

# Attitudes towards safe sex among men who have sex with men in New Zealand

*Findings from the GAPSS and GOSS surveys 2002-2011*  
Research brief to the Ministry of Health

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## Introduction

Attitudes and behaviours are both modifiable and can be influenced by exposure to other people, the media, and community and cultural norms. Altering attitudes is an approach used by public health organisations to ultimately change behaviours towards healthy practices. Among men who have sex with men (MSM), HIV is transmitted by anal intercourse but is prevented by correct and consistent use of a condom. Therefore shifting attitudes towards condom use is a goal of organisations such as the New Zealand AIDS Foundation (NZAF). Furthermore, as sexual intercourse involves two or more people, changing the attitudes of an individual's sexual partners is also relevant. Thus it is important to shift attitudes not only in an individual, but also within that individual's communities by changing broader social norms.

This research brief summarises findings relating to the attitudes of MSM from the Gay Auckland Periodic Sex Survey (GAPSS) and the Gay Online Sex Survey (GOSS) to inform HIV prevention in New Zealand. The aims are to:

1. describe the prevalence of a given attitude in 2011
2. examine trends over time
3. identify factors associated with agreement or disagreement with a given attitude.

## The studies

GAPSS and GOSS are regular surveys designed to measure changes in HIV risk behaviours, testing and attitudes among MSM, the group most at risk of HIV infection in New Zealand. GAPSS is conducted at a large gay community event (approximately 70% of the sample), gay bars and sex-on-site venues in Auckland with recruitment occurring in 2002 (n=812), 2004 (n=1220), 2006 (n=1228), 2008 (n=1527) and 2011 (n=1320). GOSS uses the same questionnaire and is conducted nationwide on Internet dating sites at the conclusion of GAPSS, with recruitment in 2006 (n=2141), 2008 (n=1477) and 2011 (n=1917).

## Survey questions

Respondents to either the GAPSS or GOSS surveys were presented with statements relating to safe sex and for each one were asked if they "strongly agreed", "agreed", "disagreed" or "strongly disagreed". In our analysis we have grouped the responses into "agreed" or "disagreed".

The statements were as follows:

- *“there is a “condom culture” among the men I have sex with”*
- *“I would never be willing to use a condom for anal sex”*
- *“sometimes I feel under pressure not to use a condom”*
- *“the sex I have is as safe as I want it to be”*
- *“I don’t like wearing condoms because they reduce sensitivity”*
- *“I would sometimes rather risk HIV transmission than use a condom”*
- *“condoms are OK as part of sex”*
- *“a man who knew he has HIV would tell me he was positive before we had sex”*
- *“HIV/AIDS is a less serious than it used to be because of new treatments”*
- *“in the last year I’ve seen safe sex messages that were relevant to me”.*

## **Analysis**

Each attitude statement is presented separately. For each attitude we report the results of three analyses that were conducted:

1. overall agreement and disagreement with each statement in 2011. We report frequencies for GAPSS and GOSS separately
2. trends in agreement and disagreement with each statement over time. In particular, we investigate whether the responses in the 2011 survey differed significantly to those of the previous survey round (2008) and to those the first time the attitude statement was included in the questionnaire
3. characteristics of respondents independently associated with agreement with each statement in 2011.<sup>1</sup>

Graphs show the responses to each statement across the survey rounds in which they were asked. These graphs report the responses in the four categories “strongly agree”, “agree”, “disagree” and “strongly disagree”; however in the analysis these have been dichotomised into “agree” and “disagree”. More detail on the exact percentages relating to each graph can be found in tables in GAPSS 2002-2011 and GOSS 2006-2011: Basic Frequencies Report to the Ministry of Health (accessible at [www.otago.ac.nz/aidsepigroup](http://www.otago.ac.nz/aidsepigroup) under “activities”). The relevant table number is provided underneath each graph in this research brief.

We have attempted to classify the responses, and those respondent characteristics associated with them, into two types. Firstly, respondents with characteristics who should be “encouraged” in terms of continuing to promote attitudes that have associations with safe sexual behaviours. Secondly, those that should be “modified” in terms of targeting and engaging groups with characteristics that are associated with attitudes that reflect riskier sexual behaviours. Not all of the statements have a clear association with either safer or riskier sexual behaviours, and some broach complex subjects that cannot be easily categorised. These have been highlighted.

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<sup>1</sup> This was examined by performing bivariate tests of association followed by a backwards stepwise logistic regression analysis.

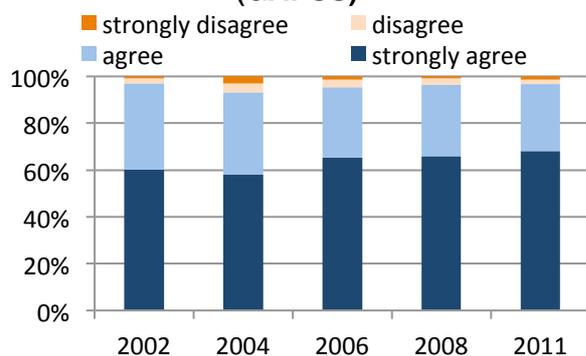
## Condoms are OK as part of sex

Most men agreed that condoms are OK as part of sex.

Of the 2011 GAPSS respondents, 97% agreed that condoms are OK as part of sex and 3% disagreed. Among the 2011 GOSS respondents, 94% agreed with the statement and 6% disagreed.

