

# Awareness of internet-based testing for sexually-transmitted and blood-borne infections among sexual minority men in British Columbia (BC), Canada

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## **Background**

- GetCheckedOnline is an internet-based STI testing program in BC, Canada, that launched in 2014 in Vancouver, BC's largest urban centre, and expanded to six smaller urban and suburban BC communities in 2016
- Objectives:
  - To measure GetCheckedOnline awareness among gay, bisexual, and other men who have sex with men (gbMSM)
  - To identify factors associated with awareness

### **Methods**

- Sex Now: Cross-sectional, anonymous, online health survey administered 11/2019-02/2020
  - Eligibility:
    - Live in Canada
    - Be ≥ 15 years old
    - Identify as gay, bisexual, or nonheterosexual OR have had sex with another man in the past 5 years

NOW

PŘÉSENT

- BC participants were asked if they knew about GetCheckedOnline
- > Statistical analysis:
  - Multivariable logistic regression model including all variables significant in univariate analysis

#### Results

> Among 1132 participants living where GetCheckedOnline is available, 38.1% were aware of the service

↑ awareness among participants who:

- Lived outside of Vancouver (ref: Vancouver; adjusted odds ratio (AOR)=2.15 [95% confidence interval: 1.50-3.10])
- Identified as queer (ref: no; AOR=1.58 [1.13-2.21])
- Had post-graduate education (ref: undergraduate; AOR=1.84 [1.17-2.91])
- Were out to their primary healthcare providers (ref: no; AOR=1.97 [1.22-3.24])
- Used ≥3 geolocation-based sex-seeking apps (ref: 0; AOR=2.15 [1.40-3.33])
- Had past-year involvement in LGBTQ2S+-specific activities (ref: no; AOR=1.56 [1.10-2.23])

↓ awareness among participants who:

- Were older (per 1-year increase, AOR=0.98 [0.97-0.999])
- Usually tested for STIs with their family doctor (ref: sexual health clinic; AOR=0.50 [0.33-0.73]) or at walk-in medical clinics (ref: sexual health clinic; AOR=0.54 [0.30-0.96])
- Had never tested previously for STIs (ref: usually tested at sexual health clinic; AOR=0.17 [0.06–0.39])

#### Conclusion

Increasing promotion to gbMSM who are not out to their primary healthcare provider, who have never tested previously for STIs, or who are less connected to LGBTQ2S+ communities may improve program reach

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