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Enhancing Nigeria's Response to HIV and AIDS (ENR) Program

AN ETHNOGRAPHIC STUDY ON INJECTING DRUG
USERS AND MEN WHO HAVE SEX WITH MEN
IN SELECTED STATES IN NIGERIA



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**AN ETHNOGRAPHIC STUDY OF
INJECTING DRUG USERS AND MEN WHO HAVE SEX WITH MEN
IN SELECTED STATES IN NIGERIA**

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LIST OF ACRONYMS

DFID	Department for International Development
ENR	Enhancing Nigeria's Response to HIV/AIDS
FGD	Focus Group Discussion
FGN	Federal Government of Nigeria
FHI	Family Health International
HIV	Human Immunodeficiency Virus
IBBSS	Integrated Biological and Behavioural Surveillance Survey
IDI	In-depth Interview
IDU	Injecting Drug User
IEC	Information, Education and Communication
KII	Key Informant Interview
LGBT	Lesbians, Gay, Bi-sexual and Transgender
MARPs	Most-at-risk Populations
MSM	Men who have Sex with Men
NACA	National Agency for the Control of AIDS
NASCP	National AIDS/STI Control Programme
RAP	Rapid Assessment Procedures
SAPC	State AIDS Programme Coordinator
STI	Sexually Transmitted Infection
USAID	United States Agency for International Development
WHO	World Health Organization

EXECUTIVE SUMMARY

The ethnographic pre-assessment study of the behavioural dynamics of men who have sex with men (MSM) and injecting drug users (IDU) was conducted in October, 2009, as an integral part of the 2010 IBBSS. The study took place in Abuja, Calabar, Ibadan, Kaduna, Kano, and Lagos, with the sites representing a zonal distribution of three states each from northern and southern Nigeria. The pre-assessment study provided rich contextual information on the logistic and scientific factors that would aid successful conduct of the 2010 IBBSS and secure buy-in for it among the different study respondents in the IBBSS. It utilized a combination of rapid assessment procedures (RAP) that were suitable to prevailing time exigencies and could foster preliminary understanding of the local contexts of risk behaviors of IDU and MSM. Its data follow on the results of the 2007 IBBSS and reinforce the status of IDU and MSM as significant risk communities in the six states in Nigeria.

The overall results show that logistical and technical aspects are important for the conduct of the 2010 IBBSS. The logistical issues include how and when to recruit respondents; confidentiality issues; decisions about venues before commencement of the survey; objective recruitment of fieldworkers; review of the incentive system for respondents and provision of adequate state-level security through effective liaison with the state security apparatus. These were among the most important issues that emerged from the pre-assessment study. For IDU, the sites for injecting drugs are sometimes the same as those used for smoking marijuana and abuse of other substances like alcohol. This finding indicates that injecting drug use takes place in a behavioural collage of alternating patterns of drug use, with preferences shifting with available substance, networks, opportunities and resources. For MSM, the meeting sites and venues for encounter vary to include private residences in situations where local stigma and condemnation are strong.

The technical results show that there are active IDU and MSM sub-populations in all the states, with the exception of Oyo State, where marijuana use and the identified number of IDUs were low. The IDU and MSM communities in the states cut across nationality, class, religion, ethnicity and other socio-demographic characteristics. Respondents for the study were drawn from all social groups. Respondents for the FGDs were aged 25-50 years. They included unemployed, employed, self-employed persons and several well educated respondents. Key informants for the investigation included outreach workers, pastors who ran faith based organizations that specialize in

rehabilitation work and also work with drug sellers, enforcers, and “Chairmen”¹, who serve as gatekeepers to the IDU community. The investigation shows that it is advisable for interviews and discussions with IDU not to be held when IDU are intoxicated.

The IBBSS pre-assessment study exercise was successful in large part because of the commitments of partners. The major challenges included the short time frame for the task and security arrangements, which had not been concluded by the time fieldwork commenced. Much can be developed on the strength of these preliminary logistical and technical findings to support the design and implementation of the 2010 IBBSS. The 2010 IBBSS should address the limitations of the 2007, which did not ensure local ownership of the results. Adequate attention should be paid to the need for advocacy and information sharing among all stakeholders.

(a) ¹The “Chairman” is the local patron of IDU. He looks out for IDU and offers them protection from law enforcement agencies. Since his livelihood depends on the drug habit of IDU, the guardian role he plays and the control he exerts over IDU is part of his occupational practices.

CHAPTER ONE

INTRODUCTION

The Federal Ministry of Health in collaboration with National Agency for the Control of AIDS (NACA) and development partners-Family Health International (FHI/GHAIN) and Enhancing Nigeria's Response to HIV/AIDS (ENR) planned a pre-assessment study as a prelude to the 2010 Integrated Biological and Behavioural Surveillance Survey (IBBSS). The pre-assessment study was designed to provide information that will aid the 2010 IBBSS data collection among IDU and MSM, and complement existing IBBSS procedures.

The IBBSS is designed to assess the knowledge and beliefs of most-at-risk populations (MARPs) about HIV and STIs, determine HIV prevalence, and provide data for monitoring change over time. These MARPs include Men having sex with Men (MSM), Injecting Drug Users (IDU), female sex workers (FSW), transport workers (TW), Police and Armed Forces.

The pre-assessment study was expected to foster preliminary understanding of the local contexts in which risk behaviors of MARPs occur. This would help to relate the IBBSS survey findings on IDU and MSM HIV prevalence to their dynamic behavioral networks and milieus. Combined with empirical results from the 2010 IBBSS, the findings from the pre-assessment study will enhance understanding of the context, beliefs, knowledge and practices that influence prevalence of HIV and perceptions of HIV prevention, treatment and care among IDU and MSM. This information will complement advocacy efforts among service providers and policy makers to improve HIV-related services among IDU and MSM.

The specific objectives of the pre-assessment study were:

1. To explore the knowledge and beliefs that influence population-based estimates of prevalence of HIV and behavior among IDU and MSM in the selected states in Nigeria.
2. To explore the socio- cultural factors that affect IDU and MSM risk behaviors. As well as the perception of health providers and institutions on HIV prevention, behaviours, utilization of HIV related services and willingness to participate in HIV prevention and treatment programmes
3. To document the operational factors that guide data collection processes of the IBBSS among IDU and MSM in Nigeria.

CHAPTER TWO

METHODOLOGY

2.1 Study area, population and design

This study was conducted in five states and Federal Capital Territory (FCT) in Nigeria. Cross River, Lagos, and Kano were purposively selected based on previous IBBSS conducted in 2007 while Oyo, Kaduna and the FCT were selected based on anecdotal information. The study population was IDU and MSM located in large urban cities. The categories of persons interviewed for key information included officials of the ministries of health, outreach workers, members of relevant men's association, pastors who ran faith based organizations focused on rehabilitation of drug users, drug sellers, enforcers, and “Chairmen”².

The study utilized qualitative methods, which include key informant interviews (KIIs), focus group discussions (FGDs), in-depth interviews (IDIs) and ethnography.

A set of instruments including an observation checklist and guides for focus group discussions (FGDs), in-depth interviews (IDIs), and key informant interviews (KIIs) was developed to obtain qualitative information from these hard-to-reach groups in the six states. These instruments were used to collect information on patterns of social networking among IDU and MSM; the existence and activities of sub-groups within the target populations; their mobility trends; terminologies used within the groups; identity issues; and, from a logistic/scientific point of view, willingness to take a HIV test, answer questions about sensitive behaviors in the IBBSS, and recruit peers for the 2010 IBBSS.

2.2 Recruitment

2.2.1 Recruitment of respondents

² The “Chairman” is the local patron of IDU. He looks out for IDU and offers them protection from law enforcement agencies. Since his livelihood depends on the drug habit of IDU, the guardian role he plays and the control he exerts over IDU is part of his occupational practices. The chairman sometimes functions as suppliers of drugs to IDU. Access to the study population must be negotiated with the “Chairmen.”

Recruitment of respondents for the in-depth interviews utilized the knowledge base of outreach workers and other staff of local organizations and community leaders. Male respondents were recruited by word-of-mouth through mobilizers who were members of the community.

2.2.2 Recruitment of field workers

The selection of field workers was based on a set of criteria as contained in the guidelines developed for this study. These criteria stipulated that a field worker should:

- a. Have experience conducting qualitative field research and taking field notes.
- b. Have previous survey experience and be at least 20 years old.
- c. Have experience working with MSM/IDU in study communities.
- d. Have experience conducting systematic observation.
- e. Have experience moderating and recording interviews and discussions.
- f. Have experience preparing transcripts/reports from written/audio sources.
- g. Be resident in the state where the interviews and FGD will be held.
- h. Be fluent in the local language and have good speaking/writing skills in English.

2.3 Training of field workers

The training lasted for two days. It covered diversity and sexual orientation training, scientific data collection, transcription, interpretation and reporting techniques. It also addressed the benefits of using respondent-driven sampling (RDS) to reach IDU and MSM respondents in the IBBSS

2.4 Data collection

Structured FGDs, IDIs and KIIs were conducted with each target group. Each session lasted approximately 1-2 hours and interviews took place in secure and appropriate venues. While English was the main language of the interview, informal translation between English and appropriate local language was done.

2.5 Data Management and Analysis_

FGD, IDI and KII were audio-recorded, transcribed and thematically analysed. This included initial coding to identify themes, the addition of a second coding layer to identify broader social concepts and the utilization of a third analytic layer to move from initial concept identification to explanation. Descriptive data analysis of the socio-demographic characteristic was done.

2.6 Ethical considerations

The research activities were reviewed on ethical grounds by review boards in Nigeria and the USA. Respondents provided informed consent. As the research discussed here is sensitive within a Nigerian context and as the need for complete anonymity is paramount, no identifying markers whatsoever are provided within this qualitative analysis. Respondents were provided with refreshments and incentives to cover costs associated with attending the interviews.

Table 1: Logical framework for the 2010 IBSS ethnographic pre-assessment study

GOAL	OBJECTIVE/S	METHODS	INSTRUMENTS	OUTPUTS	LOGISTICS
<p>To rapidly understand and document operational issues guiding data collection of 2010 IBSS for MSM and IDU as a follow up to their identification as MARPs in the 2007 IBSS</p>	<p>? Explore and document logistical factors: Study sites, hours, security concerns, incentives</p> <p>? Identify appropriate field staff</p> <p>? Identify or establish communities: MSM & IDU, Key Informants, Gatekeepers, Advocacy groups</p> <p>? Identify service delivery points for referrals</p> <p>? Determine contacts/partners to network with for subsequent qualitative research indicated by preliminary results of 2010 IBSS</p> <p>? Identify potential seeds Respondents for IBSS</p>	<p>? Meetings with sensitization and outreach partners</p> <p>? KII with advocacy/ outreach partners</p> <p>? FGDs with MSM&IDU (where feasible)</p> <p>? IDIs w/ IDU and MSM (where FGDs are not feasible or for complementary sensitive information); prospectively for non-gay identified MSM</p> <p>? Informal chats and conversations</p> <p>? Observation</p>	<p>? Meeting agendas and checklists</p> <p>? KII Guides</p> <p>? FGD Guide</p> <p>? IDI guide</p> <p>? Observation Checklist</p>	<p>? Lay-out for study logistics (interview sites; identification of point persons; plan to proceed)</p> <p>? Minutes and reports of advocacy meetings</p> <p>? Transcripts of key informant interviews</p> <p>? Transcripts of in-depth interviews</p> <p>? Transcripts of FGDs</p> <p>? Field Notes</p> <p>? Recommendations for IBSS, technical committee and implementers</p> <p>? Recommendations for future research</p> <p>? Final Field Report</p>	<p>? Establish criteria and compose six teams (each team is composed of 1 State Coordinator, 1 Technical Liaison Person, 2 Research Assistants)</p> <p>? Conduct 2-day centralized training of RAs, TPs, and SCs on methodologies/ procedures/applications/deportment/ethical considerations/field notes/transcripts/ reporting</p> <p>? Rapid assessment/ Data collection completed in 7 days (in 6 sites, commencing with simultaneous deployment from Abuja training)</p> <p>? Transcription and reporting concluded in 7 days (calculated at the rate of 3 hrs of transcription per hour of recording)</p>
	<p>To rapidly understand and document the local contexts in which IDU and MSM risk behaviors occur for the 2010 IBSS</p>	<p>? Identify sub-groups of target population (MSM & IDU)</p> <p>? Determine patterns of social networking among IDU and MSM</p> <p>? Describe mobility trends</p> <p>? Identify local intra-group terminology</p> <p>? Establish willingness to: participate in HIV test; answer questions about sensitive behaviors in IBSS; recruit peers</p>			

CHAPTER THREE:

RESULTS

3.1 Injecting Drug Users

3.1.1 Introduction

The IDU component of the pre-assessment study was carried out in six locations comprising 5 states (Cross River, Kaduna, Kano, Lagos and Oyo) and the Federal Capital Territory. The pre-assessment study revealed that, among drug using communities, the use of multiple sites is necessary for obtaining rich and diverse data and steps should be taken to ensure that IDU are comfortable with sites near their communities. In line with this, the morning period appeared to be most suitable for interviews and discussions because the hustle for money for drugs usually occurs in the late evenings and a FGD or IDI at that time might be viewed as an economic obstruction.

The need to establish trust and rapport with the head of the drug community in the various sites was observed, as it is sometimes up to him whether the study can be conducted among IDU or not. It is instructive to involve him in mobilizing the survey respondents. There are scientific, strategic and security reasons for this approach.

3.1.2 Socio demographic characteristic of IDU

IDU respondents for the FGDs ranged in age from 25-50 years, almost one in five were employed, three were self-employed and one-fifth was students. Respondents for the IDI were twenty-four in number. Many (42%) were employed.

The sociodemographic characteristics of respondents were consistent across the states. Respondents were aged 25-50 years. The majority (95 percent) were less than 30 years of age. In five of the six states (the exception being Kano), about 90 percent of IDU were frequent users (shooting at least three times a day). In these five states, respondents were educated and several were university undergraduates, relative to Kano where about 80 percent of respondents were uneducated and unemployed. In Oyo State, marijuana predominated as the drug of choice and the identified number of IDU was much lower, except among higher income individuals. There were predominantly more men (99 percent) than women among the group of IDU. About 60 percent of the respondents described the presence of a large population of IDU among the Lebanese, Niger and Senegalese in some of the states. The overwhelming majority of IDU were, however, Nigerians. The results indicate that injecting drug use is a predominantly male habit.

It was recommended that interviews with IDU be brief to ensure their attention. Interviews and discussions were scheduled to avoid periods of the day when respondents often injected drugs.

3.1.3 Diversity and identification of IDU sub-populations

The population of IDUs is high across five of the six locations where the pre-assessment study was carried out. Densities were highest in Kano, Lagos, Abuja, and Calabar, possibly in that order, owing to the population sizes of Kano and Lagos. The population of IDU was low in Ibadan relative to the other five sites. With the exception of Lagos and Kano, where the IDU population is well dispersed, IDUs appear to be concentrated within the capital cities. This distribution may be linked to the urban nature of injecting drug use owing to its urban distribution channels and financial requirements of habit sustenance.

Ways of identifying people who injected drugs included the injection marks on their arms, wrists, thighs and also general behavior, unkempt appearance, irritability and not willing to stay in a position for a very long time. The preferred venues for injecting drug use include uncompleted buildings, hotels, galleries, clubs, and “joints” (places where drug can be obtained). These venue preferences reinforce the connections between injecting drug use with violent crime. Some IDUs reside in the slum. In Ibadan, it was reported that IDU lived in “high class areas because the low class generally don't inject because they don't have privacy to inject, but those who inject use their houses or offices.” This class context may account for the initial difficulty in gaining access to Ibadan-based IDU. The habit is more secretive in this city than was the case in the other states.

