

The European MSM Internet Survey (EMIS)

UNGASS indicators

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Surveys of sexual behaviour and prevention needs among men who have sex with men (MSM) have mainly been conducted on national levels. Due to different sampling methods (particularly Internet-based vs. venue-based), and because of similar, but not identical questions, a harmonisation of indicators was needed, e.g. to allow reporting of comparable data. The European MSM Internet Survey (EMIS) is a joint project of academic, governmental, and non-governmental partners from 35 countries in Europe (EU and neighbouring countries) to simultaneously run an online questionnaire in 25 different languages. EMIS is co-funded by a grant of the European Union (EU Health Programme 2008-2013).

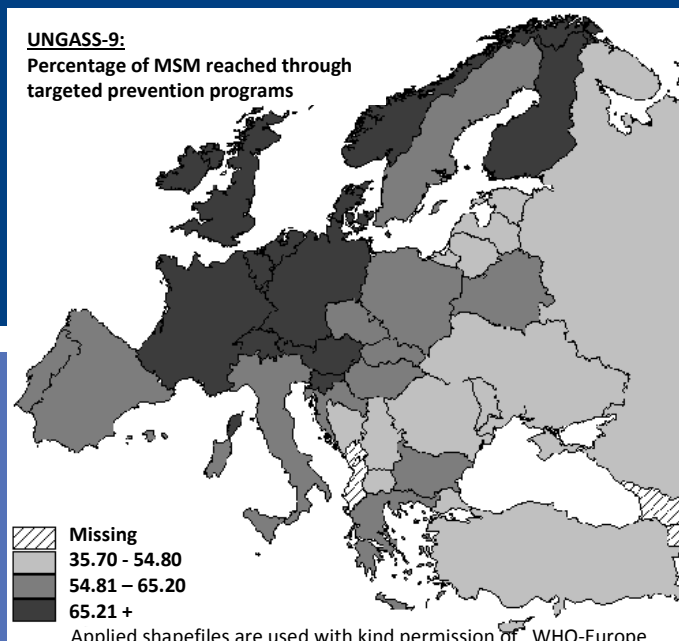
The EMIS questionnaire has been available online between June 4 and August 31, 2010. It was promoted online and offline through media for gay, bisexual, and other men who have sex with men (MSM). Following the slogan "Be part of something huge!", more than 180,000 MSM living in Europe, and more than 160,000 MSM living in the 27 EU member states have completed the questionnaire.

EMIS is thus the largest international study ever conducted on homosexually active men. This strong response to a 20-30 minute survey demonstrates both a highly acceptable instrument and high community engagement. Neither would have been possible without the participation and support of local, national, and international LGBT organizations, as well as pan-European gay-organised social online-networks like GayRomeo, Manhunt, Qruiser, Qguys, or Gaydar.

In this preliminary analysis (to be finalized in the official report foreseen for September, 2011) we would like to report on five UNGASS indicators, based on EMIS data for 38 European countries. These are:

UNGASS-9:

Percentage of MSM reached through targeted prevention programs



UNGASS 8: Percentage of MSM that have received an HIV test in the last 12 months and who know the results

UNGASS 9*: Percentage of MSM reached with HIV prevention programmes

UNGASS 14*: Percentage of MSM who both correctly identify ways of preventing the sexual transmission of HIV and who reject major misconceptions

UNGASS 19: Percentage of MSM reporting the use of a condom the last time they had anal sex with a male partner within last 6 months

UNGASS 23: Percentage of MSM diagnosed HIV positive among those who have ever been tested for HIV

* EMIS suggests alternatives in constructing these indicators for MSM

EMIS Associated Partners: DE: GTZ, Robert Koch Institute; ES: Centre de Estudis Epidemiològics sobre les ITS i SIDA de Catalunya (CEEISCat); IT: Regional Centre for Health Promotion Veneto; NL: University College Maastricht; UK: Sigma Research. Further Information: www.emis-project.eu. Contact: emis@rki.de

