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Contents

Acknowledgements ii
List of figures and tables iii
Glossary iv
Key points 1
Introduction 2
Demographic profile 3
HIV testing, status, and treatment 3
Hepatitis C status and testing 5
Sexual partnerships and practices 5
Regular male partners 6
Casual male partners 7
Sexual health 8
Recreational drug use 9
Knowledge and use of PEP and PrEP 10
References 11
Appendix A1
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The 210 men who participated in the survey

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The management and staff of the gay community venues and events who gave permission for the survey to be administered on their premises
List of figures and tables

**Figures**

- Figure 1. Age distribution of participants 3
- Figure 2. HIV status of all men, including men who had never tested for HIV 4
- Figure 3. Current sexual partnerships with men 5

**Tables**

- Table 1. Where men met their male sexual partners in the six months prior to the survey 6
- Table 2. STI testing among all men in the 12 months prior to the survey 8
- Table 3. Recreational drug use among all men in the six months prior to the survey 9
Glossary

ART  antiretroviral treatment
CAIC  condomless anal intercourse with casual partners
CAIR  condomless anal intercourse with regular partners
GHB  gamma-hydroxybutyrate
HIV  human immunodeficiency virus
HIV-seroconcordant relationship  a relationship in which both partners are of the same HIV status, either HIV-positive or HIV-negative
HIV-serodiscordant relationship  a relationship in which both partners are known to be of different HIV statuses, e.g., HIV-positive and HIV-negative
HIV-serononconcordant relationship  a relationship in which the HIV status of at least one partner in the relationship is not known, e.g., HIV-positive and untested, HIV-negative and untested, or both untested
HIV status  a person’s antibody status established by HIV testing, e.g., HIV-negative, HIV-positive, or unknown
PEP  post-exposure prophylaxis, a course of antiretroviral drugs used to reduce the risk of HIV infection after potential exposure has occurred
PrEP  pre-exposure prophylaxis, antiretroviral drugs used to reduce the risk of HIV infection before a potential exposure
SD  standard deviation
STI  sexually transmissible infection
The men who took part in the 2014 Tasmanian Gay Community Periodic Survey (GCPS) were relatively young (38% were aged under 25).

Almost one-quarter of participants (23%) reported that they had never tested for HIV. Two in five men aged under 25 (41%) had never tested for HIV.

Almost two-thirds of non-HIV-positive men (62%) reported testing for HIV in the 12 months prior to the survey.

All HIV-positive men were receiving combination antiretroviral treatment and had an undetectable viral load.

Most men with a regular male partner (68%) reported having condomless anal intercourse with their partner in the six months prior to the survey. More than half of the men who had casual male partners (53%) reported having condomless anal intercourse with any of these partners in the six months prior to the survey.

Recreational drug use was reported by slightly less than half of the men in the six months prior to the survey (46%), but few men reported crystal methamphetamine use (4%).

One in three men (33%) reported knowing that post-exposure prophylaxis (PEP) was available while more than half of the men (55%) indicated that they had not heard of PEP. It should be noted that PEP was only made available in Tasmania in 2014.
Introduction

The Gay Community Periodic Surveys (GCPS) are cross-sectional surveys of gay and homosexually active men in Australia. The primary aim of the surveys is to provide data on sexual, drug use and testing practices related to the transmission of HIV and other sexually transmissible infections (STIs) among gay men (Zablotska, Kippax, Grulich, Holt, & Prestage, 2011). The first GCPS was conducted in Sydney in 1996, with recruitment commencing in Melbourne, Queensland (Brisbane, Gold Coast, Cairns), Adelaide, Perth, and Canberra in subsequent years. In 2014, the GCPS was conducted for the first time in Tasmania. While it had not been conducted in Tasmania prior to this, three small surveys of gay men, which used questions based on those from the GCPS, were conducted in 1997, 1998, and 2002 (Patman & Butler, 2002).

The 2014 Tasmanian GCPS was conducted to coincide with the TasPride Festival in 2014. The survey was implemented by the Tasmanian Council on AIDS, Hepatitis and Related Diseases (TasCAHRD) with support from the Tasmanian Department of Health and Human Services. The Centre for Social Research in Health coordinated the survey and oversaw online recruitment with support from the Kirby Institute. TasCAHRD oversaw local recruitment.

Recruitment took place in October-December 2014. Online recruitment was conducted using advertising on the social networking site Facebook which directed gay and bisexual men to a website with an online version of the GCPS questionnaire (http://gcpsonline.net). The advertisements were targeted to all men aged 16 and above who were located in Tasmania and indicated in their Facebook profile information that they were ‘interested’ in men. While the emphasis for the Tasmanian GCPS was on online recruitment, a small amount of face-to-face recruitment also took place. This was conducted by trained staff at seven data collection sites in Hobart, including gay community events (e.g., the TasPride Parade) and sexual health clinics. Face-to-face recruitment used both paper surveys and iPads to complete the survey online.

