

HIV infection risk behaviours among MSM in Khanh Hoa province

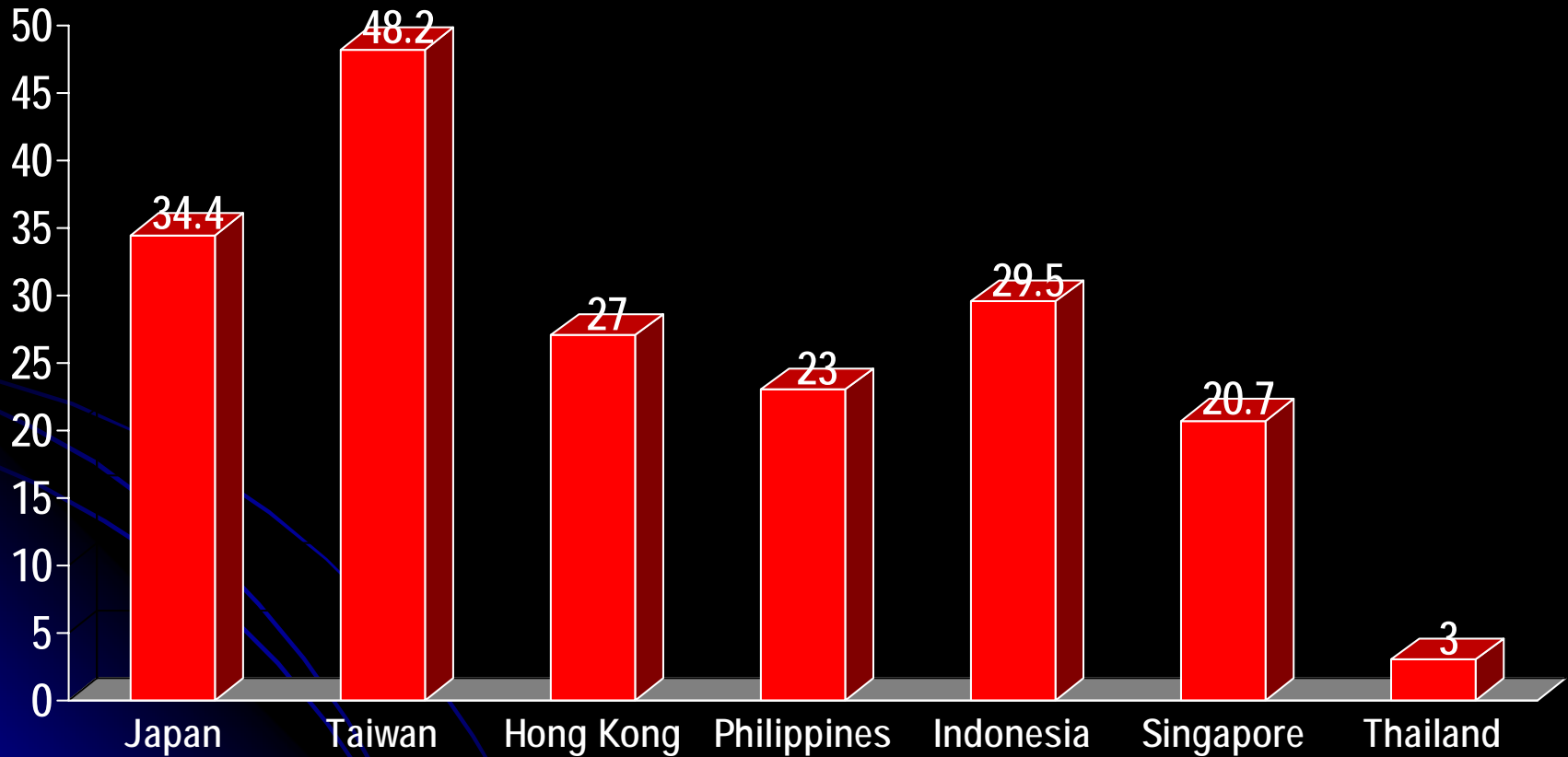
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and collaborators

1. Overview: MSM and HIV

- UNAIDS:

- 5-10% HIV infection in the world is through homo sexual intercourse
- Homosexual is considered a principal cause leading to HIV infection in many countries: Western Europe, North America, Australia, New Zealand and countries in South America.
- Therefore, in many countries sexual relationships among MSM has not been properly acknowledged.