There are two main classes of IDU – wealthy and low income users. Among wealthy users are prominent individuals – politicians, businessmen and top government officials. They are not easy to locate except in special locations like clubs, galleries, and hotels. Low income users comprise street thugs and men who mainly work in the park or are involved in menial jobs (see Appendices).

3.1.4 Interview sites

Most places chosen for the interview site during the pre-assessment study were adequate, except in Lagos and Calabar, where hospital venues were specifically not desirable. In such cases, there was apprehension on the part of the respondents and the Chairmen that registration, or some other form of status formalization, could be accomplished by the hospital or other formal authorities such as the National Drug Law Enforcement Agency (NDLEA).

In Lagos, the population of IDU is dispersed throughout the state and city and the traffic situation can make the timing of FGDs a challenge.

The sites for injecting drugs are often the same as those used for smoking marijuana and

abuse of other substances like alcohol. This finding indicates that injecting drug use takes place, not exclusively, but in combination with other patterns of drug use, with preferences shifting depending on what type of drug is available. In 'Oju-Ina' in Lagos, a place known clearly as a drug user's den, it is most populated by lower class users and is suspected to accommodate a variety of violent criminals. Typically, IDU do not move far from where they get the drugs.

3.1.5 Drug supply

There are multiple sources of drugs in the six states and the most prominent are the dealers. In Lagos and Kano, most IDU work during the day to support the habit. This could explain the dense concentration of IDU in the metropolis.

3.1.6 IDU networks

Wealthy and low income IDUs do not necessarily mix together. Wealthy IDU seem better organized as a group than street IDU. They meet more regularly and organize more group activities, such as social events, drug parties and support groups. In Lagos and Kano, IDU are dispersed, but in the other cities, they are concentrated in the metropolis. In Abuja, they are found in Durumi, Wuse, Mabuchi, Zone 3 Neighbourhood Area, Apo, Nyanya, and most satellite towns. In Calabar, they are concentrated in Nelson Mandela, Atimbo, Edem Street, Anantigha area, Calabar Municipality, and ESE Life Street.

Network leaders were identified in all cities where the survey took place. A faith based organization (FBO) working with IDU was identified in Ibadan, Oyo State. Network leaders are adequate agents for recruiting of respondents. In general, it was easier to reach low-income IDU than their more affluent counterparts.

3.1.7 Logistics and incentives

Most IDUs patronize their dealers in the mornings and late in the evenings. In Lagos, IDU in the high socio-economic status usually spend the night of the last Friday in the month partying. Low-income IDU are more likely to participate in a study than their richer counterparts.

There were demands for money by gatekeepers, whose roles can be formidable. A minimum incentive required by respondents is NGN 2,000 and NGN 50,000 for network leaders. Wealthy IDU might not be persuaded by cash incentives to participate in a study for fear of exposure.

Table 2: Summary Matrix for IDU

	Notes/Observations	RDS Implications
Geographic spread for recruitment	Typically, IDU do not move far from where they get the drugs.	Select a study site near the drug buying area.
How well networked are these sub-populations?	IDU cut across the entire spectrum of class, religious, ethnic and other socio-demographic characteristics. . Among wealthy users are prominent individuals – politicians, businessmen and top government officials. They are not easily seen around except in special locations like clubs, galleries, and hotels.	<ol style="list-style-type: none"> 1. Diversify seeds by religion, ethnicity, class, and education. 2. Again, make sure we include seeds from clubs, gallerias and hotels. 3. We need to be aware that we will not likely be able to recruit these wealthier IDU since that’s the nature of RDS. It will most likely attract those who need the money, unfortunately. However, we must keep this in mind when drawing conclusions and making recommendations.
Logistics	The preferred venues for injecting drug use include uncompleted buildings, hotels, galleries, clubs, and joints.	Try to set up study site for IDU that are in close proximity to a cluster of these sites. Select some seeds from these different sites as they will likely link us into different networks.
Miscellaneous	<p>There is a need to establish trust and rapport with the head of the drug community in the various sites (known as the ‘Chairman’). It is sometimes up to him whether the study can move forward among IDU or not.</p> <p>Attention span of IDU is brief, particularly just before or soon after they get their fix (drugs) They are hustling drugs in the evening. Morning period appears to be most suitable for interviews</p>	<p>If these Chairmen are injectors themselves and meet the eligibility criteria, we should include them as seeds. Regardless of whether Chairmen inject, we need to inform them of the IBBSS and get their support and ask them to spread the word about the study. They should be approached about whether they can recommend any good seed respondents (i.e., those who meet the eligibility criteria and are well-networked and respected in the IDU community).</p> <ol style="list-style-type: none"> 1. Ensure sufficient # of staff at the IDU data collection sites. 2. Develop efficient flow of study visit to ensure speedy study visit. 3. This may require having on-call interviewers. 4. Make sure you have beverages to offer respondents. 5. Be prepared to postpone interviews of potential IDU respondents if they are not capable of completing study visit for that day. Ask them to return the next day. 6. Study site should be open during morning hours and into the afternoon, but not into the evening for security reasons.

3.2 Men who have sex with men

3.2.1 Introduction

Similar to the IDU component of the pre-assessment study, the MSM component was also carried out in six locations comprising 5 states (Cross River, Kaduna, Kano, Lagos and Oyo) and the Federal Capital Territory. The need to establish trust and rapport with spokespersons of social networks of MSM within the states is a vital component of a successful recruitment of MSM for any survey.

3.2.2 Socio demographic characteristic of MSM

The ages of the fifty-three MSM recruited for the FGDs ranged from 25-50 years. One-fifth were in gainful employment, many (23%) were students and the rest were unemployed. The socio-demographic characteristics of MSM recruited for the IDIs were similar to those recruited for the FGDs. Across states, the age range and sociodemographic characteristics of respondents were also similar. Key informant interviews were held with officials of the ministries of health, outreach workers and members of relevant men's associations.

The results show that there were active populations of MSM in all the states studied. In Lagos, interviews were held with two MSM who were in a heterosexual marriage. One of the respondents reported preference for sex with his male partners. The interviews confirmed the existence of MSM, who had regular sexual relationships with their married or female partners, as an important bridge community for the transmission of HIV. The community of MSM in the states cut across the entire spectrum of class, religious, ethnic and other sociodemographic characteristics.

3.2.3 Diversity and identification of MSM sub-populations

There were many hotspots where MSM reported going to socialize in most of the cities (like clubs, bars) and in different neighborhoods however in Calabar, MSM have no specific 'hot spots' and interviews could be arranged anywhere through a non-governmental organization (NGO) called Male Attitude Network (MAN). The community is highly mobile in and out of the State. In Lagos, the dispersion of groups and intra-city traffic logjams might make access to the MSM community challenging for interviewers as MSM may have to be interviewed far apart. The need for multiple groups of interviewers and adequate means of mobility is crucial to IBBSS success. The size of the population of MSM in Lagos, Kano and Abuja seemed to be higher than in other states. In all states the MSM population was concentrated in the city centres.

3.2.4 Characteristics of MSM

MSM are found in every segment of the population and like their IDU counterparts in this study, may be grouped into wealthy and low income MSM. Some MSM are students, rights activists, street boys and park boys. Older MSM are easier to interact with as they appear to have resolved outstanding identity questions. They also represent every income and professional groups.

3.2.5 MSM networks

High-income and low-income MSM communities function independently of each other. Wealthy MSM coordinate their network without reference to the low-income MSM networks although it is clear that sexual partnerships develop across class lines such as on occasions when travel or mobility leads to the absence of a regular partner. Both networks (i.e. high and low income sexual networks) have leaders who could help recruit MSM for the survey in all states except Oyo state where they move in cliques which are dispersed throughout the city. The MSM community in Cross River State appears to be even more elusive than in the other states owing to heightened stigma, discrimination and homophobic attitudes of Government officials in the state.

3.2.6 Hot spots

MSM are found in club houses, galleries, and hotels. Other places are joints, night clubs, fast foods outlets, viewing centers, cinemas and football stadia. Specific places where they are found in Kano include Badawa, Hotoro and Sabon Gari, Abedi Street and Mararaba. There are street based and brothel based MSM and they can be located in Ibedi Road, Kofar Mata and other areas with regular and dense concentration of potential male partners. They can also be found in Fegge Guest House, Hotoro Dan Marke, Sabon Gari, Zango, Dawakin Dakata, and Rimi Kebe. In Calabar, meeting places include private homes, which are well known to members of the MSM community.

3.2.7 Choice of sites

The pre-assessment study showed a preference among MSM for certain venues that could be used for the interviews and discussions. For example, Lagos respondents were averse to the use of the facilities of the Lagos university Teaching Hospital because, as one discussant put it, 'it involves a form of "double stigmatization" – first because he had been identified as MSM and second, with added insinuation that he might be HIV-positive. The results in this regard suggest a need for follow up advocacy among this community, to minimize fear of infection that was so pronounced in some of the interviews and institute a testing and referral system for ARV and other follow up services. The facilities of hotels and NGOs were preferred venues

for interviews by MSM. The choice of sites for the survey should be viewed in relation to areas of MSM concentration and the hotspots identified above. In Calabar, Mirage Hotel would be a suitable site for the interviews and discussions during the 2010 IBBS.

3.2.8 Logistics and incentives

There is a high willingness to participate in the study by MSM, but they cautioned on the need for confidentiality, safety and incentives. Weekends (particularly between 4pm and 12am on Saturdays) are the most suitable days for interacting with this group. The high profile groups may be difficult to access, possibly because they hold important positions in the society and might not want knowledge about their sexuality to become public. In Lagos, findings show that they could be located at the Silverbird Gallery on the last Friday of each month, at night, and at the National Theatre on Sundays. The best incentives for participation in the study that were mentioned included cash, condoms, lubricants, and education materials on HIV/AIDS.

Table 3: Summary Matrix for MSM

	Notes/Observations	RDS Implications
Geographic spread for recruitment	There are many hotspots where MSM go out to socialize in most of the cities (like clubs, bars) and in different neighborhoods.	Select a study site that is central to these hotspots since we know that they are familiar with this area. In the larger and more spread out cities, you may need to select two sites.
How well networked are these sub-populations?	MSM cut across the entire spectrum of class, religious, ethnic and other socio-demographic characteristics as with the general population. Among wealthy users are prominent individuals – politicians, businessmen and top government officials. There are also many married men with kids who are also MSM, however,	<ol style="list-style-type: none"> 1. Diversify seeds by religion, ethnicity, class, and education and age, as well as by whether they identify as gay or not. Seeds should also include married men who have sex with men. Seeds should also include MSM sex workers. 2. Again, make sure we include seeds from clubs, and hotels. 3. We need to be aware that we will not likely be able to recruit wealthy MSM. It will most likely attract those who need the money. However, we must keep this in mind when drawing conclusions and making recommendations.
Sites and hours	Many MSM do not want to go to a place where they may be exposed as gay.	Select sites that are neutral. Do not select gay or LGBT venues.
	There are many MSM who are students, but there are also many who are professionals.	Study site should be open during day hours but also during some of the evening hours after work and school. At least one weekend day should be included.
Community sensitization	Most of these cities have NGOs working with MSM community.	Engage these NGOs and inform them of the survey so that they can spread it among their network. Also ask them to recommend seeds for the study.
Incentives	Many wanted condoms, lubricants and Information Education and Communication (IEC) in addition to money.	In addition to N1000, HIV/STI information and condoms/lubricants need to be distributed.
Miscellaneous	Characteristics of study staff: In some cities, the MSM community may be small. In such instances, they may not be comfortable with study staff who are well-known in the community. However, in all cities, they preferred to have a male interviewer.	We would recommend having all male staff for the MSM study site. However, it may not be advisable to have MSM interviewers who reside in the same community because respondents may not want to share information with study personnel they recognize. So it might be advisable to have interviewers who are not MSM but are trained and sensitized to work with the gay men/MSM population.

CHAPTER FOUR:

CHALLENGES

A set of central limitations and challenges were identified in the ethnographic pre-assessment study, ranging from timing and equipment to security issues. These are listed below.

1. In general, the time provided for the field exercise was one week. Also, the time available for IDU and MSM mobilization was short and this led to delay in commencement of activities.
2. The hidden nature of the target groups and the perceived societal stigmatization makes the participation of certain members like those of higher status and older age groups difficult. It is possible that the opinion of those not studied may differ from that of those who were reached who may be systematically different in sociodemographic characteristics and other important social and cultural variables. This was more noticeable in the MSM groups.
3. There were some logistics difficulties, at the state levels, State Aids Programme Coordinators (SAPCs) were the designated leaders of their respective teams but were often overburdened with parallel duties from their office. Though laptops were provided promptly, there were slight delays in some sites in making digital recorders available.
4. Many respondents for the KIIs and IDIs requested for more incentives, refund of transportation cost and higher payment for their time but due to the limited resources, only a specific amount was given to those that participated
5. Access to IDU was challenging as they were suspicious of researchers' intentions, motives and affiliations.
6. Male respondents were sometimes uncomfortable by the presence of female moderators in their midst.
7. Some respondents did not want their responses to be recorded. They felt that their identities could be established through voice recognition systems but this was resolved by assuring the respondents that that is not possible in this survey.
8. Formal security arrangements were not made before the commencement of the pre-assessment study. The exercise therefore took place in prevailing atmosphere of risk as the National Drug Law Enforcement Agency (NDLEA), together with other sister paramilitary organizations, had routinely stepped up surveillance of drug cartels and user and supplier

networks. The intersections of drug use with crime and violence hold important safety implications for research operatives. Safety and security of investigators were potentially threatened by two sources: externally, from bunk raids by Federal anti-drug agencies, which could catch researchers in crossfire in the midst of known users and internally, from the volatile behaviour of the research respondents.

CHAPTER FIVE

CONCLUSION AND RECOMMENDATIONS

5.1 Conclusion

The IBBSS pre-assessment study generated results and insights that are crucial to the substantive survey. This was due in large part to partner commitments that pushed the process forward in spite of limitations and challenges identified above. The findings reiterate the results of the 2007 IBBSS that there are significant IDU and MSM communities in Nigeria and that their behavioural networks and preferences place them at risk HIV infection. There is much that can be developed on the basis of these preliminary logistic and technical findings in support of the 2010 IBBSS and these pre-assessment study results can help lend contextual significance to the results of the substantive IBBSS.

5.2 Recommendations

In light of the findings and challenges presented in the preceding chapters of this report, the recommendations are as follows:

1. There is need for effective advocacy prior to the commencement of the study, especially in states where discriminatory attitudes are still high.
2. The time allocation for the IDU and MSM survey for the IBBSS should be increased; in part by mobilizing IDU and MSM in advance of fieldwork, as provided for in the Standard Operating Procedures. Such mobilization is also a means of facilitating access to IDU and MSM communities by allaying their suspicions of investigators' intentions.
3. SAPCs should be more dedicated for the IBBSS exercise and whenever they are not released from their offices, competent subordinate should be delegated to lead the teams in the field.
4. Equipment required for the field exercise should be procured in time to enable practice and demonstrations of their use during training.
5. An upward review of transportation and other incentives for respondents' time should be undertaken in order to motivate interest with them and minimize costs of participation. Budgetary provision should be made for all categories of respondents and gate keepers whose roles is formidable. Remuneration will be required at two levels. At the first level, incentives should be paid to IDU and MSM who participate in the survey. At the

second, remuneration should be offered to network leaders and gate keepers who help recruit them.

