

Regional differences in STI testing barriers among online testers in British Columbia, Canada



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Introduction

- **GetCheckedOnline** (GCO) is an online sexuallytransmitted infection (STI) testing service in British Columbia (BC)
- First launched in Vancouver, GCO has expanded to two health regions across BC (Island Health Authority and Interior Health Authority), including smaller urban and rural communities
- GCO is known to reduce STI testing barriers, however these barriers may differ across regions given a lower availability of existing STI services outside of Vancouver

Methods

- From June 2015 March 2019, GCO testers were invited to participate in an online, anonymous survey
- We used a multi-level framework to assess STI testing barriers and facilitators related to:
 - individual-level factors (e.g., embarrassment to test)
 - factors related to interacting with healthcare providers (e.g., comfort discussing sexual health)
- clinic level factors (e.g., distance, hours), and
- social and structural level factors (e.g., peer norms)
- Bivariate analyses comparing Vancouver survey respondents with those in Interior and those in Island were conducted using chi-square, Fisher's exact, and t-tests; significant results (p<0.01) are shown

Objective

To determine whether STI testing barriers reported by GCO clients differ across regions

Results

- Of all 783 completed surveys with valid postal code or city of residence, 400 (51%) were completed by Vancouver respondents, 270 (35%) by Island respondents, and 113 (14%) by Interior respondents
- Being a repeat tester was reported by 336 respondents in Vancouver, 221 in Island, and 86 in Interior

Figure: Framework for assessing STI testing barriers

Individual

Interaction with health care provider

Clinic characteristics

Social and structural

Table: Selected demographics and STI testing barriers and facilitators, June 2015-March 2019 (BOLD: significantly different from Vancouver, p<0.01)

Client Characteristic	Vancouver N=400	Island N=270	Interior n=113
Women	38%	43%	63%
Men who have sex with men	43%	30%	19%
White	70%	84%	79%
Completed university	64%	46%	35%
Full-time employed	69%	57%	55%
Income ≥\$80,000	69%	57%	55%
Born in Canada	70%	86%	90%
First test	9%	18%	24%
Reason for last test: Routine test New relationship Tested after event or exposure	63% 24% 27%	45% 31% 32%	33% 34% 32%
Empowerment – Agreed that: Testing is one way I can take charge of my sexual health. Comfortable discussing sexual history with any HCP	97% 72%	95% 66%	93% 65%
Worried about judgment from HCP when providing sexual history	31%	36%	35%
Importance of anonymous testing	33%	34%	40%
Reason delayed testing (restricted to repeat testers): Didn't know where to go Needed an appointment Wait was too long Clinic wasn't open Distance to clinic	13% 49% 48% 33% 15%	10% 38% 30% 27% 16%	14% 36% 38% 23% 11%
Stigma – Agreed that:			
It is very embarrassing for me to test for an STI or HIV I would feel ashamed if someone I knew found out I tested for an STI or HIV	14% 17%	18% 20%	15% 23%
I would feel guilty if I were diagnosed with an STI or HIV	61%	61%	69%
Social norms – Agreed that: Among my peers, people regularly get tested for an STI or HIV	60%	50%	40%

Conclusions

- Our findings suggest that testing barriers faced by GCO clients may be similar across regional health authorities in BC
- More respondents from outside Vancouver reported testing for the first time through GCO and fewer reported testing because of routine practice
- Despite the apparently wider availability of in-person sexual health services in Vancouver, clinic-level barriers in accessing these services may persist
- Regional differences reflect opportunities for testing and service promotion (e.g., addressing testing social norms vs. addressing clinic access issues)
- Stratification by key characteristics may help explain these differences (e.g., MSM vs. non-MSM; first-time vs. repeat testers)
- Further research among people who have never completed testing and those who have not tested through GCO may help to contextualize these findings

For more information:











Results have been updated since abstract acceptance.

