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Impact of a Nurse Cyber-Outreach Program for Sex Workers and Patrons, and Appeal of Internet-Based Testing in this Population

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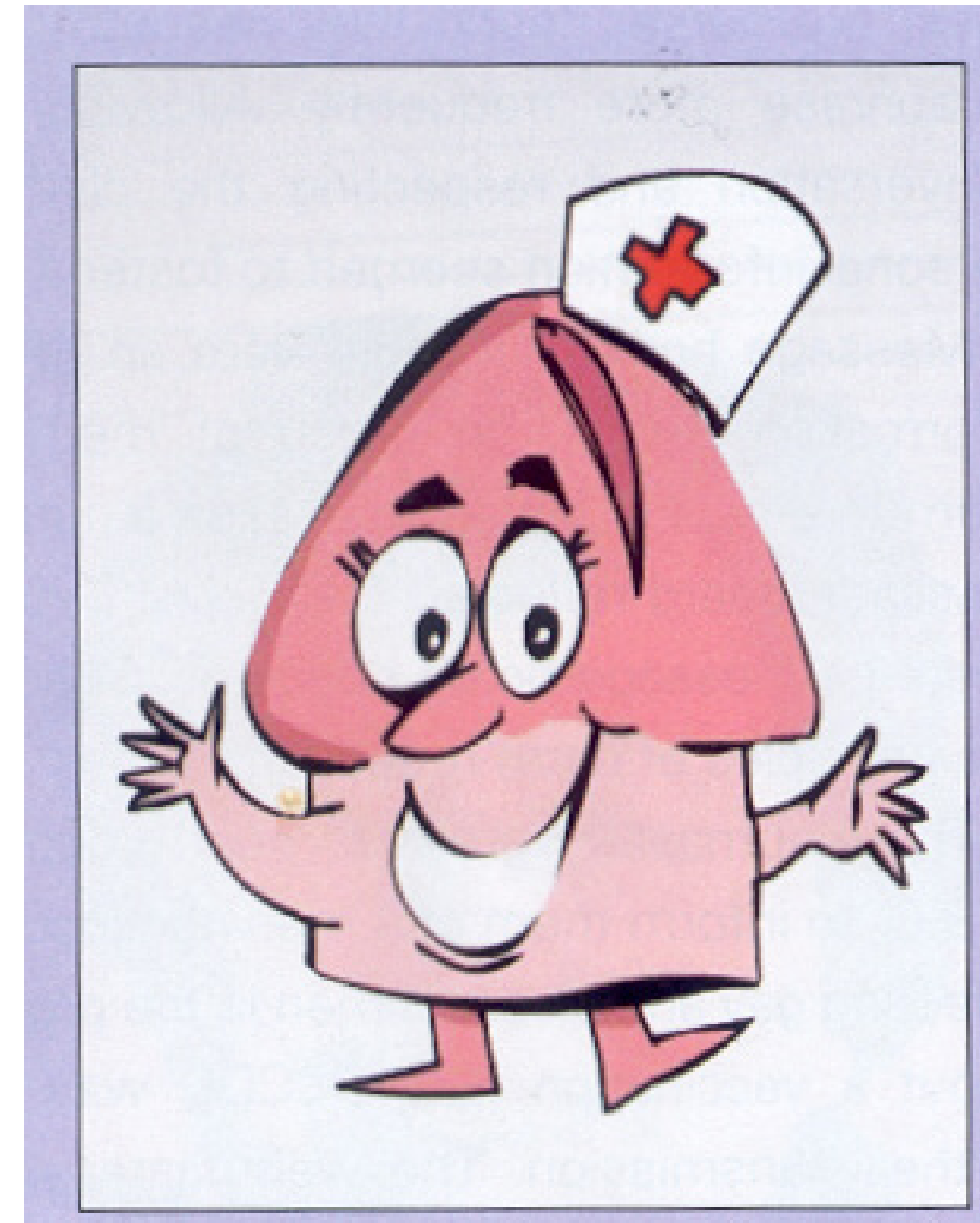


BACKGROUND

The internet offers a unique opportunity to reach persons at risk for HIV and other sexually transmitted diseases (STD), including those who may not otherwise seek sexual health information or services. A rapidly growing inventory of internet-based sexual health interventions includes STD/HIV testing, partner notification, educational websites, and outreach in the form of one-on-one messaging (“private chat”), broadcast messaging, and facilitated discussion on existing sexual/social networking, dating, and “cruising” websites.¹

As part of its STD and HIV nursing outreach program, the British Columbia Centre for Disease Control (BCCDC) has delivered comprehensive sexual health information to various online communities since 2004. This cyber-outreach service reaches thousands of clients per year through peer-to-peer websites targeting sex workers and their patrons, gay men and other men who have sex with men, and youth.²

The BCCDC is currently expanding its internet-based sexual health services by integrating outreach nursing with a new sexual health website, as well as offering online access to STD and HIV testing.³ Understanding the needs of clients of existing online services will inform this service expansion.