6. Gatekeepers should be engaged well in advance of the IBBSS, such that the disruptive demands experienced during the pre-assessment study are reduced, if not eliminated altogether.

7. In order to address the concerns expressed (female interviewing MSMs) by some MSM respondents during discussions and interviews, the provisions of the protocol for same sex facilitation of interviews and discussions should be followed strictly in the IBBSS.

8. Since recording depends on existing levels of trust between respondents and researchers, there is need to explain ethical issues of data access and restrictions under cover of the confidentiality clause to the satisfaction of respondents. Where such recourse is not adequate to persuade the respondents, then researchers must follow the provisions of the protocol and refrain from recording the interview or discussion.

9. State-level security should be provided by the Nigeria Police and NDLEA. These arrangements should be finalized before commencement of the IBBSS.

10. Phones and phone lines, designated cars and drivers should be available for the exclusive use of the survey to avoid use by researchers of their individual phones as this might compromise safety.

11. Venues used for interviews should be different from hotels where personnel are lodged during the survey for security reasons. Most places chosen for the interview site during the pre-assessment study will be adequate for future surveys, except in Lagos and Calabar, where hospital venues were specifically mentioned as not being desirable.

12. There is need to maintain a continuing relationship with this community, to engage it for purposes of research, advocacy and intervention purposes. Once seeds have been identified in the 2010 IBBSS, it is strategic to sustain a working relationship with them.

13. For the actual 2010 IBBSS most IDUs patronize their dealers in the mornings and late in the evenings. Field staff should be deployed at these times

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ALL STATE MATRICES
APPENDICES

MSM Pre-assessment study Observations (Calabar, Cross River)	
Notes/Observations	RDS Implications
Locations	Make sure seeds include non-gay identified MSM.
<p>How concentrated is the population of MSM in this state? There is a sizeable population of active MSM in Cross River State, but they are not really coming out because of stigmatization.</p> <p>What are the major neighborhoods? There is no specific place where MSM pick their clients or meet. However, one can easily link up with another MSM through an NGO called Male Attitude Network (MAN)</p> <p>Are there hot spots where MSM congregate? What are the hot spots? Where do they meet? And hook up? MSM meet at private residences, e.g. gatekeepers' residence. There is an outreach centre at Lacoopers located at no 20 Ekondo street Calabar south, 12 Nelson Mandela, 5 Iboku street, 13 Clifford Street, Airport car wash, they can also be in clubs though no specific one</p> <p>Based on the current choice of IBBSS sites – are they a reasonable distance from the hot spots mentioned above? They are dispersed and not very far from the hot spots mentioned above. However, these sites were suggested as adequate for the study – Marian Hill – Marina resort, MCC Road, Murtala Mohammed Highway, Asari Eso, Tinapa, and White House.</p>	<ul style="list-style-type: none"> • MAN should be informed about the IBBSS • Ask there are MSM who would make good seeds • Consider selecting a seed from these sites. • Select a site that is central enough to these locations.

<p>Diversity of MSM/ Identification of sub-populations</p>	<p>Gay Identified, Non-gay identified, Old/Young, commercial sex workers? Yes</p> <p>Other characteristics: Socio-economic status, students, religion? Do most have mobile phones? Some are students; others belong to the working class. Many of them go to Church.</p> <p>Is there well networked leader who might aid in recruitment? An NGO named Male Attitude Network has been identified in the State</p>	<p>Note that it may be more difficult to recruit the working class. Students should be easier to recruit. Be aware that the recruitment process may end up oversampling non-working class MSM.</p> <p>We need to involve 'MAN' in the study. Inform them of the IBBSS and ask them to spread the word that their constituents may receive referrals into the IBBSS. Note: We are not asking the organization to actively recruit.</p> <p>IBBSS sites should operate in morning and in evenings (if possible)</p>
<p>Logistics</p>	<p>What is the availability of MSM to participate in study? At the beginning of the month etc? They are available throughout the week especially in the mornings and evenings.</p> <p>What is the most appropriate amount for remuneration? Between 1000 and 1500 Naira was suggested. If blood specimen will be taken 5000 naira was suggested as adequate. They also suggested that lubricants should be added to the incentives.</p> <p>What safety concerns will MSM have? Which MSM will end up not participating in the study? Some confidential places where MSM would be available for interview include: UniCal hotel conference hall, Ashbury Hall, Mirage, Channel View hall, Nollywood white house, any hall in Tinapa. Preference is shown for these locations because they are outside the town. They emphasized quietness, security, and comfort as conditions for participation.</p> <p>How comfortable will MSM be recruiting other MSM? Although they feel confident recruiting, an NGO working with MSM available in the State is a better alternative.</p>	<p>Remuneration must be with money - from 1000 to 5000. As well as lubes and condoms</p> <p>Consider these as potential study sites. But also, given that they are outside of town, it is important to consider how easily accessible the sites are</p> <p>This is another reason to get the support of MAN so that they can spread the word about the IBBSS in their network of MSM.</p>

IDU Pre-assessment study Observations (Cross River)	
Notes/Observations	RDS Implications
Location	<p>Concentration of IDU population in this state: IDUs are many in Calabar Municipal and Calabar South. Some live in slum areas; spread out in the state. They can be found in no particular location other than joints where they meet.</p> <p>What are the major neighborhoods?: IDUs have an informal group in Calabar located around Goldie Street Calabar, Forsbery Street, Calabar.</p> <p>Areas in Calabar: Nelson Mandela, Atimbo, Edem Street, Anantigha area, Calabar Municipality, and ESE Life Street.</p> <p>Are there hot spots where IDUs congregate and use or shoot-up? What are the hot spots? Galleries? : IDUs congregate mainly around locations where drugs are bought. They feel more safe and secured there.</p> <p>Where do IDUs get their drugs? Friends, dealers, pimps? IDUs obtain their drugs from multiple sources, but predominantly from dealers.</p> <p>Other characteristics: Socio-economic status, students, religion? Do most IDU have mobile phones? Most IDUs are young adults with low socio-economic profile. Some still live with their parents.</p>
How well networked are these sub-populations	<p>Recruitment within classes may be easy but there may be recruitment bottlenecks across classes. Therefore, efforts should be made to recruit seeds from both classes. However, expect t under sampling of the higher classes due to a fear of disclosure.</p> <p>Sites should be set up around the hotspots. Also, recruit seeds who regularly visit these hotspots and are well networked within the IDU community.</p>

	Who is the point person to contact in this state? None. There is an informal network of IDU in the state.	
Logistics	<p>What is the availability of IDUs to participate in study? Do they buy their drugs a specific time?: IDU At the beginning of the month etc?: Low literacy and lack of funds might prevent people from participating in the study, they therefore suggested that health care personnel should come up with innovative ideas on how to reach this core population among IDU. There is fear of exposure, arrest and stigmatization among IDU. The high profile members of the study population do not want to be identified. They detest coming out in the open.</p> <p>When do IDU shoot up? In the early hours of the day. Activities are very high at weekends.</p> <p>What is the most appropriate amount for remuneration? IDUs will accept invitations to any site if their security is assured and financial motivation is guaranteed. To satisfactorily encourage them, about two thousand five hundred Naira (N 2,500.00) and above should be approved for each study respondents.</p>	<p>Ensure that site locations are discreet and located far from Police stations. A proposed IBSS interview site should not include hospitals. Such sites could hinder the participation of IDU for fear of forced treatment. Because people suspect that IDU are involved in criminal activities</p> <p>Since activities are high at weekends, they may likely come for interviews during the weekdays more often.</p> <p>Availability of Transport: Improved incentives for study respondents in the next survey. Improved communication allowance for field workers in subsequent surveys Adequate advocacy should be done in the state before the commencement of the survey</p> <p>Select another venue type other than hospitals.</p>
Logistics	<p>Appropriate site for study: Hospital venues were specifically mentioned as not being suitable to be interview sites</p> <p>Who are the appropriate field staff that for working with IDUs? IDUs should be involved as gatekeepers during the survey. Involving community youth leaders. The involvement of non-users in recruitment should be carefully considered. According to a respondent "when interview took place in a Hospital, it was contaminated by non-users for financial gains."</p> <p>Any preference for the color and size of the coupon? Wording?</p>	
Miscellaneous	<p>How comfortable will IDUs be recruiting other IDUs? Will they prefer to recruit a specific type of IDU? A strategy built around IDU recruiting IDU will prove effective in the study although improved financial incentive will be required to make this work</p> <p>Projected acceptability of HIV test: IDU may accept HIV testing</p>	<p>No preference in coupon</p> <p>Strong counseling and referral systems</p>

MSM Pre-assessment study Observations (FCT)	
Notes/Observations	RDS Implications
Location	<p>How concentrated is the population of MSM in this state?: There is a growing number of MSM well dispersed across the FCT</p> <p>What are the major neighborhoods? MSM are found mostly in the outskirts of Abuja like Mpape, Nyanya Jikwoyi, and Gwagwalada</p> <p>Are there hot spots where MSM congregate? MSM meet in clubs, house parties, parks, etc.</p> <p>Based on the current choice of IBBSS sites – are they a reasonable distance from the hot spots mentioned above? The current choice is very adequate</p>
Diversity of IDU/ Identification of sub-populations :	<p>Gay Identified, Non-gay identified, Old/Young, commercial sex workers? There is a large MSM sex work community in Abuja.</p> <p>Other characteristics: Socio-economic status, students, religion? Do most have mobile phones? MSM in Abuja include the young and old, the working class as well as students. Students and those who are young still live with parents while older ones live alone.</p>
How well networked are these sub-populations	<p>Across types of MSM, which are well networked and which are not? MSM are very well-networked in Abuja. They tend to be well-networked within their satellite towns.</p> <p>Did we identify any especially well networked leader who might aid in recruitment? NGOs like Alliance Rights Nigeria (ARN) could be a very good network in the FCT.</p> <p>Recruitment should be fairly fast since they are well networked.</p>
Logistics	<p>APN is already aware of our activities and they are on board. However, they should try to spread the word about the IBBSS to reduce fear among MSM about study.</p> <p>Need to make sure MSM mobilizers are on site to make respondents comfortable.</p> <p>Make sure to choose a neutral site to reduce fear. Many of them work so evening time may need to be included.</p>
	<p>What is the most appropriate amount for remuneration? They suggested the need to provide means of transportation to and from the venue of interview. NR1000 would be good. They are interested in HIV testing and safety packs also.</p>

	<p>What safety concerns will MSM have? Which will not end up coming to the study? They mentioned that "trust issues" could serve as a barrier to having MSM participate in the study. MSM with high profile especially the prominent ones with public posts and the HIV positive ones will not want to participate.</p>	<p>Note that we will not likely be able to recruit the MSM who are more socio-economically well-off just by the nature of the RDS. We should expect that recruitment chains may end with HIV positive persons since they are not likely to participate. Therefore, it will be crucial for IBSS staff to emphasize to HIV -positive persons to recruit their peers especially since HIV -positive persons are likely to be linked to other positive persons. It will be important for them to know their status.</p>
<p>Miscellaneous</p>	<p>Any preference for the color and size of the coupon?</p> <p>What is the best incentive: helping MSM community? Money? HIV test? Safety pack? Financial incentives and condoms. Education on HIV/AIDS and Hepatitis was also mentioned</p> <p>How comfortable will MSM be recruiting other MSM? Very comfortable with the task</p> <p>Profile of the IBSS interviewers: men, women, MSM, non-MSM, doesn't matter?</p> <p>Projected acceptability of HIV test</p>	<p>No preference</p> <p>Include condoms and lubricants, HIV/hepatitis information.</p> <p>This should make recruitment faster since they are comfortable recruiting others. IBSS staff must work hard to gain the confidence of respondents.</p> <p>This doesn't matter as much as having well-trained staff in general to gain trust.</p> <p>They are interested in HIV</p>

IDU Pre-assessment study Observations (FCT)		RDS Implications
Notes/Observations	<p>Concentration of IDU population in this state: The population of IDU is fairly dispersed across the city of Abuja</p> <p>What are the major neighborhoods?: Uncompleted buildings are used as hide-outs for IDU. They can be found at parties during the weekend. Also they are seen around the parks particularly, Millennium park and Durumi.</p> <p>Areas in Abuja: Durumi, Wuse, Mabuchi, Zone 3 Neighbourhood Area, Apo, Nyanya, and most satellite towns.</p> <p>Are there any hot spots where IDU congregate and use or shoot-up? What are the hot spots? Galleries? Durumi, Wuse 3, Mabuchi, Zone 3 Neighbourhood area, Apo, Nyanya, Area 11, and most satellite towns and clubs</p> <p>Where do IDU get their drugs? Friends, dealers, pimps? IDU get their drugs from multiple sources, but prominent among them is the dealer.</p> <p>Based on the current choice of IBSS sites - are they a reasonable distance from the IDU hot spots mentioned above?: Yes</p> <p>Old or young, sex workers, frequency of drug use, association with crime or violent behavior? They are mostly associated with criminal tendency and often face harassment from the police.</p> <p>Other characteristics: Socio-economic status, students, religion? Do most IDU have mobile phones?: There are those referred to as the "big boys." They are found in hotels and clubs where they hang out and take their drugs. The other groups are "small boys" who move around in ghettos and buildings to take drugs.</p> <p>Where do we find these sub-populations of IDU? The big boys show more tendency to network compared to the "small boys." IDU s with high socio-economic status hang around clubs, but those with low socio-economic status hang out in the ghettos.</p>	<p>Use IDU seeds who frequent these areas and engage in injecting activities at the various locations.</p> <p>Set up study sites close to these areas and select seeds from these areas</p> <p>Identify eligible dealers or barons who are well networked to recruit peer IDU s.</p> <p>Important to have peer IDUs as mobilizers who are well networked and trusted at the sites to increase the level of trust</p> <p>Seeds should include eligible IDUs who use these hotels and clubs as places to obtain their drugs or inject.</p> <p>Seeds should be selected from diverse economic backgrounds: they should come from both the ghettos and from more affluent areas.</p>
Diversity of IDU / Identification of sub-populations :		
How well networked are these sub-populations		

	<p>Across types of IDU, which are well networked and which are not? IDUs with high socio-economic status are well networked unlike those with high socio-economic status. Student IDUs are well networked. The rich one tend to network with the students and not within their own network because of privacy.</p> <p>What is the role of the dealer? To deal the drugs.</p> <p>What is the availability of IDU to participate in study? Do they buy their drugs a specific time? At the beginning of the month etc? Drugs are bought mainly in the mornings and evenings. The afternoons are used to source for money either through manual labour, petty jobs or begging.</p> <p>When do IDU shoot up? At what time of day? Early mornings and evenings. A large number of IDUs belong to the working class. Hence they shoot up in the mornings before work or after.</p> <p>What is the most appropriate amount for remuneration? Although cash incentives have been mentioned and a motivating factor for participation, those who are educated and rich may not be easily attracted to the study.</p> <p>Who are the appropriate field staff that? What are the personal attributes or characteristics to look out for? Other IDUs will be appropriate for the selection of IDUs who will participate in the study. Men without beards, shaved hair and so on, will make IDU afraid and suspicious.</p> <p>What safety concerns will IDU have? Which types of IDU will not end up coming to the study? Those who are security conscious and may not want to expose themselves. Also those who are not literate may not be easy to mobilize for the study. When they see anyone that looks like law enforcement IDU or suspect that the police is involved in the study they may not participate.</p>	<p>Select and include student seeds who are well networked to wealthier IDU; students will be much easier to recruit and will most likely recruit other students as opposed to this wealthier class.</p> <p>Drug dealers may be good seeds if they are well networked and respected; They must meet eligibility the criteria though.</p> <p>Sites should be opened at weekends, later in the night, and also through lunch to accommodate those who shoot up in the morning and evening.</p> <p>N1500; The wealthy ones may be asked to provide information as a way of giving back to the community or helping other IDUs if monetary incentives are not attractive enough.</p> <p>Sites should be located far away from any police stations or activity.</p>
Logistics		
Miscellaneous	<p>Any preference for the color and size of the coupon? Wording?</p> <p>None</p>	

