Lack of Sexual Behavior Disclosure May Distort STI Testing Outcomes

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Abstract

Background. To evaluate whether Chinese men who have sex with men (MSM) select a STI test (rectal vs urethral) appropriate for their sexual behavior (insertive and/or receptive). Methods. We studied uptake of gonorrhea and chlamydia testing among Chinese MSM (N=431) in a multi-site randomized controlled trial (RCT) (December 2018 to January 2019). We collected socio-demographics, relevant medical and sexual history, and disclosure of sexual behavior (outness). Drawing data from the RCT, we estimated the decision to test and test choice, and the extent to which disclosure plays a role in decision-making. Results. Among 431 MSM, mean age was 28 years (SD=7.10) and 65% were out to someone. MSM who indicated versatile sexual behavior and were out to someone had a 26.8% (95% CI=6.1, 47.5) increased likelihood for selecting the rectal test vs the ure-thral test, compared to those versatile and not out. Versatile MSM out to their health provider outside of the study context had a 29.4% (95% CI=6.3, 52.6) greater likelihood for selecting the rectal STI test vs the urethral test, compared to versatile MSM not out to their health provider. Conclusions. Sexual behavior and outness may affect gonorrhea and chlamydia test-ing provision. Apart from clinicians, community-based efforts may reduce stigma-based barriers to testing. Keywords. MSM; Sexual Health; Sexual Behavior Disclosure; China

Full Text

Due to technical limitations, full-text HTML conversion of this manuscript could not be completed. However, the manuscript can be downloaded and accessed as a PDF.

Tables

Due to technical limitations, all tables are only available for download from the Supplementary Files section.

Figures
Figure 1

a) Box plot of likelihood of selecting rectal test, by being out; b) Box plot of likelihood of
selecting rectal test, by out to health provider

Supplementary Files
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