The percentage of HIV infection among homosexual and bisexual behaviours in some countries in Asia



MSM and HIV in Vietnam

MSM research in Vietnam

- MSM in Ho chi Minh city have high risk of HIV infection due to multi sexual partners and unsafe sex (Colby, 2003)
- MSM in Nhatrang are poorly aware of HIV infection and prevention (Wilson, 1999)
- HIV infection rate among MSM in 2004 accounted for 8% (Central Institute of Sanitation and Epidemiology, 2005)

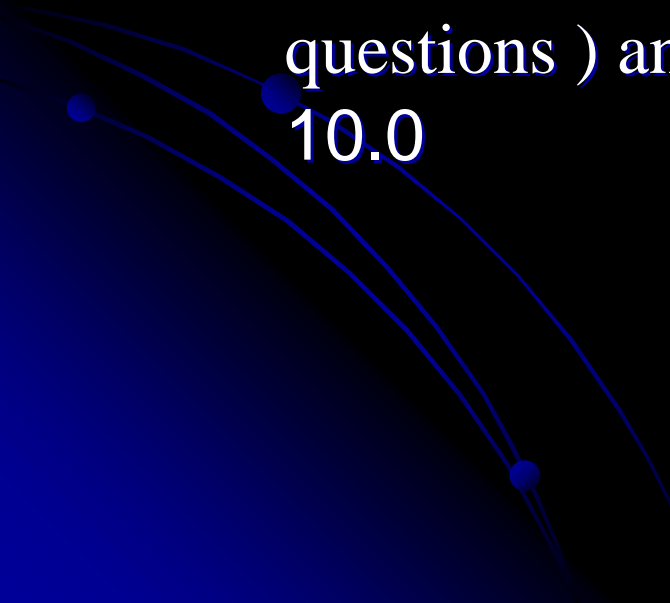
MSM and HIV in Vietnam

- There is few research about MSM done in Vietnam
- We have little information about behaviors and risks of MSM who live in small towns and in rural areas.
- HIV infection among MSM in Vietnam has been evaluated only once in Ho chi Minh city
 - In this research, all MSM were drug addicts so it was not clear whether HIV infection risks were due to homosexual behaviours or drug injection

2. Research objectives

- To identify medical and social services necessary for MSM in Nhatrang and in nearby areas of Khanh Hoa province.
- To identify current risk behaviours and knowledge about HIV/STI among MSM in Khanh Hoa
- To assess the HIV infection rate among MSM in Khanh Hoa.

3. Research methodology

- To collect quantitative data :
 - To sample MSM in this research through Respondent Driven Sampling (RDS)
 - 295 MSM responded to a questionnaire (95 questions) and data analysis was done with SPSS 10.0
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Research methodology

(cont)

The number of MSM respondents in Khanh Hoa

● Nha Trang	79
● Cam Ranh	78
● Dien Khanh	55
● Ninh Hoa	34
● Van Ninh	49
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In total	295

4. Results

The main findings are as follows



Demography data

Average age	24
Schooling :	8
Living with family :	85%
Single:	92%
Income \leq 500.000 VND:	78%
Drinking:	71%
Using drugs:	1.7%

Sexual Orientation

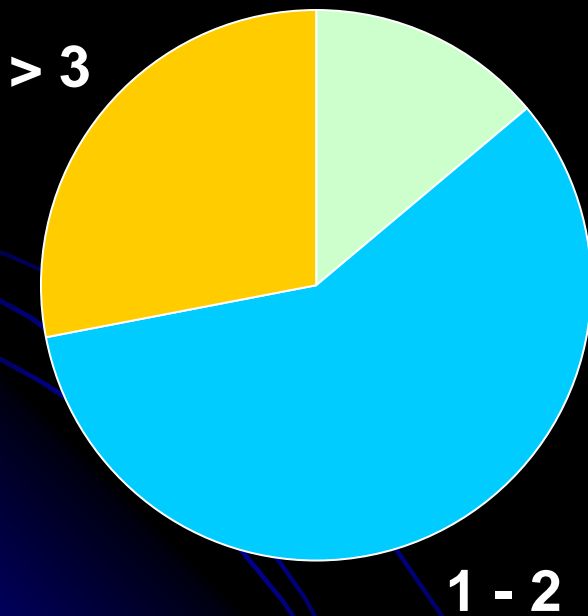
Most of MSM did not acknowledge to have homosexual intercourse or to be MSM