Miscellaneous Miscellaneous	What is the most effective incentive: helping other IDU? Money? HIV test? Safety pack? Helping IDUs in rehabilitation, money, HIV test, safety pack.	
	How comfortable will IDUs be recruiting other IDUs? Will they prefer to recruit a specific type of IDU? IDUs interviewed feel very free and confident in recruiting other IDU for the study.	
	Profile of the IBBS interviewers: men, women, health workers, counselors, doesn't matter?	This does not matter as much as having well-trained staff in general to gain trust; there should be a Hausa speaking interviewer.
	Projected acceptability of HIV test: Widespread acceptance of HIV test	

MSM Pre-assessment study Observations (Kaduna)		RDS Implications
Notes/Observations		
Locations	<p>How concentrated is the population of MSM in this state? There is an active MSM population in the city and their operation shows there are various types of classes such as the MSM community.</p> <p>What are the major neighborhoods?: MSM mostly hang out in Tudun Wada, Kawo and Zaria, Sabo and Muri Roads .</p> <p>Are there any hot spots where MSM congregate and use or shoot-up? What are the hot spots? Where do they meet? And Hook up? • Access hotel, Final white hotel, One Nigeria hotel and most of the eateries in town.</p> <p>Based on the current choice of IBSS sites – are they a reasonable distance from the hot spots mentioned above? The current choice of IBSS sites is adequate.</p>	<p>This is an indication that we should be able to recruit MSM fairly easily since there is a sizable community.</p> <ul style="list-style-type: none"> • Diversify seeds from these sites • Try to situate the study site that will be central to all these sites • Diversify seeds from these sites • Try to situate the study site that will be central to all these sites
Diversity of MSM Identification of sub-populations :	<p>Gay Identified, Non-gay identified, Old/Young, commercial sex workers? MSM represent a cross-section of the population. There are many gay/MSM students, educated, affluent, young and middle-aged.</p> <p>Other characteristics: Socio-economic status, students, religion? Do most have mobile phones? Comprise students, workers, and people with high class profile. Majority own cell phones.</p>	<p>Diversify seeds, however, it should be noted that RDS will have a difficult time recruiting those who are well off socioeconomically.</p> <p>Most have cell phones so they may want to use cell phones to schedule the second visit.</p>
How well networked are these sub-populations	<p>Across types of MSM, which are well networked and which are not? Two types were identified: the very wealthy and the poor, both of them are well networked according to their class. But we also learned that a large portion of the MSM community in Kaduna believes that they are well networked because there is always a link between the student MSM and the rich MSM.</p>	<p>They were well networked within their class so there will be high homophily by class (i.e., similar people recruit each other). There may be bottlenecks in recruitment across class. However, since there appears to be linkages between students and the rich, we may get some cross-recruitment, which will be good.</p> <p>MAN and Kind Hearts were identified. Ask for their assistance in identifying seeds.</p>
	<p>Did we identify any especially well networked leader who might aid in recruitment? None, except an NGO working with MSM.</p>	

Logistics	<p>What is the availability of MSM to participate in study? At the beginning of the month etc? All respondents are willing to participate in the main IBBSS survey and they all believe that other MSM will be willing to participate, provided substantial incentive is provided. Most are available mainly in the evening during school season and the working class are also available in the evening because of working hours. Majority are available on Friday nights and weekends.</p> <p>What is the most appropriate amount for remuneration?: Most agreed 1,000 would be appropriate.</p> <p>What safety concerns will MSM have? Which will not end up coming to the study? Confidentiality and security were emphasized: They are concerned about police and homophobic attacks from the public. The rich and very educated MSM might not want to participate in the study.</p>	<p>Indicating that recruitment will be relatively easy. But compensation must be provided. Ensure that study sites are open after work and school hours or on weekends.</p>
Miscellaneous	<p>Any preference for the color and size of the coupon? Wording? No preference</p> <p>What are the best incentives: helping MSM community? Money? HIV test? Safety pack? Monetary incentives and condoms; helping MSM community, HIV test and safety packs.</p> <p>How comfortable will MSM be recruiting other MSM? It is the most adequate method that can be deployed. Most indicated they could recruit about 10 people.</p> <p>Profile of the IBBSS interviewers: men, women, MSM, non-MSM, doesn't matter? Most preferred male interviewers.</p> <p>Projected acceptability of HIV test: All the MSM respondents in Kaduna are quite knowledgeable about HIV and some know where to get confidential HIV test, but are not too willing to do a test.</p>	<p>Safety precautions must be in place, not only from public but also from police attacks. It may be difficult to MSM who are more socio-economically well-off just by the nature of RDS.</p> <p>Use money and condom/lube; HIV test will be another benefit to the respondents.</p> <p>Respondents seem to indicate it would be feasible to recruit others.</p> <p>Hire male interviewers and other staff.</p>

IDU Pre-assessment study Observations (Kaduna)		RDS Implications
Notes/Observations	Concentration of IDU population in this state: The existing population of IDU in the northern state is large. Are there any hot spots where IDU congregate and use or shoot-up? What are the hot spots? Galleries? Ghettos, uncompleted buildings, brothels, clubs, hide-outs are some of the places IDU hang around to take their drugs Hotspots in Kaduna: Tundun Wada and constitutional road, Kakuri, Zaria, Kawa, Kigo. Where do IDU get their drugs? Friends, dealers, pimps? IDU get their drug from multiple sources, but prominent among them is the dealer. Based on the current choice of IBESS sites – are they a reasonable distance from the IDU hot spots mentioned above? Most places chosen for the interview site during the pre-assessment study are adequate. (Constitutional Road was centre and the road has many IDU hotspots) Old or Young, sex workers, frequency of drug use, association with crime or violent behavior? The majority of the IDUs in Kaduna is young students and employed educated middle class. Other characteristics: Socio-economic status, students, religion? Do most IDU have mobile phones? IDUs are broadly divided into two; the high class who are very rich and the low class who are very poor. However, about a third of the IDU population in Kaduna is reported as students and middle class. Most IDU have cell phones. Where do we find these sub-populations of IDU? Constitutional Road because most of the bars and clubs on the road are used as drug joints What is the role of the dealer? They sell drugs and joints. The majority of IDUs living in Kaduna go to Zaria for cocaine due to quality.	Diversity of seed selection based on geography Remuneration for travel – will it be enough? Set up study site close to these areas and select seeds from these areas. Identify IBESS sites near IDU hot spots near Constitutional Road; ensure there is adequate transport from this area to the site. See below. Important to include high, low, and middle class seeds. Also, at least 2-3 university students should be included as seeds. Include seeds that frequent Constitutional Road. Also, ensure that sites are close enough to this IDU hotspot. Identify and use dealers and other well networked IDU as seeds; also find a couple IDU seeds that regularly go to Zaria to access their drugs.
Diversity of IDU/ Identification of sub-populations :		

Diversity of IDU/ Identification of sub-populations	<p>Across neighborhoods? Are there areas within each city that tend to be better networked or have a higher intensity of drug use? Yes, most networking and IDU activities are concentrated with the centre points of the main cities.</p> <p>Did we identify any especially well networked leader who might aid in recruitment? Who is the point person to contact in this state? IDUs move in and out of their areas temporarily or permanently due to drug accessibility, security and law enforcement issues and traveling to visit their partners.</p>	<p>Sites should be close to the center of the city where IDU access their drugs.</p>
Logistics	<p>What is the availability of IDUs to participate in study? Do they buy their drugs a specific time? At the beginning of the month etc?: IDUs will be available for the study although it is not advisable to interview just before or soon after they have had their drug.</p> <p>When do IDU shoot up? At what time of day? IDU shoot up in the morning and then go about their daily business or school. Early or late hours of the day. The noon period is used to make money. About half shoot-up 3 times a day.</p> <p>Who are the appropriate field staff? What are the personal attributes or characteristics to look out for? In Kaduna State, respondents mentioned that IDUs would feel uncomfortable with men without beards and with shaved hair. Field workers with these characteristics could be mistaken for police officers or security agents.</p> <p>What safety concerns will IDU have? Which types of IDU will not end up coming to the study? Although cash incentives have been mentioned and a motivating factor for participation, those who are rich may not be easily attracted to the study because of fear of exposure. Some IDU will not participate because of the police and NDLEA. 90% agreed that the rich and affluence IDU will not participate in study.</p>	<p>Mobilizers should work closely with study staff to ensure that IDU respondents are interviewed at the most suitable times. The interviews should not be too long.</p> <p>Study sites should stay open through lunch to ensure that IDU who shoot up early or late will participate.</p> <p>Avoid staff without beards or with shaved hair if possible. Also, need to make sure we have IDU mobilizers on site to make respondents comfortable. Make sure to choose a neutral site to reduce fear.</p> <p>Include economically diverse seeds. Also, ensure that sites are close enough to IDU hotspots, but in clean and safe enough areas not to detract middle and upper class IDU from participating. Also, Kaduna may want to modify their recruitment speech to stress the confidential nature of the study to address security concerns</p>
Miscellaneous	Any preference for the color and size of the coupon? Wording? None mentioned	Design of coupons.

Miscellaneous	<p>What is the most effective incentive: helping other IDU? Money? HIV test? Safety pack? Money? Key Informant's suggested at least N1,500 due to the level of affluence among the recruits. Also educational packs on substance misuse.</p> <p>How comfortable will IDU be recruiting other IDU? Will they prefer to recruit a specific type of IDU?: Very adequate; most are projected to be networked and able to successfully recruit 10 IDU s.</p> <p>Profile of the IBBSS interviewers: men, women, health workers, counselors, doesn't matter? Preference of male interviewers.</p> <p>HIV Test Acceptability: The majority are thought to be accepting of an HIV test.</p>	<p>Ensure there is linkage to appropriate information and services for IDU.</p> <p>Make sure that the majority of interviewers are male, but include at least one female; though, this is not as important if they are well trained.</p> <p>Contacts: MAN and Kind Heart.</p>
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MSM Pre-assessment study Observations (Kano)	
Notes/Observations	RDS Implications
Locations	<p>How concentrated is the population of IDU in this state? Unknown size of men involved in MSM in Kano State.</p> <p>What are the major neighborhoods?: They live in Hotooro, Sabon Gari area and Badawa site; Tundun Muritala, Gyadi - Gyadi, French café and Royal Tropicana in Nasarawa GRA, Badawa and Sabon Gari.</p> <ul style="list-style-type: none"> • Sabon Gari is a friendly area, which is free from any kind of harassment. As long as the study is conducted in the area there would not be any problem. <p>Are there any hot spots where IDU congregate and use or shoot - up? What are the hot spots? Where do they meet? And Hook up?: Places like Badawa, Hotooro and Sabon Gari then Abedi street, Mararaba are places where MSM can be located. Other places are Joints, Night clubs, fast food outlet, viewing center}, Cinema and football pitch (stadium), Kofar Nassarawa area and Emir palace road are the hot spots. There are street based and brothel based MSM. They can be located in the following areas: under sixteen - Ibedi road, kofar mata and around the Emir Palace also Fegge Quest House, Hotooro Dan Marke, Sabon Gari, Zango, Dawakin Dakata, Rimi Kebe.</p> <p>Based on the current choice of IBSS sites - are they a reasonable distance from the hot spots mentioned above? Yes,</p>
Diversity of IDU/ Identification of sub-populations	<p>Diversity of seed selection based on geography</p> <ul style="list-style-type: none"> • Diversify seeds from these sites • Try to situate the study site that will be central to all these sites; Sabon Gari is the main MSM site so make sure site is close to it. <p>Include diverse seeds</p>

Diversity of IDU/ Identification of sub-populations	Other characteristics: Socio-economic status, students, religion? Do most have mobile phones? • Majority of MSM in Kano is uneducated; They are also secretive about their sexuality due to religious beliefs. Some MSM live in their homes, some with their parents, and others are staying on their own.	Recruitment may be slightly slower in Kano b/c of the secretive nature of many MSM; If they are secretive, they may have smaller networks and may not be as willing to recruit others since it will require disclosure of their behaviors. It may also be more difficult to recruit those who are living at home since they may be accountable to report to their parents of their whereabouts.
How well networked are these sub-populations	Across types of MSM, which are well networked and which are not? Two classes are identified; those with high socio-economic profile and those with low social standing. The two groups are well networked except that the rich ones are reluctant to participate in the study because they don't want to be exposed.	Recruitment within classes may be easy but there may be recruitment bottlenecks across classes. However, expect that the higher classes may be under sampled.
Logistics	What is the availability of MSM to participate in study? Do they go out on Friday? At the beginning of the month etc? Fridays and Saturdays are the most active days of the week for MSM socially. Best day is weekends (Saturday and Sunday) between 4pm and 12am. About 60% indicated they would be available during the day. What is the most appropriate amount for remuneration? No amount is mentioned What safety concerns will MSM have? Which will not end up coming to the study? Confidentiality and securing the venue fixed for interviews. MSM may participate in the study if interview site is a public place and if the personnel and interviewer are not MSM. Older and younger MSM may not participate because older ones have their reputation to protect and young ones may be too shy. Green Park Hotel in Bampai is the safest and most secure place for MSM to be interviewed.	Include at least one weekend during the IBBSS study Although no specific amount of money was mentioned, N1000 may be appropriate. Need to choose a neutral place. Use non-MSM interviewers, perhaps because the network is small and they do not want to share personal information.
Miscellaneous	Any preference for the color and size of the coupon? Wording? What is the best incentive: helping MSM community? Money? HIV test? Safety pack? Financial incentive, condoms and lubricants. How comfortable will MSM be recruiting other MSM? Very comfortable, most respondents and respondents could recruit other MSM for the study. 80% will be able to recruit an average of 6 people while 95% will be able to recruit 5 people each.	No preference. Money, condoms and lubes should be used for compensation. Recruitment should be relatively easy but might be slower in Kano than in other cities. The network size seems a bit smaller and they seem to be more concerned about their religion being a barrier

	<p>Profile of the IBBS interviewees: men, women, MSM, non-MSM, doesn't matter? Most of the respondents preferred a male interviewer because they felt they would be able to express themselves better.</p>
	<p>Projected acceptability of HIV test: If there is no privacy MSM may be discouraged from doing the HIV test.</p>

IDU Pre-assessment study Observations (Kano)		RDS Implications
Notes/Observations	Concentration of IDU population in this state: High concentration of IDUs, mainly concentrated around the city centre.	Diversity of seed selection based on geography: Seeds could be selected to target city centre, as that is where the IDU population is highest.
	What are the major neighborhoods?: Sabon Gari is the major neighborhoods where drugs are purchased.	Location of IBSS sites: IBSS should target Sabon Gari among other sites
	Are there any hot spots where IDU congregate and use or shoot-up? What are the hot spots? Galleries? Kano IDUs inject mainly at the "bunks" or "jungle" (abandoned and uncompleted buildings, sometimes around refuse dumps). Some inject in clubs and homes. Drugs obtained from Kwanar, Jaba Fagge, Brigade and through other IDU. Not likely to be found within Kano city hotels and Nassarawa GRAs.	
	Area in Kano: Sabon Gari, Gyadi-Gyadi Bunks, Hotoro, Rimi Kebe, Badawa and Nasarawa GRA	Set up study site close to these areas and select seeds from these areas
	The IDU population is well dispersed.	Consider having more than one study site for IDUs.
	Where do IDU get their drugs? Friends, dealers, pimps? Multiple sources, but prominently from the dealers; also many get them from the Sabon Gari area.	
	Based on the current choice of IBSS sites – are they a reasonable distance from the IDU hot spots mentioned above? The main IBSS should be conducted in areas used for this pre-assessment study because they are central, IDU friendly and accessible.	
	Old or young, sex workers, frequency of drug use, association with crime or violent behavior? IDUs in Kano are young and many are also reported to be MSM and male sex workers (MSW). The men are more open about their drug habits than the women.	Identify and use at least one female IDU in the study.
	Other characteristics: socio-economic status, students, religion? Do most IDU have mobile phones? Foreigners from Lebanon, Niger, and Saudi Arabia are found in Kano. This class of IDUs form networks and strongly influence local drug user among poor indigenes	Make sure to identify and include an ethnically diverse group of seeds.
	phones for communication, commercial and dealing purposes.	Identify economically diverse seeds and at least one woman.

