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Introduction

Nationally, HIV risk among men who have sex with men (MSM) is believed to be the prominent channel driving the HIV epidemic in the United States. The CDC estimates that MSM represent approximately 2 percent of the U.S. population, but accounted for the majority of all new HIV infections annually from 2006 to 2009 (58-61%) (CDC, 2010). Similarly, in NYC, MSM comprise a relatively small proportion of New York City's population (approximately 5% of all sexually active men), yet accounted for nearly 43% of all new HIV diagnoses in 2009 (NYC DOHMH, 2012). In 2009 the number of new HIV diagnoses among MSM under 30 years old surpassed the number in MSM over 30 for the first time ever. Additionally, new diagnoses among young MSM (YMSM) have increased steadily in the last 15 years, while new diagnoses among MSM aged 30 and older have decreased. While the largest share of newly diagnosed MSM aged under 30 are Caucasian, almost 80% of newly diagnosed YMSM are African American or Hispanic (NYC DOHMH, 2012).

Researchers have begun to discuss the ways in which sexual orientation, behavior and identity moderate the increased incidence of health disparities among MSM. Scholars have begun to investigate the role of social networks in the occurrence of these disparities. Social networks can exist in a number of forms: vocational/professional networks, family networks, peer networks, sexual networks, education networks, and community networks tied together by common interest.

Social network studies have shown many health-related behaviors to be spread through social networks including: mental health (Fowler & Christakis 2008), smoking cessation (Kaplan et al. 2001), obesity (Christakis & Fowler, 2007), and suicide ideation and alcohol consumption (Bearman & Moody, 2004). Members of a social network provide social support to one another and influence one another's behaviors by socializing new members, exchanging information, establishing and enforcing social norms, and punishing members who do not comply with group norms.

Background & Purpose

Studies have shown that there is an important social component to STI/HIV transmission and that individual risk factors for infection differ from group risk factors for infection. In fact, a study of HIV transmission among African American women who use drugs failed to show an association between HIV infection and both anal sex and injection drug use, suggesting that these behaviors have little influence on the transmission of HIV when the prevalence of disease is high in a given network (Miller et al., 2007).

The purpose of Project SHIBI (Social Health and Behavioral Intervention), using Respondent-Driven Sampling (RDS) (Heckathorn, 1997) to recruit a diverse sample of MSM from six different social networks, is to expand upon the current research on MSM, the influence and structure of social networks, health risk behavior (sexual risk behavior, specifically) and associated co-morbidities. This poster will describe the recruitment techniques used to enroll a diverse sample of MSM in the study, highlighting results from the bar/club social network.

Methods

Data is still being collected on a select sample of MSM using RDS to recruit participants to complete an online survey. RDS produces samples that are different from the initial participants or "seeds" from which sampling begins. RDS differs from snowball sampling in that: 1) RDS involves a dual incentive system—the reward for completing the survey plus a reward for recruiting others into the study (a secondary award); and 2) Participants are not asked to identify their peers to the Principal Investigator (PI), but asked to recruit them into the study.

In accordance with RDS methodology, six distinct seed groups were selected as representative social networks existing in gay and MSM communities: 1) Bar/club; 2) Internet/Mobile "Apps"; 3) Bath house/sex club; 4) College; 5) Professional organizations; and 6) Community centers/community-based organizations. To obtain a representative sample with enough statistical power to assess relationships within and among networks, a series of 4 waves, with each participant in waves 1-3 being eligible to recruit and refer a maximum of 4 new participants within their network into the study, was selected. In total, these 4 waves will yield a sample of 510 participants.

For screening and eligibility purposes, initial respondents (seeds) are men who have sex with men who live in New York City (defined by NYC zip code), ages 18 and up, who are recruited both actively and passively in the venues/networks described above. The study sample may not be representative of all MSM who are members of the previously identified social networks.

For the bar/club social network, an active recruitment, modified time-space sampling technique (Sudman et al., 1988; MacKellar et al., 1996) was used to construct an exhaustive sampling frame that reflected a diverse list of bars and clubs (and their operating days and hours) where men go to meet other men in the five New York City boroughs. A random digit generator was then used to select venues for recruitment on a random day and time. With the permission of the select bar/club, members of the study recruitment team randomly approached every n^{th} patron in the venue and asked them to screen for eligibility.