Number of sexual partners

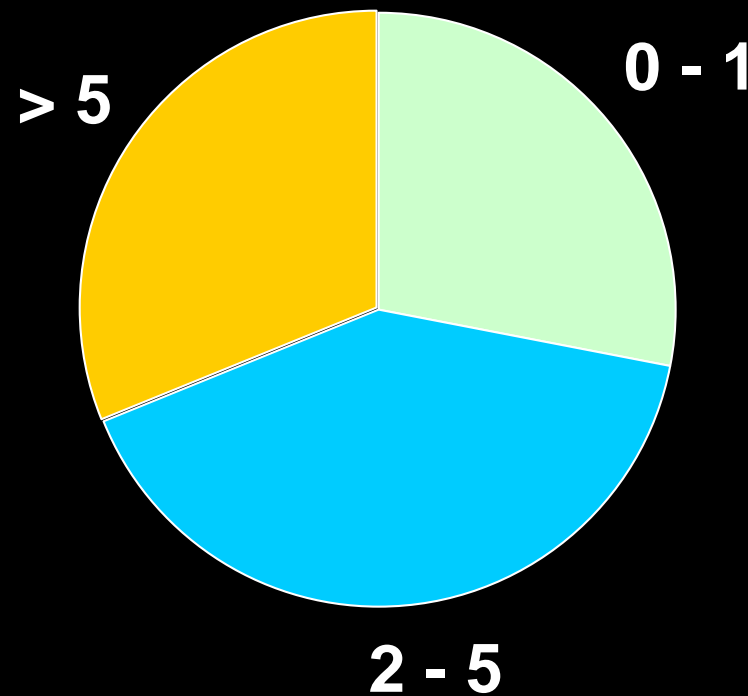
Most of MSM had few sexual partners, but 1/3 of them had many sexual partners

