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Perceived Risks and Protective Strategies Employed by Young Men Who Have Sex with Men (YMSM) when Seeking Online Sexual Partners

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Abstract

This study examined young men who have sex with men's (YMSM) perceptions of risk regarding meeting sexual partners through the Internet. YMSM (N = 54; ages 18–29) who reported engaging in bareback sex (“intentional unprotected anal intercourse in high-risk contexts”) completed a structured assessment and a face-to-face interview. Participants reported using the Internet to meet sexual partners at least once per week, having had multiple sexual partners in the past two months ($M = 10.50$, $SD = 9.25$), and engaging in occasions of unprotected receptive ($M = 5.35$, $SD = 6.76$) and insertive ($M = 5.06$, $SD = 10.11$) anal intercourse. A third of the sample reported having had unprotected sex with a partner who was serodiscordant or of unknown serostatus. Despite the obvious HIV risks, the most commonly perceived risks included threats to physical safety and difficulties trusting a stranger. Risk reduction strategies included leaving information about partner and whereabouts with a friend, meeting in a public place, and screening partner through online chatting. YMSM who meet partners online may be at risk for physical violence in addition to HIV/STIs infection. Public health campaigns should increase awareness of safety concerns when meeting sexual partners online and support YMSM's self-protective actions.

MSM who use the Internet to meet sexual partners report high levels of sexual risk behaviors (Liau, Millet, & Marks, 2006) such as engaging in intentional unprotected anal intercourse in high-risk contexts (“bareback sex”; Carballo-Diéguez & Bauermeister, 2004; Carballo-Diéguez et al., 2009) and reporting multiple sexual partners (Groves et al., 2007; Mettrey, 2003). While emphasis has been placed on developing public health programs through Internet-based HIV/STI status awareness campaigns (Hogben & Kachur, 2008; Mimiaga, Fair et al., 2008; Mimiaga, Tetu et al., 2008), we know little about YMSM's perceived risks regarding face-to-face encounters (“hook-ups”) with partners met online. This is particularly worrisome as HIV/STI prevention efforts may be undermined in the presence of competing risks and concerns during a sexual encounter with a partner met online (Bauermeister, Carballo-Diéguez, Ventuneac, & Dolezal, 2009).

Hooking-up with sexual partners met through the Internet, while convenient, efficient, and familiar to YMSM, may increase exposure to other risks, including physical harm (e.g., forced sex) and emotional stress (e.g., harassment), may compromise YMSM's overall well-being by

placing them in precarious situations (e.g., a stranger's home in an unknown area), and may increase their risk of HIV/AIDS infection by decreasing their self-efficacy to engage in safer sex practices (e.g., their belief that they are capable of negotiating condom use with their online partner in a face-to-face encounter). Historically, however, MSM have shown resilience by developing strategies to mitigate perceived risks, including serosorting potential partners, meeting in public spaces, and strategic positioning (e.g., insertive or receptive sexual positioning depending on serostatus) (Kippax & Race, 2003). YMSM may also employ Internet-specific strategies to diminish the risks of hooking-up with a sexual partner met through the Internet while exploring their sexuality. In this study, we examined how YMSM perceive and reduce their risks when seeking sexual partners through the Internet.

Interdisciplinary research exploring the role of the Internet as a communication modality has suggested that individuals tend to express disinhibited desires through the creation of online "personas" or "selves" (Suler, 2004; Gackenbach, 2007). Individuals who use the Internet to communicate may rely on cognitive heuristics to inform their decision-making (Suler, 2004), including the limited number of cues enforcing normative behavior in chat rooms and websites (i.e., minimization of authority), the compartmentalization of online personas and the rationalization of online behavior as not being part of a 'real world' identity (i.e., dissociative anonymity), and the assumption that the repercussions of behaviors disappear after leaving the virtual space or switching the computer off (i.e., dissociative imagination). Furthermore, individuals may be more likely to disclose information if there is visual anonymity (i.e., invisibility) even though they may know characteristics of the person eliciting the information, may interact with others based on whether they have an immediate response (e.g., e-mail versus chatting, asynchronicity), and may interpret a communication (e.g., an e-mail) differently than what was intended due to the absence of visual or verbal cues to contextualize the message's tone (i.e., solipsistic introjection). Hence, YMSM may seek to use the Internet to express and fulfill their sexual desires, yet the distortion in communication and self-presentation via the Internet (as compared to bars and other venues) may increase YMSM's risks of both contracting HIV/STIs and suffering threats to their physical safety when they meet sexual partners in 'real life'.

