Sexual health literacy: An emerging framework for research and intervention to improve sexual health for gay men

**Health Literacy is:**
"...the use of a wide range of skills that improve the ability of people to act on information in order to live healthier lives. These skills include reading, writing, listening, speaking, numeracy, and critical analysis, as well as communication and interaction skills." 1

**Sexual health literacy is:**
"...an individual’s knowledge, beliefs, attitudes, motivations and competencies in accessing, understanding, evaluating and applying sexual health information in everyday life to negotiate and make judgements and decisions concerning sexual healthcare, health promotion, relationships and wellbeing." 2

**WHY IS SEXUAL HEALTH LITERACY IMPORTANT FOR GAY MEN?**

- Health literacy is having the skills to find, understand, evaluate and talk about health information with others. Health literacy is important for good health at all ages - including for sexual health.
- Gay men were one of the first groups affected by HIV globally. Over time, gay men have developed ways to prevent HIV based on new information about the virus and how it spreads (e.g., safer sex practices).
- Today, there is even more information about HIV which is readily available online - such as the relationship between viral load and infection, or about new tools such as PrEP. As a result, having good health literacy skills has become even more important for gay men.
- However, not much research has been done looking at the relationship between health literacy and sexual health in general, and for gay men in particular.
- We were also interested in examining not just sexual health literacy for gay men as users of information, but also thinking about the providers of the information (e.g., care providers or agencies) and the underlying system factors influencing both groups.

**WHAT DID WE DO?**

- On November 1, 2014, we held a one-day workshop in Vancouver, British Columbia following the annual BC Gay Men’s Health Summit. The Summit was on the theme of health literacy and covered core concepts, the current research landscape, and relevance to gay men’s sexual health.
- We brought together 38 researchers, community members, health care providers and decision-makers who worked in gay men’s health from across Canada, Scotland and Australia (all having attended the Summit).
- We used World Café methodology to explore the topic of sexual health literacy for gay men, which rotated participants through three progressive rounds of small group dialogue (focusing on user, provider, and system factors affecting health literacy).
- As a group, notes were organized by theme and ranked by importance. Notes were later transcribed and further analyzed by one team member.

**AN EMERGING FRAMEWORK**

From these World Café discussions, we developed a framework for sexual health literacy, which proposes five groups of influencing factors:
1. The nature of the sexual health MESSAGE or information itself (e.g., consistency of messages).
2. The HEALTH LITERACY SKILLS of users and providers (e.g., ability to find information).
3. How, when and why gay men (as USERS) find, understand, and evaluate sexual health information (e.g., discussions with peers).
4. The ability of PROVIDERS to meet the health literacy needs of gay men (e.g., cultural competency).
5. Underlying SYSTEM factors that affect health literacy (e.g., HIV stigma).

- We also identified key research questions related to each framework element.

**TAKE HOME MESSAGES**

- Health literacy has been a core component of the gay men’s health movement to date, and is even more important today.
- New innovations in biomedical prevention and access to online information are critically shaping experiences of sexual health literacy for gay men.
- The theoretical framework emerging from these findings serves as a starting point to inform enhancing sexual health literacy and designing effective interventions.
- Further research is needed to refine this framework. Measuring health literacy skills of users and providers and associated factors may be a good first step.

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