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## DIFFERENCES IN HIV RISK PRACTICES SOUGHT BY SELF-IDENTIFIED GAY AND BISEXUAL MEN WHO USE INTERNET WEBSITES TO IDENTIFY POTENTIAL SEXUAL PARTNERS

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### Abstract

Men who have sex with men (MSM) account for the largest number of persons diagnosed with AIDS in the United States, with higher-than-average rates of drug use and unprotected sex being cited as the principal reasons underlying their high rates of HIV infection. Recent evidence has suggested that the use of Websites specifically designed to promote unsafe sexual practices (e.g., Bareback.com, BarebackRT.com, Bare4ever.com) may be particularly common among MSM, thereby fostering their risky behaviors.

In light of these findings, the present study, which compares HIV risk behaviors sought by self-identified gay and bisexual men, is based on a content analysis of 1,316 ads/profiles posted on one of the most popular men who have sex with other men (MSM) Websites (namely, Bare-back.com) that specifically fosters unprotected sex. Ads/profiles were selected randomly based on the American ZIP code of residence. Data were collected between September 2006 and January 2007.

Rates of advertised-for high-risk sexual behaviors were very high for gay and bisexual men alike, particularly for oral sex involving ejaculation into the mouth, anal sex involving ejaculation into the anus, multiple partner sex, and felching (i.e., eating ejaculatory fluid out of an anus into which at least one person previously ejaculated). Analytical comparisons of gay and bisexual men showed that, on various dimensions, the bisexual men in this sample had either similar or lower levels of sexual risk compared to the gay men. The HIV intervention-related implications of these findings are discussed.

### Keywords

Bisexuals; gay men; men who have sex with other men (MSM); Internet use; HIV risk behaviors; HIV risk preferences

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<sup>7</sup>Long-lasting sexual encounters were coded whenever a person's profile indicated an interest in identifying partners with whom he could have "long sessions," partners who were "long lasting," partners who were capable (sexually speaking) of "going on for hours," and so forth. This is included in the present research as an indicator of a risk preference because long-lasting sexual sessions are highly likely to lead to tearing of the penis and/or anus.

To date, approximately one million Americans have been diagnosed with AIDS, and estimates suggest that nearly 250,000 more are living with HIV that has not developed into AIDS (Centers for Disease Control and Prevention [CDC], 2006). MSM comprise the largest proportion of these individuals, accounting for 57% of all reported cases of AIDS with a known source of transmission and 53% of all HIV-positive persons who believed that they knew how they became HIV infected (CDC, 2006).<sup>1</sup> Despite the so-called changing face of AIDS in America—that is, changes in the proportions of persons of various population subgroups that are more/less affected by HIV now than in previous years—these percentages for MSM have declined very little during the past 10–15 years (CDC, 1996, 2001).

In light of this, numerous studies have been conducted to identify why, 25+ years into the HIV/AIDS epidemic, so many men continue to place themselves at risk for contracting HIV. Many factors have been identified, including the belief that engaging in unprotected sex is an expression of individual choice (Adam, 2005; Carballo-Diequez & Bauermeister, 2004), the belief that engaging in unprotected sex is an expression of masculinity (Halkitis, Green, & Wilton, 2004; Halkitis & Parsons, 2003; Ridge, 2004), the perception that AIDS antiretroviral drugs have made HIV/AIDS less of a health concern now than in prior years (Halkitis, Parsons, & Wilton, 2003; Sheon & Crosby, 2004), a fear of being rejected sexually by partners who dislike condoms (Sheon & Crosby, 2004), the belief that sex is more pleasurable when condoms are not used (Carballo-Diequez & Bauermeister, 2004; Dilley et al., 2002; Mansergh et al., 2002), feeling “burned out” by worrying about becoming HIV infected (Dilley et al., 2002; Halkitis et al., 2003) and feeling a greater sense of emotional connectedness to sexual partners with whom one had unprotected rather than protected sex (Mansergh et al., 2002; Theodore, Duran, Antoni, & Fernandez, 2004).