In total, two hundred and ten men (n=210) participated in the 2014 survey, with 194 (92.4%) participants completing the survey online and 16 (7.6%) participants completing paper surveys. While the online survey was commenced by 239 men, some had to be excluded. This was the case if a participant completed less than 50% of questions (n=44) or if they reported having previously completed the survey in this calendar year (n=1) (81.2% online response rate). The response rate for face-to-face participants was 57.9% based on the number of participants approached and number of refusals.

In other states and territories, the GCPS have typically been conducted using face-to-face recruitment. In 2014, however, online methods were introduced in Queensland and Adelaide in addition to face-to-face recruitment.
Demographic profile

The mean age of the sample was 31.3 years (standard deviation [SD]=12.7) and ranged from 16 to 70 years (see Figure 1). Compared to GCPS participants in other states and territories, a higher proportion of men surveyed in Tasmania were aged under 25 (Hull, Mao, Kolstee, et al., 2014; Hull, Mao, Rossteuscher, et al., 2014; Lee, Hull, et al., 2014; Lee et al., 2013; Lee, Mao, von Doussa, et al., 2014; Lee, Mao, Watts, et al., 2014).

The majority of men identified as gay (90.0%, n=189) or bisexual (5.2%, n=11). Three participants identified as trans male and one participant identified as intersex male. Most of the sample were born in Australia (92.4%, n=194) and had an Anglo-Australian cultural background (81.4%, n=171). Five percent (n=11) of the sample reported an Aboriginal and/or Torres Strait Islander background.

Figure 1. Age distribution of participants

Most men had completed tertiary studies; 27.6% (n=58) had a university degree and 29.0% (n=61) had a trade certificate. Most participants were in paid employment; 46.7% (n=98) were in full-time employment and 15.2% (n=32) were in part-time employment. Smaller proportions of men reported that they were students (21.9%, n=46) or were unemployed or receiving welfare benefits (10.0%, n=21). Most men (56.0%, n=108) lived in Hobart; the remainder of participants lived in Launceston (15.7%, n=33) or other locations (24.8%, n=52).

HIV testing, status, and treatment

More than three-quarters of the men (77.1%, n=162) reported having ever been tested for HIV, and just less than a quarter reported that they had never tested for HIV (22.9%, n=48). Men aged under 25 were significantly more likely than men aged 25 and above to report never having been tested for HIV (40.5% vs. 12.2%; p < .001). Among non-HIV-positive men who had ever tested for HIV, almost two-thirds (62.3%, n=94) reported testing for HIV in the 12 months prior to the survey. Compared with gay men in other locations, Tasmanian men appear to be less
likely to have ever been tested for HIV, but similarly likely to have recently tested for HIV. For example, in the 2013 GCPS, over 85% of gay men nationally reported that they had ever tested for HIV and more than 60% of non-HIV-positive men reported that they had tested in the previous 12 months (de Wit, Mao, Adam, & Treloar, 2014).

Among men who had been tested for HIV, it was most commonly reported that their last HIV test was at a general practice (43.8%, n=71) or clinic/hospital (34.0%, n=55) with a minority reporting being tested at a community-based service (14.2%, n=23). Men who had tested for HIV and who were recruited online were asked to provide more details about where they had their last HIV test. The majority of these men reported that their last HIV test took place in Tasmania (89.9%, n=124). A minority reported having had their last HIV test in Victoria (6.5%, n=9), with the remaining men reporting that they were tested in another state or territory (3.6%, n=5). Among the non-HIV-positive men who were tested for HIV in the 12 months prior to the survey, 48.9% (n=46) reported having been tested more than once.

Among men who had been tested for HIV, the majority reported that their HIV status was negative (92.0%, n=149). Less than one in ten men reported being HIV-positive (6.8%, n=11) and two men reported not knowing their HIV status or test results. Figure 2 shows the HIV status of participants, including those men who reported that they have never tested for HIV. The HIV prevalence among gay men in Tasmania appears to be lower than in the Melbourne, Sydney, and Queensland GCPS (Hull, Mao, Kolstee, et al., 2014; Lee, Mao, von Doussa, et al., 2014; Lee, Mao, Watts, et al., 2014; Lee, Mao, Rossteuscher, et al., 2014; Lee et al., 2013), and higher than in the Perth GCPS (Lee, Hull, et al., 2014).

