

WHO EPI-WIN webinar: Managing stigma and discrimination in health care settings in public health emergencies such as monkeypox

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Attaching a stigma to the LGBTQI+ community should be avoided during the monkeypox epidemic

- **Stigma** and **discrimination** connected to any disease, including monkeypox, are **never acceptable**.
- They can have a serious impact on health outcomes and undermine the outbreak response by making people reluctant to come forward or seek care.
- This increases the risk of transmission – both within the most affected communities and beyond.

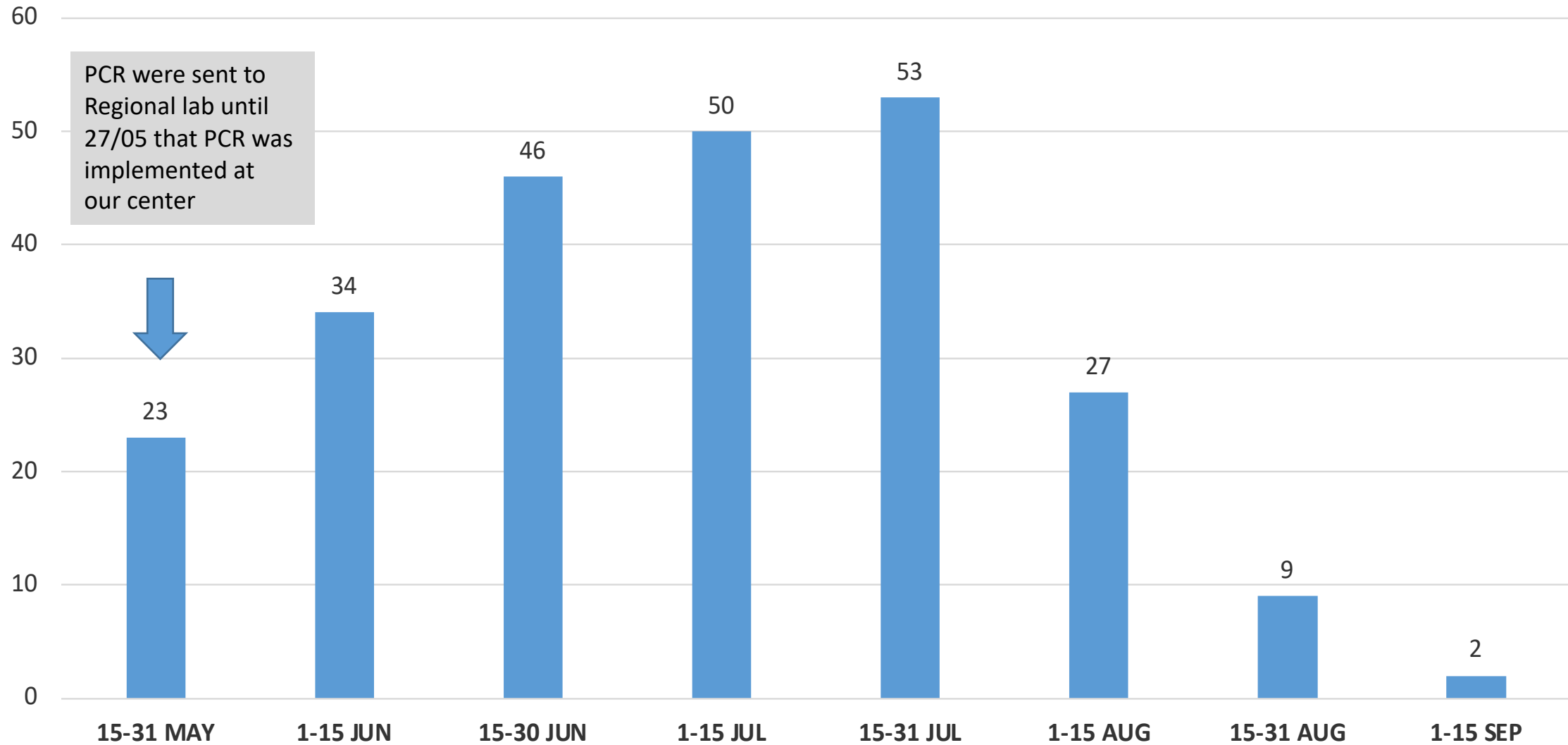
Gregorio Marañón University General Hospital

- **Tertiary care institution. Madrid /City center**
- The hospital attends a population of 350,000 inhabitants and, in normal circumstances, the Microbiology Department processes more than 300,000 samples per year.
- The normal capacity of our hospital is 1200 beds.



- Clinical Microbiology and Infectious Diseases Department
- HIV program /STD consult / PreP consult
- Virology laboratory: Technological advances w/ COVID pandemia

Monkeypox cases (n=244)



1st detected case at our hospital
19/05/22

Monkeypox outbreak alert

- How we prepared for the monkeypox outbreak?
 1. We organized a meeting in our department where we discussed the epidemiological and clinical information we had so far.
 2. We designed a clinical guideline that included the case definition, recommendations for evaluating patients and a data collection protocol.
 3. We contacted the emergency and dermatology departments to organize the internal circuit of patient care.
 4. We seek a rapid response time to improve patient care and alert contacts.
 5. We implemented a PCR based diagnosis in the laboratory for different samples: blood, skin lesions, rectal, pharyngeal and urethral exudates.



Contact with NGOs

- We contacted NGOs to help us send out social media messages to the LGBTQ+ community, counsel people who come forward for help or who are in patient groups and diverse populations (trans, MSM, chemsex users).
- We gave talks at two NGOs: **Imaginamas** and **Apoyo Positivo** aimed at the general population and the LGBTQ+ community.



Attending patients needs



- We set up a special consultation in an isolation box in the emergency room.
- Initially we had some problems because the place was not pleasant and the patients had a feeling of being marginalized in the consultation.
- Faced with the increase of cases and the beginning of the LGBTQ+ pride:
 - We opened an integrated fast track consultation that offered complementary diagnosis for Monkeypox and other STDs, contact trace and follow-up of patients until recovery.
 - The consult was free and open to pride visitors.
- Vaccination program: implemented by the health authorities, easy to access, web page to ask for appointments.

Healthcare professionals

- The healthcare personnel who have cared for these patients:
 - Had experience seeing patients with HIV and STDs.
 - Culture of non-discrimination to diversity.
 - Experience in treating with patients in PreP and post-exposure prophylaxis programs.
- We have tried to make the consultation a space where patients can talk openly, feel comfortable and not be judged.



Summary

- Anyone can contract monkeypox.
- Listen to the needs of those affected.
- Organize a local action plan at the community, health center, hospital level, in agreement with the different health workers involved.
- Engage social influencers (NGO's). Leading trusted voices can inform people about monkeypox and help increase awareness of the dangers of stigma.
- Involve healthcare workers who have experience in dealing with HIV, STDs and people from diverse populations.
- Use appropriate terminology and language to ensure that people feel comfortable and respected while accessing care.

Infectious Diseases

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