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# KNOWLEDGE, TESTING AND ACCESS TO HIV/STI SERVICES AMONG MSM BY SIZE OF AREA OF RESIDENCE IN SPAIN

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### OBJECTIVE

To compare knowledge, testing practices and access to HIV/STI services among Spanish men who have sex with men (MSM) who live in different population size of area of residence.

### METHODS

The European Men to Men Internet Survey (EMIS) was implemented in 38 European countries from June to August 2010. Data on sociodemographics, sexual behaviour, HIV/STI prevention needs/services and other variables were obtained using an online questionnaire, translated into 25 languages. The sample was divided into 3 categories by population size of the reported area of residence (a:less than 100,000; b:100,000-500,000, and c:more than 500,000). The chi-square test was used to evaluate the association between population size of area of residence and different variables.

#### RESULTS

In total, 13,111 men completed the survey. The population distribution of respondents is shown in the Figure 1.



As you can see in Table 1, MSM who live in an area of residence of fewer than 100,000 people were more likely to remain untested for HIV (a:34.6% vs. b:30.8% and c:20.3%, p<0.001) and STI (a:55.4% vs. b:50.4% and c:36.7%, p<0.001), compared to MSM who live in larger cities. Access to free or affordable HIV testing (a:77% vs. b:84.3% and c:91.2%, p<0.001) or STI testing (a:72.8% vs. b:79.2% and c:87.1%, p<0.001) was lower among MSM who live in a city with fewer than 100,000.

Likewise, in Table 1 you can see that knowledge about HIV transmission (more than 80% of questions in this issue answered correctly in the questionnaire) was lower among MSM who live in an area with fewer than 100,000 residents (a:35.5% vs. b:39.8% and c:44.6%, p<0.001). These men were also less likely to be reached by HIV prevention programmes (a:61.1% vs. b:63.4% and c:67.8%, p<0.001).

Table 1. Knowledge, testing and access to HIV/STI services according to size of population of

	Number of inhabitans						
	More than 500.000		100.000 – 500.000		Less than 100.000		Р
	n	%	n	%	n	%	
Testing for HIV (n=12557)							<0,001
Tested	5147	79,7	2023	69,2	2073	65,2	
Untested	1309	20,3	900	30,8	1105	34,6	
Testing for STI (n=11924)							<0,001
Tested	3919	63,3	1368	49,6	1328	44,6	
Untested	2268	36,7	1390	50,4	1651	55,4	
Access to HIV testing (n=11424)		,		,		,	<0,001
No access	507	8,8	424	15,7	685	23,0	
Free or affordable testing	5237	91,2	2283	84,3	2288	77,0	
Access to STI testing (n=12548)							<0,001
No access	831	12,9	608	20,8	866	27,2	
Free or affordable testing	5614	87,1	2313	79,2	2316	72,8	
Knowledge of HIV transmission <sup>1</sup>		,		,		,	<0,001
(n=12622)							
Know 80% or less	3591	55,4	1771	60,2	2062	64,5	
Know at 100%	2894	44,6	1169	39,8	1135	35,5	
Reached with HIV prevention		,		,		,	<0,001
programmes (N=12614)							
No	2084	32,2	1076	36,6	1243	38,9	
Yes	4398	67,8	1862	63,4	1951	61,1	
<sup>1</sup> Percent of questions answered correctly		,				,	

## CONCLUSIONS

MSM who live in smaller cities have less knowledge about HIV transmission, are less likely to test and are less likely to use HIV/STI social and health services than those living in larger urban areas. MSM who live in smaller areas may have a low HIV/STI risk perception leading to diminish demand for HIV/STI services. HIV prevention interventions should be designed to reach MSM who live in small urban areas or villages as well as those from larger cities.

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