#### **CHIPTS HIV Next Generation Conference 2020**

# MENTAL HEALTH AND ADDICTION TREATMENT SERVICES FOR MSM IN CHINA: A MIXED METHOD STUDY

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### **BACKGROUND**

- MSM are disproportionally impacted by mental illnesses and substance use disorders.
- The interplay of mental health and addiction issues fuel the HIV epidemic and jeopardize HIV prevention efforts among MSM.
- Mental health/addiction treatment and care are often lacking and suboptimal

### **AIMS**

#### Quantitative study:

- Examine the presence of mental health and substance use issues
- Document service reception and service gap
- Identify the factors associated with service fulfilment

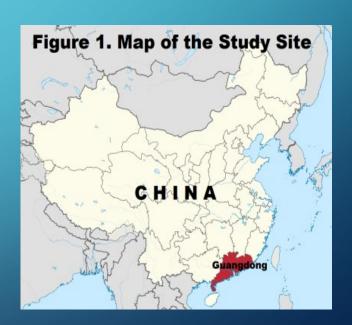
#### Qualitative study

- Understand preferences in mental health/addiction service utilization
- Identify the barriers to service seeking

### **STUDY SITE**

#### **Guangdong Province**

- The most populous province in China with a large number of domestic migrants
- Tolerant social atmosphere towards MSM
- A concentrated HIV epidemic among MSM: approximately one third were infected through male homosexual transmission



# **QUANTITATIVE STUDY**

**Design:** cross-sectional study

Data collection: self-administered online survey

Platforms: Guangzhou Tongzhi (gztz.org), Lingnan Partner (https://www.x-data.top/Lingnan/portal/index.html) and associated WeChat groups (approximately 84,000 MSM members)

Eligibility: 1) At least 18 years old; 2) Being male at birth; 3) Having had sex with men during lifetime; and 4) Currently residing in Guangdong Province

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以下为背景说明



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# **MEASURES**

- Demographic and background characteristics
- Mental health symptoms and substance use (severe enough to interfere with their regular life in the past year)
- Service reception for each presenting symptom
- Preferred health facility for mental health and addiction services

#### **ANALYSIS**

- Descriptive analysis of service fulfilment (having received healthcare services for all experienced symptoms during the past year)
- Logistic regression: to identify factors associated with health service fulfillment

#### PARTICIPANT PROFILE

#### **520 MSM**

- Average age = 28.2 (SD=5.8) years
- 53.1% (n=276) had undergraduate or higher education attainment
- 66.0% (n=343) had a full-time job
- Median annual income = 100,000 Chinese yuan (approximately 15,000 USD)
- 60.2% (n=313) were local residents with Guangdong hukou
- $\bullet$  46.7% (n=243) lived alone, and 22.7% (n=118) lived with a male sex partner
- 31.2% (n=162, 31.2%) had not disclosed their sexual orientation to the public

# **PSYCHIATRIC SYMPTOMS AND SERVICE RECEPTION**

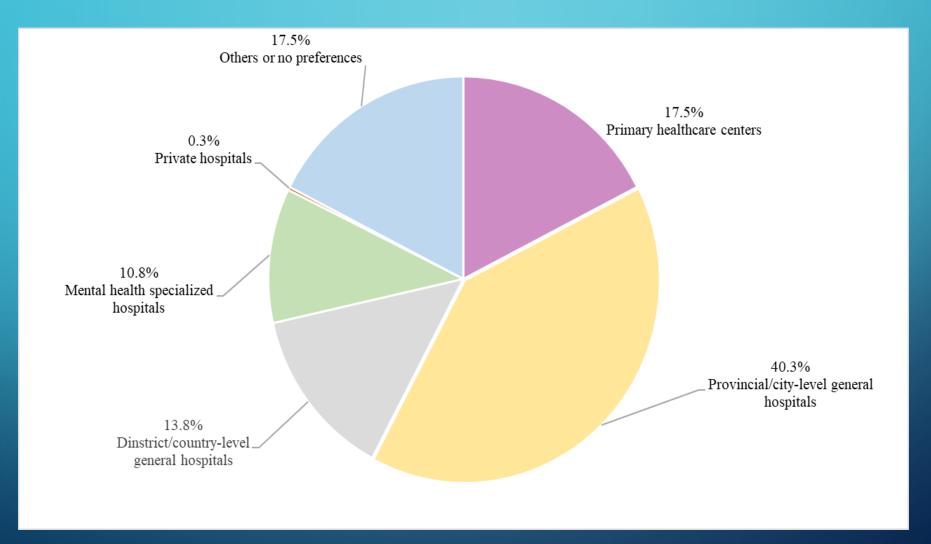
	Having experienced symptoms		Having received corresponding health services	
	n	%	n	%
Depressive symptoms	144	27.7	71	49.3
Anxiety	213	41.0	97	45.5
Sleeping disorders	212	40.8	114	53.8
Substance dependence	79	15.2	47	59.5
Memory loss	189	36.4	78	41.3
Other mental health issues	44	8.5	23	52.3
Any mental health issues	403	77.5		
Number of mental health issues (mean; SD)	1. <i>7</i>	(1.3)		

### **SERVICE FULFILMENT**

Among the 403 who experienced any mental/substance use symptom in the past year, 169 (41.9%) had fulfilled medical treatment for all experienced symptoms

	Odds ratio	P-value
Age	0.96	0.0469
Having a Bachelor's degree or higher	0.49	0.0016
Having a fulltime job	0.79	0.3448
Annual income more than 10,000 USD	2.55	0.0007
Being a local residence	1.62	0.0540
Cohabiting with spouse/partner/family	2.02	0.0034
Not having disclosed MSM status	0.50	0.0058
Experienced stigma in healthcare	1.02	0.6705

# PREFERRED HEALTH FACILITIES



# **QUALITATIVE STUDY**

In-depth interview: 30 MSM

**Recruitment:** 1) Online recruitment of those who reported psychiatric symptoms during the online survey; and 2) Peer referral

**Eligibility:** 1) At least 18 years old; 2) Being male at birth;3) Having had sex with men during lifetime; 4) Currently residing in Guangdong Province; and 5) Self-reported psychiatric symptoms/substance use

# **FINDINGS**

#### **Barriers to service seeking**

- Misconception of mental illness and mental health treatment
- Unaware of the location of services
- Mistrust of service providers' expertise
- Financial burden
- Stigma/confidenciality

### **DISCUSSION**

- There is an urgent need to provide mental illness/substance use prevention, identification, and curative service for MSM in China
- Education to increase the awareness of mental health
- New technology to promote self-screening and confidential counseling
- Involvement of the primary care systems and families

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