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S.H.E.I.R.

► Sexual Health Educator Internet Resource



This manual is designed for use by workers in Ontario who provide online Internet outreach services to gay, bisexual, gay/queer trans men and other men who have sex with men. It was adapted from a manual produced by Legacy Community Health Services (formerly Montrose Clinic), 215 Westheimer Road, Houston, TX 77006, www.montroseclinic.org. It also includes guidelines and procedures being used by Ontario Internet outreach programs. The Internet intervention outlined in this manual is currently being evaluated and should not be considered an evidence-based intervention.

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► Background

The Internet and Sex

For many gay, bisexual, gay/queer trans, and other men who have sex with men (MSM¹), the Internet has become a means to socialize and to find sex partners. Internet users can watch pornographic videos online and access voyeur cameras to view one or more people having sex in real-time, as well as search for compatible sex partners on a variety of websites and through real-time communication in chat rooms. Around one in three gay men use the Internet to find casual sex partners.² The online venues for meeting sexual partners are as easy, if not easier, than meeting men at a bar or bathhouse.

Anecdotally, gay/queer trans men and HIV positive men may place particular value on the Internet as a means of finding sexual partners because of the freedom the medium provides to allow men to disclose their trans or HIV status in relative anonymity prior to a sexual hook-up. In fact, Internet users are not completely anonymous since they often exchange some form of identifying information with others. Online profiles range from no information to neighbourhood of residence, sexual interests, and personal statistics (stats). Pictures range from g-rated to x-rated: some where the person's face is shown and others where their face is cropped out or blurred. What is not commonly seen in online profiles are phone numbers or addresses, which many online venues forbid or discourage. Note: Each computer functions with its own Internet access number, referred to as an IP address (Internet Provider).

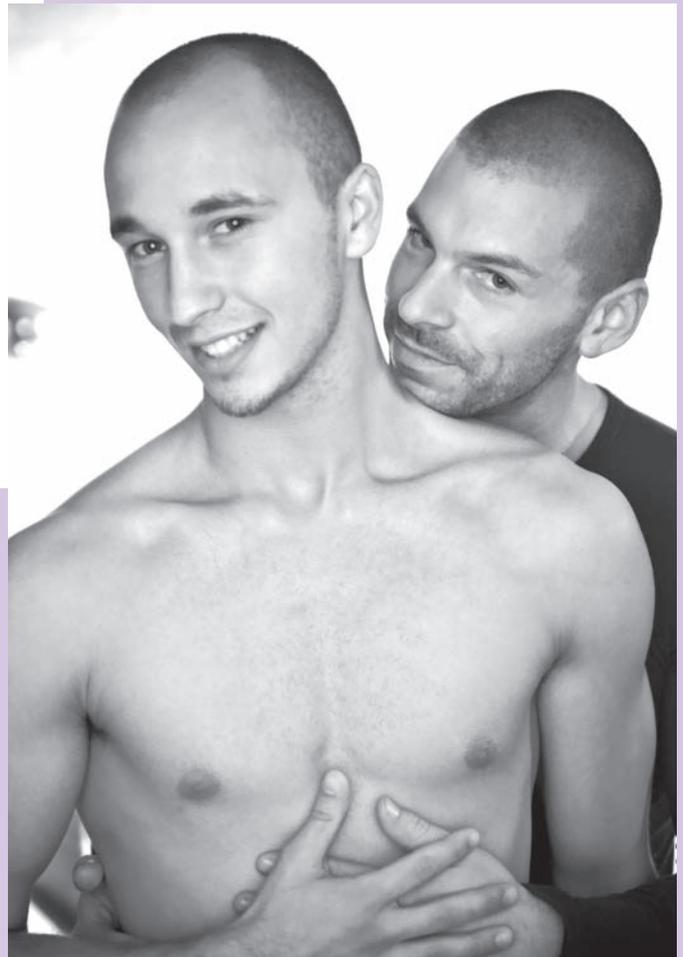
Who's Online? Three in 10 Online Canadians have a Social Network profile.

Nearly four in 10 Internet-connected adults in Canada (37 percent) have visited an online social network or online social community, and three in 10 (29 percent) have placed a profile on at least one such site, a new Ipsos Reid study has found, reports Marketing Charts.

Source: *Ipsos Canadian Inter@ctive REID Report Online Socialization, Social Networking and Online Communities* October 4, 2007

Opportunities for Internet Outreach

The Internet has also become a primary source for health information – information that can influence the actions people take in relation to their health. This makes the Internet a useful environment for reaching gay/MSM for the purpose of HIV prevention. In fact, online sex-seeking populations have indicated support for sexual health work in chat rooms and appear to be open to receiving information in this way. This doesn't mean every man you encounter online will want to talk to you about his sexual health, but it is a sign that many men appreciate the presence of sexual health workers in chat rooms and other online environments such as social networking sites. Social networking sites (SNS), like MySpace, Friendster, or Facebook, and sexual





Online Socialization, Social Networking and Online Communities

Younger Canadian adults are more likely to have visited such websites, and placed a personal profile on at least one of them:

- Nearly two-thirds of 18-34-year-olds (63 percent) have visited an online social network or community, and more than half of (55 percent) have placed a personal profile on at least one.
- Three in ten 35-54-year-olds (29 percent) have visited such a site, and one in five (21 percent) have placed a personal profile on one.
- One in five Canadians age 55 and older (20 percent) have visited an online social network or community, and one in ten (9 percent) have placed a personal profile on one.

Source: Ipsos Canadian Interactive REID Report Online Socialization, Social Networking and Online Communities October 4, 2007

networking sites, like Manhunt, Adam4Adam, and M4MWorld, are additional venues that can be used to conduct Internet outreach. SNS are used for a variety of reasons including to enhance existing relationships, to form new relationships, sexual and otherwise, to express oneself, as a communication tool. How a SNS is used will vary by demographics, geographic location, behaviours, interests, etc. For example, the SNS Facebook was created by a college student as a way to stay in contact with other college students; hence, the site's membership base at the time was generally those that are of college age. The website Manhunt is a website created for the gay/MSM community and is adult in nature. The average age for a Manhunt member is generally older than the average age for a member of a site such as MySpace. As sites grow their population tends to diversify. When it was created, MySpace was a site that was intended for musicians and users under 30 but, as the site grows in popularity, it has become more diverse in its membership.

Strictly speaking, there has traditionally been a distinction between social networking, dating, and 'hook-up' sites. All SNS are created to connect people with similar interests, but it is important to be aware of the differences between traditional SNS such as Facebook, Friendster, or MySpace; dating sites such as Match, BlackPlanet, or eHarmony; and hook-up sites such as Manhunt, Adam4Adam, or M4MWorld.

There are some basic functions and features that most SNS have in common, such as a search feature, profiles, and a proprietary e-mail system, where member e-mail can only be accessed within the website. It is recommended that agencies seek permission from these sites prior to conducting outreach on them, as many of them have traditionally not allowed public health providers to conduct outreach prevention services.

¹For many of us the acronym MSM (men who have sex with men) is one that we are unfamiliar with. It is a relatively new term that was coined by the medical and social work fields to describe men who do not necessarily self-identify as gay or bisexual but whose behaviours put them at significant risk for the contraction of HIV and other sexually transmitted infections. See Section II: Internet Clients.

²Weatherburn, et. al, *Net Benefits: Gay men's use of the Internet and other settings where HIV preventions occurs*, Sigma Research and Community HIV and AIDS Prevention Strategy, June 2003.

About this Manual

This manual has been produced to help you, the educators who provide direct, online HIV Internet outreach prevention services to gay, bisexual, gay/queer trans men, and other MSM. The language used throughout the guide can be graphic, reflecting the language men use on the Internet. We recognize that technology and gay cultures continue to change, so specific website locations or recommendations listed in this manual may become obsolete.

We also recognize that your audience/chatters don't necessarily have a simple, single identity. They will come from wide-ranging socio-economic backgrounds, have varying degrees of education and language skills, and be of various ethnicities, gender identities, and differing HIV status.

When interacting online with chatters, you will witness inappropriate use of language and be presented with accounts of bullying, racism, and discrimination. As an outreach worker in this environment, you must be sensitive to your own actions and use of language: your calm, reasonable approach will help to promote an online culture that fosters mutual respect, and an online environment more conducive to sexual health.

► 1. Developing An Internet Outreach Program

Goal

The goal of an Internet Outreach Program is to use chat rooms and other Internet venues to provide evidence-based risk reduction information so gay, bisexual and other MSM can negotiate sexual risks in a way that fits with their own personal values and comfort levels.

Objectives

- To increase knowledge and awareness of signs and symptoms of HIV and other sexually transmitted infections (STIs).
- To increase awareness of local resources for HIV/STI testing and treatment services.
- To refer cyber clients to web-based resources and local health care services.
- To promote positive health-seeking behaviours to gay/MSM who use the Internet.
- To increase the capacity of gay/MSM to understand and choose activities that reduce the risk of HIV and STI transmission.
- To foster an Internet environment of mutual respect and understanding that contributes to sexual health and supports the diversity of men who cruise for sex and friendship online.

Principles Guiding Internet Outreach Services

Client-centred Service. Sexual health educators should use a client-centred approach and strive to create an online environment of empathy, unconditional positive regard and acceptance. They should accept their clients where they are in the moment and provide support.

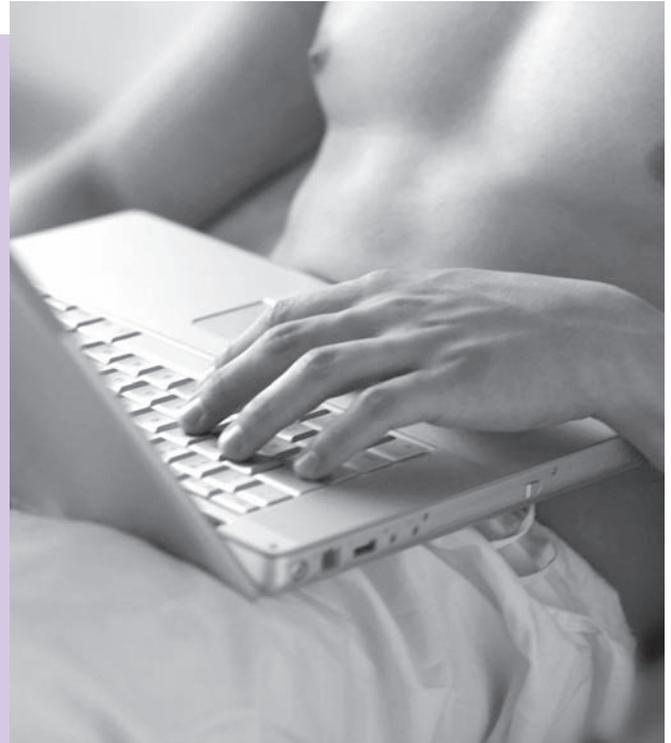
Training. Service providers must be skilled in the use of the Internet.

Confidentiality. The organization should have strict policies on confidentiality.

Best Practices. Programs and activities should reflect best practices in delivering health education on the Internet.

Quality Assurance. The organization should develop quality assurance measures.

Cultural Competency. Sexual health educators should be representative of the men to whom they are providing services



The environment in which men have sex can affect their ability to play safe.

(in terms of race, ethnicity and sexual culture) and/or be able to provide services in a culturally competent manner.

Internet outreach workers should strive to conduct Internet outreach in a culturally competent manner. It is important to recognize that there is a diversity of men cruising online. Cultural competence can refer to an understanding of the sexual culture in which gay/MSM cruise. Cultural competence can also refer to an understanding of how racial and ethnic differences can impact on a man's ability to play safe.

There are many determinants of health and while information provision and service access are a high priority for outreach, other factors such as a man's sexual or gender identity, race, mental health, social support network, socio-economic status, HIV status, and other factors can all impact on the ability of gay/MSM to play safe. Outreach workers can play a role in fostering an online environment that is empathic and supportive of the diversity of men who cruise for sex and friendship online.

Tip from the Field: Promoting Culturally Competent Communication

Active Listening And Learning:

Take the time to learn about the experiences of men from different cultures and communities. Listen carefully to the language used by different communities to talk about sex and sexuality.

Admit Your Mistakes:

Don't waste valuable time trying to offer excuses. Admit you were wrong. Learn the lessons. Move on.

The Golden Rule:

Treat everyone the same way you would want them to treat the person you love most in the world.

Don't Generalize:

When we make sweeping generalizations about people (Example: You Know How They Are), listeners may conclude that we lack cultural literacy and social intelligence. Source: www.theculturalcoach.com/cultural_competency.html

Avoid Assumptions:

Men use different words to describe their sex lives and their bodies. Avoid assuming the nature of the bodies or the sexuality of the men you encounter and follow their cues as to the kind of language they find appropriate.

Because Internet outreach normally exclusively allows for written communication, it is vital that outreach workers build their competence in the language that a diversity of gay/MSM use when they cruise for sex online. Trans men may use different language to describe their bodies than non-trans men. There may be short hand terms used more commonly by men from particular racial or ethnic backgrounds or who participate in particular sexual scenes within the gay/MSM communities. A key element of any successful HIV/STI prevention program is an understanding of the community within which your prevention activities take place. And this includes knowledge of and comfort with the language of gay/MSM in your community.

