

# HIV testing trends and reasons for not testing among MSM in Croatia: review of surveys conducted from 2005 to 2012

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# Objectives

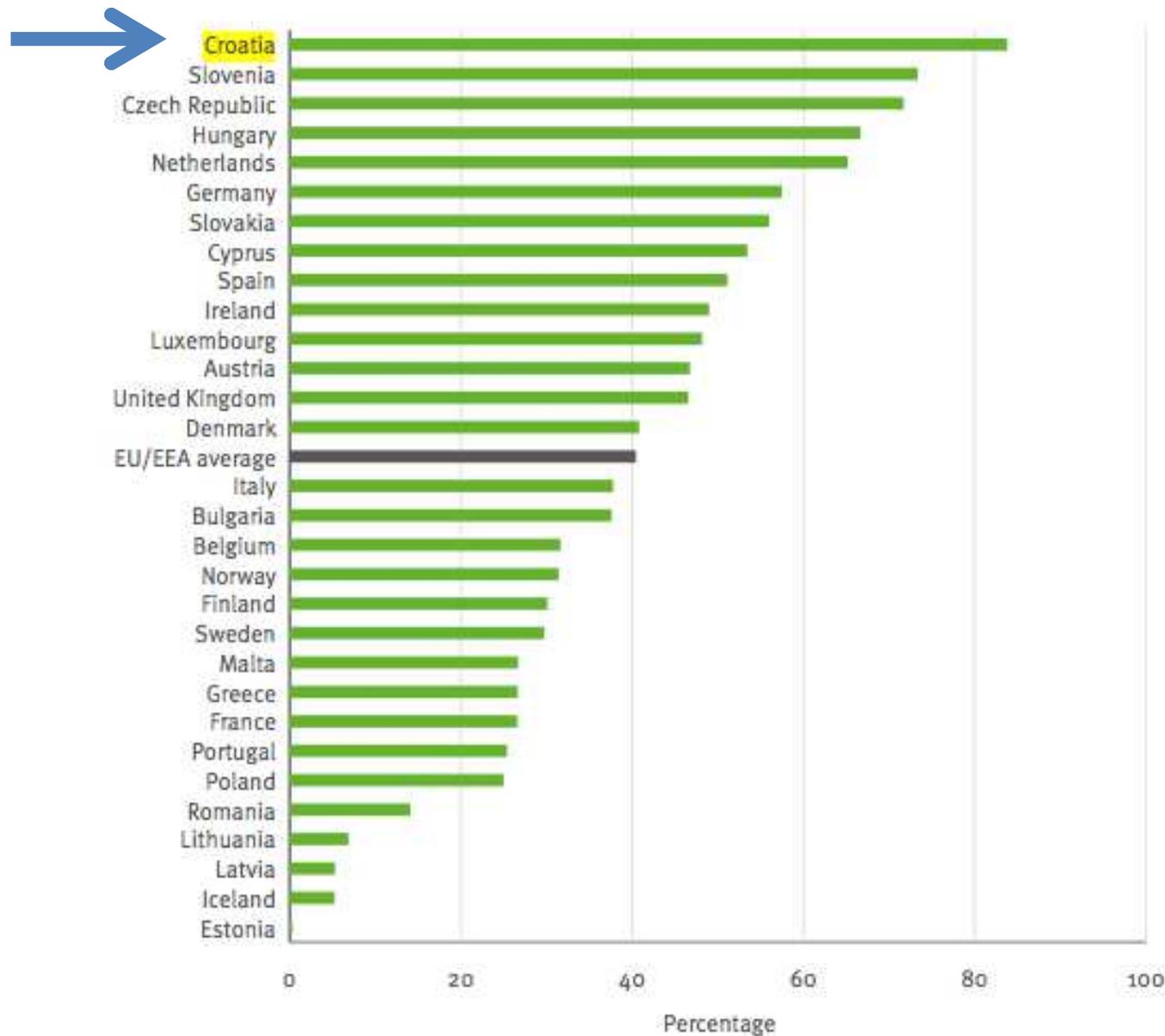
- Describe trend of HIV testing uptake and reasons for not testing
- Method: Review bio-behavioural surveys conducted among MSM
  - Period: 2005 – 2012 when prevention programmes were conducted

# Background

- Men who have sex with men (MSM) are most affected by HIV in Croatia.
- 56.8% of all HIV diagnosis are MSM. This proportion is growing.
- Prevalence estimates are between 2.8% and 4.5%. (about 30 times more than in general population)

Sources: Croatian Institute of Public Health; Bio-behavioral surveys.

