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Sexual Health

Supplementary Material

The provision of sexual and reproductive health information and services to travellers: an exploratory survey of Australian travel medicine clinicians

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Supplementary data – Copy of survey completed by Australian Travel Medicine clinicians

Section 1: ***Tell us a little about yourself***

1) What is your age? (In years) _____

2) What is your gender? _____

3) What is the postcode of your practice? _____

4) What is your role? (please tick all that apply)

- ☐ Doctor
- ☐ Nurse Practitioner
- ☐ Registered Nurse
- ☐ Enrolled Nurse
- ☐ Other (please specify) _____

5) What type of practice do you work in? (please tick all that apply)

- ☐ Dedicated Travel Medicine Clinic
- ☐ General Practice
- ☐ Hospital Based Clinic
- ☐ Other (please specify) _____

6) What is your Medical / Nursing / Health Specialisation?

_____

7) Are you a member of the International Society of Travel Medicine?

- ☐ Yes
- ☐ No

8) How many years have you practiced Medicine/Nursing/Health? _____

9) How many years have you been involved in travel medicine? _____

10) Please list what qualifications you have specify to travel medicine (please tick all that apply)

- ☐ ISTM certificate of knowledge
- ☐ Master of Public Health

- ☐ Master Public Health / Tropical Medicine
- ☐ Monash Travel Medicine Course
- ☐ Diploma Travel Medicine
- ☐ Other (please specify) _____

11) Prior to the COVID-19 pandemic (2020) on average how many travel patients were you seeing per week?

_____

Section 2: ***Tell us a little about your work in sexual health***

For this survey, a Travel Patient is any patient who presents to your service with the intention of travelling internationally for the purposes of recreation, work, or study, or has recently returned from international travel.

12) On what basis would you decide whether a patient was at risk for Sexually Transmissible Infections (STI)? (please tick all that apply)

- ☐ I conduct a sexual history / STI risk assessment on every travel patient
- ☐ Age
- ☐ Country travelling to or from
- ☐ Purpose of travel
- ☐ Identified risk behaviour
- ☐ Ethnicity
- ☐ HIV status
- ☐ Only if they raise the issue first
- ☐ I never do an STI risk assessment on my travel patients
- ☐ Other (please specify) _____

13) On what basis do you offer STI testing to your patients prior to departure? (please tick all that apply)

- ☐ I offer an STI test to every travel patient prior to departure
- ☐ If they were symptomatic
- ☐ If the patient requested
- ☐ The patient's age (e.g., young people under 30 years)
- ☐ Only if the patient is single (not in a relationship)
- ☐ The patient's risk assessment history
- ☐ Based on discussion regarding contraception

- ☐ If the patient is travelling to a high-risk country
- ☐ Nature of travel (e.g., work, study, leisure)
- ☐ I never offer STI testing to my travel patients prior to departure
- ☐ Other (please specify) _____

14) On what basis would you provide information/advice/counselling on sexual & reproductive health (SRH) to your travel patient prior to departure? (please tick all that apply)

- ☐ I don't provide SRH information/advice/counselling to any travel patients prior to departure
- ☐ I always offer SRH information as part of pre-travel advice
- ☐ As part of STI screen
- ☐ When the patient asks questions
- ☐ If patients assessed at higher risk based on patient's history
- ☐ As part of a discussion regarding contraception
- ☐ Age
- ☐ Travelling to a high-risk country
- ☐ Nature of travel (e.g., work, study, leisure)
- ☐ Other (please specify) _____

15) When discussing SRH with travel patients, do you… (please tick all that apply)

- ☐ I don't provide SRH information/advice/counselling to any travel patients prior to departure
- ☐ Direct them to online materials
- ☐ Provide written materials
- ☐ Discuss the importance of safer sex
- ☐ Discuss the importance of regular STI testing
- ☐ Provide condoms and lubricant
- ☐ Discuss the importance of STI testing on return
- ☐ Discuss safe injecting behaviour
- ☐ Discuss Post Exposure Prophylaxis (PEP) in case of HIV exposure
- ☐ Discuss HIV Pre Exposure Prophylaxis (PrEP)
- ☐ Discuss emergency contraception
- ☐ Discuss ongoing contraception options
- ☐ Other (please specify) _____