Cyber-outreach nurse profile image

OBJECTIVE

To evaluate satisfaction, knowledge and behavior change, and sexual health-related needs of clients of BCCDC cyber-outreach services, through an anonymous web-based survey on one local website used by sex workers and patrons.

METHODS

- **Recruitment:** Survey participants were recruited through periodic invitations posted by an outreach nurse to a bulletin board on the site. Respondents were re-directed to a separate site where they completed a brief, anonymous survey.
- **Instrument:** Questions elicited both close-ended/quantitative outcomes as well as open-ended/qualitative feedback about the service.

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In 2011, nurses reached **270 clients** through private messaging and countless more through the health information forum on the website.

A total of **99** valid surveys were received during April-July 2011.

Variable (number of valid responses*)	%
Place of residence (n=71)	
British Columbia	83
Elsewhere in Canada	18
Age, years (n=83)	
19-24	7
25-34	23
35-44	23
45-54	29
55-64	12
65	6
Self-described gender (n=83)	
Female	18
Male	82
Self-described gender of partners (n=80)	
Among females (n=14):	
Male	50
Male and female	50
Among males (n=66):	
Male	3
Female	85
Male and female	6
Female and transgender or transsexual	6
Patron of sex worker† (n=73)	70
Sex worker† (n=78)	17

Note.

* Excluding missing or non-interpretable entries.

† Patron/sex worker defined as having given/received money, drugs, goods, or services in exchange for sex in previous six months; 96% (49/51) of patrons were male, and 92% (12/13) of sex workers were female.

Use of cyber-outreach services:

- 30% talked with a nurse by private message (16% talked ≥ twice)
- 94% visited the health information forum on the site (92% ≥ twice)
- 52% posted a question or comment on the forum (36% ≥ twice)

Satisfaction with cyber-outreach services:

- 98% said the service was somewhat or very important
- 98% said the service was somewhat or very useful

Qualitative comments revealed a high level of satisfaction with the service. Many cyber-outreach clients rely heavily upon this service for sexual health information:

“I think this service is VERY important, especially in an escort community. Not only to field private and public questions, but to also present up-to-date, accurate sexual health information to dispel any myths regarding sexual health concerns”

“Even though remote diagnosis is usually impossible, the information and follow-on readings provided are lighthouses that guide us through the treacherous ocean of information out there. In particular, this service helps us find the good information and, in general, raises the level of awareness of STDs, which is very important for such a forum. I wish the service could be expanded to have a presence in similar forums and boards.”

RESULTS

Salient features of nurse cyber-outreach service:

- Several survey respondents commented on the value of anonymity in this service.

“It’s very helpful to have access to qualified healthcare practitioners while keeping anonymity.”

“It is another place to get accurate, pertinent health information in an anonymous way. The same could be argued for the Internet in general but how accurate does one know the info to be?”

- Clients also emphasized the value of online access to trusted, expert sexual health professionals.

“The Health Nurse knows when to calm people down who are just being paranoid and when to recommend that they go in to see a doctor... I think it’s important for people engaged in risky sexual activity to have a place to ask questions or seek help if they are too uncomfortable or not ready to go in to see a doctor.”