No of sexual partners during the last month



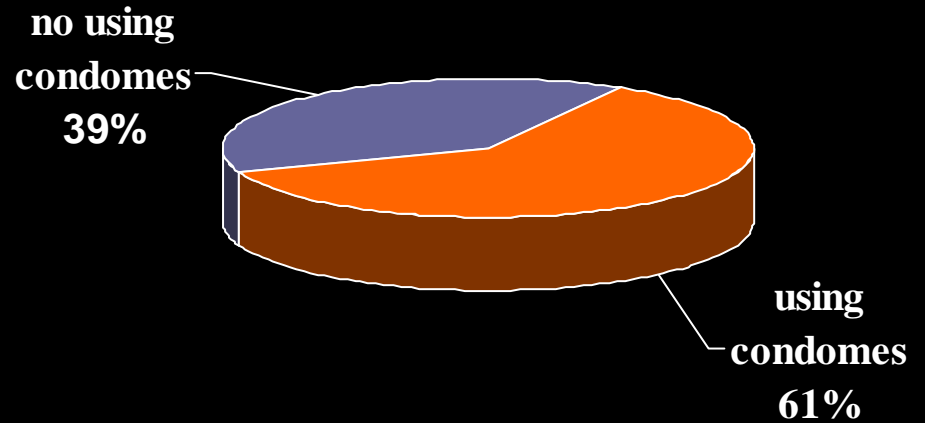
average = 1

No of sexual partners during the last 12 months

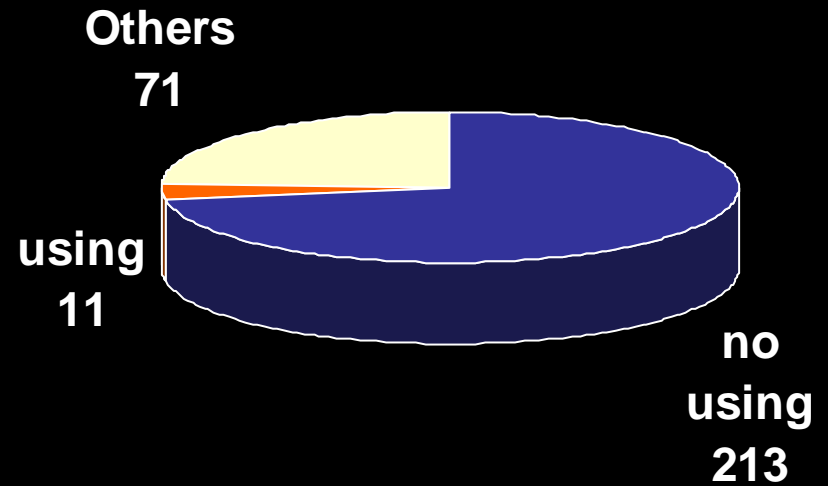


