

Misrepresentation on the Internet and in real life about sex and HIV: A study of Latino men who have sex with men

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Abstract

Experiences of men who have internet sex with men were studied to determine the level of misrepresentation in real life and on the Internet of physical, relationship, sexual interests, and HIV status. An internet-based questionnaire in English and Spanish (\$20 compensation) recruited 1,026 Latino MSM over 3 weeks. Four 'fib' scales were created to measure misrepresentation by the respondent and to the respondent on the Internet and IRL. Overall, respondents rated being misrepresented to on the Internet significantly highest, followed by being misrepresented to IRL and misrepresenting themselves to others on the Internet, and misrepresenting themselves to others IRL lowest. For HIV status there were no differences between Internet and IRL misrepresentation by others and Internet and IRL misrepresentation by self, but a significant difference between HIV status misrepresentation by self and others. Misrepresenters were more likely to have had cybersex before meeting their last partner and to prefer cybersex, to be more sexually compulsive, and to speak and think more in Spanish. Social desirability considerations account for the higher misrepresentation on physical characteristics and sexual interests by others, and higher misrepresentation on the Internet. However, misrepresentation of HIV status was the lowest category and while it was misrepresented more often by others than self, there were no internet/IRL differences. Data suggest that HIV misrepresentation occurred for 20% of men and was lower than other forms of misrepresentation. Implications for HIV prevention are discussed, along with the concept of levels of accuracy in internet communications.

Keywords: *Misrepresentation, Internet, Latino men*

Introduction

Anecdotal evidence suggests that the Internet is a site where misrepresentation of self, whether physical characteristics, age, or even gender, is not uncommon where seeking partners and interacting sexually is concerned. Where sexual situations are involved, with higher stakes and personal involvement, and 'hot' rather than 'cold' cognitions (Ross and

Ferreira-Pinto 2000), the higher arousal may increase the possibility of misrepresentation to secure the desired outcome. Men who have Sex with Men (MSM) are probably no different to other groups in the use of misrepresentation, deception in order to attain sex, companionship, passion and perhaps, love. As an oppressed group, individuals have a long history of adopting code names, personas and terminology, minimizing their sexual identities (e.g., straight-acting), engaging in anonymous sex (where information disclosure is minimized to protect the identities of participants), and even of deceiving doctors about how they acquired sexually transmitted infections (STIs) in order to protect themselves from possible shame, reprimand, and prosecution (Ross 1984). Wherever homosexuality was or still is stigmatized, such misrepresentation clearly serves a useful purpose in protecting MSM from negative consequences.

During the post-Stonewall, pre-internet era, as gay communities became more visible in cities across the USA, the practice of providing false first names and phone numbers to partners, to promise to phone a partner following a one-night stand, to ignore STIs, to misrepresent one's relationship status, and one's intentions continued (see for example, Rechy 1963). In 1981, when AIDS was first identified within the gay community, this broader culture of deception and misrepresentation may help explain why some men also started misrepresenting their health and HIV status, while others had their anonymity stripped by the visible stigmata of AIDS-related disease. While lies, deceit, falsehoods, fibs, half-truths, minimizations, dissimulation, denial, and inaccuracy—practices we collectively term 'misrepresentation' but which may cover a range from deliberate misrepresentation to minimal economy with the truth—may be universal, they may also have culturally- and situationally-specific components.

Latino culture is, according to Rafaelli and Ontai (2004), characterized by strong gender role divisions and an emphasis on family relations and childbearing. For Latino gay men, Díaz (1998) notes that silence is a major approach to dealing with homosexuality within the family and that a disassociation of sexual thoughts and feelings decreases the likelihood of accurate self-observation within the sexual domain. Furthermore, in Latin culture, the priority to spare a person pain may take precedence over needlessly exposing the truth. David (1996) indicates that in many situations, 'yes' (with varying degrees of hesitation) can mean 'no' so as to spare the embarrassment of a direct refusal. In Latin societies, possibly to protect complex notions of machismo and gender stratification, and because of shame and stigma surrounding homosexuality, there may be complex and varying barriers to the enactment of safer sex. Díaz (1998) notes that these may lead to a gap between intention and action. Specific to male-male sexual relations, the stigma of being the receptive partner may lead many Latino men, regardless of their actual sexual practices, to present themselves publicly as 'tops' and thus, 'heterosexual.' As in other cultures, Latino MSM may have complex cultural and personal reasons to misrepresent themselves about sex, romance and love. Further, it may be that the Internet itself may have many of the characteristics of a community or subculture, which themselves interact with or modify IRL cultures (Ross 2005).

