

# COVID-19 and LGBT sexual health: Study identifies need for investment and innovation

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Whilst lockdown has meant a cessation or a significant reduction in sexual activity for many, the need for sexual health information, testing, treatment, contraception and HIV testing and prevention services such as PrEP (Pre-Exposure Prophylaxis) continues.

A new report published today examines the impact that the COVID-19 pandemic has had on LGBT sexual health and identifies the need for investment and innovation in future service provision. "COVID-19 and LGBT Sexual Health: Lessons learned, digital future," examines the characteristics of LGBT online service users during the COVID-19 pandemic, compares them to service users before the pandemic, and explores their experiences accessing, or trying to access, services and activities.

The project focused on the Sexual Health Program run by LGBT Foundation, which includes the free distribution of condoms and lube, STI and HIV

tests, outreach activities, individual sexual health and wellbeing support and more. A free-text survey ran from 28 August to 14 September to explore whether sexual health services and activities delivered online would meet the needs of service users and/or whether they would be accessible.

COVID-19 and LGBT Sexual Health: Lessons learned, digital future, authored by Dr. Jaime García-Iglesias, currently a Research Fellow at the University of Hertfordshire and Mildred Baxter Postdoctoral Fellow at the University of Edinburgh, was made possible thanks to the Economic and Social Research Council for funding this project through the University of Manchester Collaboration Labs program.

The report found the urgent need to improve sexual health communications. During the summer 2020 lockdown, Post-Exposure Prophylaxis (PEP), a strong combination of HIV medicines which can help people stop getting HIV after potentially being exposed to it, could still be obtained from A&E and GUM services. However, 79% of respondents were not aware of this. In addition, it is concerning that some respondents expressed fears that they would face obstacles and discrimination if they had sought PEP from A&E. One respondent said "I wouldn't have accessed PEP because of how docs would have treated me I'd rather ride it out than be shamed even more."

During the first lockdown, 88% of respondents did not seek testing for HIV or other STIs—only 9% did so by mail, and 3% did so face-to-face. Over half (51%) of respondents said they would like to get tested after lockdown and an additional 28% said they 'might' want to get tested. This points to a potential sharp increase in demand for tests once restrictions are lifted. Without drastic upgrades to testing services this demand may not be met.

The lockdown and the subsequent changes provide a unique window of opportunity to evolve service provision to reach those who have failed to engage with services before, to innovate service delivery, and to assess the many weaknesses and many strengths of our healthcare system.

Regarding future services, 46% of respondents wanted to continue to engage with services after lockdown, and 78% would like a blended model of online and face-to-face services. Continuing the level of online services and activities whilst also providing face-to-face services is likely to require an increase in resources. In general, respondents concluded that a combination of online and offline services guaranteed maximum accessibility and acknowledged that not all services can be delivered online. The continuation of online and face-to-face services may be a unique opportunity to address pre-existing and long-term issues around access for LGBT sexual health.

The report culminates in a series of recommendations for sexual health services, both general services and LGBT-specific. The recommendation address problems that predate COVID-19, were exacerbated by the lockdown, and will continue to affect services after the pandemic is over. These include enhancing activities and services that support people's social lives; streamlining processes; delivering clear messaging around PEP and PrEP; increasing and streamlining testing capacity; and evaluating a hybrid model for online and face-to-face services.

Dr. Jaime García-Iglesias, Research Fellow at the University of Hertfordshire and report author, said: "COVID-19 has highlighted inequalities and issues around access that existed well before the pandemic. COVID-19 will eventually come to pass, but these issues will remain. We now have the opportunity to learn from our experiences and develop online services that reach those we had not engaged with before."

Lauren Duffy, Sexual Health Services Manager at LGBT Foundation, said: "The insight this report provides will inform the way organizations interact with the communities they serve. As we return to physical service delivery post-COVID-19, lessons

learned throughout the pandemic will shape our delivery model to ensure our services are as relevant to our service users as possible."

Professor Brian Heaphy, Head of the School of Social Sciences at the University of Manchester, said: "By working together, the LGBT foundation and The University of Manchester have produced a report that has important insights for and about sexual [health](#) services in COVID lockdown contexts and beyond. It is essential reading for those who provide and want to access [sexual health](#) services. Written by Dr. Jamie Garcia Iglesias, it highlights the value of The University of Manchester Collaboration Labs program in supporting research that can make a real difference to [service](#) provision and to people's lives."

**More information:** [COVID-19 and LGBT Sexual Health: Lessons learned, digital futures?](#)

Provided by University of Hertfordshire

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