

SEXUALLY TRANSMITTED INFECTIONS

British men who pay for sex have many (unpaid) sexual partners

Often young professionals, with a taste for binge drinking and recreational drugs

[The prevalence of, and factors associated with, paying for sex among men resident in Britain: findings from the third National Survey of Sexual Attitudes and Lifestyles (Natsal-3) Online First doi 10.1136/sextrans-2014-051683]

[*Linked editorial*: The role of men who pay for sex in STI transmission: current knowledge and future directions. The contribution of the third UK National Survey of Sexual Attitudes and Lifestyles (Natsal-3) Online First doi 10.1136/sextrans-2014-051784]

British men who pay for sex tend to have high numbers of unpaid sexual partners, putting them at heightened risk of both acquiring and passing on sexually transmitted infections, finds research published online in the journal ***Sexually Transmitted Infections***.

And those who paid for sex within the past five years are often young, single professionals, with a taste for binge drinking and recreational drugs, the findings show.

The researchers base their findings on a detailed analysis of data from the third National Survey of Sexual Attitudes and Lifestyles (Natsal-3), carried out between 2010 and 2012.

Natsal is run every 10 years, and includes a representative sample of men and women resident in Britain and aged between 16 and 74.

The current study focused on the responses of 6108 men to questions about paid-for sex, to find out more about the behaviour and profile of those who pay for sex and their risk of, and potential role in, the transmission of sexually transmitted infections.

More than one in 10 (11%) of the men said they had paid for sex at some point in their adult lives; 3.6% said they had done so within the previous five years; and just over 1% said they had done so within the preceding 12 months.

Although 55-64 year olds were most likely to say they had ever paid for sex, those aged between 25 and 34 were most likely to have done so within the past five years, and they were three times more likely to have done so than 16 to 24 year olds.

Paying for sex was associated with reporting twice as many lifetime sexual partners as the general population average across all age groups, but relatively few of these were paid for.

Among men who paid for sex, just one in five lifetime sexual partners was paid for, overall, ranging from around one in eight among 16-24 year olds to one in four among those aged 65-74.

Paying for sex within the past five years was associated with being single, having a managerial/professional job, binge drinking and using recreational drugs other than cannabis.

And men who reported at least five sexual partners in the past five years were much more likely to have paid for sex (16% of them) than men who reported a maximum of two sexual partners during this time (1%).

Similarly, men who said they had had paid sex outside the UK, found sexual partners online, or who had concurrent or overlapping partners, were more likely to have paid for sex.

Almost two thirds of those (62.6%) who had paid for sex had done so outside the UK, with Europe and Asia the most popular destinations. By contrast, large numbers of men who had not paid for sex also had sex abroad—but predominantly in North America and Australasia.

Compared with other men, those who had paid for sex within the past five years were around twice as likely to say they had been diagnosed with a sexually transmitted infection, visited a sexual health clinic, or been tested for HIV.

“The evidence strongly supports the idea that these men are a bridge for disassortative [dissimilar] sexual mixing and for the spread of [sexually transmitted infections],” write the researchers.

In an accompanying podcast, lead author, Mr Kyle Jones, makes the point that while paying for sex may not itself be a risk factor for sexually transmitted infections, it may none the less be a marker for sexually risky behaviour.

In a linked editorial, Professor Sonia Dias, of the Institute of Hygiene and Tropical Medicine at the University of Lisbon in Portugal, emphasises: “The evidence that men paying for sex report high numbers of partners, including foreign partners outside the UK, and are more likely to report STI diagnoses, supports that they are a key population to be targeted.”

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Linked editorial

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