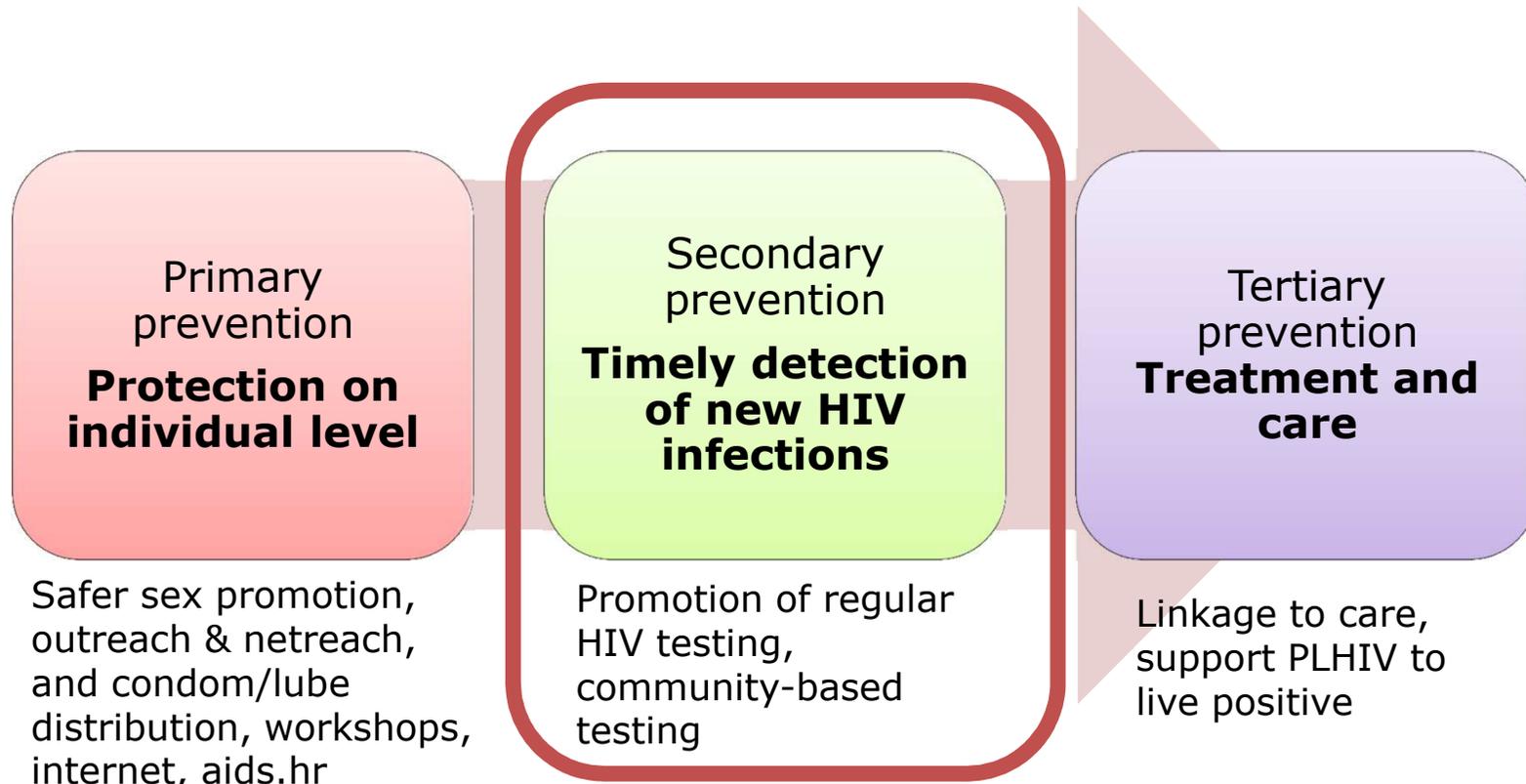
Figure D: Percentage of HIV diagnoses in MSM among all reported HIV cases, by country, EU/EEA, 2012 (n=29 381)



84% of new HIV diagnoses in 2012 were MSM. Highest proportion in Europe

Source: HIV/AIDS surveillance in Europe 2012, ECDC

# HIV prevention program for MSM, Croatia



## Structural changes

Lowering stigma and discrimination, lowering barriers to access health care, improvement of health system through partnerships, education and advocacy.