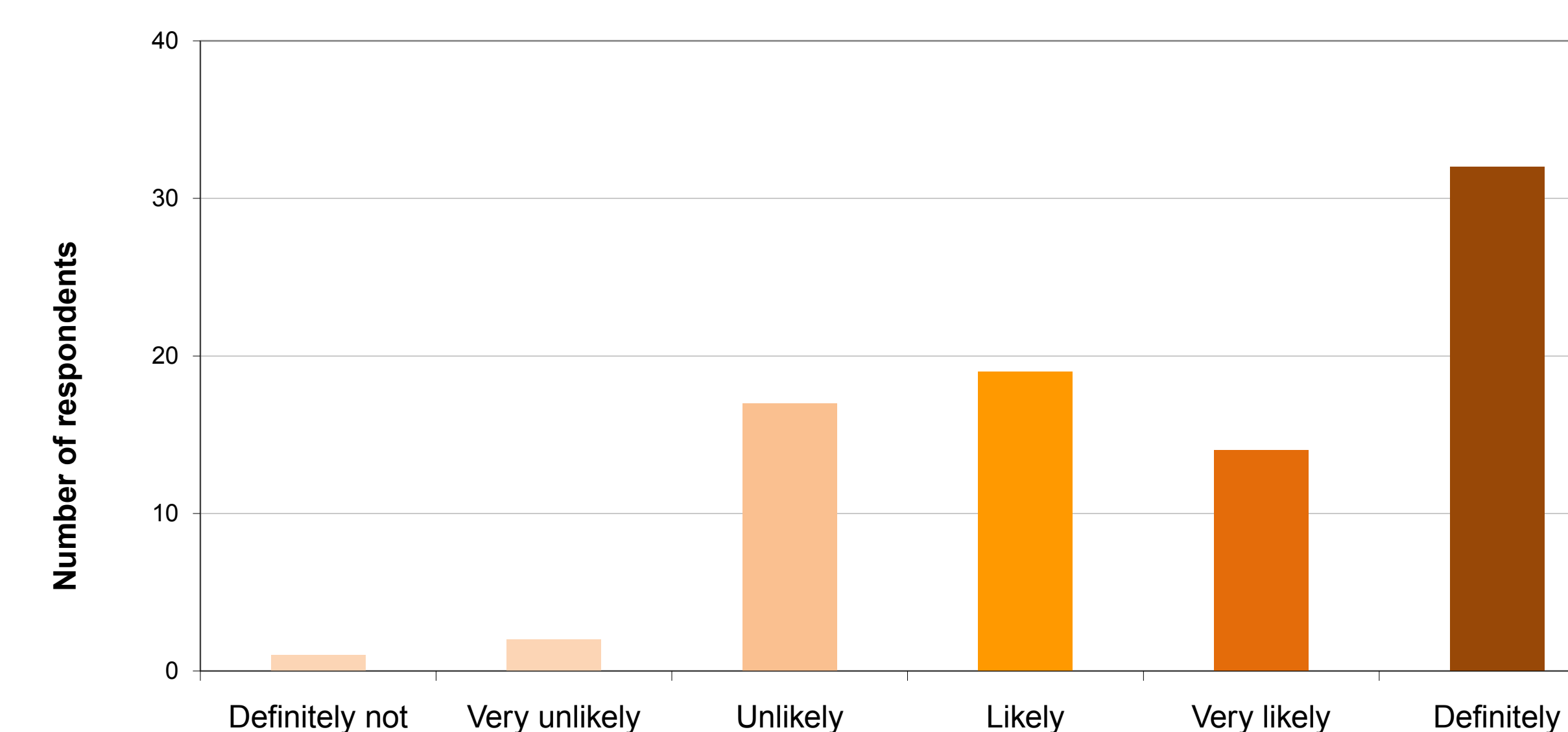
Knowledge and behavior change:

- 91% agreed that their knowledge of sexual health increased after using the service
- Respondents were asked about STD/HIV testing practices—or intention to test—after using this service:
 - Among those who **chatted one-on-one** with a nurse, 61% had tested or intended to test
 - Among those who visited the **bulletin board**, 42% had tested or intended to test

Needs assessment:

- 67% had not looked for sexual health information on any other websites in the previous 6 months.
- When asked to name one piece of sexual health information respondents had been unable to find online, a wide array of topics were elicited. The most common theme was wanting information about the likelihood (or “risk”) of acquiring various STDs with specific sexual behaviors (including kissing, touching, and oral sex).
- 74% had a health care provider whom they routinely see for health concerns, but **only 49% felt comfortable** talking about sexual health with this provider.

Intention to use internet-based STD/HIV testing‡



Intention to use internet-based STD/HIV testing showed no variation by:

- Age,
- Gender, or
- Access to health care provider

~75% of respondents consistently showed interest in the proposed service.

‡ “If you could print a lab requisition from a website, take it to a lab for STD/HIV testing, and get your results online, how likely would you be to use the service?”

Note: The British Columbia internet-based STD/HIV testing service is described elsewhere.³

CONCLUSIONS

- Sex workers and their patrons accessing sexual health information through an online cyber-outreach service in British Columbia have a high level of appreciation for the service.
- **Anonymity** is one of the most frequently cited benefits of the service and distinguishes online sexual health care from many comparable in-person services.
- Clients rely heavily upon the cyber-outreach nurses for trustworthy, up-to-date **sexual health information**, which **they may not otherwise receive**.
- Though resource-intensive, one-on-one sexual health outreach builds **trust** and **engagement** within online communities, especially those which experience stigma related to sexual behavior or STD/HIV and may therefore be reluctant to seek face-to-face services.
- **Expansion** and **integration** of internet-based sexual health services, including online access to nurses and STD/HIV testing, can facilitate improvements in sexual health knowledge and testing in these communities.