How men who wish to have high-risk sex with other men locate potential sex partners has been the subject of relatively little research, however. For many men, “traditional” avenues of meeting other men—for example, gay bars, gay/bisexual-oriented social activities, personal ads—remain popular ways of meeting potential sex partners (Horvath, Bowen, & Williams, 2006). But these “traditional” avenues often result in thwarted attempts at sexual encounters when, after investing the time in a getting-to-know-you process, the person who actively is seeking sex partners with whom he can have unprotected sex discovers that the person he has met is unwilling to engage in such behaviors. Another common way for men who wish to have unprotected sex with other men to locate potential partners is by frequenting public venues (e.g., parks, rest areas, restrooms) where male-to-male cruising is known to take place (Aveline, 1995; Earl, 1990). These locales often offer MSM seeking unprotected sex the opportunities they seek to find willing partners, but they have inherent drawbacks as well. Police enforcement efforts often disrupt sex-seeking behaviors in known male-to-male cruising spots (not to mention prosecute offenders found there!), and it is common for noncruising people to show up in these public venues to utilize them for their intended purposes (e.g., using a restroom facility, taking a walk in the woods).

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<sup>1</sup>For comparison purposes, the next-highest HIV transmission category is injection drug use, which accounts for 34% of all persons with AIDS and 24% of those who are currently HIV-positive.

In recent years, with the proliferation of the Internet, many men who wish to find other men specifically for engaging in unprotected sex appear to be turning to MSM-oriented Websites for this purpose. For example, in a sample of gay men who were recruited into a health promotion study via gay-oriented Internet Websites, Bolding, Davis, Sherr, Hart, and Elford's (2004) multivariate analysis revealed that the amount of risky sex in which men engaged was a significant predictor of their use of Internet Websites to locate sex partners. Bolding et al. also reported that 47% of the men in their sample said that when they wanted to identify potential sex partners, they preferred using Websites to frequenting bars or other "offline" venues. In another study (Bull, McFarlane, Lloyd, & Rietmeijer, 2004), among men actively using the Internet as a means of locating potential sex partners, 97% reported actually having met someone online for sex, and 86% said that they used Internet MSM sex sites at least once a week to identify possible partners. Halkitis et al. (2003) cited Internet Websites and chat rooms as key sources that are partly responsible for the upsurge of unprotected sexual activities that they have observed among gay and bisexual men in the New York City area. Another study examining the role that Internet usage plays with regard to HIV risk taking found that persons who had a history of meeting sex partners via the Internet reported more frequent involvement in risky sexual behaviors than persons who had not met sex partners online (Mustanski, 2007).

With mounting evidence of the importance of the role that the Internet may play in fostering sexual encounters between men who specifically wish to have unprotected sex with other men, it becomes important to understand male-sexual-content Website usage in this population. A variety of important questions emerge. First, what specific types of risky behaviors are these men seeking? Second, what beliefs and attitudes do they have vis-à-vis HIV and risk taking ... beliefs and attitudes that presumably underlie their risk-taking behaviors? Third, what characteristics are being sought in potential partners? For example, are HIV-negative men frequenting these Websites seeking to have sex only with other HIV-negative men? Are HIV-negative men who are using these male-sexual-content Websites seeking overall lower levels of risky behaviors than HIV-positive men are? Obtaining the answers to all of these questions is crucial if one wishes to develop an informed prevention and/or intervention effort targeting the risk behaviors of men who use Internet Websites to locate other men with whom they can engage in risky sex.