<p>How well networked are these sub-populations</p>	<p>Across types of IDU, which are well networked and which are not? The majority is comfortable recruiting at least 5 people- mostly Nigerian male IDU.</p> <p>What is the role of the dealer? The role of the dealer is to sell drugs and provide drug joints to IDUs.</p>	<p>Dealers who provide 'joints' for injecting and meet the study criteria should be recruited as seeds.</p>
<p>Logistics</p>	<p>Across neighborhoods? Are there areas within each city that tend to be better networked or have a higher intensity of drug use?</p> <p>What is the availability of IDU to participate in study? Do they buy their drugs a specific time? At the beginning of the month etc? No time restriction to the period IDU buy drugs, but most would buy very early in the morning. They claim they can't perform daily activities without it. Illiteracy and lack of funds Socio-economic status: The majority of IDUs in Kano are uneducated and unemployed; however the majority also have mobile reportedly prevent people from participating in the study.</p> <p>When do IDU shoot up? At what time of day? The majority of IDU in this area are frequent users (i.e. they shoot up at least 3 times per day); The majority also shoots up in the morning.</p>	<p>Study staff should come up with innovative ideas on how to reach this core population among IDU.</p>
	<p>What is the most appropriate amount for remuneration? Particular amount not mentioned but indications are that remuneration should attract participation from high socio-economic income IDU.</p>	<p>Interviewers must be extra careful not to consent or interview respondents who are under the influence of drugs. Consider extended hours to accommodate those who are using in the morning.</p> <p>Financial incentives work for IDU because the drug habit is sustained by cash. On the other hand, high income MSM may want researchers to understand the non-monetary aspects of their sexuality and are therefore not likely to require financial incentives to participate in the study.</p>
	<p>Who are the appropriate field staff that? What are the personal attributes or characteristics to look out for? None were mentioned.</p> <p>What safety concerns will IDU have? Which types of IDU will not end up coming to the study? IDUs have safety concerns that include official harassment, raids, arrests and imprisonment.</p>	<p>Address safety concerns</p>

Miscellaneous	Any preference for the color and size of the coupon? Wordings? None mentioned	Design of coupons.
	What is the most effective incentive: helping other IDU? Money? HIV test? Safety pack? Money? Money was widely mentioned as the most effective incentive. N1,500 was suggested by the Key Informants.	Remuneration structure.
	How comfortable will IDU be recruiting other IDU? Will they prefer to recruit a specific type of IDU? IDUs recruiting other IDUs for the survey will be most effective. They know and understand their ways of life and can track respondents as the need arises. However, it may be difficult for IDUs with low income and economic status to recruit those with high income and economic status.	Must identify and use seeds from both high and low economic status.
	Profile of the IBBS interviewers: men, women, health workers, counselors, doesn't matter? Prefer male and Hausa speaking interviewer (at least one Hausa speaking or interpreter).	This does not matter as much as having well-trained staff in general to gain trust; there should be a Hausa speaking interviewer.
	Safety and Security: Almost all IDUs are concerned about the law enforcement; police and NDLEA and Key Informants believe that the rich male and female IDU, female IDU and foreign IDU will not participate in the study.	Ensure that site locations are discreet and located far from Police stations.
Projected acceptability of HIV test: IDUs have low risk perception of HIV but many will take the test. They report that money for drugs is their problem, not sex.	HCT nurse should provide adequate information about risks of injection drug use and HIV.	

MSM Pre-assessment study Observations (Lagos)	
Notes/Observations	RDS Implications
Locations	Diversity of seed selection based on geography: Dispersion of groups within Lagos and traffic situation in the city might make access to community very challenging for interviewers as MSM to be interviewed are far apart. The need for multiple groups of interviewers and adequate means of mobility cannot be overemphasized. Diversify seeds from these sites
How concentrated is the population of MSM in this state? There is a heavy presence of MSM in the State. They are well dispersed across the length and breadth of the state. MSM are highly mobile in and out of the State.	
What are the major neighborhoods? They are found in Yaba, Lekki, Ketu or Badagry.	
Are there any hot spots where IDU congregate and use or shoot-up? What are the hot spots? Where do they meet? And Hook up? Silverbird Galleria, Shoprite, Allen Avenue.	
Based on the current choice of IBBS sites – are they a reasonable distance from the hot spots mentioned above? The current choice of site is fairly adequate, other sites are fairly dispersed.	Because the population is dispersed, it may help to consider two different sites to make it more accessible.
Diversity of IDU/ Identification of sub-populations :	Diversify seeds, however, it should be noted that RDS will have a difficult time recruiting those who are well off socioeconomically.
Other characteristics: socio-economic status, students, religion? Do most have mobile phones? Newly graduated MSM, human rights activists, and self-employed business men with kids.	Definitely include students and activists; but don't forget to also include MSM who may be married with kids.
Where do we find these sub-populations of MSM? There are more young ones on the mainland, Ikeja, Opebi, Maryland.	
How well networked are these sub-populations	There may be recruitment bottlenecks across socioeconomic groups. But recruitment within class should be more common.
Across types of IDU, which are well networked and which are not? The two groups are not connected but each group is well networked	
Across neighborhoods? Are there areas within each city that tend to be better networked? The network is well dispersed across the State.	This indicates that recruiters should be ready to recruit outside of their neighborhoods as well

	<p>Did we identify any especially well networked leader who might aid in recruitment? Queer Alliance United Social Support Group, TIP- The Independent Project, Alliance Right Nigeria, SPIN: Support Project in Nigeria, etc.</p>	<p>We must engage these NGOs before starting IBBS. They can help sensitize the population and also help recruit a few seeds:</p>
Logistics	<p>What is the availability of MSM to participate in study? Do they go out on Friday? At the beginning of the month etc? The last Friday of every month MSM troops out in large number at the Silver bird Galleria; it is a major place to find them. "Palms" is another place. Sundays is another day when you can find MSM at the National theatre.</p> <p>What is the most appropriate amount for remuneration?</p> <p>What safety concerns will MSM have? Which will not end up coming to the study? Those who have very high profile may not participate in the study.</p>	<p>Weekends may be slower at the study site since they seem to have active social schedules on the weekend.</p>
Miscellaneous	<p>Any preference for the color and size of the coupon? Wording?</p> <p>What are the best incentives: helping MSM community? Money? HIV test? Safety pack? Financial incentive and condoms were well emphasized</p> <p>How comfortable will MSM be recruiting other MSM? Very adequate</p> <p>Profile of the IBBS interviewers: men, women, MSM, non-MSM, doesn't matter?</p> <p>Projected acceptability of HIV test: Most want to be educated but may not accept being tested.</p>	<p>Transport reimbursement at a minimum</p> <p>Most likely the higher class will be under sampled here.</p> <p>No preference.</p> <p>Money and condoms.</p>
		<p>Profile of interviewer: Some MSM feel somewhat uncomfortable being interviewed by a non-MSM</p>

IDU Pre-assessment study Observations (Lagos)		Notes/Observations	RDS Implications
Geographic spread for recruitment	How concentrated is the population of IDU in this state? There is an active population of IDUs in Lagos state. They can be found among other drug users in joints and street corners in various parts of the state. An estimated population from 2000 to 3000 this is a range provided by all the respondents	How concentrated is the population of IDU in this state? There is an active population of IDUs in Lagos state. They can be found among other drug users in joints and street corners in various parts of the state. An estimated population from 2000 to 3000 this is a range provided by all the respondents	Diversity of seed selection based on geography: Dispersion of groups within Lagos and traffic situation in the city might make access to the community very challenging for interviewer.
	What are the major neighborhoods? IDUs can be found in various parts of the state, Ikeja (Allen-Avenue, Ikeja Under bridge, Ipodo), Surulere (Shitta, Ijsha, National Stadium), Mushin (Idi-Oro, Akala) Lagos Island Environs (Maasi, Agrawo, Oju-Ina, Kuramo/Bar Beach, Dolphin Estate, Apapa). IDUs are highly mobile, partly because they have to look for ways to get money and buy drugs. Others include; Stadium, Kuramo, Bar beach, Ikeja Under bridge, Dolphin estate, some clubs in VI and other hide-outs	Study sites should be accessible to these areas.	
How well networked are these sub-populations	Are there any hot spots where IDU congregate and use or shoot-up? What are the hot spots? Galleries? Most of the spots listed above are the popular hot spots. Oju-Ina' was described as a volatile area notorious for lack of order amongst the drug users who come mainly from the lower socio-economic class of the society and can be aggressive.		
	Where do IDU get their drugs? Friends, dealers, pimps? IDUs get their drugs from multiple sources, but prominent among them is the dealer		
	Old or young, sex workers, frequency of drug use, association with crime or violent behavior? The community consists of educated and non-educated people, men and women and young and old		
	Other characteristics: socio-economic status, students, religion? Do most IDU have mobile phones? -Most IDU have mobile phones and about half are professionals; higher income individuals tend to inject drugs.		
	Across types of IDU, which are well networked and which are not? Some IDU are well networked, others stay on their own		

	<p>What is the role of the dealer? They sell drugs and provide drug joints for IDU to shoot up at identified “joints” and hot spots.</p> <p>Across neighborhoods? Are there areas within each city that tend to be better networked or have a higher intensity of drug use? Most IDUs in Lagos are dispersed.</p>	<p>Recruitment within classes may be easy but there may be recruitment bottlenecks across classes. Ensure that the seeds are from both classes.</p>
	<p>Did we identify any especially well networked leader who might aid in recruitment? Who is the point person to contact in this state? Otunba is a Nurse who is well known to IDU communities in Lagos. He will be an invaluable resource for the IBSS.</p>	
Logistics	<p>What is the availability of IDU to participate in study? Do they buy their drugs a specific time? At the beginning of the month etc? the morning or evenings between 4 -5pm were the best times to catch IDU for the study.</p> <p>When do IDU shoot up? At what time of day? Mostly in the early hours, night time when about to sleep.</p>	<p>Study sites should be open early morning and later in the evening.</p>
	<p>What is the most appropriate amount for remuneration? Financial incentives are very important to facilitate recruitment and also bring the respondents to the study site. A range of N500 to N1000 was suggested. However, monetary incentive level for the chairman is quite higher, put at between N50,000 - N100,000 or more.</p>	
	<p>What safety concerns will IDU have? Which types of IDU will not end up coming to the study? Most IDU are concerned about law enforcement and the police.</p> <p>How comfortable will IDU be to recruit other IDU? Will they prefer to recruit specific type of IDU? - They are willing to recruit their peers into the study.</p> <p>Profile of the IBSS interviewers: Someone they trust.</p>	<p>Ensure that site locations are discreet and located far from Police stations.</p>
Miscellaneous		<p>Study staff should ensure safety of the community.</p>

MSM Pre-assessment study Observations (Ibadan, Oyo)		RDS Implication
Notes/Observations		
Locations	<p>How concentrated is the population of MSM in this state?</p> <p>What are the major neighborhoods? They are found everywhere especially in areas around Challenge Road.</p> <p>Are there any hot spots where IDU congregate and use or shoot-up? What are the hot spots? Where do they meet? And Hook up? Oloro drive, Coco dome, a place in Challenge, pool side.</p> <p>Based on the current choice of IBSS sites – are they a reasonable distance from the hot spots mentioned above? Yes.</p>	<ul style="list-style-type: none"> Identify seeds from these sites Try to situate the study site that will be central to all these sites
Diversity of IDU/ Identification of sub - populations :	<p>Gay Identified, Non-gay identified, Old/Young, commercial sex workers? There are some commercial sex workers who hang out on the street.</p> <p>Other characteristics: Socio-economic status, students, religion? Many are students.</p>	<p>Try to include MSM sex workers as seeds.</p> <p>Definitely include students as seed.</p>
How well networked are these sub -populations	<p>Where do we find these sub-populations of MSM? Everywhere especially at the University of Ibadan (UI)</p> <p>Across types of IDU, which are well networked and which are not? Most of the MSM are well networked except that the married, influential (politicians) and professional ones are reluctant to respond in the study because they don't want to be exposed.</p>	<p>As in other states, it will naturally be more difficult to recruit the married MSM since they will be less networked. It is likely that recruitment chains may end with married MSM. This also means that we need to keep in mind that married MSM and professional MSM may be underrepresented in our sample. Keep this in mind for drawing conclusions. Also need to keep in mind that when selecting sites, we need to make sure that the site would be accessible enough and comfortable enough for professionals as well.</p>

	<p>Across neighborhoods? Are there areas within each city that tend to be better networked? In Ibadan, there is no known network, but MSM reportedly move in cliques which are dispersed through the city.</p> <p>Did we identify any especially well networked leader who might aid in recruitment? TIP- The Independent Project</p> <p>What is the availability of MSM to participate in study? Do they go out on Friday? At the beginning of the month etc? Most people will be available on weekends.</p> <p>What is the most appropriate amount for remuneration?</p> <p>What safety concerns will MSM have? Which will not end up coming to the study? They are concerned about coming to a place where they may be recognized easily.</p>	<p>Recruitment may occur across neighborhoods since they are dispersed. This is good since there may less likely be bottlenecks in recruitment by neighborhoods.</p> <p>We must engage TIP before starting IBBSS. They can help sensitize the population and also help recruit a few seeds</p> <p>Need to make sure that data collection also occurs also on at least one weekend day.</p> <p>N1000 would be appropriate as compensation.</p> <p>When selecting sites, we need to make sure that the site would be accessible enough and would be a neutral place where people would not be identified as gay.</p> <p>No preference.</p> <p>Compensation should not only be money, but also include condoms, lube and IEC</p> <p>This is a good indication that recruitment should go fairly quickly.</p> <p>There must be a small circle of MSM where everyone knows each other and they may not be comfortable giving sensitive info to people they may know.</p> <p>HIV testing will not be a barrier to recruitment.</p>
Logistics		
Miscellaneous	<p>Any preference for the color and size of the coupon? Wording?</p> <p>What are the best incentives: helping MSM community? Money? HIV test? Safety pack? All those interviewed thought it would be good to give money, Free condoms and lubricants, IEC on STIs, HIV.</p> <p>How comfortable will MSM be recruiting other MSM? Most indicated that people would be able to recruit an average of 6 people or more.</p> <p>Profile of the IBBSS interviewers: men, women, MSM, non-MSM, doesn't matter? Interviewers that are not from Ibadan.</p> <p>Projected acceptability of HIV test: Most reported that people would be happy to have an HIV test done.</p>	