Anecdotally, Men who use the Internet to seek Sex with other Men (MISM) report that Internet communication is rife with deception or inaccuracy (Ford 1998; Ross *et al.* 2004).¹ Certainly, technology appears to influence misrepresentation, although questionnaire studies to date appear to indicate the relationship may be opposite to that commonly perceived. Thus, studies comparing responses to pen-and-paper surveys with computer-based interviewing show that the latter produces most honest and reliable answers about sexual risk behaviour (Turner *et al.* 1998).

Hancock, Thom-Santelli and Ritchie (2004) report that in diaries of social interactions of US college students for the past week where lies were noted, participants lied most on the telephone (37%), least in email (14%), and that lie rates for face-to-face (27%) and instant messaging (21%) were intermediate. They speculate that this is somewhat consistent with the social distance hypothesis, in that people will choose less rich media when engaging in deception, to minimize the discomfort associated with lying. While the Hancock *et al.* (2004) study examined everyday interactions and lies with family, friends and acquaintances, we wondered about the frequency of misrepresentation in online and offline communication related to sex, intimacy, romance and health communication between men. Specifically, we were interested in studying how misrepresentation may relate to HIV risk behaviour, and in investigating reports of men misrepresenting their HIV status online.

Thus, as part of a wider study investigating Latino HIV risk and the Internet, we studied the role of misrepresentation in sexual liaisons between men. We had three hypotheses: (i) consistent with a social desirability hypothesis, across all domains, participants would report a higher frequency of being misrepresented to, than misrepresenting themselves to others; (ii) that if the Internet impacts misrepresentation, a consistent difference across common areas of misrepresentation should be found between sexual liaisons communicated online from those conducted offline (e.g., in real life); (iii) that if the Internet influences misrepresentation related to HIV risk, then participants should report a significantly lower prevalence of misrepresentation (both misrepresenting oneself and being misrepresented to) in online than offline relationships about HIV. We use the word 'lying' here only in the context of reporting on research that has previously used that term. In discussing the phenomenon, we prefer the term misrepresentation to cover the spectrum of degrees of inaccuracy.

Method

Participants

Participants in the MINTS study were all Internet-using Latino MSM, recruited via banner advertisements placed on Gay.com, the largest website catering to gay men in the USA. Gay.com has both sexually-oriented and non-sexually-oriented parts to its site as well as chat rooms in both English and Spanish. To be eligible for our study, participants needed to click six buttons indicating that they had not previously taken the survey, and that they were male, Latino, 18 years or older, a man who has had sex (defined as any kind of sexual contact) with at least one other man, and were a resident in the USA (regardless of legal status). Participants resided in all states and territories—including the District of Columbia and zip codes for military in Europe and the Pacific—excepting Vermont, Virgin Islands, Non-Hawaiian Pacific Islands, and the Atlantic Military zip code. As shown in Table 1, the MINTS study sample of Latino MSM approximated the 2000 US Census for Latinos on key characteristics.

This study was conducted as part of a larger HIV prevention study of Internet-using Latino MSM. To study this population's experience of misrepresentation online and offline, we studied six misrepresentations. These include identity (name/phone number), body (e.g., age, shape), genitals (e.g., penis size), context (e.g., seeking casual sex or a relationship), preferred sexual behaviour (e.g., being a 'top'), HIV status, and other ('please specify'). In order to study the impact of the Internet on misrepresentation, we repeated questions asking about communication with a man 'on the Internet' and 'in real life, not on

Table 1. Demographic Characteristics of Internet sample as compared with Hispanics living in the USA (US Census, 2000).

	Internet (N=1026)		US Census Hispanic Pop. (N=35,300,000)	
	N	%	N*	%
1. Region of Residence				
Northeast	125	12.4	5,254,087	14.8
Midwest	171	17.0	3,124,532	8.8
South	328	32.7	11,586,696	32.8
West	379	37.7	15,340,503	43.4
Puerto Rico + Military**	23	N/A		
2. Latino Ethnicity				
Mexican,	570	55.9	21,607,506	62.6
Puerto Rican	146	14.3	3,465,784	10.1
Cuban	47	4.6	1,236,511	3.6
Other	253	24.8	8,164,639	28.4
Central American				4.8
South American				3.8
Dominican				2.2
Spaniard				0.3
All other Hispanic				17.3
2. Race				
One Race	733	89.1	33,081	93.7
White	347	42.5	16,907	47.9
American Indian	30	3.7	407	1.2
Asian American	7	0.9	120	0.3
Black/African American	17	2.1	710	2.0
Hawaiian or Pacific Islander	2	0.2	45	0.1
Other	330	40.4	14,891	42.2
Biracial or multiracial	83	10.2	2,224	6.3

