



July 2021

HIV:

The London Report

Research programme conducted by:

Britainthinks
— Insight & Strategy —

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8 The London report

8.1 London: Methodology

8.1.1 Overview and fieldwork dates

Quantitative Research

- Nationally representative online survey – including London
- Generated robust statistics on understanding and awareness of HIV

Deep dive focus groups

- 2 x London focus groups – one with Black participants, one with South Asian participants
- Explored key themes and audiences emerging from the survey, with the composition of groups informed by the previous phases

16th – 22 April 2021

26 May 2021



8.1.2 Quantitative Research

Quantitative online survey, with a nationally representative sample

Sample and fieldwork

Fieldwork conducted on 16-22 April 2021

Overall sample:

- total, unweighted sample of 3,002 respondents – 1,013 London respondents
- the data that is reported here has been weighted to be nationally representative of the adult population by gender, age, region, ethnicity, socio-economic grade, work status and tenure
- all comparisons between sub groups reported in this appendix are significant at the 95% level.

Boosts (to ensure robust comparisons at sub-group level)

- London: boosted to min. 1,000 respondents (achieved 1,013)
- People of Black ethnicities: boosted to min. 250 respondents (achieved 269 – London: 147)

Purpose

- To understand public perceptions and knowledge of HIV in detail, including differences across audiences and demographics.
- To generate robust statistical evidence to inform the work of NAT and others to tackle HIV stigma at societal and community levels, in London (through the FTCL) and across the UK.
- To identify possible areas for further exploration via deep dive focus groups, or in further research.

8.2.3 Deep dive focus groups

2 x 90 minute online focus groups with specific audiences

Sample and fieldwork

Fieldwork conducted on 26 May 2021

Group 2 – Younger Black people	Group 3 - Older South Asian people
<ul style="list-style-type: none"> Aged 18-34 Located in London 	<ul style="list-style-type: none"> Aged 35-64 Located in London

All groups:

- spread of SEG, age (within the age bracket), and sub-ethnicities
 - South Asian participants (group 3): min one person identifying as each of the following: Indian, Bangladeshi, Pakistani
 - Black participants (group 2): min. one person identifying as each of the following: Black African, Black Caribbean
- balance of male and female participants
- mix of urban and rural participants
- none holding extreme negative views of individuals living with HIV*.

Purpose

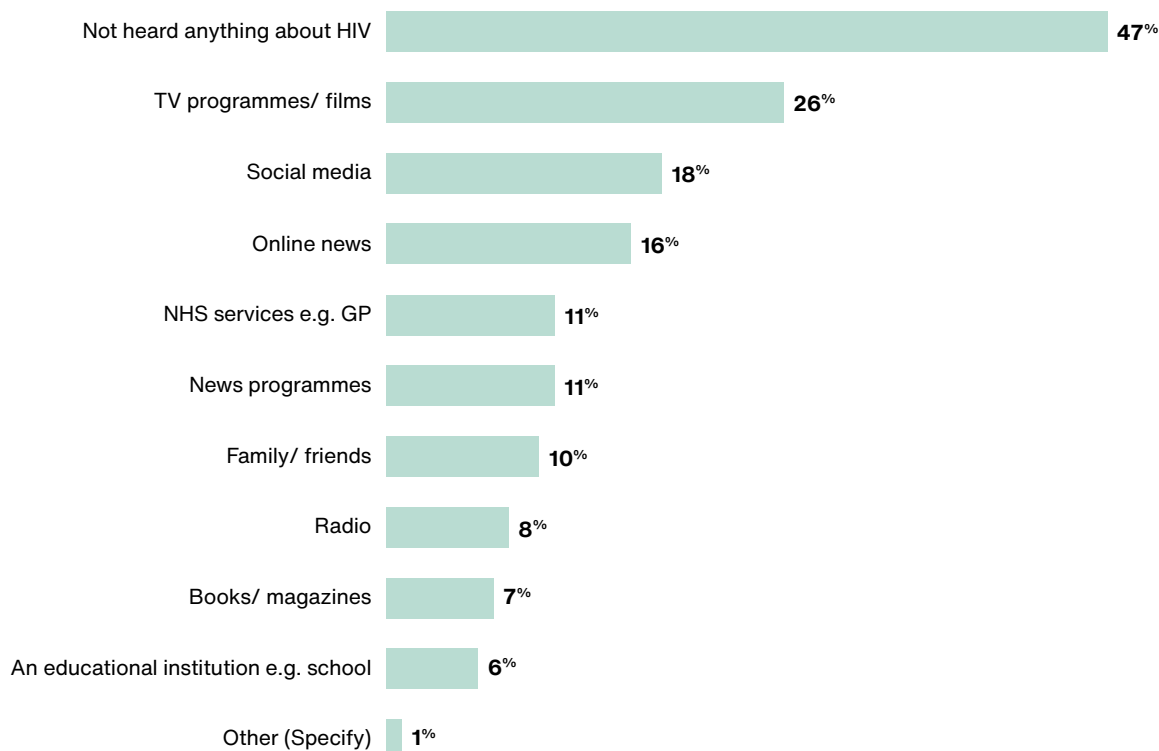
- The general purpose was to explore themes and/or differences between demographic groups that emerged from the survey and to add qualitative insight into key quantitative findings.
- Two focus groups explored views with South Asian people as the quantitative analysis showed comparatively lower levels of knowledge on average than the general public among this population. The other two focus groups were with Black people. Black populations in the UK are disproportionately affected by HIV, particularly Black African. Groups were split by age due to consistent differences in views in the general public across age groups.
- There were limitations on the number of groups that could be run at this stage of the research (four; two of which were in London), and there was a need to run two groups per audience (two per ethnic group and two per age grouping) to help validate findings. Groups were run with broader ethnic groupings rather than specific sub-groups within ethnicities (e.g. Black people overall rather than Black African people or Black Caribbean people). Although HIV prevalence is not the same among all Black population groups, there is still a disproportionate impact and higher rates of sexually-transmitted infections (STIs) are reported, particularly amongst Black Caribbean people. It must be noted that these groups are in no way homogenous and there exists huge cultural variation within both the South Asian and Black cohorts, as well as within sub-groups (such as Black African) that form part of them.