In this study, we explored how YMSM who reported meeting partners through the Internet to engage in bareback sex talked about balancing the perceived risks of using the Internet to seek partners with risk reduction strategies. We combined quantitative and qualitative research methods to reduce potential biases that could emerge when using a single method approach and to cross-validate our interpretation of the data (Denzin, 1978). We discuss our findings from an interdisciplinary framework to understand how the Internet may influence YMSM's sexual decision-making when hooking up with partners met online.

Method

Sample

Data for this report comes from a study ("Frontiers in Prevention") exploring the use of the Internet to meet sexual partners to engage in intentional unprotected anal sex in high-risk contexts ("barebacking") (Carballo-Diequez et al., 2009). Between April 2005 and March 2006, we recruited men who met these eligibility criteria: (1) live in New York City or can commute; (2) report using the Internet to meet men at least twice per month; (3) self-identify as a barebacker or as someone who practices barebacking ('Are you into bareback or do you consider yourself a barebacker?'); (4) have had intentional, condomless, anal intercourse with a man met over the Internet; and (5) use at least one of the Internet sites identified in the first phase of the study (Carballo-Diequez et al., 2006). Participants were recruited exclusively through Internet sites in approximately equal numbers of European Americans, (EA), African Americans (AA), Latinos/Hispanics (LH), and Asian/Pacific Islanders (API). We also stratified

the sample to include about two thirds who self-reported both being HIV-negative and having had unprotected receptive anal intercourse in the previous year. Individuals who qualified were scheduled for interviews in our research offices as soon as possible after the screening. Of the 188 men who qualified, 64% completed a face-to-face interview. Data for this report focus on the 54 participants between the ages of 18 to 29 years old.

Procedure

Respondents underwent a consent process that explained that the study sought to examine 'barebacking' (no definition was given because personal definitions were explored as part of the study [Carballo-Diequez et al., 2009]); personal, interpersonal or other circumstances associated with barebacking; as well as acceptable HIV prevention methods for people who do not use condoms. Each respondent participated in an audio-recorded, in-depth, face-to-face interview conducted by one of three clinical psychologists on our team. A structured assessment using a Computer Administered Self Interview (CASI) followed which explored participants' demographic characteristics, self-reported HIV status, Internet use, and sexual behavior in the previous two months. Study participation lasted about two hours. Respondents were compensated with US\$50 for their time. This study was approved by the Institutional Review Board at New York State Psychiatric Institute.

Measures

Demographic characteristics—Respondents were asked to report their age, highest year of school completed, annual income (including money earned off the books), and ethnic and racial group membership. For ethnicity, respondents were asked to report if they considered themselves Latino or Hispanic. Those who did not identify as Hispanic or Latino were asked to report their race from the following categories: African American or Black, Asian or Pacific Islander, White or European American, Native American, and Other.

Sexual Behavior—Respondents were asked to report their sexual behavior with men during the previous two months (Carballo-Diequez, Dolezal, & Ventuneac, 2002). Questions were posed both in formal language and vernacular (in italics) to increase comprehension. Of relevance for the present report are three questions on sexual behavior with men in the past two months: a) Total number of sexual partners with whom participants engaged in anal sex (i.e., "During the past two months, how many male sexual partners have you had?"), (b) Total number of sexual partners with whom participants engaged in unprotected receptive anal intercourse (URAI) (i.e., "How many men put their penises in your rectum without a condom?/*How many men fucked in you the ass without a condom?*"), and (c) Total number of sexual partners with whom participants engaged in unprotected insertive anal intercourse (UIAI) (i.e., "Into how many men's rectums did you put your penis without a condom?/*How many men did you fuck in the ass without a condom?*").

HIV Status—Participants were asked whether they had been tested for HIV, if they had received their test result(s), and whether they were HIV infected or uninfected. No HIV test was offered as part of the study and HIV status was solely based on self-report.

Participants who reported having URAI with one or more partners were asked, "Of those men, how many had actually told you they were HIV-negative and you had no reasons to doubt it?" and "Of those men, how many do you know to be HIV-positive?" Based on participants' self-reported HIV status, we created a dummy variable to measure the risk of having one or more potentially serodiscordant partners during URAI in the previous two months (0 = seroconcordant, 1 = one or more serodiscordant partners).