**Figure 2. HIV status of all men, including men who had never tested for HIV**

Among HIV-positive men, all (n=11) reported that they were in receipt of combination antiretroviral treatment at the time of the survey, and all (n=11) reported an undetectable viral load. Eight of the HIV-positive men (72.7%) reported a CD4 count of more than 500. This appears to be a higher level of treatment uptake than that found in other Australian jurisdictions (76% nationally in the 2013 GCPS) (de Wit et al., 2014), but as the sample of HIV-positive men is very small, these findings may not be representative of all HIV-positive men in Tasmania.
All HIV-positive men in the Tasmanian survey reported attending clinical appointments to manage their HIV in the 12 months prior to the survey, and most of these men reported attending at least three clinical appointments during this time (81.8%, n=9). HIV-positive men who were recruited online (n=8) were asked an additional question about where they attended HIV clinical appointments. Five of these men reported attending a clinic or hospital in Tasmania; three men reported attending a general practitioner in Tasmania, and one man reported attending both a general practitioner and a clinic or hospital elsewhere in Australia.

**Hepatitis C status and testing**

Most men in the survey (61.0%, n=128) reported having ever been tested for hepatitis C. Of the HIV-positive men, all but one reported testing for hepatitis C (90.9%, n=10). Among men who had tested for hepatitis C, all but one man reported being hepatitis C negative (99.2%, n=127). One man reported not knowing his hepatitis C status while no men reported that they were hepatitis C positive.

**Sexual partnerships and practices**

At the time of the survey, four out of ten men reported being in a monogamous relationship with a male partner, with smaller proportions of men reporting that they had both regular and casual male partners or casual partners only (see Figure 3). One in five men reported no sexual relationships with men at the time of the survey. Compared to GCPS participants in other states and territories, men in Tasmania appear more likely to report being in a monogamous relationship with a male partner (Hull, Mao, Kolstee, et al., 2014; Hull, Mao, Rossteuscher, et al., 2014; Lee, Hull, et al., 2014; Lee et al., 2013; Lee, Mao, von Doussa, et al., 2014; Lee, Mao, Watts, et al., 2014).

![Figure 3. Current sexual partnerships with men](image)

Table 1 shows where men reported meeting their male sex partners in the six months prior to the survey. The most commonly used mechanism for meeting male sex partners was via mobile applications (such as Grindr), followed closely by the Internet. Other commonly used ways to meet male sex partners included meeting men in other Australian cities, gay bars, and meeting men elsewhere in Australia. It appears that men in Tasmania are more reliant on mobile phones, the Internet, and travelling to other Australian cities to meet other men compared with GCPS.
participants in states and territories with more gay venues (Hull, Mao, Kolstee, et al., 2014; Lee, Mao, von Doussa, et al., 2014; Lee, Mao, Watts, et al., 2014). It should be noted that there are no sex-on-premises venues and only one gay licensed venue in Hobart.

**Table 1. Where men met their male sexual partners in the six months prior to the survey**

<table>
<thead>
<tr>
<th>Location</th>
<th>2014 n (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mobile app e.g. Grindr</td>
<td>77 (36.7)</td>
</tr>
<tr>
<td>Internet</td>
<td>76 (36.2)</td>
</tr>
<tr>
<td>In other Australian cities</td>
<td>47 (22.4)</td>
</tr>
<tr>
<td>Gay bar</td>
<td>33 (15.7)</td>
</tr>
<tr>
<td>Elsewhere in Australia</td>
<td>28 (13.3)</td>
</tr>
<tr>
<td>Overseas</td>
<td>20 (9.5)</td>
</tr>
<tr>
<td>Beat</td>
<td>19 (9.0)</td>
</tr>
<tr>
<td>Dance party</td>
<td>18 (8.6)</td>
</tr>
<tr>
<td>Gay saunas</td>
<td>17 (8.1)</td>
</tr>
<tr>
<td>Sex workers</td>
<td>9 (4.3)</td>
</tr>
<tr>
<td>Other sex-on-premises venues</td>
<td>8 (3.8)</td>
</tr>
<tr>
<td>Private sex parties</td>
<td>8 (3.8)</td>
</tr>
<tr>
<td>Gym</td>
<td>5 (2.4)</td>
</tr>
<tr>
<td><strong>Total (not mutually exclusive)</strong></td>
<td><strong>210 (100)</strong></td>
</tr>
</tbody>
</table>

**Regular male partners**

Among men who reported regular male partners in the six months prior to the survey, half (51.3%, n=78) reported an agreement with their regular partner about sex within the relationship. The most commonly held agreements about sex within the relationship were that anal intercourse could occur without a condom (33.6%, n=51) or that anal intercourse could only occur with a condom (14.5%, n=22). Four men reported that no anal intercourse could occur within their relationship. Tasmanian men appeared to be less likely than men in other states and territories to report having an agreement with their regular partner about sex within the relationship. However, among men who did have an agreement, similar proportions of men in Tasmania and other GCPS locations reported the most commonly held agreements about sex with or without a condom (Hull, Mao, Kolstee, et al., 2014; Hull, Mao, Rossteuscher, et al., 2014; Lee, Hull, et al., 2014; Lee et al., 2013; Lee, Mao, von Doussa, et al., 2014; Lee, Mao, Watts, et al., 2014).