Also important to ascertain but largely unstudied in previous research is how the answers to the preceding questions may differ for self-identified gay men and self-identified bisexual men. In most studies, the two groups are combined into a single MSM category for research purposes. In practice, however, they are different from one another; they face different life situations from one another (particularly in the sexual behavior and sexual identity arenas) (Meyer, 2003; Schmitt, 2007); and they are likely to demonstrate differences in their reasons for engaging in unprotected sex (Rotheram-Borus, Marelich, & Srinivasan, 1999) and possibly also in the specific types of risky behaviors that they seek/practice (Rotheram-Borus et al., 1999). For example, many bisexual men may try to hide their male-male sexual urges from friends and female partners, for reasons having to do with homophobia and perceived negative reactions from their partners (Appleby, 2001; Goetstouwers, 2006). Indeed, many of these men do not self-identify as gay or bisexual (Martinez & Hosek, 2005; Wolitski, Jones, Wasserman, & Smith, 2006). Seeking male partners who can satisfy their

same-sex sexual urges without other people knowing has been termed “being on the down low,” and men who are “on the down low” have been shown to engage in sexually riskier practices than men whose male-male attraction is not kept hidden from others (Martinez & Hosek, 2005; Wolitski et al., 2006). For many other bisexual men—for example, those who do not try to keep their male-male sexual interests hidden from others—engaging in unprotected sex with their male partners may be perceived as a preference or as a “luxury” that they do not have with their female partners for reasons pertaining to pregnancy risk, partner (un)willingness to practice unprotected sex and so forth. For many bisexual men, engaging in risky sexual practices may be, quite simply, an expression of how they most enjoy their sexual encounters. In the present study, self-identified gay and bisexual men are compared to ascertain how they resemble or differ from one another with respect to the research questions posed above.

## METHODS

This research relies upon content analysis as the principal analytical tool.<sup>2</sup> The data were collected between September 2006 and January 2007 using Bareback.com, which is one of the largest MSM-oriented Websites currently available on the Internet. The Website was chosen because it is free to the public, findable by virtually any Internet search utilizing common key words like “bareback,” and because it boasts a large and steadily growing membership. Currently, the site has tens of thousands of registered users (the large majority of whom reside in the United States) and, according to daily updated information that the Website posts on its home page, it is growing at a rate of several hundred persons per month. This Website allows members to post profiles (including photographs) describing themselves, and there are no length restrictions placed on profiles posted.<sup>3</sup> In addition, there are specific places in their profiles where members are instructed to indicate the type(s) of relationships they are seeking (long-term relationships, one-on-one sexual encounters, three-way sexual encounters etc.), specific sexual acts that they would like to practice with a willing partner, and a free-for-all field that can be used to provide supplemental information about one’s most-sought-after traits or behaviors. Essentially, the large, stable, and growing membership of this Website, coupled with members’ ability to describe themselves as fully as they choose, made this particular Website an ideal candidate for the present content analysis research.

The content analysis was based on a random sample of users’ profiles, randomly selected by ZIP code, which is a searchable feature on the site. Men residing outside of the United States were excluded from this research, so as to keep it an America-focused study. This particular exclusion was made because HIV risk practices vary widely in different parts of the world, as does Internet access, and the author did not want these types of confounds to affect the

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<sup>2</sup>-Content analysis is a method of systematically examining the types of messages promulgated by any type of mass medium. It utilizes a quantitative approach to identify the types and frequency of messages that are being provided in the medium under study. Content analysis has become increasingly popular during the past two decades, and it has been used to study the messages provided to readers/viewers of such varied media forms as television, comic books, Internet Websites, health promotional brochures and pamphlets, popular song lyrics, magazines, and music videos among others. Readers who are interested in learning more about content analysis research are encouraged to consult Krippendorff (2003) and/or Neuendorf (2001).

<sup>3</sup>-In contrast, most other MSM-oriented Websites impose fairly-stringent limitations on the length of members’ postings, thereby precluding people from describing themselves and/or their sexual “want list” as completely as they might wish to do.

research findings. Also excluded from analysis were profiles that had not been filled out completely (i.e., with the user not providing at least one piece of the required information on each profile page on the Website) ( $n = 6$ ). To be included in the analyses conducted in the present article, a user's profile had to remain active at the conclusion of the data collection period, to guard against "experimenters" or one-time-only visitors to the site being included in the study. This led to the exclusion of 67 cases (4.8%). The decision was made to exclude "experimenters" and one-time-only visitors from these analyses because these individuals probably are not representative of the population of men who use the Internet on an ongoing basis to identify potential sex partners. For example, most of them probably do not use the Website in question to seek sexual "hook ups" but rather for personal entertainment or to relieve boredom. In the present analyses, men who considered themselves to be heterosexual or sexually "curious" have been excluded ( $n = 17$ ), leaving an analytic sample size of 1,299 self-identified gay ( $n = 1,167$ ) and bisexual ( $n = 132$ ) men as the foundation for this research.

