



# Gay-friendly

Doctor Handbook



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## Why the Dr. Rainbow Scheme?

As a **professional** doctor, I am treating **all patients equally regardless** of their sexual orientation and identity, why should I join the scheme?

### What doctors say about their patients' experiences.

A male patient once came to my clinic for medical consultation with a sore throat, who had taken antibiotics under another doctor's prescription but was getting no better. After having a detailed inquiry with him, I found that he had had oral sex with men before. Having a sore throat was actually the symptom of being infected with gonorrhoea, but not catching a cold or a flu. Therefore, even if the symptoms may be ordinary, a careful and attentive inquiry is still required to help the patient solve his/her physical distress.



**Dr. Fong Yeung**  
Family Medicine Specialist

Patients who come to my clinic are usually having mental distress. As a psychiatrist, I must understand all aspects of the patient's life including their family and relationships. Every life stage can be a challenge for LGBT persons— the struggle of coming out to the family when they are young, the anxiety of hiding their sexual identity when they are dating, the stress of living another life of a heterosexual as a disguise. Even when they are old, they still have to suffer from the pain of not being able to arrange the after-death matters of their deceased partner due to the lack of marriage recognition in Hong Kong.

Therefore, if the patient's sexual orientation is not well-understood, it is difficult to figure out the trouble they face accurately and holistically. Patients will tell you what is truly troubling them in their lives only when you are believed to be open-minded and non-judgmental.



**Dr. Fung Wai Choy**  
Psychiatrist

As long as the information related to the patient's sexuality is clinically relevant, I would ask the patient about their sexual orientation carefully. It has basically become part of my consultation practice. For example, if a patient has shown some skin rashes, or any signs of sexually-transmitted infections on his body, I would ask the patient about his/her sexual orientation and sexual practices. If he is a 10 (versatile), and has engaged in anal sex with another man before, I would take a swab from both his urethra and anus for a comprehensive physical examination.

In fact, as long as the patients understand the relevance between my inquiry into his sexuality and his health condition, they don't really mind disclosing their sexual orientation. If a doctor can ask the patient about his/her sexual orientation and related issues sincerely, a more accurate diagnosis can be made.



**Dr. Wong Chun Fung**  
General Practitioner

**Gay patients need to  
be treated  
equally  
and they need your  
sensitivity too!**

**Dr. Rainbow Scheme is also developed to prevent patient experiences like these...**

**Case 1**

When I walked into the Social Hygiene Clinic and told the doctor that I would like to have check-ups, he asked me if I was gay and I admitted that I had sexual contact with men before. He looked shocked and asked me some questions as if I was in interrogation, like 'you play games like that?' and 'did you do "that" thing?' I regret disclosing my sexual orientation. I hope that doctors could understand that sexual orientation is not something you 'play with', but is something you are born with.

## Case 2

I went to a general practitioner for the treatment of diarrhea and disclosed my sexual orientation in the consultation. The doctor looked really shocked and started to talk about the Bible, saying that God doesn't permit homosexual acts. He did not do any check-ups for me and gave me some antibiotics right away. I felt really disrespected. I hope that doctors would not let their own opinion on homosexuality affect their clinical assessment or propagate their religious values in consultation.

## Case 3

I went to a general practitioner for STI check-up. The doctor was very shocked when I disclosed my sexual orientation and recommended that I go to the New Creation for counselling and conversion of my sexual orientation. I felt really offended. My sexual identity is not a mental health illness but he treated me like I have some kind of problem.

**55%**



of the gay men would hide their sexual orientation when they seek sexual-health related medical services.



**20%**

of the gay men would not seek medical services for fear of disclosing their sexual identity.

According to the International Code of Medical Ethics, a physician:-

**“shall NOT permit considerations of...sexual orientation...to intervene between [his/her] duty and [his/her] patient.”**

**“shall NOT allow his/her judgment to be influenced by ...unfair discrimination.”**

The above code is adopted by the World Medical Association and ‘the Medical Council of Hong Kong will have regard to the International Code in the exercise of its disciplinary power’ to registered medical practitioners in Hong Kong.

AIDS Concern believes that the majority of Hong Kong medical practitioners put the health of their patients as first priority and do not want their gay patients to worry about having the above patient experiences.

If you join the Dr. Rainbow Scheme, we will provide you with information and resources including a workshop on the culture and health concerns of the gay community, to assist you in providing optimal care to gay patients.