Among men who reported regular male partners in the six months prior to the survey, slightly more than half (53.9%; n=82) reported an agreement with their regular partner about sex outside the relationship. The most commonly held agreements about sex outside the relationship were that casual sex was not allowed (40.1%, n=61) or that condoms must always be used during sex with casual partners (11.2%, n=17). Three men reported that anal intercourse with casual partners could occur without a condom; none of these men reported being HIV-positive according to their last HIV test. Tasmanian men appear as likely as GCPS participants in other states and territories to report having an agreement with their regular partner about sex outside the relationship. However, compared to men in other locations, Tasmanian men with regular partners appear
more likely to report that casual sex was not allowed (Hull, Mao, Kolstee, et al., 2014; Hull, Mao, Rossteuscher, et al., 2014; Lee, Hull, et al., 2014; Lee et al., 2013; Lee, Mao, von Doussa, et al., 2014; Lee, Mao, Watts, et al., 2014).

Among the five HIV-positive men who had regular male partners in the six months prior to the survey, three men were in serononconcordant relationships (i.e., their partner’s status was unknown) and two men were in seroconcordant relationships. Among HIV-negative men who had regular male partners in the six months prior to the survey, the majority (68.1%, n=79) were in seroconcordant relationships; more than one quarter (28.5%, n=33) were in serononconcordant relationships, and a small number of men (n=4) were in serodiscordant relationships. HIV-negative men with regular partners in Tasmania appear to be less likely than men in the Sydney and Adelaide GCPS to report being in a seroconcordant relationship, and slightly more likely to be in a serononconcordant relationship (Hull, Mao, Kolstee, et al., 2014; Hull, Mao, Rossteuscher, et al., 2014; Lee, Hull, et al., 2014; Lee et al., 2013; Lee, Mao, von Doussa, et al., 2014; Lee, Mao, Watts, et al., 2014).

The majority of men with regular partners in the six months prior to the survey (68.4%, n=104) reported that they had condomless anal intercourse with their regular partners (CAIR); one in five men (19.7%, n=30) reported always using condoms for anal intercourse with their regular partners, and one in ten (11.8%, n=18) reported no anal intercourse with their regular partners. The level of CAIR reported in Tasmania is similar to that reported in the Canberra GCPS (Hull, Mao, Rossteuscher, et al., 2014), but higher than that reported in other jurisdictions (Hull, Mao, Kolstee, et al., 2014; Lee, Hull, et al., 2014; Lee et al., 2013; Lee, Mao, von Doussa, et al., 2014; Lee, Mao, Watts, et al., 2014).

Among the five HIV-positive men with regular partners, four men reported no CAIR and one man reported seroconcordant CAIR in the six months prior to the survey. Among HIV-negative men with regular partners, almost half of the men reported seroconcordant CAIR (47.4%, n=55); almost one-third (31.9%, n=37) reported no CAIR, and one in five men (20.7%, n=24) reported CAIR that was not seroconcordant. Among HIV-negative men who reported CAIR with partners who were not seroconcordant in the six months prior to the survey, one in five men (n=5) reported that their partner consistently withdrew before ejaculation, and one in six men (n=4) reported always being the insertive partner during CAIR (i.e., strategic positioning). Men in Tasmania appear to be less likely than men in Sydney, Adelaide and Perth, and more likely than men in Melbourne, Queensland and Canberra, to report that their partner consistently withdrew before ejaculation. Men in Tasmania appear to be less likely than men in other jurisdictions to report always being the insertive partner during CAIR (Hull, Mao, Kolstee, et al., 2014; Hull, Mao, Rossteuscher, et al., 2014; Lee, Hull, et al., 2014; Lee et al., 2013; Lee, Mao, von Doussa, et al., 2014; Lee, Mao, Watts, et al., 2014).

Casual male partners

Among men with casual male partners in the six months prior to the survey, half of the men (52.6%, n=50) reported any condomless anal intercourse with casual partners (CAIC); slightly more than one-third reported always using condoms for anal intercourse (35.8%, n=34), and one in nine men (11.6%, n=11) reported no CAIC. Compared with men in other jurisdictions, men in Tasmania appear to be more likely to report condomless anal intercourse with casual male partners (34.9% nationally in 2013) (de Wit et al., 2014).

