

**滞日外国籍ゲイ・レズビアン・バイセクシュアルにおける健康や HIV/AIDS の情報ニーズ
に関するインターネット調査：中間報告**

**An internet survey investigating the health and HIV/AIDS information needs of Japanese
and non-Japanese gays, lesbians and bisexuals in Japan: Intermediate findings.**

研究協力者：コーナ・ジェーン(名古屋市立大学看護学部／財団法人エイズ予防財団)、市川誠一(名古屋市立大学看護学部)、金子典代(名古屋市立大学看護学部)、塩野徳史、新ヶ江章友(名古屋市立大学看護学部／財団法人エイズ予防財団)、伊藤俊広(国立病院機構仙台医療センター)、佐藤末光(ひかりクリニック／Rainbow Ring)、内海眞(国立病院機構名古屋医療センター)、鬼塚哲郎(京都産業大学／MASH 大阪)、山本政弘(国立病院機構九州医療センター)、健山正男(琉球大学大学院医学研究科)

研究要旨

厚生労働省のエイズ動向委員会のデータによると、外国籍 MSM の HIV 感染の増加が指摘されている。しかし、日本での多言語による滞日外国 MSM への HIV 関連情報の提供や支援が十分ではないことが指摘されている。東京などのゲイコミュニティセンタースタッフによれば、地域のゲイタウンにアクセスする外国国籍の MSM は除々に増えていると感じている。海外、特にアジア地域の疫学データによると、移住や旅行による移動が外国国籍 MSM 間の HIV 感染リスクに関係しているが報告されている。日本在住、あるいは日本に旅行目的で来た外国国籍 MSM、または日本国内外を移動する日本国籍 MSM の HIV 関連リスク行動や予防に関する調査が日本では行われていない。そのため外国籍 MSM についての状況は全く明らかではない。そこで、外国国籍 MSM および日本国籍の MSM を対象に、健康と HIV 関連情報や支援のニーズ、リスク行動や予防行動の調査を行った。日本在住の MSM に対するインターネット上での英語版パイロット調査を実施し、その後、基本属性、居住地、HIV や健康情報やサービス提供、HIV 感染とリスク行動、国内と海外の移動など 64 の質問項目の本調査を実施した。調査期間は 2009 年 9 月 1 日から 2010 年 9 月 30 日までとしている。本調査は現在進行中のため、今回は中間報告として発表する。

In Japan, recent national AIDS Surveillance data indicates that HIV infection rates are increasing slowly among foreign MSM (men who have sex with men). There is a scarcity of HIV related information and support in non Japanese languages, and anecdotal evidence from gay community centers in Tokyo and other cities indicates that foreign gay and bisexual men visiting gay commercial areas in Japan is increasing. International and Asian epidemiological data indicates migration and travel as impacting on HIV risk among MSM. This indicates the need to investigate HIV related risk behaviors and prevention needs of foreign gays, lesbians and bisexuals in Japan, and of Japanese traveling within and outside of Japan. Following a review of the literature in the area, an internet survey instrument was developed to investigate the health needs, and HIV preventive and risk behaviors of

foreign gays, bisexual and lesbians living in Japan. After pilot testing, the survey was conducted from September 1, 2009 to September 30, 2010. The survey asked 64 questions relating to domicile in Japan, access to health and HIV information and services, HIV related knowledge, HIV testing, and travel and sexual behavior within and outside of Japan. Preliminary findings relating to respondents background are presented here.

A. 研究目的

Travel, migration and instability have been implicated in facilitating HIV infection globally as well as within Asia. In relation to Japan in particular, HIV surveillance data indicates that HIV among foreign MSM is increasing. While the yearly numbers of foreign male homosexuals in HIV and AIDS reports are quite low, since 2006 yearly HIV reports have doubled from 15 to in the 30s since 2006 (National AIDS Surveillance Committee 2008) [1]. Preceding this trend, there has been an increase in exposure to HIV with in Japan (as opposed to infection exposure outside the country) among foreign male homosexuals since 2001. The increase of HIV and AIDS among foreign male homosexuals is contrasted by declining yearly reports among foreign heterosexual men. Surveillance data also includes a total of 8 foreign and Japanese homosexual women with HIV and AIDS indicating that lesbians should also be included in HIV related research and interventions. Of particular concern is the lack of HIV related information in non-Japanese languages for gay, lesbian and bisexuals living or visiting Japan. This research aims to investigate the HIV related risk behaviors and prevention needs of foreign gays, lesbians, and bisexuals living in and visiting Japan.