Gay and bisexual men who already use the Internet to cruise for sex may be best situated to provide service that is culturally and linguistically competent. For this reason, it is recommended that outreach programs targeted to gay/MSM draw their staff and volunteer resources from the gay/MSM community, particularly from men who use the Internet to meet sexual partners. For sexual health educators that do not have that direct experience, working towards gaining that competency is vital. See Section 3, Tools and Techniques.

Spending time on Internet sites popular with the target population or where members of the target population congregate will help outreach workers gather information and learn about the population. Conducting a community assessment may also help program planners and staff better understand the community in which they are conducting Internet outreach. It is also recommended that periodic assessment or quality assurance activities be conducted to ensure the ongoing cultural competence of the program.

Linguistic Competency. Sexual health educators should be competent in the language that diverse gay/MSM use when cruising for sex online.

Roles and Responsibilities of Sexual Health Educators and Outreach Workers

It is the role of the sexual health educator to promote healthy behaviours to men who use the Internet to communicate with other men. Sexual health promotion should be targeted to men who seek out sex partners on the Internet and should:

- promote a range of sexual health options within a risk reduction paradigm (i.e., identify ways to have good sex with as little risk of HIV as possible).
- encourage harm reduction techniques for alcohol/drug use (i.e., strategies for using drugs or alcohol more safely).
- provide online educational support for cyber clients.

As with outreach on the street or in bars/clubs, online outreach requires sexual health educators to take a proactive approach to reach online contacts while not interfering in their pursuit of online sex.

It is also the role of the sexual health educator to promote health-seeking behaviours by providing links to online resources that can give cyber clients more information and by making referrals to health care services. Promotion of health-seeking behaviours should:

- provide cyber clients with web-based information and online resources such as gayhealth.com, thebody.com or catie.ca.
- provide contact information for local health care service providers.
- if appropriate, recommend regular sexual health check-ups, including testing for HIV (for men who are negative or unknown status).

It is the responsibility of the sexual health educator to provide quality health education and resources to gay, bi, gay/queer trans men and other MSM who access the Internet. Activities should comply with the agency's policy on confidentiality. Sexual health educators should:

- Document private chat room discussions or email exchanges only in accordance with agency protocols.
- Keep track of all referrals on a form best suited to your agency's reporting practices.
- Constantly check your e-mail account and respond to any e-mail in a timely fashion.

It is *not* the role of the sexual health educator to discourage sex or to judge men who are online seeking sex with other men or who are using drugs or alcohol. Sexual health educators should be aware of the full range of sexual activities enjoyed by gay, bisexual, gay/queer trans men and other MSM. It is also *not* the role of the sexual health educator to make decisions for men or tell them what they should and should not do. You should not make statements that could be construed as condemning, discriminatory, or judgmental.

Tip: You may find it helpful to speak with your counterparts across the province who are already working with volunteer educators.

Use of Volunteers

Volunteers, with effective training, can greatly enhance Internet outreach services.

Gay and bisexual men who already use the Internet to cruise for sex may be best suited to provide service that is culturally and linguistically competent. In a volunteer peer educator program, trained, self-identified members of the client population provide STI/HIV education to their peers. This role-model method of education can have added benefits beyond the obvious one of extending outreach services across a much broader community: by involving clients directly, it can actually move community norms toward a better awareness of sexual health issues long after the professional service providers are gone.

When working with volunteers, consider using the following protocols:

- All volunteers should have fully completed your agency's basic volunteer training.
- All volunteers should be fully trained on Internet outreach protocols, specifically those related to safety, confidentiality, and ethics.

- As part of their training, volunteers should complete a series of role-playing conversations with the agency supervisor.
- New volunteers should work with a more experienced web outreach "buddy" – this allows online outreach workers to support each other effectively and cover a larger number of chat rooms during a shift.
- All website accounts should be maintained by the program director, including username and passwords. A volunteer should never use his/her own personal account to conduct outreach on behalf of the agency.
- All volunteers should focus on marketing-related, outreach topics such as promoting an agency's upcoming testing event or other health-related services, unless they have been through an agency-approved training program and can provide other services (e.g., counselling).
- Volunteers should complete a log after each outreach session, recording any incidents.
- Volunteers should be closely monitored by trained staff and should be provided with regular feedback.

Tip from the Field

A sexual health educator should be able to:

- Identify and manage his or her own personal biases and preferences.
- Accurately view issues or problems through the perspective of many cultural communities.
- Acknowledge cultural influences and admit to cultural conflicts where appropriate.
- Be aware of and avoid assumptions they hold about the men they encounter online, such as the nature of men's bodies and the language used to describe them (e.g., trans men may describe their genitals as a "man hole" or "cock pit").
- Work with the language of the men they encounter to describe sexual acts and parts of a man's body.
- Avoid assumptions about the sexual identity of the men they encounter.

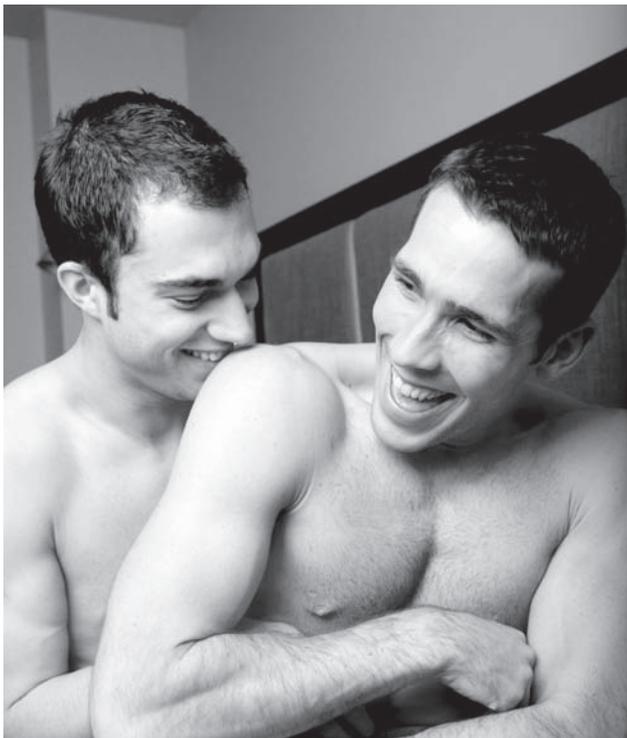
► 2. The Internet Environment

Internet Clients

Some Internet clients self-identify as gay, bisexual, or gay/queer trans men. These men are generally fairly open about their sexuality and reasonably knowledgeable about sexual health issues, and can even be willing to offer their services as health educators themselves.

A large portion of Internet clients, however, will be less forthcoming or knowledgeable about their own sexuality. There are many reasons why some gay, bisexual, gay/queer trans, and other men who have sex with men choose not to self-identify as anything other than heterosexual, including:

- Internalized homophobia.
- Religious beliefs and constraints.
- Cultural constraints/stigmatization that could contribute to social isolation and physical harm.
- Being from a community or culture that does not have affirming language to describe a "gay" person, despite accepting some homosexual behaviours. Men who engage in these behaviours may not see themselves as "gay".



The "Cruising" Culture

The term "cruising" originally emerged as a code word in gay slang. Those "in the know" would understand the speaker's unstated sexual intent, while most heterosexuals hearing the same word in the same context would normally misread the speaker's intended meaning. This served (and in some contexts, still serves) as a protective sociolinguistic mechanism for gay men to recognize not only each other, but those who may wish to do them harm in broader societies noted for their homophobia. (http://en.wikipedia.org/wiki/Cruising_for_sex)

It's important to recognize and acknowledge several key features of the cruising culture, which often play a role in how men chat with each other in the chat rooms, including:

The highly sexualized gay/MSM culture. Sex is often a high priority and focus for many men whenever they are in a cruising environment with other gay, bisexual, gay/queer trans, and other men who have sex with men, such as in a bar or online.

Extreme emphasis on body image and youth. The ideal of buffness (muscularity) and leanness, and the valuing of whiteness, are often privileged as ideal beauty. Men who do not fit this 'ideal' can feel less attractive, even socially isolated, and this may contribute to sexual health risks out of fear that they will be rejected or ridiculed if they try to negotiate safe sex.

Anonymous sexual encounters. Some men have anonymous sex and use the Internet to locate partners. Other members of a chat room can occasionally feel that "all" men engage in these sort of sexual encounters, and make their sexual health choices based on this faulty perception. ►

These descriptions – which are not meant as criticisms or judgements -- are generalizations and do not apply to all men who are a part of the gay/MSM community at large or the cruising subculture.

The need for secrecy. Secrecy has long been – and remains – a core facet of the gay/MSM culture, and it has found a well-suited ally in the Internet, where chatrooms and cruising sites provide a high sense of anonymity. Many MSM have female partners (i.e., wives, girlfriends) and children. These clients have an obvious need for secrecy. In these cases, open-ended questions become especially important, as the answers can lead sexual educators to provide sexual health information not only for the client himself, but also for the significant others in his life.

Some men require secrecy because they fear the physical (i.e., gay-bashing) and emotional consequences of homophobia in their communities. Some men face rejection from their ethnic or religious communities – a problem that may be particularly challenging for men from more recent immigrant communities already facing challenges that arise through the immigration and settlement process. Other MSM simply feel personal guilt or shame, and require secrecy for that reason alone.

Regardless of the cause, secrecy can leave MSM feeling prohibited from accessing sexual health care information and

supplies specific to their sexual situations, as they are not able to speak to family doctors or other professionals about the realities of their lives. The need for secrecy may limit their ability to make informed choices about their sexual health and increase their risk of acquiring HIV/AIDS and other STIs.

Types of Internet Communication

Gay, bisexual, gay/queer trans men, and other MSM typically use three types of Internet communication to connect with other men: chat rooms, instant messaging/e-mail and personal ads, profiles and bulletin boards. Chat rooms are similar to the bars, clubs, or bathhouses where the outreach health educator provides prevention services, while Instant Messaging can be similar to face-to-face counselling and testing or other individual level intervention (ILI). At times chat rooms can be slow and devoid of chatters just like a bar can have only a few patrons.

Table 1 describes these three types of Internet communication as well as how sexual health educators can use them to deliver health education.

Table 1: Types of Internet Communication

Type	Description	Our Role
Chat room	<p>A type of online communication where two or more people can interact using their keyboards in real-time. Most chat rooms don't require users to have any special software; those that do, such as Internet Relay Chat (IRC) allow users to download the software from the Internet. Users register in a chat room website of their choice, choose a user name and password, and then log into a particular room (most sites have multiple chat rooms). Typically the user accesses a chat room with a defined topic, interest, or geographic location (e.g. Canada/Ontario/London). As the user enters the chat room, he will see a list of the people currently online – and those users are alerted that another person has entered the chat room. To chat, a user types a message into a text box. The message is almost immediately visible in the larger communal message area, and other users can respond. Since all the simultaneous users in a chat room can see each other's messages, chat rooms are considered public spaces. Users can enter chat rooms and read messages without sending any, a practice referred to as lurking.</p> <p>Because chat room messages are spontaneous and instantly visible, there is a potential for abuse, which may or may not be intentional. Site hosts typically post a frequently asked questions (FAQ) list to guide users to appropriate chat room behaviour, such as introducing oneself when entering a room, making it clear when one is directing a question or response to a specific user, and reporting disruptive users (i.e., people who verbally abuse other chatters, monopolize the conversation or disable it by repeatedly typing the same word or phrase into a conversation, a practice known as scrolling.)</p> <p>Chat rooms can focus on virtually any aspect of human endeavour or interest, including many of a sexual nature. The culture in these chat rooms allows online "scenes" to develop for sexual stimulation and facilitates the establishment of face-to-face encounters. Chatting via the Internet has the advantage of helping users find compatible sex partners in a relatively brief amount of time.</p>	<p>During a variety of day- and night-scheduled hours, sexual health educators enter locally based chat rooms. Educators introduce themselves to the chat room and publicly offer a one-on-one chat with anyone in the room through instant messaging or via e-mail. They also post bulletins related to wellness promotion, and announce they are available to discuss wellness issues with chatters who request it.</p>

Type	Description	Our Role
<p>Instant Messaging and E-mail</p>	<p>Any two chat room users can have an immediate, more private interaction through Instant Messaging – or IM, IMing or Privating (pvt). Instant messaging differs from ordinary e-mail in the immediacy of the message exchange. It also makes a continued exchange simpler than sending e-mail back and forth. Most exchanges are text-only; however, some services allow voice messaging and file sharing.</p> <p>For IM to work, both users must subscribe to the service and be online at the same time, and the intended recipient must be willing to accept instant messages. Anyone who attempts to send an IM to someone who is not online or not willing to accept IMs will receive a notification that the transmission cannot be completed. If the online software is set to accept IMs, it alerts the recipient with a distinctive sound, a window that indicates that an IM has arrived (allowing the recipient to accept or reject it), and/or a window containing the incoming message itself.</p> <p>Instant messaging is the mode that squirt.org, gay.com, yahoo!, and other online venues offer to allow their users to communicate with each other. These exchanges between users can be conducted with someone next door or with someone on the other side of the world, and can be ended by either user at any time. They may be brief or they may result in ongoing relationships. Among gay, bi, gay/queer trans men and other MSM, IM is often used to exchange sexual interests or fantasies and may lead to cyber sex (similar to phone sex only the words are typed rather than spoken) or to a "real-time" sexual encounter or "hook-up."</p>	<p>Sexual health educators use the IM feature within a chat room to talk one-on-one with individuals who want a private discussion about general sexual health information, HIV/STI risk reduction strategies, HIV/STI testing options, or non-judgmental, sex-positive, supportive dialogue.</p>
<p>Personal Ads/Profiles and Bulletin Boards</p>	<p>Encounters can also be facilitated through sexually-oriented, commercial websites that carry personal advertisements or advanced profiles; these sites generally have complex search engines to make finding compatible sex partners very easy. They also often have bulletin boards where users can post information about their sexual interests, as well as other information (such as travel itineraries) that can facilitate sexual encounters.</p> <p>The following is a list of a few of the websites that are designed for men who want to find sex partners:</p> <ul style="list-style-type: none"> • M4M4sex.com • Communalstall.com • Cruisingforsex.com • Craigslis.com • Bareback.com • Barebacksex.com • Men4sexnow.com • men4men.com • comguys4men.com • adam4adam.com • priape.com • squirt.org <p>Men have also adapted the use of other sites to accommodate the search for sex:</p> <ul style="list-style-type: none"> • kijiji.ca • gay411.com • myspace.com • facebook.com • irice.org • downelink.com • canoe.com • gay.com • dosti.ca • snehithan.ca 	<p>Sexual health educators can use personal ads and profiles on a variety of websites to provide educational and referral information. Some sites may require approval for these types of ads, so sexual health educators should contact each site prior to posting, if in any doubt.</p>

Internet Rules and Protocols

Sexual health educators utilize a variety of websites and Internet chat rooms to conduct outreach activities.