* At the recruitment stage, potential participants were presented with one statement (hidden among others) relating to HIV: 'People with HIV deserve the same level of support and respect as those with any other long term health condition'. Those who said they would disagree or strongly disagree with this statement were screened out of participating in focus groups.

8.2 Knowledge of HIV

8.2.1 Receiving information

Nearly half of Londoners say they haven't seen or heard anything about HIV in the last six monthsⁱ



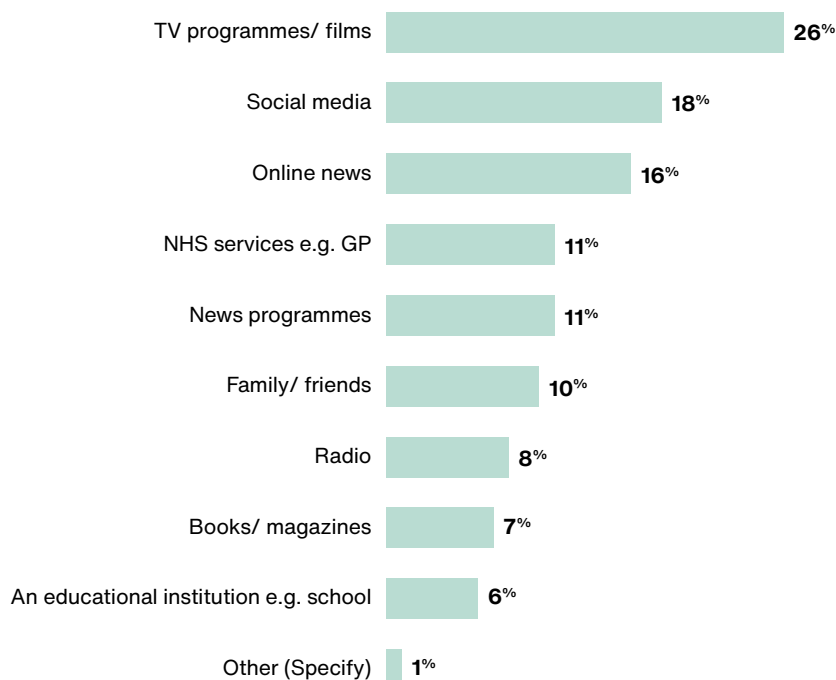
More likely to say they have *not* heard anything about HIV in the last 6 months are:

- **women** compared with men (53% vs. 41%)
- **those aged 65+** compared with those aged 34-64 and 18-34 (69% vs. 48% and 37% respectively)
- **C2DEs** compared with ABC1s (55%, vs. 44%)
- **tabloid readers and broadcast news viewers** compared with broadsheet readers (40% and 37% respectively vs. 32%)
- **those who know someone living with HIV** compared with those who don't (54% to 26%).

ⁱ Q.9 Where, if anywhere, have you heard or seen things about HIV in the last 6 months? Please select all that apply. Base: London respondents (n=1,013); Men (n=495); Women (n=518); 18-34s (n=354); 35-64s (n=502); 65+ (n=157); ABC1s (n=718); C2DEs (n=295); Broadsheet readers (n=426); Tabloid readers (n=496); Broadcast news viewers (n=524); Respondents who know someone living with HIV (n=181); Respondents who don't know someone living with HIV (n=797).

TV programmes / films are the most common ways of hearing or seeing things about HIV in Londonⁱ

Where, if anywhere, have you heard or seen things about HIV in the last six months?



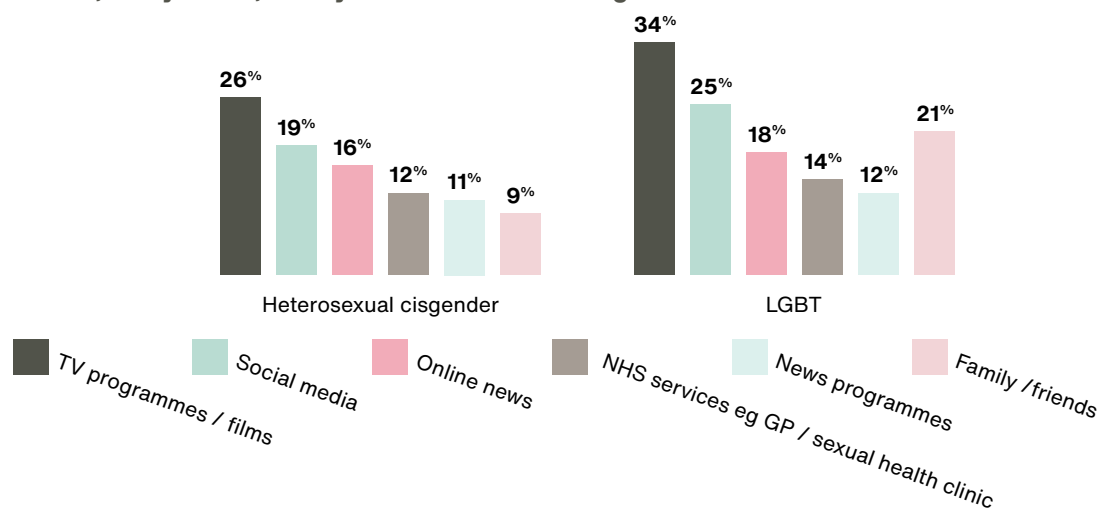
The following groups are more likely to say that they have seen anything about HIV from at least one of the listed sources in the last six months:

- **men** compared with women (55% vs. 45%)
- **those aged 18-35 and 35-64** compared with those aged 65+ (58% and 50% respectively, vs. 30%)
- **ABC1s** compared with C2DEs (53%, vs. 43%)
- **LGBT people** compared with heterosexual cisgender people (63% vs. 50%)
- **those with high social media usage** compared with those with medium and low (59% vs. 34% and 32% respectively)
- **broadsheet readers** compared with tabloid readers and broadcast news viewers (66% vs. 58% and 61% respectively)
- **those who know someone living with HIV** compared with those who don't (74% to 45%).