EMIS Collaborating Partners: AT: Aids-Hilfe Wien; BE: Institute of Tropical Medicine, Facultés Universitaires Saint-Louis, Ex Aequo, Sensoa, Arc-en-ciel Wallonie; BG: National Centre of Infectious and Parasitic Diseases, Queer Bulgaria Foundation; BY: БСРПЕВА; CH: Institut universitaire de médecine sociale et préventive, Aids-Hilfe Schweiz; CY: Research Unit in Behaviour & Social Issues; CZ: Charles University (Institute of Sexology), Ceska společnost AIDS pomoc; DE: Berlin Social Science Research Center (WZB), Deutsche AIDS-Hilfe; Federal Centre for Health Education (BZgA); DK: Statens Serum Institut, Department of Epidemiology, STOP AIDS; ES: National Centre of Epidemiology, stopsida, Ministry of Health, Social Policy and Equality; EE: National Institute for Health Development; FI: University of Tampere (Nursing Science), HIV-saatio/Aids-tukikeskus; FR: Institut de veille sanitaire (InVS), AIDeS, Act Up Paris, Sida Info Service, Le Kiosque, The Warning; GR: Positive Voice; HR: University of Zagreb (Humanities and Social Sciences); HU: Hungarian Civil Liberties Union (TASZ), Háttér; IE: Gay Men's Health Service, Health Services Executive; IT: University of Bologna, Arcigay, Istituto Superiore di Sanità; LT: Center for Communicable Diseases and AIDS; LV: The Infectiology Centre of Latvia; Mozaika; MD: GenderDoc-M; MK: Equality for Gays and Lesbians (EGAL); NL: schorer; NO: Norwegian Knowledge Centre for the Health Services, Norwegian Institute of Public Health; PL: National AIDS Centre, Lambda Warszawa; PT: GAT Portugal, University of Porto (Medical School), Institute of Hygiene and Tropical Medicine; RO: PSI Romania RS: Safe Pulse of Youth; RU: PSI Russia, LaSky; SE: Malmö University, Riksförbundet för homosexuella, bisexuella och transpersoners rättigheter (RFSL); SI: National Institute of Public Health, Legebitra, ŠKUC-Magnus, DIH; SK: OZ Odyseus; TR: Turkish Public Health Association, KAOS-GL, Istanbul LGBTT, Siyah Pembe Uçgen Izmir; UA: Gay Alliance, Nash Mir, LiGA Nikolaev; UK: City University, London, CHAPS (Terrence Higgins Trust); EU: ILGA-Europe, Aids Action Europe, European AIDS Treatment Group, GayRomeo, Manhunt and Manhunt Cares

EMIS Advisory Partners: Executive Agency for Health and Consumers (EAHC), European Centre for Disease Prevention and Control (ECDC), WHO-Europe

Unadjusted findings from the European MSM Internet Survey (EMIS): UNGASS indicators for MSM in 38 European countries