The majority of men in Tasmania with casual male partners (69.7%, n=53) reported disclosing their HIV status to at least some casual male partners in the six months prior to the survey, with four in ten (40.8%, n=31) disclosing their HIV status to all casual partners. Tasmanian GCPS participants appear to be more
likely to engage in consistent HIV status disclosure than GCPS participants in other jurisdictions (de Wit et al., 2014).

Of the three HIV-positive men who reported CAIC, two men reported always ensuring that their partners were HIV-positive before CAIC (i.e., serosorting) as well as always ensuring that they had an undetectable viral load before sex. The third man reported occasional serosorting before CAIC. Among HIV-negative men who reported CAIC, the most commonly reported risk reduction practice was serosorting, which was always practised by 37.1% (n=13) and often practised by 17.1% (n=6) of men. Serosorting is also the most common risk reduction strategy reported by HIV-negative men in other jurisdictions (Hull, Mao, Kolstee, et al., 2014; Hull, Mao, Rossteuscher, et al., 2014; Lee, Hull, et al., 2014; Lee et al., 2013; Lee, Mao, von Doussa, et al., 2014; Lee, Mao, Watts, et al., 2014). One HIV-negative man reported always ensuring that HIV-positive partners had an undetectable viral load before CAIC, and one man reported taking anti-HIV medication either before or after CAIC to prevent HIV transmission.

Sexual health

More than half of the men (56.2%, n=118) reported having had any test for sexually transmissible infections (STI) (including a blood test for syphilis) in the 12 months prior to the survey. Four out of ten men (40.0%, n=84) reported having had a blood test for syphilis. Table 2 shows the different STI test sites reported among the sample in the 12 months prior to the survey. These levels of STI testing are lower than that reported in other jurisdictions (Hull, Mao, Kolstee, et al., 2014; Hull, Mao, Rossteuscher, et al., 2014; Lee, Hull, et al., 2014; Lee et al., 2013; Lee, Mao, von Doussa, et al., 2014; Lee, Mao, Watts, et al., 2014).

Table 2. STI testing among all men in the 12 months prior to the survey

<table>
<thead>
<tr>
<th>Test Site</th>
<th>2014 n (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Anal swab</td>
<td>60 (28.6)</td>
</tr>
<tr>
<td>Throat swab</td>
<td>68 (32.4)</td>
</tr>
<tr>
<td>Penile swab</td>
<td>45 (21.4)</td>
</tr>
<tr>
<td>Urine sample</td>
<td>90 (42.9)</td>
</tr>
<tr>
<td>Blood test for syphilis</td>
<td>84 (40.0)</td>
</tr>
<tr>
<td>Blood test other than for HIV</td>
<td>95 (45.2)</td>
</tr>
<tr>
<td>Any STI test (not including blood tests)</td>
<td>96 (45.7)</td>
</tr>
<tr>
<td>Any STI test (including blood tests)</td>
<td>118 (56.2)</td>
</tr>
<tr>
<td>Total (not mutually exclusive)</td>
<td>210</td>
</tr>
</tbody>
</table>

Note: ‘Blood test for syphilis’ was included in the calculation for any STI test (including blood tests).

Fewer than one in ten men (7.6%, n=16) reported having been diagnosed with an STI in the 12 months prior to the survey. The proportion of men in Tasmania reporting STI diagnoses was similar to that reported in the Canberra and Adelaide GCPS (Hull, Mao, Rossteuscher, et al., 2014; Lee et al., 2013), but lower than that reported in the Sydney, Melbourne, Queensland and Perth GCPS (Hull, Mao, Kolstee, et al., 2014; Lee, Hull, et al., 2014; Lee, Mao, von Doussa, et al., 2014; Lee, Mao, Watts, et al., 2014). Among those men diagnosed with an STI, the majority (68.8%, n=11) had told at least one of their sex partners about their diagnosis and just under half (43.8%, n=7) had told all of their sex partners.
Recreational drug use

Table 3 shows recreational drug use among the sample in the six months prior to the survey. Drug use was commonly reported, with slightly less than half of the men (45.7%, n=96) reporting any drug use in the six months prior to the survey. The most commonly used drugs were cannabis (30.9%), amyl nitrite (poppers) (18.6%), and erectile dysfunction medications (e.g., Viagra, Cialis) (11.0%). While levels of cannabis use are similar to that reported in other jurisdictions, use of most other drugs is more commonly reported among GCPS participants in other jurisdictions, particularly in Sydney and Melbourne (Hull, Mao, Kolstee, et al., 2014; Hull, Mao, Rossteuscher, et al., 2014; Lee, Hull, et al., 2014; Lee et al., 2013; Lee, Mao, von Doussa, et al., 2014; Lee, Mao, Watts, et al., 2014).

