing behaviors—United States, National HIV Behavioral Surveillance System: Men who have sex with men, November 2003–April 2005. *MMWR* 2006;55(6):1–16. Erratum in: *MMWR* 2006;55(27):752.
10. CDC [Finlayson T, Le B, Smith A, et al]. HIV risk, prevention, and testing behaviors among men who have sex with men—National HIV Behavioral Surveillance System, 21 U.S. cities, United States, 2008. *MMWR* 2011;60(SS-14):1–34.
11. CDC. HIV risk, prevention, and testing behaviors— National HIV Behavioral Surveillance System: Men who have sex with men, 20 U.S. cities, 2011. *HIV Surveillance Special Report 8*. <https://stacks.cdc.gov/view/cdc/149124>. Published September 2014. Accessed July 25, 2024.
12. CDC. HIV infection risk, prevention, and testing behaviors among men who have sex with men—National HIV Behavioral Surveillance System, 20 U.S. cities, 2014. *HIV Surveillance Special Report 15*. <https://stacks.cdc.gov/view/cdc/149103>. Published January 2016. Accessed July 25, 2024.
13. CDC. HIV infection risk, prevention, and testing behaviors among men who have sex with men—National HIV Behavioral Surveillance System, 23 U.S. cities, 2017. *HIV Surveillance Special Report 22*. <https://stacks.cdc.gov/view/cdc/149112>. Published February 2019. Accessed July 25, 2024.
14. CDC. HIV infection risk, prevention, and testing behaviors among men who have sex with men—National HIV Behavioral Surveillance System, 13 U.S. cities, 2021. *HIV Surveillance Special Report 31*. <https://stacks.cdc.gov/view/cdc/126289>. Published January 2023. Accessed June 17, 2024.

15. CDC. Social determinants of health at CDC. <https://www.cdc.gov/about/priorities/why-is-addressing-sdoh-important.html>. Accessed July 25, 2024.
16. DiNenno EA, Prejean J, Irwin K, et al. Recommendations for HIV screening of gay, bisexual, and other men who have sex with men—United States, 2017. *MMWR* 2017;66(31):830–832. doi:10.15585/mmwr.mm6631a3
17. CDC, US Public Health Service. Preexposure prophylaxis for the prevention of HIV infection—2021 update: a clinical practice guideline. <https://www.cdc.gov/hiv/pdf/risk/prep/cdc-hiv-prep-guidelines-2021.pdf>. Published March 2021. Accessed July 25, 2024.
18. Workowski KA, Bachmann LH, Chan PA, et al. Sexually transmitted diseases treatment guidelines, 2021. *MMWR* 2021;70(4):1–187. <https://www.cdc.gov/std/treatment-guidelines/STI-Guidelines-2021.pdf>. Accessed July 25, 2024.
19. Vosburgh HW, Mansergh G, Sullivan PS, Purcell DW. A review of the literature on event-level substance use and sexual risk behavior among men who have sex with men. *AIDS Behav* 2012;16(6):1394–1410. doi:doi:10.1007/s10461-011-0131-8.
20. CDC. HIV treatment. <https://www.cdc.gov/hiv/treatment/>. Published April 2024. Accessed July 25, 2024.
21. Panel on Antiretroviral Guidelines for Adults and Adolescents. Guidelines for the use of antiretroviral agents in adults and adolescents with HIV. <https://clinicalinfo.hiv.gov/en/guidelines/hiv-clinical-guidelines-adult-and-adolescent-arv/>. Updated February 27, 2024. Accessed July 25, 2024.
22. Kiplagat J, Justice A. HIV viral suppression is key to healthy longevity. *Lancet* 2022;9(10):E672–E673. doi:10.1016/S2352-3018(22)00227-2
23. CDC. “Distinguishing public health research and public health nonresearch” policy. <https://stacks.cdc.gov/view/cdc/24235>. Published July 2010. Accessed July 25, 2024.
24. Protection of Human Subjects, CFR 45, Part 46. <https://www.ecfr.gov/current/title-45/subtitle-A/subchapter-A/part-46>. Last amended July 17, 2024. Accessed July 25, 2024.
25. CDC. *HIV Surveillance Report, 2017*;vol. 29. <https://stacks.cdc.gov/view/cdc/149033>. Published November 2018. Accessed July 25, 2024.
26. CDC. *HIV Surveillance Report, 2018 (Updated)*;vol. 31. <https://stacks.cdc.gov/view/cdc/87803>. Published May 2020. Accessed July 25, 2024.
27. CDC. *HIV Surveillance Report, 2019*;vol. 32. <https://stacks.cdc.gov/view/cdc/87803>. Published May 2021. Accessed July 25, 2024.
28. MacKellar D, Gallagher K, Finlayson T, Sanchez T, Lansky A, Sullivan PS. Surveillance of HIV risk and prevention behaviors of men who have sex with men—a national application of venue-based, time-space sampling. *Public Health Rep* 2007;122(Suppl 1):39–47. doi:10.1177/00333549071220S107
29. CDC. *National HIV Behavioral Surveillance System Round 7: Model Surveillance Protocol*. October 2022. https://www.cdc.gov/hiv-data/media/pdfs/nhbs/NHBS_Model_Protocol_Round7_2023.pdf. Accessed July 25, 2024.

Table 1. Selected characteristics of men who have sex with men—National HIV Behavioral Surveillance, 19 U.S. cities, 2023

	HIV-negative ^a		HIV-positive ^b		No valid NHBS HIV test result ^c		Total	
	No.	%	No.	%	No.	%	No.	%
Gender								
Cisgender man	4,351	91.1	1,305	93.5	351	92.9	6,007	91.7
Transgender man	78	1.6	2	0.1	1	0.3	81	1.2
Nonbinary ^d	349	7.3	89	6.4	26	6.9	464	7.1
Age at interview (yr)								
18–24	561	11.7	78	5.6	35	9.3	674	10.3
25–29	987	20.7	191	13.7	80	21.2	1,258	19.2
30–39	1,837	38.4	513	36.7	133	35.2	2,483	37.9
40–49	696	14.6	260	18.6	60	15.9	1,016	15.5
≥50	697	14.6	354	25.4	70	18.5	1,121	17.1
Race/ethnicity								
American Indian/Alaska Native	25	0.5	9	0.6	0	0.0	34	0.5
Asian	187	3.9	8	0.6	18	4.8	213	3.3
Black/African American	1,125	23.5	664	47.6	152	40.2	1,941	29.6
Hispanic/Latino ^e	1,477	30.9	331	23.7	90	23.8	1,898	29.0
Native Hawaiian/other Pacific Islander	14	0.3	3	0.2	0	0.0	17	0.3
White	1,709	35.8	290	20.8	94	24.9	2,093	31.9
Multiple races	218	4.6	83	5.9	24	6.3	325	5.0
Disability								
Yes	1,504	31.5	515	36.9	95	25.1	2,114	32.3
No	3,256	68.1	873	62.5	283	74.9	4,412	67.3
City								
Atlanta, GA	191	4.0	140	10.0	17	4.5	348	5.3
Baltimore, MD	192	4.0	98	7.0	37	9.8	327	5.0
Chicago, IL	80	1.7	4	0.3	5	1.3	89	1.4
Denver, CO	365	7.6	44	3.2	24	6.3	433	6.6
Detroit, MI	195	4.1	53	3.8	22	5.8	270	4.1
Houston, TX	294	6.2	136	9.7	37	9.8	467	7.1
Indianapolis, IN	228	4.8	60	4.3	19	5.0	307	4.7
Los Angeles, CA	423	8.9	85	6.1	11	2.9	519	7.9
New Orleans, LA	307	6.4	69	4.9	21	5.6	397	6.1
New York City, NY	93	1.9	42	3.0	4	1.1	139	2.1
Newark, NJ	224	4.7	131	9.4	14	3.7	369	5.6
Philadelphia, PA	329	6.9	112	8.0	9	2.4	450	6.9
Portland, OR	61	1.3	9	0.6	8	2.1	78	1.2
San Diego, CA	279	5.8	46	3.3	30	7.9	355	5.4
San Francisco, CA	371	7.8	106	7.6	11	2.9	488	7.4
San Juan, PR	403	8.4	87	6.2	17	4.5	507	7.7
Seattle, WA	402	8.4	75	5.4	29	7.7	506	7.7
Virginia Beach, VA	191	4.0	74	5.3	28	7.4	293	4.5
Washington, DC	150	3.1	25	1.8	35	9.3	210	3.2
Total	4,778	100	1,396	100	378	100	6,552	100

Abbreviation: NHBS, National HIV Behavioral Surveillance.

Note. “Past 12 months” refers to the 12 months before interview.

^a Participants with a negative NHBS HIV test result who did not self-report a previous HIV-positive test result.