ⁱ Q.9 Where, if anywhere, have you heard or seen things about HIV in the last 6 months? Please select all that apply. Base: London respondents (n=1,013); Men (n=495); Women (n=518); 18-34s (n=354); 35-64s (n=502); 65+ (n=157); ABC1s (n=718); C2DEs (n=295); Heterosexual cisgender respondents (n=864); LGBT respondents (n=90); High social media usage respondents (n=662); Medium social media usage respondents (n=262); Low social media usage respondents (n=56); Broadsheet readers (n=426); Tabloid readers (n=496); Broadcast news viewers (n=524); Respondents who know someone living with HIV (n=181); Respondents who don't know someone living with HIV (n=797).

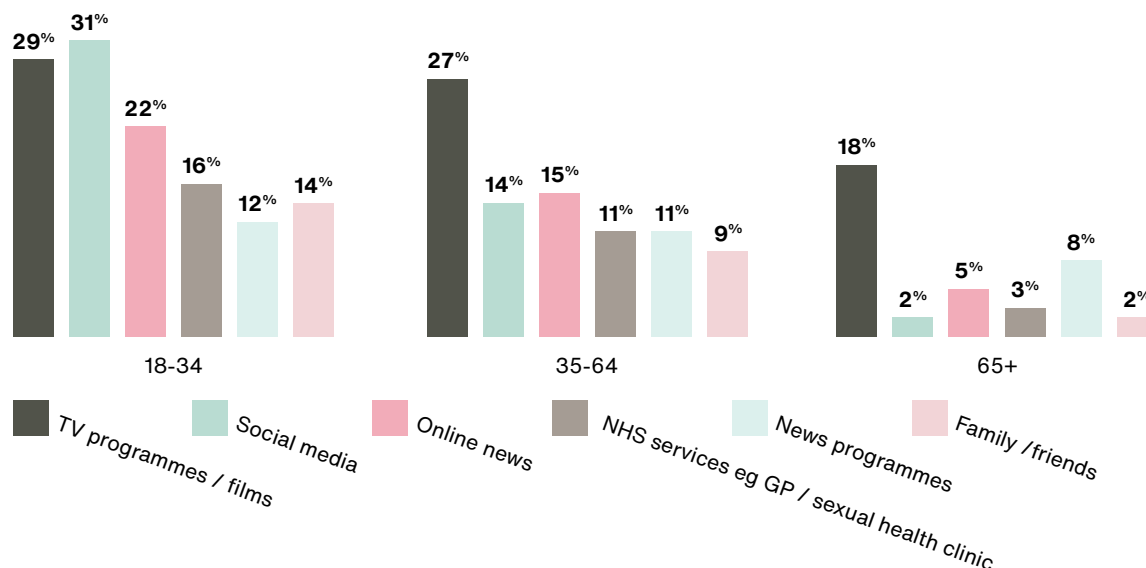
Over a third of LGBT respondents in London have seen something about HIV through TV / filmⁱ

Where, if anywhere, have you heard or seen things about HIV in the last six months?



Social media is the largest source of information about HIV for 18-34-year-olds in London, whereas TV and films are for older peopleⁱⁱ

Where, if anywhere, have you heard or seen things about HIV in the last six months?

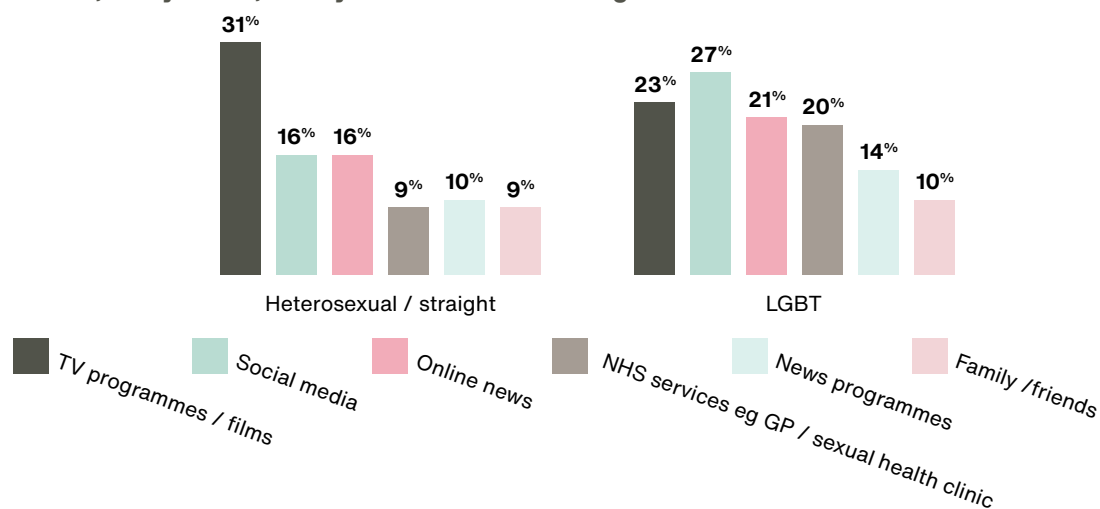


i Q.9 Where, if anywhere, have you heard or seen things about HIV in the last 6 months? Please select all that apply. Base: London respondents (n=1,013); Heterosexual cisgender respondents (n=864); LGBT respondents (n=90).

ii Q.9 Where, if anywhere, have you heard or seen things about HIV in the last 6 months? Please select all that apply. Base: London respondents (n=1,013); 18-34s (n=354); 35-64s (n=502); 65+ (n=157).