ISP and Website Terms of Service

Every Internet service provider (ISP) and website has its own Terms of Service that can include rules of user conduct, regulations, privacy policies, and more. Site administrators can terminate the accounts of anyone that does not follow the site's rules.

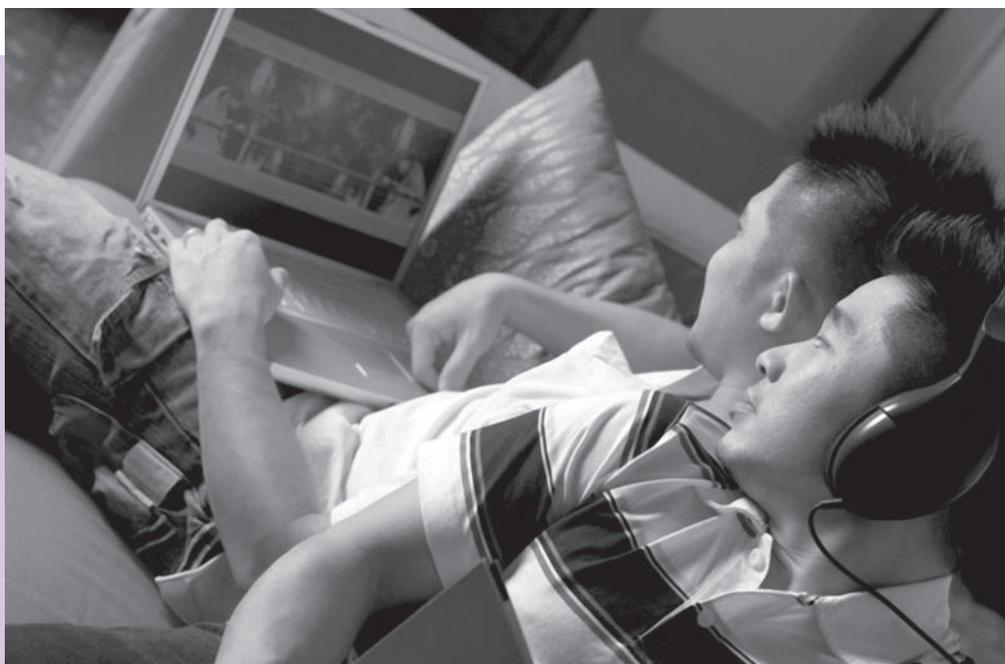
Some web sites have specific rules and policies that users – including outreach programs – are expected to follow. For example, some personal ad websites (e.g., bareback.com, M4M-World.com) prohibit community-based organizations from posting profiles, messages or personal ads, or communicating with its members online. However, other websites (e.g., manhunt.net, which is specifically geared for men who are seeking sex with other men) allow community-based organizations to perform outreach and post banner ads on their site as long as agencies apply for a membership and abide by their rules and regulations.

Sexual health educators are encouraged to look for other sites or areas of the web that allow AIDS service organizations and public health agencies to place free personal ads or profiles. They should also read and understand the terms of service, privacy policies and other guidelines on all sites where they are working, and avoid violating any guidelines.

Chat Room Norms

Sexual health educators should be aware of chat room norms and values – which can vary from room to room. Here are some courtesy tips from chat rooms:

- Be courteous and respectful at all times.
- Don't type in all caps; it is considered to be the equivalent of shouting in cyberspace.
- If you have to step away from the computer or are actively chatting in more than one IM, tell the chatters you will "be right back" (brb).
- Don't ignore IMs unless they are from potentially abusive chatters (see page 28).
- Respond to all email, even if you have to be brief or simply give a referral.
- If you need to step away from the computer for a period of time, consider typing "if I don't respond right away I may be away from my computer, but if you leave an IM or email address I will get back to you as soon as possible."



► 3. Tools And Techniques

Connecting with Clients

Conducting outreach to gay/MSM on the Internet is similar to conducting outreach to gay/MSM in community settings. It's important to understand the population you serve. Spending time on Internet sites popular with the target population can help outreach workers gather information.

Sites such as squirt.org, manhunt.net and gay.com are some of the primary online venues but there are many other possible outreach venues. Many sites cater to the diversity of men in the gay/MSM communities. Some ethnic, racialized, gay/queer trans and poz (HIV-positive) communities have particular sites or chat rooms where they connect with other men with a similar background or experience. Educators may seek these sites out on their own or learn about them from men online.

Outreach workers are part of the online community they serve, and it's important that men trust the workers and see them as peers and allies in their sexual health. Workers can use standard outreach education skills to turn the conversation to HIV/STI prevention or health promotion. At the same time, they shouldn't view a social chat as a waste of time. Social interactions may one day lead to more significant sexual health interactions and should be seen as an important part of building rapport with the community.

Maintain appropriate boundaries, keeping in mind that you are not a professional therapist and are not cruising for sex.

Creating an Online Profile

Placing a profile or ad on personal ad sites is a good way to promote online outreach services. The online profile of each sexual health educator is a very important element of outreach. Chatters and cyber clients can learn a lot about you, and the education and prevention services you offer, with one quick glance at your profile. Chatters who see your screen name in a chat room and click on your profile need to know who you are, who you work for, what your purpose is, and how you can help them. Because some chatters may only read your profile and not seek you out for an IM session, you should include some educational information – and the link to your outreach website – in your profile.

The tone you use in your profile can affect whether or not men will want to connect with you. If your profile is overly professional, clinical or unfriendly, you will not receive many responses. It is okay to use simple, fun language to describe who you are and what you do. You want men to relate to you and to see you as a trusted source of information – someone who will be affirming of their sexuality.

What's In ...

The following **essential** elements are important for your online profile:

- Identify yourself as a sexual health educator for your agency.
- Include an invitation to IM, private, or e-mail you if they have questions about sexual health, want to talk about safer sex, etc.
- Include a link to your agency website.

(Note: This list is not exhaustive. Decide what information is appropriate for your agency's outreach program.)

What's Out ...

Keep in mind the need to maintain appropriate boundaries in your role as an online educator. Some information is inappropriate and crosses the line, and should not be put into your online profile, including:

- Personal sex statistics, such as penis size, sexual position of choice, or sexual desires. (If a site requires you to include this type of information in your profile, select options that relate to safer sex.)
- Personal e-mail addresses or websites/homepages/blogs.
- Personal cell phone numbers, home phones, pagers, etc.
- Personal pictures or statements saying you can e-mail personal pictures.
- Links to websites that sell products not related to sexual health.
- Links to pornographic websites or sites that sell pornography.
- Discriminatory or judgmental statements. ►

A Sample Profile

Name:	safersexchatACOL
Location:	London
Gender:	Male
Marital Status:	I am a sexual health educator and am here to chat with anyone who has questions about sexual health, HIV, syphilis, STIs, and more.
Hobbies & Interests:	Did you know there is a syphilis outbreak in our city? IM me to discuss the signs and symptoms of syphilis and how to protect yourself and your sex partners.
Favorite Gadgets:	condoms and lube
Occupation:	SHEIR is a program to promote health and wellness to gay, bisexual, gay/queer trans men and other men who have sex with men and to help prevent HIV and STI transmissions.
Favorite Quote:	I can also discuss: barebacking, harm reduction, drugs, safer sex, down low, relationships, and more. Just IM or e-mail me.
Pictures:	For more information, check out our website at www.aidslondon.com .

Other statements you could use:

- Here is your chance to ask a question to an HIV educator ANONYMOUSLY – no holds barred ... it's as easy as that! (courtesy of...)
- I have a complete list of test sites, websites, articles of interest ... you pick the topic ... and let's talk!
- IM me if you would like to chat about reducing your risk of getting or giving HIV or other STIs.
- I may save the transcript of our conversation for quality assurance and evaluation purposes. I will delete any identifying information that you provide. Please do not provide identifying information.

Note: Your agency will need to determine if you wish to save transcripts of online conversations. It is not necessary to provide good service but can have value in supervising volunteers. Keep in mind that with traditional outreach you do not have a transcript of the discussions that staff or volunteers have with clients. Collecting transcripts of client encounters may discourage some men from accessing your services, and should be done with this risk in mind.

Placing Profiles

Placing profiles or ads on personal ad sites is a good way to promote online outreach services. When you first sign up for a site, create a profile or personal ad. Placing personal ads, especially in numerous locations may generate a large amount

of email. Sexual health educators are advised to monitor this and place profiles or personal ads accordingly, remembering that it is a good standard to answer all email within 48-hours.

More Profile Tips

Because of the rapid turnover of chatters in online chat rooms and because some chatters re-visit the same rooms frequently, it may be necessary to change elements of your profile from time to time. Some ideas: just revise a line or two of text to freshen it up, add a recent fact or statistic about men's health, promote an upcoming special event, or list a link to a new website of interest.

Some chatters may come across your profile after performing a profile search in the website or chat room provider they are using. Therefore, profiles should contain a variety of keywords related to sexual health and HIV/STI prevention so that your profile will appear in a large cross-section of profile searches. Some examples of key words that might get picked up include: sex, barebacking, men, HIV, STI, syphilis, top, bottom, sexual behaviour, safer sex, crystal meth, raw, drugs, down low, relationships, leather, kink, and trans man. These keywords should be used in a context that will convey to the chatter that you are able discuss these topics as they relate to sexual health and well-being.

Using Bulletin Boards

Electronic bulletin/message boards and forums allow users to post and read messages that have been posted on a website. A variety of websites offer bulletin boards. Outreach programs should research and assess which bulletin boards are most effective at reaching the intended target population.

Information-sharing bulletin boards can also be used to promote agency services and events and disseminate up-to-date information, articles, or statistics on STIs/HIV. Posted messages are public information and available to anyone who visits the bulletin board. Like messages posted on a physical bulletin board, these messages remain on the board until the message is removed. Bulletin boards (e.g., www.craigslist.org) may be useful for posting health-related messages, promoting events, recruiting participants in surveys, and advertising programs or agencies.

Creating Bulletins

Not to be confused with long-term notices posted on online Bulletin Boards, the term "Bulletins" refers to pre-approved, pre-written messages that educators will post occasionally within a chat room to initiate dialogue around sexual health issues. These bulletins might aim to raise awareness of STI outbreaks or symptoms, or they might provide current statistics or factoids on health issues affecting gay, bisexual, gay/queer trans men and other MSM. Bulletins will always support your agency's goals and objectives.

Some organizations have a set list of bulletins they use; others encourage educators to develop their bulletins – however, all bulletins posted by an agency should be approved by the prevention supervisor. Here's a sample list of bulletins adapted from: *Stop AIDS Project's Back to Basics Campaign Sample Messages*:

Theme #1 – Anal Sex

Most new HIV infections among gay and bisexual men happen during anal sex without condoms.

- Bottoms can infect or be infected by tops.
- Tops can infect or be infected by bottoms.
- Condoms break more often when we don't use water-based lube.
- Using water-based lube reduces anal tearing.

Theme #2 – Oral Sex

- People can become infected with HIV from oral sex with an HIV-positive partner.
- Cuts, sores and oral herpes will increase the likelihood of HIV transmission from oral sex.
- Men with gonorrhea of the throat, herpes and other STIs are more likely to become infected with HIV from oral sex.
- HIV can be present in pre-cum.

Theme #3 – Recreational Drug Use

- Men who use crystal are more likely to have condoms break during anal sex.
- Men who use crystal are more likely to get HIV.
- Alcohol breaks down inhibitions. Guys who mix sex and alcohol are more likely to become infected with HIV.
- Poppers, crystal, and Viagra increase blood supply to areas of your body where HIV infection is likely to occur.

Theme #4 – HIV Medications

- There are no drugs that will cure HIV.
- Combination therapies for HIV may not work forever, or for everyone.

Participating in a Chat Room

Before entering a chat room

- Sign on to the ISP of your choice (depending on what chat rooms you will do outreach in).
- Check your e-mail exchanges and answer any e-mail that you have received. Also, check any personal ads that you may have posted on various sites and answer inquiries accordingly.

