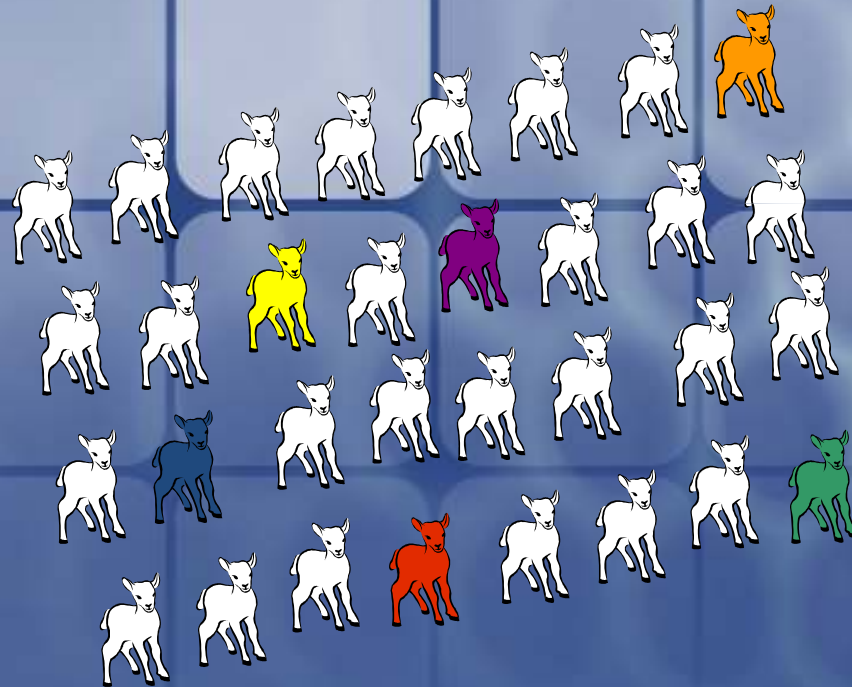
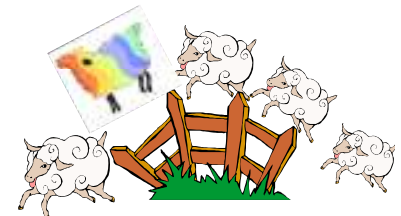


HEALTH & Sexual DIVERSITY





Country Awareness Network Victoria Inc. (CAN) is a community based, not for profit NGO funded in part by the Department of Health (DOH).





CAN provides information, education, support, referrals and advocacy to Victorian rural/regional communities regarding HIV/AIDS, Hepatitis C, other Blood Borne Viruses (BBVs) and Sexually Transmitted Infections (STIs).

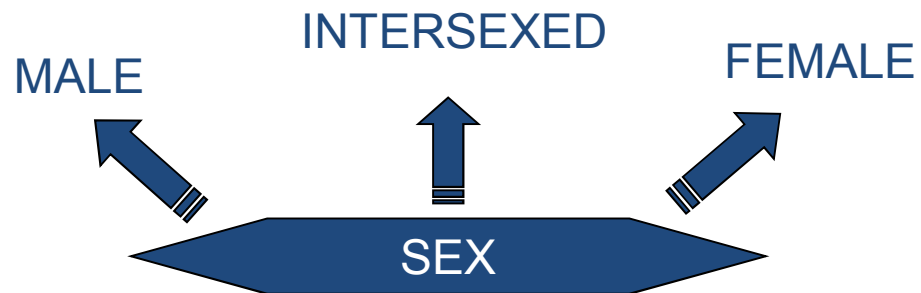
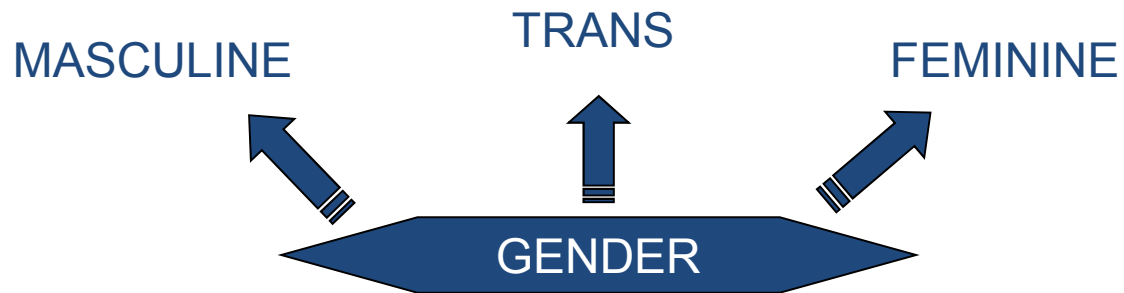


