

**The Effects of a
Comprehensive Community-
Based Prevention Program for
MSM in One City in China**

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Presenter Disclosures

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(1) The following personal financial relationships with commercial interests relevant to this presentation existed during the past 12 months:

No relationships to disclose

Purpose

- Evaluate the effect of a comprehensive intervention on HIV/AIDS knowledge and behavior of men who have sex with men (MSM).

Background

- Men who have sex with men (MSM) are the highest risk group for HIV/AIDS in China.
- A survey of 486 MSM in 31 cities of Mainland China found 63.6% had anal intercourse thought to be the most risky HIV behavior.

Background

- At the end of 2005, 7.3% of all estimated human immunodeficiency cases in Mainland China were attributed to MSM behaviors.
- In 2007, 12.2% of 50,000 new HIV cases in Mainland China were attributed to MSM behaviors

The Program

- Beginning in 2002, with support from the China-UK HIV/AIDS Prevention and Care Project, a comprehensive community HIV/AIDS program for MSM was begun in Kunming, Yunnan Province in southeastern China.

The Program included:

- telephone hotline counseling,
- outreach services,
- peer education,
- free distribution of information and education materials (IEC's),
- expanded condom availability and distribution,
- distribution of free lubricants,
- provision of sexually transmitted infection (STI) services,
- available voluntarily counseling and testing services (VCT),
- efforts to educate the public about gays to decrease discrimination.

The Program

Services were made available at places commonly used by MSM for meeting and congregating. The management of bars and bath houses were recruited to assist in implementing the program.

- gay bars,
- bath houses,
- parks,
- public toilets
- MSM meetings

Research Questions

- ***How did clients utilize voluntarily HIV consultation and testing services?***
- ***How did the Program affect knowledge about HIV prevention and transmission?***
- ***How did the Program effect condom use during sex?***

The Sample

- Respondents were recruited in locations where MSM commonly gathered: gay bars, bath houses, parks, public toilets and MSM meetings.
- Data were gathered by confidential face-to-face survey interviews.
- Data collectors were trained and supervised by project staff following standard protocols.
- Verbal informed consent was obtained from all respondents before interviews commenced.

The Sample

	2004	2005	2006	Total
Park	67	115	85	267
Gay bar	75	160	144	379
Bathing room	41	69	45	155
Public toilet	39	53	43	135
Total	222	397	317	936

The Survey Instrument

The Behavior Surveillance Survey developed by the China-U.K. HIV/AIDS Prevention and Care Project contained:

- Demographic characteristics.
- Sexual behaviors.
- Knowledge about HIV/AIDS transmission and prevention,
- Awareness and utilization of HIV/AIDS services available in the community.

Utilization of Program Services

	2004		2005		2006	
	N	%	N	%	N	%
Free condoms	214	45	396	65	317	78
Free lubricants	213	32	396	50	317	62
STD service cards	212	9	396	31	317	50

All significant at p < .01

Utilization of Program Services

	2004		2005		2006	
	N	%	N	%	N	%
Voluntary Consultation/ Testing	212	30	396	22	317	42
IEC STI/AIDS materials	212	64	396	76	317	85

All significant at p < .01

Knowledge

	2004		2005		2006	
	N	%	N	%	N	%
HIV Prevention	222	59	397	74	317	72
HIV Transmission	222	26	397	53	317	65

Condom Use

	2004		2005		2006	
	N	%	N	%	N	%
Used a condom the last time when having non commercial anal sex	134	47	332	61	278	76
Every time, during the last 6 months, used a condom when having non commercial anal sex	139	30	332	44	278	51

Condom Use

	2004		2005		2006	
	N	%	N	%	N	%
Used a condom the last time when having commercial anal sex	29	35	44	77	61	81
Every time, during the last 6 months, used a condom when having commercial anal sex	31	32	45	56	62	74

Number of services & Knowledge

	Number of intervention services received during the past 12 months		
	0-2	3-5	6-8
Knew that person infected with HIV cannot be identified from appearance	79.2%	87.0%	88.0%
Knew that a person may not be infected by mosquito bites	61.6%	72.7%	83.0%

Number of services & Knowledge

	Number of intervention services received during the past 12 months		
	0-2	3-5	6-8
Knew that a person can protect himself from HIV by using a condom every time he has anal sex	69.4%	75.4%	84.8%
Knew that a person cannot protect himself from HIV by washing the genital or anal area after sexual intercourse	74.4%	78.7%	84.4%

Number of services & Behavior

	Number of intervention services received during the past 12 months		
	0-2	3-5	6-8
Used a condom at the last non commercial anal sex	57.8%	68.3%	72.8%
Used a condom every time when having non commercial anal sex during the past 6 months	39.5%	52.7%	53.7%

Number of services & Behavior

	Number of intervention services received during the past 12 months		
	0-2	3-5	6-8
Used a condom at the last commercial anal sex	57.1%	73.5%	83.0%
Used a condom every time when having commercial anal sex during the past 6 months	45.6%	64.2%	69.7%

Conclusions: Utilization of Program Services

- Findings suggest that if services are provided MSM will utilize them.
- Increase over time in service use, suggests that programs need to be long-term for maximum benefit.

Conclusions: Knowledge about HIV prevention and transmission

Knowledge of HIV prevention increased only slightly.

- 59%-72% from Year 1 to Year 3

Knowledge of HIV Transmission increased dramatically.

- 26%-65% from Year 1 to Year 3

Conclusions: Knowledge about HIV prevention and transmission

- Knowledge was higher the more services that were received.
- Suggests contact with service providers improves understanding of HIV prevention and transmission.

Conclusions: Condom use

- Condom use for commercial sex more than doubled over the 3 years.
 - 35%-81% Last time
 - 32%-74% Every time
- Condom use for non-commercial sex increased more slowly.
 - 47%-76% Last time
 - 30%-51% Every time

Conclusions: Condom use

- Condom use was higher for commercial sex than non-commercial sex.
 - 81% versus 76% Last time
 - 74% versus 51% Every time
- Suggests less caution with regular or relationship-based partner.

Conclusions: Condom use

- Condom use was higher the more services that were received.
- Suggests contact with service providers reinforces positive risk reduction behavior like condom use.

Conclusions

- A comprehensive intervention on HIV/AIDS knowledge and behavior of men who have sex with men (MSM) can be effective in reducing HIV/AIDS risk.
- Long-term program continuation is associated with more positive program outcomes.

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