

ORIGINAL ARTICLE

An analysis of HIV-Related Risk Behaviors of Men Having Sex with Men (MSM), Using Respondent Driven Sampling (RDS), in Albania

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ABSTRACT

Background

Men having Sex with Men in Tirana, were recruited into a study assessing HIV-related behaviors and HIV serostatus using Respondent Driven Sampling (RDS), a peer-driven recruitment sampling strategy that results in a probability sample.

This paper presents results utilizing RDS amongst Men Having Sex with Men (MSM) in Tirana, Albania to identify behaviors relating to the potential spread of HIV and other sexually transmitted infections (STI), and reports the results of the second representative study of MSM behaviors in Albania (the first one was conducted in 2005), and allows a comparison of results between two studies.

Methods

Study methodology likely drew a more diverse sample of MSM compared to traditional recruitment by outreach workers or through needle exchange programs. It greatly enhances our understanding of MSM and their network characteristics, and also provides evidence for the effectiveness of using RDS in recruiting hard-to-reach populations in environments where stigmatization and criminalization against their behaviors are commonplace.

Results

MSM are engaged in several risk behaviors with different populations, making them a possible link between drug-using populations and female populations in Tirana.

It is important to note that unprotected anal sex is one of the most risky behaviors for HIV/AIDS transmission.

Conclusions

The risk of becoming infected with HIV is significant for both partners involved in unprotected anal sex, but the receptive partner has a much higher risk of becoming infected than the insertive partner. When developing a strategy to address the transmission of HIV, it is essential to take into account that men have sex with other men for a wide range of reasons and under very different circumstances.

Keywords: HIV, risk behaviors, sexual behavior, Respondent driven sampling, populations at risk

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INTRODUCTION

The question of how to access hard to reach populations has been troubling, both domestically and internationally. When discussing the epidemiology of the HIV virus, it is assumed that certain high risk populations are fundamental in the proliferation of the virus, particularly at the beginning of a country's epidemic. The problem however, has been how to reach these populations, particularly in countries where activities such as intravenous drug use, commercial sex and same-sex encounters are so highly stigmatized. The use of a Respondent Driven Sampling (RDS) appears to offer a solution to that dilemma, allowing researchers to access hard to reach populations through their social networks.^{1,2} This paper presents results utilizing RDS amongst Men Having Sex with Men (MSM) in Tirana, Albania to identify behaviors relating to the potential spread of HIV and other sexually transmitted infections (STI). This paper reports the results of the second representative study of MSM behaviors in Albania (the first one was conducted in 2005), and allows a comparison of results between two studies. The methodology used will be discussed, along with a comparison of key indicators and a discussion of results and study limitations.

METHODOLOGY

Respondent Driven Sampling (RDS) was used to sample target group members. The methodology behind RDS2, in brief, is a referral based system whereby participants refer only two to three other members of the target group that they know to participate and receive an incentive for both participating and successfully recruiting others. Data are analyzed using the recruiting linkages and yield a representative sample of the population in the target area. The surveillance in Tirana was part of a larger survey investigating biological prevalence of HIV and other sexually transmitted infections and behaviors and knowledge associated with the spread of these infections. Injecting Drug Users, and the Roma population were also surveyed during the same time period (July-August, 2008).

One hundred and eighty nine MSM were surveyed in one location, offices of a MSM NGO conducting outreach and prevention programs. Data collection included face to face interviews and encompassed a 5 week period with hours of data collection from 9:00-16:00 Monday-Saturday.

In accordance with RDS methodology, the initial participants of the study, known as "seeds"^{3,4} were members of the target group.