^b Participants who had a reactive rapid NHBS HIV test result that was supported by a second rapid test, supplemental laboratory-based testing, or self-report of a previous HIV-positive test result.

^c Participants who did not have a valid positive or negative NHBS HIV test result, including those who did not consent to the HIV test, had an indeterminate laboratory test result, discordant rapid test results, or reported a previous HIV-positive test result but had a negative NHBS HIV test result.

^d Limited to participants who reported assigned male at birth.

^e Hispanic/Latino persons can be of any race.

Table 2. Social determinants of health among men who have sex with men—National HIV Behavioral Surveillance, 19 U.S. cities, 2023

	Less than high school education		Income at or below federal poverty level ^a		Unemployed		Homeless ^b , past 12 months		Incarcerated ^c , past 12 months		No current health insurance		Did not visit a health care provider, past 12 months		Total No.
	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	
Gender															
Cisgender man	150	2.5	1,106	18.4	672	11.2	514	8.6	288	4.8	789	13.1	612	10.2	6,007
Transgender man	2	2.5	21	25.9	7	8.6	13	16.0	3	3.7	8	9.9	2	2.5	81
Nonbinary ^d	17	3.7	138	29.7	69	14.9	90	19.4	26	5.6	83	17.9	47	10.1	464
Age at interview (yr)															
18–24	16	2.4	235	34.9	98	14.5	93	13.8	55	8.2	101	15.0	93	13.8	674
25–29	19	1.5	255	20.3	160	12.7	129	10.3	68	5.4	221	17.6	133	10.6	1,258
30–39	50	2.0	405	16.3	272	11.0	233	9.4	116	4.7	396	15.9	284	11.4	2,483
40–49	47	4.6	187	18.4	132	13.0	104	10.2	46	4.5	110	10.8	82	8.1	1,016
≥50	37	3.3	183	16.3	86	7.7	58	5.2	32	2.9	52	4.6	69	6.2	1,121
Race/ethnicity															
American Indian/Alaska Native	1	2.9	11	32.4	4	11.8	12	35.3	3	8.8	5	14.7	3	8.8	34
Asian	1	0.5	28	13.1	21	9.9	7	3.3	2	0.9	28	13.1	26	12.2	213
Black/African American	77	4.0	547	28.2	301	15.5	298	15.4	165	8.5	248	12.8	178	9.2	1,941
Hispanic/Latino ^e	32	1.7	402	21.2	195	10.3	140	7.4	64	3.4	328	17.3	231	12.2	1,898
Native Hawaiian/other Pacific Islander	1	5.9	3	17.6	0	0.0	1	5.9	1	5.9	2	11.8	5	29.4	17
White	45	2.2	197	9.4	187	8.9	102	4.9	61	2.9	230	11.0	186	8.9	2,093
Multiple races	11	3.4	71	21.8	36	11.1	52	16.0	18	5.5	34	10.5	27	8.3	325
NHBS HIV test results															
HIV-negative ^f	113	2.4	840	17.6	485	10.2	375	7.8	196	4.1	689	14.4	574	12.0	4,778
HIV-positive ^g	48	3.4	363	26.0	232	16.6	216	15.5	99	7.1	153	11.0	59	4.2	1,396
Not valid ^h	8	2.1	62	16.4	31	8.2	26	6.9	22	5.8	38	10.1	28	7.4	378
City															
Atlanta, GA	9	2.6	49	14.1	28	8.0	43	12.4	34	9.8	79	22.7	35	10.1	348
Baltimore, MD	35	10.7	121	37.0	61	18.7	59	18.0	19	5.8	26	8.0	32	9.8	327
Chicago, IL	1	1.1	5	5.6	3	3.4	2	2.2	1	1.1	12	13.5	5	5.6	89
Denver, CO	6	1.4	24	5.5	24	5.5	8	1.8	8	1.8	63	14.5	57	13.2	433
Detroit, MI	11	4.1	68	25.2	24	8.9	20	7.4	14	5.2	23	8.5	25	9.3	270
Houston, TX	3	0.6	67	14.3	33	7.1	38	8.1	29	6.2	124	26.6	55	11.8	467
Indianapolis, IN	14	4.6	49	16.0	26	8.5	35	11.4	23	7.5	32	10.4	28	9.1	307
Los Angeles, CA	3	0.6	85	16.4	57	11.0	27	5.2	9	1.7	82	15.8	72	13.9	519
New Orleans, LA	3	0.8	50	12.6	23	5.8	24	6.0	20	5.0	52	13.1	31	7.8	397
New York City, NY	7	5.0	50	36.0	39	28.1	25	18.0	6	4.3	21	15.1	14	10.1	139
Newark, NJ	10	2.7	135	36.6	91	24.7	73	19.8	33	8.9	63	17.1	35	9.5	369
Philadelphia, PA	24	5.3	172	38.2	92	20.4	112	24.9	52	11.6	68	15.1	42	9.3	450
Portland, OR	1	1.3	9	11.5	6	7.7	5	6.4	1	1.3	6	7.7	4	5.1	78
San Diego, CA	6	1.7	52	14.6	38	10.7	18	5.1	8	2.3	38	10.7	42	11.8	355
San Francisco, CA	4	0.8	48	9.8	66	13.5	35	7.2	14	2.9	39	8.0	51	10.5	488
San Juan, PR	6	1.2	142	28.0	35	6.9	16	3.2	6	1.2	55	10.8	57	11.2	507
Seattle, WA	14	2.8	79	15.6	61	12.1	49	9.7	24	4.7	53	10.5	37	7.3	506
Virginia Beach, VA	10	3.4	39	13.3	28	9.6	21	7.2	11	3.8	32	10.9	30	10.2	293
Washington, DC	2	1.0	21	10.0	13	6.2	7	3.3	5	2.4	12	5.7	9	4.3	210
Total	169	2.6	1,265	19.3	748	11.4	617	9.4	317	4.8	880	13.4	661	10.1	6,552

Abbreviation: NHBS, National HIV Behavioral Surveillance.

Note. "Past 12 months" refers to the 12 months before interview.

^a Poverty level is based on household income and household size.

^b Living on the street, in a shelter, in a single-room–occupancy hotel, or in a car.

^c Having been held in a detention center, jail, or prison for more than 24 hours.

^d Limited to participants who reported assigned male at birth.

^e Hispanic/Latino persons can be of any race.

^f Participants with a negative NHBS HIV test result who did not self-report a previous HIV-positive test result.

^g Participants who had a reactive rapid NHBS HIV test result that was supported by a second rapid test, supplemental laboratory-based testing, or self-report of a previous HIV-positive test result.

^h Participants who did not have a valid positive or negative NHBS HIV test result, including those who did not consent to the HIV test, had an indeterminate laboratory test result, discordant rapid test results, or reported a previous HIV-positive test result but had a negative NHBS HIV test result.

Table 3. HIV prevalence among men who have sex with men, by gender—National HIV Behavioral Surveillance, 19 U.S. cities, 2023

	Cisgender man			Transgender man ^a			Nonbinary ^b			Full sample		
	HIV-positive ^c		Total No.	HIV-positive ^c		Total No.	HIV-positive ^c		Total No.	HIV-positive ^c		Total No.
	No.	%		No.	%		No.	%		No.	%	
Age at interview (yr)												
18–24	68	12.5	543	0	0.0	17	10	12.7	79	78	12.2	639
25–29	170	16.7	1,017	2	8.7	23	19	13.8	138	191	16.2	1,178
30–39	471	21.8	2,161	0	0.0	31	42	26.6	158	513	21.8	2,350
40–49	249	27.3	911	0	0.0	6	11	28.2	39	260	27.2	956
≥50	347	33.9	1,024	0	0.0	3	7	29.2	24	354	33.7	1,051
Race/ethnicity												
American Indian/Alaska Native	9	28.1	32	0	—	0	0	0.0	2	9	26.5	34
Asian	6	3.4	175	0	0.0	2	2	11.1	18	8	4.1	195
Black/African American	620	37.9	1,638	0	0.0	25	44	34.9	126	664	37.1	1,789
Hispanic/Latino ^d	309	18.4	1,677	2	14.3	14	20	17.1	117	331	18.3	1,808
Native Hawaiian/other Pacific Islander	2	12.5	16	0	—	0	1	100	1	3	17.6	17
White	275	15.0	1,837	0	0.0	31	15	11.5	131	290	14.5	1,999
Multiple races	76	29.8	255	0	0.0	8	7	18.4	38	83	27.6	301
City												
Atlanta, GA	134	42.3	317	—	—	—	6	46.2	13	140	42.3	331
Baltimore, MD	96	34.8	276	—	—	—	2	16.7	12	98	33.8	290
Chicago, IL	4	5.1	79	—	—	—	0	0.0	5	4	4.8	84
Denver, CO	40	10.4	384	—	—	—	4	16.7	24	44	10.8	409
Detroit, MI	53	23.7	224	—	—	—	0	0.0	21	53	21.4	248
Houston, TX	127	32.6	389	—	—	—	9	28.1	32	136	31.6	430
Indianapolis, IN	58	22.1	263	—	—	—	2	10.5	19	60	20.8	288
Los Angeles, CA	78	16.6	471	—	—	—	7	21.2	33	85	16.7	508
New Orleans, LA	64	18.6	344	—	—	—	5	16.7	30	69	18.4	376
New York City, NY	38	29.2	130	—	—	—	4	80.0	5	42	31.1	135
Newark, NJ	125	37.7	332	—	—	—	6	28.6	21	131	36.9	355
Philadelphia, PA	99	26.6	372	—	—	—	12	23.5	51	112	25.4	441
Portland, OR	8	12.7	63	—	—	—	1	14.3	7	9	12.9	70
San Diego, CA	42	14.0	299	—	—	—	4	16.7	24	46	14.2	325
San Francisco, CA	103	23.1	445	—	—	—	3	12.0	25	106	22.2	477
San Juan, PR	85	17.9	475	—	—	—	2	14.3	14	87	17.8	490
Seattle, WA	65	16.1	404	—	—	—	10	16.4	61	75	15.7	477
Virginia Beach, VA	63	27.9	226	—	—	—	10	34.5	29	74	27.9	265
Washington, DC	23	14.1	163	—	—	—	2	16.7	12	25	14.3	175
Total	1,305	23.1	5,656	2	2.5	80	89	20.3	438	1,396	22.6	6,174

