

LET'S TALK ABOUT SEX

“LET'S TALK ABOUT SEX” HIV/STI-Communication Training for Physicians and Medical Students

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Background

Diagnosing an HIV infection is not easy for physicians and many cannot attribute the nonspecific symptoms of HIV/STIs. Additionally, over-dramatic or moralistic attitudes towards HIV/AIDS are still prevalent among many people in Germany, including medical staff. These attitudes towards HIV, which also occur in hospitals and medical practices, pave the way for discrimination and stigmatization of PLWH. Furthermore, physicians may try to avoid supposedly unpleasant topics like HIV/STIs or sexuality in order not to strain the physician-patient relationship. To counteract these tendencies and knowledge gaps, we offer customized 1.5 to four hour workshops as in-house trainings to physicians, at congresses and in hospitals. In addition, we facilitate specific workshops for medical students at universities. Funded by the Association of Private Health Insurance Funds via the Federal Centre for Health Education, all workshops are free of charge.

¹ A recent survey in Germany shows that 55% of all Germans have problems kissing an HIV-positive person. Only 14% of all respondents would (even with a condom) have sex with an HIV-positive person. See: von Rügen, U. & Kostrzewski, D. (2017). Repräsentative Bevölkerungsbefragung anlässlich des Welt-AIDS-Tages 2017. BZgA-Forschungsbericht. Köln: Bundeszentrale für gesundheitliche Aufklärung.

² A 2012 survey among PLWH revealed that 19% of the respondents had been denied medical treatment on account of their HIV infection in the year before the survey. See: [2] Vierneisel, C., Trost, G., Gronski H. “positive stimmen” - the PLWH Stigma Index in Germany. Highlighted results of the community initiative on HIV-related stigmatization and discrimination. Abstract, AIDS 2012, International AIDS conference, July 22 - 27, Washington, USA

Aims and Objectives

Good communication about sexuality and transmission pathways is key for timely diagnoses of STIs, but many physicians are not adequately trained. We aim to fill this gap and to counteract discrimination and stigmatization of men who have sex with men, particularly when HIV-infected, sexworkers, their clients and other marginalized groups.

Objectives

- Enabling participants to take a patient-oriented sexual history
- Sensitizing participants to communication deficits, offering learning experiences
- Brushing up clinical knowledge regarding diagnosis and transmission routes of HIV/STIs
- Sensitizing to the living environments and needs of PLWH and relevant key groups of HIV/STI prevention common forms of discrimination in health care
- Enabling and strengthening cooperation between local physicians, medical faculties, medical HIV/STI-experts, local HIV service organisations/counselling centers

Set-up of Workshops

Target groups: Physicians at congresses, in hospitals and further training events for physicians in private praxis and medical students

Methods: A **theoretical further education module** dealing with the diagnosis of HIV/STIs and a **practical module** dealing with sexual history and talking about sexuality.

Role plays include case studies of patients with typical or atypical symptoms of an HIV or STI-infection and provide info about the sexual and social background of the respective patient as well as the physician-patient relationship (first visit, level of trust etc..).

