

let's  
talk  
about  
sex!



Rijksinstituut voor Volksgezondheid  
en Milieu  
Ministerie van Volksgezondheid,  
Welzijn en Sport

**From intention to STI  
prevention: barriers and  
facilitators for discussing  
sexual risk behaviour  
among HIV positive MSM**

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## DISCLOSURE

No conflicts of interest	
Funding	Small grant Aids Fonds Projectnumber:2014046

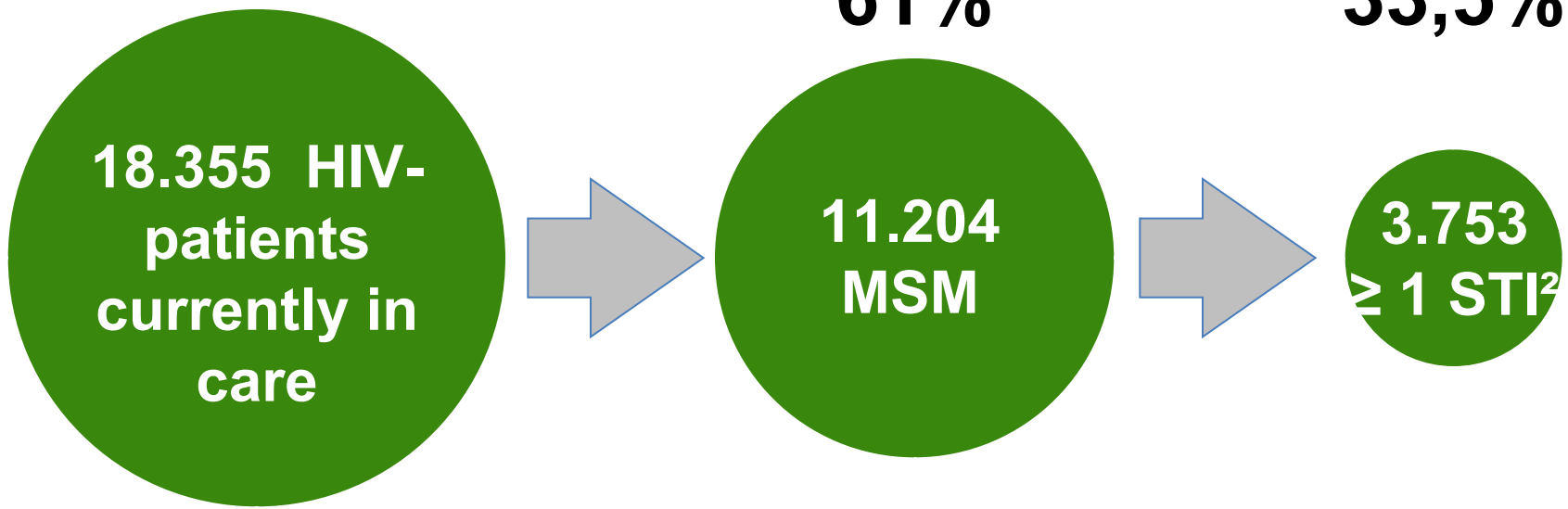


## HIV-centers in the Netherlands





## HIV in the Netherlands<sup>1</sup>



Despite prevention programs, no decrease in last 5 years

<sup>1</sup> Monitoring Report 2015 – Dutch HIV Foundation

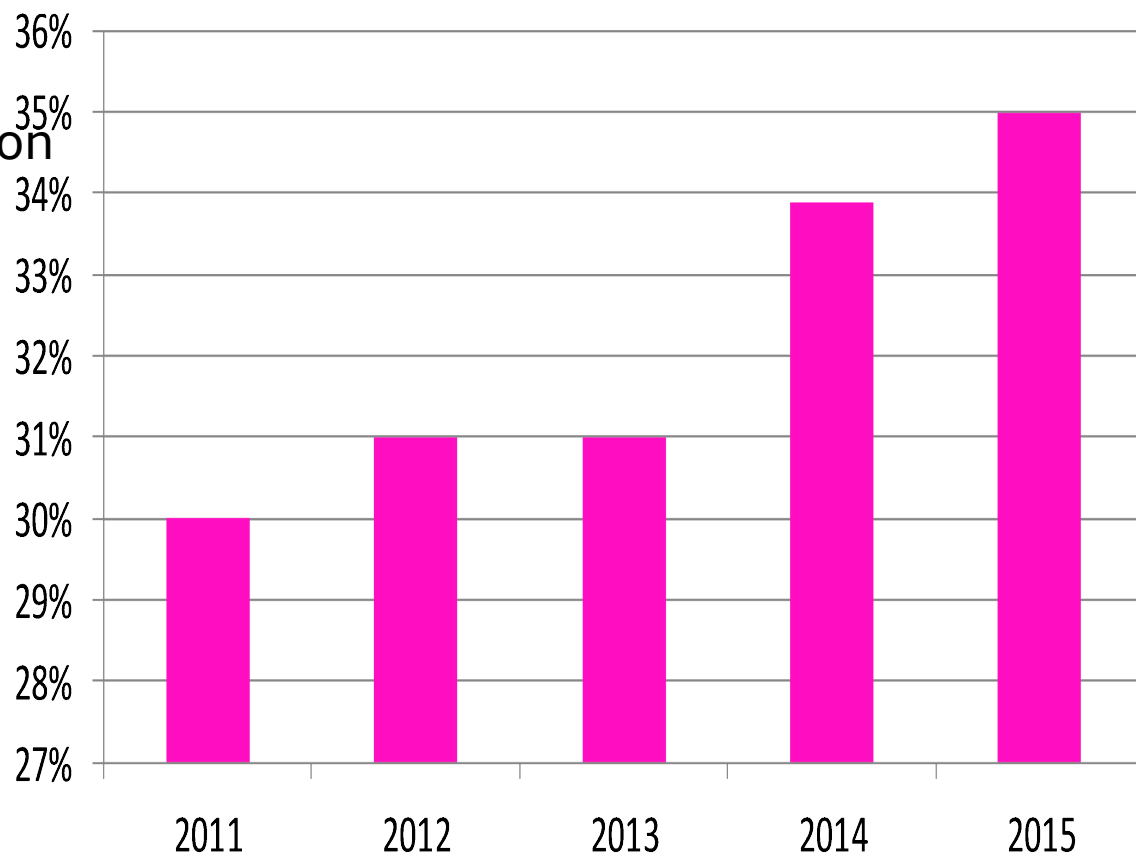
<sup>2</sup> STI: sexually transmitted infection

