

# Sexually transmitted diseases and HIV in Greater Manchester

March 2024



**Greater**  
Manchester  
Integrated Care  
**Partnership**

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# Commissioning responsibilities for sexual and reproductive health

## Local Authority

- STI treatment and care services which includes contraception advice, psychosexual counselling, sex and relationship education/promotion, and sexual health outreach
- Specialist sexual health services for young people
- Chlamydia screening
- HIV/STI testing
- HIV prevention and social care

## NHS GM

- Abortion services
- Female sterilisation, and vasectomy
- Non-sexual-health elements of psychosexual health services
- Contraception primarily for gynaecological purposes
- HIV testing when clinically indicated in NHS GM commissioned services
- Dermatology
- Fertility treatment and preservation services
- Contraception - GP contract
- Testing and treatment for STIs in GP
- Pregnancy screening
- Cervical screening
- HPV vaccination

## NHSE

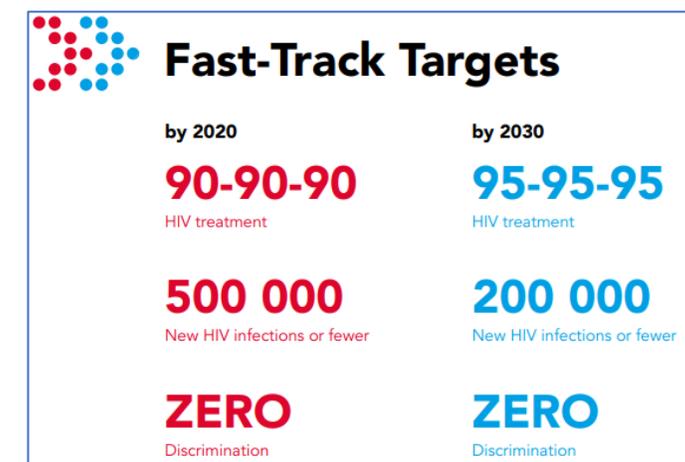
- HIV treatment and care
- All sexual health elements of healthcare in secure settings
- Sexual assault referral centres
- Specialist foetal medicine
- Specialised commissioned services (surgical sperm retrieval and complex termination of pregnancy)

HIV

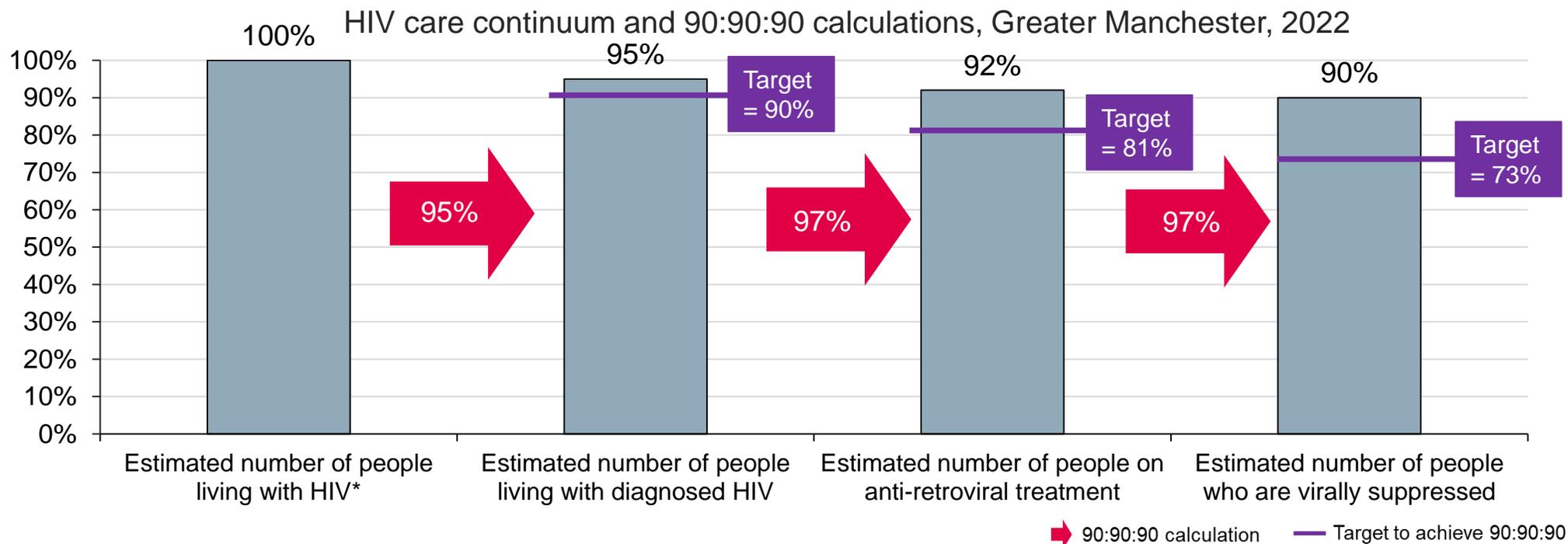


## Background information

- Greater Manchester joined the **Fast-Track Cities Initiative** in 2018, committing to achieve UNAIDS targets on HIV treatment and care, reduce new transmissions and reach zero discrimination. The 95-95-95 UNAIDS targets are:
  - 95% of all people living with HIV to be diagnosed,
  - 95% of those diagnosed to receive sustained antiretroviral therapy
  - 95% of all people receiving antiretroviral therapy to have viral suppression
- In the same year, the **GM HIVE population health programme** was launched, with the aim of ending all new cases of HIV in GM by 2030.
- The national **HIV Action Plan 2021** also committed to end new HIV transmissions in England by 2030. Interim targets by 2025 include:
  - An 80% reduction in new HIV diagnoses first made in England.
  - A 50% reduction in the number of people with an AIDS-defining illness at the time of their HIV diagnosis.
  - A 50% reduction in the number of HIV-related deaths.



# Progress towards UNAIDs targets in Greater Manchester



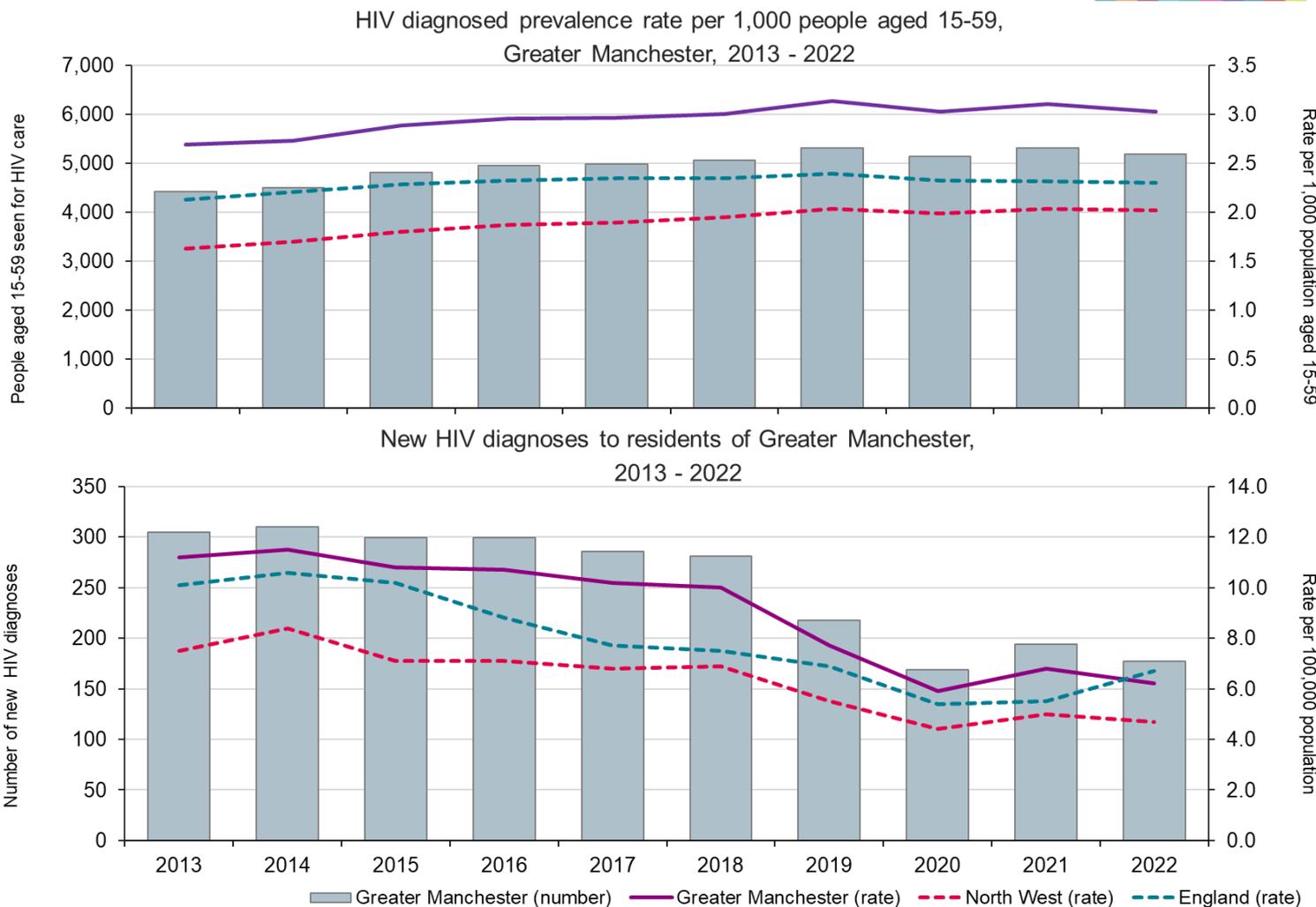
**90% of the estimated total number of people living with HIV in 2022 (5,657 of 6,286) were virally suppressed**

Source: UKHSA HIV Section | Calculations released on 01/12/2023

\* People living with HIV includes 1) count of people living with diagnosed HIV and 2) estimate of people living with undiagnosed HIV calculated using the MPES method – see notes

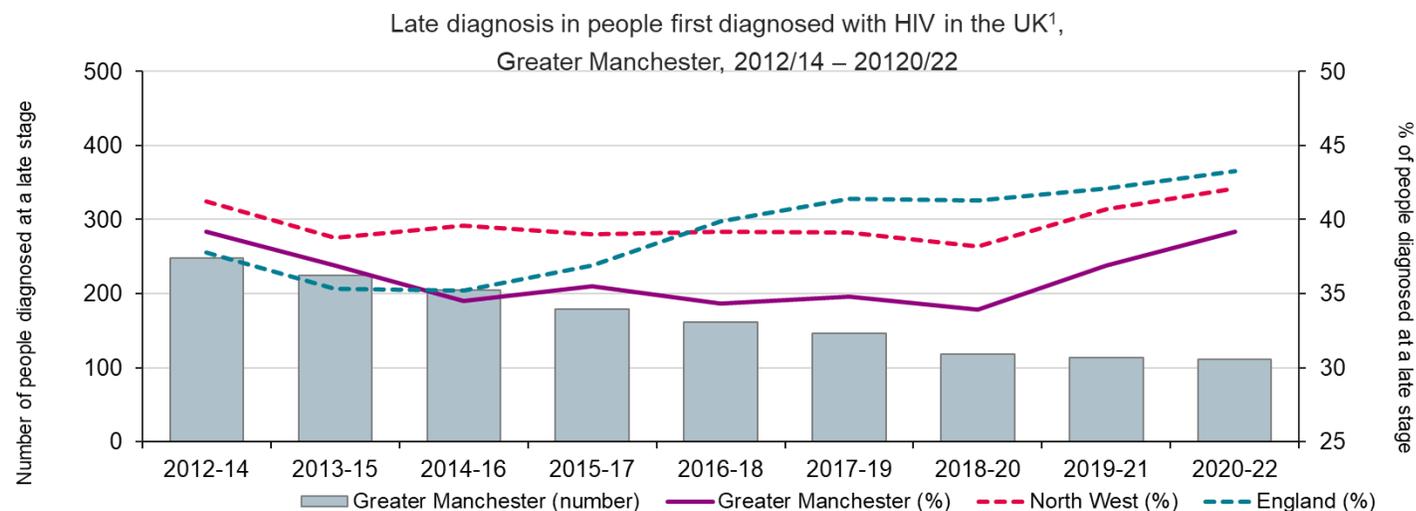
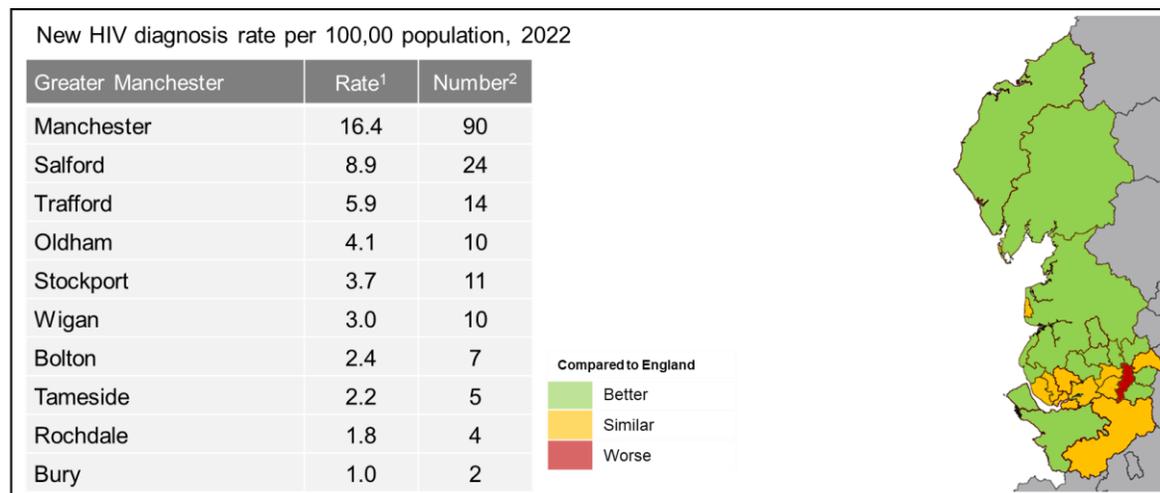
# Summary of HIV in Greater Manchester (1)