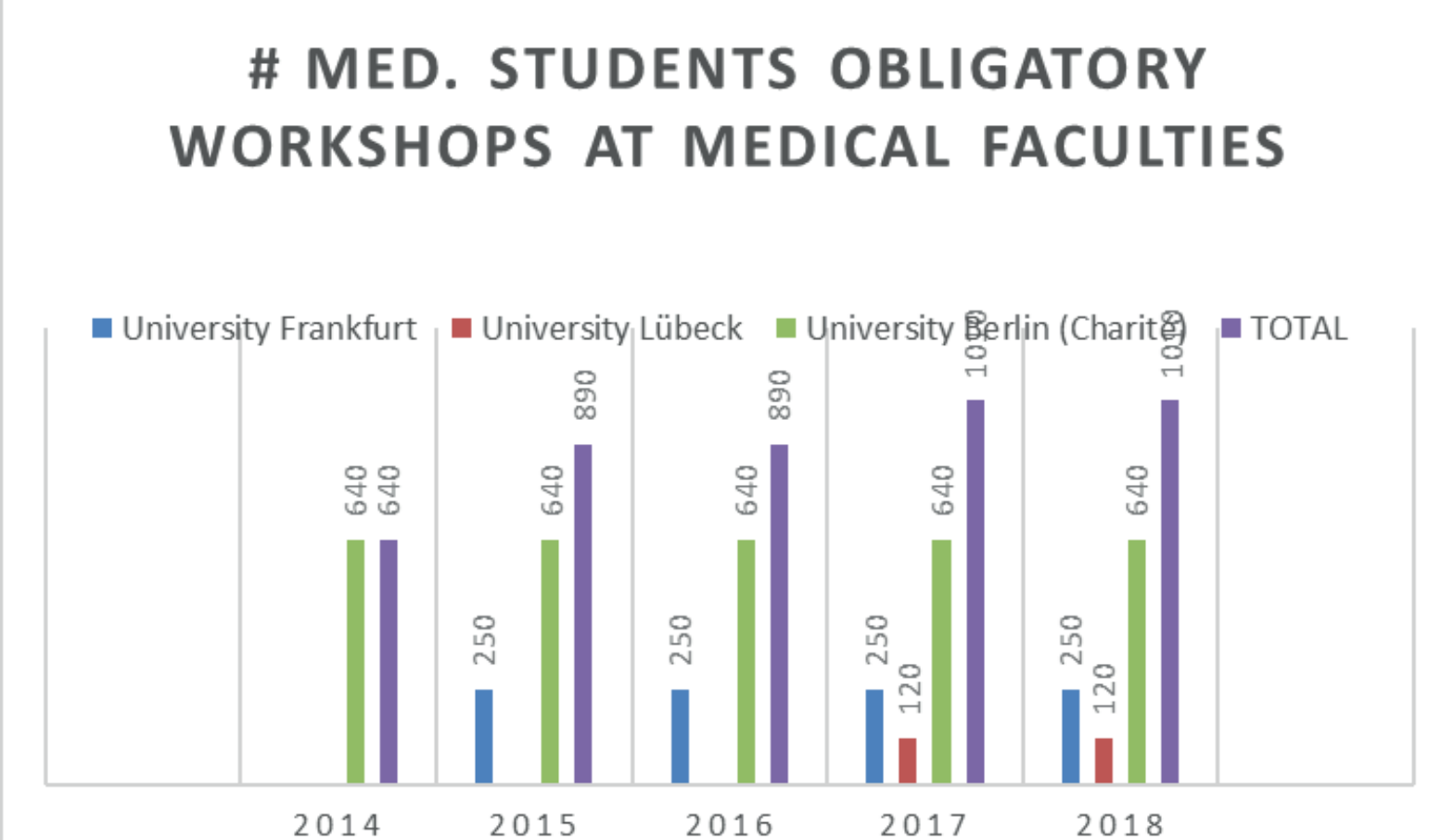
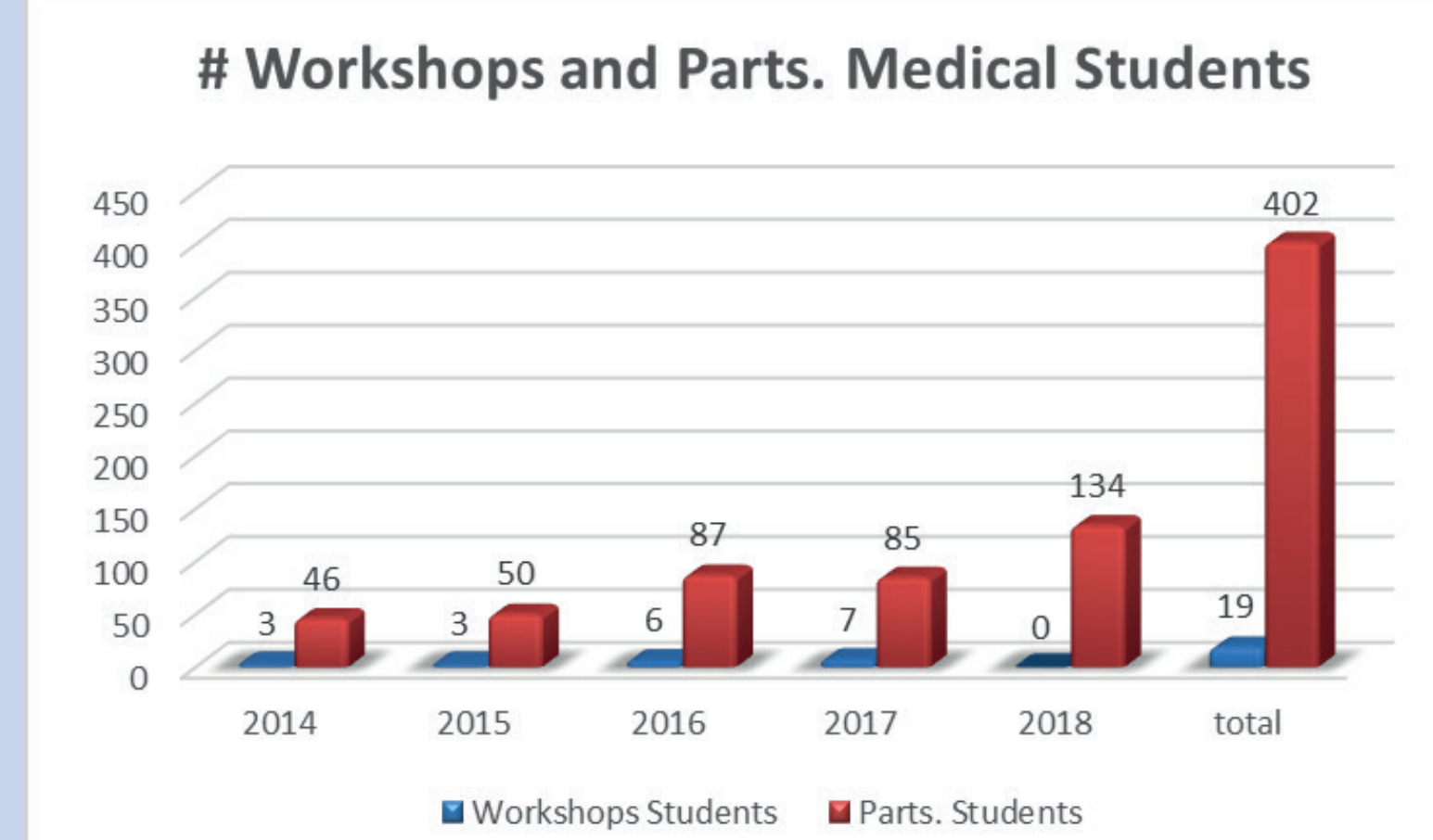