average = 3

**High rate of using
condoms:**

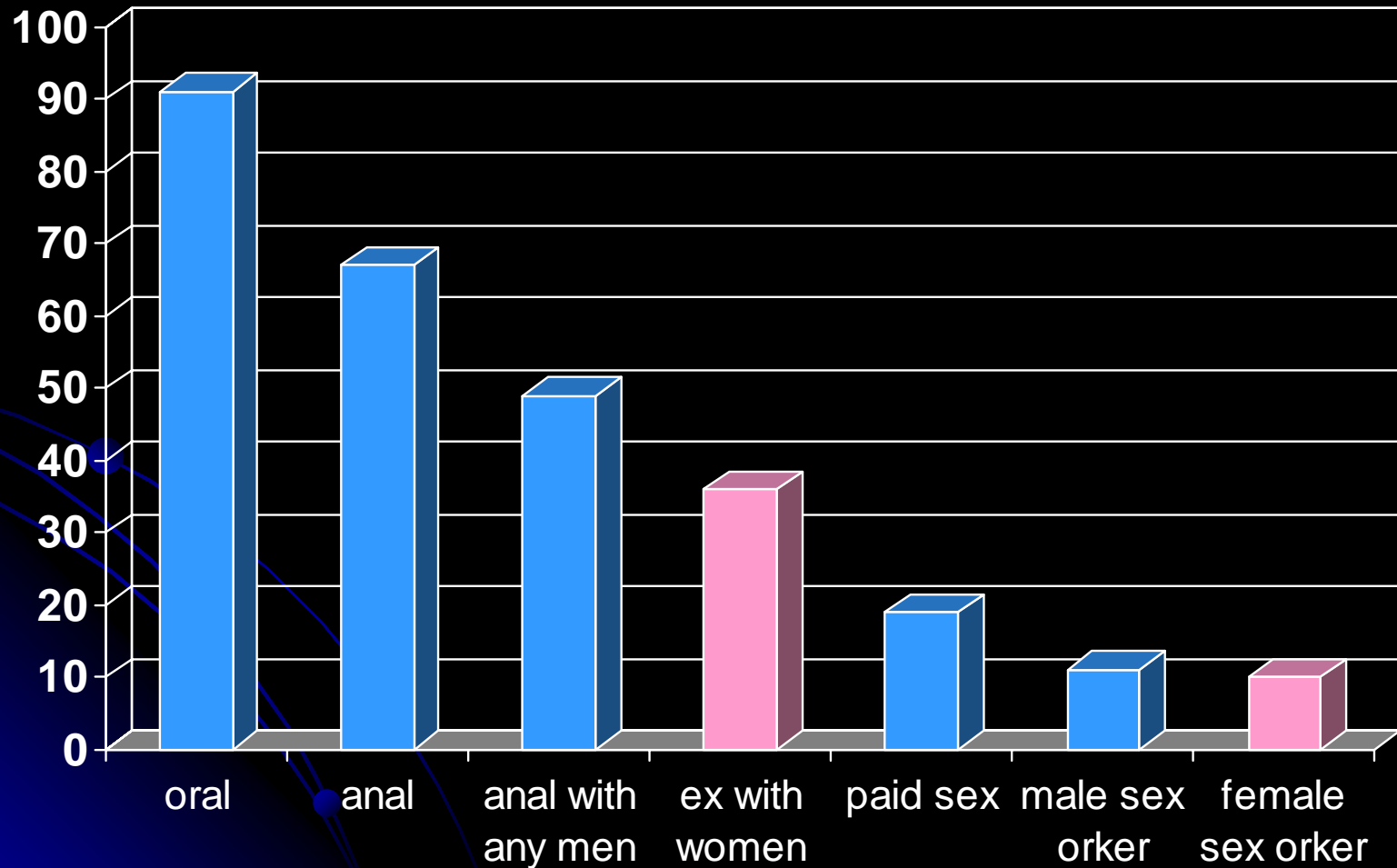


**But low rate of using
lubricant**

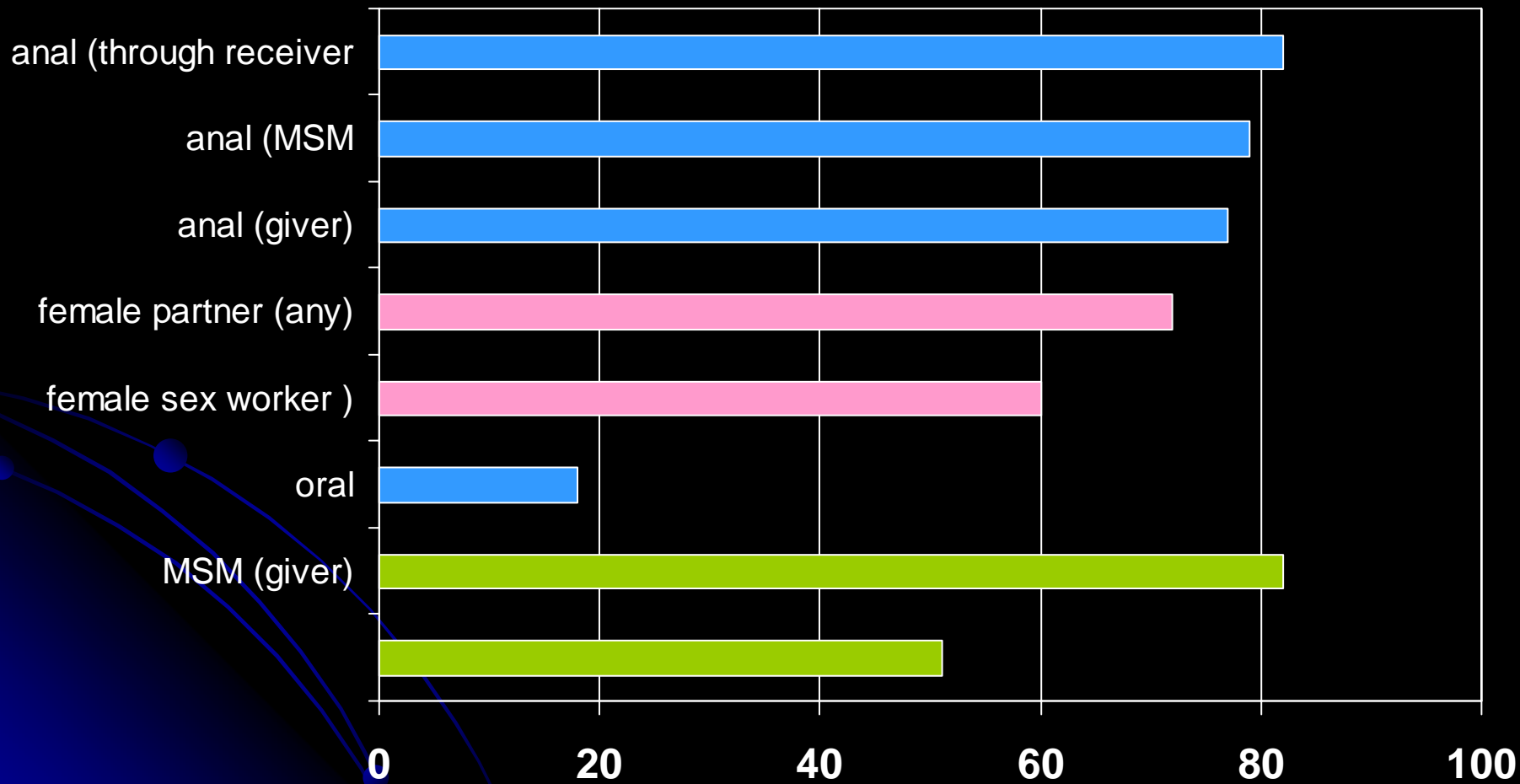


MSM sexual behaviours

