

# INFORMED, BUT UNCERTAIN: MANAGING TRANSMISSION RISK AND ISOLATION IN THE 2022 MPOX OUTBREAK AMONG GAY AND BISEXUAL MEN IN AUSTRALIA

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## Background:

In 2022, a global outbreak of mpox occurred in non-endemic countries, including Australia, predominantly affecting gay, bisexual men and other men who have sex with men. The speed of and sometimes conflicting public health advice produced uncertainty. This study sought to understand how people affected by mpox managed transmission risk and isolation by drawing on the concept of 'counterpublic health', which incorporates how understandings of science and the needs of affected communities become embodied practice.

## Methods:

Participants were recruited from an online survey about mpox during August-September 2022, and snowball sampling. Eligible participants were living in Australia, aged 18+ years, and diagnosed with mpox in 2022 or a close contact. In-depth qualitative interviews were conducted with 16 people: 13 people diagnosed with mpox and three close contacts. Data were analysed thematically.

## Results:

All participants were cisgender gay and bisexual men living in Australia, 25-56 years old (mean 43 years). One participant with mpox was living with HIV, and all others were HIV-negative. Two close contacts were partners of people with mpox, and one was a housemate. Participants critically approached public health advice on mpox, often finding it restrictive, inconsistent between overseas and Australia, and not responsive to their lived experience. Decisions about managing mpox risk and isolation drew on a range of sources (e.g., peers, academic journals, health organisations) that better reflected participants' infection reality. Likewise, participants often harnessed their experience with other viruses (i.e., HIV; COVID-19) and made decisions collaboratively with the people closest to them (e.g., partners, friends, family) to sustain relationships.

**Conclusion:**

Participants re-negotiated top-down approaches that were cautious about social and sexual contact, or neglected sexual health, pleasure and wellbeing when emphasising infection control. Future public health responses would benefit from identifying more opportunities to embed mechanisms to obtain real-time feedback from affected communities and their close contacts.

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