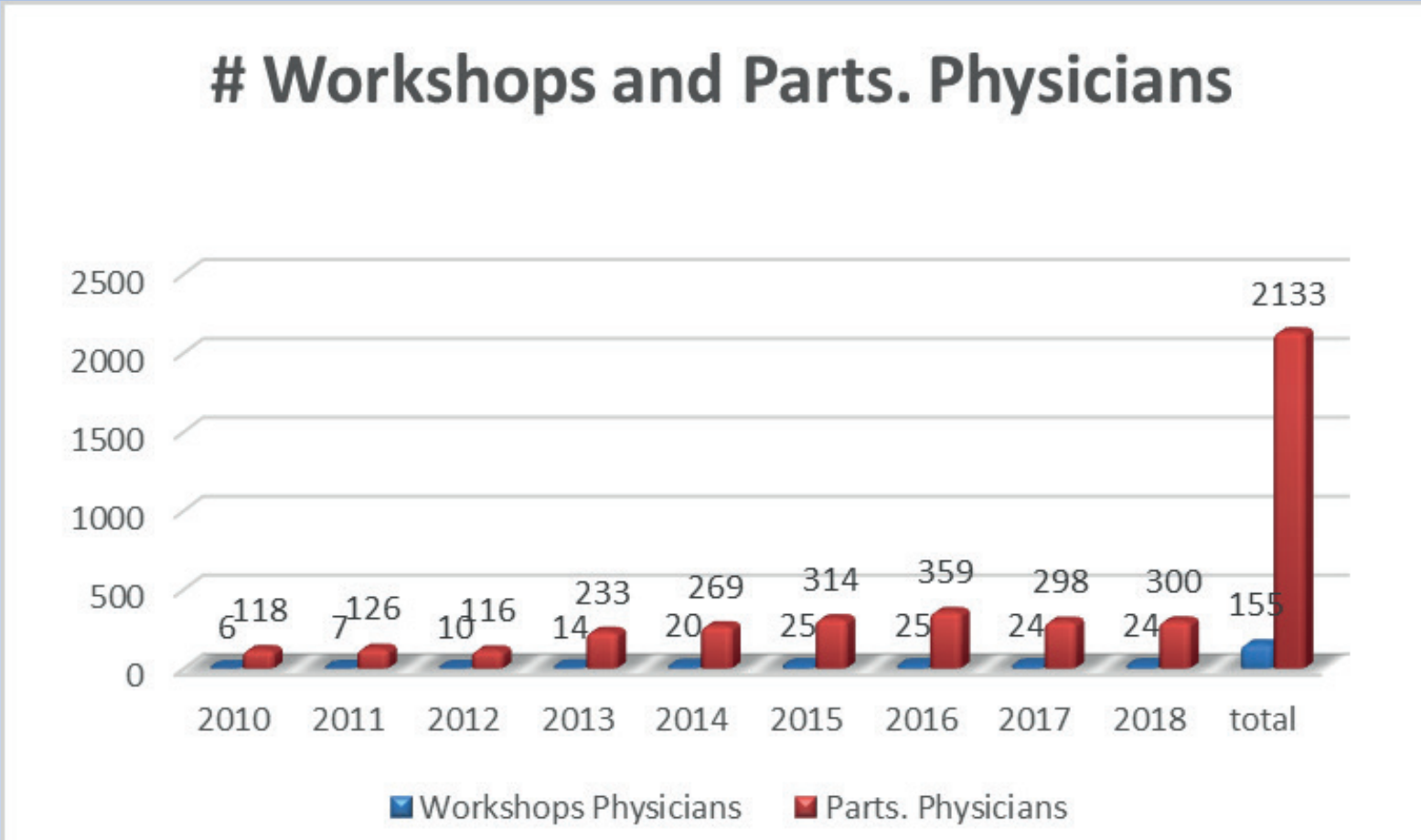
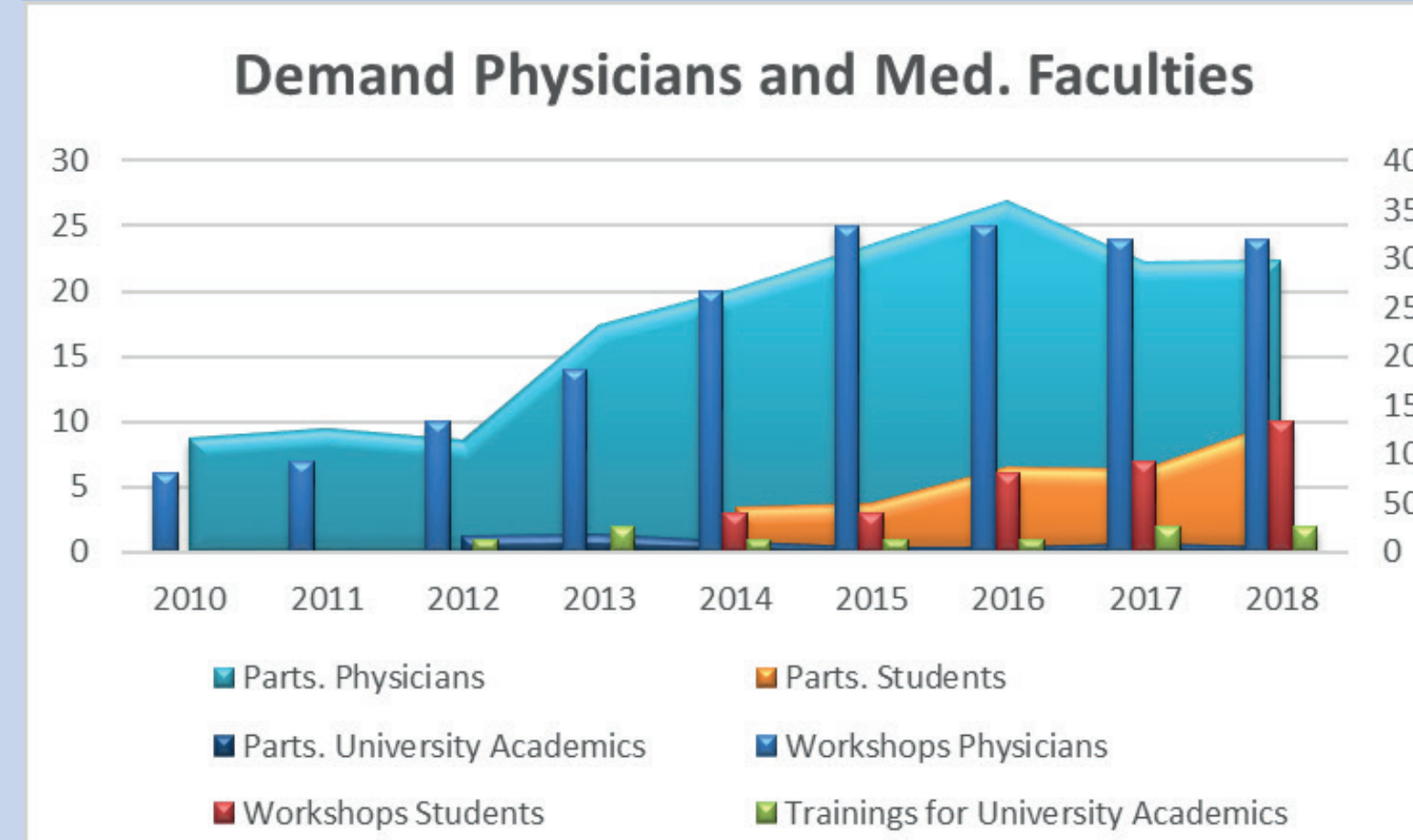
Length: 1.5 to 4 hours (physicians); 2.5 – 6 hours (medical students)