**How do I  
become a  
Dr. Rainbow?**

## Familiarize with the healthcare needs and culture of the gay patients

1

- The relationships and sexual practices of gay people might be different from those of heterosexuals, as most of them do not perform penetrative sex that may cause pregnancy.
- You may have to apply a different lens in consultation with gay patients if your specialty involves clinical assessment related to sexual health, and discuss sexual health issues with all your patients openly in a non-judgmental manner.
- For more information regarding the particular healthcare needs of gay patients, please refer to P.8.

## Make gay patients feel welcomed in the access and intake process

2

- Display leaflets of gay community health concerns or post the rainbow sticker in the clinic.

## Increase your sensitivity to diverse sexual identities in consultation

3

- A lot of gay patients may feel embarrassed if healthcare professionals assume that their partners are of the opposite sex. You may use gender-neutral language such as 'partners' or 'significant others' when talking about sexual relationship of the patients.
- Ask open-ended questions and avoid making assumptions about the sexual orientation or behavior of the patients.

## Make gay patients feel safe to disclose their sexual orientation

4

- Ensure the privacy of your patients. When the patient is accompanied by his family members, you may ask the patient if he needs to be alone for consultation to avoid his unwanted disclosure in front of his family members.
- Inform patients that the information about sexual orientation is confidential.

## Maintain a culturally safe environment for gay patients

5

- Provide training to all staff in the service to ensure they are confident and understand their responsibilities about delivering gay-friendly practice.
- Respond to breaches of gay-friendly practice by staff and make sure the related staff know the importance of gay-friendly practices in the clinic.

*These may be small changes for you, but they can mean big differences for your gay patients!*

If you also agree that gay patients need to be treated sensitively, please do not hesitate to contact us and follow the steps below, so that we can provide you with further resources on gay-friendly healthcare practices.



Fill in the application form



Join our gay-friendly healthcare training workshop or webinar



Get a rainbow sticker from us and you may choose to post it in your clinic to build a gay-friendly medical environment



Receive regular email updates from us about the latest trends and healthcare concerns of the sexual minorities

# Particular Health Concerns of Gay Male Patients

## HIV and sexually transmitted diseases (STDs)

1

- Sexually active gay men are at an increased risk of HIV and STD infections.

**5.85% HIV**

HIV prevalence among the gay community in 2014 <sup>1</sup>

**6%**



STD prevalence among gay men in 2010 <sup>2</sup>

- Anal intercourse, one of the common practices among the gay men, carries a significant risk of HIV and STDs transmission if it is conducted without condoms. The thin mucous membrane lining the anus and rectum makes it much easier for different viruses to find a way to enter the body.
- You may counsel your patients on safer sex practices and the importance of using condoms and lubricant in anal sex and oral sex.

## Depression or anxiety due to social pressure

2

- Stigma and discrimination towards gay men creates a hostile social environment that causes a high prevalence of depression and anxiety in the gay community.
- Due to the social pressure regarding disclosing their sexual orientation, many gay men may have internalized stigma and find it difficult to disclose their sexual orientation to the healthcare providers. Some of them may not even identify themselves as gay men even when they have experienced same-sex sexual contact.
- You may support your patients by conducting consultation in a non-judgmental way and make them feel safe in disclosing their sexual orientation or sexual practices.

**40%**



of the gay men would not go for HIV testing for fear of disclosing their sexual identity.

## Substance use

3

- Substance use is common for some gay people. This includes substances ranging from crystal methamphetamine (ice), to viagra, ketamine and amyl nitrate (poppers).
- The use of recreational drugs may decrease awareness of safer sex practices and increases the risk of HIV infection.

**13%**



the prevalence of substance abuse is 13% among the gay people. <sup>2</sup>

## More on the Hong Kong HIV epidemic

The HIV epidemic is rising sharply in recent years. There are 2 new cases of HIV infection every day in Hong Kong.

Over **50%**

of newly diagnosed cases acquired the infection via homosexual contact.

Antiretroviral therapy (also known as cocktail therapy) can now effectively suppress the virus. Generally, HIV virus does not have a devastating impact on people's health and life expectancy if medication is taken regularly.