* × 1000. ** Military zip code.

the Internet'. Because we thought direct investigation of participants' misrepresentation would lead to under-reporting because of social desirability bias to be perceived as a truthful person, we decided to ask participants first about their experience of being misrepresented to (online and offline), and then about their experience of misrepresenting themselves to others (online and offline). Similarly, because we could find no literature on quantifying the frequency of misrepresentation in sexual liaisons, we decided to investigate by asking 'which of the following, if any, has ever happened to you when...'. In this way, a 2 (online/offline) × 2 (misrepresentation of self/being misrepresented to) matrix of six questions each was developed to investigate the frequency of misrepresentation in online liaisons (Table 2). To investigate the relationship between misrepresenting oneself/being misrepresented to and unsafe sex, unsafe sexual behaviour was defined as the number of men in the last 3 and 12 months with whom one had engaged in unprotected anal intercourse.

Measures

Four 'Fib' scales were constructed from the same seven items, referring to 'You' or 'He' in their direction (see Table 2). Two related to deception by the respondent on the Internet (MeFib) and IRL (MeFibIRL), and two to other men they have had contact with on the

Table 2. Deception when meeting men for sex on Internet and In Real Life (%).

	HeFib	HeFibIRL	MeFib	MeFibIRL
Variable:				
Gave false name or phone number	57.1	34.1	64.6	42.1
Did not tell truth about some aspect of body (e.g., age, physical shape)	75.3	28.8	38.8	15.5
Did not tell the truth about his penis or genital size	56.4	31.3	25.2	12.7
Did not tell the truth about what wanted (e.g., casual sex or relationship)	52.2	42.2	27.3	20.7
Did not tell the truth about what liked sexually (being a 'top', age of desirable partner)	40.8	32.4	23.2	16.3
Did not tell the truth about HIV status	20.4	20.6	8.5	7.3
Other (current relationship status)	16.5	9.9	6.8	4.2

Internet (HeFib) and IRL (HeFibIRL). The stem read ‘Some men may “misrepresent” themselves when meeting other men for sex. Please indicate which of the following, if any, has happened to you when you communicated with a man (*on the Internet* or *in real life* (*not on the Internet*), as appropriate’. For Self, the stem was ‘Have YOU ever, (*on the Internet*, or *in real life*, *not on the Internet*), as appropriate’. Scales were summed for any of the responses scored ‘yes’, with a maximum score of 7 and minimum of 0 possible. The ‘other’ response usually referred to people being deceptive about their current relationship status (claiming to be single when they were in fact partnered). Coleman, Miner, Ohlerking, and Raymond’s (2001) measure of compulsive sexual behaviour was also included. Analysis consisted of calculation of frequencies, means, SDs, paired *t*-tests between scales, and Pearson correlation coefficients.

Bilingual and internet translation

For this bilingual study, survey items were initially developed in English then forward and back translated into Spanish. Pilot testing was conducted to establish test-retest and bilingual equivalency. Internet-friendliness was determined by having our Webmaster, and an investigator specializing in web-human factors design, adapt an offline draft into an internet-appropriate format. Both ‘black box’ de-bugging (attempts to complete or break the study blind to the computer program) and ‘white box’ de-bugging (forward and back testing of the computerized survey with knowledge of program branches) were conducted.

Participants could skip any question by clicking a ‘refuse to answer’ option. After respondents had completed each screen, the program would check for missed responses and give participants the opportunity to complete the page before the data were automatically forwarded to our server and the next screen presented. Most subjects took between 20 and 40 minutes to complete the 455-item survey; most completed it in one sitting. Twice daily, the database was downloaded from the receiving server to the research site.

Procedure

Banner advertisements for the study were placed on Gay.com in both Spanish and English (‘University of Minnesota. Latino Men’s Internet Sex Study, Click here and earn \$20’). By

clicking on the advertisement, prospective participants were portalled to the study website. The opening screen welcomed participants in both languages and required participants to continue by clicking either 'Continua en Español' or 'Continue in English'. Both buttons were equivalently displayed. Eligibility was assessed by having prospective participants click 'yes/no' to each of the six eligibility criteria. The next screen outlined the purpose of the study, participant compensation, and the affiliations and qualifications of the researchers.