Proportion of MSM having sexual intercourse during the past 6 months

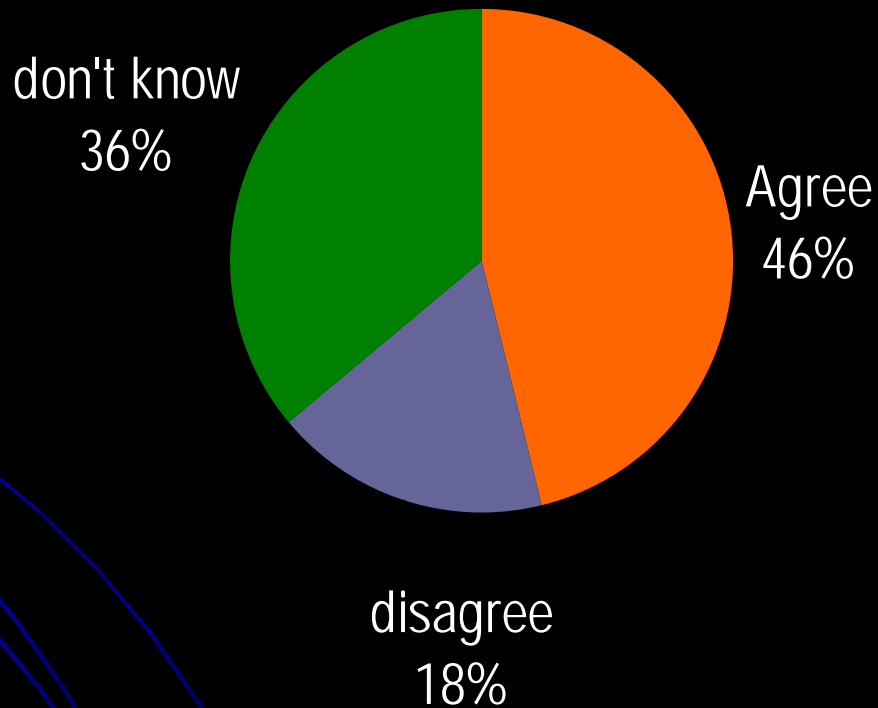


Using condom in the last sexual intercourse



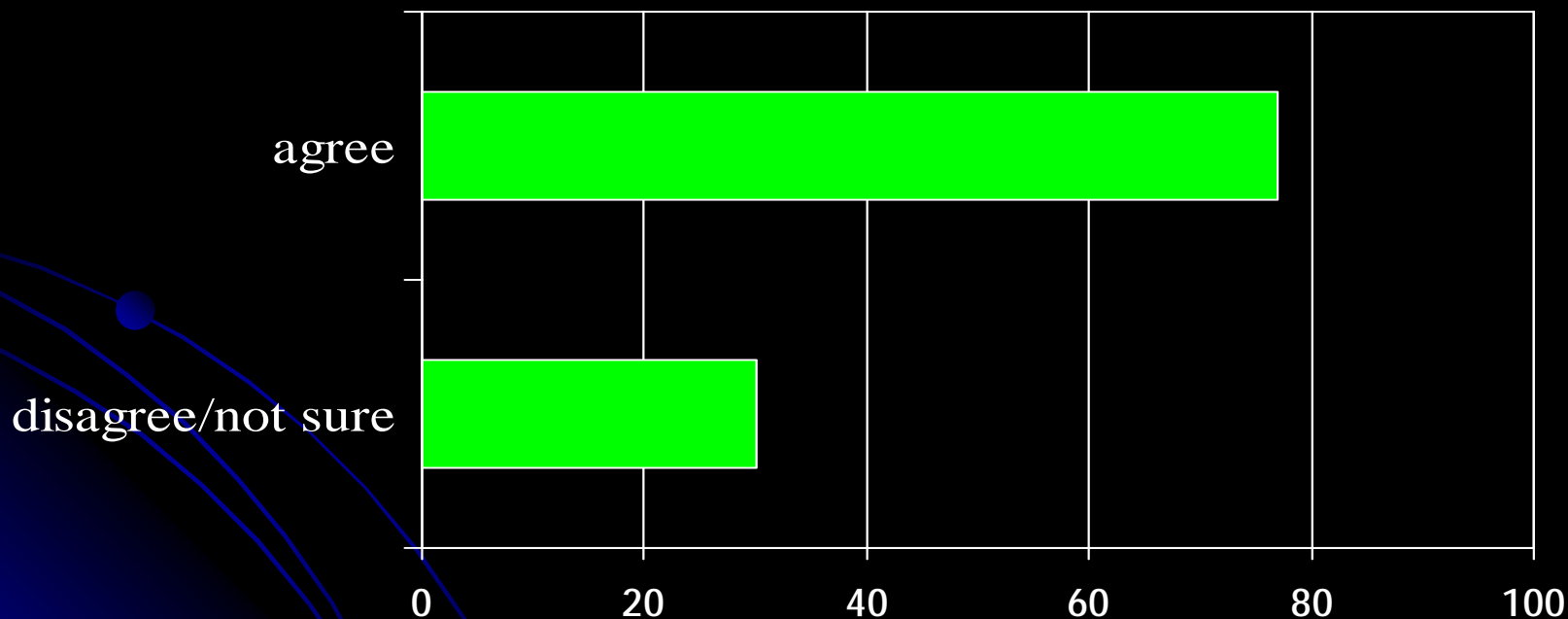