### Data Collected

For each profile, the following information was collected: age; race/ethnicity (White, African American, Latino, Asian, Native American or biracial/multiracial); self-identification as being a "top," a versatile top, versatile, a versatile "bottom," or a bottom<sup>4</sup>; self-reported HIV serostatus (negative, positive or unknown); desired HIV serostatus in sex partners (must be negative, may be negative, must be positive, may be positive, do not care); self-identified sexual orientation (gay, bisexual, "curious," heterosexual); willingness to give and receive ejaculatory fluid in the mouth and anus; type(s) of "relationships" sought (one-on-one sexual encounter, long-term relationship, three-person sexual encounter, multiple partner sexual encounter, activities partner); the number and type of self-photographs posted by the user; the user's ZIP code (which was also used to compute population density as a macro-level analytical variable); whether or not the user had opted for an expanded, paid membership on the site; whether or not the user was a paid (presumably sexual) escort; and whether or not the user's profile was one of the most commonly searched profiles on the site on any day during the data collection period.<sup>5</sup> In addition, data collection also entailed coding for a wide variety of specific sexual behaviors, including among others felching (eating ejaculatory fluid that has been inserted into one person's anus and then feeding it back to that individual by mouth, usually with a kiss), rimming (oral stimulation of the anus), bukkake (ejaculating directly onto another person's mouth and face) and double penetration (forcing two penises into the same anus simultaneously). Finally, a variety of risk-enhancing practices and attitudes were also coded, including a stated preference for engaging in rough sex,<sup>6</sup> having sexual relations while high (known in the target community as PNP, or "partying and playing"), overtly stating that they will not use condoms and/or that

<sup>4</sup>These terms refer to the sexual acts that the men typically prefer doing with their partners. For example, "top" men typically prefer to engage in insertive anal sex and to receive oral sex from their partners, whereas "bottom" men typically prefer to engage in receptive anal sex and to perform oral sex on their partners. These same "top" and "bottom" labels also may be applied to other sexual acts (such as fisting, oral-anal contact, among others). Men who self-identify as "versatile" are usually willing to engage in both "top" and "bottom" sexual activities.

<sup>5</sup>Each day, the site reports the 20 members whose profiles were the most searched-for on the site the previous day. These "most active profiles" are posted in a prominent place on the Website, encouraging site users to visit these particular profiles and see for themselves what makes these profiles engaging for other site users.

they will not permit their partners to use condoms, actively trying to become HIV-infected (known in the target community as “bug chasing”), actively trying to infect partners with HIV (known as “gift giving”), refusing to withdraw the penis prior to ejaculation and/or refusing to allow a sex partner to withdraw his penis prior to ejaculation, an overt preference for anonymous sex (i.e., sexual encounters in which the name and/or face of the sexual partner[s] is/are unknown), a stated preference for having long-lasting sexual encounters,<sup>7</sup> an expression of seeking sexual encounters that are “uninhibited” or “no holds barred,” and eroticizing ejaculation fluid (known in the target community as being a “cum whore” or a “cum freak” or a “cum lover”).