Around a quarter of Black respondents in London have seen something about HIV through social media compared to around 1 in 6 White peopleⁱ

Where, if anywhere, have you heard or seen things about HIV in the last six months?



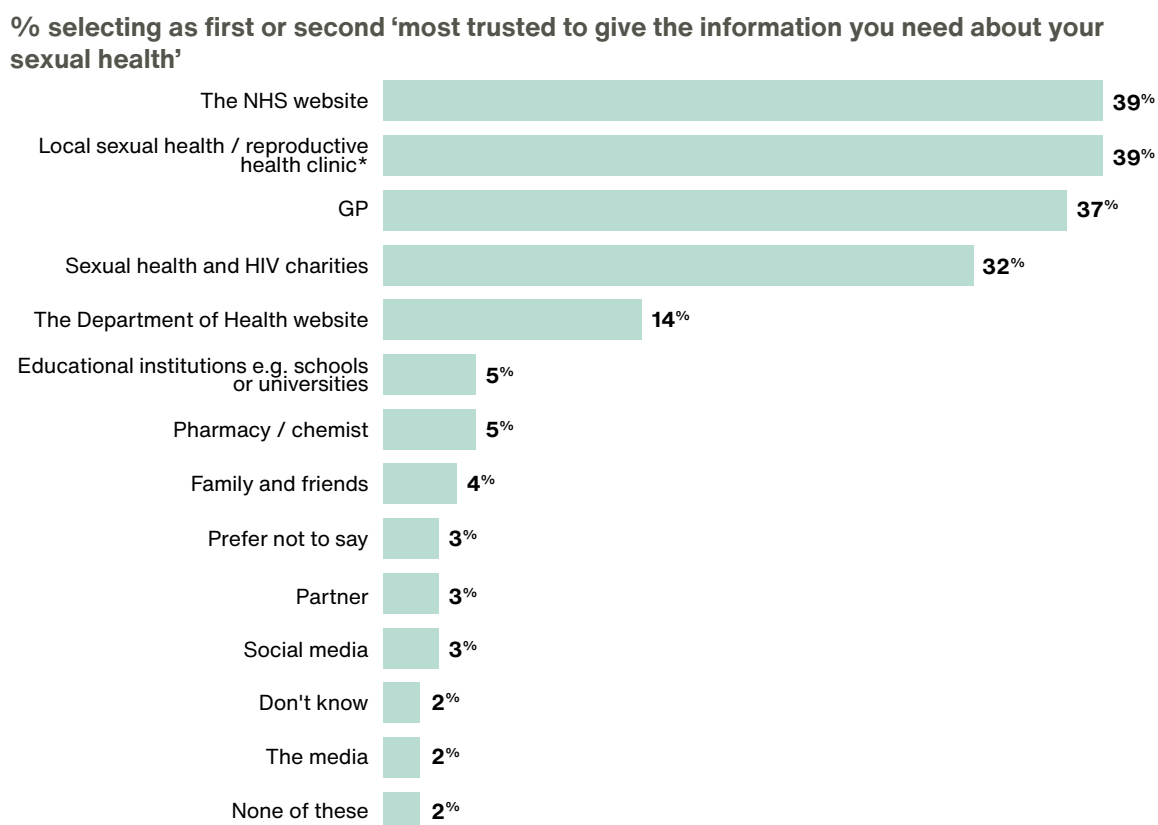
“

My knowledge of HIV has been in the things I have watched [...] Like Philadelphia, a film with Tom Hanks. He gets dismissed from his job because he has it. You see the damage of the stigma.

*Black participant,
18-34, London*

ⁱ Q.9 Where, if anywhere, have you heard or seen things about HIV in the last 6 months? Please select all that apply. Base: London respondents (n=1,013); White respondents (n=656); Black respondents (n=147).

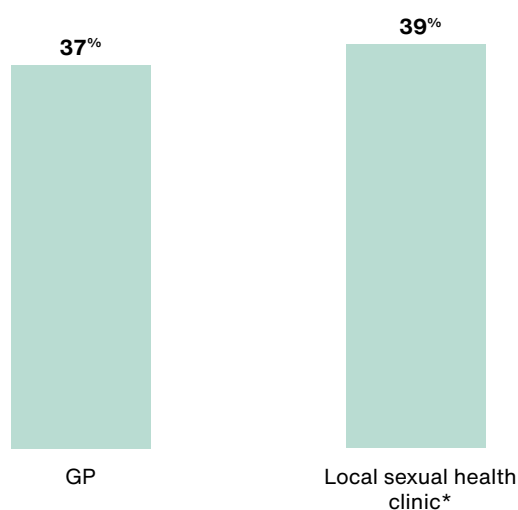
The NHS website and local sexual health services are most trusted for information on sexual health by people in London, followed by GPs and sexual health charitiesⁱ



* option tested in survey was 'Local sexual health clinic / family planning clinic / contraceptive clinic / reproductive health clinic'.
i Q10. Which if any of the following do you trust the most to give you the information you need about your sexual health? Please select up to 2, choosing the most trusted first, followed by the second most trusted. Base: London respondents (n=1,013).

Older Londoners are more likely than Londoners in general to trust their GPs most for information on sexual healthⁱ

% selecting as first or second 'most trusted to give the information you need about your sexual health'



The following groups are *more likely* to select GPs as one of their top two trusted sources:

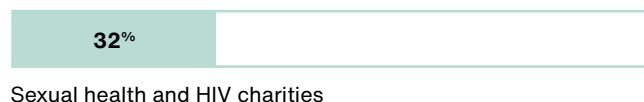
- **those aged 65+** compared with younger groups (50% vs. 36% of 35-64s and 31% of 18-34s)
- **heterosexual cisgender people** compared with LGBT people (39% vs. 21%)
- **those who do not personally know someone with HIV** compared with those who do (41% vs. 20%).