Abbreviation: NHBS, National HIV Behavioral Surveillance [footnotes only].

Note. Data include all participants with a valid NHBS HIV test result.

^a Data for transgender men by city are suppressed due to small cell size.

^b Limited to participants who reported assigned male at birth.

^c Participants who had a reactive rapid NHBS HIV test result that was supported by a second rapid test, supplemental laboratory-based testing, or self-report of a previous HIV-positive test result.

^d Hispanic/Latino persons can be of any race.

Table 4. HIV testing among men who have sex with men—National HIV Behavioral Surveillance, 19 U.S. cities, 2023

	Ever tested		Tested in past 12 months ^a		Total No.
	No.	%	No.	%	
Gender					
Cisgender man	4,625	96.0	3,758	78.0	4,820
Transgender man	70	87.5	61	76.3	80
Nonbinary ^b	366	94.6	327	84.5	387
Age at interview (yr)					
18–24	529	84.8	463	74.2	624
25–29	1,064	96.0	944	85.2	1,108
30–39	1,984	97.8	1,656	81.6	2,029
40–49	752	98.2	595	77.7	766
≥50	732	96.3	488	64.2	760
Race/ethnicity					
American Indian/Alaska Native	25	96.2	19	73.1	26
Asian	200	96.2	164	78.8	208
Black/African American	1,302	95.9	1,076	79.2	1,358
Hispanic/Latino ^c	1,536	95.6	1,283	79.8	1,607
Native Hawaiian/other Pacific Islander	13	92.9	9	64.3	14
White	1,730	95.8	1,381	76.5	1,805
Multiple races	232	94.3	194	78.9	246
City					
Atlanta, GA	229	98.3	184	79.0	233
Baltimore, MD	228	95.4	163	68.2	239
Chicago, IL	81	96.4	68	81.0	84
Denver, CO	369	94.9	278	71.5	389
Detroit, MI	212	93.8	168	74.3	226
Houston, TX	344	96.9	292	82.3	355
Indianapolis, IN	236	94.8	186	74.7	249
Los Angeles, CA	432	97.5	377	85.1	443
New Orleans, LA	318	96.1	262	79.2	331
New York City, NY	103	94.5	95	87.2	109
Newark, NJ	243	96.8	201	80.1	251
Philadelphia, PA	338	94.9	295	82.9	356
Portland, OR	64	95.5	49	73.1	67
San Diego, CA	287	93.8	229	74.8	306
San Francisco, CA	377	98.7	315	82.5	382
San Juan, PR	413	94.5	322	73.7	437
Seattle, WA	403	94.6	350	82.2	426
Virginia Beach, VA	213	93.8	167	73.6	227
Washington, DC	171	96.6	145	81.9	177
Total	5,061	95.7	4,146	78.4	5,287

Abbreviation: CDC, the Centers for Disease Control and Prevention [footnotes only].

Note. CDC recommends that all sexually active men who have sex with men (MSM) should be screened for HIV at least annually.

Data include all participants who did not report a previous HIV-positive test result and participants who received their first HIV-positive test result less than 12 months before interview.

^a "Past 12 months" refers to the 12 months before interview.

^b Limited to participants who reported assigned male at birth.

^c Hispanic/Latino persons can be of any race.

Table 5. Setting of most recent HIV test among men who have sex with men and who were tested for HIV in the 12 months before interview—National HIV Behavioral Surveillance, 19 U.S. cities, 2023

	Clinical setting ^a		Nonclinical setting ^b		Total No.
	No.	(%)	No.	(%)	
Gender					
Cisgender man	2,516	67.0	1,026	27.3	3,758
Transgender man	41	67.2	18	29.5	61
Nonbinary ^c	214	65.4	98	30.0	327
Age at interview (yr)					
18–24	284	61.3	142	30.7	463
25–29	618	65.5	267	28.3	944
30–39	1,125	67.9	451	27.2	1,656
40–49	398	66.9	169	28.4	595
≥50	346	70.9	113	23.2	488
Race/ethnicity					
American Indian/Alaska Native	13	68.4	6	31.6	19
Asian	127	77.4	33	20.1	164
Black/African American	694	64.5	315	29.3	1,076
Hispanic/Latino ^d	746	58.1	440	34.3	1,283
Native Hawaiian/other Pacific Islander	5	55.6	3	33.3	9
White	1,038	75.2	294	21.3	1,381
Multiple races	135	69.6	46	23.7	194
City					
Atlanta, GA	123	66.8	48	26.1	184
Baltimore, MD	125	76.7	32	19.6	163
Chicago, IL	59	86.8	9	13.2	68
Denver, CO	232	83.5	31	11.2	278
Detroit, MI	118	70.2	41	24.4	168
Houston, TX	213	72.9	69	23.6	292
Indianapolis, IN	108	58.1	72	38.7	186
Los Angeles, CA	192	50.9	171	45.4	377
New Orleans, LA	207	79.0	47	17.9	262
New York City, NY	59	62.1	31	32.6	95
Newark, NJ	90	44.8	99	49.3	201
Philadelphia, PA	173	58.6	101	34.2	295
Portland, OR	40	81.6	4	8.2	49
San Diego, CA	173	75.5	47	20.5	229
San Francisco, CA	248	78.7	57	18.1	315
San Juan, PR	97	30.1	178	55.3	322
Seattle, WA	272	77.7	49	14.0	350
Virginia Beach, VA	118	70.7	43	25.7	167
Washington, DC	124	85.5	13	9.0	145
Total	2,771	66.8	1,142	27.5	4,146

Abbreviation: HMO, health maintenance organization [footnotes only].

Note. Data report setting of most recent HIV test. Data include participants who reported an HIV test during the 12 months before interview. Percentages may not add to 100 because of missing data and "other" locations, which could not be classified as clinical or nonclinical settings.

^a Clinical settings include private doctor's office (including HMO), emergency department, hospital (inpatient), public health clinic or community health center, family planning or obstetrics clinic, correctional facility, or drug treatment program.

^b Nonclinical settings include HIV counseling and testing site, HIV street outreach program or mobile unit, syringe services program, or home.

^c Limited to participants who reported assigned male at birth.

^d Hispanic/Latino persons can be of any race.

