



Public Health Policy

Assessment 2 Report: Sexual Health (STD/HIV)

LGBT UK & USA COVID -19

Student Name: Myrna Morales

Student Code:1917110

Module Code: BMHP5013

Evelyn Callahan

Date submission 14/01/22

Table of Contents

Cover page.....	1
Table of Contents.....	2
Background of corona virus and more specifically Covid –19.....	3
Strategies used to measure, monitor and control the incidence of coronavirus	3.1
Current public health policy approaches to reduces or control incidence.....	4
Models and Theories of health behaviour change	4.1
Impact of legislation and policies on the health and wellbeing of individuals in health or social care settings.....	5
Ethical considerations.....	6
Recommendations.....	7
References.....	8

Background of corona virus and more specifically Covid -19

COVID 19-, which is also referred to as the severe acute respiratory syndrome coronavirus 2 (SARS-Cov-2), is a novel severe acute respiratory syndrome virus. The virus was isolated from three people who had been suffering from pneumonia which was connected to a cluster of respiratory illnesses that had been reported in Wuhan, China. The virus was reported towards the end of 2019, hence the name Covid -19, which is an abbreviation for Coronavirus Disease 2019. While there are many reports of how the virus spread within the city of Wuhan and the Chinese province of Hebei, and many disputes about the role of the Chinese authorities regarding their failures to control the virus while it was still arguably manageable, what cannot be argued about is the speed with which spread to the rest of the world. The virus first reported outside China in January of 2020 and at that time, the world began noticing the seriousness of the situation. (World Health Organization, 2020)

Since the virus was still being studied, not much information was reliably available on how it could be controlled and how people could protect themselves against it. The virus spread so fast that most health systems were caught off-guard, such as in Europe where the virus, which had designated the status of a global pandemic by April of 2020, caused havoc and thousands of deaths in the UK, Italy, Spain, France, and the rest of the European continent as well as the world. Eventually, sufficient information about the virus was available and informed prevention measures could be adopted, which helped slow the spread of the virus before a medicinal intervention, in the form of vaccines, could be made entirely available. Since its outbreak, the disease has massively changed the world and every part of the population felt the impact of the pandemic. However, some groups were more vulnerable than the others to the impacts of the disease (Skinta, Sun & Ryu, 2020)

Strategies used to measure, monitor and control the incidence of coronavirus

Like any other community in the UK, the LGBT community felt the impact of the pandemic. However, surveys indicate that the impact of the pandemic was greater among this community than it was on other population. These studies indicate a greater impact of the pandemic on employment, food security, and access to treatment and prevention of HIV (Human Immunodeficiency Virus). However, the primary challenge facing the LGBT community in the UK is homelessness. This challenge emerges as a serious hurdle during the pandemic because it is not always safe for members of the LGBT community at home. Research indicated that during pandemic almost a quarter of the community's young people were at an increased risk of homelessness due to rejection from their families. (Skinta, Sun & Ryu, 2020)

Also, more than a tenth of the group's member face domestic abuse from their partners, and the statistic rises to almost a fifth of trans people. The approach by the authorities in the country aimed at first identifying that the group was at an increased risk of the contracting the virus and suffering the effects of the disease than the other people. Testing and providing safe isolation for the members of the community was prioritized in some areas, although there could not have been an exclusive way of handling them as a community since there were multiple minority populations who faced similarly grim situations and needed similar strategies to resolve their situations.(Skinta ,Sun& Ryu.2020)

In the United States of America, the situation facing members of the LGBT community was similar to that of the UK if not worse. The US health authorities prioritized data collection about members of the community and the special needs they had during a period when the country's health care system was stretched beyond its means. (Skinta, Sun, &Ryu,2020) Exclusivity in service provision was difficult to achieved for members of this community due to reasons similar to that of the UK, where multiple minority populations face similar inconvenient situations, and needed specific solutions. However, the data collected in the US indicated that LGBT people of colour were twice as likely to test positive for the COVID-19 as the white non-LGBT people. Strategies by the US government to monitor, test, and control the spread of the virus were general for all people in the country and there were no preferences or classifications with regards to sexual orientation or gender identity (Skinta,Sun,&Ryu,2020) Although research indicates that the LGBTcommunity was more vulnerable than the rest of the populations the lack of gender or sex-specific interventions by the government hindered efforts to incorporate the needs of the community into the recovery efforts from the pandemic (Skinta,Sun,&Ryu,2020) .