- Document any e-mail interchanges.
- Ensure that your profile(s) is accurate and complete and that there aren't any elements you want to update.
- Ensure that you have quick access to your electronic files of OUTREACH Online Resources, Bulletins, and/or FAQs, as well as forms to document chat room exchange or IM sessions.

When entering a chat room

Introduce yourself to the chatters. For example:

"Hello. I am a sexual health educator and am online to answer your questions about sexual health. Check out my profile and please IM/private me or e-mail me if you have any questions or want to chat. Thanks guys. Have safe and healthy fun!"

Note the key elements of this introduction: the health care educator has provided, quickly and professionally, his screen name and agency affiliation (through his profile), his role, and his willingness to enter into conversation.

Once you've introduced yourself and if no one has IM'd you, post a bulletin from the Outreach Bulletins File. This approach can be especially helpful if it's quiet in the chat room. Even if this bulletin fails to generate chat or motivate chatters to IM you, you have at least disseminated a prevention message to a group of at-risk men. Keep the frequency of your postings to an appropriate level.

Active vs Passive Outreach

In fact, there are several approaches that you, as a sexual health educator, can take in a chat room. You could choose to be completely active, constantly posting statements and inviting chatters to IM or private you. However, this technique may be viewed by chatters as intrusive (and it may not be allowed by some online venue guidelines). The opposite approach is to be completely passive, simply sitting in a chat room without introducing yourself or posting any chat dialogue. Online chatters may view this approach as "lurking," (i.e., deceptively observing online sexual behaviours), so this technique is discouraged as well. Educators are encouraged to find a happy medium between active and passive approaches. Experiment with the frequency of your postings. Watch for signs from chatters that you are intruding on their space, and adjust your approach accordingly.

Some Internet outreach workers may choose to actively contact online clients they suspect, from reading their profiles or chat room conversations, are practicing high-risk behaviours. However, being too forward during outreach can threaten trust and rapport-building and will often be met with negative feedback from the online community. Engaging individuals who are not interested in a discussion about their sexual activity ►

may lead them to ignore you or place a barrier to your message and possibly your organization. Instead, stay cognizant of your values as an outreach worker and focus on providing client-centred care. Think of an outreach worker's presence in a chat room or on a website as a subtle reminder to members that risky behaviours can be harmful to one's own health and that outreach workers are a reliable resource when members are ready to make a change.

Remember that when you are in a chat room or other social/sexual networking site, you are there as an invited "guest". Always respect members of the website and abide by the social norms that have been established by the community. An overly assertive approach can lead to your organization and potentially all organizations being banned from the website in the future. Tolerance levels will vary from room to room and website to website.

Tip: Active outreach can cause chat room members to leave the chat room or website and go elsewhere.

Chat Room Outreach Guidelines

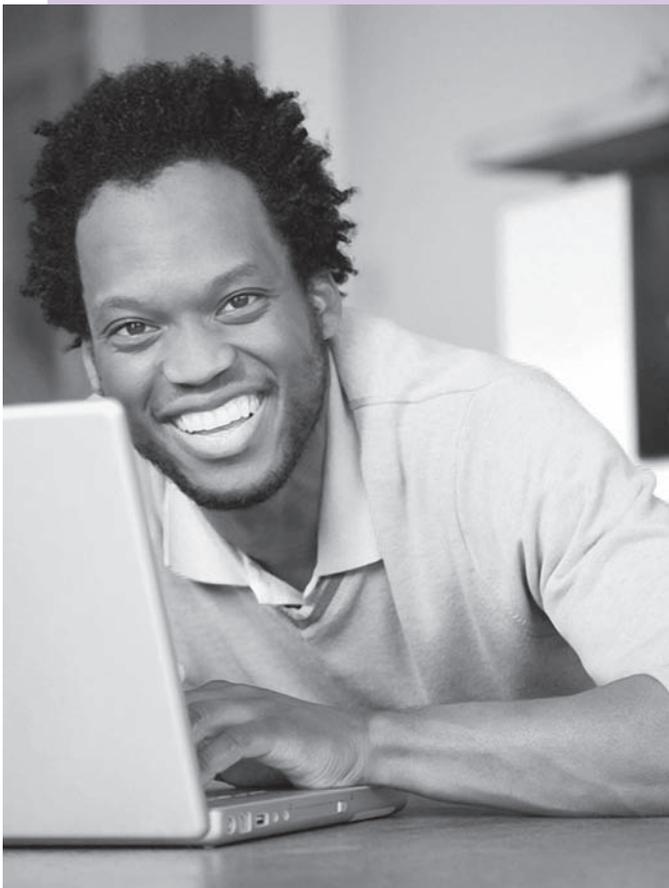
The following guidelines for online health educators, adapted from a list produced by the AIDS Committee of North Bay, may be helpful to you.

1. Don't get too chatty. There are certain protocols to doing outreach; we have to be careful about what we say to those with whom we have contact. Our purpose is to give "chatters" information. We don't need to play therapist, or over-analyze information, or read things into what a "chatter" is saying. We are there to give people access to good HIV prevention information when they're asking for it.
2. Do **NOT** pick up guys at any time during your outreach shift. This includes using a different screen name to "chat" in the same and/or a different room while working an outreach shift. If someone is trying to pick you up, let him know that you are flattered by the attention and that maybe you will see him around when you are not working. It's important to never shame men because they cruise you for sex.
3. Don't make *any* assumptions. For the most part let the chatter direct the conversation. However, try to eventually direct the conversation to the area of sexual health, as that is the purpose for being on-line. Social conversations can also be a valuable way to build a good relationship with the men in your community and should not be seen as irrelevant to the work.
4. If you need to ask a question, ask open-ended questions. This will help you get more information and understand the clients' needs.
5. Encourage the chatter to discuss factors that make it difficult to negotiate sexual risk or to have sexual interactions that fall within his personally defined comfort level.
6. Don't give advice, or tell them what they should or should not do. Try not to make statements that are or seem to be your personal opinion.
7. Answer chatters' questions with facts. Use the third person -- "some," "many," or "most" -- when responding to questions. Example: "Most people consider unprotected oral sex 'safe'..." Then continue with "We know that unprotected oral sex puts men at a higher risk for STIs like syphilis or gonorrhea."
8. If you get an instant message and someone starts to attack your agency, the work we are doing online, or you personally, "**BLOCK**," "**IGNORE**," or "**DISCONNECT**" him. **DO NOT RESPOND TO HIM AT ALL.** If he goes into the chat room and starts talking trash about you, still don't reply. (See advice on handling aggressive clients on page 28.)
9. Offer information about resources and referrals. For example, if a guy is concerned that he may have been infected with HIV, you can ask him if he would like the address/phone number of a free anonymous testing site.
10. The only personal information you need to let a chatter know about you is that you are a "*trained staff or volunteer for your agency*". Occasionally one may want to know something personal in particular like your HIV status. You are under no obligation to tell them that information, but if you feel it will build rapport and help the client you can do so. Some guys want to know that they are talking to a peer.

It's been our experience that some guys will just want to chat with you. That's okay, if you can turn the conversation to sexual health and so into an intervention that's great. Eventually, you will want to politely tell the chatter that you've got to move on as there are other people waiting for you to respond to their questions. However, don't underestimate the value of engaging in casual, social conversation with men online as this may be an important first step in building a relationship. Not all men are going to be comfortable going directly into a discussion about their sex life. Be friendly and sociable to the men you encounter even when they just want to chat about things that are not immediately linked to their sexual health.

Chatting

If a posted bulletin does generate chat in a chat room, participate in the dialogue by providing factual information, related statistics, or resources for more information. While casual chat by the sexual health educator can be a good way to build an effective relationship with men in the community, you should avoid discussing personal matters or stating opinions not based on fact. Setting firm but friendly boundaries with a cyber client who wants to engage in sexualized or derogatory chat while remaining social and accessible to a sexual health discussion is an important skill for you to develop. Chat rooms have a tendency to self-regulate – that is to say, chatters will often challenge statements that are extreme or harmful. It is not up to you to “right every wrong” immediately.



Sample Discussion

The following is an actual chat room discussion: an effective exchange between an online health educator (“Outreacher”) and a client (“Chatter”), complete with typos, slang, and emoticons.

Chatter: hi

Chatter: how r u

Outreacher: i’m good thanks

Outreacher: you?

Chatter: good

Chatter: u must get peppered in here..with questions

Outreacher: yup, that’s why i’m here :)

Chatter: ive been doing more and more bb

Outreacher: ok

Chatter: i know stupid..and risky..but..

Outreacher: it is high risk for HIV transmission, yup. i don’t find stupid all that helpful a descriptor though. what do you think is behind the increase in anal sex without condoms?

Chatter: people dont see hi as much of a risk now...maybe?

Outreacher: i don’t know what other folks think :) do you consider “high risk” to mean “high risk”?

Chatter: yes

Outreacher: ok

Outreacher: so how can i help today?

Outreacher: sounds like barebacking is on your mind

Chatter: it is

Outreacher: what about it in particular?

Chatter: i like it..but its risky and I feel huge guilt after

Chatter: ive only taken seed twice....once when condom broke.. other time..I was so drubk

Outreacher: gotcha. that’s not an uncommon story. i like to drink too and, obviously, sometimes we do stuff when drunk that we might not have done otherwise

Chatter: yeah

Chatter: drunk and the guy intored me to poppers

Chatter: bad...night..lol

Outreacher: :))

Outreacher: well hopefully the sex was good at least!

Chatter: yeah..it was

Outreacher: but i do hear what you’re talking about when you mention guilt

Outreacher: what is it about barebacking that you like?

Chatter: the feel

Chatter: the intimacy

Chatter: also....

Chatter: the risk is a bit exciting also

Outreacher: gotcha

Chatter: i know..stupid..LOL

Outreacher: well i do think it's fair for gay guys to acknowledge that the inclination to have sex without condoms is NATURAL. for heterosexuals, sex with condoms is considered the unfortunate but sometimes necessary exception to the otherwise natural norm, whereas with gay guys sex WITHOUT condoms is considered the pathologically evil deviation from the only acceptable option

Outreacher: perhaps a bit of an unfair difference that puts a hell of a lot of pressure / guilt / fear on gay guys.

Chatter: makes sense...

Outreacher: that said....

Outreacher: there's simply no way to get around the fact that the VAST majority of sexual HIV transmission between guys is due to unprotected anal sex

Outreacher: there are actually very few high risk sexual activities. and anal sex without condoms is one of the,m

Outreacher: sooo

Chatter: oral.almost rare?

Outreacher: is HIV transmission rare with oral sex without condoms? is that your question?

Chatter: yes

Outreacher: The Canadian AIDS Society (CAS) says the risk of transmitting HIV through oral sex without condoms is "a relatively rare occurrence".

Chatter: ofcourse..everyone is negative in chat rooms..just ask them.lol

Outreacher: we have no evidence of the guy getting sucked being infected. there is some evidence of the guy sucking becoming infected, but it is a pretty rare thing to happen

Chatter: yeah

Chatter: whats ive done....a few times

Chatter: my weakness is being rimmed

Outreacher: have you ever tried using a Reality or "female" condom for anal sex?

Chatter: so one that starts..and if rimmed good..I become a differetn guy

Outreacher: rimming is a pretty darn safe activity for HIV so rim away!³

Chatter: ive used it once..a guy had them

Chatter: i get rimmed....I mean

Chatter: so that makes me NUIITS...lol

Outreacher: did you or the other guy notice a difference in terms of intimacy?

Chatter: he said he did...

Chatter: it felt differtne for me..ya

Chatter: he liked to pull out all the way..go back in..

Chatter: it was different

Outreacher: i mention it because some guys who have troubles with condoms (tops who lose their erections, bottoms who feel it less, etc etc) sometimes find Reality condoms are a better solution that standard condoms

Outreacher: the top can see his dick with nothing on it

Outreacher: so psychologically thta's exciting

Outreacher: it's made of polyurethane which conducts heat better so it literally does feel more like condom-less sex

Chatter: yeah..and there is the thoughts..its close to bare.. for btm also

Outreacher: yup

Chatter: not easy to incert

Outreacher: i just mention it as one way to increase intimacy but still use a barrier

Outreacher: how did you guys insert it?

Outreacher: i've tried 2 different ways

Chatter: he was doing it..tried finger

Chatter: then dick.

Outreacher: i've found if you put a good amount of lube inside (so his dick can slip out ince it is inside you) and then he puts it on his dick and pushes into you, then you clench down while he pulls it out --- i've had some luck that wya

Chatter: sounds easy...

Outreacher: sometimes easier than other times. but thta's the same with standrad condoms, bottoming in general, all kinds of stuff :)

Chatter: yeah..true

Chatter: they have a high success rate? not breaking?

Outreacher: they're a pretty reliable barrier, yup

Chatter: ive had a few condoms break in my day..when I was btm

Outreacher: another some guys tell me they like to do is be really verbal while fucking, talking all about condom-less sex and how it feels and why they like it. and all the while they're putting a condom in their ass or on their dick and fucking with a barrier.

³With an activity such as rimming there is an increased risk for the spread of hepatitis and parasites. When possible, offer information about hepatitis A and B inoculations. You can also suggest reducing risk of hepatitis/parasite transmission by having a shower prior to rimming and cleaning well with soap and water. If it is available a dental dam can also reduce risk of hepatitis/parasite transmission.

Outreacher: you can let your imagination and language go anywhere you want!