16) On what basis do you offer STI testing to travel patents on their return from international travel? (please tick all that apply)

- ☐ I do not see returning travellers
- ☐ I would not offer STI testing
- ☐ If they were symptomatic
- ☐ If the patient requested
- ☐ The patient's age (e.g., young people under 30 years)
- ☐ The patient's risk history
- ☐ Only if they had an STI test before they left
- ☐ Only if they had been to a high-risk country
- ☐ Nature of travel (e.g., work, study, leisure)
- ☐ Other (please specify) _____

17) When conducting an asymptomatic STI screen, which of the following tests would you order/offer? (please tick all that apply)

- ☐ Urine
- ☐ Pharyngeal swab
- ☐ Rectal swab
- ☐ Cervical/high vaginal swab
- ☐ Blood test

18) Which infections would you test for as part of an asymptomatic STI screen? (please tick all that apply)

- ☐ Chlamydia
- ☐ Gonorrhoea
- ☐ Syphilis
- ☐ HIV
- ☐ HBV
- ☐ HCV
- ☐ HPV/cervical screen
- ☐ HSV
- ☐ Trichomoniasis
- ☐ Other (please specify) _____

19) When consulted by a symptomatic patient, would you usually… (please tick all that apply)

- ☐ Test and treat immediately (presumptive treatment)
- ☐ Treat immediately and not test

- ☐ Test and wait for results before treating
- ☐ Refer to a specialist (in sexual health or infectious disease)
- ☐ Refer to a sexual health clinic
- ☐ Other (please specify) _____

20) When conducting an STI screen, would you: (please tick all that apply)

- ☐ Collect the specimens within the clinic
- ☐ Refer the patient to a sexual health clinic
- ☐ Send the patient to a laboratory collection site
  1.

21) What assistance would you provide a travel patient diagnosed with an STI to contact other partners (contact tracing) (please tick all that apply)

- ☐ I don't provide any assistance
- ☐ Provide verbal advice for the patient to contact partners themselves
- ☐ Provide written advice for the patient to contact partners themselves
- ☐ Refer the patient to a contract tracing website (e.g., Let Them Know, Drama Downunder)
- ☐ I would do it on behalf of the patient
- ☐ Assume Public Health will do this automatically
- ☐ Other (please specify) _____

22) Who do you discuss HIV Post Exposure Prophylaxis (PEP) with before they leave? (please tick all that apply)

- ☐ I never discuss PEP with my travel patients before travel
- ☐ Health workers
- ☐ Health students
- ☐ Male travel patient disclosing intention to have sex with men
- ☐ Other (please specify) _____

23) Who do you discuss HIV Pre Exposure Prophylaxis (PrEP) with before they leave? (please tick all that apply)

- ☐ I never discuss PrEP with my travel patients before travel
- ☐ A health worker

- ☐ A health student
- ☐ Male travel patient disclosing intention to have sex with men
- ☐ Other (please specify) _____

24) Where would you seek professional advice regarding SRH, STI/BBV testing, treatment, and contact tracing? (please tick all that apply)

- ☐ Other colleagues within the practice
- ☐ Local sexual health clinic
- ☐ National STI guidelines
- ☐ Professional websites (e.g., ASHM)
- ☐ Search the internet (e.g., Google)
- ☐ Other text books
- ☐ Other (please specify) _____

25) How would you rate your interest in undertaking further training in Sexual and Reproductive Health? (1 representing "not at all" interested, 5 representing "very high" interest) (please circle)

Not at all interested		Neutral		Very High Interested
1	**2**	**3**	**4**	**5**

26) Can you identify any particular areas of interest for future training? (please tick all that apply)

