Introduction Sexually transmissible infections (STIs) including HIV remain a significant public health issue for gay men and men who have sex with men (MSM). General Practitioners (GPs) play an essential role in STI testing and management with over 50% of testing in NSW occurring within general practice settings. In 2014 the Sydney Gay Friendly GP list was updated by the STIs in Gay Men Action Group and through this process, it was identified that some GPs needed further training.

Methods A literature review was conducted mid-2014 which identified online learning as an effective modality for providing GPs with MSM relevant training. An expert committee was established including GP and community representatives to provide input and guide the development of the online learning module (OLM). Key issues around primary care experiences of MSM were identified and a 60 min self-paced OLM was developed. The interactive OLM aims to increase the confidence and competence of GPs and other health professionals in identifying and addressing issues related to sexual health and wellbeing relevant to MSM.

Results The OLM consists of three modules; towards a better understanding of gay men and MSM, discussing sexual history and testing for STIs, and issues facing this population group. As of 13 March 2015, 11 subjects were enrolled in the study, with median age 30 (IQR 27 – 33). Participants reported increasingly nuanced categories of partner risk perception, including “HIV-negative plus PrEP,” “HIV-negative,” “HIV-positive, undetectable,” “HIV-positive, detectable,” “HIV-positive, unknown viral load” and “HIV-unknown.” Serosorting was observed. Seropositioning was universal for HIV prevention subjects reporting active engagement to minimise risk of HIV transmission (but not syphilis or other STIs) to negative or status-unknown partners. Knowledge of PrEP was variable. Emic conceptions of risk invoked existential models of concern for self and others. Adoption and performance of specific behaviours validated and confirmed perceptions of benevolence toward self and others.

Conclusion HIV prevention was highly valued and actively sought by sexually-active MSM. Risk conceptions were mediated through complex understandings of partner risk profiles, and performance of seroadaptive behaviours served to validate perceptions of well-being and benevolence. The need for syphilis prevention was under-appreciated. These findings have implications for improving STI/HIV prevention approaches among MSM.

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P11.30 OUT LATER IN LIFE: WORKING WITH OLDER SAME-SEX ATTRACTED MEN

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Introduction Coming to terms with one’s sexuality can be a lengthy process. Coming out in this context refers to the process of accepting same-sex attraction and informing others of one’s sexual identity. Coming out is different for each individual, with some men come out later in life after years of denying their sexuality.

There are issues specific to this population. These include overcoming internalised prejudice resulting from prolonged exposure to homophobia, disclosing same-sex attraction to their opposite-sex partners and children, as well as re-establishing the self as a gay or bisexual man to their social and professional network.

To date, there are limited services available for men who come out later in life. As a result, many of these men feel isolated, especially from the mainstream youth-centric gay culture. Internalised prejudice can also prevent them from befriending other gay men, seeking support and education. All of these can have a detrimental effect on their well-being.

Methods Momentum is a peer-based workshop for same-sex attracted men aged 27 years and above. The workshop provides...