# Particular Health Concerns of Lesbian Patients

## Sexually transmitted disease


- Lesbians can get the same sexually transmitted infections (STIs) as heterosexual women. Although lesbians are at lower risk of transmitting HIV, they can give each other STDs like herpes, gonorrhea and chlamydia by vaginal-vaginal contact, oral sex, digital vaginal or anal contact, and sharing of sex toys.
- Therefore, it is important to avoid presuming the sexual acts all women experience are heterosexual contact. When you have to ask about the patients' sexual history, it is better to ask 'Have you ever had sex recently, regardless of the gender of your sexual partner?' instead of asking whether they have boyfriends or husbands.
- The awareness of safer sex practices is generally low among lesbians. Therefore, you can also advise your patient to practice safer sex by cleaning sex toys before and after use, use finger condoms (available in sex shops) during digital penetration, and have a small piece of latex during oral sex.



**60%** of the lesbians never conduct safer sex practices.<sup>3</sup>


## Smoking and Cancer

- Local evidence shows that lesbians are more likely to develop lung cancer than the general female population.

**63%**  of the lesbians reported to be current smokers.<sup>4</sup>

- Lesbians are more likely to develop breast, endometrial, and ovarian cancers, as they may not experience the full-term pregnancy some heterosexual women have that naturally protect them from these cancers. Hormones released during pregnancy and breastfeeding are thought to protect women against these cancers.

- The viruses that cause cervical cancer can be sexually transmitted between women as well. However, most lesbians underestimate the risk of their same-sex behavior.

Only **13.8%**  of the lesbians get routine pap tests to detect cervical cancer.<sup>4</sup>

## Mental health and domestic violence

- Lesbians may suffer from intimate partner violence just like any other heterosexual women, including physical violence, psychological abuse, sexual abuse, and different forms of threats or manipulative behavior. These acts of violence would cause serious mental and physical trauma on the battered lesbians.

**49.9%**  of the homosexuals have suffered from domestic violence.<sup>5</sup>

- Studies have shown that lesbians suffer from more serious intimate partner violence than gay men because they seldom fight back when they are attacked.
- While the forms of violence against homosexuals and heterosexuals might be similar, some factors that contribute to same-sex domestic violence are unique. For example, a lesbian might be threatened to stay in the abusive relationship for fear of having her sexual orientation revealed to significant others or being unable to find another partner in the community.

# Dispelling Myths

*Be aware of the healthcare issues and culture of the gay community, but do not assume that they are all the same!*

## 1. Are all gay men related to the transmission of HIV?

The latest figure from HARiS in 2014 shows the prevalence of HIV is 5.85% among gay men, which is higher than that of the general public. However, transmission of HIV is related to unsafe sex practices and has nothing to do with sexual orientation. Anyone who engages in unsafe sex runs the risk of being infected with HIV.

## 2. Do all gay men perform anal sex?

According to the Asia Internet MSM Sex Survey (AIMSS, 2010) in Hong Kong, 64.5% of gay men had performed anal sex in the past 6 months, and 15% of the respondents indicated that they have never tried anal sex in their whole lifetime. On the other hand, some heterosexuals may perform anal sex. According to the research by Centers for Disease Control and Prevention (CDC), 40% of men and 35% of women between 25 and 44 had engaged in heterosexual anal sex.

## 3. Are all gay men effeminate? Are all lesbians masculine?

The term “gay” is often associated with sissy and effeminacy. It is true that some gay men may cross dress and do not exhibit traditional heterosexual male behavior. However, the majority of gay people do not see themselves as feminine. Many of them are indeed very masculine. Similarly, not all lesbians exhibit male behavior or dress like a man. A person’s gender expression (whether he/she is feminine or masculine) has nothing to do with their sexual orientation. You cannot assume the guy is gay or straight by their career, appearance or behavior alone.

## 4. Do all gay men or lesbians have multiple sex partners?

With reference to the statistics by AIMSS in 2010, 24% of gay men only have one single sex partner in the past 6 months. Like heterosexuals, some gay men and lesbians have multiple partners, some have one partner, and some go through periods without any partners.

Therefore, try not to make hasty assumptions on the type of sexual relations your clients have based on their sexual orientation. When you need to ask questions regarding the patients’ sexual health, remember to focus on sexual practices rather than their sexual orientation.

# Gay Slang

## 1/0/10 (Top/Bottom/Versatile)

1/0/10 (Top/Bottom/Versatile) is the gay slang that describes the sex positions in anal sex. A 1/Top is usually the person who engages in penetrative role during anal sex; while 0/Bottom is usually the one who receives penetration. A 10/Versatile is the guy who is open to both insertive and receptive anal sex.