	Interested in more training
Conducting a sexual history	☐
Conducting STI testing	☐
Providing advice and information on safe sex	☐
Treating STIs	☐
Conducting contact tracing (partner notification)	☐
Advising a patient about contact tracing (partner notification)	☐
Recalling a patient for follow-up testing	☐
Providing advice and information on contraception	☐
Prescribing oral contraception	☐
Providing Long-Acting Reversible Contraception (LARC)	☐
Inserting Implant LARC	☐
Inserting Intrauterine LARC	☐
Prescribing PrEP	☐

Advising on PEP	☐
Advising on Emergency Contraception	☐
Conducting pregnancy options counselling	☐
Other areas not interested (please detail below)	☐

_____

_____

Thank you very much for your time spent completing this survey – please seal your completed survey in the provide unmarked envelope and return to one of the researchers.

For further training and support in the diagnosis and treatment of sexually transmissible infections and blood borne viruses, visit the ASHM website https://www.ashm.org.au/

STROBE Statement—checklist of items that should be included in reports of observational studies

	Item No.	Recommendation	Page No.	Relevant text from manuscript
Title and abstract	1	(*a*) Indicate the study's design with a commonly used term in the title or the abstract	2	cross-sectional survey
		(*b*) Provide in the abstract an informative and balanced summary of what was done and what was found	2	Included in the abstract (page 2)
Introduction				
Background/rationale	2	Explain the scientific background and rationale for the investigation being reported	3-4	Included in the background section (pages 3-4)
Objectives	3	State specific objectives, including any prespecified hypotheses	4	explore how travel medicine clinicians integrate SRH services into clinical practice
Methods				
Study design	4	Present key elements of study design early in the paper	5	• cross-sectional study used a structured survey, developed by a team of researchers, community service providers and travel medicine clinicians in Queensland, Australia. • An initial open-ended survey was designed and piloted within the research team which included travel medicine clinicians. • Results of the pilot testing reduced the survey down to a final 26 items, of which most were closed ended questions
Setting	5	Describe the setting, locations, and relevant dates, including periods of recruitment, exposure, follow-up, and data collection	4-5	Recruitment was conducted via purposive (through targeted emails) dissemination through an Australian professional network specialising in travel medicine, and face-to-face at the 2022 Southern Cross Tropical and Travel Medicine Conference in Brisbane, Australia. The recruitment period was between August and December 2022.
Participants	6	(*a*) *Cohort study*—Give the eligibility criteria, and the sources and methods of selection of participants. Describe methods of follow-up	4	*Cross-sectional study*: clinicians (e.g., doctors, nurses) practicing in dedicated travel medicine clinics or general practice who were currently involved in provision of travel medicine; Individuals interested in travel

		Case-control study—Give the eligibility criteria, and the sources and methods of case ascertainment and control selection. Give the rationale for the choice of cases and controls *Cross-sectional study*—Give the eligibility criteria, and the sources and methods of selection of participants		medicine but not currently practicing (e.g., research academics) were excluded
		(*b*) *Cohort study*—For matched studies, give matching criteria and number of exposed and unexposed *Case-control study*—For matched studies, give matching criteria and the number of controls per case		
Variables	7	Clearly define all outcomes, exposures, predictors, potential confounders, and effect modifiers. Give diagnostic criteria, if applicable	5	Provided on page 5 and full survey provided as supplementary material
Data sources/ measurement	8*	For each variable of interest, give sources of data and details of methods of assessment (measurement). Describe comparability of assessment methods if there is more than one group	5	Descriptive analyses were conducted to assess the frequencies and proportions
Bias	9	Describe any efforts to address potential sources of bias	NA	
Study size	10	Explain how the study size was arrived at	NA	Convenience sample was used on an unknown population size. Samples are discussed further in results section (page 6): Twenty-three eligible respondents were recruited via email (from a total of 71 members of the Travel Medicine Alliance), whilst the remaining 44 eligible surveys (from a total population of 75 attendees to a Travel Medicine conference in Brisbane, Queensland)