<sup>3</sup> Sexually transmitted infections in the Netherlands in 2015



## 1 OR MORE STI'S AMONG HIV POSITIVE MSM

- Health damage
- Increased transmission
- More costs





## ROLE HIV NURSE / NURSE PRACTITIONER

**CONSULTATION**

**RESEARCH**

**EDUCATION**

**GUIDANCE/ INFORMATION**

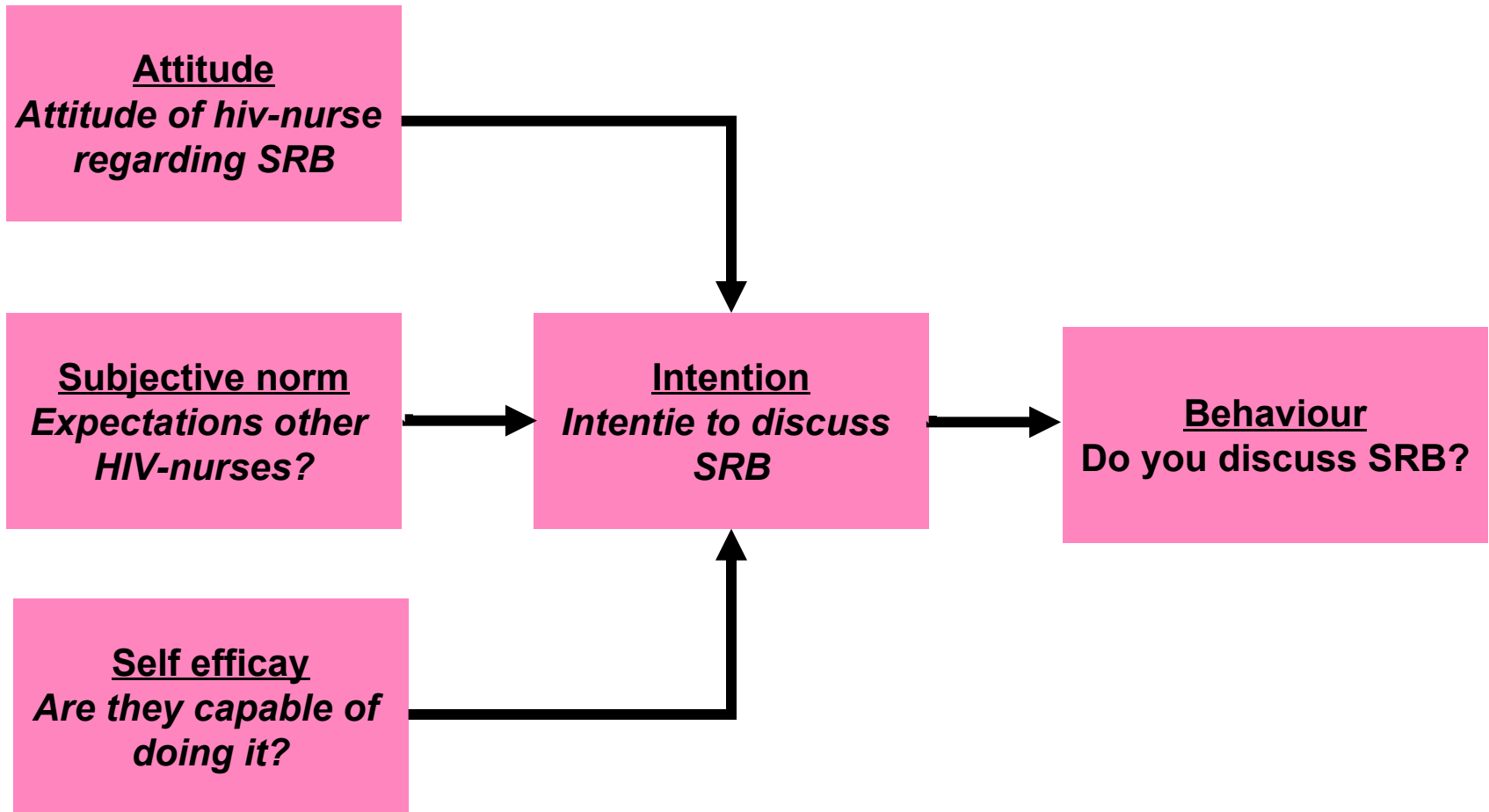
- Psychological
- Social
- Behaviour



***SEXUAL RISK BEHAVIOUR***



## Theoretical framework





## METHOD

- Online survey
  - several themes
  - Among 79 members of VCH



## THEMES IN ONLINE SURVEY

Results: Intention + behaviour

Determinants

01. Attitude

02. Subjective norm

03. Self-efficacy

04. Communication (non-verbal)

05. Initiation topic

06. Interpersonal relation

07. Time/priority

08. Motivation

09. Similarity to patients

10. Background

## ONLINE SURVEY

Subscale of Interpersonal Relation = Shame → Cronbach's  $\alpha = .86$

- 'When I discuss sexual risk behaviour with a HIV positive MSM I do sometimes feel ashamed',
- 'Sometimes I am embarrassed to discuss sexual risks behaviour with a HIV-positive MSM.',
- 'I do sometimes feel awkward to bring up sexual risk behaviour with a HIV-positive MSM.',



## DEMOGRAFIC CHARACTERISTICS (respons rate 76%)

Characteristic (N=65)		