Session Outline

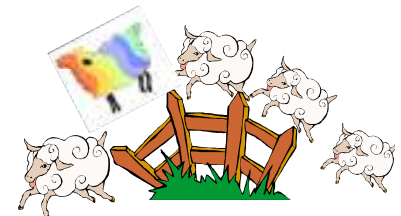
- General overview on sexual diversity
- Effects of homophobia in Australia
- The challenges of MSMs
- What it all means for best practice
- Useful contacts



Terminology



Alphabet Soup



Alphabet Soup

Just for fun sometimes we
mix it up a little:

- G -Gay**
- L -Lesbian**
- B -Bisexual**
- T -Transgender**
- I -Intersex**
- Q -Queer/Questioning**
- A -Alternative**

LGBTIQA

GLBTI

LGBTI

GLBT

G+L

(+/- Q&A)



What is Sexuality?

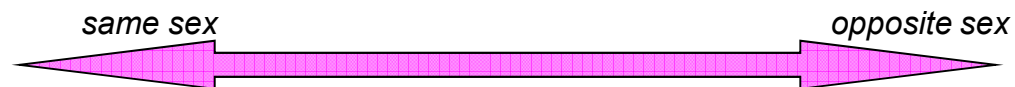
Feelings & Fantasies

sexual orientation – who we are attracted to



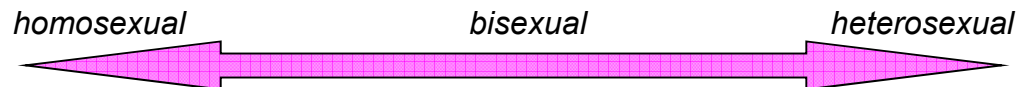
Behaviour

sexual behaviour – the sexual contacts we have



Identity

sexual identity – how we self identify and/or publicly identify



*gay, queer, pansexual,
same sex attracted,
men who have sex with men*



Assumptions

- What do you assume about someone's sexual activity (behaviour) based on their identified sexuality?
- What do you assume about someone's sexuality based on their identified behaviour?
- How would this effect your ability to provide appropriate care?



Handout

You have all received a handout which asks you to think about the assumptions you make based on someone's sexual identity

- What kind of sex does a gay man have?
- Can someone who has never had a sexual experience still identify their sexual orientation?



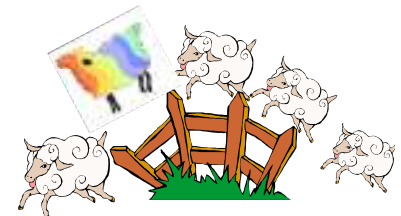
Something to keep in mind

when taking a sexual health history...

A persons sexual identity can not be relied on to predict their behaviour

A persons behaviour can not be used as an accurate indicator of their sexual identity

According to the Centre for Disease Control in America, 40% of men and 35% of women between ages 25 and 44 have had anal sex with an opposite sex partner



Some other terms...