Frequency of Internet Use to Meet Sexual Partners—Participants were asked to indicate how often they used the Internet to meet sexual partners (0 = Never, 1 = Once a month or less, 2 = 2–3 times a month, 3 = About once a week, 4 = 2–6 times a week, 5 = About once a day, and 6 = More than once a day).

In-depth interviews

A structured guide was used to ask about the respondents' Internet use to meet other men, strategies for meeting men, perceived advantages and disadvantages of using the Internet to meet sexual partners, and ideas about definitions and norms regarding bareback sex (Carballo-Diequez et al., 2009). Participants were asked to discuss the main prompt: "Tell me what it is like for you to meet men online for sex." Based on the direction of the interview, the interviewee was subsequently probed with the following questions: "What concerns do you have when making arrangements to meet someone in person? What are some of the strategies you take to offset those risks?"

Data Analysis

We first identified the transcripts representing participants between the ages of 18 to 29 ($N = 54$). We compared YMSM transitioning from adolescence into young adulthood (ages 18–24) to those in young adulthood (25–29) across their sociodemographic and sexual behaviors using t -tests and χ^2 . As we found no statistically significant differences between the two groups, we did not stratify our subsequent qualitative analyses by age group. Based on analytic recommendations for thematic analysis (i.e., thematic saturation in a homogeneous group may be achieved with 10 to 12 interviews), we determined that we had sufficient observations to conduct our qualitative analyses (Guest, Bunce & Johnson, 2006).

Following the thematic coding of the parent study (Carballo-Diequez et al., 2009), we then read the coded themes for "Internet use", "Hooking-up" and "Concerns about Hooking-Up". Two analytic questions guided our initial reading of these codes:

1. What concerns do YMSM perceive when seeking a sexual partner online?
2. What are some of the strategies taken to offset those risks?

From the narrative, we then expanded the existing codebook. This codebook included definitions, inclusion and exclusion criteria, and examples. We identified 10 subthemes related to YMSM's concerns when hooking up online: (a) physical safety, (b) trusting a stranger, (c) partner being a stalker, (d) being raped or having forced sex, (e) being robbed, (f) partner using drugs, (g) partner lying about HIV status, (h) not meeting youth's or partner's expectations when they met face-to-face, (i) lack of concerns, and (j) strategies to offset any of these risks or concerns.

As part of our content analysis, we then re-read the transcripts and conducted independent coding using NVIVO, a software program for qualitative data analysis. A primary coder (JB) read and coded the narratives, followed by a second (RG) and third (AE) who verified the coding. Coders met to discuss divergence in coding until agreement was reached (Hruschka et al., 2004). After coding, we examined whether each participant had mentioned a coded theme (without any additional probing by the interviewer) and entered this data into our SPSS database (i.e., 0 = Not mentioned, 1 = Mentioned). We used these dummy variables to test whether themes were correlated in YMSM's narratives using Spearman's (ρ) correlation coefficient (one-tailed significance test; $p < .05$). Finally, we identified modal responses, omitting recurrent or repetitious text.

Findings

Sample Description

Our sample ($N = 54$) of YMSM was ethnically diverse (17% White, 26% African American, 33% Latino, 17% Asian/Pacific Islander, and 7% Other), with most reporting some college education and earning an average income of \$26,480 ($SD = 23,560$). Five men (9%) reported being HIV-positive. On average, YMSM reported using the Internet to meet sexual partners at least once per week (see Table 1), having had multiple sexual partners in the past two months ($M = 10.50$, $SD = 9.25$), and engaging in multiple occasions of unprotected receptive ($M = 5.35$, $SD = 6.76$) and insertive ($M = 5.06$, $SD = 10.11$) anal intercourse. A third of the sample reported having had unprotected anal intercourse with a serodiscordant partner or with a partner of unknown serostatus.

Perceived Risks

The perceptions of risks and concern for physical safety emerged as a salient theme in the interviews. Most participants ($N = 45$; 83.3%) expressed a variety of concerns regarding meeting a sexual partner through the Internet (see Table 1). YMSM commonly expressed concern for their physical safety (24 mentions) and the risks associated with trusting a stranger (21 mentions). As a 22 year-old, HIV-negative Latino participant stated when asked about his expectations of meeting someone through the Internet for sex,

“The only expectation I think I have is basically getting home safely or the guy not being a weirdo or a criminal or anything.”

