

LGBTQ+

Introduction

This document presents summary findings for members of the LGBTQ+ community across Wales, indicating where there are differences and particularities compared to overall results. For quantitative results, differences are significant at the 95% confidence level, meaning that there is only a 5% possibility that the difference has occurred by chance; a commonly accepted confidence level. All differences are statistically significant unless stated otherwise. There is a separate report showing results across groups. The title of the overall report is: 'Evaluation of information resources' (produced by BMG Research on behalf of PHW). 104 members of the LGBTQ+ community took part in the quantitative survey and one individual from the LGBTQ+ community took part in a qualitative interview. Fieldwork took place between December 2022 and February 2023. Further information about sampling and methodology can be found on the main report cited above.

Recommendations and key take outs for this group are marked in **bold**.

Awareness of publicity about immunisation

In line with overall results, the vast majority of LGBTQ+ people (88%) say that they have seen or heard something about immunisations for people in the past 12 months (cf. 89% overall). Those who had seen or heard information about vaccination say that it was mostly related to COVID-19 and flu, but the proportions of LGBTQ+ people saying that they have seen information about these two vaccines is lower than average (67% of LGBTQ+ people have seen information about the COVID-19 vaccine, compared to 84% overall; and 41% LGBTQ+ people have seen or heard information about the flu vaccine, compared to 62% overall). Nonetheless, LGBTQ+ people are more likely than other groups to have heard about the following vaccines in the past 12 months: 6-in-1/DTaP/IPV/Hib/HepB (diphtheria, hepatitis B, Haemophilus influenzae, polio, tetanus, whooping cough (pertussis)) (18%, compared to 9% overall), Tetanus, diphtheria, and polio Td/IPV (Teenage booster or 3 in 1) (11%, compared to 6% overall), 4-in-1 pre-school booster (diphtheria, polio, tetanus, whooping cough (pertussis)) (10%, compared to 5% overall), Hepatitis B (10%, compared to 5% overall), MenACWY adolescent/fresher vaccine (Meningitis, meningococcal disease, septicaemia or blood poisoning) (8%, compared to 2% overall), and Rotavirus vaccine (8%, compared to 4% overall).

76% of LGBTQ+ people who had seen or heard information about vaccination in the past 12 months say that this information was in favour of vaccinations while 7% say that it was against vaccination and 4% say that it was a mixture of information for and against vaccination. 11% say that the information was neutral and the remaining 2% don't know or can't remember. These results are in line with overall results.

Doctors, nurses or other healthcare professionals are the most common source of information about vaccination among LGBTQ+ people; with 50% of those who have seen or heard information on vaccination saying that they heard this from healthcare professionals (cf. 32% overall). Other channels mentioned more often than average by LGBTQ+ people to find out about vaccinations are: someone else in a healthcare setting (other than healthcare professionals) (17%, compared to 8% overall), and NHS 111 / NHS Direct Wales telephone service (12%, compared to 6% overall). Conversely, LGBTQ+ people are less likely than average to say that they have seen or heard information about vaccination on television in the past 12 months (22%, compared to 38% overall).

Key take outs:

- **Recommended channels for reaching out to the LGBTQ+ community: healthcare professionals and settings**
- **Less effective channels for reaching out to the LGBTQ+ community: television.**

LGBTQ+ people are more likely than average to have encountered misinformation about vaccinations, with a higher-than-average proportion saying that they have seen or heard something in the past 12 months that would make them worried or concerned about having vaccinations (48%, compared to 21% overall). This suggests that LGBTQ+ people are more likely than other groups to need 'myth-busting' style information resources about vaccinations.

Key take out:

- **LGBTQ+ are more likely than other groups to need 'myth-busting' style information resources about vaccinations.**

Awareness of vaccination programme

Awareness of the vaccination programme in Wales among LGBTQ+ people is lower than average, with awareness of several vaccines being lower than average among this group.

