## RISK REDUCTION STRATEGIES & THE TOP2BOTTOM CAMPAIGN

## November 27, 2012

In 2011, the majority of HIV notifications in Victoria occurred in men who have sex with men and the most common mode of transmission for MSM was through unprotected anal intercourse.

Despite condoms and water based lube remaining the most effective method of preventing HIV transmission, recent research has indicated that a high percentage of gay and bisexual men still report unprotected anal intercourse with casual partners and unprotected anal intercourse with a regular partner. The majority of HIV transmissions occur through sex with casual partners but it is important to note that a small amount does occur through sex with regular partners as well.

There is growing evidence in social and epidemiological research that indicates that men who do not consistently use condoms and water based lube as a prevention method are adopting different risk reduction strategies to minimise their level of HIV risk in sexual activity with casual and regular partners. Sero-sorting, strategic positioning, undetectable viral load and withdrawal are being used varyingly by both HIV negative and HIV positive men, and that the adoption of certain strategies is considered highly conditional upon knowledge of HIV status (both of oneself and one's casual and/or regular partner).

Based upon the research indicating that these risk reduction strategies are already being used by gay and bisexual men in certain settings, it was important that a new campaign be developed that spoke to men for whom condom use was not a regular option, in an effort to generate community discussion about the increasing complexity in HIV prevention, and provide up to date and accurate information about what the evidence says about risk reduction strategies so that people may make informed decisions about what risk they are willing to take when it comes to sex and HIV.

VAC/GMHC's Top2Bottom campaign aims to do just that, and is developed based on the latest evidence, and through community consultation. Before any of our campaigns are released, formative evaluation work (i.e., focus groups) is undertaken by an external evaluation institution to provide us with a gauge of campaign acceptability, message relevance and message comprehension by gay and bisexual men. The feedback provided within the focus groups illustrated that the campaign style was received well and endorsed by participants (many indicated that they liked the light-hearted approach of the campaign); the messages were understood and relevant to participants; and participants understood the main point of the campaign was information provision in regarding a reduction in risk, not an elimination of risk.

There is evidence to support the information provided in the campaign with regard to the various risk reduction strategies:

- Withdrawal: Research has shown that withdrawal offers minimal protection against picking up or passing on HIV when compared to no withdrawal. However, the actual reduction in risk differs between the bottom and the top, making this strategy an unreliable method for preventing HIV.
- Strategic Positioning (Topping vs. bottoming): Strategic positioning is one of most commonly used risk reduction strategies. While there is evidence to support that there is less chance of picking up HIV if you're the top, research on strategic positioning has shown that the benefit from using this risk reduction strategy is highly conditional upon knowledge of correct HIV status. There is a need to highlight the weakness of this risk reduction strategy among men who engage in unprotected sex with men of a different HIV status or men whose HIV status they do not know.



## VAC/GMHC BRIEFING

- Serosorting (choosing sexual partners of the same HIV status as you): Serosorting is the risk reduction strategy most commonly reported by gay men. If HIV positive men seek out other positive men for unprotected sex, there is no HIV transmission risk (although there is a risk of acquiring STIs other than HIV). The risk applies when men incorrectly think they and their partners are HIV negative. While evidence suggests it is possible that serosorting may offer some protection against HIV, research indicates that some men are sero-guessing rather than serosorting. We know that 1 in 5 HIV-positive men incorrectly assume that they are HIV-negative and that 50% of these men had engaged in unprotected anal intercourse in the past 6 months. The need to highlight the reasons as to why this risk reduction strategy is imperfect is vital, as its reliability depends upon knowledge of both partners' HIV status.
- Undetectable viral load: The majority of men on antiretroviral drugs report an undetectable viral load. There is evidence to suggest than an undetectable viral load provides some protection against picking or passing on HIV. However, research has shown that HIV positive and negative men have different understandings of the role of viral load in HIV transmission and in decisions regarding whether to use condoms or not for anal intercourse. Furthermore, HIV negative men appear to be more willing than HIV positive men to rely on viral load as an indicator of risk. Therefore information provision to both HIV positive and negative men about the issues related to viral load and HIV risk is essential.

We are pleased to see that Top2Bottom has elicited great community discussion and debate around the topic of risk reduction strategies for HIV prevention, and hope that this will continue to foster helpful discussion around what strategies men are using to help minimise their risk of picking up or passing on HIV.

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