- Just over 6,000 people are thought to be living with HIV in GM (5% unaware of their status).
- Prevalence of HIV (overall number living with the disease) is stable with slight increase over time. More people living longer with successful treatment.
- The rate of new HIV diagnoses across GM overall is reducing.
- We need to push for reduced new transmissions, identify the 5% of people living with HIV who aren't aware of their status, and continue to support residents living with HIV to access effective treatment and support.



## Summary of HIV in Greater Manchester (2)

- Rates of new diagnoses of HIV vary substantially across the different boroughs of GM but most areas have seen reductions in recent years
- In most boroughs, numbers of new diagnoses are small
- The proportion of new diagnoses that are made at a late stage remains a challenge. Early diagnosis is important to improve outcomes. More routine testing is a way of achieving this.



# The approach to tackling HIV in Greater Manchester

TARGETED WORK TO ADDRESS INEQUALITIES

Scaling and extending reach of community HIV prevention and sexual health interventions – condom/lube distribution, face-to-face and digital information, tailored resources and outreach/ community engagement

HIV/STI testing promoted and available through a variety of routes (PaSH)  
Year-round access to postal self-sampling kits (SH24)  
Opt-out testing in EDs

Intensive Support Service for people living with HIV who have complex needs – improving access to care, effective treatment and support (GHT)

Peer-led combination prevention campaign and website (PaSH)

Primary and Secondary Care awareness training and podcast featuring Positive Speakers (MFT, GHT, PASH)

E-learning module for healthcare professionals addressing HIV stigma (MFT, GHT & Dibby Theatre)

Positive Speaker programme reaching into a variety of settings (GHT)

HIV in the workplace resources (PASH)

ENDING HIV STIGMA AND DISCRIMINATION

## HIVe programme key achievements

- **Over 3,500 self-sampling kits for HIV ordered** by GM residents in the past year.
- Evaluation of the Intensive Support Service showed that:
  - People accessing the service had on average **96% improvement in clinic attendance**.
  - They also had increased adherence to anti-retroviral (ARVs) resulting in nearly four out of five clients (79%) having, or being close to having, an **undetectable viral load**.
  - 85% of people reported an **improvement in general wellbeing**.
  - After engagement with the service, **3 pregnant clients gave birth to HIV negative babies**.
- The 'HIV: Let's Sort This Together' campaign has reached widely across the population and into priority communities. The campaign **won a Northern Marketing award** and was shortlisted for the prestigious national Health Service Journal awards.
- **Development and roll out of stigma e-learning module** locally within Manchester Foundation Trust and inclusion on the national e-LFH e-learning platform

 **HIVe successes:**

-  galvanised a coordinated **region-wide approach** due to significant investment and political commitment
-  encouraged **experimentation** to find out what works best
-  facilitated **relationship building** across the sexual health sector
-  enabled **scaling up and development** of initiatives to reach more people
-  **educated and raised awareness** among the primary care workforce
-  led to **successful interventions**, particularly the Intensive Support Service, HIV awareness campaign, HIV testing and primary care education, some of which have been taken up beyond the Greater Manchester area

## Emergency department opt-out testing for HIV

- The emergency department (ED) opt-out testing programme means that anyone aged 16 years and over attending a participating ED, who is having a blood test for any other reason, is tested for HIV and hepatitis C (HCV), unless they opt-out.
- Since Dec 2021, over **208,000 HIV HCV** tests have been conducted at MFT and Salford through ED opt-out testing.
- More than **80 people** have been newly diagnosed with HIV, and more than **230 people** have been newly diagnosed with HCV.
- An additional **44 people** living with HIV and **57 people** living with HCV have been identified who had a previous diagnosis but were not linked to care.
- Of those newly diagnosed with HIV, **78%** have already attended their first clinic appointment.
- Of those previously diagnosed with HIV, but not linked to care, **39%** have re-engaged with care.



## Impact of HIV interventions

**ED opt-out diagnosed patient, male, aged 50**

*“I attended the emergency department for a completely unrelated reason. I was initially angry about being tested as I felt I had control taken away from me, but after being diagnosed and speaking with the doctors and learning HIV is just a long-term manageable condition and with treatment it does not reduce life expectancy, I now feel very grateful I have been diagnosed as I don’t think it’s something I would have been tested for in the near future.”*

**Intensive support patient, female**

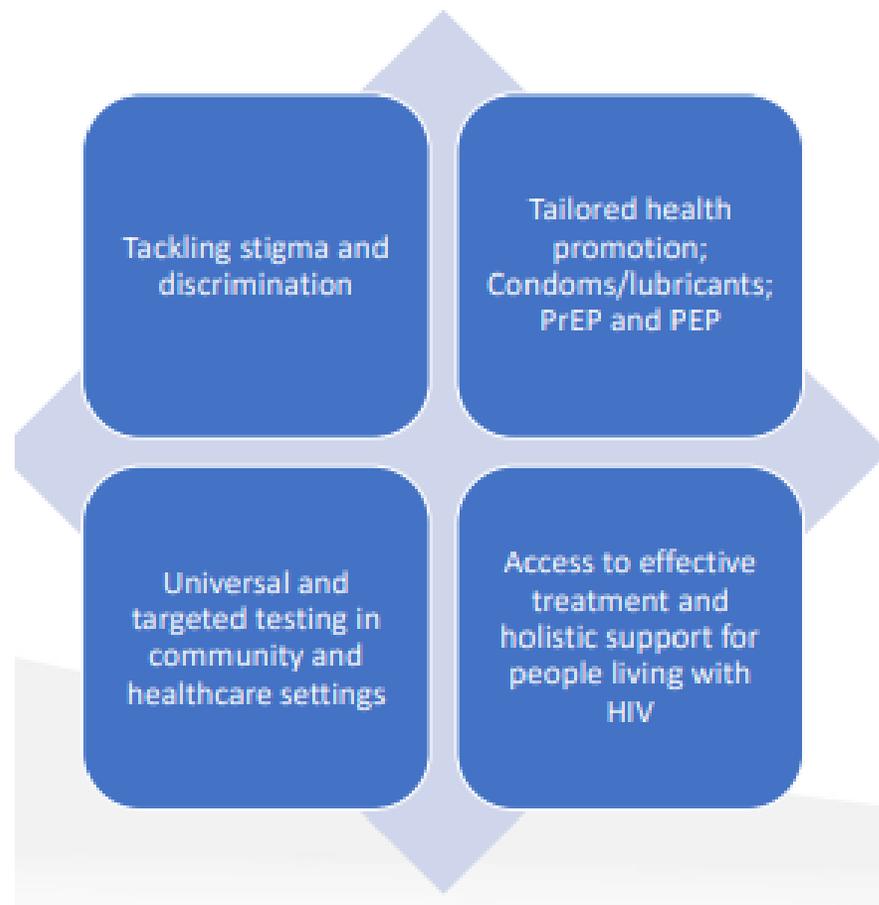
*“P wanted to say how grateful she was for Lauren’s help. P had totally disengaged from services and was then admitted to Wythenshawe very unwell last year with a prolonged admission of 2 months with confusion. Since being discharged she has remained stable on treatment under the care of Withington, reached an undetectable viral load and her immunity is improving. She is now living independently and with Lauren’s help now has PIP and a blue badge.”*

**Dr Orla McQuillan, Consultant Genitourinary Medicine, MFT**

*“Emergency department opt-out testing has very quickly become the source of the majority of new HIV diagnoses at Manchester Royal Infirmary and Wythenshawe Hospital in 2022, detecting more cases than any other testing method. It is a crucial step towards preventing new transmissions of HIV to enable us to achieve getting to zero new infections.”*

## Next steps

- As an International HIV Fast Track City, continued investment in the HIVE programme is planned to accelerate work to end all new cases of HIV in GM by 2030. This will focus on expanded prevention activities, increased testing, continued support to enable people living with HIV to access effective treatment and support, and tackling stigma,
- Opt-out testing for HIV within the emergency departments at MFT and Salford is set to continue, with further roll out of the programme planned to an additional four sites in Tameside, Bury, Bolton and Oldham.
- Continued delivery of the HIV action plan through the HIV subgroup of the GM Sexual Health Network