Screening was done using the Entryware 6.4 software on Palm Zire 71 devices and iPods. The screening questions included the aforementioned eligibility requirements. Potential participants who screened eligible were alerted to their eligibility, briefly informed of the study's purpose, and entered into the potential seed "bank." The research team also left recruitment palm cards at these locations.

Table 2. MSM Social Networking Venues and Reported Level/Rank of Importance

Level of Importance	Venues					
	Bars/Clubs	College/School	Sex Parties/Bathhouses	Community Organizations	Professional Organizations	Internet/Mobile "Apps"
	n=181	n=178	n=178	n=178	n=179	n=178
Of Great Importance	n=19 (10.5%)	n=11 (6.2%)	n=4 (2.2%)	n=12 (6.7%)	n=29 (16.2%)	n=20 (11.2%)
Important	n=23 (12.7%)	n=34 (19.1%)	n=3 (1.7%)	n=25 (14%)	n=44 (24.6%)	n=36 (20.2%)
Somewhat Important	n=59 (32.6%)	n=27 (15.2%)	n=14 (7.9%)	n=48 (27%)	n=52 (29.1%)	n=43 (24.2%)
Neither Important Nor Unimportant	n=33 (18.5)	n=32 (18%)	n=23 (12.9%)	n=37 (20.8%)	n=20 (11.2%)	n=33 (18.5%)
Unimportant	n=46 (25.8)	n=74 (41.6%)	n=134 (75.3%)	n=56 (31.5%)	n=34 (19%)	n=46 (25.8%)

Results

393 men were approached to screen for eligibility with 56.7% (n=223) consenting to screen. The age range of participants was 20-60 ($M=32$, $SD=8.91$). The majority of the men (n=116, 53.7%) reported Manhattan as their primary borough of residence followed by Brooklyn (n=26, 12%), Queens (n=22, 10.2%), Northern New Jersey (n=13, 6%), The Bronx (n=8, 3.7%), Long Island (n=8, 3.7%), and Staten Island (n=2, 1%). The majority of participants (n=171, 86.7%) of the men reported sex with men only in the past 12 months (see Table 1). Men in the sample reported "professional organizations" as the most important venue for meeting other men (n=171, 16.2%), followed by "the Internet/Mobile Apps" (n= 20, 11.2%) and "bars/clubs" (n=19, 10.5%). The least important reported venue for meeting other men was "sex parties/bathhouses" (n=134, 75.3%) (Table 2). The overwhelming majority of men preferred email contact (n=109, 97.3%) with regard to seed study follow-up.

Table 1. Demographic Characteristics for the Total Sample

Characteristic	Total	
	n	%
Age (years)		
18-29	102	47
30-39	74	34.1
40-49	25	11.5
50+	41	18.9
Current Residence		
Brooklyn	26	12
The Bronx	8	3.7
Long Island	8	3.7
Manhattan	116	53.7
Northern New Jersey	13	6
Queens	22	10.2
Staten Island	2	1
Reported Sexual Activity (Last 12 Months)		
Men Only	171	86.8
Mostly Men/Occasionally Women	3	1.5
Men and Women	4	2
Mostly Women/Occasionally Men	11	5.6
I haven't had sex	8	4.1

Discussion

As self-identification as a sexual minority (lesbian, gay, bisexual or transgender individual) becomes more accepted in mainstream culture, the roles of traditional "gay venues" seem to be shifting. Though there has been research conducted within venues where men meet sex partners, with few exceptions, little research has assessed behaviors across venues (Groves et al., 2013). How and why these men use these venues to construct social networks is understudied. These initial findings indicate that although men were recruited in often highly sexualized bar/club environments that these men may seek to expand their social networks via different venues (which may or may not have an impact on sexual risk behavior). Further recommendations for research include examining differences in preferences, attitudes and behaviors of MSM recruited across venues as well as examining how the formation of these networks influence sexual risk taking—goals for the completion of this study.