Trainer: A two-headed team of physicians and counsellors/psychologists experienced in HIV/STI treatment and prevention

Costs: Free for participants (programme funded via PKV)

Results - Evaluation 2010-2018

Quantitative indicators: Number of Workshops and Participants



Qualitative indicators

Instrument: questionnaire completed at the end of the workshop. It includes two open questions and three closed ones rating from 1 (very good) to 5 (poor). The response rate was 75,27 %.

Results:

Ø content/thematic composition: 1,4 (year 2018)

Ø Trainers' competence: 1,1

Ø Overall rating of the event: 1,3

Usefulness: 95% of the participants evaluated the workshops as very or mostly useful for their work

Answers to the open question. “What was most important?”

- Realizing the importance of sexuality in everyday life and the role physicians play
- Both referees used tabooed words in a very frank and self-confident manner - this enabled me to reduce my timidity
- Clarifying the fact that no specific sanitary measures are required for patients infected with HIV
- Shocking and thereby impressive examples of every-day discrimination and stigmatization
- Most of all I liked the role-plays to reduce your very own constraints to talk about sexuality and STIs

At the annual conference of the German Association for Medical Education (GMA) on 23 September 2017, our education module for universities was voted the “most convincing contribution to the direct improvement of patient care”.

Conclusions and Lessons Learned

- The development, implementation, outreach and continuation of the workshops and seminars has only been possible due to the excellent cooperation and partnership with experts from medical associations.
- Also highly beneficial was the presentation of our project at conferences and congresses, the publication of articles in relevant journals and the direct approach of stakeholders.
- Role-plays seem to be the most powerful element of the workshops: at the one hand, they are allowing physician and medical students to get a feeling for patients' needs and concerns, whilst being quite cost-efficient compared to employing trained actors.
- Quality assurance is highly important to ensure that the needs of the participants are met. We established a regular debriefing workflow, operate an annual train-the-trainer-course and created and maintain an internet based platform. Here, trainers can download media, PowerPoint-lectures and worksheets as well as share and discuss their experiences and expertise.

In cooperation with:



dagnä
Deutsche Arbeitsgemeinschaft
niedergelassener Ärzte in der
Versorgung HIV-Infizierter e.V.



BZgA
Bundeszentrale
für
gesundheitliche
Aufklärung

DAIG
Deutsche AIDS-Gesellschaft e.V.