# Sauna

Sauna is a gay cruising venue. Apart from being an entertainment venue where they could relax, sauna is also a venue where gay men look for sex with other guys. Condoms and lubricant are usually provided in the dark rooms and private cabins.

# Chem Fun/Party and Play (PNP)

Some gay men have the habit of taking recreational drugs during sex to experience more sexual pleasure. They would call it party and play (PNP) or chem fun, which may last for many hours and many include different high-risk sexual behaviors, like bareback (no condoms) and group sex.

# Member


The term “homo” comes from people outside the gay circle. In the gay community, this term is not often used, and some gay men may not feel comfortable about being called ‘homo’. They usually name themselves as “member”.

# TB/TBG/Pure/No label/Bi

A TB (Tomboy) is usually a lesbian who exhibits male behavior or dresses like a man. TBG is a lesbian who is attracted to TB and exhibits comparatively feminine behavior. There are also some lesbians who are feminine, and are attracted to feminine lesbians, which people call ‘pure’ relationship. ‘No label’ means a lesbian who does not consider herself to fall into the stereotypical categories of ‘TB’, ‘TBG’ or ‘Pure’. ‘Bi’ is the abbreviation for bisexual.

1. HIV and AIDS Response Indicators Survey (HARIS)
2. Asia Internet MSM Sex Survey (AIMSS)
3. Survey on lesbian safer sex practices by Women Coalition of HKSAR 2007
4. Wu Yingyi (2010). Dissertation of MPH: A cross-sectional kap study on health seeking behavior among lesbians/bisexuals in Hong Kong. Pp.5-6
5. Mak Wing Sze (2013) Risk and Protective Factors of Same-Sex Intimate Partner Violence in Hong Kong. J Interpers Violence. 28:1476-1497

## Contact AIDS Concern

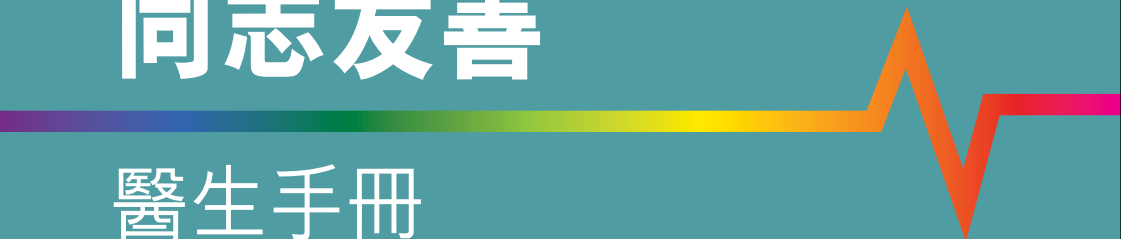
 2898 4411

 [men2men@aidsconcern.org.hk](mailto:men2men@aidsconcern.org.hk)



# 同志友善

醫生手冊



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## 為什麼要加入「同志友善醫療推廣計劃」？

身為一位**專業**醫生，不論病人的性傾向及身份，我都**一視同仁**地向他們提供服務，不是嗎？

### 聽聽醫生們分享的真實個案……

曾經有一位男病人來我門診看病的時候喉嚨痛，之前在其他醫生處方下服用抗生素，但未見好轉。經過詳細的詢問後，發現他曾經與男人發生過口交的行為，而喉嚨痛原來是他感染淋病的徵兆，而不是普通傷風感冒的症狀。因此，作為一個家庭醫學醫生，即使是看似普通的症狀，都需要醫生細心詢問才能為病人解決生理上的困擾。



方陽  
家庭醫學醫生

來我們門診的病人好多都有情緒方面的困擾。作為一個精神科醫生，我必須了解一個病人的家庭、感情各方面的生活狀況。對於一個同志來說，每個生命的階段都可以是一個關卡：年輕同志面對家人出櫃的掙扎、到拍拖的時候又要隱藏自己的身份，每日緊張地把自己裝扮成一個異性戀者去交代，到老年的時候，又因為社會缺乏對同志婚姻的認可，甚至在伴侶患重病離世的時候都無法為對方辦理身後事。這些都是一般異性戀者不會遇到的危機和壓力。