Table 6. Anal sex with a male sex partner at last sex among cisgender men who have sex with men—National HIV Behavioral Surveillance, 19 U.S. cities, 2023

	Insertive ^a anal sex only				Receptive ^b anal sex only				Both insertive ^a and receptive ^b anal sex				No anal sex ^{c,d}		Unprotected sex with HIV-discordant partner at last sex ^e		Total No.
	Total ^d		Condomless ^f		Total ^d		Condomless ^g		Total ^d		Condomless ^h		No.	%	No.	%	
	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	
HIV-negativeⁱ	1,463	33.6	1,147	26.4	966	22.2	788	18.1	744	17.1	590	13.6	1,178	27.1	402	9.2	4,351
Age at interview (yr)																	
18–24	135	28.4	93	19.6	133	28.0	100	21.1	76	16.0	58	12.2	131	27.6	63	13.3	475
25–29	286	33.8	230	27.2	230	27.2	180	21.3	153	18.1	125	14.8	178	21.0	83	9.8	847
30–39	579	34.3	461	27.3	371	22.0	326	19.3	320	18.9	262	15.5	420	24.9	135	8.0	1,690
40–49	243	36.7	196	29.6	130	19.6	103	15.6	113	17.1	89	13.4	176	26.6	55	8.3	662
≥50	220	32.5	167	24.7	102	15.1	79	11.7	82	12.1	56	8.3	273	40.3	66	9.7	677
Race/ethnicity																	
American Indian/Alaska Native	2	8.7	2	8.7	5	21.7	4	17.4	3	13.0	1	4.3	13	56.5	2	8.7	23
Asian	28	16.6	22	13.0	61	36.1	54	32.0	30	17.8	24	14.2	50	29.6	7	4.1	169
Black/African American	430	42.2	299	29.4	168	16.5	122	12.0	157	15.4	113	11.1	263	25.8	103	10.1	1,018
Hispanic/Latino ^j	464	33.9	349	25.5	302	22.1	231	16.9	308	22.5	239	17.5	294	21.5	148	10.8	1,368
Native Hawaiian/other Pacific Islander	5	35.7	5	35.7	3	21.4	2	14.3	0	0.0	0	0.0	6	42.9	1	7.1	14
White	467	29.9	415	26.6	381	24.4	343	22.0	220	14.1	195	12.5	494	31.6	125	8.0	1,562
Multiple races	59	33.0	48	26.8	42	23.5	29	16.2	24	13.4	17	9.5	54	30.2	15	8.4	179
HIV-positive^k	364	27.9	285	21.8	376	28.8	285	21.8	325	24.9	225	17.2	240	18.4	50	3.8	1,305
Age at interview (yr)																	
18–24	19	27.9	14	20.6	30	44.1	21	30.9	11	16.2	9	13.2	8	11.8	4	5.9	68
25–29	31	18.2	15	8.8	59	34.7	41	24.1	59	34.7	39	22.9	21	12.4	1	0.6	170
30–39	136	28.9	109	23.1	147	31.2	111	23.6	125	26.5	84	17.8	63	13.4	26	5.5	471
40–49	66	26.5	54	21.7	73	29.3	60	24.1	58	23.3	41	16.5	52	20.9	15	6.0	249
≥50	112	32.3	93	26.8	67	19.3	52	15.0	72	20.7	52	15.0	96	27.7	4	1.2	347
Race/ethnicity																	
American Indian/Alaska Native	2	22.2	0	0.0	2	22.2	1	11.1	2	22.2	1	11.1	3	33.3	0	0.0	9
Asian	0	0.0	1	16.7	3	50.0	2	33.3	2	33.3	1	16.7	1	16.7	1	16.7	6
Black/African American	176	28.4	139	22.4	170	27.4	117	18.9	176	28.4	117	18.9	98	15.8	27	4.4	620
Hispanic/Latino ^j	85	27.5	54	17.5	88	28.5	66	21.4	84	27.2	62	20.1	52	16.8	13	4.2	309
Native Hawaiian/other Pacific Islander	0	0.0	0	0.0	1	50.0	0	0.0	0	0.0	0	0.0	1	50.0	0	0.0	2
White	74	26.9	69	25.1	91	33.1	83	30.2	41	14.9	29	10.5	69	25.1	7	2.5	275
Multiple races	25	32.9	21	27.6	19	25.0	14	18.4	19	25.0	14	18.4	13	17.1	2	2.6	76
No valid NHBS HIV test result^l	105	29.9	70	19.9	80	22.8	62	17.7	75	21.4	60	17.1	91	25.9	22	6.3	351
Total	1,932	32.2	1,502	25.0	1,422	23.7	1,135	18.9	1,144	19.0	875	14.6	1,509	25.1	474	7.9	6,007

Abbreviations: NHBS, National HIV Behavioral Surveillance; PrEP, preexposure prophylaxis [footnotes only].

Note. Percentages may not add to 100 because of missing data.

^a The participant placed his penis in his partner's anus.

^b The participant's sex partner placed his penis in the participant's anus.

^c The participant reported neither insertive anal sex nor receptive anal sex with a male partner at last sex or reported last sex partner was not male.

^d The categories—insertive anal sex, receptive anal sex, both insertive and receptive anal sex, and no anal sex—are mutually exclusive.

^e "Unprotected sex" refers to sex without the participant's use of either condoms or HIV medications (i.e., HIV PrEP or antiretrovirals). "HIV-discordant partner" refers to a sex partner of different or unknown HIV status.

^f At last sex, the participant did not use a condom during insertive anal sex.

^g At last sex, the participant had receptive anal sex and his partner did not use a condom.

^h At last sex, the participant did not use a condom during insertive anal sex, or the participant's partner did not use a condom during receptive anal sex.

ⁱ Participants with a negative NHBS HIV test result who did not self-report a previous HIV-positive test result.

^j Hispanic/Latino persons can be of any race.

^k Participants who had a reactive rapid NHBS HIV test result that was supported by a second rapid test, supplemental laboratory-based testing, or self-report of a previous HIV-positive test result.

^l Participants who did not have a valid positive or negative NHBS HIV test result, including those who did not consent to the HIV test, had an indeterminate laboratory test result, discordant rapid test results, or reported a previous HIV-positive test result but had a negative NHBS HIV test result.

Table 7. Sexual behavior with female and male sex partners in the 12 months before interview among cisgender men who have sex with men—National HIV Behavioral Surveillance, 19 U.S. cities, 2023

	With female sex partners								With male sex partners							Total No.
	Vaginal sex		Condomless vaginal sex		Anal sex		Condomless anal sex		Anal sex		Condomless anal sex		Exchange sex ^a			
	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%		
HIV-negative^b	584	13.4	432	9.9	242	5.6	180	4.1	3,938	90.5	3,433	78.9	363	8.3	4,351	
Age at interview (yr)																
18–24	104	21.9	76	16.0	50	10.5	38	8.0	432	90.9	365	76.8	57	12.0	475	
25–29	108	12.8	74	8.7	38	4.5	26	3.1	814	96.1	720	85.0	68	8.0	847	
30–39	224	13.3	170	10.1	97	5.7	75	4.4	1,561	92.4	1,398	82.7	135	8.0	1,690	
40–49	82	12.4	64	9.7	37	5.6	28	4.2	594	89.7	513	77.5	45	6.8	662	
≥50	66	9.7	48	7.1	20	3.0	13	1.9	537	79.3	437	64.5	58	8.6	677	
Race/ethnicity																
American Indian/Alaska Native	8	34.8	7	30.4	4	17.4	2	8.7	16	69.6	12	52.2	4	17.4	23	
Asian	12	7.1	10	5.9	5	3.0	4	2.4	152	89.9	139	82.2	7	4.1	169	
Black/African American	214	21.0	154	15.1	83	8.2	61	6.0	916	90.0	742	72.9	115	11.3	1,018	
Hispanic/Latino ^c	157	11.5	108	7.9	68	5.0	51	3.7	1,273	93.1	1,110	81.1	99	7.2	1,368	
Native Hawaiian/other Pacific Islander	2	14.3	2	14.3	2	14.3	2	14.3	12	85.7	11	78.6	2	14.3	14	
White	164	10.5	129	8.3	71	4.5	52	3.3	1,396	89.4	1,272	81.4	109	7.0	1,562	
Multiple races	24	13.4	19	10.6	9	5.0	8	4.5	157	87.7	134	74.9	23	12.8	179	
HIV-positive^d	160	12.3	102	7.8	65	5.0	42	3.2	1,207	92.5	1,042	79.8	184	14.1	1,305	
Age at interview (yr)																
18–24	8	11.8	8	11.8	2	2.9	2	2.9	67	98.5	56	82.4	12	17.6	68	
25–29	27	15.9	14	8.2	10	5.9	6	3.5	162	95.3	133	78.2	20	11.8	170	
30–39	62	13.2	41	8.7	27	5.7	18	3.8	449	95.3	393	83.4	77	16.3	471	
40–49	32	12.9	22	8.8	16	6.4	12	4.8	231	92.8	204	81.9	37	14.9	249	
≥50	31	8.9	17	4.9	10	2.9	4	1.2	298	85.9	256	73.8	38	11.0	347	
Race/ethnicity																
American Indian/Alaska Native	0	0.0	0	0.0	0	0.0	0	0.0	7	77.8	5	55.6	1	11.1	9	
Asian	0	0.0	0	0.0	0	0.0	0	0.0	6	100	6	100	0	0.0	6	
Black/African American	84	13.5	50	8.1	31	5.0	17	2.7	577	93.1	485	78.2	90	14.5	620	
Hispanic/Latino ^c	41	13.3	24	7.8	21	6.8	14	4.5	294	95.1	249	80.6	41	13.3	309	
Native Hawaiian/other Pacific Islander	0	0.0	0	0.0	0	0.0	0	0.0	2	100	2	100	0	0.0	2	
White	22	8.0	16	5.8	8	2.9	6	2.2	245	89.1	224	81.5	35	12.7	275	
Multiple races	11	14.5	10	13.2	5	6.6	5	6.6	71	93.4	67	88.2	17	22.4	76	
No valid NHBS HIV test result^e	44	12.5	26	7.4	13	3.7	6	1.7	321	91.5	251	71.5	33	9.4	351	
Total	788	13.1	560	9.3	320	5.3	228	3.8	5,466	91.0	4,726	78.7	580	9.7	6,007	

Abbreviation: NHBS, National HIV Behavioral Surveillance.

