

Diagnosed with an STI- What's next?

To evaluate the acceptability of contact tracing information resources among the target populations.

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Background

Contact Tracing Support Officers in Queensland identified a gap in resources being offered to clients who had been diagnosed with a sexually transmitted infection (STI).

Brochures were developed and distributed over four years to strengthen and improve contact tracing uptake, particularly in the area of general practice.

Services targeted:

- Sexual health units
- General practice
- Community organisations

Current financial pressures on health budgets have driven a preference for electronic resources. Feedback questioned the value of hard copy resources, suggesting utilising electronic links. An evaluation was performed to guide future directions.

Method

The study employed a mixed method approach which included a questionnaire and three focus group discussions.

Services targeted included:

- Sexual health units
- Non government agencies
- General practice.



Focus groups results

Community members from high risk groups participated with the following discussions.

- STI management including contact tracing
- Preference for future resource development

Age, sex and source

	Total people asked	15-20	20-25	25-30	>30	Male	Female
Drug and rehabilitation residential group	14		2	3	9	9	5
Young mothers group	11	10	1				11
Women's support group	3		1	1	1		3

Views differed with age, a marked difference in the under 25s to over 25s.



Observations and discussion <25s

- Those who appeared to have limited education showed very little interest, others read it, but felt it was boring
- None understood the term 'contact tracing', but with further probing understood 'Tell your Partner'
- Poster was recommended with phone contact and web information, however participants felt QR code was not helpful - 'don't own smart phones, would not scan it publicly'
- Most would prefer a verbal conversation only utilising the brochure (or wallet card) later if more information required
- Participants were not inclined to inform past partners, only current one

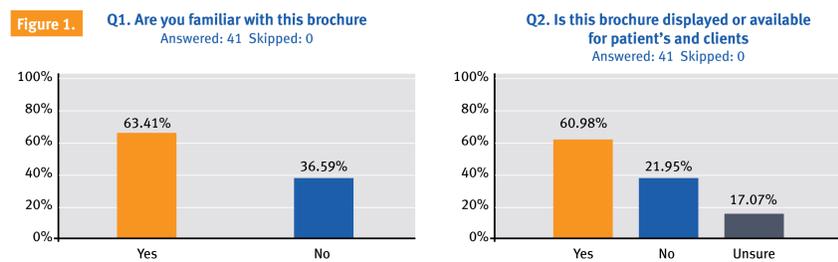
Observations and discussion >25

- Participants appeared interested, asking questions as they read
- Most felt brochure was helpful; of note were the colours and clear concise text
- Most were aware of contact tracing, however until this discussion occurred, were unlikely to do it
- Most were unlikely to utilise tear off section to notify partner, however liked it for its clarity and would utilise it to access web sites
- Most would be comfortable to send a SMS message

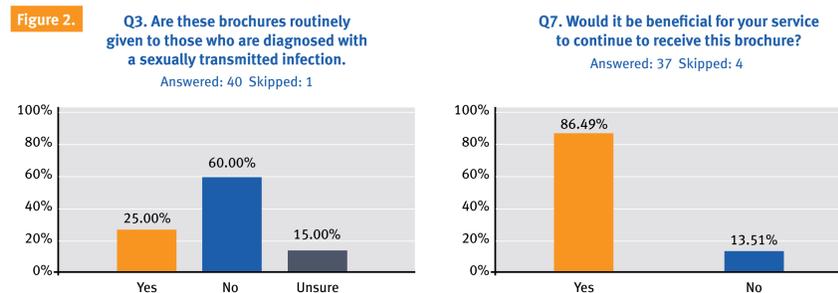
Both age groups once shown the wallet card, preferred this format: felt it was enticing to read, unlike the brochure

Survey results

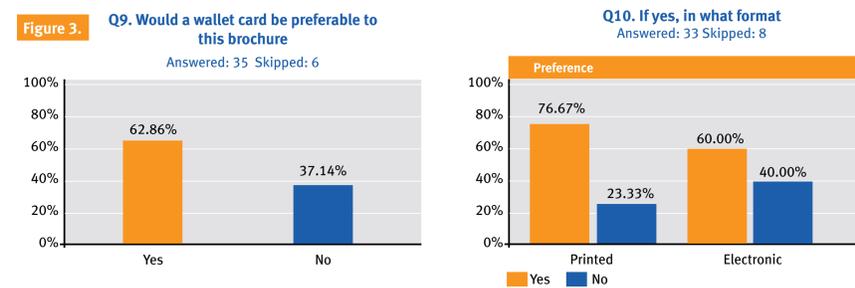
41 surveys were received, of which 26 (almost 64%) were familiar with the brochure and most of those displayed or distributed it within their service. (Figure 1.)



However only 10 (25%) respondents (Figure 2) routinely gave the brochure to those clients diagnosed with a Sexually Transmitted Infection.



It was interesting to note that the majority would like to continue to receive the brochure, however only 25% had been distributing it. An assumption could be made that once reminded of the brochure, clinicians identified the value of a resource of this type (Figure 2). Another note of interest, overall 22 (62.86%) of the survey participants would prefer a wallet card. (Figure 3) It appeared those who identified a preference to continue to receive this resource, 76.67% preferred a printed version, 60.00% preferred electronic version (Figure 3).



Recommendations:

- Utilise the term 'tell your partner(s)' rather than 'contact tracing' or 'partner notification'
- Offer electronic and printed resources – one size definitely does not fit all
- Develop an electronic brochure as an A4 document to enable printing
- Develop wallet cards with simple web link message
- Promote the resources during clinical education sessions highlighting the value of a contact tracing discussion

Conclusion

The focus groups, regardless of age, would find the brochure helpful however all highlighted the wish for clinicians to discuss STI management in detail, particularly detailing the importance of informing past and present partners.

The focus groups revealed the participants did not understand the importance of informing partners and were reluctant to do so.

Designing a tool for the under 25s could prove challenging as it seems unlikely that it would be read or accessed electronically. Preferably encourage clinicians to offer assistance to access sites like 'Let Them Know' and 'Drama Down Under'. The brochure was well received by the groups, however once the wallet cards were distributed for comment it was evident this was the preferred choice. A poster was also considered an option.

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