因此，如果不了解病人的性傾向，便很難準確而全面地理解他們遇到的問題。只有讓病人覺得你是開放及不帶批判的，他才會把自己的生活狀況全面地告訴你。



馮威才  
精神科醫生

只要是性傾向相關的資訊與醫學診斷有關，我都會細心詢問病人的性傾向，這基本上已經成為我問診過程的一部份。例如如果一位病人皮膚出紅疹，或者身體上出現了一些性病的徵兆，我便需要問及他的性傾向和性行為模式。如果他是一個10仔，與男人發生過肛交的行為，我就可能需要在他的尿道口及肛門都取樣作全面的檢查。

事實上，只要讓病人知道我詢問性傾向的資訊與他的病情相關，他們通常都不會介意透露。因此，如果醫生能夠開放而誠懇地問及病人的性傾向，便可以更準確地為他們解決生理上的困擾。



黃峻峰  
普通科醫生

## 常言道： 「醫者父母心。」

所以，同志病人  
需要你的一視同仁，  
也需要你的敏感度！

### 「同志友善醫療推廣計劃」 也是要避免以下病人的真實體驗……

#### 個案一

我曾經去過社會衛生科做性病檢查。當時醫生聽到我說要做檢查時問我是不是同性戀，我就坦白說我曾經與男人發生性行為。之後他神色凝重，做了一些審犯式的「輔導」，說了一些「好玩唔玩玩呢D?」、「有無『咩咩』呀?」之類的話。我好後悔透露自己的性傾向。希望醫護人員知道，性傾向不是「想玩的野」，而是天生的。

## 個案二

我因為肚瀉而到全科門診求醫，對醫生透露了性傾向。醫生一臉錯愕，開始談起聖經，說上帝不會容許同性戀行為。他沒有做任何檢查，直接給我開抗生素。我感到很不受尊重，希望醫生不會因他們對同性戀的意見而疏忽診症，也不會在診症時宣揚自己的宗教意識。

## 個案三

我到全科門診接受性傳染疾病的檢查。在我透露了性傾向後，醫生表現震驚，並建議我到新造的人協會接受輔導，改變性傾向。我感到十分冒犯。我的性傾向不是一種病，但他的診斷手法卻令我感到如此。

超過五成男同志

**55%**



為了隱瞞性傾向，在尋求性健康相關的醫療服務時，避談其同性性經驗。



香港兩成男同志

**20%**

因為害怕透露自己的性傾向不尋求醫療服務。

根據醫學倫理國際守則，醫生：

「不容許任何……  
**性傾向**……或任何其他因素  
干擾他/她對病人的責任。」

「不得被個人利益或不公平的  
**歧視**左右其判斷。」

以上守則獲世界醫學會採納，而香港醫務委員會在「行使有關紀律處分的同時，將會參考國際守則」。

「關懷愛滋」相信，大部份醫生都以病人的健康為首要考慮，亦不希望同志病人在尋求醫療服務時擔心被歧視。我們將會為你提供豐富的資源及工作坊，讓你更了解同志的文化、醫療需求及就醫困擾，協助你為同志病人提供更適切的服務。

如何成為  
「同志友善醫生」

## 了解同志病人的醫療需求及文化

1

- 同志朋友的親密關係和常用的性愛方式可能與異性戀者有所不同。他們大多不會有導致懷孕的插入式性行為。
- 如果你的專科涉及性生理等相關的臨床評估，對同志病人的評估方式亦自然有所不同。與病人討論性健康時，試著抱持開放而客觀的態度，你的同志病人將願意說出更多。
- 欲知同志的具體醫療需要，可參閱P.8。

## 在診所營造同志友善的環境

2

- 於診所放置同志健康小冊子及與同志訊息相關的海報，或貼出「同志友善貼紙」。

## 提升同志敏感度，實行友善問診

3

- 有些醫療人員會假定病人的對象為異性，讓許多同志病人感到尷尬。談及病人的性關係時，你可選擇使用性別中立的稱謂，如「伴侶」或「另一半」，誠懇地詢問病人的性經驗。
- 詢問開放式的問題，避免對病人的性傾向或性行為作不必要的假定。

## 讓同志病人安心透露性傾向

4

- 確保病人私隱。病人隨同親屬求醫時，你可主動詢問病人是否希望單獨會談，避免病人在親屬面前無預警地出櫃，讓他在看診時感到備受尊重。
- 明確向病人表明其性傾向資料將會保密。