^a “Exchange sex” refers to giving or receiving money or drugs from a male casual partner in exchange for sex.

^b Participants with a negative NHBS HIV test result who did not self-report a previous HIV-positive test result.

^c Hispanic/Latino persons can be of any race.

^d Participants who had a reactive rapid NHBS HIV test result that was supported by a second rapid test, supplemental laboratory-based testing, or self-report of a previous HIV-positive test result.

^e Participants who did not have a valid positive or negative NHBS HIV test result, including those who did not consent to the HIV test, had an indeterminate laboratory test result, discordant rapid test results, or reported a previous HIV-positive test result but had a negative NHBS HIV test result.

Table 8. Receptive sexual behavior with men in the 12 months before interview among transgender men and nonbinary persons assigned male at birth—National HIV Behavioral Surveillance, 19 U.S. cities, 2023

	Transgender men									Nonbinary persons assigned male at birth				
	Receptive anal sex ^a		Condomless receptive anal sex		Receptive vaginal/ frontal sex ^b		Condomless receptive vaginal/ frontal sex		Total	Receptive anal sex ^a		Condomless receptive anal sex		Total
	No.	%	No.	%	No.	%	No.	%		No.	%	No.	%	
	No.	%	No.	%	No.	%	No.	%	No.	No.	%	No.	%	No.
Age at interview (yr)														
18–24	5	29.4	3	17.6	14	82.4	11	64.7	17	69	82.1	55	65.5	84
25–29	8	33.3	5	20.8	22	91.7	17	70.8	24	122	83.0	106	72.1	147
30–39	15	48.4	10	32.3	27	87.1	14	45.2	31	126	75.9	108	65.1	166
40–49	3	50.0	2	33.3	6	100	6	100	6	30	71.4	21	50.0	42
≥50	1	33.3	1	33.3	2	66.7	1	33.3	3	18	72.0	14	56.0	25
Race/ethnicity														
American Indian/Alaska Native	0	—	0	—	0	—	0	—	0	2	100	2	100	2
Asian	0	0.0	0	0.0	2	100	2	100	2	15	83.3	11	61.1	18
Black/African American	8	32.0	6	24.0	20	80.0	13	52.0	25	102	76.1	79	59.0	134
Hispanic/Latino ^c	7	46.7	3	20.0	13	86.7	6	40.0	15	97	79.5	83	68.0	122
Native Hawaiian/other Pacific Islander	0	—	0	—	0	—	0	—	0	1	100	1	100	1
White	15	48.4	11	35.5	29	93.5	23	74.2	31	118	84.3	103	73.6	140
Multiple races	2	25.0	1	12.5	7	87.5	5	62.5	8	25	59.5	23	54.8	42
NHBS HIV test result														
HIV-negative ^d	32	41.0	21	26.9	70	89.7	48	61.5	78	265	75.9	218	62.5	349
HIV-positive ^e	0	0.0	0	0.0	1	50.0	1	50.0	2	78	87.6	69	77.5	89
Not valid ^f	0	0.0	0	0.0	0	0.0	0	0.0	1	22	84.6	17	65.4	26
Total	32	39.5	21	25.9	71	87.7	49	60.5	81	365	78.7	304	65.5	464

Abbreviation: NHBS, National HIV Behavioral Surveillance.

Note. Insertive sexual behavior data were not available for transgender men and nonbinary persons assigned male at birth.

^a The participant reported a sex partner putting their penis in the participant's anus in the 12 months before interview.

^b The participant reported a sex partner putting their penis in the participant's vagina or front hole in the 12 months before interview.

^c Hispanic/Latino persons can be of any race.

^d Participants with a negative NHBS HIV test result who did not self-report a previous HIV-positive test result.

^e Participants who had a reactive rapid NHBS HIV test result that was supported by a second rapid test, supplemental laboratory-based testing, or self-report of a previous HIV-positive test result.

^f Participants who did not have a valid positive or negative NHBS HIV test result, including those who did not consent to the HIV test, had an indeterminate laboratory test result, discordant rapid test results, or reported a previous HIV-positive test result but had a negative NHBS HIV test result.

Table 9a. HIV prevention activities in the 12 months before interview among men who have sex with men—National HIV Behavioral Surveillance, 19 U.S. cities, 2023

	Free condoms ^a		Individual- or group-level intervention ^b		PrEP awareness ^c		PrEP use ^d		Total No.
	No.	%	No.	%	No.	%	No.	%	
HIV-negative^e	2,868	60.0	1,142	23.9	4,451	93.2	2,166	45.3	4,778
Gender									
Cisgender man	2,574	59.2	1,024	23.5	4,042	92.9	1,977	45.4	4,351
Transgender man	56	71.8	24	30.8	76	97.4	24	30.8	78
Nonbinary ^f	238	68.2	94	26.9	333	95.4	165	47.3	349
Age at interview (yr)									
18–24	372	66.3	170	30.3	493	87.9	187	33.3	561
25–29	624	63.2	252	25.5	943	95.5	478	48.4	987
30–39	1,127	61.4	466	25.4	1,736	94.5	956	52.0	1,837
40–49	386	55.5	138	19.8	655	94.1	323	46.4	696
≥50	359	51.5	116	16.6	624	89.5	222	31.9	697
Race/ethnicity									
American Indian/Alaska Native	16	64.0	10	40.0	24	96.0	7	28.0	25
Asian	109	58.3	35	18.7	178	95.2	112	59.9	187
Black/African American	699	62.1	370	32.9	1,007	89.5	428	38.0	1,125
Hispanic/Latino ^g	949	64.3	393	26.6	1,359	92.0	633	42.9	1,477
Native Hawaiian/other Pacific Islander	5	35.7	0	0.0	13	92.9	3	21.4	14
White	944	55.2	281	16.4	1,646	96.3	877	51.3	1,709
Multiple races	135	61.9	48	22.0	203	93.1	94	43.1	218
HIV-positive^h	910	65.2	497	35.6	—	—	—	—	1,396
Gender									
Cisgender man	839	64.3	454	34.8	—	—	—	—	1,305
Transgender man	1	50.0	0	0.0	—	—	—	—	2
Nonbinary ^f	70	78.7	43	48.3	—	—	—	—	89
Age at interview (yr)									
18–24	60	76.9	38	48.7	—	—	—	—	78
25–29	138	72.3	88	46.1	—	—	—	—	191
30–39	347	67.6	204	39.8	—	—	—	—	513
40–49	173	66.5	76	29.2	—	—	—	—	260
≥50	192	54.2	91	25.7	—	—	—	—	354
Race/ethnicity									
American Indian/Alaska Native	4	44.4	3	33.3	—	—	—	—	9
Asian	6	75.0	1	12.5	—	—	—	—	8
Black/African American	464	69.9	277	41.7	—	—	—	—	664
Hispanic/Latino ^g	228	68.9	133	40.2	—	—	—	—	331
Native Hawaiian/other Pacific Islander	3	100	2	66.7	—	—	—	—	3
White	144	49.7	49	16.9	—	—	—	—	290
Multiple races	56	67.5	30	36.1	—	—	—	—	83
No valid NHBS HIV test resultⁱ	223	59.0	88	23.3	—	—	—	—	378
Total	4,001	61.1	1,727	26.4	—	—	—	—	6,552

Abbreviations: PrEP; preexposure prophylaxis; NHBS, National HIV Behavioral Surveillance.

^a Excludes condoms received from friends, relatives, or sex partners.

^b Individual-level intervention defined as a one-on-one conversation with an outreach worker, a counselor, or a prevention program worker about ways to prevent HIV. Group-level intervention defined as a small-group discussion that is part of an organized session about ways to prevent HIV; excludes informal discussions with friends. Conversations that were part of obtaining an HIV test were excluded.

^c Ever heard of PrEP, an antiretroviral medicine taken for months or years by a person who is HIV-negative to reduce the risk of getting HIV.

^d Used PrEP at any point in the 12 months before interview to reduce the risk of getting HIV.