Vaccines LGBTQ+ people are less likely than average to be aware of: Pneumococcal (PCV) vaccine (18%, compared to 29% overall), Pertussis (whooping cough) vaccine (18%, compared to 27% overall), Shingles/herpes zoster vaccine (19%, compared to 35% overall), Tuberculosis (BCG) (27%, compared to 40% overall), travel vaccinations (29%, compared to 40% overall), 4-in-1 pre-school booster (diphtheria, polio, tetanus, whooping cough (pertussis)) (39%, compared to 53% overall), MMR vaccine (41%, compared to 63% overall), Tetanus, diphtheria, and polio Td/IPV (Teenage booster or 3 in 1) (41%, compared to 53% overall), Influenza/Flu vaccine (56%, compared to 76% overall), and COVID-19/Coronavirus vaccine (72%, compared to 84% overall).

Awareness of the HPV vaccine among LGBTQ+ people is in line with the average result, with 33% LGBTQ+ people saying that they are aware that this vaccine is currently available for people in Wales (cf. 40% overall). Given that the HPV vaccine is targeted to the LGBTQ+ community, awareness levels could improve.

Key take outs:

- **Overall awareness of the national vaccination programme in Wales could improve among LGBTQ+ people.**
- **Specific awareness of the HPV vaccine could improve among LGBTQ+ people. Even though the HPV vaccine is targeted at the LGBTQ+ community, only one in three LGBTQ+ people are aware of it.**

Attitudes towards vaccinations

LGBTQ+ people are more likely than average to say that several of the diseases the Welsh vaccine programme protects against are not serious: Tetanus (25% of LGBTQ+ people say this disease is not serious, compared to 14% overall), Diphtheria (23%, compared to 11% overall), Rotavirus (22%, compared to 14% overall), Hepatitis (20%, compared to 11% overall), Polio (19%, compared to 9% overall), Pneumonia (15%, compared to 5% overall), Meningitis (14%, compared to 4% overall), cervical cancer (13%, compared to 7% overall), Tuberculosis (11%, compared to 6% overall), Head

and neck cancer (10%, compared to 3% overall), and Septicaemia (Blood poisoning) (9%, compared to 4% overall).

LGBTQ+ people are less likely than average to say that all vaccines are a lower risk to them than the diseases they protect from (46%, compared to 73% overall) and more likely than average to say that the following vaccines are worse for them than the actual illness: COVID-19/Coronavirus vaccine (18%, compared to 10% overall), 6-in-1/DTaP/IPV/Hib/HepB (diphtheria, hepatitis B, Haemophilus influenzae, polio, tetanus, whooping cough (pertussis)) (12%, compared to 3% overall), Hib/MenC (Haemophilus influenzae, meningitis C) (10%, compared to 2% overall), Influenza/Flu vaccine (10%, compared to 4% overall), 4-in-1 pre-school booster (diphtheria, polio, tetanus, whooping cough (pertussis)) (8%, compared to 2% overall), MenB (meningitis B) (7%, compared to 2% overall), Pneumococcal (PCV) vaccine (6%, compared to 1% overall), Tuberculosis (BCG) (6%, compared to 1% overall), MenACWY adolescent/fresher vaccine (Meningitis, meningococcal disease, septicaemia or blood poisoning) (6%, compared to 2% overall), MMR (5%, compared to 1% overall), Rotavirus vaccine (3%, compared to 1% overall), Hepatitis B (3%, compared to 1% overall), and Tetanus, diphtheria, and polio Td/IPV (Teenage booster or 3 in 1) (3%, compared to 1% overall).

Only 2% of LGBTQ+ people say that the HPV vaccine is worse to them than the disease itself, in line with the average result (cf. 1% overall).