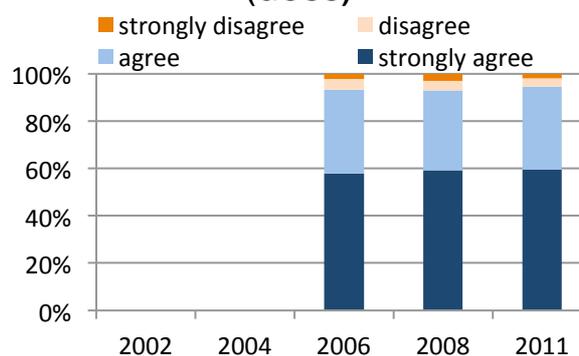
Figures 1a and 1b show that attitudes to this statement have remained consistent over time.

**Figure 1a. Condoms are OK as part of sex (GAPSS)**



See *Basic Frequencies Report* – [Table 131](#).

**Figure 1b. Condoms are OK as part of sex (GOSS)**



See *Basic Frequencies Report* – [Table 131](#).

<b>Encourage</b>	<p>Respondents were <b>more</b> likely to agree with the statement if they either:</p> <ul style="list-style-type: none"> <li>hold one of: a high school or sixth form certificate, a HSC/UE/bursary, a university or a postgraduate degree, compared to those who reported no formal qualification, or</li> <li>reported between 2-10 sexual partners in the past 6 months, compared to those reported no sexual partners.</li> </ul>
<b>Modify</b>	<p>Respondents were <b>less</b> likely to agree with the statement if they either:</p> <ul style="list-style-type: none"> <li>tested HIV positive at their last HIV test, compared to those who tested negative less than 12 months ago, or</li> <li>have never had an HIV test, compared to those who tested HIV negative at their last test less than 12 months ago, or</li> <li>reported low condom use with their casual sexual partners, or</li> <li>reported low condom use with fuckbuddy-type partners, or</li> <li>reported medium or low condom use with their boyfriend-type sexual partners.</li> </ul>

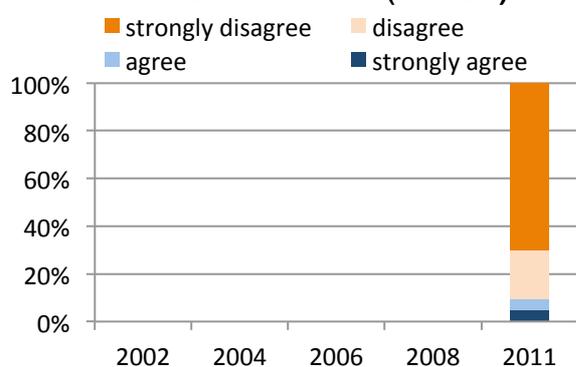
## I would never be willing to use condoms for anal sex

Most men disagreed that they would never be willing to use a condom for anal sex.

9% of the respondents of the 2011 GAPSS survey agreed that they would never be willing to use a condom and 91% answered that they disagreed. 7% of GOSS respondents agreed with the statement and 93% disagreed.

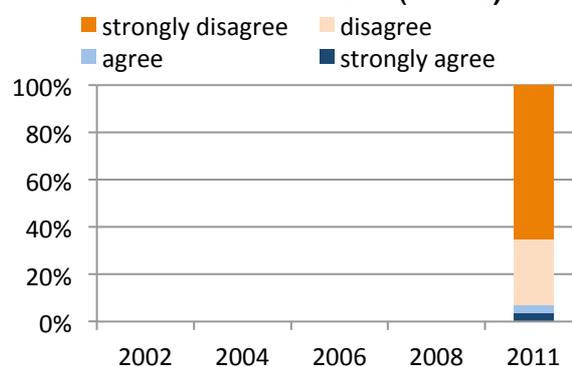
This question was only included in the 2011 survey round and therefore trends across time cannot be analysed.

**Figure 2a. I would never be willing to use condoms for anal sex (GAPSS)**



See *Basic Frequencies Report* – [Table 147](#)

**Figure 2b. I would never be willing to use condoms for anal sex (GOSS)**



See *Basic Frequencies Report* – [Table 148](#)

<b>Modify</b>	<p>Respondents were <b>more</b> likely to agree with the statement if they either:</p> <ul style="list-style-type: none"> <li>• were students, compared to those who are employed, or</li> <li>• tested HIV positive at last test or had never had an HIV test, compared to those who tested negative, or</li> <li>• had between 2-10 or 21-50 sexual partners in the last 6 months, compared to those who reported none, or</li> <li>• reported low condom use with casual sexual partners, or</li> <li>• reported high condom use with fuckbuddy-type sexual partners.</li> </ul>
<b>Encourage</b>	<p>Respondents were <b>less</b> likely to agree with the statement if they either:</p> <ul style="list-style-type: none"> <li>• were recruited online, compared to those recruited at the Big Gay Out, or</li> <li>• reported using Facebook often, compared to those who report never using it, or</li> <li>• reported no anal intercourse with casual sexual partners, or</li> <li>• reported high condom use with casual sexual partners.</li> </ul>

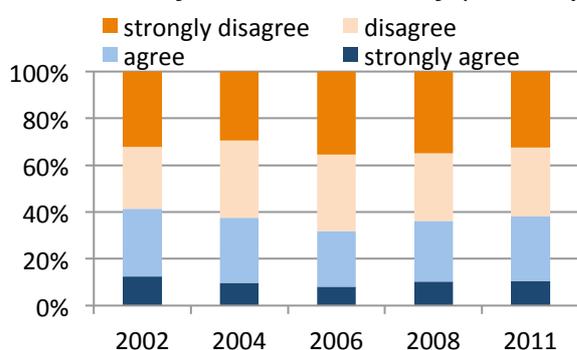
## I don't like wearing condoms because they reduce sensitivity

The majority of men disagreed that they didn't like wearing condoms because they reduce sensitivity.