IDU Pre-assessment study Observations (Oyo)		
Notes/Observations	RDS Implications	
<p>Geographic spread for recruitment</p> <p>How concentrated is the population of IDU in this state? Some report there are many, but others report that the number of IDU seems to be negligible with marijuana predominating the drug scene.</p> <p>What are the major neighborhoods? Mapo, Oke Beere</p> <p>Are there any hot spots where IDU congregate and use or shoot-up? What are the hot spots? Galleries? Joints, hotels, homes</p> <p>Where do IDU get their drugs? Friends, dealers, pimps? Friends, dealers, some send their children or other people to buy drugs and take them back to them.</p> <p>Old or young, sex workers, frequency of drug use, association with crime or violent behavior? Many IDUs are middle aged and frequent users, others are young about half are thought to be professionals (bankers, doctor, lawyers etc.).</p> <p>Other characteristics: Socio-economic status, students, religion? Do most IDU have mobile phones?-Most IDU have mobile phones and about many are professionals. In Ibadan, it was reported that IDUs live in "high class areas because the low class don't inject and don't have privacy to inject but those who inject use their house or offices."</p>	<p>Need to have strict screening procedures in place to make sure that candidates are in fact injectors. Screeners need to check for marks on the arms (or legs) and use the screening questions to assess if someone is an injector.</p> <p>Study sites should be accessible to these areas.</p>	
<p>Across types of IDU, which are well networked and which are not? Some IDUs are well networked, others stay on their own.</p> <p>What is the role of the dealer? - They sell drugs and provide drug joints for IDUs to shoot up at "joints" or hot spots.</p>	<p>Particularly for Ibadan, make sure the study site is accessible and comfortable for professionals. For example, it should not be in or near sites associated with drug users (like a psychiatric hospital).</p> <p>Make sure more of the high-class folks are represented as seeds in Ibadan.</p> <p>Need to consider increasing incentives.</p>	
<p>How well networked are these sub-populations</p>	<p>Recruitment may be slightly slower; because some are professionals they may not want to recruit others since it will require disclosure of their behaviors.</p> <p>Well networked dealers and those who provide 'joints' that meet eligibility criteria could be used as seeds. They may also be able to reach those who are not as well networked to other IDU.</p>	

	<p>Across neighborhoods? Are there areas within each city that tend to be better networked or have a higher intensity of drug use? Most IDUs buy from the joints and go back home or to hotels.</p>	<p>Recruitment within classes may be easy but there may be recruitment bottlenecks across classes. So it is imperative to have seeds from both classes.</p>
Logistics	<p>What is the availability of IDU to participate in study? Do they buy their drugs a specific time? At the beginning of the month etc? Morning or evenings between 4-5pm are the best times to catch IDUs for the study.</p> <p>When do IDU shoot up? At what time of day? - Mostly in the early hours, night time when about to sleep</p> <p>What is the most appropriate amount for remuneration? N1,000.00</p> <p>What safety concerns will IDU have? Which types of IDU will not end up coming to the study? Most IDU are concerned about law enforcement - police</p>	<p>Study sites should be opened early morning and later in the evening.</p>
Miscellaneous	<p>How comfortable will IDU be recruiting other IDU? Will they prefer to recruit a specific type of IDU? - Estimated by KI's that about half are comfortable recruiting at least 4 people.</p> <p>Profile of the IBBSS interviewers: men, women, health workers, counselors, doesn't matter? - Someone they trust</p> <p>Projected acceptability of HIV test? - Most IDU will accept HIV test.</p>	<p>Ensure that site locations are discreet and located far from Police stations.</p> <p>Mobilizers should work closely with study staff to ensure that respondents with little or no education understand the study and have the opportunity to participate. Include an educationally diverse seed selection: at least 1 who is not literate</p>

Guidelines for Conducting Formative Research for 2009 IBBSS³

Formative Research

Formative research is research conducted before the quantitative study begins. Researchers conduct focus groups, in-depth interviews, mapping, or observations of the target population and individuals who work with them to learn more before the study begins. Ethical review for formative research is necessary before collecting data. Researchers who conduct RDS in international settings find that formative research is an essential step in ensuring a successful outcome for the study.

Benefits of formative research

Aside from learning more about the population under study, formative research may answer questions you have at the beginning of the study and educate the research team about the community they are studying. Formative research can help:

- Decide whether RDS is an appropriate sampling method for the population being studied (is the study population socially networked?)
- Identify sub-populations of interest and help select subsets for seeds
- Identify individual seeds
- Define logistical issues (proper incentive, interview locations and so forth)
- Inform materials development: coupons, survey questions.

Types of formative research

Types of formative research methods include:

1. Observation – useful for gathering information about the general movements and activities of the target population.
2. Key informant interviews – useful for gathering qualitative data from members of institutions, organizations and government agencies who know something about or work directly with the target population.
3. In-depth interviews – useful for gathering qualitative data from members of the target population.
4. Focus group discussions – useful for gathering information on social networks and pre-testing survey questions and methodological issues.
5. Mapping – useful for gathering information on where target populations spend time.

Table 1 shows questions you may have and how to answer them.

³Adapted from Guidelines for Conducting Formative Research for Respondent Driven Sampling Among Injecting Drug Users and Sex Workers. Piloted and developed by Lisa G. Johnston, 2006. Some field questions developed by Chomnad Manopaiboon, CDC-Thailand

Table 1: Sample formative research questions.

Question	How to Find the Answers
Where should we locate interviewing sites?	<ul style="list-style-type: none"> ▪ Observe and map areas where the target population spends time. ▪ Conduct focus group interviews. ▪ Conduct key informant interviews with community leaders and peer outreach workers.
What specific language should we use to identify sexual behaviors?	<ul style="list-style-type: none"> ▪ Conduct interviews with key informants ▪ Conduct IDIs &FGDs with target population.
What kind of an incentive should we offer?	<ul style="list-style-type: none"> ▪ Use FGDs &IDIs with of target population. ▪ Avoid incentives that are too high or too low.
<p>How do we find out more about the size of the target population’s social network (network size)?</p> <p>How can we find out if the population is properly networked?</p>	<ul style="list-style-type: none"> ▪ Interview target population with questions such as: How many people do you know that are also MSM (or MSM, youth at risk, others)?How many of these people have you seen in the past ____ months (weeks, days)?

As in all qualitative research, use information from more than one source in order to assess the validity of the information you are getting. This process of combining information from different sources, whether to collect, analyze, present, or interpret the data, is known as triangulation.

Formative Research for 2010 IBBSS

In each pre-assessment location, formative research should be conducted with a convenience sample of up to four key informants each for MSM and IDU categories and four in-depth interview respondents for the two groups, or a combined total of 8 KIIs and 8 IDIs. Information gathering can be conducted with healthcare providers, clinic staff, community leaders, peer educators, social workers, law enforcement, and members of the high-risk group. RDS staff should collect information on several topics and use this qualitative information to make key decisions about the project. Staff should keep detailed notes of all interviews. After each session, staff can review their notes and discuss impressions and themes from interviews. This pre-assessment has IDUs and MSM as target populations.

A. Injection Drug Users (IDUs)

An IDU is defined as any person 18 years and above, resident or working in the respective recruitment area at the time of the survey, who has injected drugs recreationally at least once in the 12 months preceding the survey.

B. Men who have sex with men (MSM)

An MSM is defined as any male 18 years and above, resident or working in the respective recruitment area at the time of the survey, who has engaged in oral or anal sexual activities with other men at least once in the 12 months preceding the survey.

1. Example of inclusion criteria for IDUs – a) injected illicit drugs in the past month; b) aged 18 or older; c) live and/or work in (name of the province); and d) able to adequately grant informed consent. Demonstrable track marks (stigmata) are commonly used.
2. Example of inclusion criteria for MSM – a) engaged in male to male sex in the past month (or other limited time frame – lifetime activity is discouraged as a non-specific marker); b) aged 18 or older; c) live and/or work in (name of the province); and d) able to adequately grant informed consent. Additional screening items might include where one meets partners, negotiation of oral or anal sex (who is on top, who goes first). This helps to eliminate misclassification due

Formative Research Questions

Network size

a. Why is this question important?

RDS can only be conducted with a target population that forms social networks. RDS relies on a recruitment process whereby target population members recruit other target population members whom they know. Social networks can have several formations. For instance, IDUs may inject with, buy drugs from, or socially interact with other IDUs. MSM may know each other by spending free time or working together or by sharing living space.

b. Which questions should be asked?

How many people do you know, and they know you, you know their name and they know yours, who are also MSM (Have had sex with other another man in the past one year)/IDUs (injected in the past six months), you have seen them in the past six months and they live in this province?

How many people do you know, and they know you, you know their name and they know yours who are also MSM (Have had sex with another man in the past one year)/IDUs (injected in the past six months), you have seen them in the past three months and they live in this province?

How many people do you know, and they know you, you know their name and they know yours who are also MSM (Have had sex with another man in the past one year)/IDUs (injected in the past six months), you have seen them in the past one month and they live in this province?

c. Which responses will tell me that RDS is appropriate?

Because RDS relies on peers recruiting peers, it is beneficial that MSM/IDUs know at least three other MSM or IDUs. Knowing three other MSM/IDUs ensures that there are a sufficient number of people to whom the MSM/IDU can give each of his or her three coupons. However, it is best if most of the MSM/IDUs you interview know up to five, ten, or twenty other MSM/IDUs for a given time period. This is an indication that the target population has fairly large network sizes. Asking this question for the different time periods (six months, three months and one month) will help in formulating the network question which will be used for data analysis. The network question will be based on the eligibility criteria being used for your study.

Although there are no set rules for which network size works best for RDS, it is suggested that you should use the time period (6 months, 3 months or 1 month) which provides network sizes between ten and twenty. For instance, if you interview three IDUs and they say that they have network sizes of 37, 52 and 81, respectively, for those IDUs they have seen in the “past six months”, then you may want to ask them about their network sizes for those they have seen in the “past three months”. If the same IDUs respond that they have network sizes of 22, 15, 18 for those they have seen in the “past three months”, then you might want to consider using the time period of three months for the network question that you will use in your survey.

Once you establish that you will use the three month period for your network question, there is no need to ask this question for those MSM or IDUs they have seen in the “past one month”.

d. Problems that can arise if this question is not asked

If the target population has small network sizes (fewer than three), you may not be able to maintain peer recruitment. Small network sizes could indicate that the population from which you are recruiting may be too small or isolated to sustain RDS recruitment.

Network density

a. Why is this question important?

Having large network sizes is an indication of the density of a target population's social networks. Social network patterns should be diverse whereby MSM/IDUs interact on numerous levels (socially, cohabiting, when using drugs, during work, etc.)

If collecting provincial level data, MSM/IDUs being sampled from more than one provincial city will need to be socially networked through the province for RDS to be analyzed. For instance, for provincial level data gathered from MSM/IDUs at more than one interview site, there will need to be network ties between the seeds and recruits recruited from one interview site and seeds and recruits from another interview site. All participants should have the option of going to either interview site and the addresses of both interview sites should be located on the recruitment coupon. If the MSM/IDUs in one interview site are not networked to those in another site, then you have two separate samples and they will have to be analyzed as such.

b. Which questions should be asked?

Use the responses from the questions above (“How many people do you know, and they know you, you know their name and they know yours who are also MSM/IDUs (injected in the past six months), you have seen them in the past-insert time period here-months and they live in this province?”) to find out about network density.

- Could you tell me about how your MSM/IDU friends interact with each? (What kinds of activities do they do together?)
- Do people who are also MSM/IDUs make friends with each other?
- Do MSM/IDUs go out together when they are not working?
- Do you know MSM/IDUs in [city or province location where sites will be located]?

How often do you see these MSM/IDUs? Under what conditions do you see them?

c. Which responses will tell me that RDS is appropriate?

You want to hear that MSM/IDUs spend time together doing different types of activities (socializing, injecting, cohabitating, having sex, working, etc.)

You also want to know that MSM/IDUs are networked throughout the province and that the chances are good that coupons from a seed or recruit from one interview site in the province will be given to a recruit in another interview site or province.

d. Problems that can arise if this question is not asked.

In one city in Eastern Europe, researchers conducted formative research for an RDS study on

MSM. All funding was in place and tentative dates for conducting this study were scheduled. In contacting organizations working with MSM in the area, it was learned that most of the MSM were trafficked, heavily controlled by agents, and hidden away in brothels. MSM would not attend in-depth interviews and SW agents became suspicious. The researchers quickly learned that MSM were not able to leave their brothels and did not form social networks with other MSM. Nonetheless, three SW seeds who claimed to know up to ten other MSM were identified and RDS was attempted in this city.

One seed was interviewed on the start date and given three coupons to use in recruiting other MSM she knew. She never recruited anyone. The other two seeds could not be located for their interviews. The RDS recruitment process did not work because this population did not form dense social networks.

B. Resolve Study Logistics

1. Incentives

a. Why is this question important?

Eligible SW/IDU participants receive a monetary incentive for completing the survey and providing a biologic specimen. Participants can also get an additional monetary reward for recruiting peers (usually up to three). Having an incentive that is too high can result in overcrowding of the interview site, people pretending to be members of the target population just to get the incentive and people buying coupons to sell to others.

Having an incentive that is too low can result in no one participating in the study.

The incentive for MSM should not be confused with payment for their time. The incentive is an enticement, a way to say “thank you”, for participating in the study. It is best not to use an open ended question for setting the level of incentive. You should give some figure to the MSM/IDUs/key informants that you are interviewing. Get incentive information from numerous sources.

b. Which questions should be asked?

- Do you think NGN_____ is sufficient to encourage MSM/IDUs to participate in our study (our study includes an interview and a biological specimen, and could take up to one hour to complete)?
- About how much would you expect their transport to the interview site to cost? (You may want to base your incentive level on the cost for transportation).

- c. Which responses will tell me that RDS is appropriate?

What you want to hear is that the level/type of incentive falls within your study budget.

- d. Problems that can arise if this question is not asked.

One study of IDUs in an impoverished country used an incentive that was too high for the target population. This high incentive led to overcrowding of the interview site. IDUs would line up for interviews before the interview site opened its doors each morning. IDUs became belligerent if they did not get interviewed quickly. Some IDUs learned that they could buy coupons and sell them for a profit. Non-IDUs learned how to respond to questions about IDUs and entered the study so they could get the incentive.

Interview Site

- a. Why is this question important?

Members of the target population will need to travel to an interview site to enroll and participate in the study. Therefore, RDS interview sites must be accessible, comfortable and appropriate for the target population. It is important to speak to members of the target population to determine the most suitable interview site for your RDS study.

- b. What questions should be asked?

If you have an interview site selected, then ask:

- Would you feel comfortable coming to _____ to participate in a study?
- Do you think other MSM/IDUs would feel comfortable coming to _____ to participate in a study?
- Why or why not?

If you do not have an interview site selected, then ask

- Where do you think would be a location for an accessible, comfortable place for MSM/IDUs to go to participate in a study?
- How many sites do you think are necessary for a city/town of this size? If more than one site is suggested, where do you think these sites should be located?

