For the health of men!
Sexual health study report of men who have sex with men in Estonia, 2016.
Kristi Rüütel, Liilia Lõhmus
National Institute for Health Development, Tallinn

EXECUTIVE SUMMARY

Objective
The general objective of this study was to collect data about the mental and sexual health of men who have sex with men (MSM), in order to monitor trends in risk behaviours related to HIV and the factors that impact it. This was the sixth similar study conducted in Estonia since 2004.

Material and methodology
Participants were recruited via various Estonian and international gay-oriented websites and mobile apps. Data were collected with a web-based survey during 16.03–12.08.2016.

Results
The survey was completed by 325 people, from whom 265 (82%) were MSM and whose data were used for further analysis.

The median age of participants was 31 years, 88% completed the survey in Estonian, 64% lived in Harju County (incl. the capital city Tallinn), 80% were employed, 49% had higher education. 66% considered themselves homosexual and 25% bisexual. 48% were in a long-term relationship with a man or a woman.

Two thirds of MSM (64%) were satisfied with their sexual life and about a third (28%) said that they were in great sexual health. Risk behaviour in sexual relationships was common among MSM in Estonia. A third (30%) of all MSM had had unprotected anal sex during the past four weeks, and more than half (56%) of them had had unprotected anal intercourse within the past 12 months. More than half of respondents (55%) had had sex with casual partners (median number of casual partners was 3) during the past 12 months. About three quarters of respondents (72%) had used a condom during their last anal sex with a casual male partner. About a tenth (9%) of MSM had paid for and/or received payment for sex with a man during the 12 months preceding the survey.

One fifth (18%) had had sex with a female partner during the past 5 years and two thirds (66%) of them had not used a condom during their last sex with a female partner. About a quarter (28%) of MSM who did not use a condom with a female partner had had unprotected anal sex with a male partner during the same period. Female partners of MSM are considered a bridging population, through whom various infections can spread from MSM to the general population. A slight increase in risk behaviours can be observed between the two study rounds (2013 and 2016).

Nearly two thirds (61%) of all MSM had had anal sex with a man at a public place (e.g. at a club, sauna or beach). Nearly a third (30%) of MSM had had sex with a foreign man outside of Estonia during the past year, four fifths (79%) of them had had anal sex with a man. Three quarters of them had used a condom during their last sex. A third of all MSM had had anonymous sex (32%) or participated in group sex with men (30%) in the past 12 months.

Nearly two thirds (60%) of MSM do not think it is likely that they would become infected with HIV during their lifetime. Three quarters (73%) have been tested for HIV at least once, 43% have been tested during the past year. More than half (56%) of the MSM who had been tested for HIV, had their last test conducted at an anonymous HIV testing and counselling centre or at a public HIV testing event. On the basis of their last HIV test, 3% of those who had been tested at least once were HIV positive (2% of all participants in the survey). All those infected with HIV thought that they had
been infected as a result of having sex with a man. Based on data from various studies, it can be estimated that the prevalence of HIV among MSM continues to be around 2–4%.

The rate of testing for sexually transmitted infections (STI) was lower – only a quarter (23%) of MSM had been tested for other STIs (excl. HIV) during the past year. A bit more than a fifth (22%) of all MSM had been diagnosed with an STI at least once in their life. About a fifth (21%) had been vaccinated against hepatitis A and a third (33%) against hepatitis B.

Most MSM (85%) had seen/heard information about HIV and STIs during the past year. More than half of MSM had not heard anything about post-exposure or pre-exposure prophylaxis for HIV. Only a few had received either of the two.

About a fifth (21%) of MSM thought they were in great health. 8% of respondents used alcohol daily. More than half of participants (57%) had used illegal drugs at some point in their life and nearly a third of them (31%) had used illegal drugs during the last 12 months. Cannabis was the most common illegal drug used. Four participants had injected drugs at some point in their life and two of them had done so during the past 12 months. More than a third of respondents (43%) were at risk of depression. About a tenth of respondents (9%) had thought about suicide within the past 12 months and 1% of respondents had attempted suicide within the last year.

Conclusions and proposals

There has been no significant decrease in HIV related sexual risk behaviour among MSM during the past three years. As the level of risk behaviour continues to be high among MSM, it is vital to improve the efficiency of awareness-raising activities concerning risks, prevention methods and opportunities for health care services.

Internet is no doubt a popular information channel, however, other means should also be used (such as special counselling centres, educating health care workers, covering topics on sexual minorities in human sciences’ classes), as everyone might not have equal access and preference to use the Internet.

Special attention should also be given to men who have sex with women – using a condom with female partners is just as necessary as with male partners.

The prevalence of HIV among MSM is estimated to be around 2–4% according to data from various studies and this not changed much. The prevalence of HIV among MSM in Estonia is low, but it is much higher in many other European countries. A lot of Estonian MSM have had sex with foreigners, which increases their risk of contracting HIV. This is why it is important to educate men on these risks.

The level of HIV and STI testing and vaccination against hepatitis A and B is low among MSM. It is necessary to create gay-friendly sexual health services, increase awareness among MSM and health care workers concerning the STI screening specificities among MSM, ensure the availability of condoms and lubricants, and promote vaccination.

The incidence of mental health problems among participants of this study was high. This points out that more attention should be directed at the mental health of sexual minorities in Estonia; it is necessary to develop affordable and easily accessible interventions that take into account the specific needs of the target group, and to ensure corresponding health care services.

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