

Health equity analysis of awareness and use of GetCheckedOnline in communities where the service has expanded in British Columbia

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Background

Digital interventions for sexually transmitted and blood-borne infections (STBBI) testing might replicate or create new inequities in access. While GetCheckedOnline – a digital service for STBBI testing in British Columbia (BC) – has been shown to improve testing access in the province, assessing the equity of its outcomes is essential to ensure service appropriateness and accessibility.

Objective: To assess the association between sociodemographic characteristics and differences in awareness and use of *GetCheckedOnline* in communities where it is available outside Vancouver. BC.

Results

Our sample comprised 1,658 individuals. A large proportion of this sample represented people from equity-owed groups (Table 1). 66.8% (990/1483) reported experiencing barriers to accessing provider-based testing in the past year (e.g., long wait times).

Overall implementation outcomes: 35.3% (586/1,658) were aware of GCO, of whom 56.3% had used the service (324/576), which corresponded to 19.5% (324/1,658) of the sample.

Table 1: Description of study sample		
Characteristic	n = 1658	
Age		
Mean Standard Deviation	33 years 11.75 years	
Gender	n (%)*	
Man (only) Woman (only) Genderfluid, genderqueer, agender, non-binary and multiple gender identities (GGANB+) Cisgender Transgender	459 (30.7%) 784 (52.5%) 251 (16.8%) 1246 (89.8%) 151 (10.2%)	
Race/Ethnicity	n (%)	
White (only) Indigenous People of Colour	1099 (68.3%) 208 (12.9%) 301 (18.7%)	
Non-heterosexual Sexual Identity (yes)	793 (53.0%)	
Annual pre-tax income in 2021 < \$20,000	392 (26.9%)	
Drug Use (Illegal/non-prescribed, past year) (yes)	566 (39.1%)	
Ever been homeless (yes)	315 (21.5%)	
Never tested for STBBIs (yes) 319 (20.7%)		
Reported 3+ sexual partners in the last year (yes) 463 (30.9%)		
Diagnosed with 1+ STBBI during past year (yes) 104 (7.8%)		

^{*} All percentages were calculated based on valid responses

Methods

- From July to September 2022, we conducted a cross-sectional survey in 5 communities (Kimberley, Kamloops, Maple Ridge, Nelson, and Greater Victoria), recruiting in-person and online with oversampling of populations experiencing increased barriers to STBBI testing.
- Eligible participants were BC Residents ≥16 years old, and sexually active (≥1 oral, anal or vaginal intercourse in the past year)
- We studied the association between use and awareness of GCO and age, gender identity, sexual identity, race/ethnicity, educational attainment, and income, using directed acyclic graph (DAG)-informed logistic regression models.

Table 2: Odds ratios (OR) of awareness and use of GCO			
Sociodemographic	Awareness	Use	
Age*			
O1: Less than 25 y O2: 25-29 y O3: 30-37 y O4: 38+ y	0.39 [0.28 - 0.53] Reference 0.60 [0.45 - 0.81] 0.23 [0.17 - 0.32]	0.28 [0.18 - 0.41] Reference 0.73 [0.53 - 1.01] 0.19 [0.12 - 0.28]	
Gender Identity*			
Man (only) Woman (only) GGANB+	Reference 0.82 [0.64 - 1.04] 2.27 [1.63 - 3.18]	Reference 0.68 [0.50 - 0.92] 1.97 [1.36 - 2.84]	
Cisgender Transgender	Reference 2.17 [1.54 - 3.06]	Reference 2.15 [1.46 - 3.13]	
Race/ethnicity*			
White (only) Indigenous People of Color	Reference 1.65 [1.19 - 2.20] 1.74 [1.34 - 2.26]	Reference 1.33 [0.91 - 1.93] 2.01 [1.48 - 2.72]	
Sexual Identity*			
Heterosexual LGB+	Reference 2.37 [1.89 - 2.97]	Reference 2.53 [1.91 - 3.38]	
Income [‡]			
Less than \$20,000 \$20,000 to less than \$40,000 \$40,000 to less than \$60,000 \$60,000 to less than \$80,000 \$80,000 and more	0.40 [0.25 - 0.64] 0.79 [0.50 - 1.25] 0.95 [0.61 - 1.49] 1.30 [0.81 - 2.11] Reference	0.36 [0.20 - 0.65] 0.59 [0.34 - 1.03] 0.71 [0.42 - 1.21] 1.31 [0.76 - 2.27] Reference	
Educational attainment‡			
Elementary or some high school High school Post-secondary certificate Bachelor's degree Graduate degree	0.79 [0.38 - 1.62] 0.84 [0.52 - 1.38] 0.97 [0.62 - 1.53] 1.48 [0.94 - 2.35] Reference	1.39 [0.56 - 3.34] 1.09 [0.58 - 2.08] 1.34 [0.76 - 2.43] 1.81 [1.03 - 3-31] Reference	

* Univariate models ‡Adjusted for age, gender and sexual identities, and race/ethnicity

Conclusion

- Differences in awareness and use between sociodemographic groups
 point to a complex pattern of GCO outcomes distribution.
- Some differences favoured equity-owed groups (i.e., People of Color, LGB+, and transgender people), while others favoured privileged groups (i.e., income, men compared to women).
- Community-specific balances of relative advantage of GCO over provider-based testing and communication networks may account for the differences observed in this study.
- Further comprehension of these differences is necessary to guide service promotion and adaptation to improve equity indicators.







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