

Barometre Gay, a survey in commercial gay venues Paris (France): 2000 and 2002



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BACKGROUND

In France as in other countries, increases in sexual risks have been described amongst men having sex with men (MSM). In 2000 and in 2002 in Paris, a survey was conducted in commercial gay venues, in order to evaluate risk behavior among MSM with high sexual activity.

METHODS

• Short anonymous self-administered questionnaires were displayed or handed out in Parisian commercial gay venues (bathhouses, sexclubs, bars, discos) for a period of 2 months in 2000 and 6 months in 2002, in collaboration with the gay union SNEG (Syndicat national des entreprises gaies).

• Records of - sociodemographics characteristics,
- self reported HIV testing and status,
- number and type of sexual partners, sexual behavior with casual partners, sexually transmitted infections (STI), using a 12 months recall period.

• Risk behavior was defined as having at least one unprotected anal intercourse (UAI) with a casual partner in the last 12 months. Multivariate analysis model included all variables of merged surveys.

RESULTS

(Others results available: posters MoPeD3969, WePeC6066)

- Number of questionnaires collected

n = 2 026 in 2000

n = 2 892 in 2002

- Same venues in 2000 and in 2002, n = 113

There were no significant difference between respondents in 2000 and 2002, except for age

Table 1: Characteristics of respondents

	2000 (%) n = 2 026	2002 (%) n = 2 892
Gender Male	100	100
Mean age	34 yr	36 yr
Lower education	37	38
Occupation - management	35	35
- white collar	52	51
- blue collar	4	6
- students	2	4
Living in Paris area	87	87
Gay / homosexual identity	87	87

• There were no difference between 2000 and 2002 concerning HIV and STI; over 90% had at least one HIV testing (life period), 15% reported being HIV (+) and 11% reported STI in last 12 months.

• Sexual relationship statistics were stable between 2000 and 2002; 60% had a steady partner in the year and 53% reported over 10 partners per year. Regular sex-on-sites attendances were constant both years.

Sex practice with casual partners showed increase of risk behaviors from 2000 to 2002

- Receptive oral sex with ejaculation
 - ➔ 25% to 28% (p=0.02)
- Anal sex practice were over 92%, each year
 - ➔ Always anal receptive 10% to 13% (p=0.005)
 - ➔ Always anal insertive 9% to 14% (p=0.000)
- UAI (at least once in last 12 months)
 - ➔ 33% to 37% (p=0.01)

UAI associated factors are presented in table 2 (univariate analysis) and table 3 (multivariate analysis).

Table 2: UAI association* with selected variables

	2000	2002
Age < 25 yr	+	+
Lower education	-	+
> 10 partners / yr	+	+
Sex-on-site	-	-
Oral sex with ejaculation	+	+
STI in the last 12 months	+	+
No HIV test (never)	-	-
HIV (+) status	+	+
HIV uncertain status	+	+

* + : significant independent association with UAI, - no association

UAI practice proportions were different according to the respondents HIV status: 26% when they reported being HIV(-) and 57% when HIV (+).

HIV status of UAI partners was often unknown (76%)

Table 3: UAI significant independent predictors (p<0.05) n=3 255 (merged surveys)

		Ajusted OR	CI (95%)
HIV status	HIV (-)	1	
	No test	ns	
	Uncertain status	2.2	[1.8-2.7]
Oral sex with ejaculation	HIV (+)	3.8	[3.1-4.8]
	No	1	
STI (last 12 months)	Yes	2.7	[2.3-3.1]
	No	1	
Age < 25	Yes	2.0	[1.5-2.5]
	No	1	
Lower education	Yes	1.7	[1.3-2.1]
	No	1	
> 10 partners / yr	Yes	1.3	[1.1-1.6]
	No	1	
Survey year	Yes	1.2	[1.0-1.5]
	2000	1	
	2002	1.2	[1.0-1.4]

CONCLUSION

This survey conducted in Paris in 2000 and in 2002, described MSM with high sexual activity. Gay venues groups in 2000 and 2002 were very similar, except for their sexual practices with casual partners, indicators of HIV and STI risk attitudes. Barometre Gay confirmed that risk behavior increased in Paris among MSM attending commercial gay venues between 2000 and 2002. Young age, lower education, HIV positive or uncertain status, STI background were important UAI risk factors. Education programs must continue in all commercial gay venues (sex-on-site or not) and target specific groups such as young men and HIV positive men.