Age	Average (yrs)	48 (28-64)
Gender	Female	33 (51%)
Sexuality	Heterosexual	48 (75%)
Experience	Average (yrs)	13 (2-25)
Role	HIV nurse	36 (55%)
Education/training	Yes	56 (86%)
Hospitals N=27		23



## RESULTS – INTENTION

### Regression: predicting Intention

	beta
Attitude	.30*
Self-Efficacy	.22
Subjective Norm	-.01
Communication	.09
Initiation	.41**
Interpersonal relation	.10
Time	.28*
Motivation	-.15
Similarity	.00
Sex [Women = 0; Men = 1]	.01
Sexual preference [Hetero = 0; Homo = 1]	.27
Mainline course [No = 0; Yes = 1]	.15
R <sup>2</sup>	.48



## DISCUSSION

- Attitude, time and initiation -> intention
- Sexual preference
  - Something people cannot change

### **However:**

- Possessing the right jargon
  - › Discussing Chems and “Tina”
- Perceived discussion as more important

## RECOMENDATIONS

### Practice

- Tailor made training
- Implement prevention in daily practice
- Consensus national guidelines STI

### Science

- Patient perspective
- Intervention

- Which other boundary conditions are necessary in practice?

## CONCLUSION

- Results that are useful to continue research and finally to improve discussing sexuality.



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