Current public health policy approaches to reduces or control incidence

With regards to the LGBT community as a subset of the larger community, there is a lot of information that is yet to be known about the specific impacts of the pandemic on the community. There is, however, a wide reach of information and research that all indicates the increased risk of the members of this community catching the virus, none of these sources indicate an increased mortality rate from the virus among members of the community There exists a number of health inequalities in the UK experienced by the LGBTcommunity which makes some of the members to be a higher risk of catching the virus.(Millar et al.,2021) There have been efforts to ensure fairness among all communities in the UK, with a report in the House of Commons identifying the need for there to be an Equality Impact Assessment in order to ascertain the impact of the pandemic on specific group of people, including women and the LGBT community at large. While there is a need to have such impact assessment, the route taken by the government is to reduce the and control incidences of the virus among the community at large. Vaccination drives have targeted the entire population instead of specific groups of people, but there have been efforts to ensure fairness for all people (Millar et al.,2021)

The primary challenge faced by the US government regarding the control of COVID –19 incidences in the LGBTcommunity is the lack of trust. The community indicate the lack of trust in the Trump administration and even though that came to an end and was succeeded by Joe Biden's current one, the community still lacks trust in the government and pharmaceutical companies (Millar et al.,2021) This makes it challenging for the government to provide adequate control measures among this community. However, they are more likely to trust the Center for Disease Control and Prevention (CDC) whose messages and intent during the pandemic is similar to that of the government focus on having every person in the country vaccinated against the virus, regardless of people's sex, race, or gender affiliations (Millar et al.,2021)

Models and Theories of health behaviour change

There are various models and theories of change that can be associated with pandemic and its impacts on the society. The first of these is the Social Cognitive Theory which describes the influence that individual experiences, environmental factors and the actions of the other people have on an individual's behaviour (Schunk,2012) The theory is based on the supposition that people have the capacity to understand and the skills to perform a behaviour, as well as the existence of expectations that determine the outcomes of such behaviour. During the COVID-19 pandemic numerous things have had to change, especially regarding how people associate with one another. In the initial stages, people were required to keep a social distance and cover their faces with masks as well as limited mobility. In general, life was not normal as people were used to it before the pandemic (Schunk,2012)

For LGBT people, this meant that they had to stay home, and not associate with their colleagues. This, for a community that is both a minority and one that often experiences maltreatment from the rest of the population, required significant changes and coping strategies for them to handle the situation. This theory underscores that the influence of the other people's actions, such as hostilities at home and the long distance between people, members of the LGBT community needed to learn other strategies to live a better life during the pandemic and that they have the capacity to behave according to what the situation required

The Health Belief Model can be well associated with situation faced by LGBT members in the United States. This theory underscores that people often reject the need to adopt disease prevention strategies, early detection, and screening test for the diseases. The theory notes that likelihood of an individual to adopt a behaviour is influenced by the beliefs of the individual in the effectiveness of the personal threat they are facing as well as the effectiveness of the recommended health behaviour to eliminate that threat (Abraham & Sheeran ,2015) In the case of LGBT people in the United States, the lack of trust in the administration could predict their response to recommendations designed to prevent the spread of the virus. Their response could also be influenced by how they believed the virus to pose a personal threat to their health. The behaviour of the LGBT community therefore could be influenced by information they received from CDC, which they trusted, and which could inform their beliefs regarding the pandemic (Abraham & Sheeran ,2015)

Impact of legislation and policies on the health and wellbeing of individuals in health or social care settings

The primary legislative issues regarding the LGBT community and the ongoing pandemic have been rights of these people to receive equal access to healthcare as the rest of the population. Questions have been raised in the House of Lords regarding the government's approach towards ensuring the end of the pandemic in the country, with specific members of Parliament questioning the equitable rights of the LGBT community in accessing government help as designated by the legislative pieces designed and passed for this purpose during the pandemic. The issue has been the equal access to vaccination by members of the LGBT community (Stephenson et al., 2021). The pandemic seemed to highlight the cracks of inequality, which is widespread and, in some cases, spread by governments. During the pandemic, the UK government passed various legislations meant to cushion the economy and the population from the adverse impacts of the coronavirus. However, reports have found that these economic recovery measures left out members of the LGBT community, irrespective of the facts that indicate these people are more likely to be economically disadvantaged when compared to the rest of the population. The need for laws that protect the equality of the LGBT people, and their rights. In particular, has been identified during the pandemic (Stephenson et al., 2021).