B. 研究方法

Survey respondents were Japanese and foreign gay, bisexuals and lesbians who were currently residing in Japan. Recruitment was conducted through notices in Japan Times Community Listings, English language Internet news sites in Japan including Metropolis, Japan Today, Fukuoka Now, Seek Japan, and the Japanese social networking site Mixi. As well as this, 2,500 pamphlets were distributed to gay bars, dance parties and events in Tokyo, Osaka and Nagoya, and a survey banner was placed on the Japanese pages of the gay and lesbian social networking site Gaydar.

The internet survey was set up on a secure web site, and after explaining the purpose, contact details of researchers, privacy protection policy, and method for feeding back results, informed consent was obtained before going to the survey pages. Approval to conduct the survey was obtained from the Nagoya City University School of Nursing Ethical Review Board. (Details of ethical considerations have been published elsewhere [2]). The survey period was from 1 September 2009 to 30 September, 2010.

The survey consisted of 64 questions relating to: general background including purpose to be in Japan, health insurance, problems experienced accessing health services and HIV knowledge (21 questions), HIV testing experience (6 questions), access to health, HIV information, gay and

HIV NGOs (6 questions), and travel and sexual behavior in Japan and overseas (31 questions). Open ended questions asked about problems experienced in finding information about or with accessing health services, problems encountered by HIV positive people in accessing health services, and preferences regarding condoms.

C. 研究結果

Intermediate results regarding respondents' backgrounds are presented here using data obtained at 26 December 2009 from 50 respondents. Final results will be available in the Final Report of the Study Group on the Development and Implementation of Community-based HIV Prevention Interventions for MSM, which will be published in April 2011.

① Sexuality

Sexuality of respondents is shown in Figure 1., indicating that 68% of respondents identified as gay, bisexual male, and queer, with 26% lesbian and bisexual female.

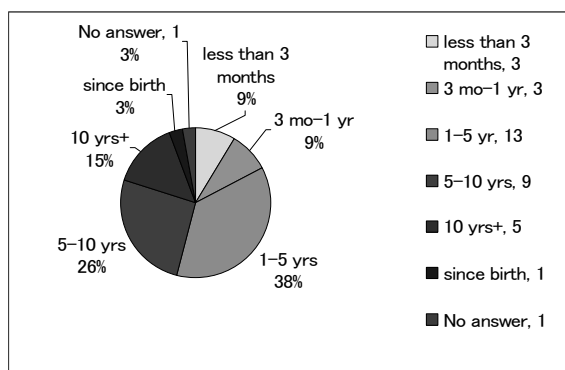


Figure 1. Sexuality of respondents (N=50)

② Age

Age of respondents is shown in Figure 2.

The findings show that 74% of respondents were in their 20s and 30s, indicating a relatively young survey sample.

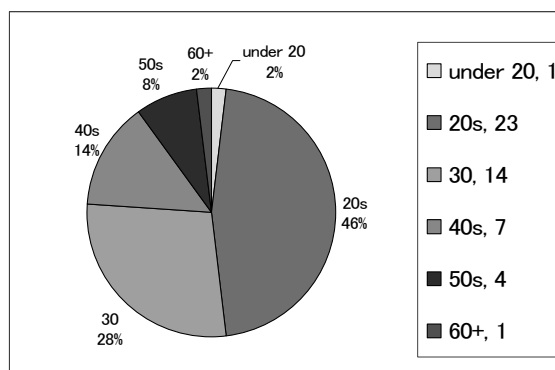


Figure 2. Age of respondents (N=50)

③ Nationality

Nationality of respondents is shown in Figure 3, with 55% of respondents from English speaking countries, 20% of Japanese nationality, Europe (excluding English speaking UK) 8% and 6% from Asia.