Several participants highlighted similar concerns about ending up with a serial killer, with several alluding to Jeffrey Dahmer. As an 18 year-old, HIV-negative, African American participant stated,

“I don’t want to be chopped up in a body bag. I don’t want to meet a psycho who wants to keep me in a house and tie me up all over with strings. (laughter) My fear is just the crazy people who are out there to hurt people.”

Participants highlighted other physical risks associated with meeting partners through the Internet, including being victims of rape/forced sex (5 mentions) or having their belongings stolen (4 mentions). Some participants had experienced the materialization of these perceived risks with a partner whom they had met through the Internet. For example, a 29 year-old, HIV-positive Latino participant related,

“About a year ago I met somebody and we decided to go walk in Central Park and the guy pulled a gun on me, raped me, stole my jewelry, stole my money, and took my cell phone. I really thought that guy was going to kill me. [...] As a result of that incident, I set up my system of checks and balances. Who knows what would’ve happened had it been in my house. Fortunately, we were in a public place, a gunshot would’ve been heard (laughter). There are some things that fortunately, most people try not to risk in public, but it definitely sort of caught me off guard.”

Participants were acutely aware that many people lie on their Internet profiles about characteristics such as age, weight, appearance, and HIV status, and this contributed to their general hesitancy to trust partners met online. Second to physical safety concerns, some participants noted concern for their sexual health. Contrary to our expectation that these concerns would be due to engaging in bareback sex, YMSM’s sexual health concerns related to feeling deceived by their partner’s self-presentation during face-to-face encounters. If there was a discrepancy between the expected and actual physical attributes of the partner whom they were meeting for sex, youth were more likely to turn down a partner (12 mentions) or to

question the authenticity of their partner's HIV/STI status (9 mentions). For example, one 26 year-old, HIV-negative, Asian Pacific Islander participant noted,

“There's always that nervous feeling of ‘What if this person has a disease or he' not telling me something?’”

On fewer occasions, YMSM mentioned actual occurrences of these risks such as being caught in the act by other people (2 mentions), realizing that the partner was recording the sexual act without their consent (2 mentions), feeling stalked by a sexual partner met online (1 mention), and meeting a partner who was abusing substances (1 mention).

Taken together, these findings suggest that YMSM are aware of the risks associated with meeting sexual partners through the Internet, particularly regarding their physical safety. Most participants had thought of the potential scenarios that could develop and some had experienced them already. Among the participants who reported having had bad experiences with partners they met on the Internet, most had developed strategies to reduce the risk of putting themselves in an unsafe situation again.

Risk Reduction Strategies

Most YMSM who discussed their perceived risks regarding meeting partners through the Internet ($N = 42$; 77.8%) also narrated their strategies to mitigate these risks; however, compared to YMSM's perceived risks, there were fewer mentions of harm reduction strategies across the interviews (see Table 1). Participants mentioned ways in which the Internet enabled them to employ various strategies to weed out undesirable partners, including screening prospective partners while chatting online (12 mentions), talking (in person or via the phone) prior to having sex (9 mentions), asking peers if they knew the potential partner (2 mentions), and not disclosing any personal information (1 mention). YMSM's screening procedures, however, tended to be conflated with partners' self-presentation skills and/or socioeconomic status. For instance, a 28 year-old, HIV-negative Asian Pacific Islander participant discussed the various steps he takes to screen prospective partners through the Internet:

“If someone's profile sounds crazy, I tend not to go after that type of person; but, if it's well put-together, it has to be sane. Some you can tell by looking at their grammar. Reading a person's profile, I ask them questions about the type of work they do. If they're telling me they're working for some corporate work or work at a bank or Wall St., [then] I'd feel better than if they're telling me that they have no job. Stability is also revealing about the person.”

Once they had decided to get together with a partner met online, YMSM indicated that they would meet partners in a public place prior to having sex (10 mentions), although other participants mentioned that they preferred when partners came over to their house in order to feel more in control of the surroundings (6 mentions). Regardless of the location, YMSM reported documenting whom they were meeting in case something happened. A third of participants, for example, collected personal information (e.g., phone number, address, or e-mail) from the partner prior to getting together in order to give this information to a close friend (14 mentions). As a 28 year-old, HIV-negative, White participant stated,

“If someone sends me e-mail on where they are, I always write it down and I'll either e-mail it to my roommate or I'll leave it for somebody to see. That's almost always what I do.”