# Sexually Transmitted Infections (STIs)



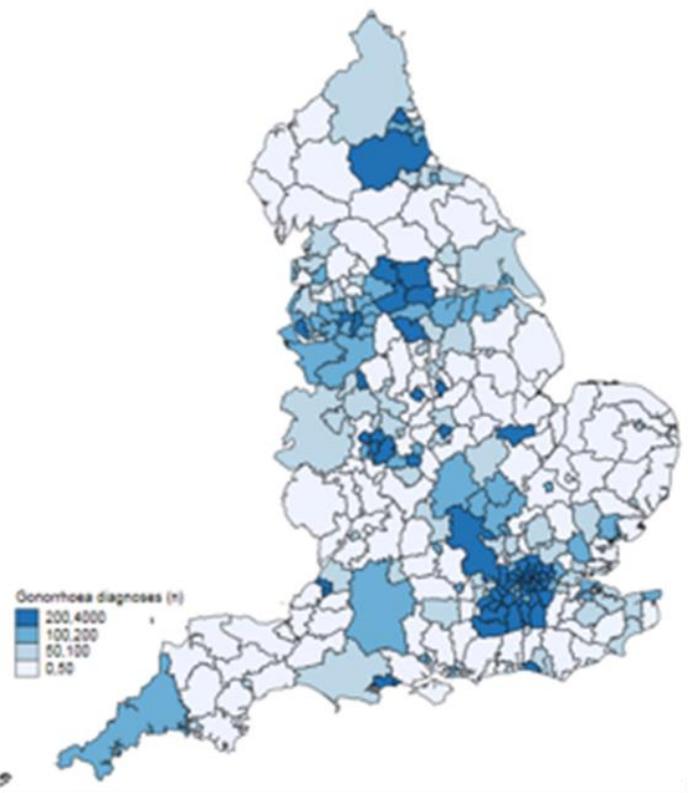
## Overview of STI Activity

- For England and in GM we have seen stabilising and reductions in rates of genital warts and herpes (partly linked to HPV vaccination)
  - For England and in GM we have seen a reduction in some recorded STI rates during Covid (partly due to lower rates of testing) but increases in last 2 years, particularly of syphilis; chlamydia; gonorrhoea
  - Gonorrhoea – increases in GM much larger than national. Increases mainly affecting young people (15-24) and men who have sex with men (MSM). Wide variation in rates across GM. Links to wider national and international increases and drug resistant strains.
  - Syphilis – general increase, but most of GM in line with national average. Manchester and Salford see particularly high rates.
  - Mpox - Across England numbers during 23/24 have decreased since the peak of July 22, with 143 cases recorded nationally (65 acquired in the UK), and 8 in GM.
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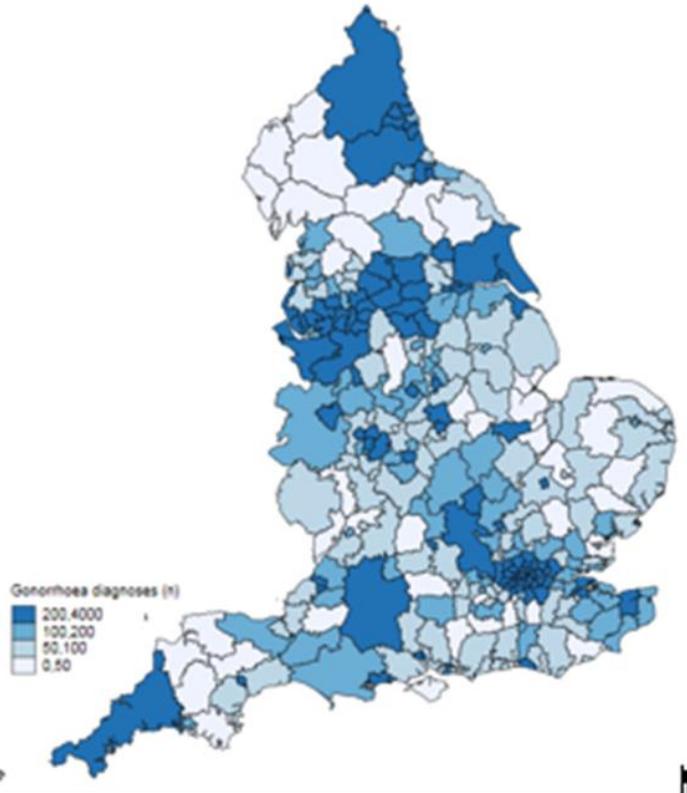
# Gonorrhoea increases have been widespread

Figure 4: Gonorrhoea diagnoses by local authority districts of residence, England, (a) 2021 and (b) 2022

(a)

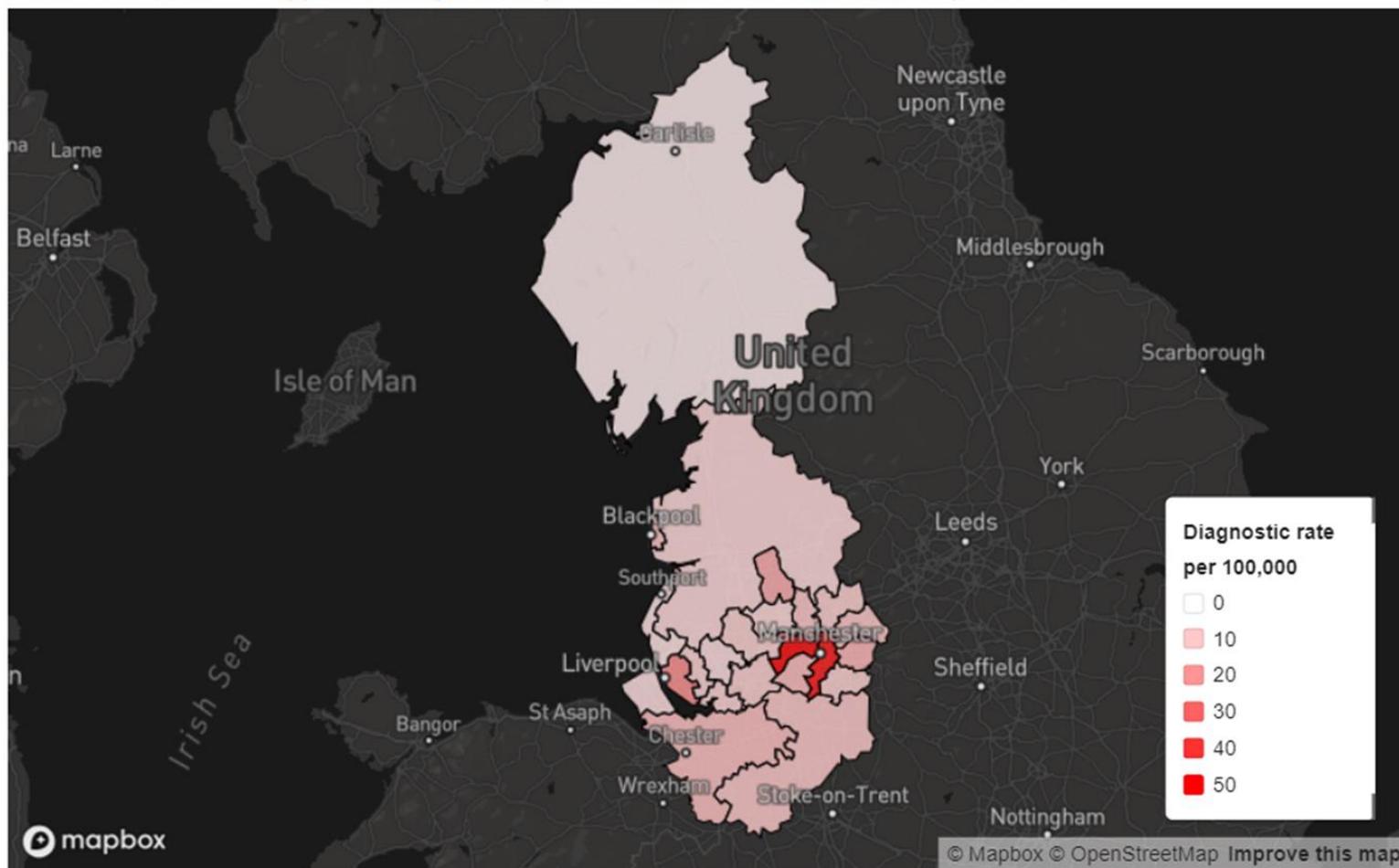


(b)



# Syphilis in the North West

Rate of infectious syphilis diagnoses per 100,000 in North West by UTLA



## What is being done to tackle STIs in Greater Manchester

- Specialist integrated treatment services in each borough – commissioned by local authorities providing STI testing, and treatment offers and clinics as well as contraception and advice services. These are open access and part of mandated public health functions.
  - Learning from the pandemic – transformation of online offers / increasing provision of digital testing kits
  - Outreach – some areas have previously experienced access issues with one sexual health clinic for a whole borough. More outreach capacity is being put in place to bring STI testing and treatment into communities (examples include community ‘spoke’ clinics; ‘clinic-in-a-van’ approach; continuing to resource local young engagement teams for sexual health; staff presence in Family Hubs in some boroughs)
  - GM STI working group – doing deep dive work to explore issues such as gonorrhoea increases
  - UK Health Security Agency have developed a syphilis metrics dashboard and holding workshops to understand data and areas for service improvement
- 

## The wider sexual health landscape & contraception

- As well as local specialist treatment services, and HIV services, there are sexual health offers in the VCFSE sector and primary care
  - VCFSE – The *Passionate About Sexual Health* (PASH) partnership is commissioned across GM by the local authorities and NHS GM, to support HIV prevention including testing outreach, awareness raising, and links to support services
  - Primary Care – GPs have responsibilities to provide routine contraception and are also commissioned by local authorities to provide long-acting reversible contraception (LARC). Community Pharmacies are also commissioned to provide emergency hormonal contraception
  - Outreach – there are a range of outreach offers in place across specialist treatment services, local authorities and VCFSE providers around both clinical and non-clinical outreach support, and these are on offer for all ages in many areas. These services will cover both testing and STI support, as well as contraception and advice
  - Other relevant services – terminations; cervical screening; sterilisation & vasectomy; HPV immunisation; sexual assault referral centre.
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# Challenges and opportunities



## Challenges in the sexual health system (national and GM)

- **Funding** – sustained financial pressure across public services, particularly local authorities and NHS has resulted in restricted and reduced budgets allocated to sexual & reproductive health services in recent years
  - **National Strategy** – lack of a national strategy or new investment around sexual health, which has been seen for other public health issues such as substance misuse
  - **Workforce** – linked to funding issues, there are workforce challenges, particularly around the ability to fill clinical roles within sexual health services
  - **Impact of multiple disadvantage** – more people accessing services with more complex needs including young people who may be less likely to engage with non-clinical outreach and contraception, as well as adults living with complex issues (eg. living with blood-borne viruses; drug & alcohol issues; involvement in social care; mental health issues; sex workers)
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## Opportunities

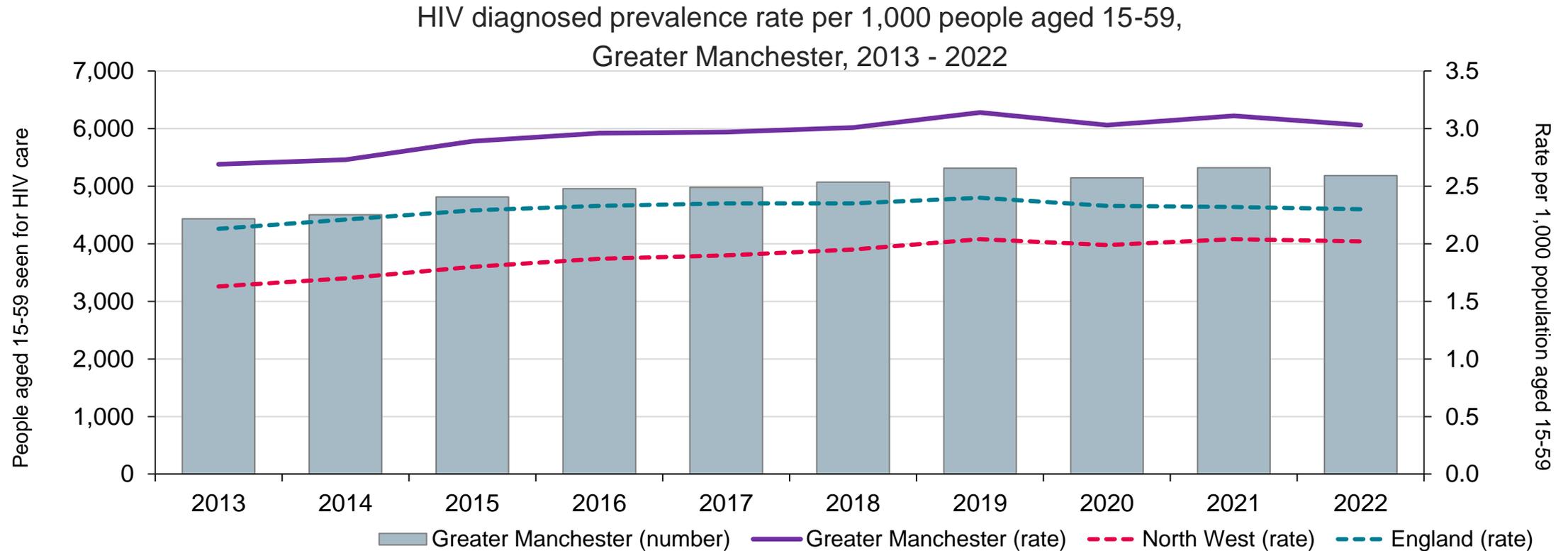
- **Integrated Care Systems:** greater integration of services and new models of care, co-commissioning and pooled resources
- **Digital development:** Improved access to testing, information and advice
- **Shared local and national commitments** to end all new cases of HIV by 2023, along with national investment in ED opt-out testing