Informed consent was obtained using a 'chunked' consent procedure approved by the University of Minnesota Institutional Review Board. The five major elements of informed consent (study description, risks and benefits, confidentiality, no deception, and information on how to contact the researchers) were presented separately, at the end of which participants could click either a 'consent' or a 'do not consent' button. Also provided were links to information about confidentiality, an option to browse the study without participating, and information on how to contact the investigators prior to participation. Enrollees then completed a form indicating their preferred payment option (e-money, conventional check, donation to a named charity, or decline payment). A unique subject number for each participant was created using computer generated randomization of the subjects' zip code and date of birth. A downloadable confirmation page summarized the person's eligibility, documented the subject number, and confirmed the preferred method of payment.

Over a 3-week period, 47,495,771 advertising impressions yielded 33,024 (0.07%) clicks to our website and 1,742 (5%) enrollments in the study. The de-duplication protocol identified 196 (11%) surveys as invalid (Konstan, Rosser, Ross, Stanton and Edwards 2005). Of the remaining 1,546 (89%) surveys, 520 (34%) were incomplete, leaving 1,026 (66%) surveys deemed valid and completed by unique persons to comprise the study sample. Of these, 161 (16%) completed the survey in Spanish and 865 (84%) in English.

Results

The frequency of misrepresentation on and off the Internet is reported in Figure 1. Ranked by frequency, the most common misrepresentation appears to be the communication of a false name and/or phone number (49% across conditions), followed by body (39.4), genital size (31.4), casual sex versus looking for a relationship (35.6%), sexual behaviour preferences (28.1%), HIV status (14.2%), and other misrepresentations (9.3%). In all, 898 of 1018 participants (88%) reported being misrepresented to (the word used in the questionnaire) on the Internet, 639 of 988 participants (65%) being misrepresented to in real life, 782 of 1017 (77%) misrepresenting themselves to another man on the Internet and 527 of 1002 (53%) misrepresenting themselves to another man in real life. Across the four domains, all but 53 of 977 (94%) participants reported at least one experience of misrepresentation, confirming the perception of misrepresentation in sexual negotiation to be nearly universal.

Confirming the first hypothesis, with the exception of giving someone a false name and phone number, on all items respondents said they were more likely to have been misrepresented to than to misrepresent themselves, both on the internet ($t=8.1$, $r=0.32$, $p=0.000$) or in real life ($t=12.4$, $r=0.49$, $p=0.000$). Confirming the second hypothesis, participants consistently reported a higher frequency of misrepresenting themselves ($t=7.1$, $r=0.58$, $p=0.000$) and being misrepresented to ($t=8.7$, $r=0.55$, $p=0.000$) on the Internet than in conventional liaisons; however the difference between reporting others as having misrepresented themselves to them in real life and participant's own admission of

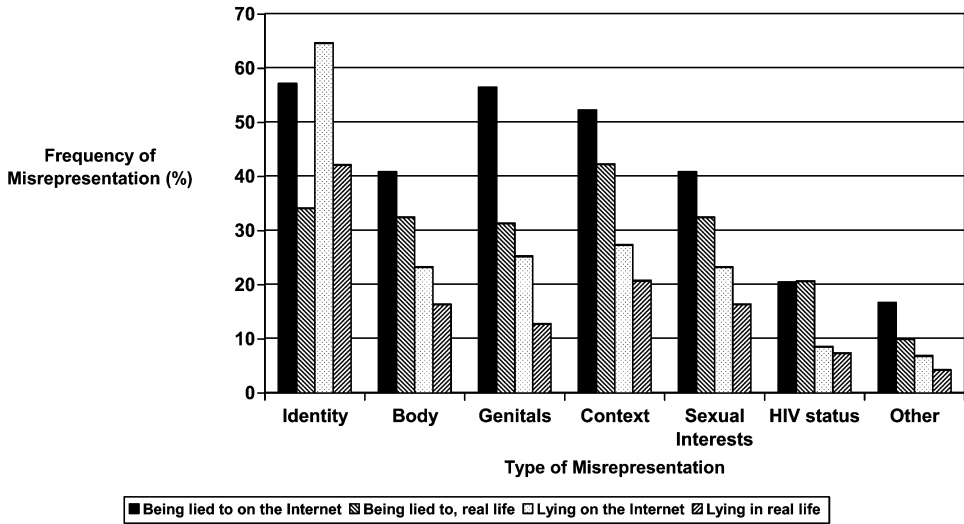


Figure 1. Misrepresentation On and Off the Internet (N=1,026 Internet using Latino MSM).

misrepresentation on the Internet was not significantly different ($t=0.9, r=0.28, p=0.35, df=1545$).