YMSM also made safeguard plans (e.g., having cash and bringing a cell phone, have a friend call 30 minutes after the expected meeting time with a sexual partner) that would allow them to leave a meeting if they felt uncomfortable (2 mentions), and/or hiding or leaving behind any valuables (2 mentions). While it is difficult to ascertain whether these strategies were entirely

dependable or sufficiently protective, these tactics paralleled YMSM's previous experiences or their perceptions of the risks of meeting sexual partners through the Internet.

Overlap in Perceived Risks and Risk Reduction Strategies

As a final step, we explored whether thematic pairings of risks and strategies emerged from YMSM's narratives ($N = 42$), as they could potentially facilitate the development of theme-specific prevention messages. YMSM who reported distrusting a stranger were more likely to report studying a partner's online behaviors ($\rho = .44; p < .05$) and less likely to invite a partner back to their home ($\rho = -.33; p < .05$). Similarly, YMSM who reported other risks (e.g., stalking, partner is high, being caught, being recorded without consent) were more likely to report talking to potential partners over the phone or face-to-face prior to having sex ($\rho = .28; p < .05$), yet were less likely to study a partner's online behaviors ($\rho = -.26; p < .05$). We also found YMSM who were concerned about being robbed were also more likely to report giving their partner's information to a friend as a precaution ($\rho = .29; p < .05$).

While we are unable to make causal statements from these relationships, these findings suggest that distinct risk reduction strategies are utilized by YMSM to mitigate their risks. Overall, YMSM offset their distrust of partners by evaluating their exchanges with partners online, over the phone, or in person before engaging in sexual intercourse; by leaving information regarding their partner and their whereabouts with a friend; and by meeting in public places.

Discussion

The use of the Internet to meet partners may provide opportunities for YMSM to explore their sexuality that are different from face-to-face interactions (Brown, Maycock, & Burns, 2005); however, researchers have noted an association between HIV/AIDS sexual risk behaviors and meeting partners online (Liau et al., 2006). In this study, we examined the perceptions of risks associated with meeting a partner online, as well as the strategies developed to offset these risks, in a sample of YMSM who had reported engaging in bareback sex.

Overall, our findings suggest that close to two-thirds of YMSM in our sample mentioned at least one potential risk associated with meeting sexual partners through the Internet. Most of the perceived risks associated with meeting a partner through the Internet were related to physical well being (e.g., physical violence) rather than sexual health (e.g., HIV/STI infection). These findings, however, may be attributable to our sample's characteristics (i.e., YMSM who reported engaging in intentional unprotected sex). It is plausible that YMSM engaging in bareback sex may be aware of the potential sexual risks and be more concerned about other risks associated with partners met through the Internet use (e.g., their physical safety). Nevertheless, the restricted frequency of concerns reported was surprising, especially considering that most YMSM mentioned only one concern even when we probed during the interview for other concerns. Furthermore, over a third of participants did not perceive any risks associated with meeting partners via the web. It is plausible that these findings may reflect a subgroup of YMSM that has not experienced any dangerous interactions which would provoke a re-evaluation of the potential threats of online partner-seeking behavior to physical and sexual well-being. While preliminary, these findings call for the development of strategies focused on increasing awareness of the potential risks associated with meeting partners through the Internet while strengthening and supporting self-protective strategies to offset risks. Care should be taken, however, in promoting fear-based interventions as they have proven to be unsuccessful in promoting behavior change and maintenance (Witte & Allen, 2000). Moreover, research exploring how YMSM's perceived susceptibility may be optimistically biased due to sociocognitive factors (Suler, 2004) such as dissociative anonymity (i.e., meeting partners through the Internet doesn't increase personal risk) and dissociative imagination (i.e., renegotiating condoms is unnecessary if HIV status was noted in partner's profile or if a

conversation regarding HIV status was had) is direly needed as it may help inform successful public health campaigns.