**HIV promotion materials, Iskorak**

# Key issue for prevention

- 5.5% of HIV prevention funds for key affected populations is for MSM in Croatia (GARP, 2013)

AIDS spending category	HRK	%
Prevention - Youth in school	69,000	1.2
Prevention of HIV transmission aimed at people living with HIV	551,500	9.8
Prevention programmes for sex workers and their clients	490,000	8.7
<b>Programmes for men who have sex with men</b>	<b>310,000</b>	<b>5.5</b>
Harm-reduction programmes for injecting drug users	3,967,500	70.4
Prevention programmes in the workplace	250,000	4.4
<b>TOTAL</b>	<b>5,638,000</b>	<b>100</b>

# Methods

- Surveys containing data about HIV testing uptake and MSM prevention programmes were collected using literature review and contacts with organisations
- Only data points with the same sampling technique and survey question wording were used to detect trends.
- As all comparable data points were pairs, a Pearson's chi-squared test was used for significance testing in Stata.

# Surveys reviewed

- Six surveys were found that had at least two comparable data points and one with a single data point

	Survey name	Year	Sample
1	Behavioural surveillance survey	2005	Convenience
2	Bio-behavioural, Zagreb	2006	RDS
3	Behavioural surveillance survey	2007	Convenience
4	Behavioural surveillance survey	2009	Convenience
5	Bio-behavioural, Zagreb	2010	RDS
6	EMIS	2010	Convenience
7	Behavioural surveillance survey	2012	Convenience