## Research Questions and Analysis

Research Question #1 is “Are there differences in the specific risky sexual practices that are being sought by gay and bisexual men who use the Internet to identify potential sex partners?” This can be answered with Student’s *t*-tests whenever the outcome measure is continuous in nature (e.g., overall sexual risk level), and with chi-square tests whenever the dependent variable is dichotomous or categorical (e.g., seeking anonymous sexual encounters, wanting a partner with whom to engage in receptive anal sex). In some instances, odds ratios (ORs) are reported in lieu of chi-square tests, where the presentation of the data/findings in OR format is more useful or more informative. Research Question #2 is “Are there differences in self-identified gay and bisexual men’s beliefs and attitudes vis-à-vis HIV and risk taking?” Most of the pertinent items here (e.g., unwillingness to withdraw the penis or to allow the partner to withdraw prior to ejaculation) were coded in yes/no format during the content analysis process. Therefore, chi-square tests are appropriate for examining differences in responding based on sexual orientation. Research Question #3 is “Are there differences between gay and bisexual men in terms of what characteristics they are seeking in potential sexual partners?” Again, chi-square tests are used for these analyses, as the dependent variables are categorical in nature (e.g., desired partners’ HIV serostatus).

Results are reported as statistically-significant whenever  $p < .05$ .

## RESULTS

### Sample

Men ranged in age from age 18 to 63 (mean = 35.8, median = 36,  $SD=8.7$ ). Bisexual and gay were men comparable to one another in terms of age (35.6 vs. 35.9 years old,  $t = 0.38$ , n.s.). The sample approximates the American population fairly well in terms of its racial composition, with 77.0% of the men being White, 8.0% African American, 7.6% Latino, 2.8% Asian, 0.2% Native American and 4.4% biracial/multiracial. Bisexual and gay men did not differ on the basis of race (e.g., 73.3% and 77.4%, respectively, were White;  $\chi^2 [1 df] = 1.10$ , n.s.). One third of the men (33.6%) self-identified as being “top” or “versatile top,” one fourth (22.4%) self-identified as being “versatile” and the remainder (44.0%) self-identified

<sup>6</sup>. *Rough sex* was defined operationally as profiles explicitly stating a preference for partners with whom one could engage in “rough sex,” mentioning a desire for any type of sex that involved “pounding,” indicating a desire “to get plowed,” and so forth. Rough sex is included in this article as a risk-enhancing preference (not explicitly as a risk behavior *per se*) because of the significantly elevated risk for internal tearing (especially anal tearing) that often results from engaging in intentionally aggressive sexual practices.

as being a “bottom” or a “versatile bottom.” Bisexual and gay men were equally likely to label themselves as “bottoms” or “versatile bottoms” ( $\chi^2 [1df] = 0.14, n.s.$ ). Most (59.1%) said that they were HIV-negative, although sizable proportions of the men whose ads were coded said that they knew that they were HIV-positive (17.6%) or that they did not know what their HIV serostatus was (23.3%). Bisexual men were more likely than their gay counterparts in this research sample to be HIV-negative (87.1% vs. 56.0%) and they were less likely to self-report as HIV-positive (1.5% vs. 19.4%) or as serostatus unknown (11.4% vs. 24.7%) ( $\chi^2 [2df] = 50.02, p < .0001$ ). The sample, like the American population in general, tended to be skewed toward people residing in more densely populated areas. One-fifth of the men (19.9%) lived in an area with fewer than 250 persons per square mile. At the other end of the spectrum, 38.6% of the men resided in an area with more than 5,000 persons per square mile, and half of these men (19.6% of the total sample) lived in a high-density urban area with more than 10,000 persons per square mile. Bisexual men, on average, came from less densely populated areas than gay men did ( $t = 2.09, p < .04$ ).