Regarding misrepresentation of HIV status, similar rates of misrepresenting oneself to others on the Internet (8.5%) and in real life (7.3%) and being misrepresented to on the Internet (20.4%) and in real life (20.6%) were reported ($\chi^2=0.78, df=1, p=0.38$).

Finally, we investigated the relationship between misrepresentation and unsafe sex; however no significant correlation was found, either for unsafe sexual behaviour at three months, 12 months, or ever. Means suggest that other men were reported as being deceptive about 2.7 of six items on the Internet and 1.6 IRL, the respondents as being deceptive about 1.5 items on the Internet and 0.9 IRL.

In Table 2, in addition to false name or phone number, the most consistent deception was reported regarding age or physical shape, genital dimensions, and the sort of relationship wanted, with the largest discrepancies occurring between what other men said on the Internet versus IRL. However, it was consistently reported that 20% had other men misrepresent themselves both IRL and on the Internet about their HIV status, whereas 8% of respondents indicated they had misrepresented themselves both on the Internet and IRL about this. Table 3 illustrates variables distinguishing those high and low on the MeFib scale. Those higher in reported deception were less likely to reveal their HIV status, more likely to have had cybersex before meeting IRL, less likely to be proficient in English and more likely to think in Spanish, and more likely to report ambivalence about their sexual orientation (including making excuses) on items from the Compulsive Sexual Behavior Inventory (Coleman *et al.* 2001).

Discussion

These data should be interpreted with several caveats. First, the questions did not set a specific timeframe but referred to a total experience, which may overestimate the item response frequency, especially for older participants in comparison to younger ones. Further, the MeFib measure refers to one person, whereas the HeFib measure refers to

Table 3. Variables distinguishing those high and low on the MeFib Scale.

	Low %	High %	p
Viewing websites for relationships and sex (yes)	77.8	66.3	0.02
I found out his HIV status (yes)	68.0	55.1	0.02
I revealed my HIV status (yes)	68.5	56.0	0.02
We had cybersex before we met (yes)	14.3	25.9	0.01
		Means	
Language you think in (1=Spanish, 5=English)	4.1	3.8	0.04
How well do you speak English (1=very well, 4=do not)	1.1	1.3	0.04
Hours online/week for personal activities	9.5	6.4	0.01
Liking Cybersex: perceived anonymity and safety scale ¹	16.4	19.5	0.00
Compulsive Sexual Behavior Scale ² (1=very frequently, 5=never):			
Trouble controlling sexual urges	3.3	2.9	0.00
Felt guilty or shameful about sexual behaviour	3.5	3.1	0.00
Concealed or hidden sexual behaviour	3.0	2.4	0.00
Made pledges or promises to alter sexual behaviour	3.8	3.3	0.00
Thoughts or behaviours interfered with friendships	3.9	3.4	0.00
Developed excuses to justify sexual behavior	3.9	3.3	0.00
Had more sex or masturbated more than wanted to	3.4	2.9	0.00

Notes: ¹Ross, Rosser and Stanton, 2004. ²Coleman *et al.*, 2001.

potentially multiple others. However, as the misrepresentations occur in interactions, not necessarily as an individual property, the number of interactions in which a person may have misrepresented themselves is the critical figure, not the number of individuals. Second, the median year that respondents had reported first using the Internet was 1996, which presumably means that misrepresentation on the Internet could only have occurred since the first time a participant went online, while misrepresentation in real life may have occurred from time of first sexual experience. This would seem to bias any comparisons in favour of higher rates in real life and for others, since most of the sample had been sexually active before 1996. Third, it should be noted that all reports of being misrepresented to reflect participants' subjective impressions. While some questions could be confirmed or refuted based on empirical or personal evidence (e.g., body shape, 'phone number, genital size), alternate explanations for misrepresentation may include genuine miscommunication, and in the case of some variables (casual sex versus looking to date or for a relationship), a misrepresentation (e.g., a post-sexual excuse of really only looking for casual sex) may mask other more negative evaluations of the person or the experience (e.g., I am looking for a relationship but this person is not the right one). The data on misrepresentation about HIV status must also be considered within the demographic characteristics of the sample. Only 50 (5%) participants reported being HIV positive, 12 (1%) were unsure, 10 (1%) preferred not to answer the question, and the rest (954 or 94%) described themselves as HIV negative. Since HIV positive persons may have more incentive to misrepresent their health status than HIV negative persons, the low response rates to lying about HIV status may be partially explained by the low proportion of HIV positive persons in the study. Finally, Ross, Rosser, Stanton and Konstan (2004) note the dropout bias in this sample bias toward those in monogamous relationships but that there are few other dropout-related Internet or demographic variables that might skew these data.

