



Examining Social Norms and Behaviours of Men Who Have Sex With Men in Newfoundland and Labrador

Shianne Combden BNRN, CCHN(C)
Andrea Doyle BNRN, CCHN(C)
Anita Forward BNRN, CCHN(C)

Canadian Public Health Association

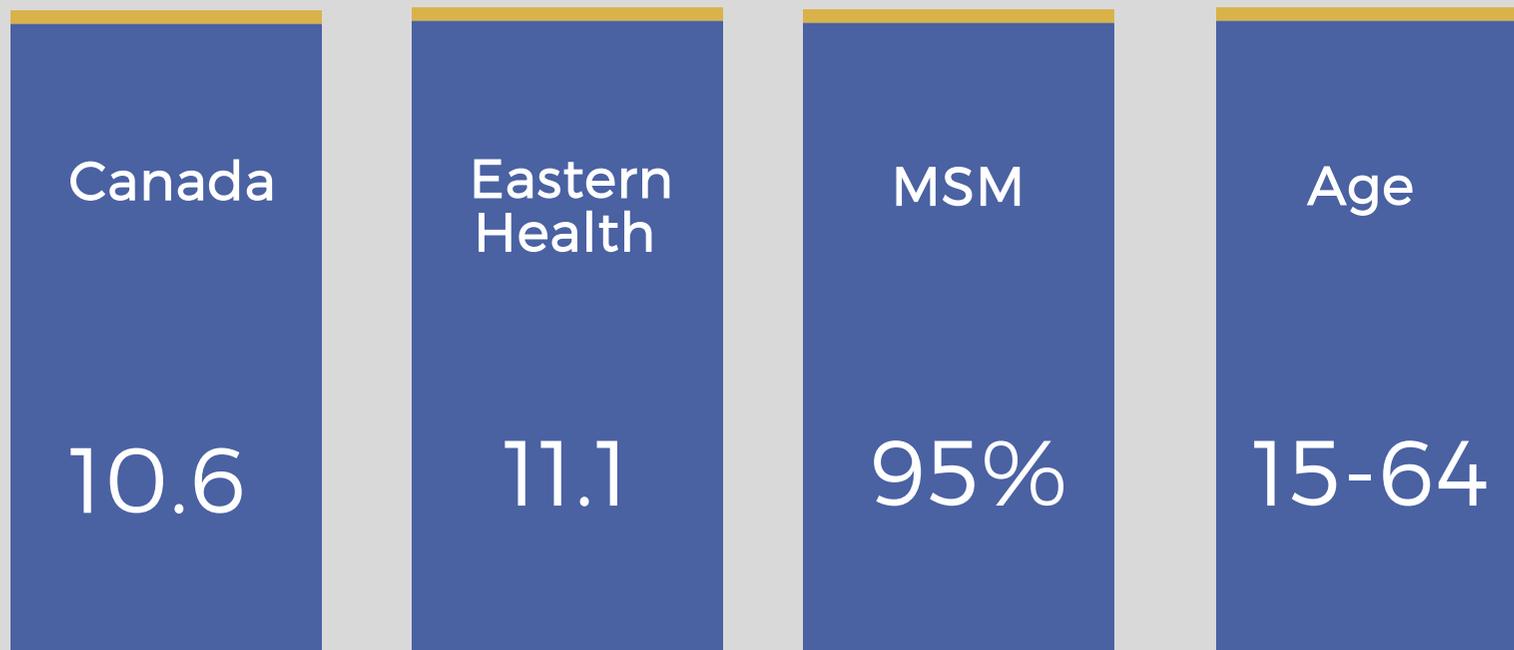
May 1st, 2019

Disclosure Statement

- We have no affiliation (financial or otherwise) with a pharmaceutical, medical device or communications organization.

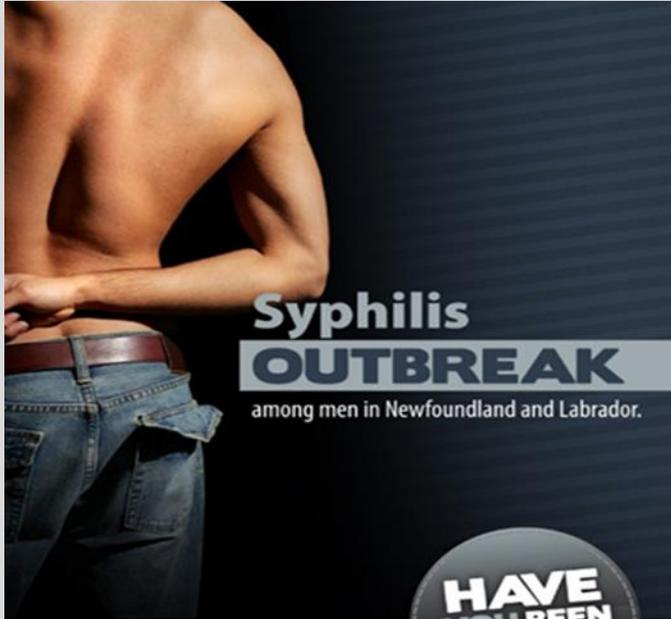
Infectious Syphilis

Local Context



Lack of dedicated sexual health clinics, no walk-in clinics and no point of care testing.