Chatter: yeah..true

Chatter: talk the talk..bout bare..just dont walk the walk

Outreacher: well, i'm more interested in tools than rules myself. it's not useful for me if someone tells me "never do this" "never do that". what i want as a sexually active gay dude are tools to help me use condoms as often as i can and still make sure the sex is at a maximum level of hot-ness

Chatter: i hear ya

Chatter: so your a btm?

Outreacher: tend to be

Chatter: kewl

Chatter: i was ttal top..till few yrs ago..then bevacme btm..once I god

nailed...LOL

Outreacher: haha :)

Chatter: well..ive enjoyed our talk

Chatter: appreciate it

Outreacher: well it's certainly true that, for a guy starting out, especially if he is nervous or with a lover who isn't terribly generous or respectful, topping is not as intense as bottoming

Outreacher: i know other guys who say similar things to what you say

Chatter: really?

Outreacher: sure. guys who started out feeling like they were mostly top and then later on also started to enjoy bottoming

Chatter: love it..that way now

Chatter: i top now and then..but usually btm

Outreacher: cool :)

Chatter: nice talking

Chatter: take care

Outreacher: you too, bud! see ya

Chatter: appreciate the advice

Chatter: wish you could show me how to put the female condom....on...lol

Outreacher: haha, i bet if you xtube it there are A LOT of Reality condom videos!

Outreacher: with people far more experienced than me!

Outreacher: :)

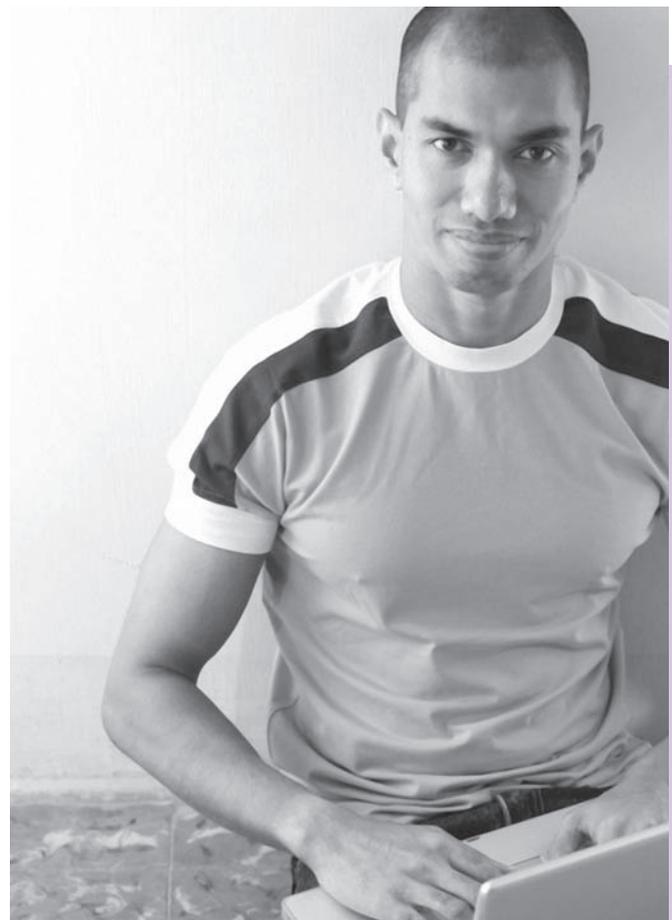
Chatter: oh ya

Outreacher: good luck, bud. thanks for your questions

Chatter: later

Responding to Instant Messages

- Respond to all Instant Messages (unless they are deemed abusive or slanderous) in a polite and respectful manner.
- When initially establishing an IM session, introduce yourself and your role. Early in your discussion, *always* provide a link to your agency website.
- If possible, attempt to build a rapport with the client by chatting briefly in general with him. The best way to do this is to maintain a sex-positive attitude and allow him to talk about his situation. Ask open-ended questions that require more than a "yes" or "no" response. For example: How does that work for you? What is it that you are looking for from our services?
- Reassure the client that the information he gives is kept confidential. Remind him that this is what you do, so there are no "stupid" or "embarrassing" questions.
- If the client indicates that he has a female partner(s) or children, work from the position that he cares about their well-being.
- Provide a variety of options for whenever possible with regard to testing or treatment. (It's a good idea to have a list of clinics and treatment options ready while online.)



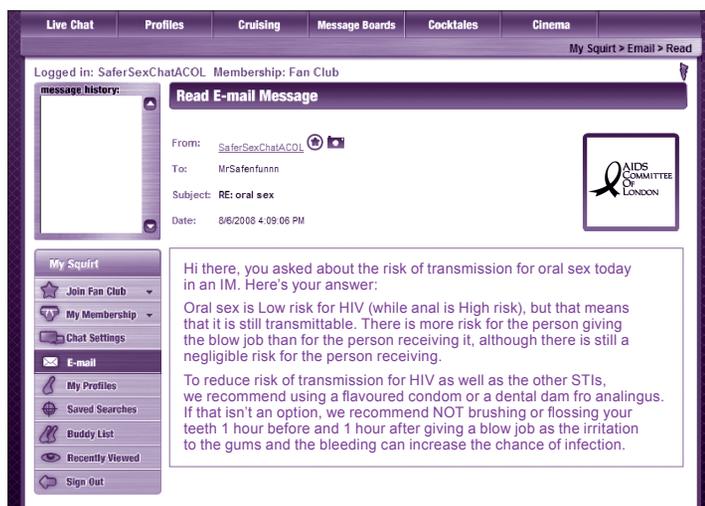
- If you get several IMs in a short period of time, you *should* engage in an exchange with each one of them. Ignoring chatters who IM you will be perceived as rude and unprofessional. One way to handle several IMs at once is to exit the chat room in order to prevent any new IMs. Then, you can put one or more cyber clients on hold (“be right back” or brb is acceptable), or you can let them know that you will get to their question “in just a minute”. You can also invite chatters to e-mail you their question(s) to be answered at a later time.
- If you develop an ongoing relationship with IM clients, use “buddy lists” to help keep track of them. These ongoing or repeated clients should be encouraged to become online peer leaders by promoting healthy behaviours among men in the chat rooms. They can also help to promote online outreach by referring other chatters to you or your website.

Responding to Email

Email exchanges are more complex than IM chat. Here’s some advice that may help:

- Some email may contain questions that you cannot answer immediately. In these cases, refer to an additional source, such as a professional website, a supervisor or a medical professional.
- In your email response, always cite the source you used (“according to Dr. Garza” or “the Canadian Guidelines for Assessing Risk recommends”), and make sure that you provide only information: not medical advice.
- If you want to do some research to respond to a question by email, and you think it’s going to take some time, flip the person a quick email letting him know you are working on getting an answer and will follow up shortly. It’s even better if you can give him a specific timeframe within which he can expect an answer.

Here is a sample email from an online health educator:



Timing

Much of your success as an online health educator is related to timing. Here are questions and answers about timing:

How often should I re-introduce myself (or re-invite other people to chat) in a chat room?

Remind other people of your presence in a chat room occasionally, but not too often. Generally, if things have been fairly quiet for about 30 minutes, you should announce your presence again.

How often should I post OUTREACH bulletins in a chat room?

Again, 30 minutes is a reasonable amount of time between bulletin postings.

How quickly should I respond to email?

Respond to emails within a reasonable timeframe, but not at the expense of valuable interaction time within the chat rooms. Timing depends on the urgency of the exchange, of course, but a good rule of thumb is to answer all emails within, at most, 2 days. (Remember to document all email. See page 26.)

Language

A key element of any successful HIV/STI prevention program is an understanding of the community where your prevention activities take place. Outreach workers must build their competence in the language that gay/MSM use when they cruise for sex online.

Trans men may use different language to describe their bodies than non-trans men. There may be shorthand terms used more commonly by men from particular racial or ethnic backgrounds, or by men who participate in particular sexual scenes within the gay/MSM communities.

See Appendix B for a glossary of useful slang, shorthand and jargon.

Using Frequently Asked Questions

It's important that everyone on the Outreach team be giving out the same factual information on HIV, syphilis and other STIs, as well as on risk/harm reduction strategies and gay men's sexual health. Although sexual health educators are already trained in sexual health, it is often helpful for an agency to prepare a list of frequently asked questions (FAQs) and their answers that all staff and volunteers providing Internet outreach can use as a guide to answer questions during a chat or "copy and paste" into a chat room discussion or IM.

There are pros and cons to copying and pasting: it can ensure the information relayed is consistent and accurate but it can also be impersonal. If possible, when you are not working online, review the FAQs and personalize the text as best you can. This makes it easier to adapt it into your online intervention efforts without having to re-write the entire message. It also keeps your responses more personalized.

Making Referrals

A primary objective of Internet Outreach is to refer clients to web-based information and resources as well as to local health care service providers. To make effective referrals, sexual health educators should:

- Be aware of local/agency resources so they can readily refer cyber clients to them; do some background research to determine the experience of the referral agencies particularly in working with gay men, HIV positive people, trans people and people from different ethno-racial backgrounds. If an agency is the only option for a service you can at least inform the men of the possible experiences they may have and you can inform the agency in question that you will be referring men to them from your program.
- Have easy access to electronic lists of web-based and local resources.
- Use copy-and-paste techniques to provide direct links to cyber clients in chat rooms, during IM sessions, or through e-mail.
- Keep their lists of resources updated.
- Refer clients to the agency website if it includes links to services (in this case, the number of "hits" to the website would be a way to evaluate the impact of Internet Outreach services).

Following Up with Clients

Following up with cyber clients with whom you have chatted is an effective way to ensure they are getting the information and services they need. It also helps prove that Internet outreach to gay/MSM is an effective intervention for connecting men to services. Sexual health educators should always ask for the client's permission to follow up with them via e-mail or IM.

If clients have given you permission to contact them (through e-mail or IM) after an IM session has concluded, follow up with them to see whether they checked out the online referral(s) or local resources you suggested. This is a good way to relay your concern for their well-being, and to build rapport.

Some useful websites to use as referrals or resources:

- www.catie.ca
- www.cdnaids.ca
- www.aso411.ca
- www.thetransitionalmale.com/
- www.ftmguides.org/
- www.2spirits.com/
- www.aegis.org/
- www.ontarioaidsnetwork.on.ca/
- www.posornot.com/
- www.poz.com
- www.livewithit.com/flash/default.aspx
- www.halco.org/home.html
- www.pwatoronto.org/
- www.hardcell.org.uk/index.htm
- www.ofa.gov.on.ca/francais/commun-organ.html
- www.transpulse.ca/index.htm
- www.queertransmen.org/index.php
- www.torontovibe.com
- www.himynameistina.com
- www.safer-sm.org
- www.safer-sm.org/SaferSM/SaferSMPamphlet.html
- www.erowid.org



► 4. Policies And Procedures

Documenting Internet Outreach Services

Agencies will require some documentation of their Internet Outreach services, including the number of sites or chat rooms visited, the number of clients contacted, number of IM sessions, and the time/hours spent on line. Organizations may also keep some transcripts of IM discussions or copies of emails for quality assurance, evaluation or training purposes, though this should be done cautiously to prevent creating unnecessary barriers to service access for men.

- It should not be necessary to record comments in the general chat room. If you do find it necessary to copy the discussion/dialogue for any reason, make sure you follow the agency's privacy and confidentiality protocols.
- If you save an IM discussion/dialogue, delete any identifying client information before saving.
- If your outreach has included emailing, you may wish to save a copy for your stats. Before saving any email, delete identifying client information.
- If you record client interactions via the Internet you should inform clients that you do this, the purpose for doing it, with assurance that you do not collect identifying information. For example, "Sometimes we keep a record of our interaction for quality assurance and evaluation purposes. All our records are confidential and we do not share any information from the IM session with anyone outside our agency. We remove any possible identifying information."
- For more information on documentation, see your agency protocols.

Confidentiality and Privacy

Protecting individual privacy relates to the way organizations collect, use and disclose the personal information of individuals. One of the advantages of Internet Outreach is that clients can remain completely anonymous. In general, sexual health educators should not need to collect client's personal information in order to provide outreach education. In most cases, the information that sexual health educators obtain from online clients will not be considered personal information because it is not "identifying" information. "Identifying information" is information that can be used either alone or

in combination with other known information to identify a particular individual. For example, a client's instant messaging name could be considered identifying information. In a smaller community, information about the area in which a client lives, or where they work, could also be considered identifying information.

One of the advantages of conducting outreach education over the Internet is that clients can remain completely anonymous. In general, sexual health educators should not need to collect client's personal information in order to provide outreach education.

As in any HIV prevention intervention, what is said in a client session stays in a client session, including clients' screen names, HIV status, or any personal or sexual information that they may divulge while chatting. Under no circumstances should you share any information about a cyber client with anyone in the cyber world or in the real world. If cyber clients ask you about confidentiality, feel free to tell them that your agency's employees sign a confidentiality contract upon hire and that confidentiality of your clients is one of your agency's top priorities.⁴



⁴In fact, all staff with access to information that may identify a client (e-mail addresses, chat room names, etc.) should have signed a confidentiality agreement. This includes paid and volunteer outreach workers, and extends to other agency staff, such as the IT staff.

Some agencies require sexual health educators to save some dialogues with clients for quality assurance and evaluation purposes. It is important to remember that no agency does this for in-person counselling sessions or for traditional outreach encounters. It arises in the context of Internet outreach because it is easy to do. If your agency decides to do this, you can take steps to protect client privacy:

- Clearly state on your website and in your profile that some dialogues may be copied and stored for quality assurance and evaluation purposes, that you will respect your client's right to remain anonymous, and that clients should therefore avoid providing any identifying information.
- If necessary during a chat, IM session or email exchange, remind your client to avoid providing identifying information.
- If you still receive such information, delete it. Where necessary, substitute non-identifiable information before you save or store any dialogues.
- Do not save any dialogues unless you are required to do so by your agency.