With these provisos, this study has produced some interesting findings. Clearly, at least among sexually active, Internet-using Latino MSM, the experience of misrepresentation in sexual liaisons appears almost universal. Certainly, more minor misrepresentation (which

might be termed 'fibbing' or 'white lies') seems the norm, with the majority of this online sample reporting having misrepresented some aspect of their identity, as well as having been misrepresented to in return. Especially on the Internet, being misrepresented to about identity characteristics (name), genital size, and what persons were looking for in a sexual liaison or romance was reported by the majority of participants answering each of these questions. This confirms anecdotal reports of misrepresentation being more common on the Internet.

However, of major importance to HIV prevention, the more serious the misrepresentation, the lower the likelihood of misrepresentation, with HIV status being reported as the least frequent misrepresentation across all four categories. Conversely, those who misrepresent their HIV status were also less likely to reveal anything else about themselves, which is consistent with more closeted persons having greater difficulty disclosing their HIV status.

The association of lower levels of English (compared with Spanish) may point to those who are less acculturated linguistically being more closely associated with traditional values. Those who admitted misrepresenting themselves on the Internet on the MeFib scale were more likely to have significantly higher scores on a number of items on the Compulsive Sexual Behavior Inventory, suggesting that deception may be associated with mechanisms of compulsive sexual behaviour (Coleman, 1991). Individuals lacking control over sexual fantasies or drives may more likely to misrepresent themselves in order to have cybersex or to meet IRL. They may also have negative or ambivalent feelings about their homosexual behaviour, as individuals with compulsive sexual behaviour are often guilty and shameful about their sexual behaviour however act out compulsively as a mechanism of mood regulation (Raymond, Coleman and Miner, 2003). Those who admitted misrepresenting themselves on the Internet about more things reported almost double the prevalence of cybersex before meeting in real life. This may indicate that cybersex is associated with more inaccuracy, particularly if there was initially no intention to meet in real life. Alternatively, this may simply represent a new generation of MSM: those who conduct their lives on the Internet and hence may be more likely to misrepresent themselves because that is where they spend their time interacting with others.

As this sample was entirely Latino, we have no comparison with any other cultural group. Thus, we cannot draw any conclusions about Latino MSM in the USA from these data. However, it must also be recognized that culture will almost certainly provide a filter within which any behaviour can be understood, and these data do suggest that the Internet may also constitute a subculture which may modify values, practices and beliefs compared with real life.

Against the stereotype that everyone misrepresents themselves on the Internet about everything, the data in this study are consistent with people reporting misrepresentation in more minor matters and truthfulness in more major matters. This would also explain why men feel freer to misrepresent themselves on the Internet in personal interactions, but in scientific studies feel freer to tell the truth (Turner *et al.*, 1998). If so, our study points to the importance of all research establishing credibility with participants in order to ensure valid responses.

In contrast to the findings of Hancock *et al.* (2004) reported above, there was a significantly higher level of reported deception in sexual negotiations via the Internet compared with sexual negotiations in real life. At least four factors may contribute to this finding. First, on the Internet handles are commonly used instead of real names. The high figures reported for giving and receiving false names may simply reflect Internet culture.

Second, with sexual interactions one is dealing with a 'hot' cognitive situation often involving arousal (Ross and Ferreira-Pinto, 2000); the influence of arousal and sexual response should not be underestimated. Under conditions of sexual arousal, reality may be distorted in favour of fantasy or pleasure. Third, the goal in internet-based and real life sexual negotiations may be subtly different: in internet-based negotiations, the primary goal is to successfully negotiate a face-to-face meeting, whereas in real life sexual negotiations, the negotiation may more often be the final word. Thus, on the Internet, one can misrepresent or withhold information preferring to disclose the truth upon meeting in person. This would seem to explain why otherwise obvious misrepresentations (penis size, age, and preferred sexual behaviours) are more common when the persons are more distal, and conversely, that humans may reveal the most intimate of secrets to others when close. Fourth, the Internet in many ways mirrors what Humpheys (1970) terms an ambiguous space (referring to public restrooms), which at one-and-the-same-time affords the anonymity of a public space (e.g., chatrooms), with the alluring potential for intimacy and closeness of private space (e.g., private discussions). Since there is always the opportunity of not meeting, or easily terminating the contact by not responding, it may simply be easier to misrepresent oneself online, or even consider it part of the thrill of sexual negotiation.