Outbreak Response Social Marketing Campaign



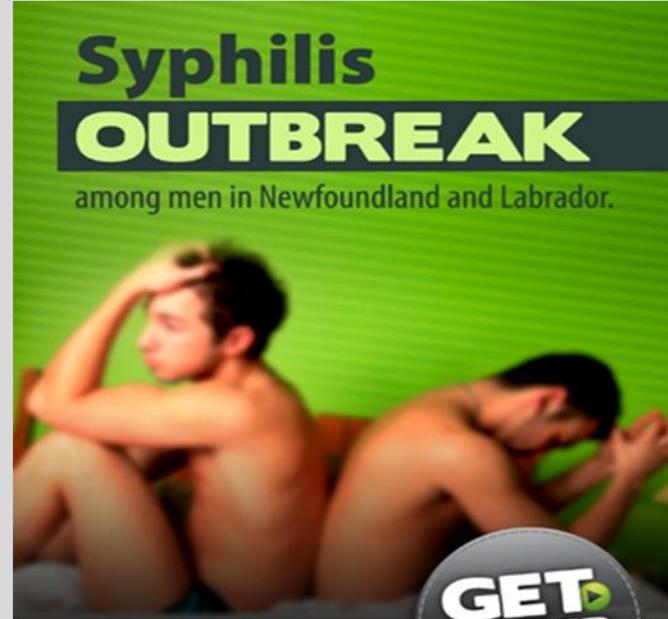
**Syphilis
OUTBREAK**
among men in Newfoundland and Labrador.

**HAVE
YOU BEEN
TESTED?**

A simple blood test can detect syphilis.
If detected early, it can be treated and cured.
To book a confidential appointment:

Call: 1-877-752-4358 (toll-free)
Email: sexualhealthclinic@easternhealth.ca
Visit: www.easternhealth.ca/syphilis

Newfoundland
Labrador



**Syphilis
OUTBREAK**
among men in Newfoundland and Labrador.

**GET
TESTED**

A simple blood test can detect syphilis.
If detected early, it can be treated and cured.
To book a confidential appointment:

Call: 1-877-752-4358 (toll-free)
Email: sexualhealthclinic@easternhealth.ca
Visit: www.easternhealth.ca/syphilis

Newfoundland
Labrador



Local Research

Purpose

- To gain insight into the experiences, social norms and sexual behaviours of local MSM population.
- To develop a comprehensive plan to address increasing rates of syphilis and other STBBIs in the Eastern Health region.

Men's Sexual Health Survey

226 responses

DEMOGRAPHICS

94% Male
2.3% Transgender
2.1% Two-Spirit
1.6% Prefer to self-describe
59% Trade/university educated

Age 15-65



Emerging Themes



Stigma and Discrimination

Gaps in Service Delivery

High Risk Behaviors



Experiences of Stigma and Discrimination

- 73% reported their health care professional assumed they were straight or heterosexual
- Over 50% indicated access to a supportive and inclusive healthcare provider would motivate them to get tested



Service Delivery Needs

Walk-in Clinics

60%

WALK-IN
CLINICS



On-site Specimen Collection

46%



Extended Clinic Hours

45%

CLINIC 





High Risk Behaviours

Reported in previous
12 months



53% anonymous sex

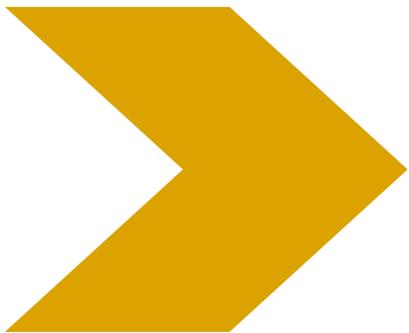
64% inconsistent condom use

55% drug/alcohol use

46% not tested



Recommendations



Offer Education

Implement New Guidelines

Create Partnerships

Enhance Accessibility

Next Steps

STBBI Strategy

Collaboration with Primary Healthcare Program

Align with Pan-Canadian Framework for Action on STBBIs

Reorient Sexual Health Clinic service delivery model

Emerging Issues

 New Risk Groups

 People Who Inject Drugs
Sex Workers
Congenital Syphilis





Questions!