The following groups are *more likely* to select *local sexual health clinics** as one of their top two trusted sources:

- **women** compared with men (43% vs. 35%)
- **older people** compared with younger people (51% of 65+, vs. 40% of those aged 35-64 and 33% aged 18-34)
- **non-religious people** compared with religious people (53% vs. 34%).

LGBT Londoners are more likely to trust sexual health and HIV charities for this informationⁱⁱ

% selecting as first or second 'most trusted to give the information you need about your sexual health'



More likely to select *sexual health and HIV charities* as one of their top two trusted sources are:

- **non-religious people** compared with religious people (38% vs. 30%)
- **LGBT people** compared with heterosexual cisgender people (49% vs. 31%)
- **those who personally know someone with HIV** compared to those who don't (39% vs. 31%).

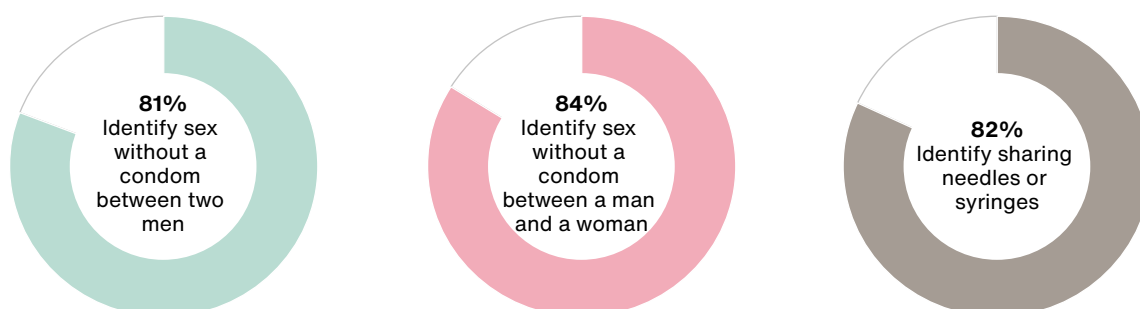
* option tested in survey was 'Local sexual health clinic / family planning clinic / contraceptive clinic / reproductive health clinic'.

i Q.10 Which if any of the following do you trust the most to give you the information you need about your sexual health? Please select up to 2, choosing the most trusted first, followed by the second most trusted. Base: London respondents (n=1,013); Men (n=495); Women (n=518); 18-34s (n=354); 35-64s (n=502); 65+ (n=157); Non-religious respondents (n=307); Religious respondents (n=661); Heterosexual cisgender respondents (n=864); LGBT respondents (n=90); Respondents who know someone living with HIV (n=181); Respondents who don't know someone living with HIV (n=797).

ii Q.10 Which if any of the following do you trust the most to give you the information you need about your sexual health? Please select up to 2, choosing the most trusted first, followed by the second most trusted. Base: London respondents (n=1,013); Non-religious respondents (n=307); Religious respondents (n=661); Heterosexual cisgender respondents (n=864); LGBT respondents (n=90); Respondents who know someone living with HIV (n=181); Respondents who don't know someone living with HIV (n=797).

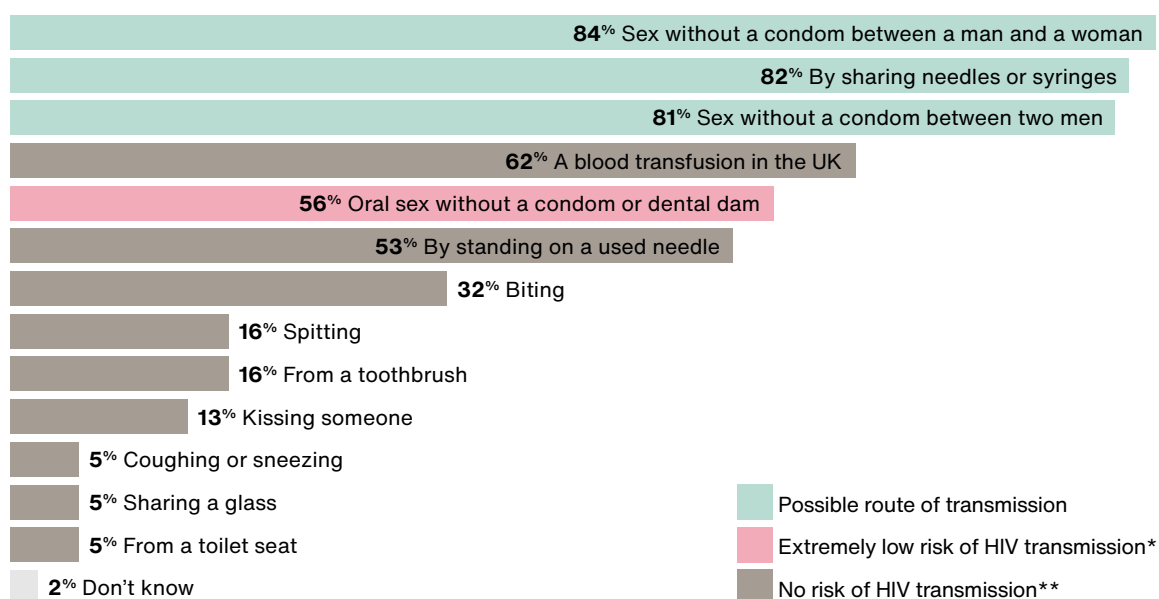
8.2.2 Modes of transmission

High majorities of Londoners can correctly identify the three main ways HIV can be transmittedⁱ



Whilst awareness of high-risk modes of transmission is high, many believe HIV can be passed on through no risk modesⁱⁱ

In which of the following ways, if any, do you think HIV can be passed from person to person?
Showing % who selected each option



ⁱ Q.2 In which of the following ways, if any, do you think HIV can be passed from person to person? Base: London respondents (n=1,013).

