

Sustaining sexual and reproductive health through COVID-19 restrictions: qualitative interviews with Australian clinicians

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Background:

Sexual and reproductive health care has largely been delivered face-to-face in Australia, with a focus on supporting the health care needs of people with HIV, people at risk of sexually transmissible infections, and people seeking gender affirming care. These services adapted to COVID-19 with a commitment to continued care despite major impacts on existing models and processes. Limited research has explored the perspectives of the sexual and reproductive health care workforce in the research on COVID-19 adaptations, despite how radically this – and every other health – sector was impacted.

Methods:

Semi-structured interviews were conducted between June and September 2021 with 15 key informants representing a diverse range of service settings and professional roles in the Australian sexual and reproductive health sector. Inductive themes were generated through a process of reflexive thematic analysis, informed by our deductive interest in clinical adaptations.

Results:

Participants described the major adaptations as triage (rapidly adapting service models to protect the most essential forms of care), teamwork (working together to overcome ongoing threats to service quality and staff wellbeing), and the intertwined themes of telehealth and trust (remaining connected to marginalised communities through remote care). Threaded across these themes was a meta-narrative of interprofessional bonding, with participants describing a distinct and unusual experience of working across disciplinary and professional boundaries, driven by the 'unprecedented' context of crisis conditions.

Conclusion:

While participants believed their experiences during COVID restrictions would support new ways of delivering services as a more affectively bonded interprofessional team in future, including in delineating roles, sharing responsibilities, and overcoming any emerging challenges to future clinical service delivery, the coming years will provide important evidence of longer-term impacts of COVID-19 interruptions on both the users and providers of sexual and reproductive health services.

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