Awareness and HIV infection risk

“homosexual behaviour has higher HIV infection risks”



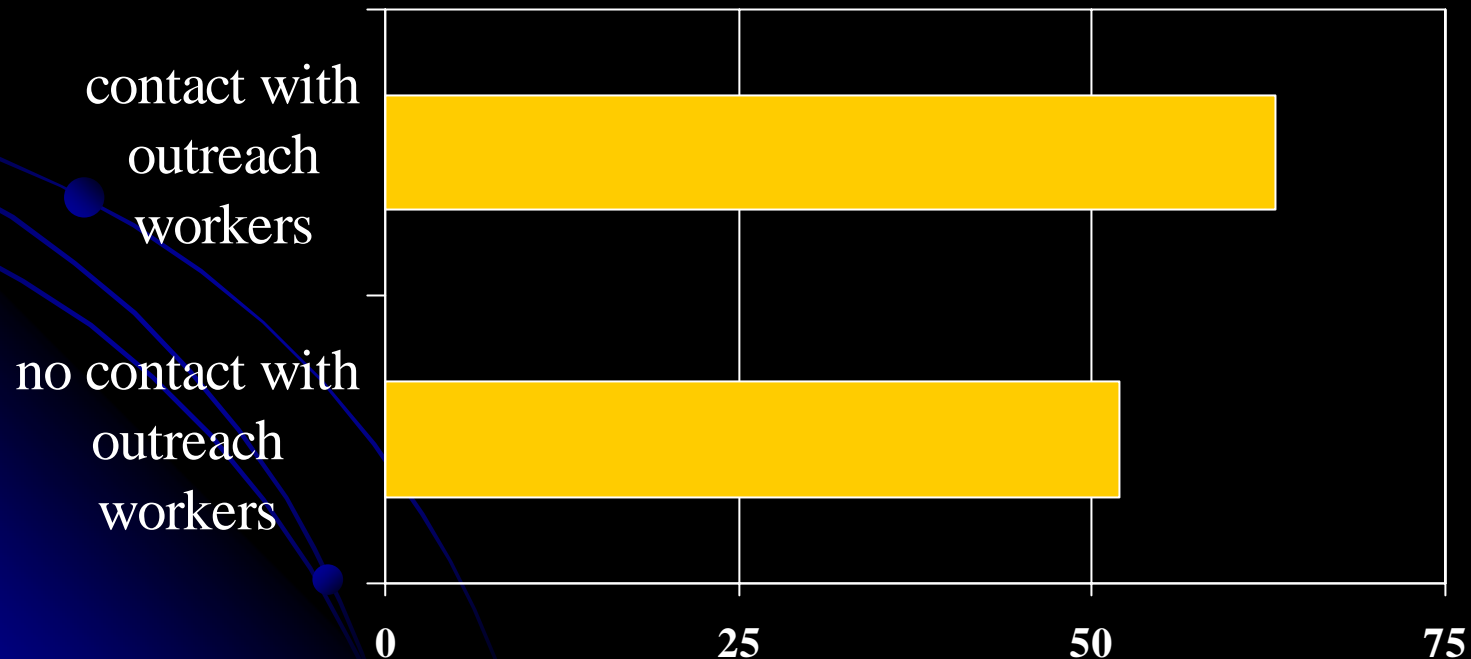
MSM will use condom more if knowing male-male sex has high risks