38% of respondents to the 2011 GAPSS survey agreed that they did not like using condoms as they reduced sensitivity, 62% of respondents disagreed with the statement. Among the GOSS respondents 46% agreed with the statement, while 54% disagreed.

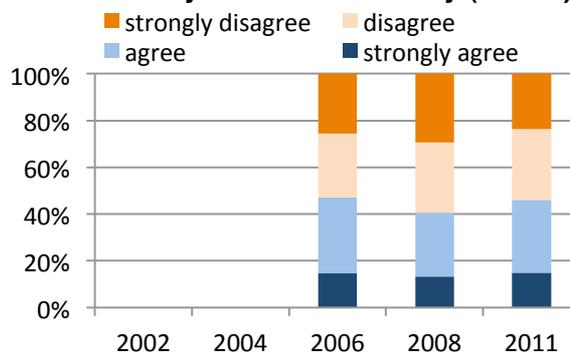
Figure 3b shows that respondents to the 2011 GOSS survey were more likely to agree with this statement than in 2008, but overall levels of agreement were similar to the initial survey in 2006.

**Figure 3a. I don't like wearing condoms because they reduce sensitivity (GAPSS)**



See *Basic Frequencies Report* – [Table 135](#)

**Figure 3b. I don't like wearing condoms because they reduce sensitivity (GOSS)**



See *Basic Frequencies Report* – [Table 136](#)

<b>Modify</b>	<p>Respondents were <b>more</b> likely to agree with the statement if they either:</p> <ul style="list-style-type: none"> <li>• were aged 45 years or older, compared to if they were aged under 30, or</li> <li>• were recruited online, than those recruited at the Big Gay Out, or</li> <li>• reported medium or low condom use with their casual sexual partners, or</li> <li>• reported low condom use with their fuckbuddy-type sexual partners, or</li> <li>• reported low condom use with their boyfriend-type sexual partners.</li> </ul>
<b>Encourage</b>	<p>Respondents were <b>less</b> likely to agree with the statement if they either:</p> <ul style="list-style-type: none"> <li>• reported their ethnicity as Asian, compared to those who reported it as NZ European, or</li> <li>• hold a university or postgraduate degree, compared to those who reported no formal qualification, or</li> <li>• had never had an HIV test, compared to those who reported testing HIV negative at their last test, or</li> <li>• reported either between 1-5 or 21-50 sexual partners in the past 6 months, compared to those who reported none, or</li> <li>• reported high condom use with boyfriend-type sexual partners.</li> </ul>

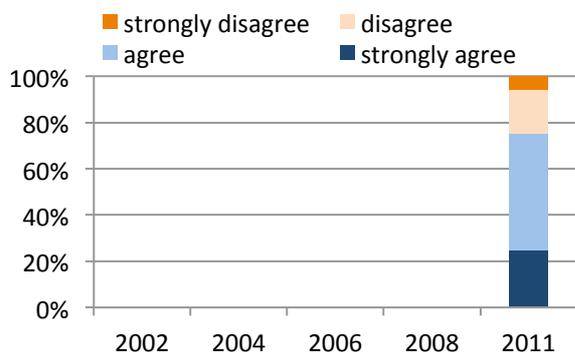
## There is a “condom culture” among the men I have sex with

Most men agreed that there is a condom-culture among the men they have sex with.

Of the 2011 GAPSS respondents, 76% agreed that there was a condom culture among the men they had sex with, while 24% of respondents disagreed. 66% of the 2011 GOSS respondents agreed with the statement and 34% of respondents disagreed.

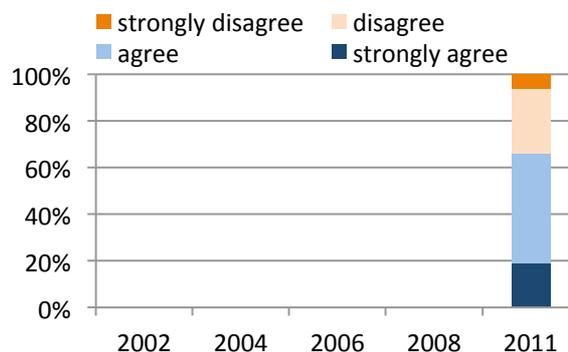
This statement was first posed in the 2011 survey round; therefore we cannot look at the variation of responses over time.