## 提供安全的診療環境，保障同志病人免受歧視

5

- 鼓勵員工參與我們舉辦的培訓班，確保他們有信心向同志病人提供友善的服務，並了解其重要性。
- 如有員工違反同志友善規定，必須正視，並協助員工改變其服務質素。

你可能覺得這些改變  
很細微，但對同志病人  
意義重大！

如果你認同同志病人需要以上適切的服務，歡迎按照以下步驟作出行動及聯絡我們，本會將為閣下提供更多相關的資訊。



填妥報名表



參與我們的培訓工作坊或  
網上研討會



向本會索取「同志友善貼紙」。  
你可以選擇於診所張貼，營造同  
志友善的環境。



定期接收本會提供的電郵  
資訊，了解同志社群中的  
最新動向及健康需求。

# 男同志 三大健康 議題

## 愛滋病病毒及性病

1

性活躍男同志感染愛滋病病毒及性病的風險較高。

男同志社群的整體愛  
滋病病毒感染率為

5.85% HIV  
2014年

男同志群體的性病感  
染率為

6%  
2010年



肛交是男同志的其中一種性行為。由於肛門和直腸黏膜很薄，多種病毒容易進入體內。因此，在沒有使用安全套的情況下肛交，感染愛滋病病毒及性病的傳染風險較其他性行為高。

你可建議病人採取安全性行為，並提醒他們肛交及口交時使用安全套及潤滑劑的重要性。

## 香港的愛滋病 感染情況

香港近年的愛滋病病毒  
感染人數急升，每天新  
增約兩宗感染個案。

## 社會壓力導致的憂鬱或焦慮

2

對男同志的負面標籤和歧視，讓不少同志朋友產生憂鬱和焦慮。

由於公開自己性傾向需要面對重大的社會壓力，許多男同志會出現內化污名的情況，向醫療人員透露性傾向感到困難。儘管曾進行同性性接觸，有些男同志甚至不會透露自己的性傾向。

45%   
男同志因害怕透露其性傾向，而不接受愛滋病病毒測試。

在診症時，你可誠懇地詢問及了解，支援病人，令他們安心透露自己的性傾向或性行為。

## 使用娛樂性藥物

3

一些男同志會經常使用娛樂性藥物。使用的藥物包括甲基安非他命（冰毒）、威而鋼、氯胺酮和亞硝酸酯（芳香劑）。

13%   
男同志使用娛樂性藥物。

服用娛樂性藥物會減低安全性行為的意識，增加愛滋病病毒感染的風險。

超過  
50%   
新個案均透過同性性  
接觸感染。

抗逆轉錄病毒療法（雞尾酒療法）可有效抑制病毒。一般而言，如果定期服藥，愛滋病病毒對感染者的健康和壽命並不會造成嚴重影響。

# 女同志 三大健康 議題

## 性病

- 女同志與異性戀女士一樣有機會感染性病。雖然女同志感染愛滋病病毒的風險較低，然而，她們依然可能從外陰道與外陰道的接觸、口交、陰道手指交、及共用性玩具等性行為感染性病，例如疱疹、淋病及衣原體。
- 因此，當你需要知道病人的性經驗時，宜採取性別中性的問診方式，以「你最近有沒有進行過性行為？不論對象是男或女。」，來取代「有沒有男朋友或老公？」類似的異性戀關係假設問句。
- 調查發現，女同志的安全性行為意識偏低。因此，你可建議病人採取安全性行為，提醒她們在使用性玩具前後要洗乾淨，並在進行指交及口交時分別使用指交套及口交膜。指交套及口交膜在性用品商店有售。



**60%**  
女同志從未進行安全性行為。<sup>3</sup>

## 吸煙及癌症

- 調查發現，女同志患上肺癌的風險高於一般異性戀女士。

超過六成女同志

**63%**



目前是吸煙者<sup>4</sup>

- 女同志一般患上乳癌，子宮內膜癌和卵巢癌的風險較高，因為她們大多沒有生育經驗，而懷孕和哺乳期間釋放的激素被認為是保護婦女免受這些癌症的天然屏障。
- 引致子宮頸癌的病毒也能透過女同志之間的性行為傳播。然而，她們一般低估了女女性行為之間的風險。