Best Practices in Privacy and Confidentiality

1. All employees, volunteers and students must sign a confidentiality statement before becoming privy to confidential information about clients obtaining services at or through your agency.
2. Access to client information and discussion of client information should be restricted to agency personnel directly providing services for the client and/or specifically for the purpose of serving the needs of the client.
3. Consultations among staff members regarding clients must be done in a private area such as an office or empty meeting room.
4. Staff members, volunteers, and students will provide information to clients in private areas such as offices.
5. Confidential files, including computer diskettes, must be placed in a locked container such as a file cabinet or desk drawer.
6. Client information should never be left unattended or easily observable by other clients in places such as offices, the reception desk, and work stations.
7. When mailing confidential information about a client, the envelope must be marked confidential. Use return receipts to verify delivery of all confidential information.
8. Confidential records should only be faxed when other methods of sending information are unavailable. All clients' identifying information (Ex. name and social insurance number) should be removed from faxed documents and a client number should be substituted as an identifier.

Contact the agency or entity receiving the fax to assure the success of transmission, to match the client number to the information faxed, and to release the client's name and other identifying information to the receiving agency.

9. Confidential client information can only be sent via computer if the information is encrypted.
10. Confidential information stored in the computer must be password protected.
11. Paper documents containing patient information must be shredded before disposal. Disposal of computer diskettes or backup tapes must be degaussed with a bulk videotape eraser or physically obliterated by other means.

Tips from the Field

Free Resource for Canadians about the Personal Information Protection and Electronic Documents Act (PIPEDA)

www.pipedainfo.com/

The *Health Information Protection Act* creates a comprehensive approach to protect health information across the health care system. The Act has two parts : the *Personal Health Information Protection Act* (Schedule A) and the *Quality of Care Information Protection Act*. (Schedule B). The legislation received Royal Assent on May 20, 2004 and came into effect on November 1, 2004.

www.health.gov.on.ca/english/providers/legislation/priv_legislation/priv_legislation.html

Conflict of Interest

A conflict of interest occurs when the personal interests of an employee conflict with the employee's responsibilities as a representative of the agency. Conflict of interest policies specifically prohibit employees from asking for or accepting offers of a sexual or romantic nature from clients while on the agency's property, or while acting as an agency representative.

Because of these policies, sexual health educators must know how to deal with a situation where they are being "hit upon" by a client. During Internet outreach, educators are entering an environment where it is normal for guys to cruise each other for sex, to talk dirty to each other, and to sexualize one another. There is nothing unusual or wrong when a guy hits on you. Your response in "turning him down" should never shame him for taking a sexual interest. ►

For example, at the end of the Sample Chat on page 3, the **Outreacher** deflects a not-so-subtle advance from the **Chatter** (“wish you could show me...”) with a little humour, and by distancing himself from the invitation by referring to another source (xtube). However, when such a graceful response is not possible (or does not occur to you quickly), simply state that you are there to answer questions:

- “Actually, I am working right now. If you have any questions about HIV or safer sex I’ll do my best to answer them.”
- “Sorry, I am working right now but I would be happy to answer any questions you might have.”

Sexual health educators should also be aware of other specific conflicts of interest:

1. Employees cannot knowingly engage in romantic or sexual activity with a client to whom they are providing services.
2. Employees cannot solicit special consideration for friends or partners from other agency employees.
3. Employees should not seek information on clients unless that information is relevant to the employee’s job duties.
4. Employees cannot flirt or engage in inappropriate conversation or contact with a client while the employee is acting as a representative of the agency.

When conducting Internet outreach, it is imperative to separate work from play. Never use a personal online profile or chat name to conduct Internet outreach, even on your own time. Also do not use a personal “persona” or chat room “identity” that you would use on personal time while performing outreach activities.

Engaging in any form of exchange of professional services with clients by employees is a potential conflict of interest. Employees must exercise caution and judgment when interacting with clients. It is not possible to anticipate all potential conflicts of interest that can arise, so employees must adhere to the highest standards of ethical conduct.

Note: Remember while you are bound by your agency’s confidentiality policy, the chatter is not, so assume whatever you share with the chatter may become public.

Client Feedback and Grievances

The agency should provide some means for clients to give feedback on Internet outreach services. A description of the outreach program, including goals and objectives, confidentiality policies, as well as directions for how to file a grievance or provide feedback on the service should be posted on the agency’s website. Be prepared to refer men you encounter to a link on your agency website where they can find this information quickly and easily.

Safety and Ethics

Working in an Internet environment can be dangerous so it’s important for workers to work safely. There are several steps that educators can take to ensure their own safety:

- Never give a chatter your personal e-mail address, online profile name, or other such personal online identities, use your professional/agency email.
- Never give out your telephone number, home address, or any other personal contact information. (Use your agency telephone number if appropriate.)
- Never use a relationship made during Internet outreach to pursue personal, sexual, or illegal activities.
- Think in advance about how much personal information you should give out online. The only information you **need** to let a chatter know about you is that you are a trained sexual health educator for your agency.

Occasionally, chatters may want to know something personal about you, like your HIV status or whether you have a boyfriend. Your agency will be able to give you guidance on how best to handle these situations. Typically, you don’t have to tell men any information you don’t feel comfortable sharing. You can politely tell a chatter that your HIV or relationship status is something you prefer not to share online or you can ask the chatter why it is important to them that they know that information about you. This could lead to a discussion about what they are looking for from you. Sometimes your HIV status, sexual/gender/racial identity, or other information about you can facilitate a better service for some clients. For example, some HIV positive men may prefer to speak with an HIV positive worker. It is good to discuss disclosure of personal information with your colleagues and supervisor to determine how you can best handle this issue, before beginning work online.

Managing Aggressive Clients

Sometimes, you may encounter men online who are abusive towards you or who slander your agency. Safety protocols should include procedures on handling abusive or slanderous clients met on the Internet. Staff should be trained to know how, when, and where to defer these clients. Procedures may include strategies for changing an abusive dialogue into a constructive dialogue,

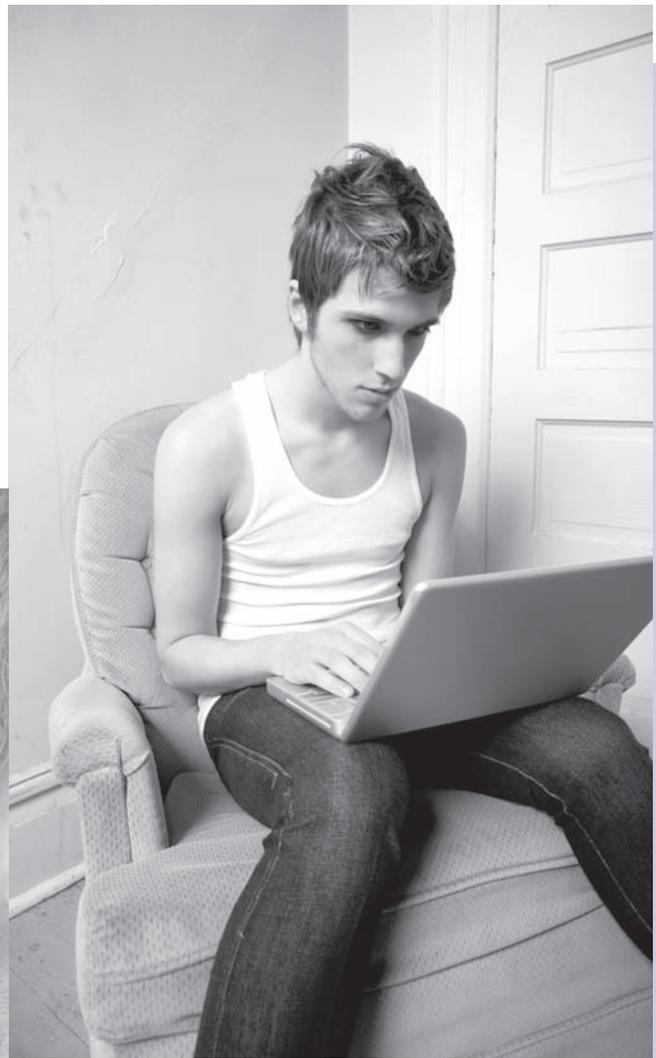
disengaging from online activities, blocking or ignoring abusive individuals, or referring difficult clients to a supervisor. Here is one approach:

- Remember that your first objective is to build a relationship with the client. Let him know that you understand he is angry at you or the agency and that you are available to assist with any sexual health questions or concerns he has.
- If he continues to be abusive toward you or your agency, politely inform him that his statements are inappropriate, that you will have to end the session, and that if he ever wants to talk about sexual health issues in the future you are available for that.
- If abusive or slanderous statements are repeatedly posted in a chat room, you are advised to leave the room and not return during the shift.
- If you receive repeated IMs or e-mail that are considered abusive or slanderous, you can "block," "ignore," or "disconnect" the chatter.
- Document any abusive or slanderous statements and your subsequent actions.
- Report any indignant, angry, or abusive behaviour from cyber clients to supervisors at your agency. Supervisors, in turn, should report all incidents of this behaviour to the appropriate person or to the Executive Director. It is up to the discretion of the Executive Director as to whether the incident(s) will be reported to other parties, such as the cyber client's Internet Service Provider (ISP) of the offending cyber client, the agency's Directors or Board Chair, the agency's attorney, outreach officers of funding sources, and/or law enforcement.

Managing Underage Clients

Most chat room service providers have an age requirement of 18 years of age. However, you may encounter clients who claim or seem to be younger. When you encounter underage clients:

- Always provide the following statement: "I am a representative of the AIDS Committee of London and I can provide you with information on HIV and AIDS, STIs, and other sex-related health issues."
- If you can, refer underage clients to a youth serving agency that has a history of working with young people who are gay, bisexual or questioning about their sexual or gender identity.
- At the same time, you can provide a valuable support function for a younger person who is grappling with their sexual or gender identity. Always be friendly and supportive, sex, trans and gay-positive.
- Be sure you understand your agencies policies on working with minors and set up your online outreach protocols accordingly.



Female Health Educators

If you are a woman involved in Internet outreach to gay/MSM, you may encounter some special issues. For example:

1. You need to be prepared to deal with explicit, graphic, and potentially detailed sexual information both visually and in print. To be able to deal with these images and descriptions in a professional and comfortable manner is vital to providing sexual health information. Being sex, gay and trans-positive is a cornerstone of good sexual health work with gay/MSM. If you are uncomfortable with gay male sex and the explicit use of images and language about gay male sex, outreach to gay/MSM may not be a good fit for you.
2. One of the main reasons that many men use online chat rooms is to “hook up”. Men who use chat rooms for this purpose tend to be very direct in their communication. You may get responses ranging from “hey are you looking?” to “do you want to suck my dick?” This can be the result of men not reading the profile for the agency but not always. Be prepared for these types of responses. **One effective way to redirect these sorts of comments is, “No thanks, actually I am here with an agency that is here to help provide sexual health information for any men who may have questions and want to play safer. Did you have a question at all?”**
3. Sometimes, you may have a chatter who seems reluctant to speak to a woman but is staying engaged, such as “This is kind of embarrassing to talk about” or “It feels weird talking to a woman about this”. **Try to encourage him to continue. Remind him that this is something you do on a regular basis and that you hear a variety of things in the course of doing outreach.** By making the situation feel more common you can diffuse potential anxiety. For example, **“I can appreciate this feels awkward...guys may not be used to talking to a woman about fucking or sucking other guys. If it helps, I talk to lots of guys about sex all the time. In fact, I challenge guys to come up with a question or a sex act I haven’t heard before!”** This may help him to see that his question or situation is not something that is shocking or shameful and promotes a sex-positive attitude for the rest of the conversation if he wants to continue. If he elects not to, you can encourage him to take advantage of some of the information sites that you are aware of where he may find the answers he is seeking or refer him to a time or place where he can speak to a man about his sexual health.
4. It can be helpful to focus on the values you hold as a service provider when working with people for whom you can not directly relate. Creating a space where men feel comfortable,



listened to, and not judged are universal principles for all service providers with all clients. At the same time, there may be experiences that you can relate to that help you to empathize with the men you encounter. For example, if a chatter indicates that he may engage in risky behaviours due to his body image (will most likely not do this directly but may) this is something that many women can understand. For example you could state, “I’m sure it is not exactly the same but as a woman I can understand that to some extent too body image has influenced some of the choices I have made as well”. This may help normalize the chatter’s experiences and promote further opportunities to provide information in a positive context.

5. Some men prefer to speak to a woman, and some do not. Being honest is the most important thing. If the chatter prefers to speak to a man about sexual health issues, offer him a referral to a time or place where he can do so. You can let him know that you are cool talking about gay sex, but his preference may remain. Don’t personalize his desire to speak to another man. Some people just prefer to speak to a peer, especially when they talk about sex and especially when the sex they like is shamed by their broader community.
6. If you find that you are struggling with a certain site, approach your supervisor about the concerns you have. For example, you may find it especially difficult to remain objective and “approachable” when dealing with men who have female partners or children. Your supervisor may be able to place you in chat rooms with a specifically queer-identified population. It is important that you don’t allow your own discomfort or biases to influence your ability to provide sex-positive and non-judgemental services.