**Research Question #1: Differences between gay and bisexual men regarding risky sexual practices**—Compared to their gay counterparts, bisexual men were significantly less likely to say that they were willing to accept another man’s ejaculatory fluids in the mouth (60.6% vs. 80.0%, OR = 0.38, Confidence Interval (95%) [CI] = 0.27–0.54,  $p < .0001$ ) or in the anus (59.9% vs. 70.9%, OR = 0.61, CI = 0.42–0.89,  $p < .009$ ). Gay and bisexual men were equally likely to say that they wanted to find partners who would allow them to ejaculate into their mouth (88.1% vs. 89.4%, n.s.) or into their anus (80.0% vs. 78.0%, n.s.). Bisexual men were significantly less likely than gay men to express an interest in locating partners with whom they could engage in all four of these risky behaviors (37.1% vs. 51.0%, OR = 0.57, CI = 0.39–0.82,  $p < .003$ ). On the other measures of sexual risk examined, gay and bisexual men did not differ significantly from one another. This was true for the proportion of both groups seeking partners with whom they could engage in felching (17.1% vs. 11.4%, n.s.), oral-anal contact (11.7% vs. 10.6%, n.s.), double penile penetration of the anus (1.1% vs. 1.5%, n.s.) and ejaculating directly onto the face or mouth (1.7% vs. 0.8%, n.s.).

**Research Question #2: Differences between gay and bisexual men’s risk-taking attitudes**—On all but one of the risk-taking preferences/attitudes measures examined, gay and bisexual men did not differ significantly from one another. This was true with regard to a preference for locating partners with whom they could engage in rough sex (11.6% vs. 12.1%, n.s.), having sexual relations while under the influence of drugs (56.0% vs. 51.5%, n.s.), stating an unwillingness to use condoms or to allow a sexual partner to use condoms with them (3.5% vs. 3.0%, n.s.), actively trying to become HIV-infected (2.2% vs. 2.3%, n.s.), refusing to withdraw the penis prior to ejaculation or to allow a sexual partner to do so (1.8% vs. 3.0%, n.s.), a preference for finding partners with whom one could engage in anonymous sex (3.3% vs. 3.0%, n.s.), a desire to have sex that was described as “wild” or “un-inhibited” (7.5% vs. 4.6%, n.s.) and eroticizing ejaculation fluids (16.4% vs. 15.2%, n.s.). The only attitude-related dimension studied on which gay and bisexual men were found to differ from one another was their wish to find partners with whom they could have

long-lasting sex, which was more common among gay men than it was among their bisexual counterparts (6.8% vs. 2.3%, OR = 3.12, CI = 1.00–10.03,  $p < .05$ ).

**Research Question #3: Differences between gay and bisexual men in terms of desired partner characteristics**—Compared to their gay counterparts, bisexual men were far more likely to express a preference for HIV-negative partners (72.0% vs. 30.9%, OR = 5.73, CI = 3.84–8.55,  $p < .0001$ ) and far less likely to say that potential partners' HIV serostatus did not matter to them (27.3% vs. 64.6%, OR = 0.21, CI = 0.14–0.31,  $p < .0001$ ). Gay and bisexual men were equally likely to say that they wanted to find partners for one-on-one sexual encounters (92.5% vs. 95.5%,  $\chi^2 [1 df] = 1.51$ , n.s.) or three-way sexual encounters (78.3% vs. 77.3%,  $\chi^2 [1 df] = 0.08$ , n.s.). Gay men were more likely than their bisexual counterparts to say that they wanted to locate persons who would be willing to engage in large-group sexual encounters (i.e., sex parties or orgies) (69.2% vs. 57.6%, OR = 1.66, CI 1.15–2.39,  $p < .007$ ) or to form long-term relationships with them (42.6% vs. 29.6%, OR = 1.77, CI = 1.20–2.62,  $p < .004$ ).

## DISCUSSION

### Potential Limitations of This Research

This content analysis research was conducted using one specific MSM-oriented Website, whose membership consists of men who self-identify as gay, bisexual, heterosexual or sexually curious. Because the study is based on the messages provided by one Website, there is no way to know whether users of this particular site are similar to or different from those who frequent other sites instead. Other sites were excluded from consideration in this research because of the fees that they charge for would-be users to partake of their services<sup>8</sup> and/or because of the significant limitations they placed on members' ad/profile content. As a Website specifically designed to foster contacts between men who wish to locate sexual partners with whom they can have unprotected sex, rather than being a Website designed to foster male-to-male contacts of a more-general nature (e.g., dating, friendships, activities partners), the Website chosen as the focus of this research represents an excellent sampling of men who are using the Internet specifically to locate other men with whom they can have unprotected sex.