# Appendix 1: Data



# HIV diagnosed prevalence



**HIV diagnosed prevalence rate for Greater Manchester fell from 3.11 in 2021 to 3.03 in 2022 (2.5% reduction)**

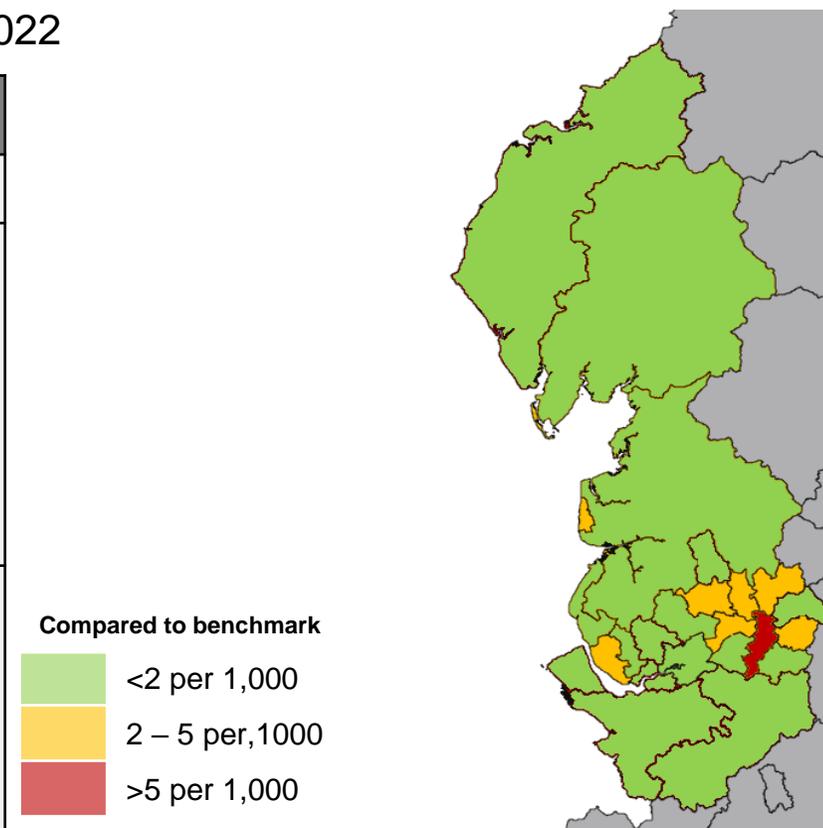
Source: UKHSA Sexual and Reproductive Health Profiles

Definitions: 1 – HIV diagnosed prevalence rate per 1,000 population aged 15 – 59 | 2 - Number of people aged 15 to 59 seen for HIV care

# HIV diagnosed prevalence

HIV diagnosed prevalence rate per 1,000 population aged 15-59, 2022

Greater Manchester	Rate <sup>1</sup>	Number <sup>2</sup>	Prevalence
Manchester	5.83	2,152	Very high
Salford	4.80	825	High
Rochdale	2.23	287	
Tameside	2.22	297	
Bury	2.13	235	
Bolton	2.10	355	
Trafford	1.99	269	Low
Oldham	1.77	246	
Stockport	1.47	243	
Wigan	1.46	276	

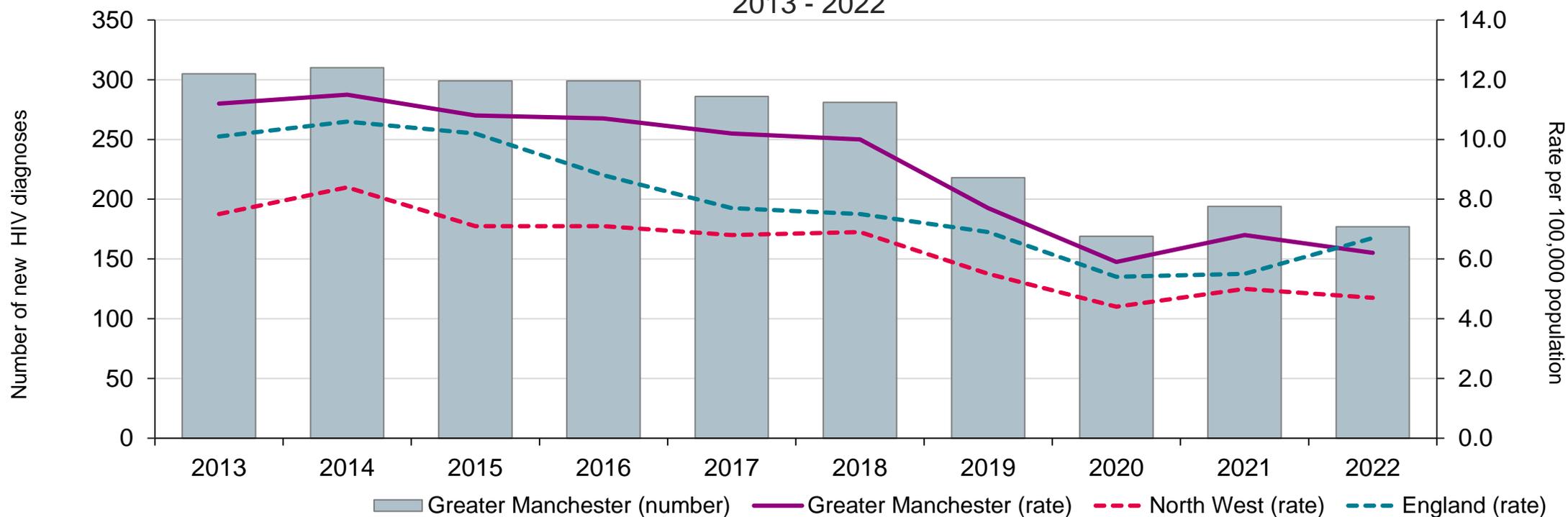


Source: UKHSA Sexual and Reproductive Health Profiles

Definitions: 1 – HIV diagnosed prevalence rate per 1,000 population aged 15 – 59 | 2 - Number of people aged 15 to 59 seen for HIV care

# New diagnoses of HIV

New HIV diagnoses to residents of Greater Manchester,  
2013 - 2022



**New HIV diagnosis rate for Greater Manchester fell from 6.8 in 2021 to 6.2 in 2022 (8.8% reduction)**

Source: UKHSA Sexual and Reproductive Health Profiles

Definitions: 1 - New HIV diagnosis rate per 100,000 population | 2 - Number of new HIV diagnoses

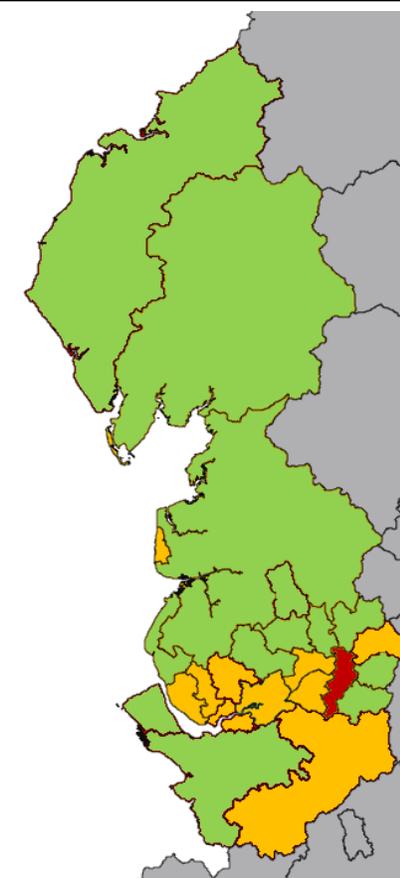
## New diagnoses of HIV

New HIV diagnosis rate per 100,00 population, 2022

Greater Manchester	Rate <sup>1</sup>	Number <sup>2</sup>
Manchester	16.4	90
Salford	8.9	24
Trafford	5.9	14
Oldham	4.1	10
Stockport	3.7	11
Wigan	3.0	10
Bolton	2.4	7
Tameside	2.2	5
Rochdale	1.8	4
Bury	1.0	2

**Compared to England**

- Better
- Similar
- Worse

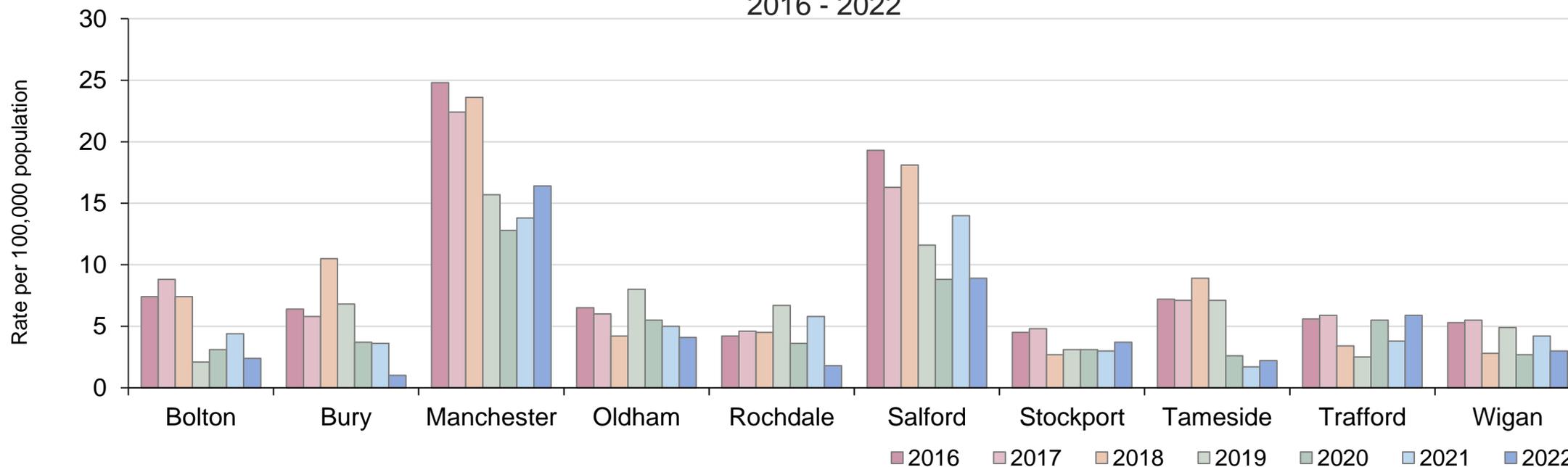


Source: UKHSA Sexual and Reproductive Health Profiles

Definitions: 1 - New HIV diagnosis rate per 100,000 population | 2 - Number of new HIV diagnoses

# New diagnoses over time (rates)

New HIV diagnosis rate per 100,000 population<sup>1</sup>, Greater Manchester, 2016 - 2022



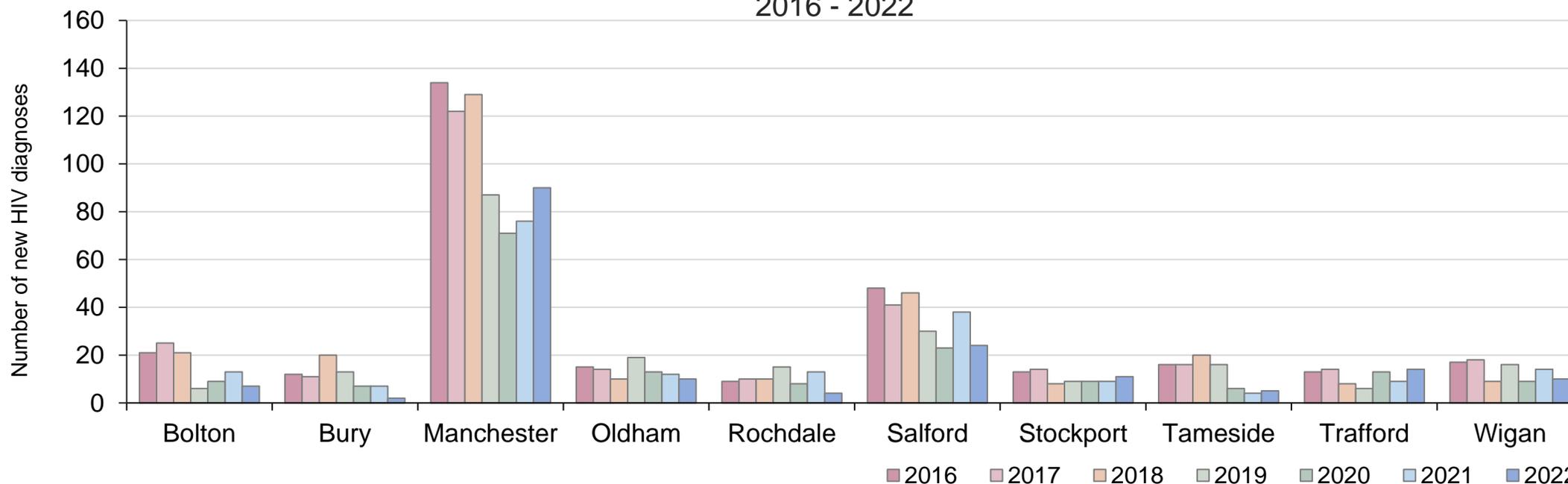
Rate	Bolton	Bury	Manchester	Oldham	Rochdale	Salford	Stockport	Tameside	Trafford	Wigan
2022	2.4	1.0	16.4	4.1	1.8	8.9	3.7	2.2	5.9	3.0
2021	4.4	3.6	13.8	5.0	5.8	14	3.0	1.7	3.8	4.2