Additionally, LGBTQ+ people are less likely than average to agree that: vaccines work (76%, compared to 86%), they trust vaccines (74%, compared to 83% overall), vaccines are safe (74%, compared to 84% overall), getting vaccinated is the right thing to do for themselves (72%, compared to 82% overall) and for society (71%, compared to 82% overall), it is normal for people their age to get vaccinated (70%, compared to 81% overall), and vaccines are properly tested (68%, compared to 79% overall). Disagreement with most of these statements is in line with the average, with the don't know scores being higher than average instead. Nonetheless, LGBTQ+ people are more likely than average to disagree that getting vaccinated is the right thing to do for themselves (13% disagree, compared to 7% overall). LGBTQ+ people are also more likely than average to be concerned about the ingredients of vaccines (44%, compared to 34% overall).

Key take out:

- **Attitudes towards vaccinations are more negative than average among LGBTQ+ people. This suggests that information resources for this group should focus on highlighting the benefits of vaccination and the severity of diseases.**
- **Information resources for LGBTQ+ people should also address worries about vaccine safety and the ingredients of vaccines.**

Access to information and decision-making

LGBTQ+ people are less likely than average to agree that they know where to find information on vaccination (78%, compared to 85% overall). Similarly, agreement with the following statement is lower than average among LGBTQ+ people: *I've had enough information to make an informed decision about whether or not to have each of the vaccinations I've been offered so far* (79%, compared to 86% overall). Disagreement scores for these statements are in line with the average, instead it is the neutral scores that are higher than average.

In line with the average result, 78% of LGBTQ+ people agree that they know how vaccinations work.

When it comes to the sources of information used to find out about vaccinations, the most common sources of information for LGBTQ+ people are: doctors, nurses and other healthcare professionals

(50%), in line with overall results. LGBTQ+ people are less likely than average to have used the NHS website (32%, compared to 42% overall) and NHS leaflets (19%, compared to 29% overall). In contrast, LGBTQ+ people are more likely to have used the following sources of information to find out about vaccinations: social media (e.g. Facebook, Instagram, Twitter, TikTok) (21%, compared to 10% overall), YouTube (13%, compared to 8% overall), WhatsApp (9%, compared to 2% overall), and Snapchat (7%, compared to 3% overall).

LGBTQ+ people are less likely than average to trust information from healthcare professionals and the NHS website, while trust in social media is in line with the average result.

In terms of decision-making, LGBTQ+ people are less likely than average to say that they automatically have all the immunisations when they are due/offered (46%, compared to 57% overall) and more likely to say that they weigh up pros and cons before making a decision about whether or not to get vaccinated (18%, compared to 11% overall). The LGBTQ+ individual who took part in the qualitative interview also mentioned that they conduct research and weigh up pros and cons when making a decision about less well-known vaccines:

"If it's something I'm very familiar with, like the flu, I'd go and have it straight away but if it's something I'm not very familiar with, maybe a virus I haven't heard of like HPV, I'd look that up on the internet first just to see what's all about and what the vaccine can help you with and just to see if there are any well-known nasty side effects as well". LGBTQ+ person

Key take outs:

- **LGBTQ+ people are less likely than average to say that they have all the information they need to make informed decisions on whether or not to have vaccinations. This group is also more likely to say that they weigh up pros and cons before deciding whether to have vaccines, as opposed to making automatic decisions to get vaccinated. Information resources for this group should focus on explaining what vaccinations are available, what they protect against and the benefits of vaccines so as to support decision-making.**
- **Recommended channels for reaching out to LGBTQ+ people: social media (e.g. Facebook, Instagram, Twitter, TikTok), YouTube, WhatsApp and Snapchat**
- **Less effective channels for reaching out to LGBTQ+ people: websites and leaflets**
- **Further research may be needed to understand who are the most trusted messengers to convey information about vaccination to LGBTQ+ people, since this group are less likely to trust healthcare professionals and the NHS website.**

Vaccine uptake, barriers and motivations

When asked whether they had refused or delayed any vaccines offered to them, 69% of LGBTQ+ people say that they have had all the vaccinations offered to them so far, while 21% say that they have refused one or more vaccines and 7% say that they have delayed one or more vaccines. These results are in line with the overall results.