**Figure 4a. There is a “condom culture” among the men I have sex with (GAPSS)**



See *Basic Frequencies Report* – [Table 149](#)

**Figure 4b. There is a “condom culture” among the men I have sex with (GOSS)**



See *Basic Frequencies Report* – [Table 150](#)

<b>Encourage</b>	<p>Respondents were <b>more</b> likely to agree with the statement if they either:</p> <ul style="list-style-type: none"> <li>spent a lot or some time with their gay peers, compared to those who spent none, or</li> <li>read the gay newspaper Express often, compared to those who never read it, or</li> <li>reported high condom use with their casual sexual partners, or</li> <li>reported high condom use with their boyfriend-type sexual partners.</li> </ul>
<b>Modify</b>	<p>Respondents were <b>less</b> likely to agree with the statement if they either:</p> <ul style="list-style-type: none"> <li>hold a high school or sixth-form qualification, or a diploma or professional certificate, compared to those with no formal qualification, or</li> <li>were recruited at gay bars or online (GOSS), compared to those who were recruited at the Big Gay Out, or</li> <li>had tested HIV positive at last HIV test, compared to those who tested negative, or</li> <li>reported medium or low condom use with their casual sexual partners, or</li> <li>reported low condom use with their fuckbuddy-type sexual partners, or</li> <li>reported low condom use with their boyfriend-type sexual partners.</li> </ul>

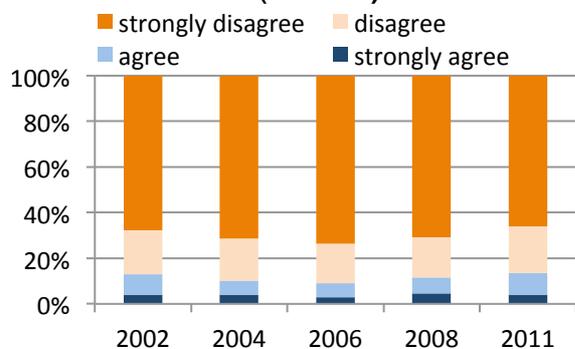
## I would sometimes rather risk HIV transmission than use a condom during anal sex

Most respondents disagreed that they would sometimes rather risk HIV transmission than use a condom during anal sex.

In the 2011 GAPSS survey, 14% of respondents agreed that they would rather risk acquiring HIV than use a condom and 86% disagreed. In the 2011 GOSS survey, 17% of respondents agreed with the statement and 83% disagreed.

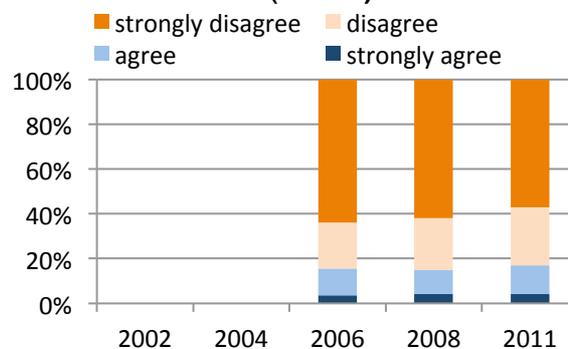
Figure 5a shows that MSM who responded to this statement in the 2011 GAPSS survey were significantly more likely to agree than those who took part in the previous 2008 survey round.

**Figure 5a. I would sometimes rather risk HIV transmission than use a condom during anal sex (GAPSS)**



See Basic Frequencies Report – [Table 133](#)

**Figure 5b. I would sometimes rather risk HIV transmission than use a condom during anal sex (GOSS)**



See Basic Frequencies Report – [Table 134](#)

<b>Modify</b>	<p>Respondents are <b>more</b> likely to agree with the statement if they either:</p> <ul style="list-style-type: none"> <li>reported being either unemployed or a student, compared to those who are employed, or</li> <li>reported between 6-50 sexual partners, compared to those who reported none, or</li> <li>reported medium or low condom use with their casual sexual partners, or</li> <li>reported low condom use with their fuckbuddy-type sexual partners.</li> </ul>
<b>Encourage</b>	<p>Respondents are <b>less</b> likely to agree with the statement either:</p> <ul style="list-style-type: none"> <li>hold a university or postgraduate degree, compared to those who have no formal qualification, or</li> <li>reported using Facebook often, compared to those who never use it, or</li> <li>reported no anal intercourse with casual sexual partners.</li> </ul>

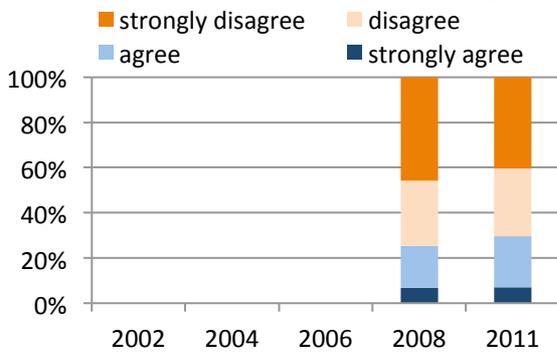
## Sometimes I feel under pressure not to use a condom

Most men disagreed that they sometimes feel under pressure not to use a condom.

In 2011, 30% of MSM answering the GAPSS questionnaire agreed that they sometimes felt pressure not to use a condom, 70% disagreed. In GOSS 31% agreed with the statement, while 69% disagreed with the statement.

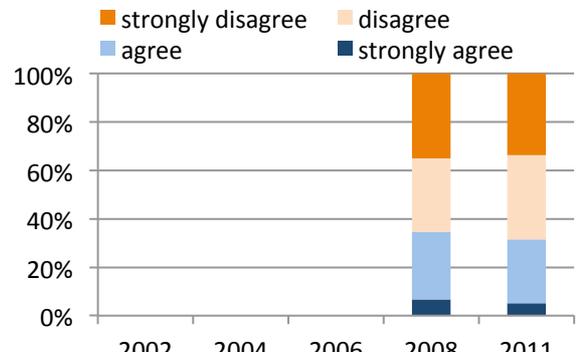
Figures 6a and 6b shows that responses to this statement varied significantly between the 2008 and 2011 GAPSS survey rounds, with those in 2011 being more likely to agree with the statement than those in 2008. The reverse was true of the GOSS sample. Those in 2011 were significantly less likely to agree with the statement than those in the 2008 GOSS survey round.