Source: UKHSA Sexual and Reproductive Health Profiles

Definition: 1 - People receiving a new diagnosis of HIV in England include a) people receiving their first HIV diagnosis and b) people previously diagnosed abroad

# New diagnoses over time (numbers)

Number of new HIV diagnoses to residents of Greater Manchester<sup>1</sup>,  
2016 - 2022



Number	Bolton	Bury	Manchester	Oldham	Rochdale	Salford	Stockport	Tameside	Trafford	Wigan
2022	7	2	90	10	4	24	11	5	14	10
2021	13	7	76	12	13	38	9	4	9	14

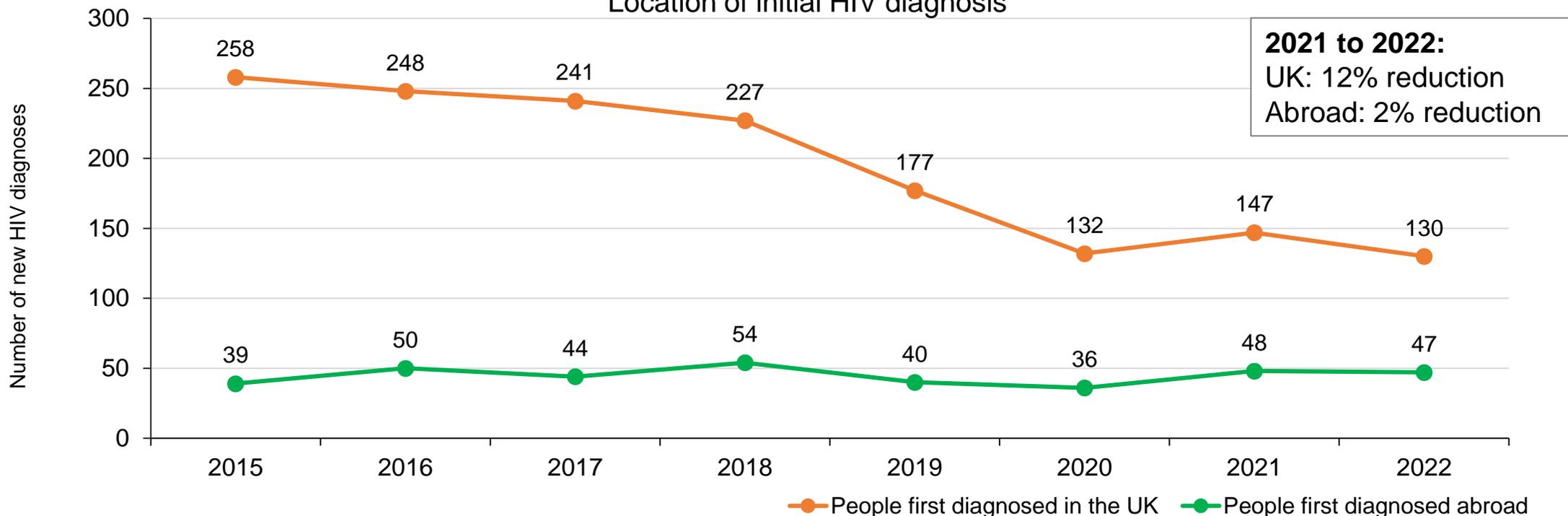
Source: UKHSA Sexual and Reproductive Health Profiles

Definition: 1 - People receiving a new diagnosis of HIV in England include a) people receiving their first HIV diagnosis and b) people previously diagnosed abroad

# New diagnoses of HIV by location of initial diagnosis

New HIV diagnoses to residents of Greater Manchester<sup>1</sup>, 2015 – 2022:

Location of initial HIV diagnosis



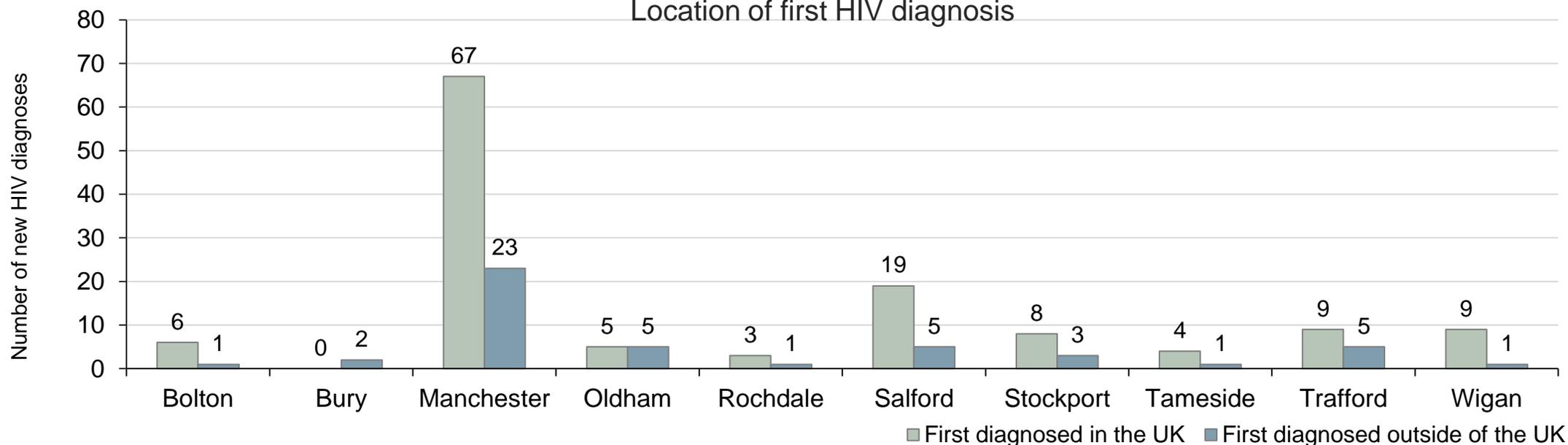
**People first diagnosed abroad accounted for 27% of all people receiving a new HIV diagnosis in 2022 (47 of 177)**

Source: UKHSA Sexual and Reproductive Health Profiles

Definition: 1 - People receiving a new diagnosis of HIV in England include a) people receiving their first HIV diagnosis and b) people previously diagnosed abroad

# New diagnoses of HIV by location of first diagnosis

Number of new HIV diagnoses to residents of Greater Manchester<sup>1</sup>, 2022:  
Location of first HIV diagnosis



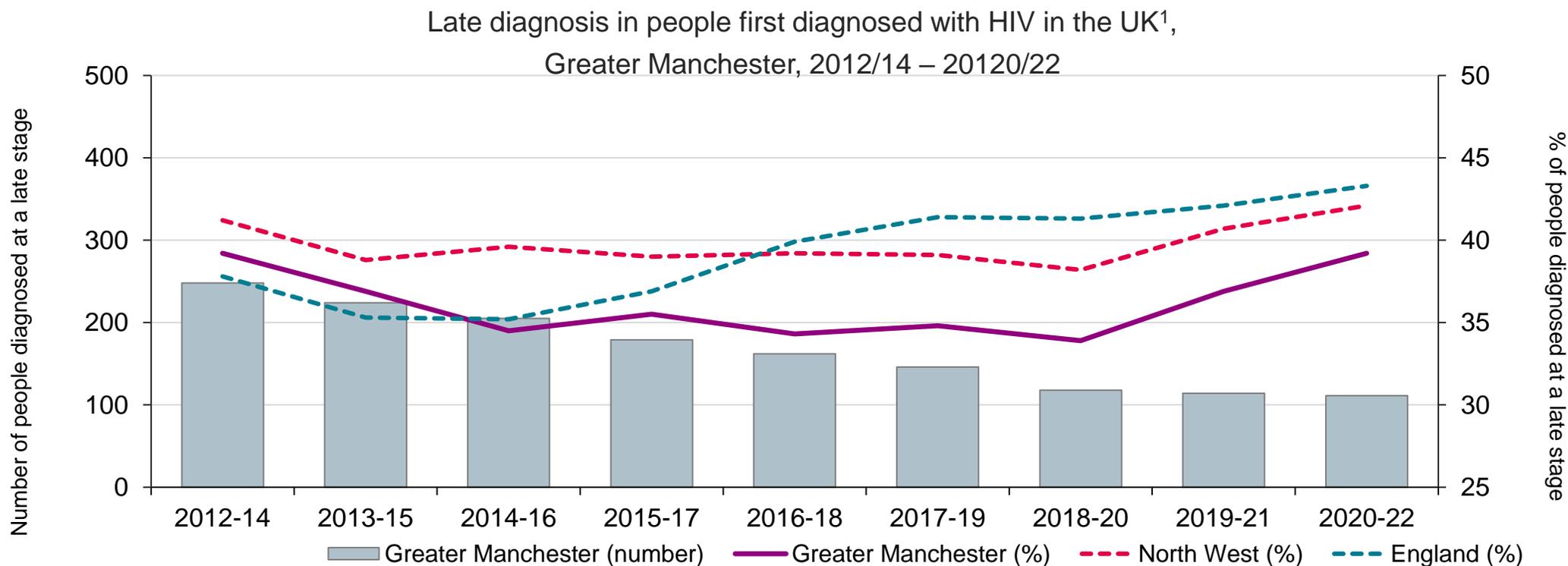
2022	Bolton	Bury	Manchester	Oldham	Rochdale	Salford	Stockport	Tameside	Trafford	Wigan
UK	6	0	67	5	3	19	8	4	9	9
Abroad	1	2	23	5	1	5	3	1	5	1

Source: UKHSA Sexual and Reproductive Health Profiles

Definition: 1 - People receiving a new diagnosis of HIV in England include a) people first diagnosed in the UK and b) people first diagnosed abroad

# HIV late diagnoses

**Of Greater Manchester residents first diagnosed with HIV in the UK in 2020/22, 39% were diagnosed at a late stage**



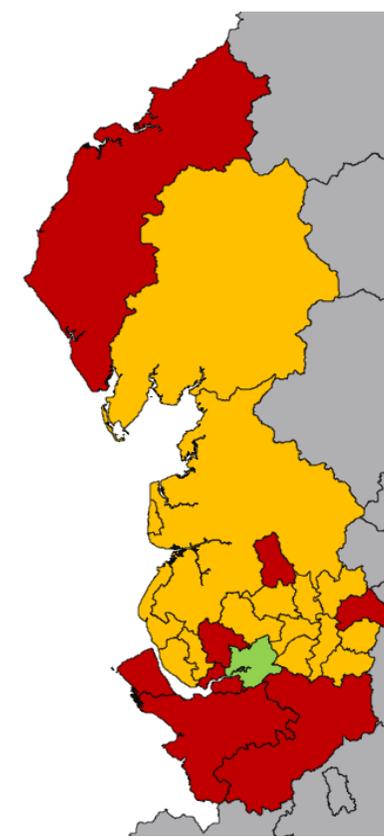
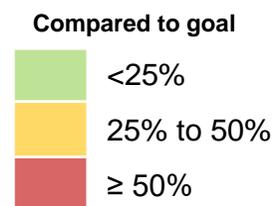
Source: UKHSA Sexual and Reproductive Health Profiles

Definition: 1 - People with a CD4 count of less than 350 cells per mm<sup>3</sup> within 3 months of the date of their HIV diagnosis. CD4 count not reported for all individuals.