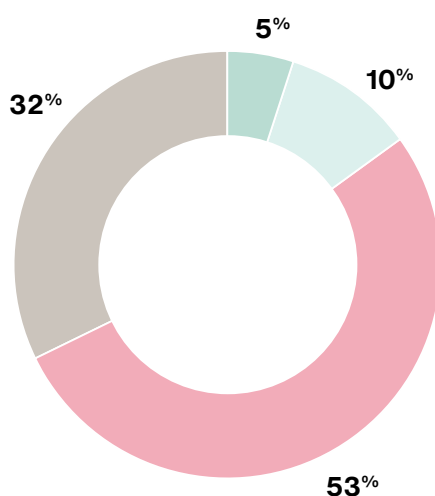
ⁱⁱ Q.2 In which of the following ways, if any, do you think HIV can be passed from person to person? Base: London respondents (n=1,013).

* Oral sex is considered extremely low risk for HIV transmission compared with anal or vaginal sex without a condom. Theoretical risk depends on factors such as whether oral sex is being given or received (receiving oral sex is not generally considered a risk) and presence of cuts or ulcers in the mouth which could provide a route for the virus into the blood stream.

** Some modes of transmission are sometimes described as having 'negligible' risk (e.g. biting) and these are included in this category. Risk may be considered negligible as, while there is no definitive proof it could never happen, there is not a known, quantifiable and scientifically verified risk. In plain English, there's no risk of HIV from biting.

A majority of Londoners can identify the three main modes of transmission, but also mistakenly identify at least one way which HIV cannot be acquiredⁱ

Level of knowledge of HIV transmission



Lower than average knowledge of HIV transmission

- Around a third (32%) of Londoners have **lower than average knowledge of HIV transmission** – failing to identify all of the main modes of transmission. **This is higher than the general UK population (26%).**
- This group may be more at risk as they do not know all the actions that will put them at risk of acquiring HIV.

Middling knowledge of HIV transmission

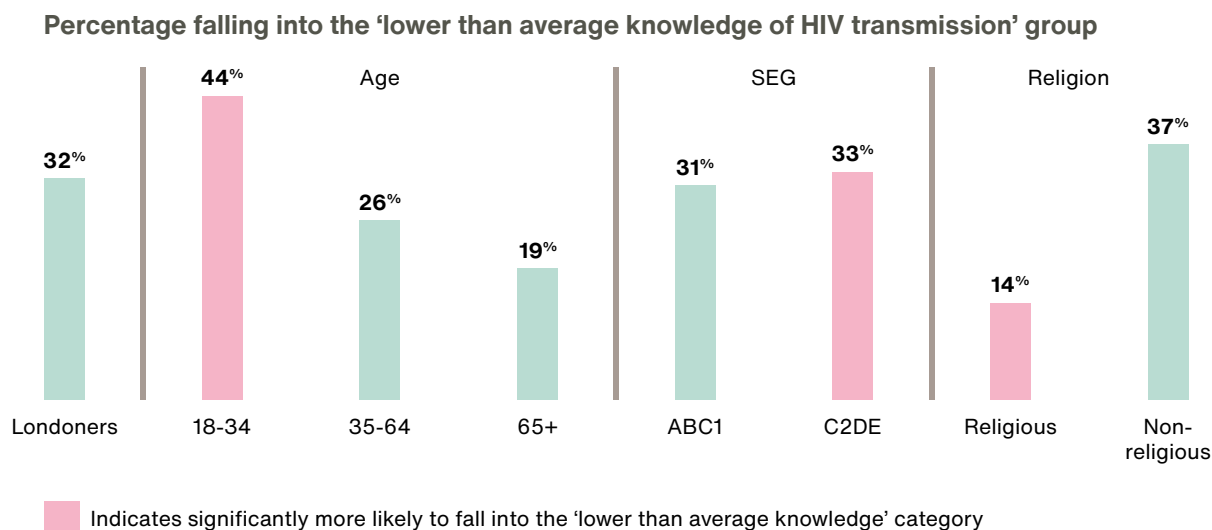
- A majority (53%) of Londoners have **middling knowledge of HIV transmission** – identifying all the main modes of transmission and at least one way in which HIV cannot be acquired.
- Whilst this group does know what actions may put them at risk of acquiring HIV, they also believe they can acquire HIV in ways that carry no risk, such as spitting or biting, which may affect their behaviour in relation to those living with HIV.

High / higher than average knowledge of HIV transmission

- 5% of Londoners have **high knowledge of HIV transmission** – only identifying the main modes of transmission (high knowledge) and no incorrect answers. This is lower than the general UK population (8%).
- A further 1 in 10 have **higher than average knowledge** of HIV transmission – only identifying the main modes of transmission and oral sex without a condom or dental dam and no incorrect answers.
- These groups have knowledge of the actions that will put them at risk of acquiring HIV, as well as not believing they can acquire HIV from things with no risk of transmission (e.g. spitting or biting).
- For analysis purposes we have combined these two groups into a high / higher than average knowledge of transmission group, to understand the impact that knowledge of HIV transmission has on attitudes and behaviours.

ⁱ Q.2 In which of the following ways, if any, do you think HIV can be passed from person to person? Base: London respondents (n=1,013).