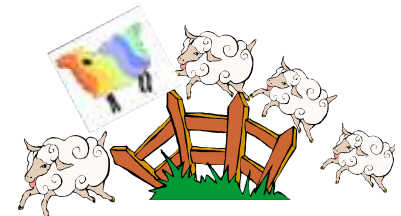
Terms such as

MSM

MSMW

WSW

WSWM



Effects of homophobia in Australia

A 2005 Aust. survey of 25,000 people over 14 years:

- 35% of all Australians believe that homosexuality is immoral
- Nearly 43% of men and 27% of women hold this view
- The **most** homophobic areas are country Queensland and the Burnie/Western district of Tasmania where 50 per cent believe that homosexuality is immoral.”
- The **least** homophobic areas are inner City of Melbourne (14%), Central Perth (21%) and Central Melbourne (26%).”
- Older people considerably more homophobic than young people. However male 14 – 17 yrs much more inclined to be anti-gay than young & middle-aged adults.



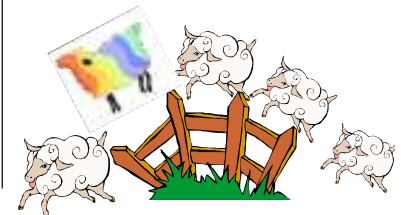
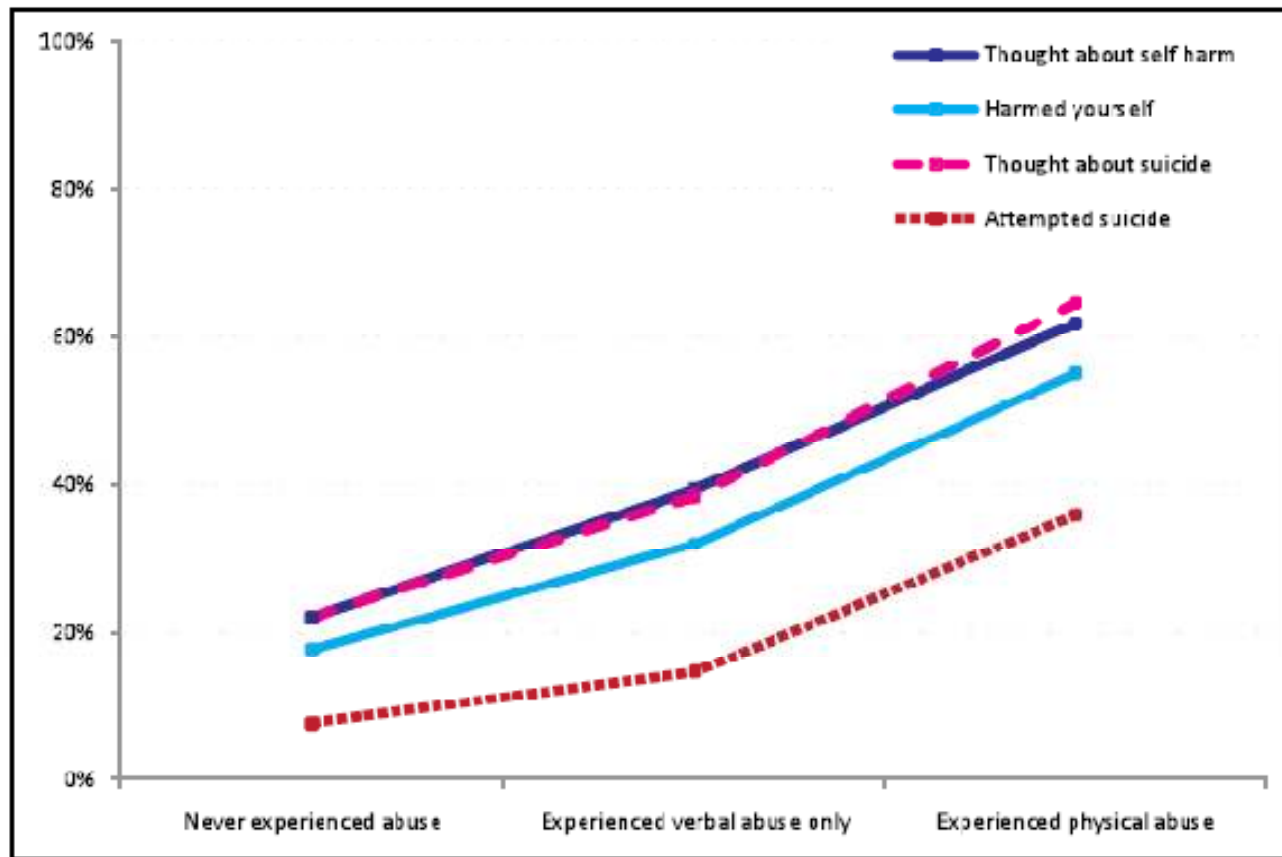
Same sex attracted youth