^e Participants with a valid negative NHBS HIV test result who did not self-report a previous HIV-positive test result.

^f Limited to participants who reported assigned male at birth.

^g Hispanic/Latino persons can be of any race.

^h Participants who had a reactive rapid NHBS HIV test result that was supported by a second rapid test, supplemental laboratory-based testing, or self-report of a previous HIV-positive test result.

ⁱ Participants who did not have a valid positive or negative NHBS HIV test result, including those who did not consent to the HIV test, had an indeterminate laboratory test result, discordant rapid test results, or reported a previous HIV-positive test result but had a negative NHBS HIV test result.

Table 9b. HIV prevention in the 12 months before interview among men who have sex with men, by city—National HIV Behavioral Surveillance, 19 U.S. cities, 2023

	Free condoms ^a		Individual- or group-level intervention ^b		PrEP awareness ^c		PrEP use ^d		Total No.
	No.	%	No.	%	No.	%	No.	%	
HIV-negative^e									
City									
Atlanta, GA	124	64.9	53	27.7	187	97.9	85	44.5	191
Baltimore, MD	94	49.0	42	21.9	165	85.9	58	30.2	192
Chicago, IL	39	48.8	21	26.3	79	98.8	50	62.5	80
Denver, CO	206	56.4	76	20.8	352	96.4	147	40.3	365
Detroit, MI	132	67.7	53	27.2	180	92.3	74	37.9	195
Houston, TX	185	62.9	49	16.7	288	98.0	143	48.6	294
Indianapolis, IN	153	67.1	69	30.3	204	89.5	87	38.2	228
Los Angeles, CA	258	61.0	100	23.6	411	97.2	208	49.2	423
New Orleans, LA	199	64.8	72	23.5	299	97.4	157	51.1	307
New York City, NY	62	66.7	19	20.4	83	89.2	65	69.9	93
Newark, NJ	126	56.3	91	40.6	169	75.4	76	33.9	224
Philadelphia, PA	198	60.2	119	36.2	292	88.8	124	37.7	329
Portland, OR	32	52.5	10	16.4	61	100	28	45.9	61
San Diego, CA	168	60.2	60	21.5	261	93.5	137	49.1	279
San Francisco, CA	182	49.1	72	19.4	364	98.1	226	60.9	371
San Juan, PR	301	74.7	120	29.8	354	87.8	108	26.8	403
Seattle, WA	237	59.0	54	13.4	375	93.3	231	57.5	402
Virginia Beach, VA	92	48.2	45	23.6	179	93.7	64	33.5	191
Washington, DC	80	53.3	17	11.3	148	98.7	98	65.3	150
HIV-positive^f									
City									
Atlanta, GA	93	66.4	51	36.4	—	—	—	—	140
Baltimore, MD	57	58.2	21	21.4	—	—	—	—	98
Chicago, IL	2	50.0	2	50.0	—	—	—	—	4
Denver, CO	27	61.4	11	25.0	—	—	—	—	44
Detroit, MI	41	77.4	18	34.0	—	—	—	—	53
Houston, TX	84	61.8	46	33.8	—	—	—	—	136
Indianapolis, IN	41	68.3	29	48.3	—	—	—	—	60
Los Angeles, CA	60	70.6	37	43.5	—	—	—	—	85
New Orleans, LA	39	56.5	20	29.0	—	—	—	—	69
New York City, NY	35	83.3	15	35.7	—	—	—	—	42
Newark, NJ	86	65.6	71	54.2	—	—	—	—	131
Philadelphia, PA	77	68.8	48	42.9	—	—	—	—	112
Portland, OR	3	33.3	3	33.3	—	—	—	—	9
San Diego, CA	30	65.2	14	30.4	—	—	—	—	46
San Francisco, CA	49	46.2	23	21.7	—	—	—	—	106
San Juan, PR	71	81.6	36	41.4	—	—	—	—	87
Seattle, WA	47	62.7	18	24.0	—	—	—	—	75
Virginia Beach, VA	52	70.3	30	40.5	—	—	—	—	74
Washington, DC	16	64.0	4	16.0	—	—	—	—	25

Abbreviations: PrEP; preexposure prophylaxis; NHBS, National HIV Behavioral Surveillance [footnotes only].

^a Excludes condoms received from friends, relatives, or sex partners.

^b Individual-level intervention defined as a one-on-one conversation with an outreach worker, a counselor, or a prevention program worker about ways to prevent HIV. Group-level intervention defined as a small-group discussion that is part of an organized session about ways to prevent HIV; excludes informal discussions with friends. Conversations that were part of obtaining an HIV test were excluded.

^c Ever heard of PrEP, an antiretroviral medicine taken for months or years by a person who is HIV-negative to reduce the risk of getting HIV.

^d Used PrEP at any point in the 12 months before interview to reduce the risk of getting HIV.

^e Participants with a valid negative NHBS HIV test result who did not self-report a previous HIV-positive test result.

^f Participants who had a reactive rapid NHBS HIV test result that was supported by a second rapid test, supplemental laboratory-based testing, or self-report of a previous HIV-positive test result.

Table 10. Diagnosis of sexually transmitted infections among men who have sex with men—National HIV Behavioral Surveillance, 19 U.S. cities, 2023

	Diagnosis in the 12 months before interview								Diagnosis, ever				Total No.
	Any bacterial STI ^a		Chlamydia		Gonorrhea		Syphilis		Genital warts		Genital herpes		
	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	
HIV-negative^b	1,041	21.8	534	11.2	676	14.1	261	5.5	238	5.0	285	6.0	4,778
Gender													
Cisgender man	944	21.7	478	11.0	612	14.1	241	5.5	216	5.0	262	6.0	4,351
Transgender man	14	17.9	10	12.8	5	6.4	4	5.1	1	1.3	5	6.4	78
Nonbinary ^c	83	23.8	46	13.2	59	16.9	16	4.6	21	6.0	18	5.2	349
Age at interview (yr)													
18–24	128	22.8	65	11.6	84	15.0	24	4.3	7	1.2	15	2.7	561
25–29	260	26.3	145	14.7	186	18.8	53	5.4	31	3.1	59	6.0	987
30–39	458	24.9	234	12.7	296	16.1	113	6.2	80	4.4	120	6.5	1,837
40–49	124	17.8	59	8.5	72	10.3	41	5.9	55	7.9	44	6.3	696
≥50	71	10.2	31	4.4	38	5.5	30	4.3	65	9.3	47	6.7	697
Race/ethnicity													
American Indian/Alaska Native	4	16.0	3	12.0	3	12.0	0	0.0	2	8.0	0	0.0	25
Asian	54	28.9	32	17.1	29	15.5	14	7.5	12	6.4	14	7.5	187
Black/African American	227	20.2	107	9.5	148	13.2	67	6.0	24	2.1	41	3.6	1,125
Hispanic/Latino ^d	336	22.7	154	10.4	203	13.7	113	7.7	74	5.0	90	6.1	1,477
Native Hawaiian/other Pacific Islander	2	14.3	2	14.3	2	14.3	0	0.0	0	0.0	0	0.0	14
White	360	21.1	199	11.6	257	15.0	55	3.2	117	6.8	130	7.6	1,709
Multiple races	55	25.2	35	16.1	32	14.7	10	4.6	9	4.1	10	4.6	218
HIV-positive^e	390	27.9	168	12.0	212	15.2	225	16.1	131	9.4	139	10.0	1,396
Gender													
Cisgender man	352	27.0	149	11.4	190	14.6	203	15.6	120	9.2	128	9.8	1,305
Transgender man	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	2
Nonbinary ^c	38	42.7	19	21.3	22	24.7	22	24.7	11	12.4	11	12.4	89
Age at interview (yr)													
18–24	29	37.2	9	11.5	14	17.9	18	23.1	5	6.4	4	5.1	78
25–29	70	36.6	27	14.1	42	22.0	38	19.9	2	1.0	7	3.7	191
30–39	175	34.1	80	15.6	102	19.9	93	18.1	37	7.2	35	6.8	513
40–49	63	24.2	29	11.2	33	12.7	41	15.8	28	10.8	37	14.2	260
≥50	53	15.0	23	6.5	21	5.9	35	9.9	59	16.7	56	15.8	354
Race/ethnicity													
American Indian/Alaska Native	0	0.0	0	0.0	0	0.0	0	0.0	2	22.2	0	0.0	9
Asian	3	37.5	1	12.5	2	25.0	1	12.5	1	12.5	4	50.0	8
Black/African American	170	25.6	77	11.6	92	13.9	97	14.6	34	5.1	35	5.3	664
Hispanic/Latino ^d	108	32.6	45	13.6	49	14.8	63	19.0	30	9.1	37	11.2	331
Native Hawaiian/other Pacific Islander	1	33.3	0	0.0	0	0.0	1	33.3	0	0.0	0	0.0	3
White	77	26.6	31	10.7	45	15.5	47	16.2	59	20.3	53	18.3	290
Multiple races	30	36.1	14	16.9	23	27.7	16	19.3	5	6.0	8	9.6	83
No valid NHBS HIV test result^f	77	20.4	40	10.6	48	12.7	21	5.6	12	3.2	18	4.8	378
Total	1,508	23.0	742	11.3	936	14.3	507	7.7	381	5.8	442	6.7	6,552

Abbreviations: STI, sexually transmitted infection; NHBS, National HIV Behavioral Surveillance.