Another potential limitation of this research is that virtually all of the ads/profiles appearing on the Website studied are written in English. Even though the Website has a substantial Latino and multiracial membership (11.9% in total), less than 0.5% of the ads/profiles used a language other than English. This may prevent non-English speakers from utilizing the Website, and this may limit the generalizability of the findings somewhat.

Finally, as a content analysis project, this research is unable to assess the extent to which the behaviors advertised for in the ads do or do not represent the behaviors practiced when people meet in person. For example, suppose someone has posted a profile stating that he

<sup>8</sup>This would have limited the generalizability of findings derived from studying their ad/profile content greatly, because socioeconomic factors such as the ability to afford site membership would have influenced site membership. With the site used in this research, membership is free to all who wish to utilize the Website, and additional membership features are available for purchase for persons wishing to upgrade their usage of the site.



does not care what his potential sex partner's HIV serostatus is, and he meets an HIV-positive person who contacted him as a result of his profile. It is impossible to know whether the person would engage in all of the same sexual behaviors with a partner who is known to be HIV-positive versus a partner who is not HIV-positive or a partner with whom there is no discussion of HIV serostatus. In point of fact, the extent to which the risky behaviors advertised for and/or listed as preferences in the ads do or do not reflect actual behaviors practiced when people meet in person is, by necessity, the subject of a different study, following on the heels of the current project. Published studies (cited earlier in this article) showing that men who use the Internet to locate sexual partners are very likely to meet up with such individuals for sex (i.e., their ads/profiles are, far more often than not, not posted purely for fun, but rather with sexual hook-ups in mind) suggest that there may not be a great disconnect between ad/profile content and behavioral practices. Nevertheless, this needs to be established with additional research.

## CONCLUSIONS

Despite these potential limitations, the present research has much to offer in terms of helping to understand the content of ads posted on Websites designed to foster unprotected sexual encounters among men seeking to have sex with other men. First, this research has shown that the rates of risky behaviors being sought by self-identified gay and bisexual men alike are very high. The large majority of men in both groups sought partners who would allow them to ejaculate into their mouth or anus, and most men in both groups sought partners who would ejaculate into their own mouth or anus. Nearly one-half of the men in this study wanted to locate sex partners who would be willing to engage in all four of these high-risk practices. Clearly, these findings indicate a great need for interventionists and HIV prevention workers to develop creative, effective campaigns to reduce risk practices among gay and bisexual men frequenting these Websites. Finding ways to convince men such as these, who as a group are probably quite knowledgeable about the behaviors that place people at risk for contracting and spreading HIV (Kelly & Kalichman, 1998; Korner, Hendry, & Kippax, 2005; Mulry et al., 1997), to use condoms and/or to negotiate for lower-risk sexual behaviors than they currently practice is likely to prove extremely challenging.

Second, the present research showed that, on many dimensions, the profiles of the bisexual men in this sample demonstrated either similar or lower levels of sexual risk when compared to those of the gay men studied. This finding stands in contrast to some recent research that has suggested that bisexual men engage in greater rates of sexual risk-taking than their gay male counterparts (Brooks, Rotheram-Borus, Bing, Ayala, & Henry, 2003; Heckman et al., 1995; Munoz-Laboy & Dodge, 2005, 2007) but is consistent with other research that has shown lower rates of risky sexual practices among bisexual men when compared to their gay male counterparts (Engler et al., 2005).

There are two important, specific intervention-related implications of these findings. The first of these is that men who self-identify as gay and who use the Internet to locate partners with whom they can engage in unprotected sex are searching for partners with whom they can engage in a wide array of very high-risk behaviors. This group needs ongoing targeted intervention, and in particular, intervention messages that are sensitive to the cultural issues

faced by members of the gay community and that take into account gay men's sexual norms. These include, among others, coping with sexual orientation-based discrimination, expectations for relationship and sexual (in)fidelity with one's sexual partners, and specific beliefs and attitudes underlying engaging in safer sexual behaviors. Developing collaborative relationships with long-standing HIV/AIDS programs targeting the gay community (e.g., Gay Men's Health Crisis in New York City, Howard Brown Health Center in Chicago) would be one smart step for interventionists to take, so that a "best practices" approach to developing a new community-based intervention program can be implemented.