Almost one in ten men (8.6%, n=18) reported using party drugs for sex and around one in fifteen (6.2%, n=13) reported group sex during or after drug use in the six months prior to the survey. Both of these practices are more commonly reported in GCPS participants in other jurisdictions (Hull, Mao, Kolstee, et al., 2014; Hull, Mao, Rossteuscher, et al., 2014; Lee, Hull, et al., 2014; Lee et al., 2013; Lee, Mao, von Doussa, et al., 2014; Lee, Mao, Watts, et al., 2014). A small number of men (3.8%, n=8) reported injecting drug use in the six months prior to the survey. This level of injecting drug use is similar to that reported in other jurisdictions (approximately 4%) although slightly less common than reported in Sydney (6.2% in 2013) (de Wit et al., 2014).

Table 3. Recreational drug use among all men in the six months prior to the survey

<table>
<thead>
<tr>
<th>Drug</th>
<th>2014 n (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cannabis</td>
<td>65 (30.9)</td>
</tr>
<tr>
<td>Amyl nitrite</td>
<td>39 (18.6)</td>
</tr>
<tr>
<td>Erectile dysfunction medications (e.g., Viagra, Cialis)</td>
<td>23 (11.0)</td>
</tr>
<tr>
<td>Ecstasy</td>
<td>14 (6.7)</td>
</tr>
<tr>
<td>Amphetamine (speed)</td>
<td>12 (5.7)</td>
</tr>
<tr>
<td>Crystal methamphetamine</td>
<td>8 (3.8)</td>
</tr>
<tr>
<td>Cocaine</td>
<td>6 (2.9)</td>
</tr>
<tr>
<td>Steroids</td>
<td>6 (2.9)</td>
</tr>
<tr>
<td>GHB</td>
<td>5 (2.4)</td>
</tr>
<tr>
<td>Ketamine</td>
<td>4 (1.9)</td>
</tr>
<tr>
<td>Heroin</td>
<td>4 (1.9)</td>
</tr>
<tr>
<td>Other drugs</td>
<td>14 (6.7)</td>
</tr>
<tr>
<td>Total (not mutually exclusive)</td>
<td>210</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Number of drugs used</th>
<th>2014 n (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>None</td>
<td>114 (54.3)</td>
</tr>
<tr>
<td>One or two drugs</td>
<td>72 (34.3)</td>
</tr>
<tr>
<td>More than two drugs</td>
<td>24 (11.4)</td>
</tr>
<tr>
<td>Total</td>
<td>210 (100)</td>
</tr>
</tbody>
</table>
Knowledge and use of PEP and PrEP

One in three men (32.9%, n=69) reported knowing that post-exposure prophylaxis (PEP) was available while more than half of the men (54.8%, n=115) reported having never heard of PEP. PEP awareness appears to be lower among Tasmanian men compared to GCPS participants in other jurisdictions (Hull, Mao, Kolstee, et al., 2014; Hull, Mao, Rossteuscher, et al., 2014; Lee, Hull, et al., 2014; Lee et al., 2013; Lee, Mao, von Doussa, et al., 2014; Lee, Mao, Watts, et al., 2014). However, it should be noted that PEP was only made available in Tasmania in 2014, which may have affected PEP awareness among the men surveyed.

One non-HIV-positive man reported taking a prescribed course of PEP after exposure to HIV in the six months prior to the survey, and one non-HIV-positive man reported taking anti-HIV-medication to reduce his chance of getting HIV (which could be indicative of pre-exposure prophylaxis [PrEP]).


### Section A – About you

1. How many of your friends are gay or homosexual men?
   - None
   - A few
   - Some
   - Most
   - All

2. How much of your free time is spent with gay or homosexual men?
   - None
   - A little
   - Some
   - A lot

3. Do you think of yourself as:
   - Gay/Homosexual
   - Bisexual
   - Heterosexual
   - Other (please specify)

4. How old are you?
   - [ ] Years

5. Are you of Aboriginal or Torres Strait Islander origin?
   - No
   - Yes

6. What is your ethnic background? (e.g. Dutch, Greek, Vietnamese, Lebanese)
   - Anglo-Australian
   - Other

7. Where were you born?
   - Australia
   - Overseas

8. Where do you live?
   - Postcode
   - Suburb/Town

9. Are you:
   - Employed full-time
   - Employed part-time
   - On pension/social security
   - Unemployed
   - Other

10. What is your occupation? (e.g. bartender, teacher, welder)
    - [ ] A student

11. What is the highest level of education you have completed?
    - [ ] Year 10
    - [ ] Year 12 / TCE / VCE / HSC / QCE / SACE / WACE
    - [ ] Tertiary diploma or trade certificate / TAFE
    - [ ] University degree