- Approximately 9 – 11% of young people report SSA
- 3rd national survey of 3134 young people aged 14 – 21 years, (20% rural or urban) found that:
 - 61% verbally abused because of their sexuality
 - 18% had been physically abused
 - 80% of the abuse happened at school;
 - 40% in the street and
 - 24% at home
- The homophobic abuse had a profound effect on the young people's health and wellbeing



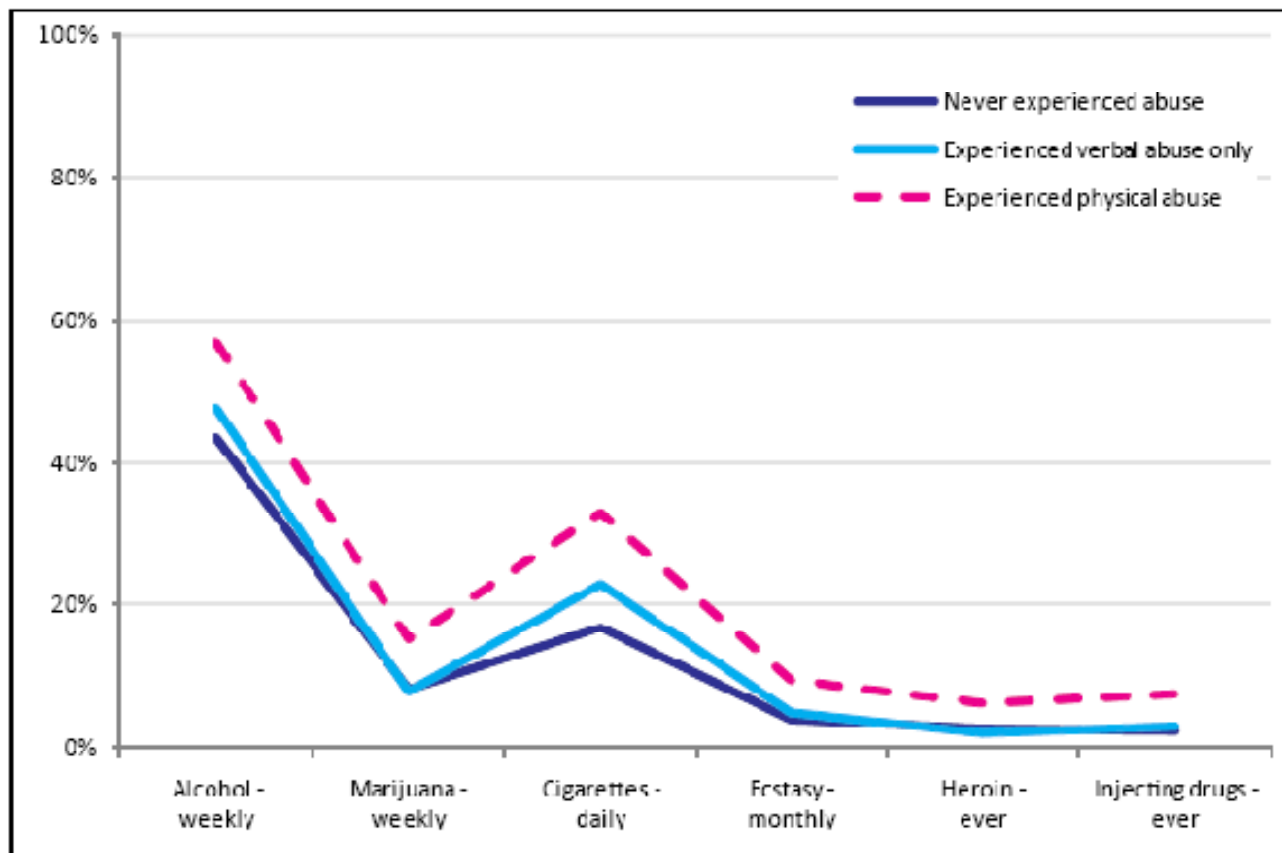
Self Harm

Strong correlation between self harm & experiencing abuse



Drug Use

SSAYP drug use is substantially higher



Sexual Behaviour

- 72% of those surveyed were sexually active.
- SSA young people were more likely to have engaged in a range of sexual practices (eg kissing, penetration) than those in general high school survey.
- They engaged in sexual activity at an earlier age.
- The SSA young people are often having sex with both sexes (especially the women)
- Condom use less than those in the high school survey
- Rates of pregnancy were higher amongst SSA women



Research on Suicide

Survey of suicide attempts by 528 young adults – up to 30yrs

- Gay male 20.8%
- Heterosexual male 5.4%
- Bisexual/undecided male 29.4%
- Lesbian female 28%
- Heterosexual female 8.3%
- Bisexual/undecided female 34.9%



MSM

The Biggest Challenge is Trust and Disclosure

-Married man that has sex at beats or SPOVs-

*-Young person living in a small community
constantly hearing homophobic messages-*

How Do You Reach Them?



Case scenario

A 59 yr old farmer lives and works in a small rural town. He is very well established and belongs to many of the local social and sporting groups. Before marrying, he had experimented sexually with men but remained monogamous with his wife until she died 4 years ago.

Since losing his wife, he has started to explore his sexual and emotional feelings for men again. He has contacted a gay social support group in a larger town nearby and is having occasional sex with men he meets through that or at beats and SOPV's in Melbourne.

He admits to his friends from the social support group that he believes he is gay but he is determined he will never come out for fear of his family's reaction and his reputation within his community.



What does it mean for Practice?

Make efforts wherever possible to respect individuality by providing personalised services.