# HIV late diagnosis

HIV late diagnosis in people first diagnosed with HIV in the UK, 2020/2022

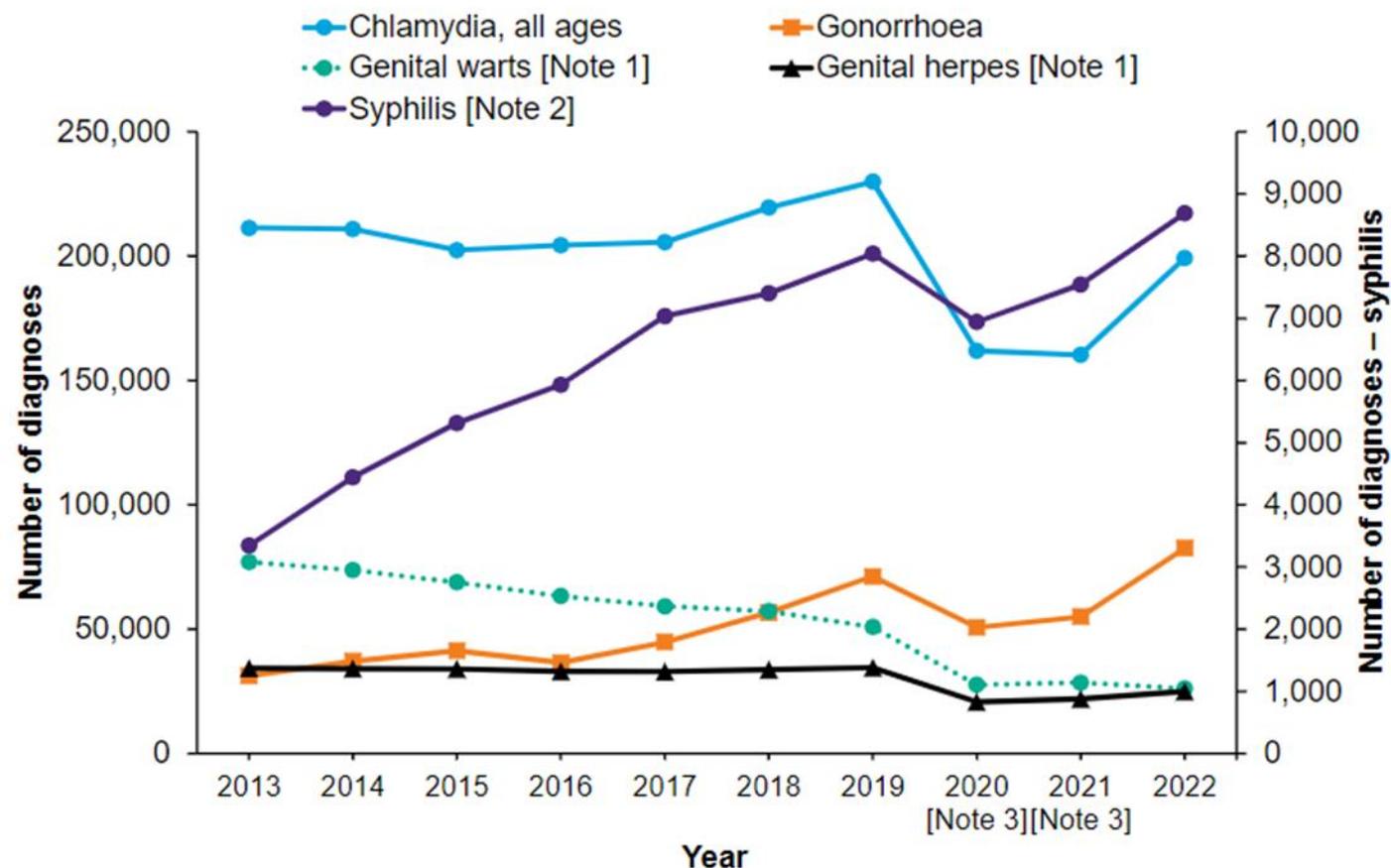
Greater Manchester	% <sup>1</sup>	Number <sup>1</sup>
Oldham	57.1%	8
Tameside	44.4%	4
Stockport	42.9%	6
Bury	42.9%	3
Manchester	41.7%	53
Rochdale	35.7%	5
Wigan	35.3%	6
Salford	32.6%	15
Trafford	32.0%	8
Bolton	30.8%	4



Source: UKHSA Sexual and Reproductive Health Profiles

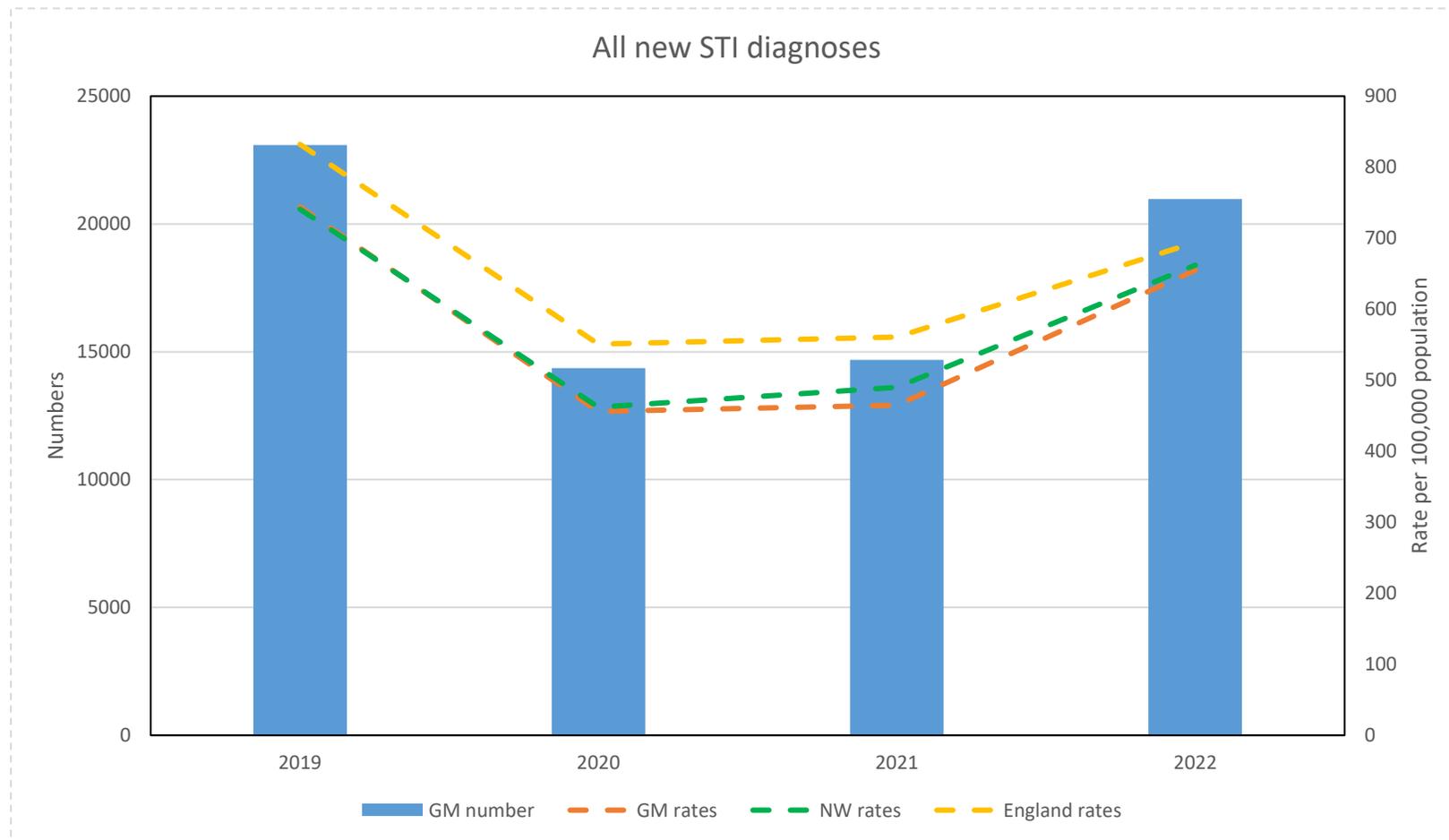
Definition: 1 - People with a CD4 count of less than 350 cells per mm<sup>3</sup> within 3 months of the date of their HIV diagnosis. CD4 count not reported for all individuals.

# Number of new diagnoses of chlamydia, gonorrhoea, genital warts, genital herpes and syphilis in England 2022



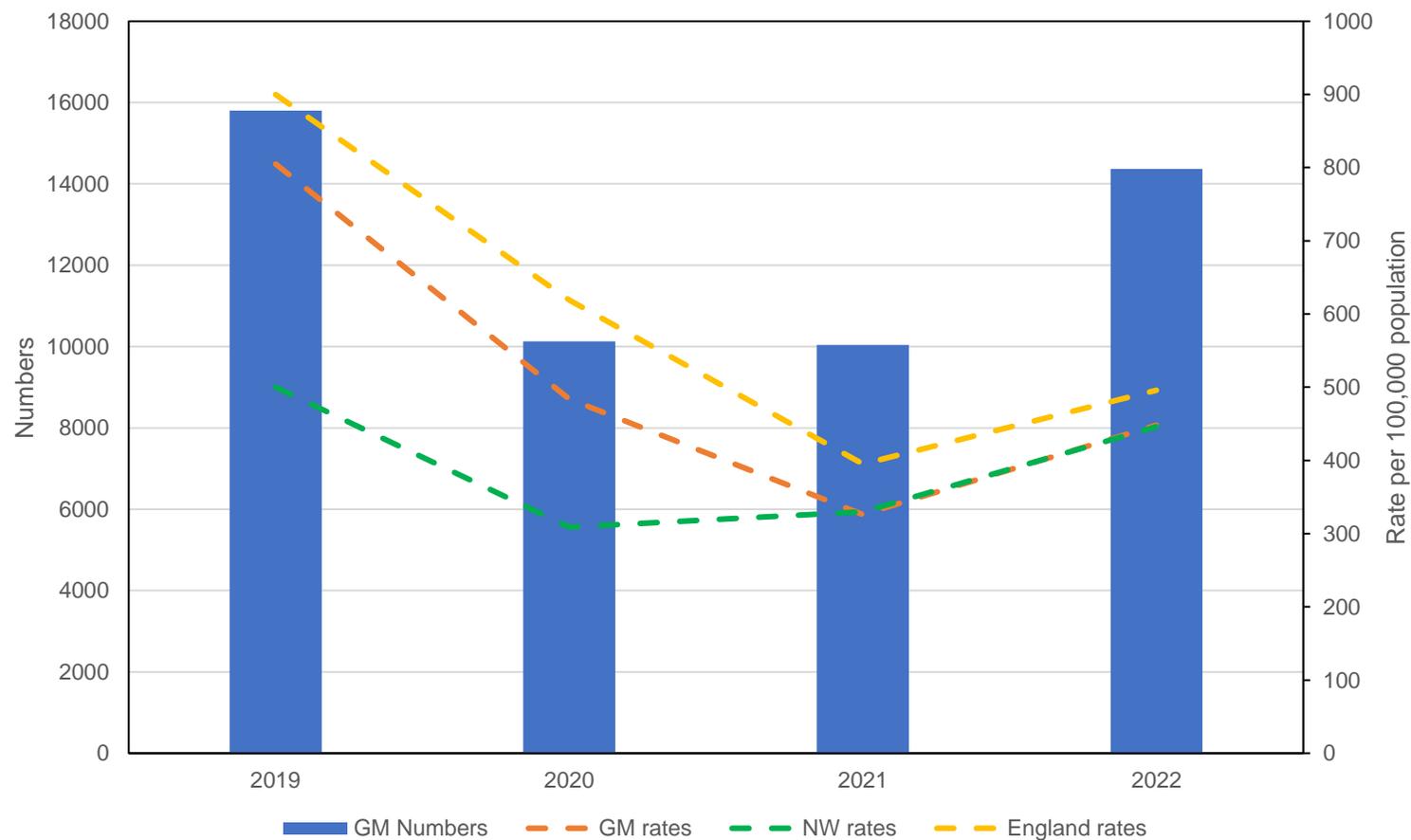
Different scales are used on the primary and secondary y-axes.