- What are the characteristics of an interview site (somewhere you will be interviewed and have blood taken) that would make it most comfortable?
- What do you think other MSM/IDUs would say are the characteristics that would make an interview site most comfortable?

Other questions to ask:

- What are the most convenient times of the day for MSM/IDUs to go to an interview site to participate in a study?
 - Which days of the week do you think MSM/IDUs would be most likely to go to an interview site to participate in a study?
 - Do you think IDUs and MSM would be willing to be interviewed at the same interview site at the same time (important to know if you are having simultaneous studies)?
- c. What responses will tell me that RDS is appropriate?

Appropriate responses will depend on what is needed for your study. What you want to hear is that the interview sites you have available are those that MSM/IDUs will feel comfortable to going to. If MSM and IDUs are unwilling to attend the same interview sites, then you may have to use separate interview sites or sample these two groups at different times.

d. Problems that can arise if this question is not asked.

In one study, IDUs and SWs were being interviewed for the same study at the same interview site. After eight weeks this study attained its sample of IDUs, but only enrolled a handful of SWs. It was later learned that SWs were not willing to go to the same interview site as IDUs. The research team had to extend its study duration to sample SWs once the IDUs were sampled and no longer visiting the interview site. If an interview site is not accessible or is located in an area that is not comfortable to the target population, then no one will enroll in your study.

Materials

a. Why is this question important?

IBBSS uses materials that are important to the study. For instance, the design of the referral coupons could be improved if you have input from members of the target populations. MSM/IDUs could provide information about appropriate coupon color, size, and content.

The IBBSS is an opportunity to provide educational materials to MSM/IDUs. It could be

helpful to ask MSM/IDUs about the types of educational materials and supplies (condoms) they would be most interested in receiving.

b. Which questions should be asked?

- You will be given coupons which you will use to recruit other MSM/IDUs. Do you have a preference of what color these coupons should be? These coupons are about the size of _____, do you think they should be smaller or larger? What kinds of information do you think we should put on the coupons? Do you think a map on the coupon will be helpful for finding the interview site?
- We would like to offer educational materials/supplies to MSM/IDUs who participate in the study. What health topics are of most interest to MSM/IDUs? Do you think MSM/IDUs will review written materials on these subjects? Do you think MSM/IDUs be interested in receiving free condoms? Is there anything else about which MSM/IDUs would want to receive information?

c. Which responses will tell me that RDS is appropriate?

Appropriate responses will depend on what is needed for your study. What you want to hear is that the suggestions made by MSM/IDUs can be implemented for or incorporated into your study.

d. Problems that can arise if this question is not asked.

If these questions are not asked, there may not be uptake of the coupon recruitment system. If MSM/IDUs suggest having a map on the coupon and no map is included on the coupon, MSM/IDUS may have trouble finding the interview sites. In some areas some colors may be offensive to MSM/IDUs.

IBBSS offers an excellent opportunity to provide important health information to MSM/IDUs. This opportunity could be lost if educational materials and supplies requested by MSM/IDUs are not provided.

Identify Seeds

Choosing the proper number and types of seeds will be highly dependent upon the information collected during formative assessment. During formative assessment, staff may also have the opportunity to identify people who would be good seeds. Though seed selection may occur during the formative assessment period, it can also happen through other methods just prior to implementing data collection.

1. Seed selection

a. Why is this question important?

Seeds are extremely important to IBBSS recruitment. Seeds are non-randomly selected members of the target population who initiate the RDS recruitment process. Seeds should be well connected (have large network sizes) to other members of the target population. The best seeds are those who understand the project, support its goals and objectives, and can accurately and enthusiastically persuade others to participate.

The appropriate number of seeds is dependent to some degree on local resources and other issues identified during formative assessment (e.g. presence of sub-populations), as well as the sample size. Seeds may be selected from Voluntary Counseling and Testing (VCT) sites, local organizations that work with the high-risk population (e.g. needle exchange program), or through contacts made by peer educators or social workers. Seeds recruited by peer educators or social workers may be recruited at popular public locations such as street corners, parks, bars and other sites.

b. Which questions should be asked?

Questions to ask key informants:

- Can you think of any MSM/IDUs who would make good seeds (who know a lot of other MSM/IDUS, speak well, are well-liked by their peers, and would be interested in our study goals)?
- How many of these types of MSM/IDUs can you identify for us?
- Can you think of MSM/IDUs who are diverse with respect to geographic location (not all MSM or IDUs who work/live in the same neighborhood), age, income, type (for MSM you want different types, such as street, karaoke and home based; for IDUs you want long term and short term injectors), etc.
- If we wanted to find MSM/IDUs for the study we are planning, what would be the best way to locate them? (e.g. through clinic staff, direct identification at SW/IDU locations, through NGOs)
- Do the MSM/IDUs have an association? Have any of the previous outreach programs used MSM to reach out to other MSM/IDUs? If yes, can you help us to contact these MSM/IDUs?
- When you do outreach, what contact do you have with establishment owners or other

authorities? The police? Have you had difficulties with getting access to MSM/IDUs because of any of these kinds of authorities?

Questions to ask target populations (keep in mind that those target population members who are willing to speak to you for formative research, may make good seeds):

Can you think of any MSM/IDUs who would make good seeds (who know a lot of other MSM/IDUS, speak well, are well liked by their peers, and would be interested in your study goals)?

- Would you describe yourself as having the characteristics of a good seed?
- How many of these types of MSM/IDUs can you identify for us?
- Can you think of other MSM/IDUs who are diverse with respect to geographic location (not all MSM or IDUs who work/live in the same neighborhood), age, income, type (for MSM you want different types, such as street, karaoke and home based; for IDUs you want long term and short term injectors), etc.
- If we wanted to find MSM/IDUs for the study we are planning, what would be the best way to locate them? (e.g. through clinic staff, direct identification at SW/IDU locations, through NGOs)
- Do the MSM/IDUs have an association? Have any of the previous outreach programs used MSM/IDUs to reach out to other MSM/IDUs? If yes, can you help us to contact these MSM/IDUs?

c. Which responses will tell me that RDS is appropriate?

Appropriate responses will depend on what is needed for your study. What you want to hear is that diverse seeds can be identified and are willing to participate in your study.

d. Problems that can arise if this question is not asked.

In one study, the seeds that were selected were not well-connected to their peers and did not understand the study goals. These seeds ended up not recruiting their peers and new seeds had to be selected two weeks after the study started. This ended up costing the project more money as they had to extend the study by two weeks.

In another study, seed diversity was overlooked. IDU females were not used as seeds although IDU females were eligible to participate in the study. Once the sample was gathered, no IDU females had been recruited into the study.

D. Other types of questions to understand your target population

1. Geographic understanding

a. Why is this question important?

Questions about geographic locations where the target population work and spend time could help in identifying seeds, interview sites, and in understanding MSM/IDUs better.

b. Which questions should be asked?

Questions to ask key informants:

Can you describe the areas where you and your team do outreach to MSM/IDUs? (May want to specify: direct establishments, bars/karaoke/restaurants, parks or other street locations.)

2. Types of sex work for MSM and injecting practices for IDUs

a. Why is this question important?

Questions about the types of MSM or injecting practices of IDUs could help in identifying seeds, developing the questionnaire and in understanding MSM/IDUs better.

b. Which questions should be asked?

- What are the different types of MSM (e.g., brothel, street, karaoke, home based)? What are the most prevalent types of SW? How do you define “direct” and “indirect” MSM? How do you tell if someone who works at an “indirect” establishment is a SW?
- Do you think the MSM who work at a venue also sometimes work outside the venue like at a street or in a park? Probe for the mobility of MSM both within and among cities. Is it common for someone to work in multiple sites? Within what period of time? Do MSM know people who work in different types of sites?
- Are their foreign (or other subpopulations) MSM living in this area? If so, do they comprise a large group? Do they speak the local language(s)?
- How much do the different types of MSM earn for sexual intercourse? For oral sex? For other types of sex?
- Are there different types of IDUs? If so, what are the different types of IDUs?

- Are their foreign IDUs (or other subpopulations) living in this area? If so, do they comprise a large group? Do they speak the local language(s)?
- Do you think IDUs move around the province? Probe for the mobility of IDUs both within and among cities. What are the reasons that IDUs are mobile?
- Do male and female IDUs know each other?

c. Which responses will tell me that RDS is appropriate?

Appropriate responses will depend on what is needed for your study. What you want to hear is that your interview site is equipped with the appropriate staff and that your seeds are adequate for your study needs.

d. Problems that can arise if this question is not asked.

In one study of MSM in Asia, deaf and foreign MSM showed up at the RDS interview site to participate in the study. However, no formative research had been conducted and the researchers did not know that these sub populations existed. The interview site was not equipped with interviewers who knew sign language/or how to communicate with the deaf MSM or who could speak the languages of the MSM from foreign countries. As a result, these important sub-populations could not participate in the study and important information about services and HIV risk factors were not collected from these MSM.

3. Clinic services

a. Why is this question important?

Some RDS studies will offer vouchers for clinic services. Questions about clinic services can help inform you about where to send MSM/IDUs for HIV VCT and STI services. These questions can also be useful for developing the questionnaire, study design and contents for your education materials packet.

b. Which questions should be asked?

Questions to ask key informants:

- Do you think MSM/IDUs have a lot of STIs and HIV? What do you think is the prevalence of STIs and HIV among MSM/IDUs in this area?
- Do you think certain types of MSM/IDUs are at more risk for STIs/HIV? Please

describe.

- Do your staff do outreach to MSM for education, condom distribution, or to encourage them to come to the clinic for screening? How often? What kinds of venues do you go to? (Probe for parks, other locations where street MSM spend time.)
- With the survey we are planning, we want to make sure that the places and times are convenient for MSM to attend for interviews. What are the normal working hours here? Do MSM find it easy to get here on public transport? Would staff be able to work at this site in the evenings for about a two-month period? If MSM prefer not to come to a clinic, do you have other suggestions for a convenient location where interviews and specimen collections could be done?
- How feasible would staffing be for that kind of location?
- We plan to collect oral fluid for HIV testing and urine for STI testing in the upcoming survey. Where do you usually send lab specimens? What are your usual systems for storing, processing, and transporting specimens?

Questions to ask members of the target population:

- Do you think MSM/IDUs have a lot of STIs and HIV? What do you think is the prevalence of STIs and HIV among MSM/IDUs in this area?
- Do you think certain types of MSM/IDUs are at more risk for STIs/HIV? Please describe.
- Do you know where you can go to get a confidential HIV test and results? STI exam and results?
- Have you ever had an HIV test/STI exam? If so, where? Did you get your results? Did you get treatment? How did the staff treat you? Did the staff know you were a SW/IDU?
- Would you be willing to go to _____ if we gave you a voucher for a free HIV test/STI exam? Why or why not?

c. Which responses will tell me that RDS is appropriate?

Appropriate responses will depend on what is needed for your study.

d. Problems that can arise if these questions are not asked.

- referral sites)? Do you think you will be comfortable sharing the same clinic with clients for interview? Do you think the clients will be comfortable?
 - If part of the survey includes taking an HIV test, how likely do you think it is that your friends would join? What about you?
 - What if we also ask you and your friends to screen for other STIs?
- c. Which responses will tell me that RDS is appropriate?
Appropriate responses will depend on the design of your study.
- d. Problems that can arise if these questions are not asked.

By not asking these questions, you may design your study in a manner that is not acceptable to the target population. You may find out that the target population will not attend a study that requires a biological specimen or that conducts an STI exam.

Or, you may find that your target population will be willing to provide biological specimens when it was believed they would not. This happened in an African country during a study of males with high risk behaviors. The public health authorities strongly believed that this population would not attend a study that took blood (finger prick) from them for HIV testing. Despite numerous “authorities” claiming that having a biological component to the RDS study would not work, the RDS research team held focus groups to ask members of the target population. Information from the focus groups indicated that these men would be very interested in having the HIV test and many of them would also be interested in receiving their HIV results. The RDS study was redesigned with a biological component and has a high percentage of participants providing blood spots and many of these men receiving HIV information and test results.

Formative IBBSS Assessment with MSM

In-depth Interview Guide

DESCRIBE PURPOSE OF STUDY, HIGHLIGHTING ITS LINKAGE WITH THE 2009 IBBSS, AND SOLICITING COOPERATION FOR BOTH ACTIVITIES. ASSURE OF CONFIDENTIALITY, ADMINISTER CONSENT, AND CREATE COMFORTABLE ATMOSPHERE. DESCRIBE ORGANIZATION OF DISCUSSION AROUND CORE ISSUES AND THAT THE ENTIRE DISCUSSION SHOULD LAST LESS THAN 2 HRS.

THIS GUIDE WILL BE USED TO EXPLORE OPERATIONAL ISSUES RELATED TO DATA COLLECTION USING RDS (I.E., WILLINGNESS TO RECRUIT, SIZE OF PERSONAL NETWORKS, INCENTIVE LEVELS, TIME OF OPERATIONS, MIXING ACROSS SUB-GROUPS, AND AVOIDING DUPLICATION OF RESPONDENTS)

1. Can you tell me what you do on a typical weekday during the day? And during the evening?
2. Can you tell me what you do on a typical Saturday or Sunday day time? And in the evenings? FREE LIST ALL THE ACTIVITIES AND WAIT FOR CUES FROM THEIR RESPONSES WHICH COULD BE A GOOD LINKAGE TO MSM ACTIVITIES.
3. Where do MSM principally live/stay? With whom? Are there any special patterns of residence?

PROBE FOR ORDINARY RESSIDENCE, BROTHELS, STREET, ETC:

- a. What parts of town (MENTION) can we find the street-based MSM? Other types of MSM? PROBE FOR TYPES OF MSM. [GET SPECIFIC LOCATIONS. OBTAIN/PRODUCE MAP?]
4. Please think about this next question very carefully and take your time. About how many other people do you personally know who are also MSM? By personally knowing them, I mean you know them by name and they also know your name.
5. Where do you usually meet these friends? How often do you usually meet/see them? How do you usually meet them (i.e., transport? Do you have to travel far or are you all in the same areas)?
- 6a Where do MSM typically meet to socialize or hook up? Is there connection between MSM and IDUs? Do you know people who inject in galleries? [PROBE WHAT IS THE RELATIONSHIP BETWEEN PEOPLE WHO MEET IN DIFFERENT PLACES? ARE THESE DIFFERENT GROUPS NETWORKED AMONGST THEMSELVES AS WELL AS ACROSS GROUPS?]
- 6b. How many people do you know, and they know you, you know their name and they know yours, who are also MSM (HAVE HAD SEX WITH ANOTHER MAN IN THE PAST ONE YEAR), who used to live or work here but moved out [PROBE FOR] one month ago, three months ago, six months ago?

[SAY TO THE RESPONDENT:] Let me tell you a little more about the study that will be starting in a few months. We are inviting people who have sex with men to participate in a study. This would require you to come to a study site and a professional interviewer will conduct a one-on-one interview with you. The interviewer will ask you questions about HIV knowledge, and your sexual and other practices. It would take about an hour and a half for the whole study. We are not going to collect any names and interviews will be held in a private room one-on-one with an interviewer. There will also be HIV testing (which will be completely private) as part of the study.