Continued on next page

Quantitative variables	11	Explain how quantitative variables were handled in the analyses. If applicable, describe which groupings were chosen and why	5	Descriptive analyses were conducted
Statistical methods	12	(*a*) Describe all statistical methods, including those used to control for confounding	NA	
		(*b*) Describe any methods used to examine subgroups and interactions	NA	
		(*c*) Explain how missing data were addressed	NA	
		(*d*) *Cohort study*—If applicable, explain how loss to follow-up was addressed *Case-control study*—If applicable, explain how matching of cases and controls was addressed *Cross-sectional study*—If applicable, describe analytical methods taking account of sampling strategy	NA	
		(*e*) Describe any sensitivity analyses	NA	
Results				
Participants	13*	(a) Report numbers of individuals at each stage of study—eg numbers potentially eligible, examined for eligibility, confirmed eligible, included in the study, completing follow-up, and analysed	6	Twenty-three eligible respondents were recruited via email (from a total of 71 members of the Travel Medicine Alliance), whilst the remaining 44 eligible surveys (from a total population of 75 attendees to a Travel Medicine conference in Brisbane, Queensland)
		(b) Give reasons for non-participation at each stage	NA	unknown
		(c) Consider use of a flow diagram	NA	
Descriptive data	14*	(a) Give characteristics of study participants (eg demographic, clinical, social) and information on exposures and potential confounders	6	Provided on page 6 in table 1
		(b) Indicate number of participants with missing data for each variable of interest	19-27	Provided in tables 1-4 for each variable provided
		(c) *Cohort study*—Summarise follow-up time (eg, average and total amount)	NA	
Outcome data	15*	*Cohort study*—Report numbers of outcome events or summary measures over time	NA	

		Case-control study—Report numbers in each exposure category, or summary measures of exposure	NA	
		Cross-sectional study—Report numbers of outcome events or summary measures	6-8	Provided in results and tables 1-4
Main results	16	(*a*) Give unadjusted estimates and, if applicable, confounder-adjusted estimates and their precision (eg, 95% confidence interval). Make clear which confounders were adjusted for and why they were included	NA	Descriptive analysis only was conducted
		(*b*) Report category boundaries when continuous variables were categorized	NA	Descriptive analysis only was conducted
		(*c*) If relevant, consider translating estimates of relative risk into absolute risk for a meaningful time period	NA	Descriptive analysis only was conducted

Continued on next page

Other analyses	17	Report other analyses done—eg analyses of subgroups and interactions, and sensitivity analyses	NA	
Discussion				
Key results	18	Summarise key results with reference to study objectives	9	
Limitations	19	Discuss limitations of the study, taking into account sources of potential bias or imprecision. Discuss both direction and magnitude of any potential bias	12	Strengths and limitations of the study discussed on page 12
Interpretation	20	Give a cautious overall interpretation of results considering objectives, limitations, multiplicity of analyses, results from similar studies, and other relevant evidence	12-13	Provided in conclusion
Generalisability	21	Discuss the generalisability (external validity) of the study results	12	Whilst considerable efforts were undertaken to ensure the reach of our survey to members of a professional travel medicine network, including attendees at a national conference, the sample size obtained does limit the representativeness of the data
Other information				
Funding	22	Give the source of funding and the role of the funders for the present study and, if applicable, for the original study on which the present article is based	13	Researchers L.F.K and C.L.L were supported by Australian National Health and Medical Research Council (NHMRC) Early Career Fellowship (APP1158469) and NHMRC Investigator Grant (APP1193826) respectively. The funders had no role in the study design, data collection and analysis, decision to publish or preparation of the manuscript.

*Give information separately for cases and controls in case-control studies and, if applicable, for exposed and unexposed groups in cohort and cross-sectional studies.

Note: An Explanation and Elaboration article discusses each checklist item and gives methodological background and published examples of transparent reporting. The STROBE checklist is best used in conjunction with this article (freely available on the Web sites of PLoS Medicine at http://www.plosmedicine.org/, Annals of Internal Medicine at http://www.annals.org/, and Epidemiology at http://www.epidem.com/). Information on the STROBE Initiative is available at www.strobe-statement.org.