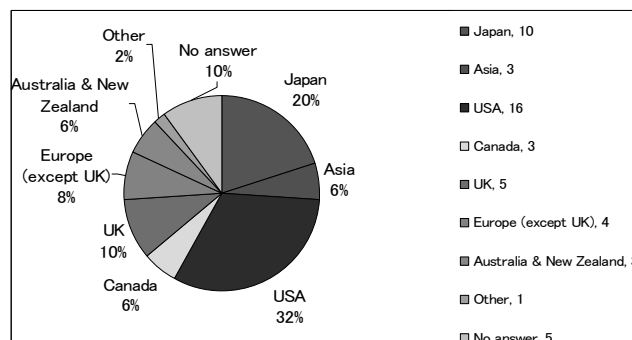


Figure 3. Nationality of respondents (N=50)

④ Length of stay in Japan

Length of stay of non Japanese gay, lesbian and bisexual respondents is shown in Figure 4. Respondents' staying less than 3 months 8%, respondents staying 1 to 5 years 35%, and those staying more than 5 years 51%, indicating the survey sample had lived in Japan for a relatively long period of time, despite the relatively young age of the survey sample.

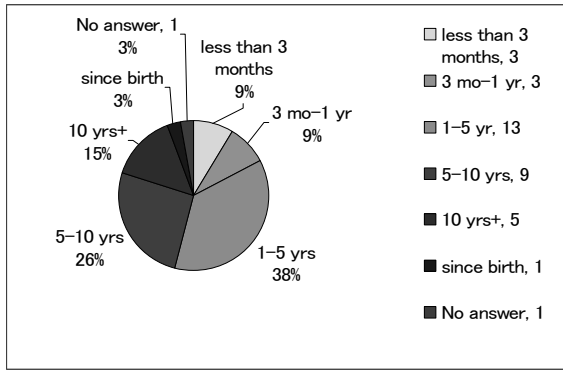


Figure 4. Length of stay in Japan of foreign gay, lesbian and bisexual respondents (N=35)

⑤ HIV testing

Life-time and previous 1 year HIV testing experience rates of Japanese and non-Japanese gay, bisexual and queer men are shown in Figure 5. While the number of survey respondents is low making accurate comparison difficult, the results suggest there the testing rates of foreign gay, bisexual and queer foreign and Japanese are very similar.

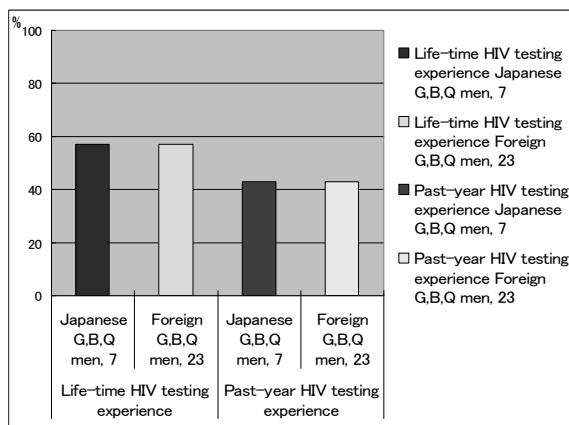


Figure 5. HIV testing among Japanese and foreign gay, bisexual and queer male respondents (N=30)

For comparison, data relating to life-time and previous 1 year HIV testing experience from Australian, US, UK and

French gay community samples is shown in Table 1.

Table 1. HIV testing experience of MSM taken from gay community samples

Country	Year	Life-time %	Past year %
Australia	2002	85.3	57.6
USA	2003-5	93.0	76.0
UK	2005	57.0	30.0
France	2004	86.0	31.0

* HIV Testing experience in past 6 months (Hickson 2005, INVS 2004, Jin 2002, CDC 2005)

Comparison of HIV testing experience of foreign MSM in this survey with the HIV testing rates of overseas gay community samples indicates a rather low rate of HIV testing in Japan.

⑥ Access to health services

Quantitative and qualitative data was collected on respondents' access to health and health related information services in Japan. Quantitative data will be presented in the final report, but data regarding open ended questions about problems experienced in accessing HIV information, health services, and condom preferences are presented here.

While a small number of respondents gave positive responses about health service access, a greater number of respondents indicated problems in accessing health information, services and HIV testing services. Respondents cited problems such as not knowing where to go to get appropriate treatment, especially on weekends, and problems with getting appropriate translation.

In relation to HIV testing services in

particular, a few respondents noted difficulties in finding out where to go to get an HIV test, as indicated by the following responses:

“I think gay people in Japan need more and convenient health services for HIV testing such as one-day HIV testing. I could have easier access to HIV testing when I lived in America. I could take a one-day HIV test at the LGBT center in college.”