	Responses per 10 000 ¹	UNGASS-8 < 25 years	UNGASS-8 25+ years	UNGASS-9 ² < 25 years	UNGASS-9 ² 25+ years	UNGASS-14 ³ < 25 years	UNGASS-14 ³ 25+ years	UNGASS-19 < 25 years	UNGASS-19 25+ years	UNGASS-23
.at	5,02	36,2%	43,1%	62,7%	72,8%	29,5%	35,6%	53,9%	56,9%	7,1%
.ba	0,35	(24,6%)	(32,3)%	(37,9%)	(48,4%)	(36,2%)	(41,9%)	(48,6%)	50,0%	0,0%
.be	3,85	38,7%	48,8%	65,5%	75,0%	28,8%	28,8%	54,3%	54,0%	10,4%
.bg	1,43	39,9%	42,1%	49,9%	57,4%	32,6%	32,7%	53,2%	51,7%	2,4%
.by	0,40	(33,8%)	(39,8%)	(49,3%)	58,6%	(40,4%)	(37,0%)	(42,5%)	36,6%	3,0%
.ch	6,75	39,8%	39,3%	66,8%	78,7%	39,5%	49,0%	63,0%	57,4%	11,4%
.cy	3,30	(22,8%)	(36,0%)	(34,2%)	(49,7%)	(34,2%)	(28,8%)	(56,4%)	56,7%	1,9%
.cz	2,38	26,9%	31,5%	59,0%	66,2%	30,9%	39,6%	39,5%	41,1%	4,8%
.de	6,82	31,5%	34,5%	59,7%	71,4%	30,4%	38,6%	51,7%	51,5%	11,5%
.dk	3,24	31,0%	36,7%	63,5%	76,1%	39,4%	55,7%	61,2%	52,8%	11,9%
.ee	4,57	(28,6%)	34,6%	(47,5%)	56,1%	33,9%	43,9%	42,1%	42,7%	2,8%
.es	2,99	37,3%	46,6%	58,1%	66,9%	33,1%	43,6%	58,8%	59,5%	12,1%
.fi	3,89	24,0%	23,7%	63,8%	74,8%	35,6%	45,9%	44,5%	47,5%	5,1%
.fr	1,82	41,1%	49,1%	68,8%	74,4%	30,4%	42,2%	57,3%	56,4%	12,6%
.gr	2,87	28,4%	35,5%	52,8%	62,7%	30,0%	39,5%	68,5%	66,5%	12,7%
.hr	1,19	(18,0%)	28,3%	(56,2%)	63,4%	(42,6%)	4462%	(54,4%)	54,7%	4,8%
.hu	2,13	28,8%	36,5%	50,4%	59,0%	32,5%	42,4%	48,3%	47,6%	5,5%
.ie	5,10	29,7%	34,0%	54,5%	68,7%	30,2%	37,6%	63,0%	55,0%	9,5%
.it	2,78	30,2%	44,6%	58,8%	65,2%	31,5%	43,9%	56,0%	58,2%	9,6%
.lt	1,84	(16,5%)	(22,2%)	45,8%	50,6%	(27,2%)	33,8%	(40,5%)	42,9%	4,7%
.lu	5,88	(29,8%)	(46,3%)	(68,4%)	68,8%	(21,1%)	(32,1%)	(60,0%)	64,7%	13,6%
.lv	3,25	(23,8%)	(26,2%)	(38,4%)	44,8%	(25,4%)	37,0%	(40,2%)	39,7%	7,7%
.md	0,30	(34,5%)	(37,3%)	(42,9%)	(50,8%)	(50,0%)	(39,3%)	(51,1%)	(52,3%)	4,4%
.mk	0,60	(42,4%)	(37,8%)	(33,3%)	(48,2%)	(36,4%)	(32,1%)	(6,0%)	(59,7%)	7,6%
.mt	3,00	(31,8%)	(35,9%)	(39,1%)	(57,9%)	(43,5%)	(29,2%)	(55,6%)	(54,2%)	2,5%
.nl	2,38	37,8%	38,4%	67,2%	77,3%	44,3%	55,1%	54,1%	50,2%	19,7%
.no	4,47	26,4%	33,1%	60,3%	73,9%	31,8%	44,6%	45,6%	50,9%	5,2%
.pl	0,75	30,6%	38,5%	58,2%	65,4%	36,4%	42,4%	53,3%	51,7%	8,1%
.pt	5,07	40,1%	48,3%	52,0%	64,8%	37,3%	46,2%	57,4%	56,1%	10,8%
.ro	1,15	30,6%	31,0%	48,0%	55,5%	30,0%	31,0%	41,9%	42,1%	5,0%
.rs	1,54	31,6%	32,5%	43,2%	49,4%	30,1%	37,3%	58,7%	56,6%	5,3%
.ru	0,37	38,6%	44,6%	44,9%	52,2%	33,8%	39,4%	48,9%	48,3%	8,5%
.se	3,53	30,5%	30,4%	54,3%	59,5%	39,4%	52,7%	40,9%	42,8%	6,4%
.si	5,05	(21,9%)	25,9%	61,3%	69,7%	(30,5%)	39,7%	58,4%	53,6%	5,0%
.sk	1,12	(19,5%)	31,4%	49,0%	59,7%	(27,9%)	41,6%	(42,1%)	44,1%	2,2%
.tr	0,28	20,1%	28,0%	31,8%	37,8%	28,4%	29,4%	44,0%	44,0%	3,0%
.ua	0,39	40,7%	33,3%	53,9%	52,6%	36,5%	36,5%	57,6%	50,7%	8,1%
.uk	2,99	35,5%	36,6%	59,7%	76,1%	40,6%	48,8%	55,7%	54,1%	14,5%

Numbers in brackets indicate a case number less than 100.

1) respondents per 10 000 inhabitants (general population);

2) EMIS suggests that three criteria need to be fulfilled to indicate that MSM were reached with targeted prevention programmes: i) being HIV negative or untested and confident to get an HIV test if wanted, or being HIV+ and having seen a doctor for monitoring), ii) no unprotected anal intercourse solely due to the lack of condoms (last 12months), iii) MSM-specific information about HIV or STIs was seen or heard, or a telephone helpline was called (last 12 months)

3) EMIS suggests to include the following items, if correctly identified:

i) You cannot be confident about whether someone has HIV or not from their appearance, ii) Effective treatment of HIV infection reduces the risk of HIV being transmitted, iii) HIV cannot be passed during kissing, including deep kissing, because saliva does not transmit HIV, iv) You can pick up HIV through your penis while being “active” in unprotected anal or vaginal sex with an infected partner, even if you don’t ejaculate, v) You can pick up HIV through your rectum while being “passive” in unprotected anal sex with an infected partner