MSM male sex workers will use condoms and believe that MSM have high risks of HIV infection

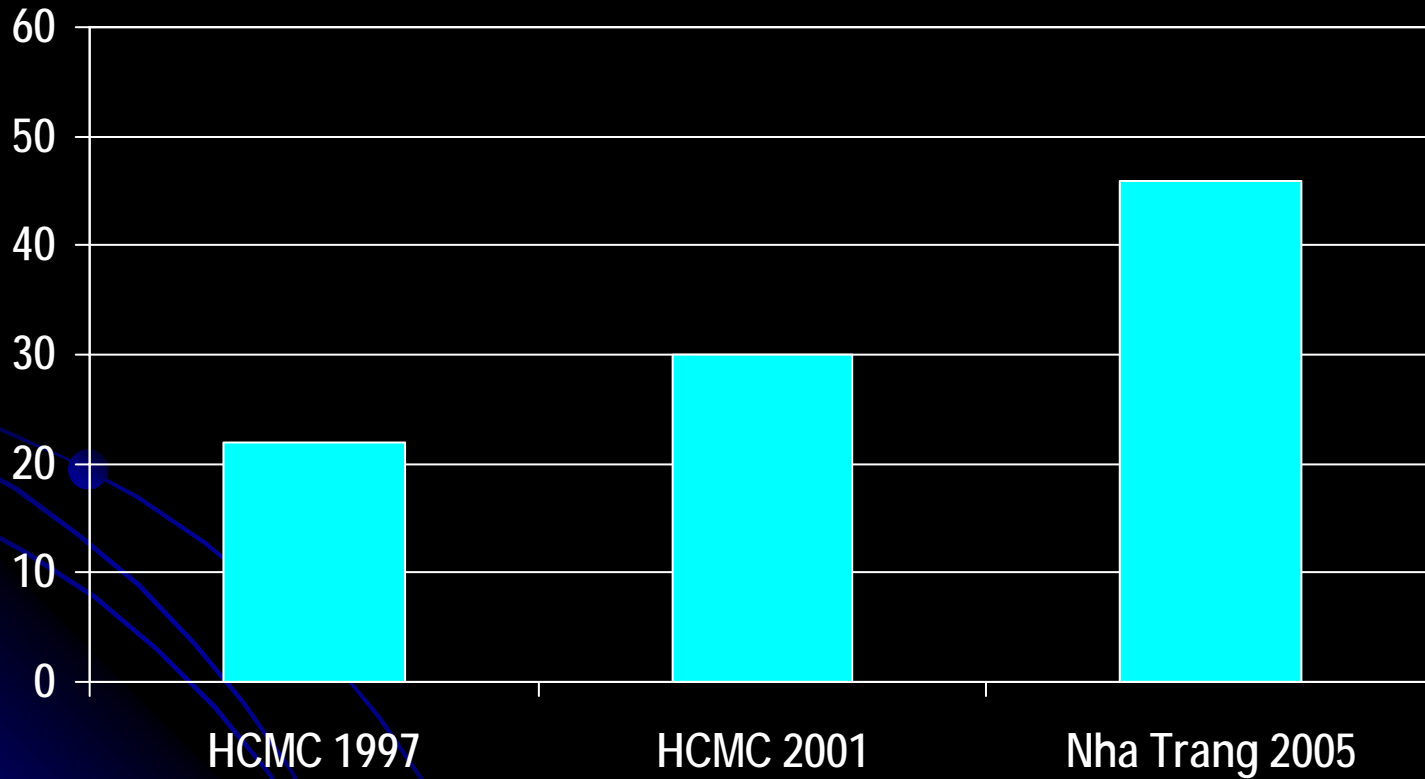


MSM will use condoms more if contacting Peer educators

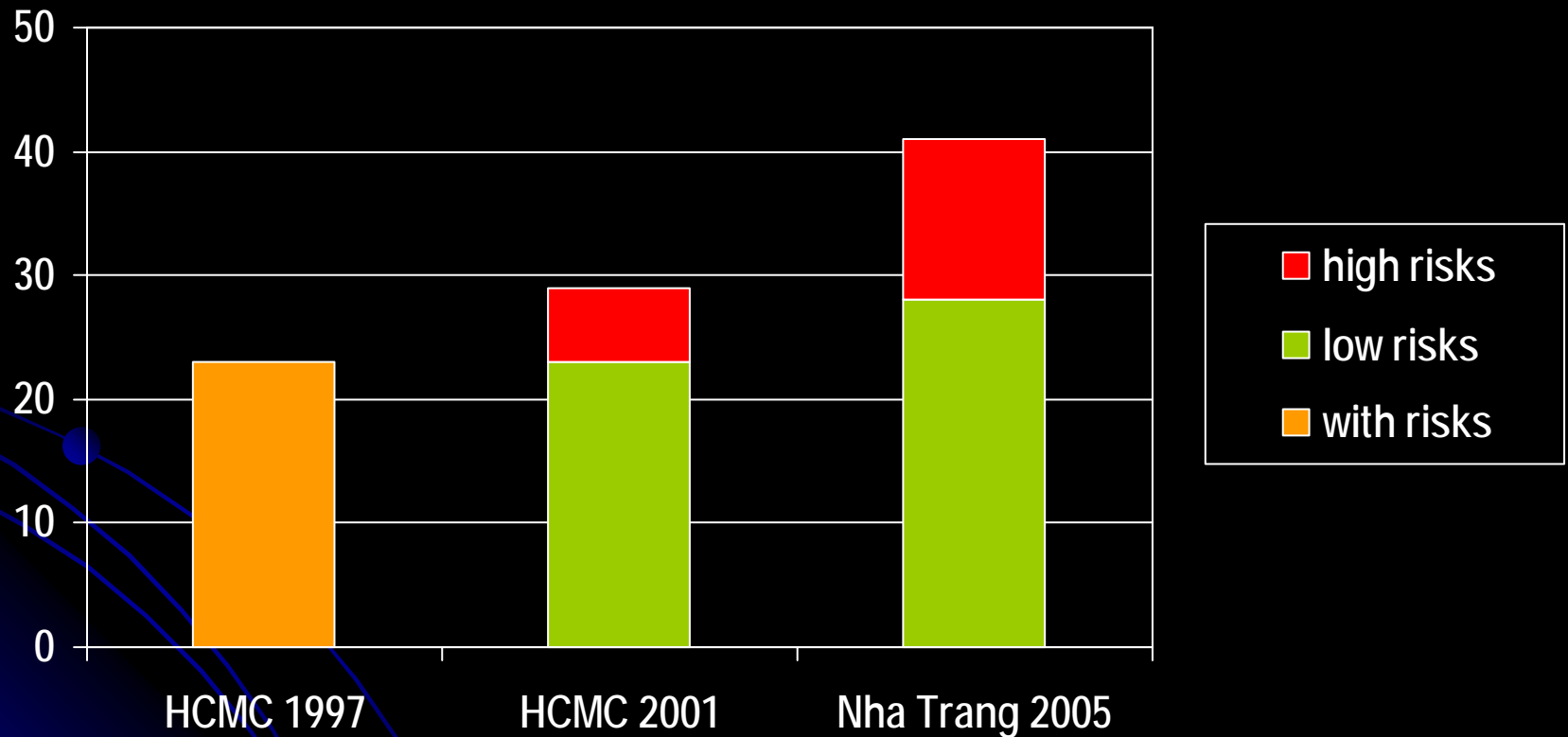
Condom using and Peer Educaftors contact



Good news: Many MSM are aware of high risks in male-male sexual intercourse



Good news: MSM are aware that they have high risks of HIV infection




5. Conclusions

- HIV infection rate of MSM in Khanh Hoa was very low
- Most MSM admitted to have sex with both males and females or with females
- The outreach/peer education program had initial success in changing attitudes and behaviours of MSM
 - MSM were aware of HIV infection risks
 - MSM used more condoms than before

Conclusions (cont)

However,

Approximately 1/3 of MSM had many sexual partners

- Condoms were not frequently used
 - Lubricant was little used
 - Outreach workers did not contact many MSM yet
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6. Recommendations

- MSM peer education program needs to be strengthened
- Drop-in center for MSM should be established in Khanh Hoa
- Further contact should be extended to MSM in rural areas
- IEC materials for MSM should be increased
- MSM should be encouraged to use Lubricants
- Internet should be used to contact MSM who refuse direct contacts with outreach workers or hesitate to come to counseling centres.

Thank you