**Figure 6a. Sometimes I feel under pressure not to use a condom (GAPSS)**



*Not included in Basic Frequency Report*

**Figure 6b. Sometimes I feel under pressure not to use a condom (GOSS)**



*Not included in Basic Frequency Report*

<b>Modify</b>	<p>Respondents were <b>more</b> likely to agree with the statement if they either:</p> <ul style="list-style-type: none"> <li>reported their ethnicity as Asian, compared to those who report themselves to be NZ European, or</li> <li>reported being a student, compared being employed, or</li> <li>spent little time with their gay peers, compared to those who spend a lot of time, or</li> <li>reported greater than 50 sexual partners in the last 6 months, compared to none, or</li> <li>reported medium condom use with casual partners.</li> </ul>
<b>Encourage</b>	<p>Respondents were <b>less</b> likely to agree with the statement if they either:</p> <ul style="list-style-type: none"> <li>reported a single sexual partner in the last 6 months, compared to those who reported none, or</li> <li>reported either high or low condom use with boyfriend-type sexual partners.</li> </ul>

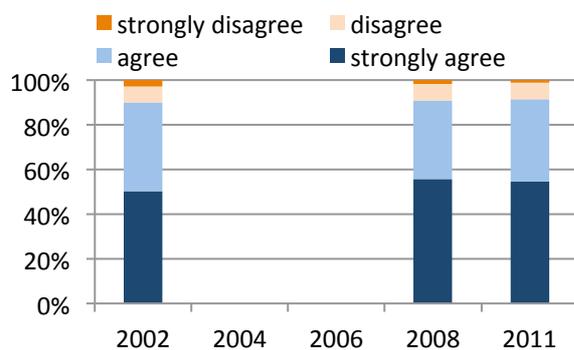
## The sex I have is always as safe as I want it to be

Most men agreed that the sex they have is always as safe as they want it to be.

92% of the 2011 GAPSS respondents agreed that the sex they have was as safe as they wanted it to be, 9% disagreed. In GOSS 2011, 89% agreed with the statement and 11% disagreed.

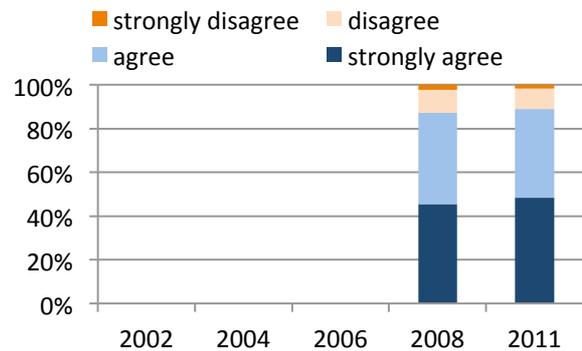
Figures 7a and 7b shows that there was no trend over time in either GAPSS or GOSS.

**Figure 7a. The sex I have is always as safe as I want it to be (GAPSS)**



See *Basic Frequencies Report* – [Table 139](#)

**Figure 7b. The sex I have is always as safe as I want it to be (GOSS)**



See *Basic Frequencies Report* – [Table 140](#)

<b>Encourage</b>	<p>Respondents were <b>more</b> likely to agree with the statement if they:</p> <ul style="list-style-type: none"> <li>identified as bisexual, compared to gay or those who identified as other than gay or bisexual.</li> </ul>
<b>Modify</b>	<p>Respondents were <b>less</b> likely to agree with the statement if they either:</p> <ul style="list-style-type: none"> <li>hold a high school or sixth-form qualification, compared to those with no formal qualification, or</li> <li>reported medium or low condom use with their casual sexual partners.</li> </ul>

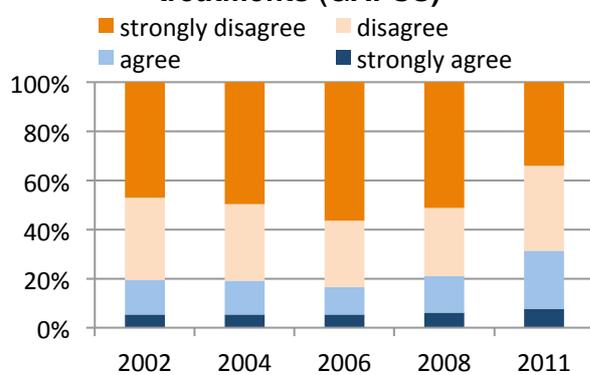
## HIV/AIDS is a less serious threat than it used to be because of new treatments

Most respondents disagreed that HIV is a less serious threat now because of new treatments.

In the 2011 GAPSS round 31% of respondents agreed that HIV is a less serious threat now due to new treatments while 69% disagreed with the statement. Of the 2011 GOSS respondents 24% agreed and 76% disagreed with the statement.