^a Any bacterial STI includes having received a diagnosis of gonorrhea, chlamydia, or syphilis in the 12 months before interview.

^b Participants with a negative NHBS HIV test result who did not self-report a previous HIV-positive test result.

^c Limited to participants who reported assigned male at birth.

^d Hispanic/Latino persons can be of any race.

^e Participants who had a reactive rapid NHBS HIV test result that was supported by a second rapid test, supplemental laboratory-based testing, or self-report of a previous HIV-positive test result.

^f Participants who did not have a valid positive or negative NHBS HIV test result, including those who did not consent to the HIV test, had an indeterminate laboratory test result, discordant rapid test results, or reported a previous HIV-positive test result but had a negative NHBS HIV test result.

Table 11. Drug use in the 12 months before interview among men who have sex with men—National HIV Behavioral Surveillance, 19 U.S. cities, 2023

	Used drug	
	No.	%
HIV-negative^a		
Any injected drugs	102	2.1
Marijuana	3,207	67.1
Any noninjected drugs (excludes marijuana)	1,844	38.6
Cocaine	1,062	22.2
Crack	193	4.0
Downer ^b	256	5.4
Ecstasy	692	14.5
Heroin	50	1.0
Methamphetamine	244	5.1
Prescription opioids ^c	162	3.4
HIV-positive^d		
Any injected drugs	89	6.4
Marijuana	922	66.0
Any noninjected drugs (excludes marijuana)	481	34.5
Cocaine	247	17.7
Crack	62	4.4
Downer ^b	54	3.9
Ecstasy	146	10.5
Heroin	10	0.7
Methamphetamine	163	11.7
Prescription opioids ^c	41	2.9
No valid NHBS HIV test result^e		
Any injected drugs	12	3.2
Marijuana	233	61.6
Any noninjected drugs (excludes marijuana)	118	31.2
Cocaine	73	19.3
Crack	17	4.5
Downer ^b	21	5.6
Ecstasy	43	11.4
Heroin	2	0.5
Methamphetamine	21	5.6
Prescription opioids ^c	13	3.4

Disclaimer: The use of trade names is for identification only and does not imply endorsement by the Department of Health and Human Services or the Centers for Disease Control and Prevention.

Abbreviation: NHBS, National HIV Behavioral Surveillance.

Note. Denominator is the total number of participants in the category; HIV-negative participants: n = 4,778; HIV-positive participants: n = 1,396; participants without a valid NHBS HIV test result: n = 378. Responses are not mutually exclusive; percentages may not add to 100.

^a Participants with a negative NHBS HIV test result who did not self-report a previous HIV-positive test result.

^b Such as Klonopin, Valium, Ativan, or Xanax.

^c Such as OxyContin, Vicodin, morphine, or Percocet.

^d Participants who had a reactive rapid NHBS HIV test result that was supported by a second rapid test, supplemental laboratory-based testing, or self-report of a previous HIV-positive test result.

^e Participants who did not have a valid positive or negative NHBS HIV test result, including those who did not consent to the HIV test, had an indeterminate laboratory test result, discordant rapid test results, or reported a previous HIV-positive test result but had a negative NHBS HIV test result.

Table 12. Receipt of HIV care and treatment among men who have sex with men who self-reported being HIV-positive—National HIV Behavioral Surveillance, 19 U.S. cities, 2023

	Visited health care provider about HIV						Currently taking antiretrovirals		Total No.
	Ever		Within 1 month after diagnosis		During past 6 months		No.	%	
	No.	%	No.	%	No.	%	No.	%	
Gender									
Cisgender man	1,210	98.3	919	74.7	1,086	88.2	1,183	96.1	1,231
Transgender man	1	100	1	100	0	0.0	1	100	1
Nonbinary ^a	86	100	66	76.7	76	88.4	81	94.2	86
Age at interview (yr)									
18–24	65	98.5	53	80.3	61	92.4	65	98.5	66
25–29	169	97.7	143	82.7	154	89.0	166	96.0	173
30–39	457	97.9	357	76.4	408	87.4	440	94.2	467
40–49	247	98.8	185	74.0	219	87.6	239	95.6	250
≥50	359	99.2	248	68.5	320	88.4	355	98.1	362
Race/ethnicity									
American Indian/Alaska Native	8	100	5	62.5	7	87.5	8	100	8
Asian	5	100	4	80.0	5	100	5	100	5
Black/African American	594	97.7	452	74.3	529	87.0	575	94.6	608
Hispanic/Latino ^b	302	98.1	223	72.4	277	89.9	298	96.8	308
Native Hawaiian/other Pacific Islander	3	100	3	100	3	100	3	100	3
White	293	99.7	226	76.9	261	88.8	287	97.6	294
Multiple races	84	100	67	79.8	73	86.9	81	96.4	84
Total	1,297	98.4	986	74.8	1,162	88.2	1,265	96.0	1,318

Abbreviation: NHBS, National HIV Behavioral Surveillance [footnotes only].

Note. Data include all participants who reported having ever received an HIV-positive test result, regardless of NHBS HIV test result. "Past 6 months" refers to the 6 months before interview.

^a Limited to participants who reported assigned male at birth.

^b Hispanic/Latino persons can be of any race.

SOCIODEMOGRAPHIC CHARACTERISTICS

- **Gender:** Classified based on participants' responses to questions about sex at birth (male and female) and gender (man, woman, and nonbinary). Those who reported male sex at birth and reported man as their gender were considered cisgender men. Those who reported female sex at birth and reported man as their gender were considered transgender men. Those who reported male sex at birth and reported nonbinary as their gender were considered nonbinary.
- **Age:** Calculated from the reported date of birth; age categories were chosen for epidemiologic relevance and consistency of reporting across all 3 National HIV Behavioral Surveillance (NHBS) populations.
- **Race/ethnicity:** Participants reported 1 or more race categories (American Indian or Alaska Native, Asian, Black or African American, Native Hawaiian or other Pacific Islander, and White). Hispanic or Latino ethnicity was asked separately; participants reporting Hispanic or Latino ethnicity were considered Hispanic or Latino, regardless of reported race. Participants reporting multiple races (but not Hispanic or Latino ethnicity) were classified as multiple races.
- **Disability:** Participants who reported difficulty with hearing, vision, cognition, ambulation, self-care, or independent living, based on responses to the questions that comprise the U.S. Department of Health and Human Services data standard for disability status [1, 2].
- **City:** Throughout this report, eligible metropolitan statistical areas (MSAs) and divisions are referred to by the name of the principal city. State and local health departments eligible to participate in NHBS are those in jurisdictions that include an MSA (or a specified division within an MSA) with high prevalence of HIV. This report presents 2023 data in 19 MSAs (see list at the end of the report).

SOCIAL DETERMINANTS OF HEALTH

- **Less than high school education:** Reported never attending school or having completed less than grade 12.
- **Income at or below the federal poverty level:** Participants were asked about their combined monthly or yearly household income (in US\$) from all sources for the calendar year before interview. Poverty was determined by using the U.S. Department of Health and Human Services poverty guidelines for 2023. These guidelines are issued yearly for the United States and are one of the indicators used for determining eligibility for many federal and state programs. The 2023 guidelines [3] were used for participants interviewed in 2023. Because the poverty guidelines are not defined for Puerto Rico, the guidelines for the 48 contiguous states and Washington, D.C., were used for this jurisdiction. Participants were asked to identify the range of their income by selecting from a list of income ranges and the number of dependents on that income. If the participant's income range and household size resulted in an ambiguous determination of poverty level, the participant's household income was assumed to be the low point of the income range.
- **Unemployed:** Participants who reported their employment status as "unemployed."
- **Homeless:** Living on the street, in a shelter, in a single-room-occupancy hotel, or in a car at any time in the 12 months before interview.
- **Incarcerated:** Having been held in a detention center, jail, or prison for more than 24 hours in the 12 months before interview.
- **No current health insurance:** Currently not having any form of health insurance.

- **Did not visit a health care provider:** Did not visit a healthcare provider in the 12 months before interview.