# Diagnosis of all new STIs



# New STIs (excluding Chlamydia)

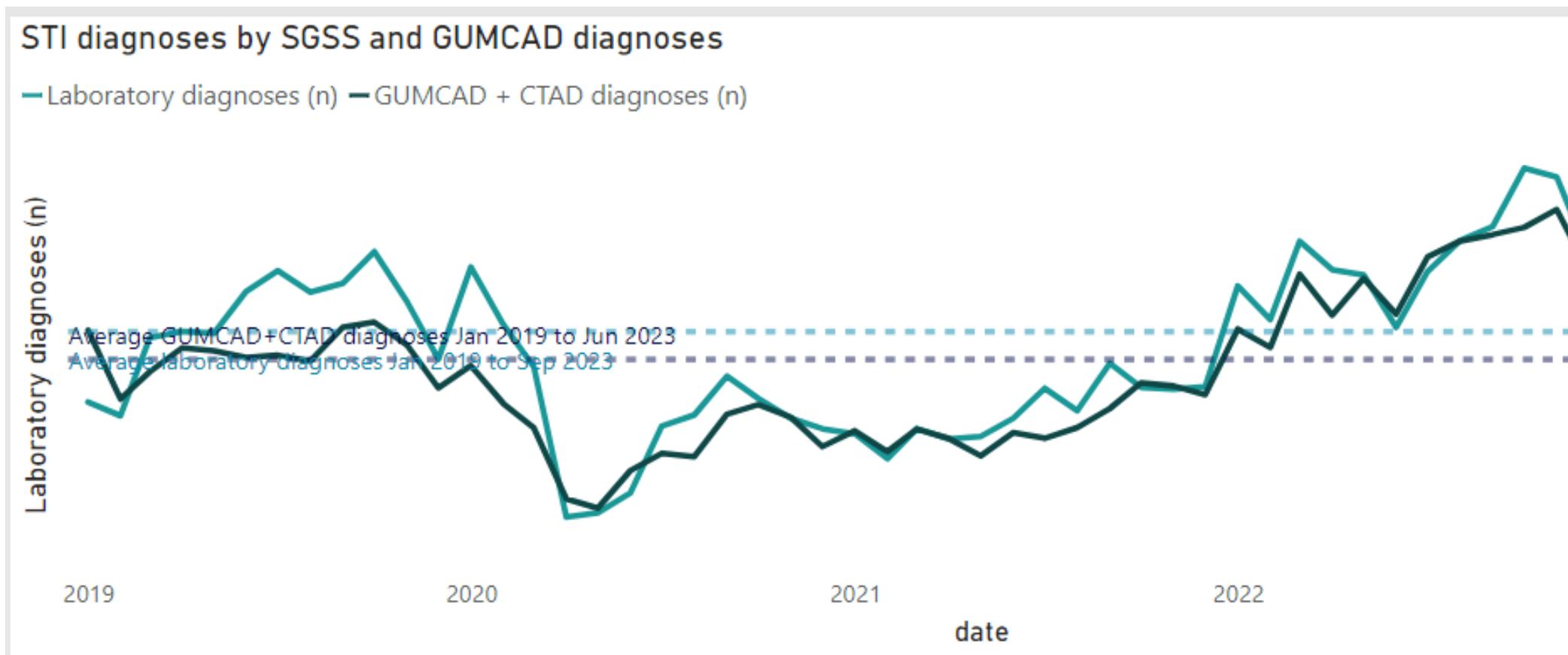
New STI diagnoses excluding Chlamydia



## Gonorrhoea

- In Greater Manchester, gonorrhoea diagnoses increased from summer 2021 despite the testing rate remaining below pre-pandemic levels. Positivity increased sharply. This is indicative of an increase in prevalence of infection.
  - Manchester and Salford maintained a high diagnosis rate in 2022 despite a reduction in testing whereas in other areas of Greater Manchester the increase in diagnoses could in part be explained by increased testing.
  - The population groups affected varied between local authority areas: The increase was mainly seen in 20-24 year olds, with some areas also seeing a sharp increase in diagnoses in 15-19 year olds;
  - In some areas, the increase mostly affected male MSM whereas in others, the increase was seen in male non-MSM and females
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## Gonorrhoea in the North West

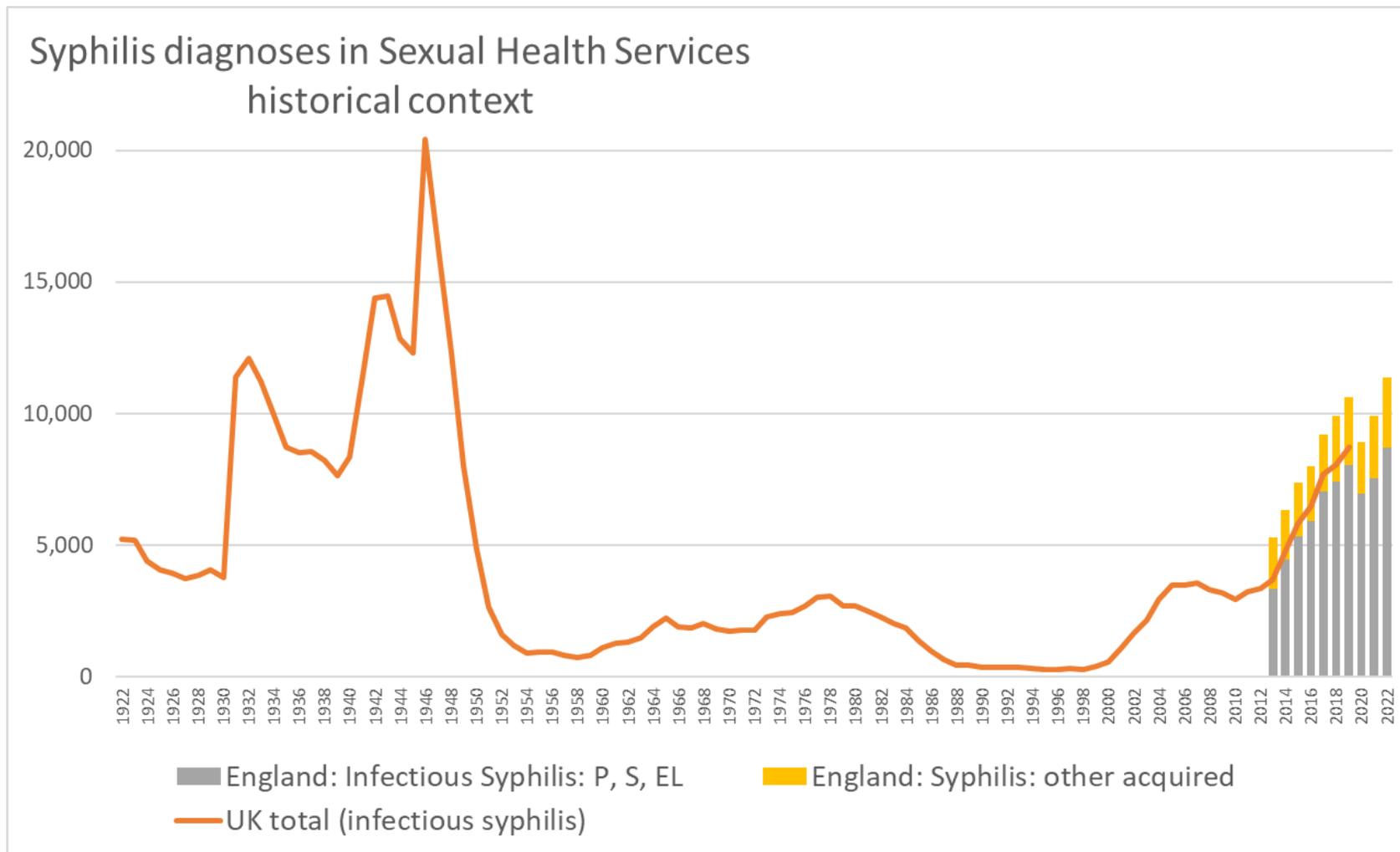


# Sexual & Reproductive Health Profiles

UTLA	Gonorrhoea diagnostic rate per 100,000 (2022)	England rate (2022)
Manchester	308	146 per 100,000
Salford	273	
Wigan	131	
Rochdale	110	
Tameside	108	
Oldham	101	
Bury	99	
Trafford	93	
Stockport	86	
Bolton	80	



## 100 years of syphilis

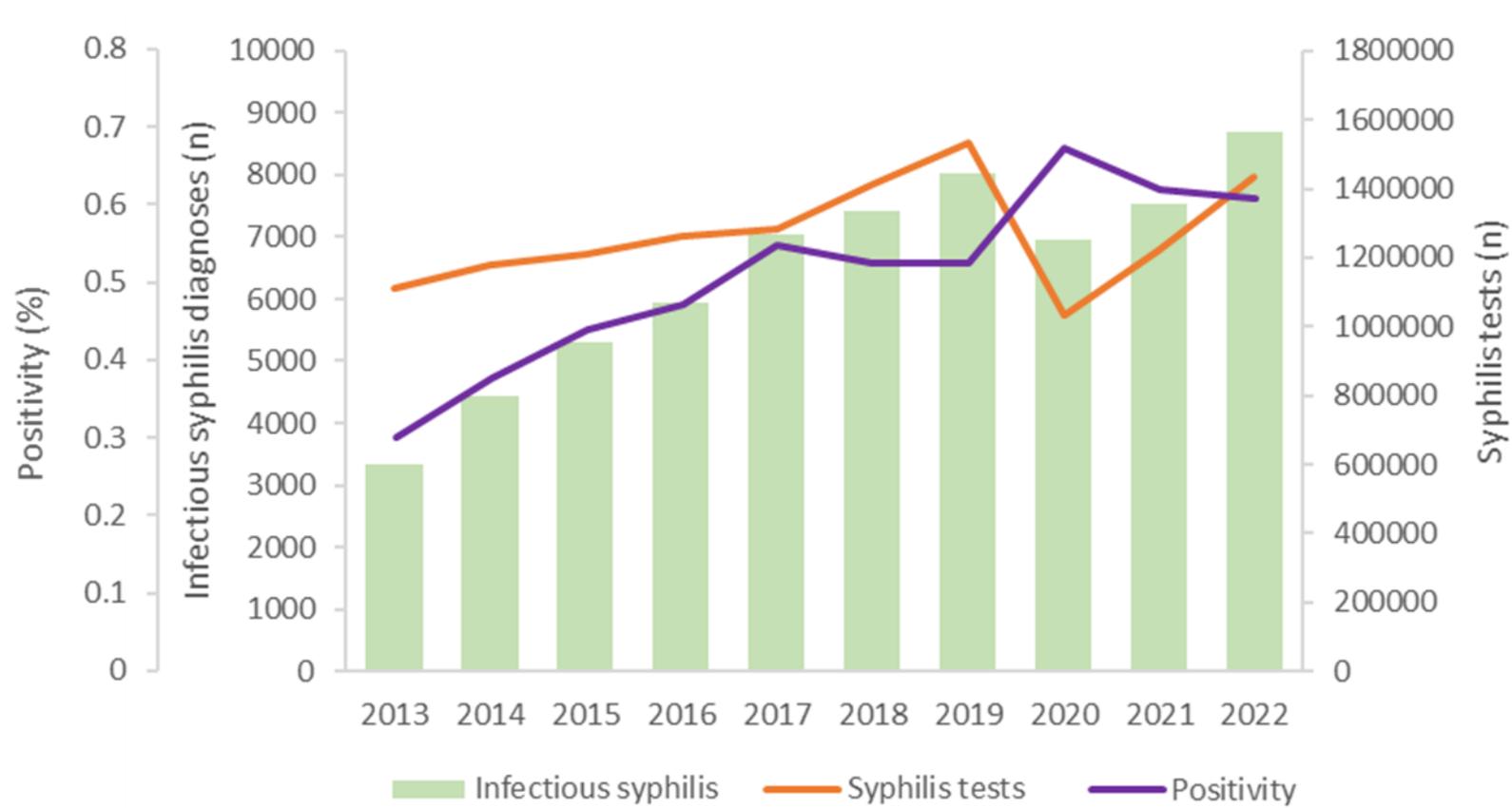


In 2022 in England there were:

**8,692** diagnoses of infectious syphilis: primary, secondary and early latent stages

**2,677** diagnoses of “Other acquired syphilis”: including cardiovascular, neurosyphilis or any other late or latent syphilis (asymptomatic, non-infectious, but requiring treatment)

