

How do Gay and Bisexual Men Navigate Partner Notification After an STI?

A Story Completion Study

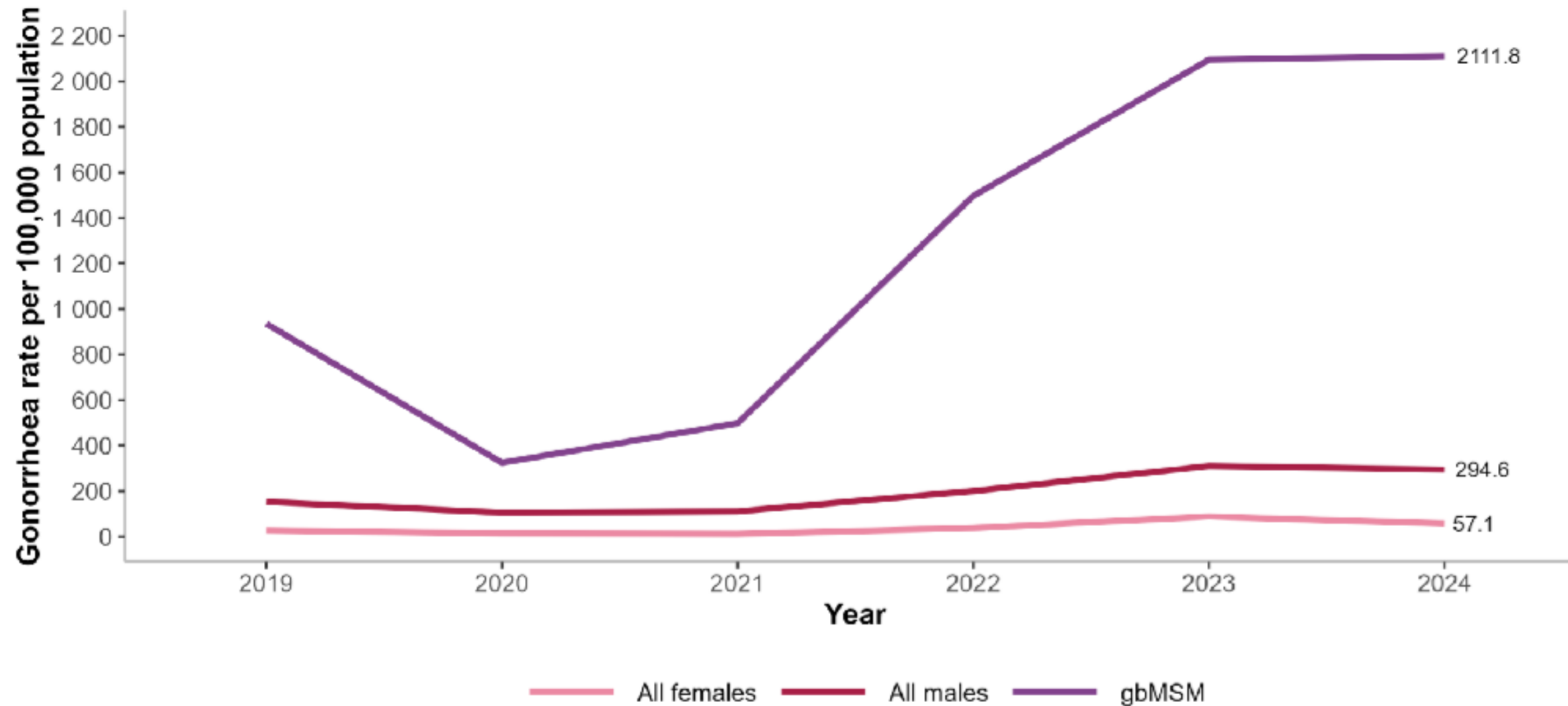
Chris Noone & Niall Caulfield
School of Psychology

You might
want to get
checked...