Finally, these data raise the broader question as to what constitutes misrepresentation, and whether it may be conceptualized differently on the Internet and IRL. With interval-level data such as linear measurement, to what extent does a 'vanity variation' become a serious misrepresentation? If a person is 40 and represents themselves as 39, is that a misrepresentation compared with indicating they are 35 or 30? What is the acceptable standard deviation around a description, and when is it considered a serious misrepresentation to the point of 'lying' and is more latitude given for vanity variation on the Internet? It may be more helpful think of this phenomenon as being degrees of inaccuracy, rather than serious misrepresentation. This may explain why binary categories such as HIV status (positive or negative) are less reported as being lied about. However, there is still a question of degree of accuracy: is an HIV status reported as negative based on a test a few years ago more of a misrepresentation than one reported as negative based on a test a few months ago? All these questions require further study.

In conclusion, these data suggest that in sexual situations, possibly more frequently in those including a degree of arousal, different processes may be operating compared with deception in other social situations. Here, there is a higher degree of deception operating compared with equivalent IRL situations, with others being seen as being much less accurate than oneself. However, the long-term frequency of deception is relatively low and related to the potential seriousness of the deception, although important data on meaning, prevalence, site and context of deception, which would assist considerably in the interpretation of these findings, are unavailable and should be the subject of further research.

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Note

1. A standard joke is that to get the real statistics 'add 10 years and 50 pounds, and subtract 3 inches'.

References

- Coleman, E. (1991) Compulsive sexual behavior: New concepts and treatments. *Journal of Psychology and Human Sexuality*, 4, 37–52.
- Coleman, E., Miner, M., Ohlerking, F. and Raymond, N. (2001) The Compulsive Sexual Behavior Inventory: A preliminary study of reliability and validity. *Journal of Sex and Marital Therapy*, 27, 325–332.
- David, E. (1996) *Gay Mexico: An insider's guide* (San Francisco, CA: Orchid House).
- Díaz, R. M. (1998) *Latino gay men and HIV: Culture, sexuality and risk behavior* (New York: Routledge).
- Ford, M. T. (1998) Cyberslut. In *Alex Baldwin doesn't love me* (Los Angeles, CA: Alyson), pp. 141–147.
- Hancock, J. T., Thom-Santelli, J. and Ritchie, T. (2004) Deception and design: The impact of communication technology on lying behavior. *CHI*, 6, 130–136.
- Humphreys, R. A. L. (1970) *Tearoom trade: A study of impersonal sex in public places* (London: Duckworth).
- Konstan, J. A., Rosser, B. R. S., Ross, M. W., Stanton, J. and Edwards, W. M. (2005) The story of Subject Naught: A cautionary but optimistic tale of internet survey research. *Journal of Computer-Mediated Communication*, 10(2), article 11, available at: <http://jcmc.indiana.edu/vol10/issue2/konstan.html>.
- Rafaelli, M. and Ontai, L. L. (2004) Gender socialization in Latino/a families: Results from two retrospective studies. *Sex Roles*, 50, 287–299.
- Raymond, N. C., Coleman, E. and Miner, M. (2003) Psychiatric comorbidity and compulsive/impulsive traits in compulsive sexual behavior. *Comprehensive Psychiatry*, 44, 370–380.
- Rechy, J. (1963) *City of Night* (New York: Grove Press).
- Ross, M. W. (1984) Social and psychological predictors of STD infection in homosexual men: a study of four countries. *British Journal of Venereal Diseases*, 60, 110–113.
- Ross, M. W. (2005) Typing, doing and being: Sexuality and the Internet. *Journal of Sex Research*, 42, in press.
- Ross, M. W. and Ferreira-Pinto, J. (2000) Toward a public health of situations: The re-contextualization of risk. *Cadernos de Saúde Pública*, 16, 59–71.
- Ross, M. W., Månsson, S.-A. and Tikkanen, R. (2000) Differences between internet samples and conventional samples of men who have sex with men: Implications for research and HIV interventions. *Social Science and Medicine*, 51, 749–758.
- Ross, M. W., Rosser, B. R. S., Stanton, J. and Konstan, J. (2004) Characteristics of Latino men who have sex with men on the Internet who complete and drop out of an Internet-based sexual behavior survey. *AIDS Education and Prevention*, 16, 526–537.
- Turner, C. F., Ku, L., Rogers, S. M., Lindberg, L. D., Pleck, J. H. and Sonenstein, F. L. (1998) Adolescent sexual behavior, drug use, and violence: Increased reporting with computer survey technology. *Science*, 280, 867–873.