### Section B – Your sex partners

In this survey we distinguish between REGULAR (boyfriend/lover) and CASUAL partners

12. Do you currently have sex with casual male partners?
    - [ ] No
    - [ ] Yes

13. Do you currently have sex with a regular male partner?
    - [ ] No
    - [ ] Yes

14. How would you describe your sexual relationship with your current regular male partner? (choose one)
    - We are monogamous – neither of us has casual sex
    - Both my partner and I have casual sex with other men
    - I have casual sex with other men but my partner does not
    - My partner has casual sex with other men but I do not
    - I have several regular male partners
    - No current regular male partner

15. If you are in a regular relationship with a man, for how long has it been?
    - Less than 6 months
    - 6–11 months
    - 1–2 years
    - More than 2 years
    - Not in a regular relationship with a man

16. Do you have a clear (spoken) agreement with your regular partner about sex within your relationship?
    - [ ] No agreement
    - [ ] Agreement: No sex at all
    - [ ] Agreement: No anal sex at all
    - [ ] Agreement: All anal sex is with a condom
    - [ ] Agreement: Anal sex can be without a condom

17. Do you have a clear (spoken) agreement with your regular partner about sex with casual male partners?
    - [ ] No agreement
    - [ ] Agreement: No sex at all
    - [ ] Agreement: No anal sex at all
    - [ ] Agreement: All anal sex is with a condom
    - [ ] Agreement: Anal sex can be without a condom
20. In the last 6 months, how many of your casual male partners did you tell your HIV status before sex?

1 □ Never 2 □ Occasionally 3 □ Often

21. Have you had sex with regular male partner/s in the last 6 months?

1 □ Yes 2 □ No

Go to section E

In the last 6 MONTHS which of the following have you done with any of your REGULAR male partner/s?

Anal sex regular partner/s:

22. I fucked him with a condom.

1 □ Never 2 □ Occasionally 3 □ Often

23. He fucked me with a condom.

1 □ Never 2 □ Occasionally 3 □ Often

24. I fucked him without a condom but pulled out before I came.

1 □ Never 2 □ Occasionally 3 □ Often

25. He fucked me without a condom but pulled out before he came.

1 □ Never 2 □ Occasionally 3 □ Often

26. I fucked him without a condom and came inside.

1 □ Never 2 □ Occasionally 3 □ Often

27. He fucked me without a condom and came inside.

1 □ Never 2 □ Occasionally 3 □ Often

28. Have you had any sex with any casual male partner/s in the last 6 months?

1 □ Yes 2 □ No

Go to section F

In the last 6 MONTHS which of the following have you done with any of your CASUAL male partner/s?

Anal sex casual partner/s:

29. I fucked him with a condom.

1 □ Never 2 □ Occasionally 3 □ Often

30. He fucked me with a condom.

1 □ Never 2 □ Occasionally 3 □ Often

31. I fucked him without a condom but pulled out before I came.

1 □ Never 2 □ Occasionally 3 □ Often

32. He fucked me without a condom but pulled out before he came.

1 □ Never 2 □ Occasionally 3 □ Often

33. I fucked him without a condom and came inside.

1 □ Never 2 □ Occasionally 3 □ Often

34. He fucked me without a condom and came inside.

1 □ Never 2 □ Occasionally 3 □ Often

HIV disclosure casual partner/s

35. How many of your casual partners did you tell your HIV status before sex?

1 □ None 2 □ Some 3 □ All

36. How many of your casual partners told you their HIV status before sex?

1 □ None 2 □ Some 3 □ All
37. In the last 6 months, if you had anal sex without a condom with any casual male partner(s), did you do any of the following to avoid getting or passing on HIV?

- I made sure we were the same HIV status before we fucked without a condom
- I chose to take the top role (I fucked him) because his HIV status was different or unknown to me
- I chose to take the bottom role (he fucked me) because his HIV status was different or unknown to me
- When I fucked him, I chose to pull out before cumming because his HIV status was different or unknown to me
- When he fucked me, I made sure he pulled out before cumming because his HIV status was different or unknown to me
- I took anti-HIV medication before sex
- I took anti-HIV medication after sex
- When my partner was HIV-positive, I checked he had an undetectable viral load before we had sex
- I knew I had an undetectable viral load before we had sex

Section F – HIV testing and HIV status

38. Have you ever had an HIV antibody test?

- 1. No
- 2. Yes

39. When were you last tested for HIV antibodies?

- 1. Never tested
- 2. Less than a week ago
- 3. 1–4 weeks ago
- 4. 1–6 months ago
- 5. 7–12 months ago
- 6. 1–2 years ago
- 7. 2–4 years ago
- 8. More than 4 years ago