只有

**13.8%**



的女同志曾經進行子宮頸癌柏氏抹片檢查。<sup>4</sup>

## 精神健康與家庭暴力

- 女同志與異性戀女士一樣，有可能遭受到伴侶施加的暴力，包括身體暴力、精神虐待、性虐待和一切經濟操控及威脅的行為。這些暴力行為對受虐的同志會有嚴重的精神創傷和生理影響。
- 研究顯示，女同志遭受的身體暴力較男同志嚴重，因為她們遇到身體暴力時鮮有還手。
- 雖然同志與異性戀者所受到的暴力的形式相若，但亦有其獨特性。例如他們可能會被威脅公開其同志身份，亦會因為怕難以找到另一半而選擇繼續忍受伴侶的暴力。



**49.9%**

的同性伴侶曾遇家暴<sup>5</sup>



# 破解迷思

## 了解同志社群 的醫療議題和文化，但切勿 假定放諸四海皆準！

### 1. 所有男同志都和愛滋病病毒傳播有關嗎？

雖然男同志社群的愛滋病病毒感染率為5.85%，高於社會大眾；然而，愛滋病病毒是透過不安全性行為傳播，與感染者的性傾向無關。雖然不使用安全套進行肛交，感染愛滋病病毒的風險較陰道性交為高，但任何人進行不安全性行為，均承受感染愛滋病病毒的風險。

### 2. 所有男同志都會肛交嗎？

據2010年亞洲區男男性接觸者網上性行為調查，香港有64.5%男同志於最近六個月進行肛交，15%受訪者表示一生從未嘗試肛交。另外，有些異性戀者亦會進行肛交。據美國疾病控制與預防中心（CDC）的調查，年齡介乎25歲至44歲的男女之中，有40%男性及35%的女性曾進行異性肛交。

### 3. 所有男同志都女性化？所有女同志都男性化？

確實，有些男同志會穿異性服裝，行為與傳統異性戀男性大相逕庭。然而，很多男同志並不認為自己女性化，行為亦十分陽剛。當然，亦不是所有女同志的打扮都很男性化。事實上，一個人所表現出來的陽剛/陰柔氣質與其性傾向並不相干。你不可能單憑職業、外型或行為，假定一位男性或女性為同性戀者或異性戀者。

### 4. 所有同志都有多個性伴侶？

根據2010年亞洲區男男性接觸者網上性行為調查的數據，24%的男同志於過往六個月僅有一名性伴侶。跟異性戀者一樣，部分同志有多個性伴侶，部份只有一位性伴侶，而一些同志則可能一段時間內沒有任何性伴侶。

因此，切忌按病人的性傾向，武斷假定他們的性關係或性愛模式。當你需要詢問病人性健康的問題時，請專注於他們的性行為而非性傾向。

## 同志 常用詞彙

### 1/0/10

1/0/10是男同志描寫性愛體位的常見詞彙。1仔通常指肛交時的插入者，0仔通常指肛交時的被插入者。10仔指的是插入或被插入均可。

# 桑拿

桑拿是男同志流連之地。除了放鬆身心外，一些男同志亦會在桑拿中尋找性交對象。陰暗區域和私人廂房一般會提供安全套和潤滑劑。

## Chem Fun/Party and Play (PNP)

有些男同志習慣於性交時服用娛樂性藥物，以獲得更大性滿足，他們稱之為party and play (PNP) 或chem fun，一般為時多個小時，涉及多種高風險性行為，如bareback（不戴安全套）及群交。

## Member

「基佬」這術語來自男同志圈外人士，男同志朋友一般不會用此稱謂。他們會自稱為「member」。

## TB/TBG/Pure/No label/Bi

TB(Tomboy)是衣著、打扮、髮型等偏向男性的女同志。TBG則是喜歡TB的女同志，外觀通常較女性化。有些女同志外觀上比較女性化，亦喜歡同樣女性化的同志，我們稱之為「Pure」。「不分」/「No label」是指裝扮、行為、氣質沒有明顯偏向男性化或女性化或不願被分類的女同志。Bi是bisexuality（雙性戀）的簡稱。

1. 愛滋病預防項目指標（HARIS）調查
2. 亞洲區男男性接觸者網上性行為調查（AIMSS）
3. 香港女同盟會2007年女女安全性行為調查報告及求生手冊
4. Wu Yingyi (2010). Dissertation of MPH: A cross-sectionalakap study on health seeking behavior among lesbians/bisexuals in Hong Kong. Pp.5-6
5. 香港同性親密伴侶暴力行為研究

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