3. Do you think people would be willing to participate in this study?
4. What would prevent people from coming to the study?
5. What kind of MSM may not want to do this study?
6. We want to make sure that the place where we do the study is comfortable and accessible for people. What area of town would be easiest for MSM to get to? Are there parts of town that MSM would not feel comfortable going to?
7. After the study, we would ask participants to recruit other people who are also MSM. These must be friends; they cannot be strangers. You would get a small reimbursement for successfully recruiting your friends. How likely do you think you would recruit others? How many people do you think you can actually recruit into the study?
8. What would prevent people from recruiting friends who are MSM?
9. What are the best days of the week and best times of the day to do the data collection so that it will be most convenient for people?
10. Would MSM be interested in attending health services for men (i.e., a male friendly clinic that offers services to high-risk men including HIV and STI testing)?
11. Sometimes people pretend to be MSM so that they can also participate in the study. How can I tell if someone is really MSM or not? Are there questions that I might be able to ask to see if she/he is really MSM or not? Maybe there are some things that someone who does not have sex with men would not know? Can you think of anything like that?

Materials

EXPLAIN PURPOSE OF THIS SECTION BY SAYING: You will be given coupons which you will use to recruit other MSM.

16. Do you have a preference of what color these coupons should be? These coupons are about the size of _____, do you think they should be smaller or larger?
17. What kinds of information do you think we should put on the coupons?
18. Do you think a map on the coupon will be helpful for finding the interview site? PROBE FOR REASONS.
19. We would like to offer educational materials/supplies to MSM who participate in the study. What health topics are of most interest to MSM?
20. Do you think MSM will review written materials on these subjects?
21. Do you think MSM be interested in receiving free condoms?
22. Is there anything else about which MSM would want to receive information?

Acceptability of IBBSS-RDS

DESCRIBE YOUR RDS STUDY PROCEDURES, THEN ASK:

23. How likely do you think MSM would be to join a project like this? What sounds most interesting about this project? What sounds least interesting about this project?
24. How likely do you think it is that you could recruit your friends?
25. How many coupons out of three do you think you can give to your friends and your friends would actually show up?
26. What do you think would prevent your friends from coming to see us?
27. If part of the survey includes taking an HIV test, how likely do you think it is that your friends would join? What about you?
28. What if we also ask you and your friends to screen for other STIs?

Clinic services

29. Do you think MSM are at higher risk for STI's? Do most MSM know they are at higher risk? Would they be interested in receiving additional services outside HIV testing?
30. Are certain types of MSM more at risk for STIs/HIV? PROBE.
31. Do you know where you can go to get a confidential HIV test and results? STI exam and results?
32. Have you ever had an HIV test/STI exam? If so, where? Did you get your results? Did you get treatment? How did the staff treat you? Did the staff know you were a MSM?
33. Would you be willing to go to [NAME SITE] if we gave you a voucher for a free HIV test/STI exam? Why or why not?

THANK PARTICIPANT FOR TIME AND INVITE THEM TO MAKE ANY COMMENTS ON THE INTERVIEW OR SURVEY AND OFFER TO ADDRESS THEM TO THE BEST OF YOUR ABILITY. NOTE TIME OF CLOSE.

Formative IBBSS Assessment with MSM

Key Informant Interview Guide

(For Use with Community Leaders, Outreach Persons)

We would like to start our recruitment with some MSM who are highly networked and influential within their own communities. Can you think of any MSM who would make good participants for our survey? (i.e., who know a lot of other MSM, speak well, are well-liked by their peers, and would be interested in our study goals)?

Geographic understanding

1. Is there an active MSM/IDU population in this city? Do the MSM/IDUs have an association? PROBE FOR MEMBERSHIP.
2. Can you describe the areas where MSM pick up clients? Can you describe the areas where IDUs inject, buy drugs, or spend time? (MAY WANT TO SPECIFY: DIRECT ESTABLISHMENTS, BARS/KARAOKE/RESTAURANTS, PARKS OR OTHER STREET LOCATIONS)
3. If we wanted to find MSM for the study we are planning, what would be the best way to locate them? (e.g. through clinic staff, direct identification at injecting locations, through NGOs?) PROBE FOR FINDING SEEDS.
4. [FOR OUTREACH INFORMANTS] When you do outreach to MSM, what contact do you have with establishment owners or other authorities? The police? Have you had difficulties with getting access to MSM because of any of these kinds of authorities?
5. [FOR OUTREACH INFORMANTS] Can you describe the areas where you and your team do outreach to MSM? (MAY WANT TO SPECIFY: DIRECT ESTABLISHMENTS, BARS/KARAOKE/RESTAURANTS, PARKS OR OTHER STREET LOCATIONS.

[ALL KEY INFORMANTS] Are there other places in this area where MSM hang out?

IBBSS Logistics

6. About how much would you expect their transport to the interview site to cost? (BASE INCENTIVE LEVEL ON COST FOR TRANSPORTATION).
7. Do you think that [INSERT NAIRA AMOUNT] is sufficient to encourage MSM to participate in our study (our study includes an interview and a biological specimen, and could take up to one hour to complete)?
8. [IF YOU DO NOT HAVE AN INTERVIEW SITE SELECTED, THEN ASK]:

- Where do you think would be a location for an accessible, comfortable place for MSM to go to participate in a study?
- How many sites do you think are necessary for a city/town of this size? If more than one site is suggested, where do you think these sites should be located?
- What are the characteristics of an interview site (somewhere will you will be interviewed and have blood taken) that would make it most comfortable?

THANK PARTICIPANT FOR TIME AND INVITE THEM TO MAKE ANY COMMENTS ON THE INTERVIEW OR SURVEY AND OFFER TO ADDRESS THEM TO THE BEST OF YOUR ABILITY. NOTE TIME OF CLOSE.

Formative IBBSS Assessment with MSM

Focus Group Discussion

DESCRIBE PURPOSE OF STUDY, HIGHLIGHTING ITS LINKAGE WITH THE 2009 IBBSS, AND SOLICITING COOPERATION FOR BOTH ACTIVITIES. ASSURE OF CONFIDENTIALITY, ADMINISTER CONSENT, AND CREATE COMFORTABLE ATMOSPHERE. DESCRIBE ORGANIZATION OF DISCUSSION AROUND CORE ISSUES AND THAT THE ENTIRE DISCUSSION SHOULD LAST LESS THAN 2 HRS.

THIS GUIDE WILL BE USED TO EXPLORE OPERATIONAL ISSUES RELATED TO DATA COLLECTION USING RDS (I.E., WILLINGNESS TO RECRUIT, SIZE OF PERSONAL NETWORKS, INCENTIVE LEVELS, TIME OF OPERATIONS, MIXING ACROSS SUB-GROUPS, AND AVOIDING DUPLICATION OF RESPONDENTS)

1. [FUNNEL THE QUESTIONS – I.E. FLAG OFF WITH GENERAL QUESTIONS, LEADING TO THE SPECIFIC ONES YOU WILL ASK BELOW, TO MAINTAIN RAPPORT AND NOT TO CREATE DISCOMFORT AMONG PARTICIPANTS – THEN ASK] Can you tell me what MSM do on a typical weekday during the day? And during the evening?
2. Can you tell me what MSM do on a typical Saturday or Sunday day time? And in the evenings? FREE LIST ALL ACTIVITIES, WAIT FOR CUES FROM THEIR RESPONSES WHICH COULD BE A GOOD LINKAGE TO MSM ACTIVITIES. PROBE.
3. Where do MSM principally live/stay? With whom? Are there any special patterns of residence?

PROBE FOR ORDINARY RESSIDENCE, BROTHELS, STREET, ETC:

- a. What parts of town (MENTION) can we find the street-based MSM? Other types of MSM? PROBE FOR TYPES OF MSM. [GET SPECIFIC LOCATIONS. OBTAIN/PRODUCE MAP?]
4. Where do MSM usually meet their friends? How often do they usually meet/see? How do they usually meet them (i.e., transport? Do they have to travel far or are they all in the same areas)? PROBE FOR PROXIMITY AND DISTANCE.

5. Where do MSM typically meet to socialize or hook up? Is there connection between MSM and IDUs? Do you know people who inject in galleries? [PROBE FOR THE RELATIONSHIP BETWEEN PEOPLE WHO MEET IN DIFFERENT PLACES? ARE THESE DIFFERENT GROUPS NETWORKED AMONGST THEMSELVES AS WELL AS ACROSS GROUPS?]

[SAY TO THE GROUP:] Let me tell you a little more about the study that will be starting in a few months. We are inviting people who have sex with men to participate in a study. This would require you to come to a study site and a professional interviewer will conduct a one-on-one interview with you. The interviewer will ask you questions about HIV knowledge, and your sexual and other practices. It would take about an hour and a half for the whole study. We are not going to collect any names and interviews will be held in a private room one-on-one with an interviewer. There will also be HIV testing (which will be completely private) as part of the study.

6. Do you think people would be willing to participate in this study?
7. What would prevent people from coming to the study?
8. What kind of MSM may not want to do this study?
9. We want to make sure that the place where we do the study is comfortable and accessible for people. What area of town would be easiest for MSM like yourselves to get to? Are there certain parts of town that MSM would not feel comfortable going to?
10. After the study, we would ask participants to recruit other people who are also MSM. These must be friends; they cannot be strangers. You would get a small reimbursement for successfully recruiting your friends. How likely do you think you would recruit others? How many people do you think you can actually recruit into the study?
11. What would prevent people from recruiting friends who are MSM?
12. What are the best days of the week and best times of the day to do the data collection so that it will be most convenient for people?
13. How willing would people be to participate in another paid study? How willing are people to be screened for STIs (blood, swab etc)? What would the appropriate compensation be? PROBE: Would they be willing to do this within a week of the IBBSS? How far are people willing to travel for these services? Is it feasible to have people go immediately after they participate in the IBBSS?

14. Sometimes people pretend to be MSM so that they can also participate in the study. How can I tell if someone is really MSM or not? Are there questions that I might be able to ask to see if she/he is really MSM or not? Maybe there are some things that someone who does not have sex with men would not know? Can you think of anything like that?
15. In your view, do MSM move in and out frequently from this area, whether temporarily or permanently? PROBE FOR REASONS, PATTERNS, SEASONALITY OF MOVEMENTS.
16. SAY: To clarify your answers to the questions on movement, could you give me an idea of how many MSM in this area identify themselves as gay men? PROBE FOR THE DIFFERENT WAYS OF DEFINING THEIR SEXUALITY. PROBE FOR DIFFERENT TERMINOLOGIES FOR THE DIFFERENT TYPES OF GAY MEN.

IBBSS Materials

EXPLAIN PURPOSE OF THIS SECTION BY SAYING: You will be given coupons which you will use to recruit other MSM.

18. Do you have a preference of what color these coupons should be? These coupons are about the size of _____, do you think they should be smaller or larger?
19. What kinds of information do you think we should put on the coupons?
20. Do you think a map on the coupon will be helpful for finding the interview site? PROBE FOR REASONS.
21. We would like to offer educational materials/supplies to MSM who participate in the study. What health topics are of most interest to MSM?
22. Do you think MSM will review written materials on these subjects?
23. Do you think MSM be interested in receiving free condoms? Is there anything else about which MSM would want to receive information?

Acceptability of IBBSS-RDS

DESCRIBE YOUR RDS STUDY PROCEDURES, THEN ASK:

24. How likely do you think MSM would be to join a project like this? What sounds most interesting about this project? What sounds least interesting about this project?
25. How likely do you think it is that you could recruit your friends?
26. How many coupons out of three do you think you can give to your friends and your

friends would actually show up?

27. What do you think would prevent your friends from coming to see us?
28. If part of the survey includes taking an HIV test, how likely do you think it is that your friends would join? What about you?
29. What if we also ask you and your friends to screen for other STIs?

Clinic services

30. Do you think MSM are at higher risk for STI's? Do most MSM know they are at higher risk? Would they be interested in receiving additional services outside HIV testing?
31. Are certain types of MSM at more risk for STIs/HIV than others? PROBE FOR TYPES OF MSM AGAIN AND FOR DISTRIBUTION OF RISK AMONG SUB-POPULATIONS.
32. Do you know where MSM can go to get a confidential HIV test and results? STI exam and results?
33. Would MSM be willing to go to [NAME SITE] if we gave them a voucher for a free HIV test/STI exam? Why or why not?

THANK PARTICIPANTS FOR TIME AND INVITE THEM TO MAKE ANY COMMENTS ON THE INTERVIEW OR SURVEY AND OFFER TO ADDRESS THEM TO THE BEST OF YOUR ABILITY. NOTE TIME OF CLOSE.

Formative IBBSS Assessment with MSM

Observation Checklist

The core professional requirement for use of this instrument by the field staff is explicit awareness of one's environment. The events to be observed are organized around 10 basic dimensions of the current pre-assessment, viz.:

1. Geographic spread.
2. Networking dynamics, including target population size, formation patterns, density and mobility through time and space.
3. IBBSS logistics, which include selection of interview or referral sites and other operational concerns.
4. Educational materials and supplies that may be needed for the IBBSS
5. Seed selection issues
6. MSM sex practices
7. IDU injecting practices
8. Clinic services
9. Acceptability of IBBSS-RDS
10. Security

Information on these core issues will not only help operational processes of the 2009 IBBSS but will also produce help contextualize the IBBSS results. For this reason, you should:

1. Observe for places where events occur or relevant activities take place;
2. Note the acts, actions, activities, and actors;
3. Identify the nature of feelings or type of emotions attached to what you are observing by those you are observing;
4. Describe the objects in use for the interactions;
5. Describe the goals people have for engaging in the observed activity;
6. Identify existing patterns, that transform simple actions into events; and
7. Pay close attention to the time during which the interactions occur. Note variations, transitions, terminations.

Geographical spread

- Is there an active MSM/IDU population in this city? How does it operate? How is it spread across the city?
- Can you describe the areas where MSM pick up clients? How are clients spread out across the city? Can you describe the areas where IDUs inject, buy drugs, or spend time?
- What are the hot spots for MSM and IDU activities?

Network dynamics (size, mobility and density)

- In your view, do MSM/IDUs move in and out frequently from this area, whether temporarily or permanently? How can you tell?

IBBSS Logistics

- Transport cost to the interview sites for MSM and IDUs? Would that amount be enough to encourage MSM/IDUs to participate in the IBBSS (given its interview and biological specimen components)?
- Would MSM/IDUs feel comfortable coming to selected site for interview? What are the most convenient times of the day for MSM/IDUs to go to an interview site to participate in a study? Why do think so?
- Which days of the week do you think MSM/IDUs would be most likely to go to an interview site to participate in a study? Why do you think so?
- Do you think IDUs and MSM would be willing to be interviewed at the same interview site if this were the only site? Why do you think so?

Types of sex work for MSM/injecting practices for IDUs

IT MAY NOT BE REALISTIC TO EXPECT THAT YOU WILL OBSERVE THESE WITHIN THE SHORT PERIOD YOU HAVE TO SPEND IN THE FIELD, BUT JUST KEEP AN EYE OUT.

- Describe different types of MSM (brothel, street, karaoke, home based. Do you think the MSM who work at a venue also sometimes work outside the venue like at a street or in a park? Is it common for someone to work in multiple sites?
- Are there foreign (or other subpopulations) MSM living in this area? If so, do they comprise a large group? Do they speak the local language(s)?
comprise a large group? Do they speak the local language(s)?
- Are there foreign IDUs (or other subpopulations) living in this area? If so, do they comprise a large group? Do they speak the local language(s)? Do you think IDUs move around the city? Why do you think so?

Acceptability of IBBSS-RDS

- Will MSM/IDUs join a project like this? Why do you think do? PROVIDE REFLECTIONS.

Technical Committee

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