40. Based on the results of your HIV antibody tests, what is your HIV status?

- 1. No test/Don't know
- 2. Negative
- 3. Positive

41. Where did you have your last HIV test?

- 1. No test/Don't know
- 2. At home
- 3. Clinic/hospital
- 4. Community-based service
- 5. Gay bar/club/sex venue
- 6. Somewhere else

42. How many HIV tests have you had in the last 12 months?

- 1. None (no tests)
- 2. One test
- 3. Two tests
- 4. 3–4 tests
- 5. 5 or more tests

43. If you have a regular partner, do you know the result of his HIV antibody test?

- 1. Positive
- 2. Negative
- 3. I don’t know/He hasn’t had a test
- 4. No regular partner

44. If your regular partner is HIV positive, what was his last viral load test?

- 1. Undetectable
- 2. Detectable
- 3. Don't know/unsure
- 4. No HIV-positive partner

45. When were you first diagnosed as HIV-positive?

Year

46. In the last 12 months, how many clinical appointments about managing HIV have you attended?

- 1. None
- 2. 1-2
- 3. 3-4
- 4. 5 or more

47. Are you on combination antiretroviral therapy?

- 1. Yes
- 2. No

48. What was your last viral load test?

- 1. Undetectable
- 2. Detectable
- 3. Don’t know/unsure

49. What was your last CD4 count?

- 1. <200
- 2. 201-350
- 3. 351-500
- 4. >500
- 5. Don't know/unsure

Survey concludes on next page
Section G – STI testing

50. Which of these sexual health tests have you had in the last 12 months?

<table>
<thead>
<tr>
<th>Test</th>
<th>None</th>
<th>Once</th>
<th>Twice</th>
<th>3 or more</th>
</tr>
</thead>
<tbody>
<tr>
<td>Anal swab</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>Throat swab</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>Penile swab</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>Urine sample</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>Blood test for HIV</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>Blood test for syphilis</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>Other blood test</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
</tbody>
</table>

51. Have you ever been tested for hepatitis C?
1. Yes
2. No
3. Don’t know

52. What is your hepatitis C status?
1. Negative
2. Positive
3. Don’t know

53. Were you diagnosed with any sexually transmitted infection (other than HIV) in the last 12 months?
1. Yes
2. No

54. If you were diagnosed with a sexually transmitted infection in the last 12 months, how many of your sex partners did you tell about your diagnosis?
1. None
2. A few
3. Some
4. All
5. Not been diagnosed with an STI in the last 12 months

Go to section H

Section H – Medication to prevent HIV

55. What do you know about post-exposure prophylaxis (PEP)?
1. It’s readily available now
2. It will be available in the future
3. I’ve never heard about it

56. What do you know about pre-exposure prophylaxis (PrEP)?
1. It’s readily available now
2. It will be available in the future
3. I’ve never heard about it

57. In the last 6 months, did you take a prescribed course (28 days) of anti-HIV medication (PEP) because you were exposed to HIV?
1. No
2. Yes, once
3. Yes, more than once

58. In the last 6 months, did you take any anti-HIV medication to reduce your chance of getting HIV during any sex you might have?
1. No
2. Yes, I was prescribed anti-HIV medication to take every day
3. Yes, I took anti-HIV medication that was not prescribed

Go to section I

Section I – Drug use

59. How often have you used these drugs in the last 6 months?

<table>
<thead>
<tr>
<th>Drug</th>
<th>Never</th>
<th>Once/twice</th>
<th>At least monthly</th>
<th>Every week</th>
</tr>
</thead>
<tbody>
<tr>
<td>Amyl/poppers</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>Marijuana</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>Viagra/Cialis etc</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>Ecstasy</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>Speed</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>Cocaine</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>Crystal meth</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>GHB</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>Ketamine (special K)</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>Heroin</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>Steroids</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>Any other drug</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
</tbody>
</table>

60. How often have you injected drugs in the last 6 months?
1. Every week
2. At least monthly
3. Never

61. Have you ever injected drugs?
1. Yes
2. No

62. In the last 6 months, how often have you used party drugs for the purpose of sex?
1. Every week
2. At least monthly
3. Never

63. In the last 6 months, how often have you had group sex after or while using party drugs?
1. Every week
2. At least monthly
3. Never

The survey concludes here.

Thank you for your time.

As this survey is anonymous, feedback cannot be provided directly. Please check the CSRH and TasCAHRD websites for the results of this survey.

https://csrh.arts.unsw.edu.au
http://tascahrd.org.au/