The other main implication of the gay-versus-bisexual-men finding is that it suggests that many bisexual men may be in denial with respect to the levels of riskiness that are inherent in the sexual behaviors that they seek when searching for sex partners online. By advertising for risk practices that are, overall, less risky than their gay male counterparts, many bisexual men may believe that they are taking necessary steps to reduce their risk for acquiring HIV when, in fact, they really are not. It is important to remember that all of the ads/profiles coded as part of this research project appeared on a Website specifically designed to foster unsafe sexual practices among willing partners. Although from a comparative standpoint bisexual men were found to seek overall lower levels of risky behaviors than their gay male counterparts, men in both groups were seeking behaviors involving high levels of risk. Increasing bisexuals' sense of vulnerability to HIV/AIDS may very well be a key to helping to bring about reduced risk levels in this subpopulation. Previous research has shown that increasing perceived vulnerability to HIV/AIDS can be effective at helping people to reduce their risk for HIV (Belcher, Sternberg, Wilitski, Halkitis, & Hoff, 2005; Longshore, Anglin, & Hsieh, 1997; Rosengard, Anderson, & Stein, 2006). Also well worth examining in future research would be the interplay of bisexual men's HIV serostatus and the HIV serostatus they seek in potential sex partners.

One thing that is particularly important to note is that many community-based interventions targeting men who have sex with men are geared specifically toward the gay community, rather than to the unique needs of bisexuals. As Engler and colleagues (2005) noted:

To the extent that interventions largely geared towards and delivered by the gay community are meant to address the collective needs of all MSM in terms of HIV or STI prevention, significant segments of the MSM population may not be adequately reached or served by these efforts. (p. 97)

Future HIV prevention/intervention efforts targeting MSM would be wise to develop separate intervention modules for men who are gay and men who are bisexual, because their needs, while overlapping, are not identical. Other authors have also commented on the need for this type of approach (Heckman et al., 1995).

Finally, the author wishes to discuss some of the present study's findings with regard to personal definitions of masculinity, particularly for the self-identified bisexual men in the study. Numerous authors have commented on the role that masculinity issues may play in the HIV risk practices of bisexual men (Engler et al., 2005; Munoz-Laboy & Dodge, 2005, 2007), often suggesting that how men define masculinity for themselves affects the decisions they make and the sexual risks that they take. The present study found that, compared to

their gay male counterparts, bisexual men were less willing to accept semen orally and less willing to receive semen anally. Accepting another man's semen may be construed as being less masculine than giving one's semen to another man. This study also found that, compared to their gay male counterparts, bisexual men were less interested in finding persons with whom they could develop long-term relationships. Wanting to develop a long-term relationship with another man may be perceived as being less masculine than simply "hooking up" with him for sexual satisfaction. Moreover, the present study's data revealed that men who self-identified as bisexual were more likely to consider themselves to be "tops" or "versatile tops" when compared to their gay male counterparts (42.4% vs. 32.6%, OR = 1.52, CI = 1.05–2.19,  $p < .03$ ). Preferring the sexual role of a "top" typically corresponds with having greater control over the sex that is taking place. All of these findings are consistent with the interpretation that many bisexual men may adopt definitions of masculinity that steer them in a direction of somewhat lowered risk when engaging in sex with their male partners. The extent to which people's personal definitions of masculinity affect their sexual risk-taking is a subject well worth examining in future research. If the present study's findings are confirmed, interventionists working with self-identified bisexual men may wish to consider developing intervention curricula that take into account issues pertaining to masculinity, particularly as it applies to risk-taking practices.

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