Résumé

Les expériences des hommes qui ont des rapports sexuels avec des hommes via Internet ont été étudiées afin d'évaluer les niveaux des fausses représentations, dans la vie réelle et sur Internet, sur les caractéristiques physiques, les relations, les goûts sexuels et le statut sérologique. Diffusé en anglais et en espagnol sur Internet, un questionnaire a permis de recueillir les réponses de 1026 hommes d'origine hispanique et ayant des rapports sexuels avec des hommes (en échange, une indemnité de 20 \$ leur a été versée). Quatre « échelles de fib » ont été élaborées pour mesurer les fausses représentations formulées ou reçues par les répondants, sur Internet et dans la vie réelle. Dans l'ensemble, les répondants classent, de manière significative et comme étant les plus courantes, les fausses représentations qu'ils reçoivent sur Internet ; ensuite, ils placent au même niveau les fausses représentations qui leur sont adressées dans la vie réelle et celles qui émanent d'eux-mêmes sur Internet ; les fausses représentations d'eux-mêmes qu'ils adressent à d'autres hommes dans la vie réelle viennent en dernier. Concernant les fausses représentations sur le statut sérologique,

qu'elles soient formulées sur Internet ou dans la vie réelle, aussi bien par d'autres hommes que par les répondants, aucune différence n'apparaît. En revanche, une différence significative apparaît entre celles qui sont formulées par les répondants et celles qui le sont par d'autres hommes, aussi bien sur Internet que dans la vie réelle. Les répondants qui communiquent de fausses représentations sont plus susceptibles d'avoir eu des rapports sexuels virtuels avant de rencontrer leurs derniers partenaires, d'avoir une préférence pour le cybersexe, d'être moins sexuellement compulsifs, de parler et de penser en espagnol. Des considérations relatives à la désirabilité sociale justifient un niveau plus élevé de fausses représentations par les autres hommes sur les caractéristiques physiques et les goûts sexuels, et d'une manière plus générale sur Internet. Cependant, la fausse représentation du statut sérologique est la catégorie la plus faiblement classée, et tandis qu'elle est plus fréquemment formulée par les autres hommes que par les répondants, aucune différence Internet/vie réelle ne ressort de l'étude. Les données suggèrent que des fausses représentations relatives au VIH concernent 20 % des hommes interrogés et sont plus faiblement classées que d'autres types de fausses représentations. Les implications de ces résultats dans la prévention du VIH sont discutées, de même que le concept des niveaux de précision dans les communications via Internet.

Resumen

Para poder determinar en qué medida se tergiversan en la vida real y en Internet los intereses físicos, sexuales y de relaciones y la condición de seropositivo, se llevó a cabo un estudio sobre las experiencias sexuales que tienen los hombres a través de Internet con otros compañeros del mismo sexo. Se capturaron 1026 hombres de origen latinoamericano que usan Internet para tener relaciones sexuales con otros hombres (fueron gratificados con \$20) para un estudio, tipo cuestionario en inglés y español, a través de Internet de 3 semanas de duración. Se crearon cuatro escalas "de engaño" para medir en qué medida los entrevistados se presentaban a los demás de forma engañosa en Internet y en la vida real, y en qué medida les pasó lo mismo a ellos. En general, los entrevistados dieron una puntuación muy alta en cuanto a recibir presentaciones engañosas en Internet, seguido de recibir presentaciones engañosas en la vida real, presentarse ellos mismos de forma engañosa frente a otros en Internet, y por último presentarse ellos mismos de forma engañosa frente a otros en la vida real. En la manera en la que los entrevistados y las otras personas informan sobre su condición de seropositivo no se observaron diferencias en cuanto al lugar donde se da esta información, es decir, en Internet o en la vida real. Sin embargo, en este campo hubo una diferencia significativa entre el grupo de los entrevistados y el de las otras personas. Las personas que dieron información engañosa sobre sí mismas eran las que con más probabilidad habían tenido cibersexe antes de encontrarse con su último compañero y preferían el cibersexe, eran menos compulsivos sexualmente y tendían a hablar y pensar más en español. Las consideraciones sociales con respecto al deseo explican el nivel alto de información engañosa sobre características e intereses sexuales por otros y el mayor grado de información engañosa en Internet. Sin embargo, la información engañosa sobre la condición de seropositivo fue la de menor categoría y aunque las otras personas engañaban más que los entrevistados, no se observaron diferencias entre Internet y la vida real. Los datos indican que el 20% de hombres dio información engañosa sobre VIH, un porcentaje menor que para otros tipos de tergiversación. Se exponen las implicaciones para la prevención de VIH y se analiza el concepto del nivel de precisión de la información dada por Internet.