In line with average results, protection of oneself is the most prominent motivation among those LGBTQ+ people to get vaccinated. This theme was also brought up in the qualitative interview with a LGBTQ+ individual (as well as other groups):

"If you can have a vaccine, I'd say obviously go for it because not only are you helping yourself but it's also being thoughtful of other people that are vulnerable and catch things easily, specially people from older demographics or people with immune issues". LGBTQ+ person

When it comes to barriers to vaccine uptake, a lack of trust, having heard about other people having side effects and a perception that vaccines are not needed are the most commonly cited barriers among LGBTQ+ people, in line with overall results.

Key take out:

- **Claimed vaccine uptake among LGBTQ+ people is in line with the overall result, with protection of oneself being the most prominent motivation to get vaccinated (in line with average results). Information resources for this group should therefore draw on protection as a motivator to encourage vaccination uptake/draw attention to information resources.**
- **A lack of trust, having heard about other people having side effects and a perception that vaccines are not needed are the most commonly cited barriers to vaccine uptake among LGBTQ+ people. Information resources for this group should, therefore, address concerns about side effects and justify the necessity of vaccines.**

Awareness and views of PHW publicity

Awareness of PHW publicity is higher than average among LGBTQ+ people (57%, compared to 41% overall). LGBTQ+ people are also more likely than average to have seen the *Mae Brechu yn achub bywydau/Vaccination saves lives* logo (56%, compared to 39% overall).

GP surgeries (25%) and vaccination centres (24%) are the most common places where LGBTQ+ people have seen PHW publicity, in line with the average result. Nonetheless, when asked about the most effective channels to convey information about vaccination to the LGBTQ+ community, the individual who took part in the qualitative interview suggested forums, a section on the NHS website specifically dedicated to LGBTQ+ people, public transport and rugby clubs.

Views of PHW publicity are positive (in line with average results), with 81% being satisfied with the materials overall, 85% satisfied with the amount of information, 83% agreeing that the information is clear, 81% positively rating the design/layout, and 92% agreeing that the materials are relevant to them.

Further insights in relation to views of PHW publicity were provided in the qualitative interview. In line with findings across other groups, there is a preference among LGBTQ+ people for resources where they are clearly identified as the target audience:

"It's nice that they have a same-sex couple on the front page so it makes the LGBTQ+ community more aware that it's pointed at them as well so they don't feel excluded". LGBTQ+ person [Same sex men monkey pox resource]

"I would say it's not very relevant to myself, it's people from an older demographic so maybe having people from a more diverse age group would be quite useful". LGBTQ+ person [Adult COVID and flu leaflet]

As seen across other groups, there is also a preference for concise information resources which include visual elements.

"I feel it's quite a lot of information overload so it may be better to pin-point it and narrow it down a little bit. Maybe put it over different pages, a bit more spread out rather than a lot of information to read on one page. It's more like an essay [at the moment], it feels more difficult to digest". LGBTQ+ person [Same sex men monkey pox resource]

"I like the diagram showing what HPV can cause and where in the body. I think that's more effective than the writing". LGBTQ+ person [Easy Read HPV leaflet]

There is also a preference for eye-catching, colourful resources (in line with other groups).

"I like the colours, there's not too much but it's better than being plain, it catches your eye a bit more". LGBTQ+ person [Adult COVID and flu leaflet]

While QR codes and further information links were positively regarded on PHW resources, these links mainly directed to the NHS website. The LGBTQ+ individual who took part in the qualitative interview suggested that having additional links to LGBTQ+ websites and forums would be helpful to show that there is additional back up for vaccinations.

Key take outs:

- **LGBTQ+ people are more likely than average to have seen or heard PHW publicity. This supports the need to keep a targeted approach to reach out to this community, with information resources for LGBTQ+ people clearly indicating their target audience.**
- **Information resources for LGBTQ+ people should be short and concise (as for other groups), as well as colourful/eye-catching.**
- **Further research with LGBTQ+ people may be needed to understand what trusted forums, community groups and messengers PHW could use to reach out to this group since the LGBTQ+ person who took part in the qualitative interview wasn't able to provide much detail on this.**