## Recent syphilis trends in England

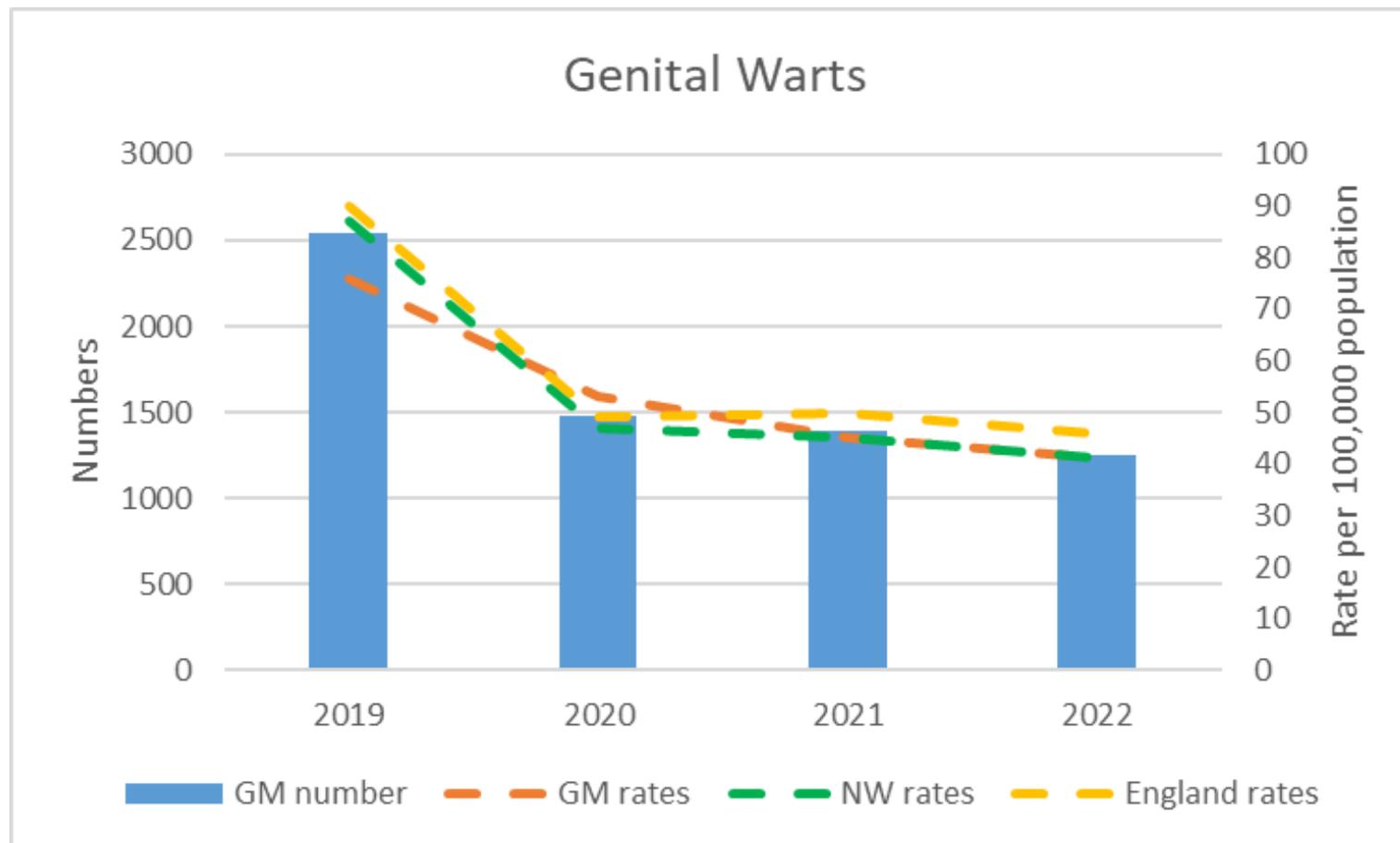


# Sexual & Reproductive Health Profiles

UTLA	Syphilis diagnostic rate per 100,000 (2022)	England rate (2022)
Salford	45.4	15.4 per 100,000
Manchester	42.9	
Tameside	13	
Trafford	11.9	
Oldham	9.9	
Bury	9.8	
Rochdale	8.5	
Stockport	8.1	
Wigan	7.9	
Bolton	6.8	



# Genital Warts

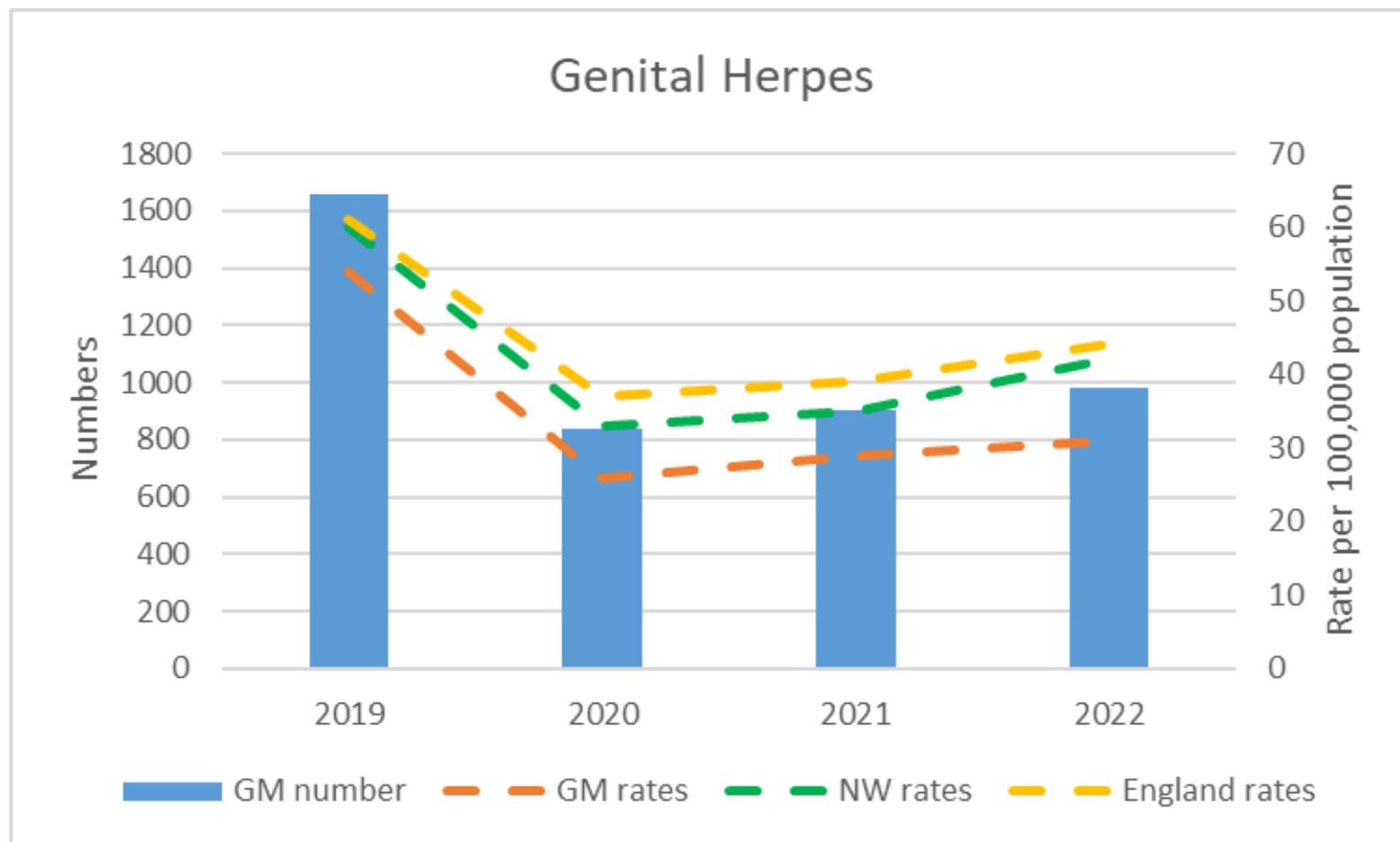


# Genital Warts

## Genital Warts 2022

Greater Manchester	Rates per 100,000	Number		GM Rate	NW Rate	England Rate
Manchester	67.5	371	↓			
Salford	60.2	163	↓			
Trafford	44.6	105	↓			
Rochdale	39.7	89	↑			
Bolton	38.8	115	↑	41 per 100,000	41.1 per 100,000	46.1 per 100,000
Wigan	34.9	115	↓			
Tameside	32	74	↓			
Bury	31.5	61	↓			
Oldham	30.6	74	↑			
Stockport	27.1	80	↓			

# Genital Herpes



# Genital Herpes

## Genital Herpes 2022

Greater Manchester	Rates per 100,000	Number		GM Rate	NW Rate	England Rate
Manchester	60.4	332	↑↑	31 per 100,000	42.3 per 100,000	44.1 per 100,000
Salford	45.8	124	↑↑			
Trafford	34	80	↑↑			
Bury	32	62	↑↑			
Wigan	28.5	94	↓↓			
Oldham	27.7	67	↑↑			
Tameside	26	60	↑↑			
Rochdale	25.4	57	↑↑			
Stockport	20.3	60	↓↓			
Bolton	14.5	43	↓↓			

# Chlamydia

## Chlamydia 2022 - All Ages

Greater Manchester	Diagnostic Rates per 100,000	Number		GM Rate	NW Rate	England Rate
Manchester	771	4240	↔			
Salford	521	1411	↓			
Rochdale	386	866	↔			
Wigan	368	1214	↔			
Oldham	342	8281	↑	362 per 100,000	355 per 100,000	352 per 100,000
Bury	309	5981	↓			
Trafford	263	620	↓			
Tameside	258	596	↓			
Bolton	202	597	↓			
Stockport	199	587	↓			

# Appendix 2: VCFSE case studies



# The PaSH Partnership

Passionate about Sexual Health across Greater Manchester



GEORGE  
HOUSE TRUST



The PaSH Partnership is a collaboration between **BHA for Equality, George House Trust, and LGBT Foundation** who deliver a comprehensive programme of interventions to meet the changing needs of people newly diagnosed with HIV, living longer term with HIV or at the greatest risk of acquiring HIV



# LGBT Foundation – Sexual Health Services

- A range of services offered to support LGBTQ+ people and men who have sex with men
  - The approach is wellbeing focused, evidence-based, using harm-reduction principles and centered around the diverse needs of LGBTQ+ communities
  - Co-production principles used to ensure the work is representative of the relevant communities. For example, our Sex Work Post-Covid information was developed with sex workers who shared their concerns, tips about safety, sexual health and sex work in order to benefit others
  - Sexual wellbeing, reduction of shame and stigma are at the heart of everything
  - The condom and lube distribution scheme started in 1994 and since 2020, 690,000 condoms have been distributed to community members in bars, community venues and posted out
  - Last year >1,100 people benefited from sexual health support. 13% of people that tested had never tested for HIV and, an additional 32% of people testing had not tested for >12 months
  - Over the last 3 years, delivery has changed from a face to face service delivery charity to one which offers remote versions of many services, including free online condoms, postal testing options, advice and support offered on dating/hookup apps. Using digital tools to share sexual health promotional messages, both to most at-risk populations and general public and in 2022/2023, PaSH's World AIDS Day video campaign received 41,540 social media impressions and National HIV Testing Week social media content received 16,438 social media impressions. PaSH were also responsible for GM's award-winning campaign, 'HIV, Let's Sort This Together' which achieved a total reach of >10 million, social media reach of >1.5 million, as well as 6200 tests ordered online.
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## BHA for Equality – PreP Community Panel

- PrEP (Pre-exposure prophylaxis) is a highly effective, free medication for preventing HIV and is available through sexual health clinics but inequalities in access have been identified as has low uptake in women and ethnic minorities
  - In 2023 BHA created the PrEP Community Panel, recruiting local people from Black and minoritised communities including influencers, activists and people from local Black owned businesses across Greater Manchester
  - The Panel meets regularly to discuss the most effective ways to raise PrEP awareness, to share their local knowledge and experiences of attitudes, stigma, discrimination, why people don't understand, access or trust information about PrEP. Working together to identify ways to increase its acceptability amongst their communities
  - BHA provided in-depth training to the community members on PrEP – what it is, how it works and can be accessed, ensuring that all members of the Panel had a good baseline knowledge, making them effective community champions
  - The Panel has made recommendations about the design and delivery of HIV prevention campaigns and helped to raise awareness amongst Black and minoritised communities by addressing the specific concerns and issues faced
  - The group has also discussed in detail how to design an effective PrEP campaign and resources for sharing more widely through social media and community outreach.
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## George House Trust – African Men’s Project - Calabash

- This project specifically focuses on creating opportunities for HIV positive African Men to access activities that improve well-being, reduce isolation, increase confidence, and build capacity. To help participants navigate their daily lives while collaborating with clinicians and community groups to promote the visibility of George House Trust
- A key element is the Calabash Group, bringing African Men together to connect, share experiences around issues raised by living with HIV, socialise and improve wellbeing. Social events, health and wellbeing sessions, indoor and outdoor activities, skills based training are held to provide opportunities to build skills and confidence with volunteering
- Through the year, the project engaged 205 African Men, with 87 individuals attending the Calabash Group. There were 11 group sessions with an average of 20 individuals attending the group space constantly. I provided 55 individuals with one-to-one support sessions.
- The project has been independently evaluated, identifying that:
  - 88.8% of participants had increased confidence
  - 78.8% had improved their connectivity and social engagement
  - 76.2% had reduced their social isolation
  - 58.8% had increased their involvement in volunteering activities.