On the other hand, meeting a sexual partner through the Internet may provide opportunities to assess situations that may lead to risk before hooking-up in person while also helping youth to develop strategies to mitigate these risks (Beyth-Marsom & Fischhoff, 1997). While the perceived risks and concerns mentioned by YMSM are troubling, we found that YMSM have developed strategies to minimize the perceived severity and potential consequences associated with hooking-up with a sexual partner met through the Internet. Most YMSM perceiving (or experiencing) one or more concerns discussed their strategies to mitigate risk, including studying a partner's online behavior and giving close friends information on their whereabouts when arranging to meet a partner they found through the Internet. At present, however, the efficacy of these strategies remains to be explored in greater detail. Some of the risk reduction strategies, such as studying a partner's online behavior through cues such as adequate grammar and profile descriptions, are susceptible to sociocognitive heuristics such as asynchronicity (i.e., partners are able to craft and deliver the most politically correct answer) and solipstic introjection (i.e., YMSM may interpret a partner's message differently than intended, including assigning attributes to the information received; e.g., assigning "trustworthiness" to someone based on their grammar or occupation). Other risk reduction strategies, however, occur once YMSM hook-up with partners (e.g., meeting in a regularly visited, visible public place or having a backup plan to leave), yet YMSM may be unable to exercise these face-to-face strategies if they feel physically threatened or uncomfortable with cancelling the rendezvous. Taken together, these findings suggest that public health programs should create opportunities for YMSM to discuss and share risk reduction strategies they use when seeking a partner online *and* meeting in face-to-face encounters. Furthermore, research exploring how sociocognitive heuristics influence sexual decision-making among Internet users is needed to provide the best harm reduction strategies through the Internet (Suler, 2004).

Our study includes a small and non-generalizable sample of YMSM who were recruited to participate in a study regarding their use of the Internet for bareback sex. Future research should seek to replicate our findings with a larger and more diverse sample, as YMSM who do not engage in bareback sex may report other experiences when seeking partners online. This limitation notwithstanding, however, our findings provide evidence that a high-risk subgroup of YMSM who reported meeting sexual partners through the Internet and engaging in bareback sex may be at risk for HIV/STIs as well as other psychosocial outcomes (e.g., physical and sexual violence). Given that YMSM have developed strategies to negotiate risks associated with their Internet use, public health campaigns may maximize their reach and success by exploring YMSM's experiences and perspectives regarding the use of the Internet to meet sexual partners when developing Internet-based prevention campaigns.

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Table 1

Descriptive Statistics by Age Group for Sociodemographic Characteristics and Sexual Behaviors among Young Men Who Have Sex with Men (N = 54)

	Mean(SD)/N(%)
Income (in thousands)	26.48(23.56)
Education	
Less than HS	5(9.3%)
HS Degree	7(13.0%)
Some College	21(38.9%)
College Degree	17(31.5%)
Some Graduate School	4(7.4%)
Race/Ethnicity	
White	9(16.7%)
African American	14(25.9%)
Latino	18(33.3%)
Asian American/Pacific Islander	9(16.7%)
Other Race/Ethnicity	4(7.4%)
HIV Status	
HIV-Negative	49(90.7%)
HIV-Positive	5(9.3%)
<i>Sexual Risk Behaviors^a</i>	
Number of male partners	10.50(9.25)
Number of male partners with whom engaged in URAI	3.87(5.11)
Number of male partners with whom engaged in UIAI	2.72(4.40)
Had an unknown or serodiscordant partner	18(33.3%)
<i>Internet Use^b</i>	
Frequency of Internet Use to Meet Sexual Partners	3.83(1.46)
<i>Perceived Risks (N = 45)</i>	
Trusting a Stranger	24(53.3%)
Physical Safety	21(46.7%)
Partner lied about his physical description	12(26.7%)
Concerns regarding partner's HIV/STI status	9(20.0%)
Rape/Forced Sex	5(11.1%)
Theft and Stealing	4(8.9%)
Other risks (e.g., stalking, partner is high, being caught, being recorded without consent)	7(15.6%)
Participants reporting no perceived risks	21(38.9%)
<i>Harm Reduction Strategies (N = 42)</i>	
Collect personal information from partner and give to friend	14(33.3%)
Study partner's behaviors	12(28.6%)
First meeting in public place	10(23.8%)
Talk before having sex	9(21.4%)
Invite them to the house	6(14.3%)
Other strategies (e.g., leave, hide valuables, ask friends about partner, protect identity)	9(21.4%)

	Mean(SD)/N(%)
Participants reporting no harm reduction strategies	12(22.2%)

^a Refers to behaviors carried out in the past two months.

^b Response categories were 0 = Never, 1 = Once a month or less, 2 = 2–3 times a month, 3 = About once a week, 4 = 2–6 times a week, 5 = About once a day, and 6 = More than once a day.

URAI = Unprotected Receptive Anal Intercourse; UIAI = Unprotected Insertive Anal Intercourse