

# ManCount 2008: Preliminary results from the Vancouver M-Track study

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www.mancount.ca



## Background

M-Track is a second-generation surveillance system, coordinated by the Public Health Agency of Canada, to monitor the prevalence of risk behaviours, HIV, and other STI among gay, bisexual and other men who have sex with men (MSM).<sup>1</sup> We describe the results of recruitment and present preliminary results for the ManCount Survey, the Vancouver site of M-Track.

## Methods

We identified community venues frequented by MSM in Vancouver and used a time-space sampling approach to identify sampling events. Eligible men in the venues during sampling events were 19 years of age or older and self-identified as MSM. Following informed consent, participants completed a self-administered questionnaire and survey staff collected a fingerstick blood sample for dried blood spot (DBS) testing. A \$10 honorarium was provided, and a recruitment log including reasons for non-participation was maintained throughout the study period. Participants completing the survey and DBS were asked to participate in a sub-study involving self-collection of an anal swab (poster P206). Ethical approval was obtained for this study.

## Results

Between August 1 2008 and February 28 2009, 24 venues were visited a total of 137 times. Survey staff approached 3224 eligible men in venues, of which 1169 (36.3%) consented to participate (1136 or 97.2% providing a DBS specimen).

Participants were recruited from: bars or pubs (57.7%), community events or festivals (21.6%), a bookstore (11.5%), community organizations or groups (4.9%), and a bathhouse (4.2%).

**Table 1: Reasons for non-participation**

Reason	n (%)
No time	514 (25.0)
Already participated	419 (20.4)
Did not want to provide DBS / give blood	322 (15.7)
Did not want to participate in a research study	262 (12.7)
Cannot complete the survey in English	54 (2.6)
Does not believe that survey is anonymous	14 (0.7)
Honorarium not sufficient	4 (0.2)
Other reason	122 (5.9)
No reason given	344 (16.7)
<b>Total</b>	<b>2055 (100.0)</b>

**Table 2: Participant demographics**

Characteristic	n (%)
Residence in Vancouver	908 (78.2)
Age – median (IQR)	33 (25-43)
Income greater than \$30,000 per year	677 (59.5)
Completed high school	1074 (92.7)
Sexual identity:	
Gay or Homosexual	933 (80.0)
Bisexual	127 (11.0)
Straight or Heterosexual	21 (1.8)
Two-Spirit	34 (3.0)
Queer	27 (2.3)
Other	10 (0.9)

**Table 3: Self-reported HIV and Hepatitis C status**

Infection	Positive n (%)	Negative n (%)	Unknown n (%)
Self-reported HIV status	188 (16.1)	848 (72.5)	133 (11.4)
Self-reported HCV status	50 (4.3)	1030 (88.1)	89 (7.6)

**Table 4: Sexual behaviours**

Characteristic	n (%)
Total number of sex partners (past 6 months)	
0	97 (8.5)
1	265 (23.3)
2 to 5	390 (34.4)
6 to 9	137 (21.1)
10 to 19	118 (10.4)
20 or more	128 (11.3)
Settings where looked for sex (ever in past 6 months)	
Gay bar	622 (54.5)
Internet	559 (49.7)
Sauna or bath	361 (32.1)
Park	199 (17.8)
Gym	180 (16.5)
Sex party	135 (12.1)
Rave or circuit party	123 (11.0)

**Table 5: Substance use in the two hours before sex**

Substance (ever in past 6 months)	n (%)
Alcohol	866 (76.9)
Marijuana	454 (40.9)
Poppers	343 (30.9)
Cocaine / crack / freebase	253 (22.7)
Viagra, Levitra, Cialis, other erectile drugs	215 (19.4)
Ecstasy / MDMA	194 (17.5)
GHB	118 (10.8)
Special K / Ketamine	109 (9.8)
Crystal Meth	105 (9.5)

## Conclusion

Through the ManCount survey we have successfully used time-space sampling to recruit a community sample of 1169 MSM at venues in Vancouver, with a self-reported HIV prevalence of 16.1%. The majority of participants (80%) identified as gay men. In this poster we present the results of recruitment, and present the first preliminary description of the survey population. The final stages of data cleaning and completion of DBS testing is underway, prior to final analysis which will include adjustment for frequency of venue attendance.

Plans for knowledge translation are being developed, and a full report of findings is expected later in 2009. We anticipate that the data from the ManCount survey will inform our collective action to prevent the transmission of HIV and improve the sexual health of gay men in the Vancouver region.

## References

<sup>1</sup> Public Health Agency of Canada. HIV/AIDS: M-Track Survey. <http://www.phac-aspc.gc.ca/aids-sida/about/mtrack-eng.php>.