

Sabrina Artel Audio Stories
Voices of Young Black Men about HIV/AIDS

**SUPPORTING EFFECTIVE INTERVENTIONS, ADVOCACY AND
POLICY WORK ON BEHALF OF YOUNG BLACK MSM LEADERS**

June 14-16, 2015
Columbia University Mailman School of Public Health
New York, NY

Joshua Agee
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Artel: The HIV epidemic is devastating black men who have sex with men. HIV prevalence is estimated at 32% among BMSM.

[00:00:09] A strategic convening with young black MSM leaders was held June 14-16, 2015, at the Columbia University Mailman School of Public Health in New York City.

[00:00:22] To give some background, in June of 2014, the M•A•C AIDS Fund supported the Mailman School of Public Health at Columbia University to conduct a desk review of the context of the HIV epidemic among black men who have sex with men (BMSM) in the United States. The review was based on interviews, analysis of research, and government philanthropic interventions. It indicated that there were particular leadership access and advocacy issues for young men aged 35 and younger. As a result of this review, a convening was held a year later, June 14-16, at the Mailman School of Public Health. The convening was a collaboration between 24 YBMSM leaders from throughout the United States, the M•A•C AIDS Fund, the Mailman School of Public Health at Columbia University, and The Foundation for AIDS Research (amFAR).

[00:01:17] I'm Sabrina Artel, and I spoke with some of the young leaders at the convening. The 24 young leaders all work on HIV/AIDS advocacy in some capacity. This includes direct services provision, research, policy work, organizing, grants management, the arts, and faith-based work.

[00:01:36] I spoke with Joshua Agee at the convening. He received his Bachelor of Science in Biology from Tougaloo College in May 2015. He now plans to attend medical school and specialize in infectious diseases.

He lives in the Jackson metro area, which has made him more aware of the alarming rates at which young black men who have sex with men are infected with HIV. He is eager to learn different behavioral patterns to better understand the most effective models for treatment across the HIV care continuum.

Joshua has worked as an Outreach Recruiter, and this is the primary inspiration for him seeking to become an infectious disease physician. He hopes to help accelerate improvements in HIV prevention and care while reducing disparities among underserved populations.

Over the past year, Joshua has worked as an Outreach Recruiter with the University of Kentucky's College of Public Health, and the University of Mississippi Medical Center on a collaborative effort on the "Better Sex with Latex – Focus on the Future" project. For him, working with this project has been an eye-opening experience, and highlighted the need of innovative prevention methods powered by increased education and strong leadership in the YBSMS community.

[00:02:53]

Agee: Hi. I'm Joshua Agee from Jackson, Mississippi. Currently, I work with the BSL – “Better Sex with Latex” program with Dr. Leandro Mena and basically it's an NIH-funded program when we bring participants in and they're randomized to either an intervention group or a control group. The intervention group gets an hour education on HIV and STD prevention; the control group and the intervention group just does a survey on sexual habits. Every 3 months we do a follow-up to see how their sexual habits are changing, how the intervention group is either improving or not improving.

Artel: And Joshua, how did you become involved with this, and has your work with the NIH impacted what you want to now be focused on in your life?

[00:03:39]

Agee: Yes, definitely, definitely. So, my friend, they had this event. It's a basketball event – I love playing basketball. My friend invited me to this event. Now, of course I came 'cause, you know, gay guys playing basketball – I've never seen anything like this, so I jumped on it.

[00:03:52] So, I went there. I was introduced to so many people. I met Dr. Mena he told me to come in for an interview because he thought I would be a great recruiter for the study. And I came in for the interview, and I got the job.

[00:04:03] So, immediately I thought, “Why not use social media for recruitment – Instagram, Facebook, Jack'd – which is a gay site where guys meet up for whatever they might see fit to meet up for. And doing this study, I became very ... it was an emotional experience. I became very influenced from doing this study. I met so many guys. There was one guy – he had the same last name as me, and my last name is very unique ... so, he had the same last name as me. He came in, and I

got him to get tested. And when he got tested, I actually went to a research conference because I do lab-based research as well.

[00:04:38] So, I went to a research conference in Cleveland. He contacted me on Kik, which is a little messenger app, and he told me that he was HIV+. I literally had to leave the room and gather myself, because it made me so emotional. And from that point on I realized that ... it really made me realize how important this work is, ' cause ... [PAUSE] ... I'm sorry ... even when I was in college, my first year of college, my friend – his name was Jermaine Bolton – he was diagnosed with HIV and AIDS, but none of us never know; he never sought out treatment; he didn't know who to talk to. And he died at, like, the age 19, and that's so bad because if he would have ... if he would have gotten treatment, if he would have spoken to someone, he could have gotten help.