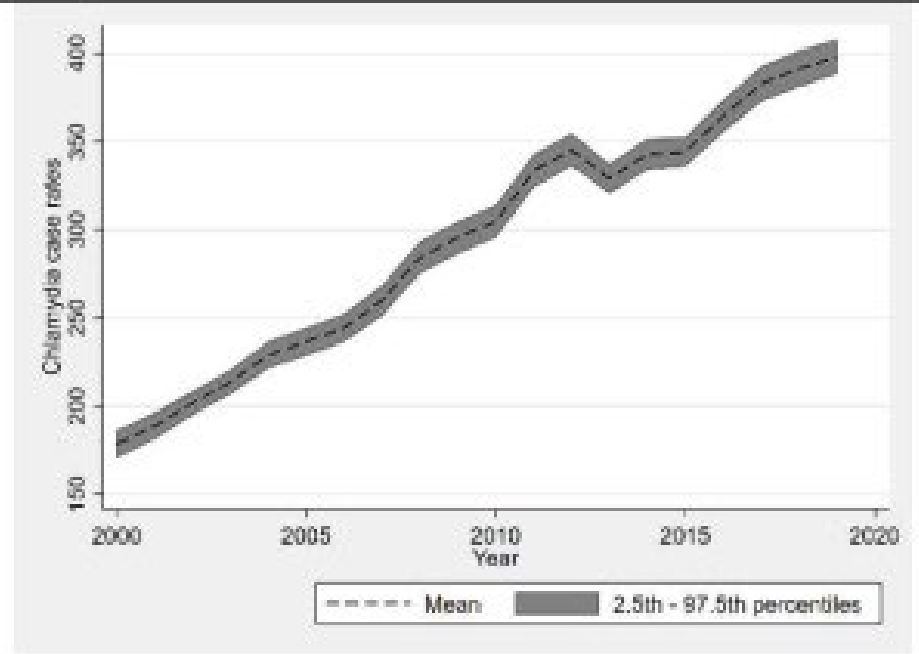


OLLSCOIL NA GAILLIMHE
UNIVERSITY OF GALWAY

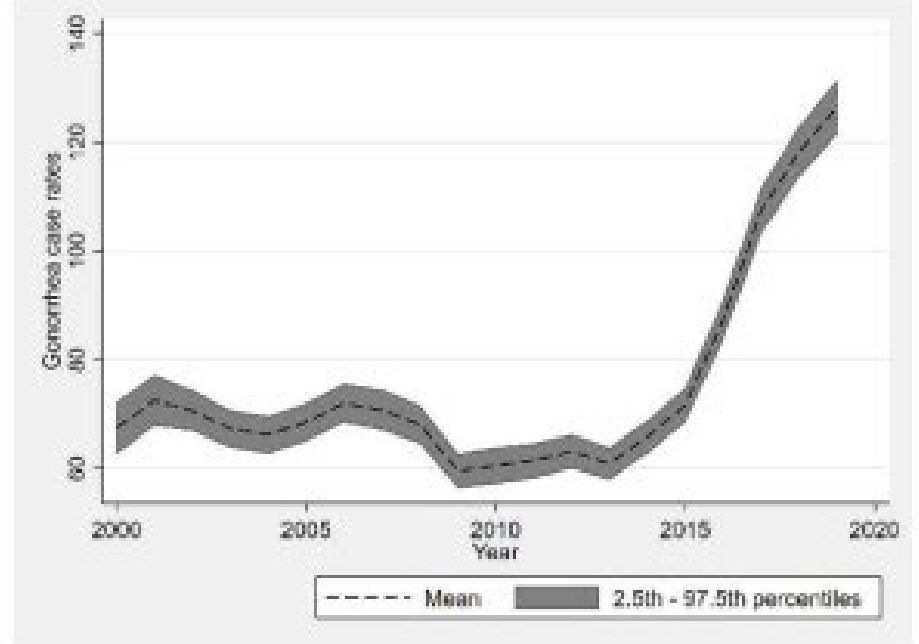
STI Transmission



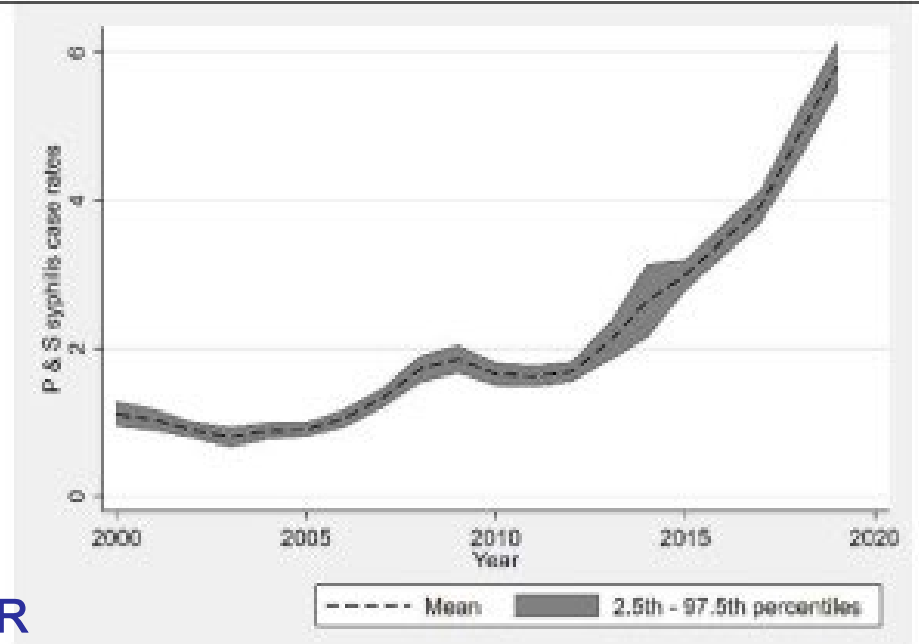
Trend in gonorrhoea rates in gbMSM, all males and all females aged 18 years and over, 2019 to 2024