There are significant differences in knowledge by demographic groupⁱ

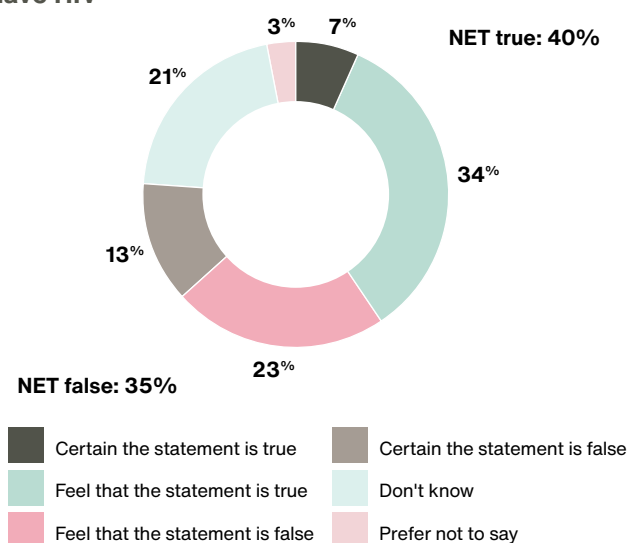


ⁱ Q.2 In which of the following ways, if any, do you think HIV can be passed from person to person? Base: London respondents (n=1,013); 18-34 respondents (n=354); 35-64 respondents (n=502); 65+ respondents (n=157); ABC1 respondents (n=718); C2DE respondents (n=295); White respondents (n=656); Black respondents (n=147); South Asian respondents (n=78); Religious respondents (n=661); Non-religious respondents (n=307).



Two-fifths of Londoners believe a child born to a woman living with HIV will also have HIVⁱ

A baby born to a mother living with HIV will also have HIV



[You should give] that little bit of advice [to a friend or a family member in a relationship with someone living with HIV], asking are you sure what you are doing is right. That baby could most likely contract HIV.

South Asian participant, 34-64, London

Though globally vertical transmission remains a concern, in the UK it has been almost eliminated with risk at 0 - 0.5%. Hundreds of HIV negative babies are born in the UK every year to parents living with HIV and HIV need not be a barrier to having children.

HIV treatment taken during pregnancy prevents transmission of HIV to the baby. HIV tests are given in pregnancy on an opt-out basis, meaning a small proportion of mothers find out they are living with HIV early in pregnancy, but can start treatment quickly to protect them and their baby. Formula feeding is also advised in the UK to reduce risk of transmission via breastfeeding, though some do breastfeed with treatment, support and monitoring.

There is a possibility that some participants have misinterpreted 'will' for 'could' (we did not say 'will always') and have therefore answered that this statement is true despite knowing prevention methods are available and that this is rare in the UK.

Comparatively, religious people, and tabloid readers are more likely groups in London to believe that a child born to a woman living with HIV will also have HIV:

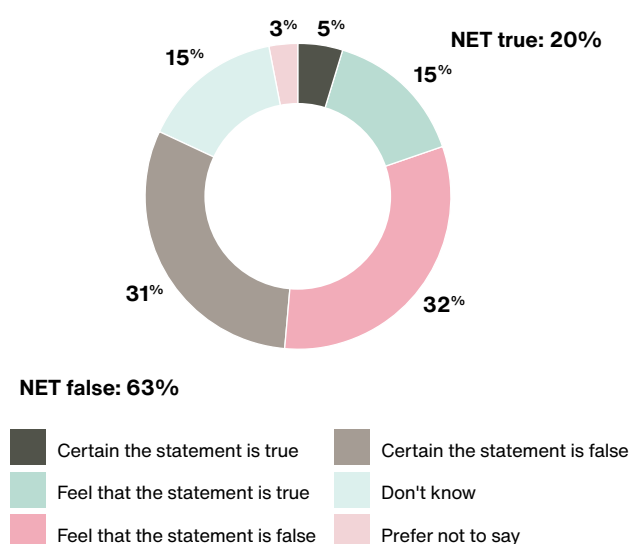
- **Religious people** compared to non-religious people (43% true vs. 36% true)
- **Tabloid readers** compared to broadcast news viewers (45% true vs. 40% true)

ⁱ may not be true. I would like you to indicate whether you are certain the statement is true, you feel that the statement is true, you feel that the statement is false or you are certain that the statement is false. Base: London respondents (n=1,013); Non-religious respondents (n=307); Religious respondents (n=661); Tabloid readers (n=496); Broadcast news viewers (n=524).

8.2.3 Treatment

1 in 5 Londoners believe that it is true that people with HIV will always go on to develop AIDSⁱ

People with HIV will always go on to develop AIDS



20% believe this is true and 15% don't know (12% and 17% respectively UK-wide), indicating there is still more to be done in London to move knowledge of HIV and AIDS to a point where it is reflective of the realities of HIV today where an AIDS diagnosis is not inevitable and is usually prevented.

There are a number of groups who are *more likely* to believe that those living with HIV will always go on to develop AIDS:

- **men** compared with women (25% true vs. 14% true)
- **those aged 18–34** compared with those aged 35–64 and those 65+ (28% true vs. 16% and 9% respectively)
- **religious people** compared with non-religious people (24% true vs. 9%)

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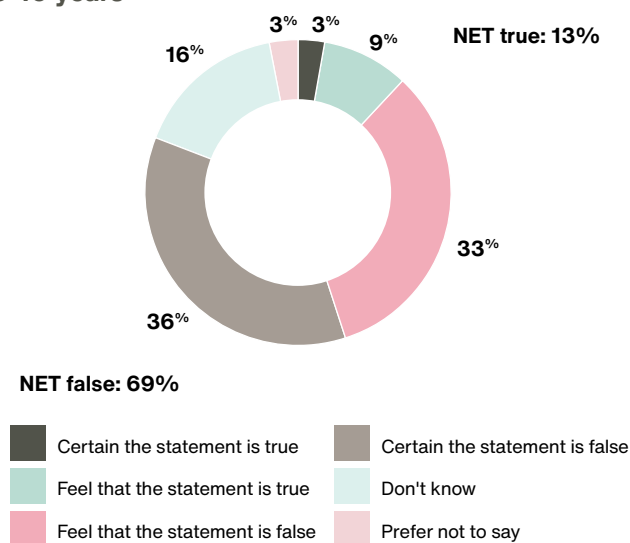
I didn't know HIV and AIDS are different.