[00:05:29] I've always wanted to be a physician. I've always wanted to be a doctor. And I wanted to be an orthopedic surgeon. But doing this work, being around these people, and my friend that died ... people with their new diagnosis ... just hearing the things that these young men say ... they don't know what's going on ... they're so naïve to HIV; they're so naïve to STDs ... it just made me change my whole career path. I still want to be a physician, but I want to be an infectious disease doctor. I feel like this work is very, very important.

[00:05:56] And I feel like the best way for me to impact the lives of these young black men who have sex with men is for me to become an infectious disease doctor. There are so many guys here with such great ideas – you know, policy and advocacy work – but I'm not saying that that's not for me, but the thing for me is to be a doctor. I feel like there's a shortage of infectious disease doctors.

[00:06:18] There's a shortage of black doctors in the United States. So, there's a shortage of black doctors, and there's a shortage of infectious disease doctors ... there definitely has to be a shortage of black infectious disease doctors, especially

young black gay male infectious disease doctors. So, I really feel like that's the best way for me to possibly help.

[00:06:35]

Artel: So, you feel that you're now doing this work on his behalf?

Agee: Yes. And on the behalf of others in my community, because there's so many ...

[00:06:44] Growing up in the community that I grew up in, I didn't have much support because, you know, I grew up in church and ... I mean, I'm a Christian, but when I would go to church they would just talk about how nasty homosexuality was, how it was just nasty for two men to want to be together. But it's just something you feel; it's not something you can control; it's not something that you can just turn off. And they really need to be aware of that, but they aren't.

[00:07:09] So, no one ever taught me what I should do. No one ever taught me about prevention methods. They just said, "You're supposed to be with a woman; you're not supposed to be with a man." And these guys feel the same way, so when they go out and do things, they're so naïve. And when they go to different cities from ... 'cause we're from small towns, so when they go to these different cities, I mean, they're just ... They see all these gay guys and they just want to experience the lifestyle without knowing the consequences.

[00:07:36] So, I feel like research in the rural communities is very important, because these guys ... no one got to these big cities; they don't know what's going on. So many of these guys are getting deceived by older men who know that they're naïve, who know that they're ignorant, who know that they don't know what's going on. They know they're from somewhere else. They know they're "fresh meat," so to speak. So ...

[00:07:59] There are so many young black men who aspire to be doctors, and I feel like if there were some initiatives made where, okay, there was some kind of program put in place where we were funded, and they helped us to get good scores on our medical school entrance exams to go to medical school, and help fund us through medical school, perhaps we can become great infectious disease doctors.

[00:08:21] And there's a program in place for physicians in Mississippi. It's called the "Rural Physicians Program," and basically they pay for your whole med school. They pay for 4 years of your med school. And after you're done, you just have to ... however many years they paid for in medical school – that's how many years you have to work in that community – in a rural community. So, I mean, it's a win-win situation. So, I believe that something like that could take place.

[00:08:45] And there's also an Early ID program that my school has with Brown University where you don't even have to take the Medical College Entrance Exam; you're just directly admitted to college through a series of interviews your sophomore year. They can just get some of these guys who are interested in this, who are very passionate about this, and just come up with something – just something – because right now there's nothing.

[00:09:08]

Artel: As a leader in this movement – as an advocate – what are the most important next steps? What would you like to see happening to initiate? And how does that connect with your focus on becoming an infectious diseases doctor around the issue of HIV; and also overall both physical and emotional health?

Agee: I think that community leaders need to become advised, such as pastors and leaders in the church, 'cause even at my church, people talk about public health

all the time. They talk about diabetes, cancer, cancer risk, obesity – they talk about all these things – but they always leave out HIV [and] STDs. And they don't realize that they're really hurting their upcoming generation, whether it's young black gay men or young white gay women, or whoever. Everybody is affected by this disease, not only young black gay men, because we're a part of the whole population. We're part of the population, and every ... it's like a cascade effect, and we're affected ... If I'm affected, you're affected. You know what I mean? Like, everybody's affected by this. So, I believe that it starts in those leadership positions, like the mayors. Everyone needs to be educated.

[00:10:22] I've been so inspired by this conference, like, all of these young men – they really inspire me. Like, when I thought of doing HIV/STD work, I've always thought of working for someone. I never thought I can just go out and do it on my own. So now, I'm so inspired. I'm ready to get home; I'm ready to look up some of these funding agencies to see what I can actually do – to see what I can do to actually get more young black guys who aspire to be physicians to getting into this field and to help them progress through that field so they can be great at what they do.

[00:10:54] I just want to say that I feel like this is a really serious, important piece of this puzzle to ending the HIV epidemic.

[00:11:00] Joshua Agee from Jackson, Mississippi.

Artel: Thank you.

[END OF INTERVIEW]