Still on the issues of the rights of the LGBT community, it is notable that the United States administration at the time made some unfortunately regressive moves. The Trump administration sought to push back against the rights related to gender identity and sexual orientation. The administration formed the Commission on Unalienable Rights (CUR) whose purpose and formation were in the context of rolling back rights of LGBT people in the country in the guise of religious exemptions (Stephenson et al., 2021). This was the most notable systematic attack on the LGBT rights in the United States. The government has signalled the intent to prioritize reinstating the rights of LGBT people in the US and especially pass the 2019 Equality Act bill which was aimed at ensuring that members of this community could not be discriminated against based on their sexual health orientation and gender affiliation (Stephenson et al., 2021).

Ethical considerations

All research works must be conducted in an ethical way for them to avoid causing harm on the participants of the study. This is especially the case when handling a topic that is considered a taboo, involves health and sexuality, or features a minority community that faces a backlash from the rest of the people (Mustanski, 2011). These three qualities adequately describe the LGBT community in both the United Kingdom and the United States. In the two countries, the LGBT community is a minority and apart from the systematic exclusion that the group often

experiences from the government's programs, mostly due to their minority status they also individually experience social stigma and isolation. These are some of the primary reasons why it is critical to consider all ethical principles and requirements when conducting research on this community (Mustanski,2011)

The first ethical principle to be considered is the principle of informed consent. The participants of any research should be well informed about the features of the research, the things, or people that they are going to experience or come across during the research, and how these will most likely impact them. The participants should also reserve the rights to stop participating in the research should they feel uncomfortable with the whole process without having to suffer any repercussions (Mustanski,2011) For members of the LGBT community, this should be a priority because some of them do not have the support of their families and friends, and many even want their status to remain unknown to their families and friends due to the fear of maltreatment. Therefore, it is essential for the researcher to inform the participants on matters regarding anonymity, and if there are recordings that show the participants in video formats, it is critical that the participants are aware before they can agree to take part in the study. This is to avoid engaging in the process if they feel there would be adverse consequences. (Mustanski,2011) The other principle incorporates objectivity, honesty, and truthfulness. Similarly, the case of informed consent, the researcher should conduct the research in an objective way that does not distort the information provided by the participants. These should also be combined with the principles of non-maleficence and beneficence, which require that the researcher avoids causing harm on the participants and only focuses on doing what is good for the individual. Other principles that relate to LGBT community members and their specific requirements are respect and dignity, humanity, and access to the outcomes of the research should be interested.

Recommendations

The SARS-CoV-2 pandemic has exposed many gaps in the treatment of LGBT members in most countries. What is notable in the case of both the UK and the US is that the community is more vulnerable to disease than the rest of the population. This can be said, in extension, to be true of LGBT communities all over the world. However, there are places where their treatment is even worse, and since the UK and the US are among the leading countries in the world, there is a need to lead the world in a positive direction regarding the treatment of this community. Laws should be passed which protect the equality of LGBT members in all sectors of the society. There should be no limitations to this group's access to quality healthcare, housing, and employment because as of the pandemic exposed, these people's treatment by the society and governments as well, contributes to their economic disadvantages and makes them more vulnerable to diseases (Reisner et al.,2016)

References

- Abraham & Sheeran, P. (2015) The Health belief model. *Predicting health behaviour: Research and practice with social cognition models*, 2, 30-55
- Millar., Adebayo, T., Dellucci, V., Behar, E., & Starks, T., J. (2021) Keeps me awake at night: the potential of the COVID-19 pandemic to affect sleep quality among sexual minority men in the USA. *Psychology of Sexual Orientation and Gender Diversity*, 8(2), 213
- Mustanski, B. (2011). Ethical and regulatory issues with conducting sexuality research with LGBT adolescents: A call to action for a scientifically informed approach. *Archives of sexual behaviour*, 40 (4), 673-686
- Reisner, S. L., Deutsch, M. B., Bhasin, S., Bockting, W., Brown, G. R., Feldman, J., & Goodman, M. (2016). Advancing methods for US transgender health research. *Current opinion in endocrinology, diabetes, and obesity*, 23(2), 198.
- Schunk, D.H. (2012) Social cognitive theory.
- Skinta, M.D., Sun, A. H., & Ryu, D.M (2020). The impact of COVID-19 on the lives of sexual and gender minority people. *In COVID-19* (pp.230-244). Routledge.
- Stephenson, R., Chavanduka, T. M., Rosso, M., Sullivan, S. P., Pitter, R.A., Hunter, A.S., & Rogers, E. (2021). Sex in the time of COVID-19 epidemic. *AIDS, 2020 and Behavior*, 25(1), 40-48.
- World Health Organization. (2020). *Origin of SARS—CoV-2*, 26 March 2020 (No. WHO/2019-nCoV/FAQ/Virus-origin/2020.1). World Health Organization.