Be aware - don't make assumptions!

Use gender neutral terminology - partner
v's wife/husband

Make a public acknowledgement of the
fact your agency embraces and celebrates
diversity in promotional and marketing
materials

Provide unisex toilets whenever possible

Don't be afraid to ask - What do you want
to be called?

Forms & other paperwork - leave spaces
for people to write their gender rather
than have M or F boxes to tick



What does it mean for Practice?

Creating welcoming environments

Have anti-discrimination policies on display

Display posters/pamphlets/resources with positive images of diverse people

Include a same sex partner in the same way an opposite sex partner would be

Address transgender people as their identified gender regardless of appearances

Keep terminology in forms gender neutral

Remember the contemporary definition of 'family' is not necessarily limited to those related by blood



What does it mean for Practice?

Address concerns about confidentiality and disclosure - be conscious that information shared with you is not always known publicly or by members of the family



Taking a Sexual Health History

Discussing sexuality can create trust and openness between practitioner and client

Understanding a client's sexual practices leads to being able to offer them more relevant and appropriate information

Risk can be established more accurately when sexual behaviours are known

Just knowing someone's identified sexuality does not give the whole picture

Do not presume a patient's sexual identity

Do not presume the gender of a patient's sexual contact(s)

Do not use expressions or ask direct questions that may label patients

Remember that a patient may be at risk of an STI due to their current partner's sexual behaviour, not their own

Ask patients about their knowledge of STI/BBV transmission



Taking a Sexual Health History

- So that correct tests can be taken from appropriate sites, it is important to ask about any insertive or receptive oral or anal sex as well as vaginal sex



Useful Networks

- TESTme.org.au
- Gay & Lesbian Health Victoria
 - www.glhv.org.au
- CAN
 - www.can.org.au
- Melbourne Sexual Health Centre
 - www.mshc.org.au
- Take Care OutBack There
 - www.takecare.org.au
- Centre of Excellence in Rural Sexual Health (CERSH)
 - www.cersh.com.au

Questions

