

FACTORS ASSOCIATED WITH HIGHER RISK SEXUAL BEHAVIOUR AMONG MEN WHO HAVE SEX WITH MEN IN LATVIA

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BACKGROUND

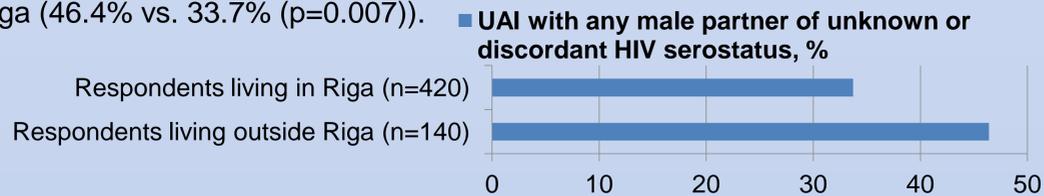
According to preliminary data from the European MSM Internet Survey (EMIS), the percentage of MSM who have reported sexual behaviour which might be associated with higher risk of HIV transmission in Latvia is fifth highest among 38 European countries. The aim of this study is to investigate the possible associated factors in the risky sexual behaviour among MSM.

METHODS

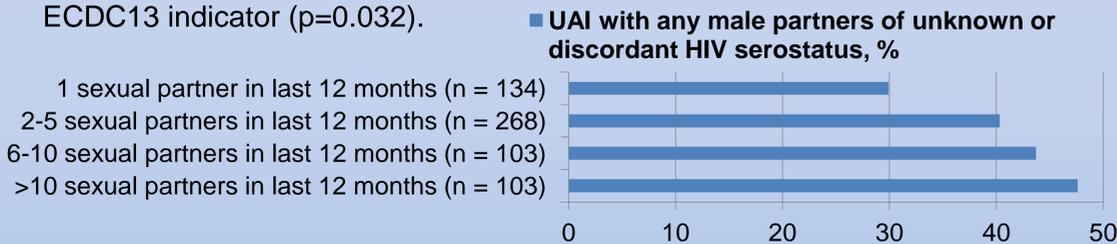
In 2010, Latvia participated in EMIS. In data analysis, 708 valid questionnaires were included. As an indicator for the risky sexual behavior we have used the European Centre for Disease Control 'behavioural' surveillance indicator No 13 (ECDC13), which gives the percentage of respondents who have engaged in unprotected anal intercourse (UAI) with any male partners of unknown or discordant HIV serostatus in the last 12 months. After excluding those who have not had sex with men in last 12 months, along with missed responses, the actual number of valid questionnaires was 634. The ECDC13 indicator was estimated at 38.2%. Furthermore, different factors were analysed in order to find statistically significant associations with risky sexual behaviour, and a multinomial regression analysis was conducted to determine the independent effect of each factor to the result.

RESULTS

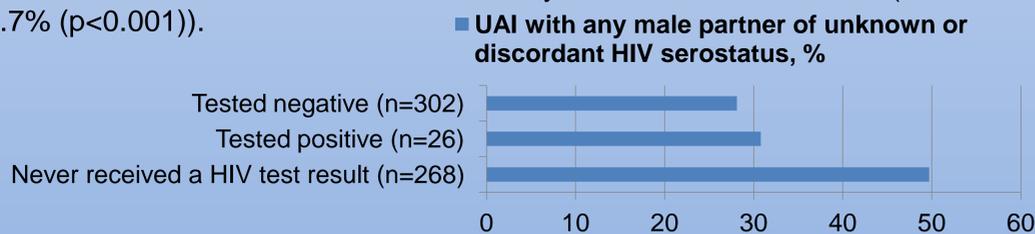
□ No significant differences were found regarding the age, the level of education, the experience of homophobic abuse, or employment status of the respondents, but ECDC13 indicator was higher for respondents living outside Riga (46.4% vs. 33.7% ($p=0.007$)).



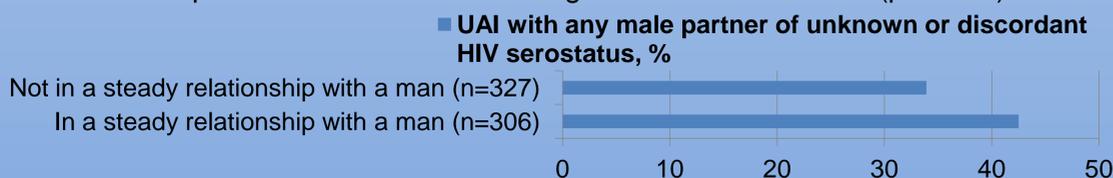
□ The higher the number of sex partners in the last 12 months the higher the ECDC13 indicator ($p=0.032$).



□ The higher risk behaviour was more common among MSM who have less knowledge about the ways of preventing sexual transmission of HIV ($p=0.009$). The most significant difference was found comparing those respondents who were tested for HIV and those who said they have been never tested (28.4% vs. 49.7% ($p<0.001$)).



□ Another important finding was that respondents who were in a steady relationship with a man also showed higher ECDC13 indicator ($p=0.027$).



□ Lastly, in this study we did not find statistically significant differences in the level of the mean internalised homonegativity score between those who reported UAI with any male partners of unknown or discordant HIV serostatus in the last 12 months and those who did not.

□ All the factors identified to be associated with risky sexual behavior remained statistically significant after adjustment (see tab. 1).

Table 1. Factors independently associated with UAI with any male partners of unknown or discordant HIV serostatus*

	Sig. p	OR	95% CI
Living outside Riga (vs. living in Riga)	0.037	1.6	1.0 – 2.5
> 10 sexual partners in last 12 months (vs. 1 sexual partner in last 12 months)	<0.001	4.0	2.1 – 7.7
6 – 10 sexual partners in last 12 months (vs. 1 sexual partner in last 12 months)	0.001	3.1	1.6 – 6.0
2 – 5 sexual partners in last 12 months (vs. 1 sexual partner in last 12 months)	0.003	2.2	1.3 – 3.9
Having a steady partner (vs. not having a steady partner)	0.003	1.8	1.2 – 2.8
Weak knowledge about HIV transmission prevention (UNGASS 14) (vs. correctly answers all 5 questions about HIV transmission in the questionnaire)	0.017	1.7	1.1 – 2.6
No HIV test result received (vs. tested for HIV, both negative and positive)	<0.001	3.4	2.2 – 5.2

*Factors used in the multinomial regression analysis: place of residence, number of sexual partners, test for HIV, knowledge on HIV transmission, steady sexual partners, level of education and experience of homophobic violence.

CONCLUSIONS

The study has shown that the higher risk sexual behaviour among MSM in Latvia is associated with a higher number of sexual partners during last 12 months, with having a steady male partner, residing outside Riga, weak knowledge on the ways of preventing sexual transmission of HIV and not having tested for HIV.

The fact that non-concordant UAI is associated with being in a steady partnership may indicate the low level of communication about HIV and testing within gay couples in Latvia due to stigmatisation and taboo of the HIV/AIDS issues within the gay community. This is very important finding that has to be addressed and discussed both by epidemiologists and LGBT and HIV/AIDS activists.

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