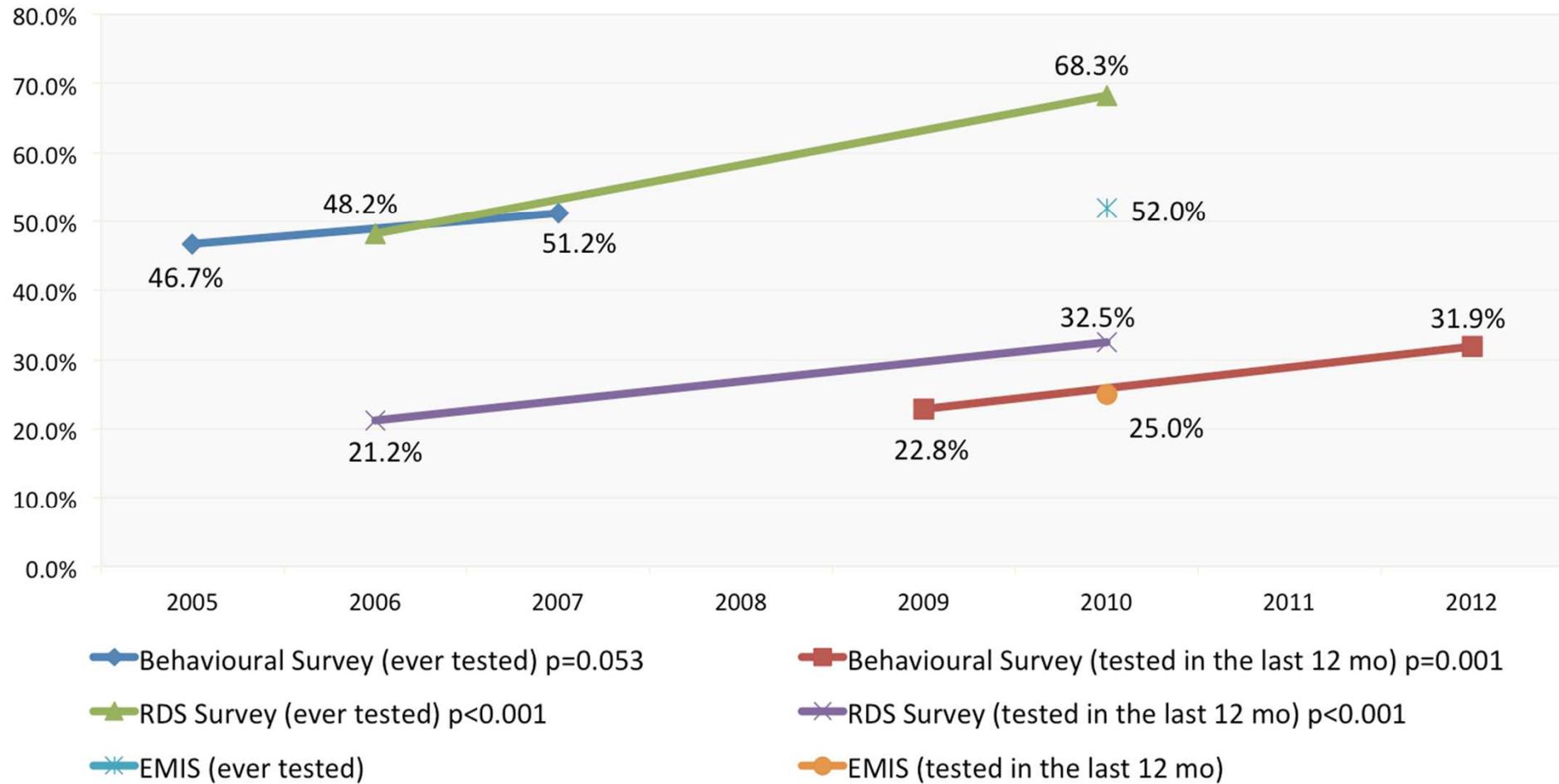
# Question types

- Have you ever been tested?
- Have you been tested in the last 12 mo?
- If you haven't been tested in the last 12 months what was the main reason?

	Survey name	Year	Ever tested	Last 12 mo	Reason
1	Behavioural surveillance survey	2005	Yes		
2	RDS Bio-behavioural, Zagreb	2006	Yes	Yes	
3	Behavioural surveillance survey	2007	Yes		
4	Behavioural surveillance survey	2009		Yes	Yes
5	RDS Bio-behavioural, Zagreb	2010	Yes	Yes	Yes
6	EMIS	2010	Yes	Yes	
7	Behavioural surveillance survey	2012		Yes	Yes

# Results

## HIV testing uptake among MSM in Croatia



# Obstacles to testing

If you haven't been tested in the last 12 months what was the main reason?

<b>Behavioural Survey 2009</b>	<b>n/N*</b>	<b>%</b>
I think I haven't been at risk of HIV	302/512	<b>59.0</b>
I don't want to know the result (afraid)	60/512	<b>11.7</b>
I don't know where to get tested	43/512	<b>8.4</b>

<b>Behavioural Survey 2012</b>	<b>n/N*</b>	<b>%</b>
I think I haven't been at risk of HIV	222/360	<b>61.7</b>
I didn't have the will (I was lazy)	43/360	<b>11.9</b>
I am afraid someone will know I tested	25/360	<b>6.9</b>

<b>RDS Bio-Behavioural, Zagreb 2010</b>	<b>n/N*</b>	<b>% (adjusted)</b>
I think I haven't been at risk of HIV	137/238	<b>62.6</b>
I didn't have the will (I was lazy)	40/238	<b>15.3</b>
I didn't have time	19/238	<b>6.7</b>

# Have they been at risk?

- Among those who think they are not under risk of infection (*Behavioural 2012*):
  - 82.6% meet recommendation to get tested every 12 months (sexually active MSM)
- Predictors of HIV testing among MSM (*RDS Zagreb 2010*) :
  - >3 sexual partners (aOR 2.78)
  - Knowing HIV status of current partner (aOR 2.41)

# Limitations

- Self-selection and social-desirability bias may be overestimating rate of HIV testing.
- Corroboration with absolute numbers of MSM tested at HIV testing sites is needed
  - MSM get tested in various locations, making this challenging

# Conclusions

- The surveys conducted among MSM in Croatia show an upward trend in HIV testing uptake
- There is some evidence of successful prevention programmes
- Testing rate is still lower than the European median testing rate for MSM (EMIS median=34.5%, 25% in Croatia)

## Conclusions (cont.)

- The main obstacle to testing is perception of low risk.
- Recommendations:
  - A health promotion messages should highlight the importance of regular testing and high undiagnosed rates (56.4% of HIV+ MSM not tested)
  - More investment to enable MSM to test
  - Further research to gain a better understanding of non-testing and risk perception

# Acknowledgments

People who helped with the studies: Branko Kolarić, Aleksandar Štulhofer, Ivana Božičević, Josip Begovac, Tatjana Nemeth Blažić, Jasmina Pavlić, Mirjana Lana Kosanović, Sandra Šević, Anja Repalust, Marija Kavić, Jegor Modrić, Tea Antolčić, Hrvoje Fuček, Dalibor Stanić, Srđan Rogošić, Vesna Višekruna Vučina, Hrvoje Vinter, Dubravko Pogledić and others. And to all gay and bisexual men who participated in studies.

# Thank you!

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