“In my home country, free STD clinics operate daily with health care professionals providing extensive, free, and immediate testing and care. In Japan, it took forever to find STD/HIV testing information, and when I finally did, I was shocked to learn it was only once per week for a very short time frame-and this is in Tokyo- the largest city in Japan....and the world.”

“My insurance does not cover sexual health-I have tried to find out where I can get regular HIV tests but have had no success.”

As well as problems in knowing where to get HIV tests, a couple of respondents noted that HIV testing services were often judgmental, as seen from the following comments:

“It continues to be difficult to get an HIV test on demand, and the Hokenjo (health center) offers it on a one-time basis only. Doctors dislike discussing it still. Doctors need more social education and manners and protocol on the issue. Nurses are more current and open.”

“[I have experience problems] particularly [in getting] non-judgmental sexual health services.”

An open question asked respondents' preferences regarding condoms. While a number of lesbian respondents stated offence to being asked this question, of 23

respondents who indicated condom preferences, 13 were for foreign brand condoms, including Durex, Trojan, Big Boy, and 10 indicated preferences for Japanese brand condoms including Okamoto and Sagami.

These interim results indicate that not only language, but other cultural barriers make HIV testing inaccessible for foreign MSM. In relation to health service accessibility in general, information as well as translation services would help to improve accessibility of the health system to non-Japanese. The not insignificant number of respondents indicating preferences for foreign made condoms and the fact that these are not commonly commercially available in Japan indicates the need for some kind of intervention to facilitate easier access to foreign made condoms.

D. 考察

At the time of publishing this report, the survey was currently underway, thus this interim report presents the preliminary findings of 50 respondents. This survey is continuing and respondents are increasing, is aiming to obtain at least 100 respondents. The low number of survey respondents indicates that outreach to foreign gay, lesbian and bisexuals are somewhat difficult. Results indicate that health service and HIV testing accessibility could be improved through the availability of English language information for longer term foreign gay, lesbian and bisexual respondents.

E. 結論

This is the first study to investigate the HIV related health needs and sexual behaviors of gay, lesbian and bisexual men and women in Japan. The current lack of HIV related information for sexual minorities is of concern, especially in light of the increase of HIV infections among foreign MSM. The results of this survey will be used to develop HIV related information resources for sexual minorities.

引用文献

1. National AIDS Surveillance Research Group, *HIV/AIDS surveillance in Japan, 2008*, Ministry of Health and Welfare 2009.
2. J Koerner, T.Ito., M. Sato, M. Utsumi, T. Onitsuka, M. Yamamoto, M. Tateyama, S. Shiono, N. Kaneko, S. Ichikawa, *An internet survey investigating the regional networks of Japanese and non-Japanese MSM (Men who have sex with men) in Japan: Presentation of literature search results and pilot survey research plan*, in *Study Group on the Development and Implementation of Community-based HIV Prevention Interventions for MSM*, S. Ichikawa, Editor. 2009. p. 172-182.

F. 発表論文等

(国際学会発表)

- 1) Onitsuka T, J Koerner, N Kaneko, S Ichikawa: The HIV/AIDS epidemic among MSM in Japan: Background & gay NGO responses, Symposium on HIV infection in developed east and south-east Asia, International Congress on AIDS in Asia &

Pacific, Bali, 9-13 Aug, 2009.

- 2) Tetsuro Onitsuka, Jane Koerner, Noriyo Kaneko, Sohei Yamada, Satoshi Shiono, Hiroyuki Tsuji. Toshio Machi, Daisuke Goto, Sachiko Omori, Hirokazu Kimura, Seiichi Ichikawa: HIV risk & sexual behaviors of Middle Aged MSM: Findings from the 2007 Osaka bar survey, International Congress on AIDS in Asia & Pacific, Bali, 9-13 Aug, 2009.
- 3) Onitsuka T, J Koerner, N Kaneko, H Tsuji, Y Cho, S Shiono, D Goto, S Uchida, M Takenaka, S Ichikawa: HIV infection rates, risk & preventive behaviors of MSM in Asia: How does Japan compare?, International Congress on AIDS in Asia & Pacific, Bali, 9-13 Aug, 2009.

(国内学会発表)

- 1) コーナ・ジェーン、塩野徳史、金子典代、新ヶ江章友、市川誠一: 日本在住成人男性を対象とした男性同性間の性行動・性意識調査—MSM 人口に関する海外の調査と日本の比較から—、第23回日本エイズ学会学術集会・総会、2009年11月、名古屋。