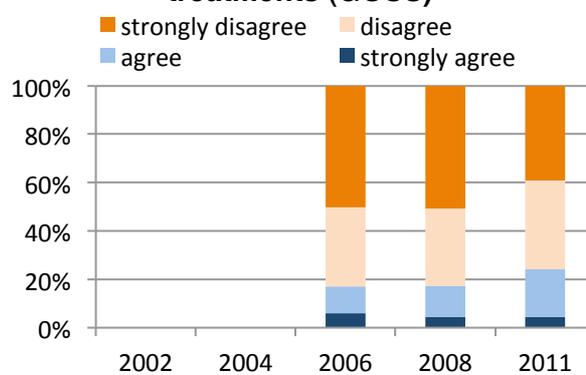
Figures 8a and 8b show that there has been an increasing trend in agreement with the statement particularly from 2008 and 2011. Respondents to both GAPSS and GOSS in 2011 were significantly more likely to agree than those who answered either the last round in 2008 or the inaugural round.

**Figure 8a. HIV/AIDS is a less serious threat than it used to be because of new treatments (GAPSS)**



See *Basic Frequencies Report* – [Table 129](#)

**Figure 8b. HIV/AIDS is a less serious threat than it used to be because of new treatments (GOSS)**



See *Basic Frequencies Report* – [Table 130](#)

This attitude is difficult to categorise as neither agreement nor disagreement implies a negative attitude to safe sexual practices. While the long-term outcomes of HIV diagnosis have been greatly improved it still remains a chronic and serious disease, particularly if diagnosed late. Those who agree with the statement may be better informed but may also trivialise HIV as potential risk of engaging in unprotected sex. However, fear of HIV also has negative impacts and people may dissociate themselves with prevention strategies due to stigma.

	<p>Respondents were <b>more</b> likely to agree with the statement if they either:</p> <ul style="list-style-type: none"> <li>reported being either retired or receiving state benefits, compared to those who are employed, or</li> <li>sometimes read Express, compared to those who never read it, or</li> <li>report being HIV positive at their last HIV test or had never had an HIV test, compared to those who tested negative, or</li> <li>reported infrequent condom use with their casual sexual partners.</li> </ul>
	<p>Respondents were <b>less</b> likely to agree with the statement if they either:</p> <ul style="list-style-type: none"> <li>were recruited online, compared to those recruited at the Big Gay Out, or</li> <li>reported one sexual partner in the past 6 months, compared to none, or</li> <li>reported no anal intercourse with their casual sexual partners.</li> </ul>

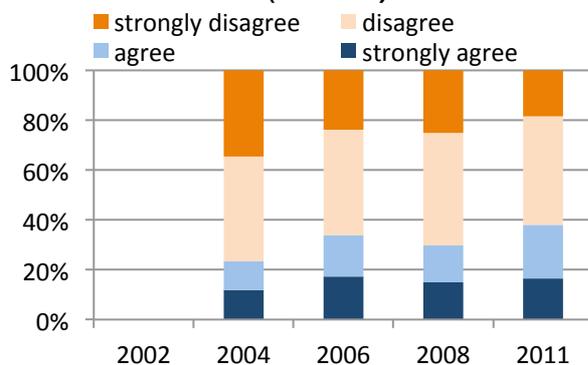
## A man who knows he has HIV would tell me he was positive before we had sex

The majority disagree that an HIV positive man would disclose his status before they had sex.

In the 2011 GAPSS survey round 38% of respondents agreed that an HIV positive man would disclose his status before sexual intercourse, 62% disagreed with the statement. In the 2011 GOSS survey the results were similar with 42% agreeing with the statement, while 58% disagreed.

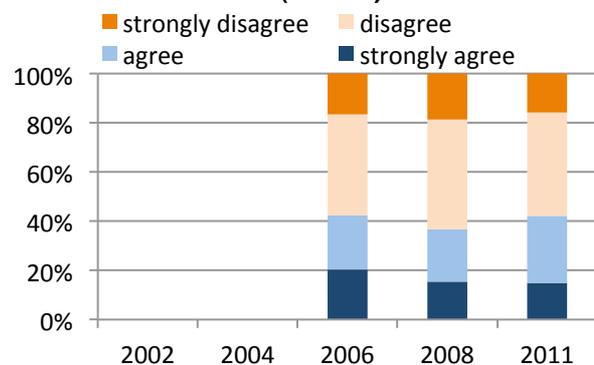
Figures 9a and 9b show that there is an increasing trend of agreement with this statement in both GAPSS and GOSS, particularly between 2008 and 2011.

**Figure 9a. A man who knows he has HIV would tell me he was positive before we had sex (GAPSS)**



See *Basic Frequencies Report* – [Table 137](#)

**Figure 9b. A man who knows he has HIV would tell me he was positive before we had sex (GOSS)**



See *Basic Frequencies Report* – [Table 138](#)

This is a complicated attitude and the responses are not easily categorised into the encourage/modify format. For example, those more likely to agree may take a more complacent approach to safe sex as they might expect all their partners to disclose their status – which may be unknown to them - or initiate safe sex. Disclosure is difficult and highly dependent on the nature of the relationship and the sexual act being engaged in.