Chlamydia



Gonorrhea



P & S syphilis

STI Transmission

Summary of STIs in gbMSM in Ireland, 2024

GbMSM remain a key population impacted by STI's in 2024

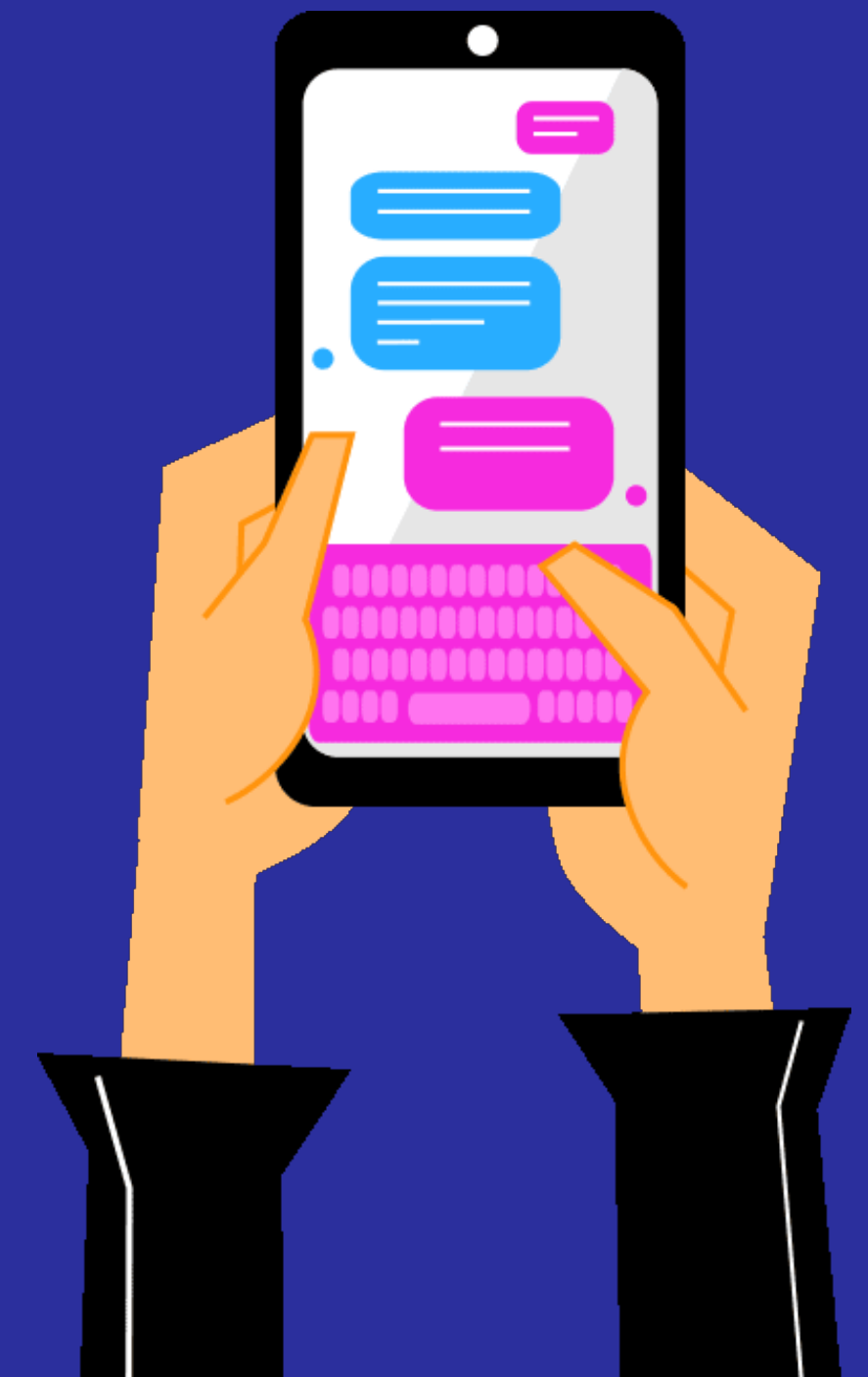
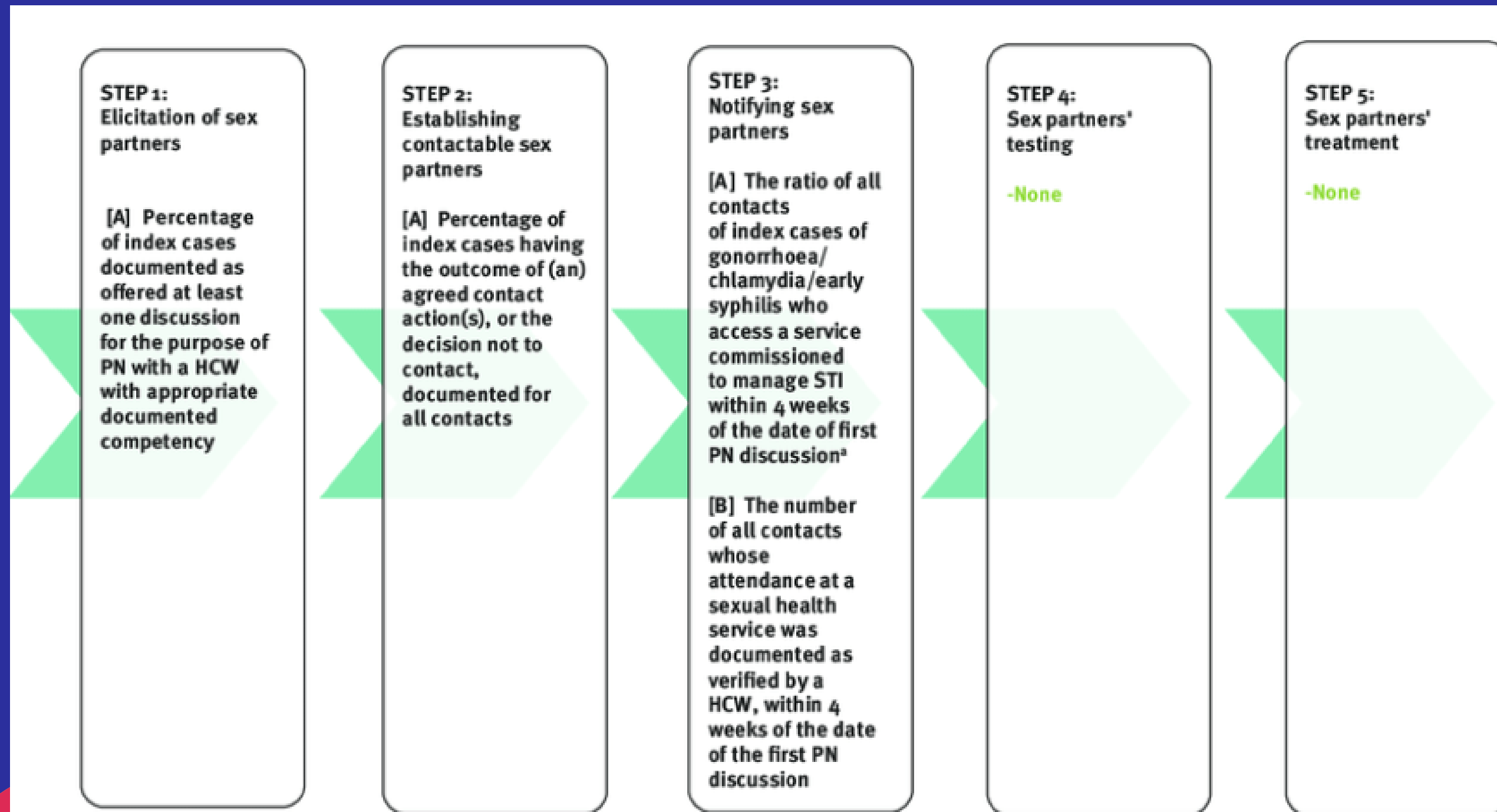
- In 2024 where MoT* is known in males, gbMSM accounted for
 - ▪ 100% of LGV cases
 - ▪ 100% of mpox cases
 - ▪ 93% of EIS cases
 - ▪ 90% of gonorrhoea cases
- **Comparing 2024 data to 2023**
- Gonorrhoea notification rate among gbMSM remained high but stable (from 2,095 to 2,112 per 100,000 population)
- EIS notification rate in males increased by 8% (from 32.4 to 35.1 per 100,000 population)
- LGV notification rate in males remains low (at 1.5 per 100,000 population)
- Mpox notification rate increased by 92% (from 13 cases in 2023 to 25 in 2024) and the notification rate is low (0.5 per 100,000 population)