HIV STATUS

HIV testing was performed for participants who consented to testing; blood specimens were collected for rapid testing in the field or supplemental laboratory-based testing.

- **HIV-negative:** Participants with a valid negative NHBS HIV test result who did not self-report a previous HIV-positive test result.
- **HIV-positive:** Participants who had a reactive rapid NHBS HIV test result that was supported by a second rapid test, supplemental laboratory-based testing, or self-report of a previous HIV-positive test result.
- **No valid NHBS HIV test result:** Participants who did not have a valid positive or negative NHBS HIV test result, including those who did not consent to the HIV test, had an indeterminate laboratory test result, discordant rapid test results, or reported a previous HIV-positive test result but had a negative NHBS HIV test result.

HIV TESTING

- **Ever tested:** Having had an HIV test during one's lifetime.
- **Tested in past 12 months:** Having had an HIV test during the 12 months before interview.
- **Clinical setting:** Participants reported the location of their most recent HIV test as private doctor's office (including health maintenance organization), emergency department, hospital (inpatient), public health clinic or community health center, family planning or obstetrics clinic, correctional facility (jail or prison), or drug treatment program.
- **Nonclinical setting:** Participants reported the location of their most recent HIV test as HIV counseling and testing site, HIV street outreach program or mobile unit, syringe services program, or home.

SEXUAL BEHAVIORS

- **Anal sex:** Penis inserted into a partner's anus or butt.
- **Insertive anal sex:** Participant's penis inserted into a partner's anus or butt.
- **Receptive anal sex:** Partner's penis inserted into the participant's anus or butt.
- **Condomless sex:** Sex during which a condom either is not used or is not used throughout the sex act.
- **Unprotected sex with an HIV-discordant partner at last sex:** "Unprotected sex" refers to sex without the participant's use of either condoms or HIV medications (i.e., PrEP among those without HIV or antiretrovirals among those with HIV). "HIV-discordant partner" refers to a sex partner of different or unknown HIV status.
- **Vaginal sex:** Penis inserted into a partner's vagina.
- **Exchange sex:** Refers to giving or receiving money or drugs from a male casual partner in exchange for sex. A casual partner is a person with whom the participant has sex, but to whom they do not feel committed or whom they do not know very well.
- **Receptive vaginal/frontal sex:** Partner's penis is inserted into the participant's vagina or front hole.

HIV PREVENTION ACTIVITIES

- **Receipt of free condoms:** Having received free condoms in the 12 months before interview, not including those given by a friend, relative, or sex partner.
- **Individual- or group-level intervention:** Individual-level intervention defined as one-on-one conversations with an outreach worker, a counselor, or a prevention program worker about ways to prevent HIV. Conversations that were part of obtaining an HIV test were excluded. Group-level intervention defined as a small-group discussion that is part of an organized session about ways to prevent HIV; excludes informal discussions with friends.
- **PrEP awareness:** Ever heard of PrEP, an antiretroviral medicine taken for months or years by a person who is HIV-negative to reduce the risk of getting HIV.
- **PrEP use:** Took PrEP at any point in the 12 months before interview to reduce the risk of getting HIV. The PrEP use data in NHBS are separate from CDC's official PrEP indicator. They are self-reported data from a sample in specific settings and should not be compared to CDC's official PrEP indicator.

SEXUALLY TRANSMITTED INFECTIONS (STIs)

- **Any bacterial STI:** Having received a diagnosis of chlamydia, gonorrhea, or syphilis in the 12 months before interview.
- **Chlamydia:** Having received a diagnosis of chlamydia in the 12 months before interview.
- **Gonorrhea:** Having received a diagnosis of gonorrhea in the 12 months before interview.
- **Syphilis:** Having received a diagnosis of syphilis in the 12 months before interview.
- **Genital warts:** Having received a diagnosis of genital warts during one's lifetime.
- **Genital herpes:** Having received a diagnosis of genital herpes during one's lifetime.

DRUG USE

Participants were asked about their use of drugs (excluding those prescribed for them) in the 12 months before interview. Participants were not limited in the number of substances that they could report. Participants were considered to have used a substance if they reported using that substance with any frequency other than "never." The use of trade names is for identification only and does not imply endorsement by the Department of Health and Human Services or the Centers for Disease Control and Prevention.

- **Any injected drugs:** Used any injected drug (excluding those prescribed for them) in the 12 months before interview.
- **Marijuana:** Used marijuana in the 12 months before interview.
- **Any noninjected drugs:** Used any noninjected drug, excluding marijuana, in the 12 months before interview.
 - **Cocaine:** Used powder cocaine in the 12 months before interview.
 - **Crack:** Used crack cocaine in the 12 months before interview.
 - **Downer:** Used downers (benzodiazepines), such as Klonopin, Valium, Ativan, or Xanax, in the 12 months before interview.
 - **Ecstasy:** Used X or ecstasy in the 12 months before interview.
 - **Heroin:** Used heroin (smoked or snorted) in the 12 months before interview.

- **Methamphetamine:** Used methamphetamines, including meth, crystal meth, speed, or crank, in the 12 months before interview.
- **Prescription opioids:** Used pain killers, such as OxyContin, Vicodin, morphine, or Percocet, in the 12 months before interview.

RECEIPT OF HIV CARE

Participants who self-reported being HIV-positive were asked about their receipt of HIV care. Specifically, participants were asked the date of their first HIV-positive test result; if they had ever visited a doctor, nurse, or other health care provider for a medical evaluation or care related to their HIV infection; the date of their first visit to a health care provider for HIV care after learning they had HIV; the date of their most recent visit to a health care provider for HIV care; and whether they were currently taking any antiretroviral medicines.

- **Visited health care provider about HIV, ever:** Having ever visited a health care provider for HIV care.
- **Visited health care provider about HIV, within 1 month after diagnosis:** Having visited a health care provider for HIV care within 1 month after the date of their first HIV-positive test result.
- **Visited health care provider about HIV, in the past 6 months:** Having visited a health care provider for HIV care in the 6 months before date of interview.
- **Currently taking antiretroviral HIV medicines:** Taking antiretroviral medicines at the time of interview.

REFERENCES

1. U.S. Census Bureau [Brault M, Stern S, Raglin D]. Evaluation report covering disability. https://www.census.gov/content/dam/Census/library/working-papers/2007/acs/2007_Brault_01.pdf. Published January 2007. Accessed July 25, 2024.
2. Office of Minority Health. Data collection standards for race, ethnicity, sex, primary language, and disability status. <https://minorityhealth.hhs.gov/omh/browse.aspx?lvl=2&lvlid=23>. Published October 2011. Accessed July 25, 2024.
3. U.S. Department of Health and Human Services. Prior HHS poverty guidelines and *Federal Register* references. <https://aspe.hhs.gov/topics/poverty-economic-mobility/poverty-guidelines/prior-hhs-poverty-guidelines-federal-register-references>. Updated January 2024. Accessed July 25, 2024.

Participating Metropolitan Statistical Areas, 2023

Principal city	Metropolitan statistical area division
Atlanta, Georgia	Atlanta–Sandy Springs–Alpharetta, Georgia
Baltimore, Maryland	Baltimore–Columbia–Towson, Maryland
Chicago, Illinois	Chicago–Naperville–Elgin, Illinois–Indiana–Wisconsin (Chicago Division)
Denver, Colorado	Denver–Aurora–Lakewood, Colorado
Detroit, Michigan	Detroit–Warren–Dearborn, Michigan (Detroit Division)
Houston, Texas	Houston–The Woodlands–Sugar Land, Texas
Indianapolis, Indiana	Indianapolis–Carmel–Anderson, Indiana
Los Angeles, California	Los Angeles–Long Beach–Anaheim, California (Los Angeles Division)
New Orleans, Louisiana	New Orleans–Metairie, Louisiana
New York, New York	New York–Newark–Jersey City, New York–New Jersey–Pennsylvania (New York Division)
Newark, New Jersey	New York–Newark–Jersey City, New York–New Jersey–Pennsylvania (Newark Division)
Philadelphia, Pennsylvania	Philadelphia–Camden–Wilmington, Pennsylvania–New Jersey–Delaware–Maryland (Philadelphia Division)
Portland, Oregon	Portland–Vancouver–Hillsboro, Oregon–Washington
San Diego, California	San Diego–Chula Vista, California
San Francisco, California	San Francisco–Oakland–Berkeley, California (San Francisco Division)
San Juan, Puerto Rico	San Juan–Carolina–Bayamón, Puerto Rico
Seattle, Washington	Seattle–Tacoma–Bellevue, Washington (Seattle Division)
Virginia Beach, VA	Virginia Beach–Norfolk–Newport News, Virginia–North Carolina
Washington, DC	Washington, District of Columbia (DC)–Virginia–Maryland–West Virginia (Washington Division)