	<p>Respondents were <b>more</b> likely to agree with the statement if they either:</p> <ul style="list-style-type: none"> <li>• are either retired or receive state benefits, compared to those who are employed, or</li> <li>• reported spending some time with their gay peers, compared to those who spend no time, or</li> <li>• have never had an HIV test, compared to those who tested HIV negative at their last test, or</li> <li>• reported infrequent condom use with their casual sexual partners.</li> </ul>
	<p>Respondents were <b>less</b> likely to agree with the statement if they either:</p> <ul style="list-style-type: none"> <li>• were aged over 30, compared to those who are younger, or</li> <li>• hold either a professional diploma or a university or post graduate degree, compared to those who have no qualification, or</li> <li>• reported sometimes reading Express, compared to those who never read it, or</li> <li>• tested HIV positive at their last HIV test, compared to those who tested negative, or</li> <li>• reported between over 5 sexual partners in the last 6 months, compared to those who reported none.</li> </ul>

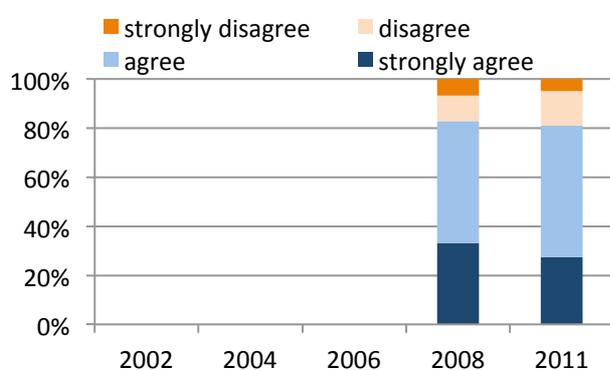
## In the last year I've seen safe sex messages that were relevant to me

Most men agreed that they had seen a safe-sex message relevant to them in the past year.

81% of GAPSS respondents in 2011 agreed that they had seen a safe sex message relevant to them in the past year and 19% disagreed with the statement. In the 2011 GOSS survey 75% of respondents agreed with the statement, while 25% disagreed.

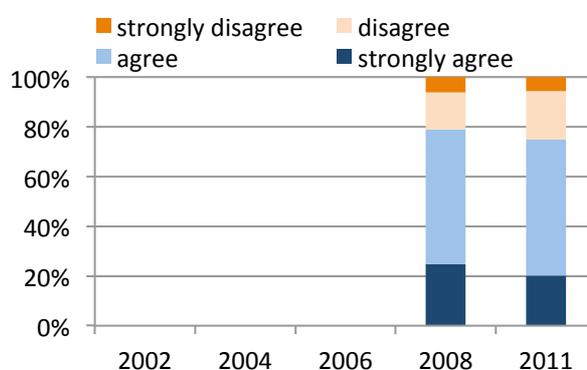
Figure 10b shows that GOSS respondents in 2011 were significantly less likely to agree that they had seen a safe sex message relevant to them in the previous year than those who took part in the 2008 survey round.

**Figure 10a. In the last year I've seen safe sex messages that were relevant to me (GAPSS)**



See *Basic Frequencies Report* – [Table 141](#)

**Figure 10b. In the last year I've seen safe sex messages that were relevant to me (GOSS)**



See *Basic Frequencies Report* – [Table 142](#)

We have not classed the responses into encourage or modify for this statement. When interpreting these results it may be better to regard them as groups of MSM who felt engaged by past safe sex messages and those who were not. Men who disagreed with this statement may have seen safe sex messages but felt they could not relate to them, that the messages were not targeted specifically at them, or that they had not seen any..

	<p>Respondents are <b>more</b> likely to agree with the statement if they either:</p> <ul style="list-style-type: none"> <li>• reported reading Express a lot or sometimes, compared to those who never read it, or</li> <li>• had a sexual health check-up in the last 12 months, compared to those who had not, or</li> <li>• reported no anal intercourse with their casual sexual partners, or</li> <li>• reported high condom use with their casual sexual partners.</li> </ul>
	<p>Respondents are <b>less</b> likely to agree with the statement if they either:</p> <ul style="list-style-type: none"> <li>• reported being unemployed, compared to those who are employed, or</li> <li>• reported being HIV positive at their last HIV test, compared to those who last tested negative, or</li> <li>• reported one sexual partner in the last 6 months, compared to those who reported none, or</li> <li>• reported low condom use with their casual sexual partners, or</li> <li>• reported no anal intercourse with their fuckbuddy-type partners.</li> </ul>

## Summary

- Attitudes towards condoms among New Zealand MSM participating in GAPSS and GOSS 2011 were highly favourable:
  - 95% of all respondents reported that they agreed condoms are ok as part of sex; 92% disagreed that they would never be willing to use a condom during anal sex; and most MSM agreed there was a “condom culture” among the men they have sex with
- On the other hand:
  - close to half of all respondents agreed that they don’t like wearing condoms as they reduce sensitivity, and a third agreed that they sometimes feel pressure not to use a condom.
- There were few consistent trends in attitudes over time:
  - the best description of trends is that there is a minority of MSM who do not perceive HIV to be an immediate personal threat, and this minority is growing.
- There was however strong evidence that segments of the MSM community held different attitudes:
  - greater media use and gay community attachment has a favourable association with several attitudes related to safe sex
  - current condom use is associated with the majority of attitudes. Those who report positive attitudes towards condoms are more likely to report using them often, and the reverse is true of those who report negative attitudes towards condoms
  - having tested HIV positive was independently associated with holding a number of unfavourable attitudes towards condoms and safe sex
  - MSM recruited from Internet dating sites were found to have more varied (i.e. some more positive, but also some more negative) attitudes in relation to different statements compared to MSM recruited from the Big Gay Out community fair day
  - age was not consistently related to attitudes independent of the factors above. However, younger MSM were more likely to expect disclosure from an HIV positive person, while older MSM were more likely to report condom sensitivity issues
  - respondents who reported themselves to be of Asian ethnicity were more likely to disagree that they didn’t like condoms because they reduced sensitivity, and were more likely to agree that they sometimes felt under pressure to not use a condom
  - MSM who hold a tertiary qualification are more likely to report favourable attitudes towards safe sex and condoms, while MSM who are currently students are more likely to report some unfavourable attitudes towards condoms and safe sex.