7. Try to get a feel for a site before making a decision about your profile picture. You can use the agency logo for your profile picture in sites where you are unsure of what the reception will be to a woman's photo. If you do this, however, you are obligated to answer honestly if questioned regarding your gender. In fact, some sites are explicitly women-friendly; in those sites, you may find it to your advantage to post a personal picture to generate conversation.
8. Be honest with yourself about whether you are able to deal with certain types of chatters. Speak to your supervisor when you encounter sites or situations that you are not comfortable with. By being honest about your limitations you can stick to sites where you can provide the best possible service and you can contribute to your agencies ability to build a good relationship with the communities they serve. It is not a failure but part of a journey to learning to be a good service provider.

As a Female, What Do I Do If Chatter Asks My Gender?

If the agency you work for has one profile that all volunteers use:

Check with your supervisor to ensure that the profile description includes a line about volunteers providing the service and that they may be both male or female. If you are asked directly, "Is this a guy or a girl?" you can:

- Redirect them to the profile description that states you could be either and reassure them that the information that is given is objective and factual.
- Simply explain that you are a woman, that you have talked to lots of guys about sex and are comfortable answering any questions he has about sex between guys. Assure him that if he would prefer to speak to a guy you can help him to do that, even if it is not right away.

If the individual in question seems to hesitate or ask, "So which are you?" , be honest about your gender. Try to direct the contact into a productive discussion, such as, "Do you prefer speaking to a guy?" If he indicates that he does you could say, "I can appreciate why you would prefer to talk to another guy about sex. I have talked to lots of guys about the sex they have with other guys and am very cool with that. But, if you would prefer to talk to another guy, you can try... and if you change your mind or still want to talk to me, that would be great."

If the chatter becomes belligerent or aggressive treat the situation as you would according to the guidelines set out by your agency for aggressive, nasty, or belligerent chatters (usually to block id and/or report to your supervisor)

If the agency you work for has an individual profile for each volunteer:

You can use the agency logo for your profile picture in sites where you are unsure of what the reception will be to a woman's picture. If you do this however, **you are obligated to answer honestly if questioned regarding your gender.** You can use some of the techniques above to try to redirect the conversation at this point as well

Some sites are explicitly women-friendly so you may find it to your advantage to post a personal picture to generate conversation. Be aware though each region has a different atmosphere e.g. squirt.org may be very female positive in one area (Kitchener) and less female positive in others (London). Try to get a feel for the site before making a decision whether to use a logo or personal photo on it.

The primary issue for female volunteers regarding being questioned about your gender while doing online outreach is to be honest. Where necessary, provide the chatter with other options for accessing information if the gender of the worker is an obstacle for him or if he would like to speak to a peer. The agency and your relationship to the community is built on honesty and trust. If you violate this trust it could have repercussions for your and your agencies ability to provide services to the community.

Professional Support and Self Care

As a representative of your agency, it's important for you to uphold the agency's image as a GLBT-friendly, judgment-free place to receive quality sexual health information. If you find that you are challenged personally by what you read online, seek guidance and support from your colleagues and supervisor.

It is important that you remain supportive, non-judgemental and sex-positive with the guys you encounter online. Be sure you understand what your agency position is on staff or volunteers expressing personal opinions while working for the agency. If you do make a personal statement, indicate that your opinions are your own and do not necessarily reflect that of your agency.

► 5. Tips From The Field

Dealing with getting hit on:

- Use phrases in your own words that state you are there to answer questions. e.g. Thanks for the interest? I'm actually here today providing sexual health information to guys. Is there anything you are wondering about related to your risk for HIV or other sexually transmitted infections?"
- "Actually, I am working right now. If you have any questions about HIV or safer sex I'll do my best to answer them."
- "Sorry, I am working right now but I would be happy to answer any questions you might have..."

Ways to explain your role as an on-line outreach worker:

- "While I am not a medical professional, as a sexual health educator I am here online to offer chatters the most current factual information I can on issues such as HIV, STIs, safer sex, referrals for HIV testing, etc."
- "I am not actually here to hook-up. I am here as a representative of _____. I provide information to guys looking for answers to questions regarding sex, HIV, transmission, etc."
- "Thanks for sending me an instant message. You may have noticed from my profile that I am in this room as part of a service provided by _____. I will do my best to answer any questions you may have about HIV or related topics."

Ways to deflect sexualized comments:

Chatter: appreciate the advice

Chatter: wish you could show me how to put the female condom....on...lol

Outreacher: haha, i bet if you xtube it there are A LOT of Reality condom videos!

Outreacher: with people far more experienced than me!

Outreacher: :))

Chatter: oh ya

Outreacher: good luck, bud. thanks for your questions

Chatter: later

- "You're too kind! LOL. Is there anything else I can help you with?"
- Well I am working right now, but I am flattered.

Tips for ending circular conversations:

- "So you mentioned concern over _____. Are you concerned about transmission?"
- "I'd like to answer your first question if I can..."
- "You've raised several important issues. Can you narrow down to a specific issue to begin with?"

How to manage on-line discussions with clients where it doesn't seem to be going anywhere:

- "Let me try to re-focus here. Can you repeat your question?"
- "Maybe I should refer you to a helpful website that may be able to answer your question. Try visiting www._____. Let me know if that helps."

How to know when to end your shift:

- If your timeslot is nearly over and there has been very little activity.
- If you have one or more chatters in private conversations you should consider leaving the room/s you are in so as not to invite any new chatters.
- If you are reacting to a previous or ongoing conversation and are emotionally, mentally distracted consider taking a break for self-care/guidance.



- If you recognize the chatter and identify there would be a conflict of interest to continue your shift. i.e. the chatter is a family member, friend, ex/lover, ecetera.

Conversation starters - probing questions or scripts on how to deal with specific issues such as disclosure or criminalization of HIV non-disclosure:

"Actually, you'd be surprised at how many people ask questions about _____."

"I am here for exactly that reason, hard to ask questions. Feel free to ask away."

"It is pretty difficult to shock me, so feel free to ask anything."

"I'm sensing that you have another question."

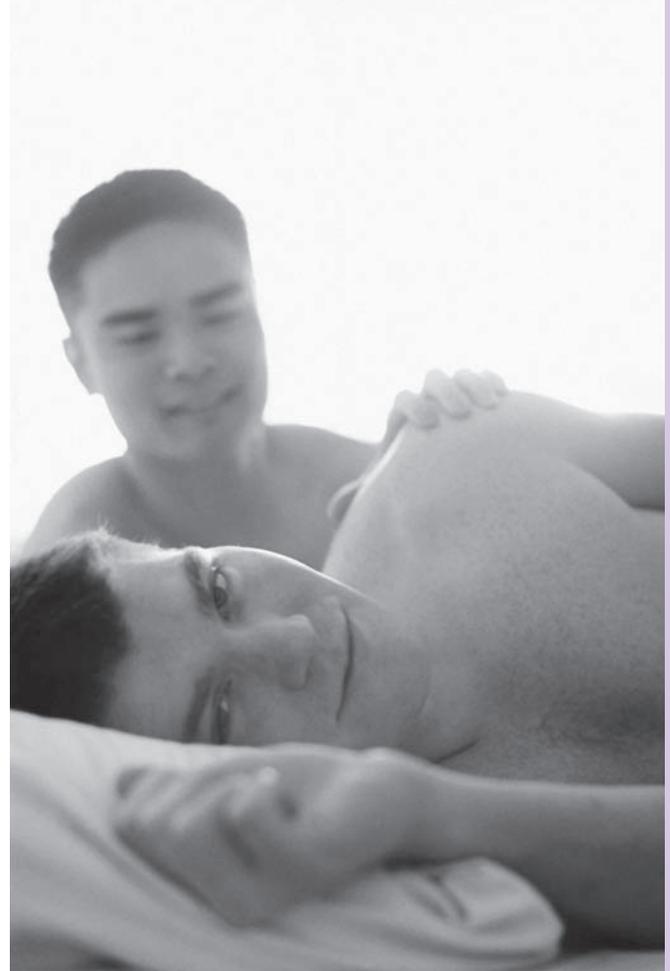
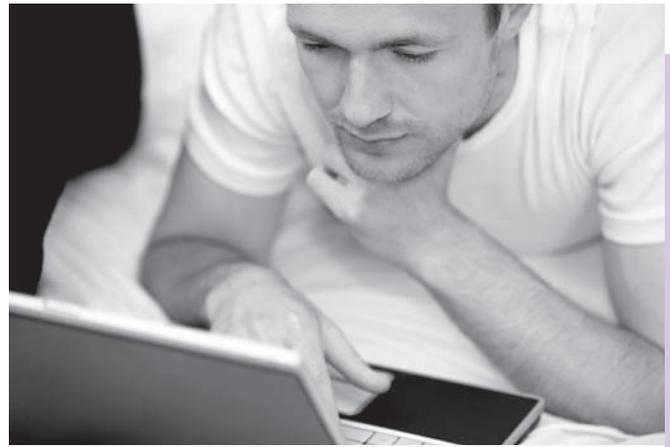
"Would you like to know more about HIV disclosure?"

"Actually the specifics regarding HIV disclosure can be quite complicated. We generally get our information from HALCO, that is the HIV/AIDS Legal Clinic (Ontario). Of concern is the growing trend to prosecution of people living with HIV. For more detailed information we suggest you contact them or visit their website at www.halco.org/home.html "

"That is really interesting. I have found with some guys that what they really want to know is _____."

Things that can go wrong during on-line outreach:

- If you get disconnected from your chatter for any reason, power outage, booted from your server, chatter just disappears, do not automatically re-connect with him when you/he returns to the room. Consider entering a statement such as "sorry about that, had a power outage on my end," or "got booted again." If he is interested in continuing your discussion he will IM/private you again.
- If you feel you recognize your chatter and feel it is a personal conflict to continue chatting with this individual you need to excuse yourself right away. If you are in your work space and someone else is able to continue the discussion ask them to substitute for you. Then you can type "brb" (be right back) to excuse yourself and have the substitute take over, typing "back" and answering the question, etc. If there is no one to substitute, you need to make a reasonable exit. Consider informing the chatter you need to leave but give him the time for the next session (that you are not conducting) or an email address (not yours) that he can send a question to. Remember, if appropriate, discuss this situation with your supervisor as soon as possible by email, voicemail or in person.
- If you realize that the information you have offered is incorrect, do your best to correct the error. If you do not have his email but see he is in the room, you could simply



type "I have some new information for the person I was chatting with, please private me." You could also enter the new information into the chat room as a bulletin if it seems appropriate to do so.

► Appendix A: Websites And Groups

The following is a list of websites and groups that offer useful information for your work. Some of these groups are part of the Gay Men's Sexual Health Alliance. The Alliance also maintains a website for workers across Ontario. For more information, contact the Ontario AIDS Network.
www.ontarioaidsnetwork.on.ca

For Francophone Men:

Toronto:

The Francophone Centre has a very good one.
Go to [www.centrefranco.org/fr/Annuaire Francophone \(bilingual\)](http://www.centrefranco.org/fr/Annuaire_Francophone_(bilingual)).

The City of Toronto French Committee also has one at www.cfvf.org click Resources (bilingual).

The site of Settlement.org has a very good one in Toronto as well at www.etalissement.org/site/REG/toronto_services.asp#accueil.

www.211toronto.ca/fr/index.jsp

For all of Ontario including Toronto:

The Office of Francophones Affaires have one (bilingual).
www.ofa.gov.on.ca/francais/commun-organ.html

For Gay, Bi, Queer Trans Men:

www.transpulse.ca/index.htm

www.queertransmen.org/index.php

www.the519.org/programs/trans/medical.shtmltp://www.positiveside.ca/e/V1011/Transcanada_e.htm

For HIV positive guys/POZ Prevention Sites:

www.poziam.com/index.php

www.posornot.com/

www.livewithit.com/flash/default.aspx

www.bcpwa.org/empower_yourself/positive_prevention/

Currently the AIDS Committee of Guelph and Wellington County (www.aidsguelph.org) and Black Coalition for AIDS Prevention (www.black-cap.com) offer POZ Prevention programs.