*MoT data are not collected for chlamydia or herpes simplex (genital)

Partner Notification

Provider Referral

Patient Referral



Methods

- Qualitative Story Completion was identified as the most appropriate research method since previous studies have reported that it is a particularly effective approach for researching sensitive topics such as orgasmic absence, sexual refusal, etc., Frith 2013; Beres et al., 2019, as well as topics that are governed by social norms or socially undesirable opinions (Clarke et al., 2019).
- This method circumvents the stigmatizing nature of direct inquiry into personal experience (e.g. one-on-one interviews), and instead instructs participants to continue the events of a fictional story related to the topic, through which sensitive ideas are projected (Clarke et al., 2019).
- Participants are often more willing to express their perceptions in this manner, as they do not have to claim ownership or accountability for what they write (in contrast to personal accounts) (Clarke et al., 2019).



Story Completion Tasks

Story Stem (i)

Mark is a frequent user of dating apps and recently had sex with someone who he met on Grindr. A short while after the hookup he begins to notice pain and discomfort around his genital area, as well as unusual discharge. He decides to make an appointment to test his symptoms and quickly learns that he has contracted an STI...

Please continue the story using as much detail as possible while considering the following prompts; How do you think Mark might have felt after learning he had contracted an STI? How might have he reacted to this news? What do you think he might have done next? (Please write for at least 5 minutes)

Story Stem (ii)

Upon arrival to his house, he receives a message from a previous sexual partner asking to meet...

How might Mark navigate this situation? How do you think he might respond to the message? What feelings could he be experiencing? (Please write for at least 5 minutes)

Story Stem (iii)

Mark's GP prescribes him antibiotics to take over the course of a week to help treat the STI. Four days after beginning the course of the medication, he notices that his symptoms begin to improve. He receives a notification from another man on Grindr asking to meet up...

Please write about how Mark reacts to the invitation. (Please write for at least 5 minutes)

Data Analysis

- A total of 78 responses were collected from the survey, with the majority providing responses.
- Braun and Clarke's (2021) 'Reflexive Thematic Analysis' was used to identify relevant and generate themes.
- The data was analysed from a social constructionist perspective, with a direct focus on the interpretation of the type of language participants' used to complete the SC tasks.



Theme 1

Feeling “Dirty”, “Ashamed”, and “Worthless”: Constructions of Shame and Stigma in Relation to PN

“After the news hits Mark, he begins to feel disgusted and ashamed with himself” (Participant 3)

“[He was] feeling used, dirty, infected, guilty, anxious” (Participant 32)

“...He wallows in self pity crying himself to sleep, he feels dirty and ashamed and worthless” (Participant 41),

“He may feel like he is being punished for being LGBTQ...” (Participant 56).



Theme 2

“The right thing to do”: Constructions of Morality in Relation to Partner Notification

“The internal debate between doing the right thing by informing the most recent people he's had sex with that he's contracted an STI and the embarrassment of admitting such a thing wars in his mind. After much internal debate, Mark relents into doing the right thing: informing his most recent sex partners of what has occurred” (Participant 2).

“Mark didn't know where to begin...He was mortified, but he knew that he couldn't keep this a secret forever, especially when other people's lives and health were on the line. Mark hops on the app Grindr, and prepares himself to message each hookup, starting with the guy who gave him the STI originally. Mark begins typing...and hits send” (Participant 17)



Theme 3

“You Gave Me an STI” The Construction of Blame in STI Disclosure

“...he is a victim of a random person's disclosure which warrants some resent in his body for the person who he contracted from” (Participant 3)

“He felt stupid, careless and foolish, why did he not use protection? Why did he even meet this a***** in the first place?! Mark see's the message flash on his phone from the guy he hooked up with, asking him if he'd like to hook up later tonight... he is so angry... [He] tried to calm his nerves and writes a message Think you might want to get checked for chlamydia, you disgusting POS.” (Participant 20)

“He sent a short message to the person he had sex with informing them of the test diagnosis and then quickly blocked them” (Participant 35).



Conclusion

- The majority of the stories framed Mark's STI diagnosis as a shameful experience
- In most of the stories where shame was depicted as the salient emotion, Mark chose not to engage with PN
- The decision to notify partners was often referred to as a challenging "internal debate", involving difficult choices between fulfilling moral obligations and protecting himself from further emotional damage
- There was no evidence of participants being aware of how they can be supported by HCPs to notify partners
- More work on how to support patient referral needed