## Discussion

The majority of respondents to the 2011 GAPSS and GOSS surveys reported favourable attitudes towards condoms and safe sex. There was almost universal personal acceptance of condoms as a way to avoid HIV transmission, and most respondents also believed that other gay and bisexual men supported condom use. Thus there is strong evidence of a cultural norm to have safe sex among New Zealand MSM.

While this is encouraging some men nevertheless report difficulties using condoms or

negotiating condom use in practice. This is indicated by 2 out of every 5 respondents reporting that a condom reduces sensitivity, that almost 1 in 3 report sometimes feeling under pressure not to use a condom, and around 1 in 10 stating that the sex they have is not always as safe as they want it to be.

Condom sensitivity issues could be addressed by offering more suitable and acceptable condoms and greater availability of these, as well as improved promotion of user self-efficacy strategies (possibly including early adoption, more habitual use, and experimentation). Conversely, the more interpersonal-type obstacles to condom use reported by some men suggest partner-specific or episode-specific issues. Partner-specific issues indicate a mismatch in the intention to use condoms between two or more individuals. These could be addressed by building resilience among MSM who want to use condoms, as well as on going pro-condom social marketing or counselling to challenge non-use directed at their sexual partners. Our data cannot provide information on the context or triggers for episode-specific issues, and it would be helpful if these were better understood.

Some attitude statements have been repeated in several rounds of GAPSS and GOSS. There was mixed evidence of trends in agreement over time. The best description of trends is that there is a minority of MSM who do not perceive HIV as an immediate personal threat, and this minority is growing. This is apparent in the growing agreement that the HIV epidemic is less serious than it used to be, that an HIV positive man would disclose his status before sex, and that the respondent would sometimes rather risk HIV than use a condom.

Such attitudes could be a reflection of the broader media, social and legal environment in which organisations like NZAF operate in as well as seeking to influence. In fact, the single greatest shift in attitudes we identified was an increase in agreement that “HIV/AIDS is a less serious threat than it used to be because of new treatments” in 2011 compared to previous rounds. Given the widely publicised advances in antiretroviral HIV therapy, agreement with this statement is not necessarily surprising nor incorrect. However it does pose extra challenges for organisations trying to motivate MSM to adopt precautions.

We found a number of respondent characteristics that were independently associated with agreement or disagreement with statements in the 2011 surveys. In general, MSM who reported holding a tertiary qualification, spending more time with their gay peers, using certain media more often, and reporting high condom use with their sexual partners were significantly more likely to give favourable responses to several statements. Alternatively, MSM who reported low condom use with their sexual partners, being a student, and testing HIV positive at their last test were more likely to give unfavourable responses to certain statements.

While there is a clear correlation between high condom use and holding positive attitudes towards condoms (and the inverse), it is unclear which preceded which. Holding these attitudes might affect their condom use, and it is also plausible that an individual’s current condom use affects their attitudes. Without data on an individual’s attitudes and condom use over time we are unable to make this distinction. Likewise, for those known HIV positive respondents with unfavourable attitudes to condoms, we are unable to say if they had always held these attitudes or whether their attitudes changed as a result of diagnosis.

When interpreting these findings it is also important to bear in mind that some of the statements can be interpreted in a number of ways. Therefore while we have indicated where we believe attitudes ought to be modified or supported, for some attitudes this was not felt appropriate. For example, someone’s response to the statement “a man who knows he has HIV would tell me he was positive before we had sex” might depend on what type of sex they

thought this related to (e.g. mutual masturbation, or unprotected anal intercourse). This is because disclosure of HIV status has different legal and ethical implications in different contexts.

Both GAPSS and GOSS are established survey programmes with large and diverse samples of MSM, and the consistency in most findings over time suggests that they are robust. While the survey methodology means it is not possible to generalise the data to all MSM in New Zealand, we believe the respondents offer a good reflection of the experiences of most MSM as we recruit from community settings, commercial venues and Internet dating sites; places where most gay and bisexual men at risk of HIV socialise.

Several of the attitude statements in the GAPSS/GOSS questionnaire are “core” items included prior to the NZAF’s HIV Prevention Plan 2009-2014. Statements that directly correspond to NZAF’s recent condom-based social marketing should be considered for the next round in 2014. While this would not enable trends in new attitudes to be tracked, it would provide estimates of the prevalence of an attitude and how this varied among subgroups of the target MSM population.

In conclusion, the majority of respondents to the GAPSS and GOSS surveys hold favourable attitudes towards condoms, and wanting to have safe sex is a cultural norm. There is also a clear association between holding a certain attitude or belief and reporting corresponding behaviour. As an individual’s attitudes are susceptible to change and could directly influence their subsequent behaviour, it is important to encourage the adoption of favourable attitudes and beliefs towards condoms and safe sex within the MSM population of New Zealand.

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