For Ethno specific and targeted community programs:

There are a number of organizations that provide service to specific ethno-racial communities. As well, some community-based organizations have specific workers for reaching gay men, MSM, and people from African and Caribbean communities, Aboriginal communities, and people who use drugs. You can find a complete list of community-based AIDS organizations at www.ASO411.ca

For services to Aboriginal men:

see www.oahas.org/

or www.2spirits.com/

For services to people from African and Caribbean communities:

African and Caribbean Council on HIV/AIDS in Ontario

see www.accho.ca/

► Appendix B: General Slang, Shorthand, And Jargon

2	To, Too
420	Marijuana
8 Ball	3.5 grams (usually cocaine)
a/s/l or asl	Age/Sex/Location – (used to ask a chatter his personal information)
AAK	Alive And Kicking
AAMOF	As A Matter Of Fact
AAR	At Any Rate
AAS	Alive And Smiling
ADN	Any Day Now
AFAIK	As Far As I Know
AFK	Away From the Keyboard
AFK2P	Away From Keyboard to Pee
AFN	That's All For Now
AMF	Adios Mother Fucker
AOTA	All Of The Above
ASAP	As Soon As Possible
Asta	Later
AV	Avatar – Graphical representation (a picture) often used in chat rooms to depict a person who is in the room and chatting.
b/f	Boyfriend (also shown as bf, B/F, or BF)
b4	Before
BAK	Back At Keyboard (I'm back)
Bare	Bareback
BB	Bareback
BBL	Be Back Later
BBS	Be Back Soon
BCNU	I'll Be seeing you.
Bear	A very hairy man
Cub	Younger Bear, usually submissive.
Grizzly Bear	Hairy, well proportioned husky bear.
Grrrr	Term usually used to show contentment in bear community.
Koala Bear	Man covered in light body hair
Otter	Term used for a 'slender' bear.
Polar Bear	Older man covered in body hair
Wolf	Long-haired lanky Bear
<BEG>	Big Evil Grin

BFE	Butt Fuck Egypt
BFN	Bye For Now
Bi	Bisexual
Bj	Blow Job/ Oral Sex
Blast	Hit of crack
Blk	Black
Blu	Blue
BMA	Bite My A** (became popular with the Simpsons cartoon show)
boot	To get kicked out of a chat room, or have to restart the computer because you couldn't talk in the chat room anymore.
boy	Submissive role in Daddy/boy relationship
BR	Best Regards
Br	Brown
BRB	Be Right Back
BRH	Be Right Here
<BSEG>	Big S**t Eating Grin
BTA	But Then Again....
Btm	Bottom (receiving partner)
BTW	By The Way
btw	Between you and me ...
Bug Chaser	Someone HIV neg who barebacks
Bump	Hit of Cocaine
C	Cut
Ciao	Good bye
CNP	Continued in Next Post (seen more on message boards than chat)
Collar	Symbol of attachment worn by sub in Leather relationship
CP	Chat Post
CRS	Can't Remember S**t
CU	See You - also posted as cya
CUL8R	See You Later
CUOL	See You On Line
CUS	Can't Understand S**t
CYA	See Ya
CYA	See You Later or Cover your ass
D/D/F (Free)	Disease and Drug Free ⁵

⁵ Note that this is a derogatory term, stigmatizing to those who have an illness, infection or HIV, or who are dealing with addictions.

D/L, DL, d/l, dl	Downloading, or Download it.
Daddy	Dominant role in Daddy/boy relationship
dd, ds, dh	Darling or Dear: Dear Son, Dear Daughter, or Dear Husband. Usually exchanged in family chats.
DDSOS	Different Day, Same Old S**t
DEGT	Don't Even Go There
DIKU	Do I Know You?
DIS	Did I Say
Dom	Dominant Person
<EG>	Evil Grin
EM	E-Mail
EMA	E-Mail Address (example: ?ema or ema? = what is your email address?)
EOT	End Of Thread (meaning end of discussion)
ez or EZ	easy (one of the really old ones)
F2F	Face To Face
FAQ	Frequently Asked Question
FB	Fuck Buddy
Fem	Feminine
FF	Fist Fucking
FISH	First In Still Here (someone who is on line TOO much)
FITB	Fill In The Blanks
flame	To insult someone. Used when a person asks a stupid question, or says something rude to irritate the users of a chat room or message board.
FOAD	Fuck Off And Die
FOCL	Falling Off Chair - Laughing
FTS	F*** This S***
fu	f*** you. (If you can't figure this one out, you shouldn't be on line!)
FUBAR	F***ed Up Beyond All Repair / Recognition
FUD	Fear, Uncertainty, and Doubt
FWIW	For What It's Worth
FYI	For Your Information
<G>	Grin
g/f	Girlfriend (also shown as gf, G/F, or GF)
GA	Go Ahead
GAL	Get A Life
gest	Gesture ... a small multimedia file played over the Internet, usually expressing an emotion or comment.
GFN	Gone For Now
GGOH	Gotta Get Outta Here
Gift Giver	Someone HIV positive who barebacks
GL	Good Luck

GMTA	Great Minds Think Alike
GR (or GTR)	Gotta Run
GR&D	Grinning, Running, and Ducking.
GTRM	Going To Read Mail (leaving chat room to check email)
H&K	Hugs and Kisses
hack	Person who breaks into software, or disrupts a chat room.
HAGD	Have A Good Day
HAGN	Have A Good Night
HAGO	Have A Good One
Half	Half a Gram
Halsoft	Name of the company that purchased the brand of chat that Excite offered, now a pay-as-you-go service.
Hanky Code	Code System of different colored Hankerchiefs used to define one's sexual interests
HB	Hurry Back
hosts	Refers to the people who are running the chat room; they usually have the ability to kick a person off due to rude behaviour.
Hot Rail	Heating up cocaine and snorting the smoke/ drug simultaneously.
HTH	Hope That Helps
huggles	Hugs
IAC	In Any Case
IANAL	I Am Not A Lawyer (expect an uninformed opinion)
IB	I'm Back
IC	I See
ICQ	I Seek You. A computer program used to communicate instantly over the Internet.
IDK (or IDN)	I Don't Know
IDTS	I Don't Think So
ILU (or ILY)	I Love You
ILYVM	I love you very much
IM	Instant Message
IMHO	In My Humble Opinion (or In My Honest Opinion)
IMO	In My Opinion
IOH	I'm Out of Here
IOW	In Other Words
IRL	In Real Life
IYO	In Your Opinion
JAS	Just A Second
JIC	Just In Case
JK	Just Kidding

JMO	Just My Opinion
JO	Jack Off
JW	Just Wondering
k, K, or kk	O.K.
KIT	Keep In Touch
KOTC	Kiss On The Cheeks
KOTL	Kiss On The Lips
L8R	Later (an early one, kind of outdated with current 'young geeks')
LDR	Long distance relationship
LFFAO	Laughing My F***ing Ass Off
LKG	LookinG
LMAO	Laughing My Ass Off
LOL	Laughing Out Loud
LTNS	Long Time No See
LTR	Long Term Relationship
LTS	Laughing To Self
LY	Love You
LYL	Love You Lots
Masc	Masculine
Master	Dominant Role in Master/slave relationship
MSG	Message
MTE	My Thoughts Exactly
MUG	Refers to a new user of a chat program, goes back to Excite VP days when the AV (or icon) that represented someone new was a picture of a coffee mug.
MYOB	Mind Your Own Business
NE1	Anyone
Neg	HIV Negative
newbie	Refers to a person who is new to an area or technology. v Also seen as nube, nooby, nubie, nb, etc.
NFW	No F***ing Way
NIMBY	Not In My Back Yard
NM (or nm)	Never Mind
NP (or np)	No Problem
NRN	1. No Response Necessary 2. Not Right Now
NT	No Thanks
OBTW	Oh, By The Way
OF	Old Fart, someone who has been around for a while.
OIC	Oh, I See
OJ	Only Joking
OK	Only Kidding
OL	the Old Lady

OM	the Old Man
OMFG	Oh My F***ing God
OMG	Oh My God
OT	Off Topic
OTE	Over The Edge (beyond common sense or beyond good taste)
OTH (or oth)	Off The Hook: Something is really popular, or hot. Very exciting.
OTOH	On The Other Hand ...
OTOMH	Off the Top Of My Head ...
OTR (or otr)	Off The Rack: Saying that something is outside the ordinary.
OTW	On The Way ... I've sent a file to you, it's "On the way"
P911	My parents are in the room. (P = Parents, and 911 = emergency.) In other words, either drop the subject or watch the language.
PANS	Pretty Awesome New Stuff (often referring to computer technology)
Papi	Latino/Man
PCMCIA	1. Personal Computer Memory Cards International Association 2. People Can't Master Computer Industry Acronyms (slang)
PEBCAK	Problem Exists Between Chair And Keyboard
peep this	Hey, listen to this, I've got some interesting news.
peeps	People. (Example: "There sure are a lot of peeps in this room" – meaning a lot of people are in the chat room.)
Pic	Picture
PITA	Pain In The Ass
Pls (or PLZ)	Please
PMJI	Pardon Me for Jumping In (when you enter into a new conversation)
PNP	Party 'N Play (Using drugs while having sex.)
poof	When someone leaves a chat room
POS	Parents are looking over my Shoulder.
Pot	Marijuana
POTS	1. Plain Old Telephone Service 2. Parents Over The Shoulder (I can't really talk)
Poz	HIV Positive
PPL	People
PVT	Private
QT	Cutie
RM (or rm)	Ready Made: pre-existing
r/t	Real Time (also: RT, or rt)

RFC	Request For Comments (used more in newsgroups)
RL (or rl)	Real Life (as opposed to being online)
ROFL (or ROTFL)	Rolling On the Floor, Laughing
ROFLMAO (or ROTFLMAO)	Rolling On the Floor Laughing My Ass Off
ROFLMFAO (or ROTFLMFAO)	Rolling On The Floor Laughing My F***ing Ass Off
RSN	Real Soon Now
RT	In Real Time
RTFM	Read The F***ing Manual (response to beginner question on net, chat, newsgroups, etc.)
RU	Are You?
Runners	Transporters
Running	Term for injecting drug
<SEG>	Shit Eating Grin
SH	Same Here
Slamming	Term for injecting drug
slave	Submissive Role in Master/slave relationship
Slingers	Drug Dealers
SN	Screen Name. (The name or moniker selected by person in an IM or chat program.)
SNAFU	Situation Normal, All F***ed Up
SO	Significant Other
SOL	Shit Out of Luck
SOS	Same Old S**t
SOTA	State Of The Art
SPST	Same Place, Same Time
SSDD	Same S**t, Different Day
Stach	Mustache
STFU	Shut the F*** Up
STR8	Straight (can refer to sex, or DSTR8 as in Damn Straight)
STW	Search The Web
Sub	Submissive Person
Sup	What's up?
SY	Sincerely Yours
SYL	See You Later
TAFN	That's All For Now
TC	Take Care
Teenager	Half an 8 Ball
TFH	Thread From Hell (a topic or discussion that won't stop – esp. newsgroups)
TGIF	Thank God It's Friday
THX	Thanks!
TIA	Thanks In Advance

TM	Text Message (often refers to communications with text over cell phones)
TMI	Too Much Information
TNT	'Til Next Time
Top	Top (insertive partner)
TPS	That's Pretty Stupid
TPTB	The Powers That Be (can sometimes refer to the people who are running the chat room or server)
Track Star	Term for injecting drug user
Trans	Transgender/sexual
TRDMF	Tears Running Down My Face: Can be caused by laughter or sadness.
TS	Tough S**t
TSFY	Tough S**t For You
TTFN	Ta-Ta For Now
TTTT	These Things Take Time
TTYL	Talk To You Later
Twenty	2 or 3/10 th of a gram
TY	Thank You
TYT	Take Your Time
TYVM	Thank You Very Much
UB2	You Be too
Uc	Uncut
UR	Your/You are
US	You Suck
usa or USA	Until Sides Ache: Usually used with one of the laughter acronyms such as "lolusa" Laughing Out Loud Until my Sides Ache.
UV	Unpleasant Visual
UW	You're Welcome
UY	Up Yours
Vers	Versatile (sex partner that can be a top or bottom, depending on mood.)
VGL	Very Good Looking
W/O	Without
WB	Welcome Back
WC	WelCome
<WEG>	Wicked Evil Grin
WEU	What's Eating You?
WFM	Works For Me
Whole Cookie	1 oz of cocaine converted into crack. (Usually cooked in baby jar; when it's finished it comes out looking like a cookie and is divided.)
Wht	White
WIIFM	What's In It For Me?

WOOF!	Complimentary term meaning that someone is good looking.
WT?	What The ...? or Who The ...?
WTF	What The F**k
WTG	Way To Go
WTGP?	Want To Go Private? (move to a private chat room)
WWJD	What Would Jesus Do?
YAA	Yet Another Acronym
YBS	You'll Be Sorry

YL	Young Lady
YM	Young Man
YMMV	Your Mileage May Vary
YR	Yea, Right. (sarcastic)
ys	You Stinker
YVW	You're Very Welcome
YW	You're Welcome
Z or Oz	Ounce

Emoticons: (symbols used to display feeling)

s, *S*, <s>, = smile	*g*, <g> = grin	xoxo = hugs and kisses	huggggggsssss = hugs
w, <w> = wink	*g*, = giggles	*k*, *K* = kiss	;-)~~~~~ = giving someone the raspberry.
(((((person)))))) = giving someone a virtual hug.	\~/ = glass with a drink. (usually booze)	^5 = high five	?^ = What's Up?
/? = a cup of tea	[]> = Cup of coffee	@@@ = Cookies	@-/- = a rose
:-) = smile	;-) = wink	<:- = curious	:-) = cute
:- (= sad	8-) = wears glasses	:-) = embarrassed	:-/ = perplexed, confused
;- (or ;-(= to cry	:-< = pouting	>:- (= angry	0:-) = angel
:- = bored or no opinion	:-> = grin/mischievous	-) = dreaming	:-O = shouting, or shocked
:-o = talking, or surprised	>:- = mad / angry	:-D = big grin or laugh	:-O = scared
:-x = keeping mouth shut	:o) = smiles (w/nose)	:)))))) = lots of smiles	;-P = sticking tongue out
# 8 -) = nerd, or person with glasses and crew cut.	&- (= crying	!:-) = I have an idea	;-{) = person with a mustache
;-)~ = sexy tongue – or drunk	;-) = being cute	c["] = coffee mug	[_]> = another cup or mug
:-> = grin/mischievous	<:- = curious	-) = soundasleep	:-x = I'm keeping my mouth shut



GMSH
Gay Men's Sexual Health Alliance

 AIDS
COMMITTEE
OF
LONDON