Utilizing Online Learning Modules to Improve Gay Men’s Experiences with Health Care Providers

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• Sources
• What is working?
• What needs more attention?
• How are we addressing this need?
  - Online Learning Modules

Agenda
The content of the learning modules was extracted from the following sources:

- Academic and gray literature.
- Comparing learning modules created at other institutions (e.g., Fenway Institute).
- CIHR-REACH healthcare survey of gay men in Ottawa.

Sources
From our study:

- **87%** have a family doctor/nurse practitioner.
- **82%** acquire some health information from their family doctor/nurse practitioner.
- **76%** stated that their family doctor/nurse practitioner is aware they have sex with men.
- **61%** stated they were satisfied with the level of care they currently receive from their family doctor/nurse practitioner.

“I think one thing we have to be careful of is not to **stigmatize or generalize**...like, I came out 18 years ago in a small community in PEI. Um, my family physician was the physician for my wife and I and my son at that time. **That transition was remarkable. That man encouraged me to go where I needed to go for care. Um, he followed my care all the time. I couldn't say anything bad about the situation.**” (From our 30-60 year old Group)

**What is Working?**
When looking at sexual health:

• 76% stated they would feel supported in having a healthy sex life, if doctors/nurse practitioners would have an open and frank discussion with them.
• 72% stated they are somewhat or very comfortable talking to a doctor/nurse about their sex life
• 55% would feel supported with regular HIV/STI testing.

“And I don't feel like they....they don't seem engaged either. Like lets say you're just up for a general appointment they're not taking the initiative to ask about your sexual health. Well, for my family physician. I have to kind of bring it up like, "oh, I just got an HIV test again." And then she asks the typical questions like, "have you had unprotected sex?" If I respond "No" she's like "Oh, well you don't really need one." But, it's like maybe for my peace of mind, I do. Or this is just my schedule I usually like to get one every 12 months. “ (under 30 year old Group)

What Needs More Attention
When looking at mental health:

- 30% reported having ever been diagnosed with depression or anxiety.
- 40% reported they would benefit from meeting with a mental health professional.
- 77% stated they were somewhat or very comfortable talking to a doctor/nurse about their mental health.

(On mental health) “I got to a point where I couldn’t do it anymore, so I approached my GP and I was somewhat surprised by his reaction… *It was kind of like “oh”, and it was kind of left at that. There didn’t seem to be a lot of questions or any type of suggestions as to where to go…*” (Over 60 year old Group)
“…I’m not that in tune with the gay community. You know? Like I think everyone can use more assistance and education because I try to be …so I think education piece would be good.”

“Another area is language and how we talk to people. What is the lingo, what is the language, how should a physician speak to a gay patient, what is the expectation? So even when you are talking to people, people just get nervous that they will say the wrong. Or they will only say MSM. And maybe they don’t identify exactly like that. And then it would need to be updated every couple of years because it evolves.”

What Are Primary Care Providers Saying?
Develop 5 online modules to act as medical resources to help educate primary care providers on how to address the health care needs of gay men and other MSM:

- **Communication**
- **Mental Health**
- **Sexual Health**
- **Health across the Life Continuum**
- **Health Promotion**

**Online Learning Modules**
**Communication:** Learning how to create a safe and accepting space for open dialogue. Establishing a safe therapeutic rapport with gay men and youth.

**Mental Health:** Addressing shame/guilt and history of trauma. Screening for depression and anxiety and substance use. Considering the impact of multi-level discrimination for gay men of ethnic minorities and gay men with disabilities. Creating concepts of wellness and resiliency.

**Sexual Health:** Asserting healthy sexuality as not just the absence of disease but also the incorporation of safe and pleasurable sexual experiences. Addressing boundaries, safer sex, and new modalities of HIV risk reduction.

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**Overall Objectives**
**Health Promotion**: Expanding preventative health beyond HIV and STIs to include anal cancer screening, smoking cessation, cardiovascular health, vaccination, etc.

**Health across the Life Continuum**: Appreciating the changing physical and mental health challenges faced by gay men over the lifetime. Understanding the barriers to acceptance among gay youth. Realizing growing old in traditional family structures may not occur for elderly gay men and how the prospect of aging alone may adversely affect health.

**Overall Objectives**
Take Home Message

• These learning modules will not only act as an educational resource for healthcare providers, but also enable healthcare providers to deliver comprehensive, informed, relevant and culturally appropriate care to gay men and youth with the intent to improve primary prevention, disease detection, and chronic disease management.

• By doing so, healthcare providers can engage patients with more knowledge and confidence to have an open dialogue, and create a better and more consistent experience for gay men and other MSM.
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Thank you!