Exploratory focus group, 18–40, South East (London)

ⁱ Q.3 Below are a number of statements about HIV which may or may not be true. I would like you to indicate whether you are certain the statement is true, you feel that the statement is true, you feel that the statement is false or you are certain that the statement is false. Base: London respondents (n=1,013); Men (n=495); Women (n=518); 18–34s (n=354); 35–64s (n=502); 65+ (n=157); Non-religious respondents (n=307); Religious respondents (n=661).

7 in 10 believe that it is false that most people living with HIV in the UK will die within 5-10 yearsⁱ

Most people who have HIV in the UK will die within 5-10 years



However, over 1 in 10 Londoners (13% compared to 9% UK-wide) believe this is true and a further 1 in 6 do not know. Even those who answered false are not necessarily aware of the impact of HIV treatment on overall life expectancy (we did not ask a question that assessed this in the quantitative survey). Again, we have some way to go for people to understand that HIV in the UK today does not have to be life limiting in the way it was.

There are a number of groups in London who are *more likely* to believe that those living with HIV will die within 5-10 years:

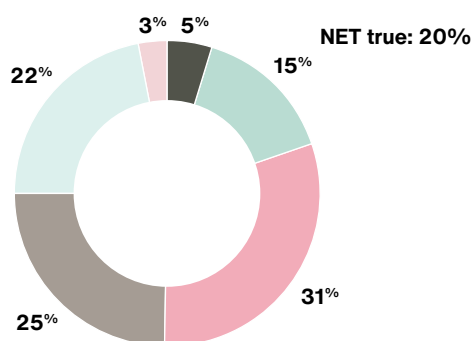
- **those aged 18–34** compared with those 35-64 (17% true vs. 10%)
- **White people and South Asian people*** compared with Black people (11% true and 26% respectively, vs. 5%)
- **religious people** compared with non-religious people (15% true vs. 6%)
- **heterosexual cisgender people** compared with LGBT people (14% true vs. 6%)
- **those who know someone living with HIV** compared with those who don't (21% vs. 11%).

ⁱ Q.3 Below are a number of statements about HIV which may or may not be true. I would like you to indicate whether you are certain the statement is true, you feel that the statement is true, you feel that the statement is false or you are certain that the statement is false. Base: London respondents (n=1,013); 18-34s (n=354); 35-64s (n=502); White respondents (n=656); Black respondents (n=147); South Asian respondents (n=78); Non-religious respondents (n=307); Religious respondents (n=661); Heterosexual cisgender respondents (n=864); LGBT respondents (n=90); Respondents who know someone living with HIV (n=181); Respondents who don't know someone living with HIV (n=797).

* Caution: small sample size (n<100).

Public awareness of U=U is higher than the rest of the UK but still low in Londonⁱ

There is zero risk of someone who is taking effective HIV treatment passing on HIV through sex



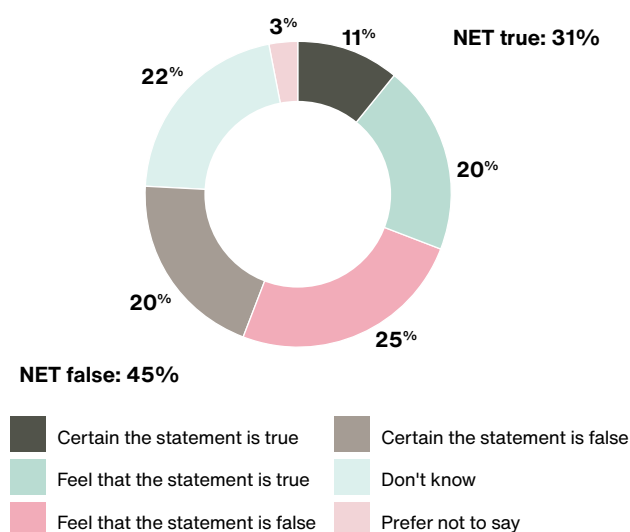
A majority believe that it is false that effective treatment prevents transmission. Awareness of U=U is *highest* in London amongst:

- **those aged 18–34** compared with those aged 35–64 and 65+ (26% true vs. 17% and 14% respectively)
- **gay and bisexual men** compared to heterosexual cisgender people (52% true vs. 19%)
- **those who know someone living with HIV** compared to those who don't (34% true vs. 17%).

ⁱ Q.3 Below are a number of statements about HIV which may or may not be true. I would like you to indicate whether you are certain the statement is true, you feel that the statement is true, you feel that the statement is false or you are certain that the statement is false. Base: London respondents (n=1,013); 18–34s (n=354); 35–64s (n=502); 65+ (n=157); Heterosexual cisgender respondents (n=864); LGBT respondents (n=90); Respondents who know someone living with HIV (n=181); Respondents who don't know someone living with HIV (n=797).

Awareness of PrEP is higher in London than the rest of the UK, but still lowⁱ

There is medicine people can take that will stop them acquiring HIV



Nearly a third of Londoners believe there is a medicine that will stop someone acquiring HIV. Awareness of PrEP is *highest* amongst:

- **those aged 18–34 and 35–64** compared with 65+ (32% true and 33% true respectively, vs. 22% true)
- **ABC1 people** compared with C2DE people (34% true vs. 25% true)
- **non-religious people** compared with religious people (37% true vs. 29% true)
- **gay and bisexual men** compared with heterosexual cisgender people (68% true vs. 29% true)
- **those who know someone living with HIV** compared with those who don't (44% true vs. 29% true).

“

I have heard of this new drug called PrEP. It's a daily pill that [you] take for the infection. I have heard about it from friends.

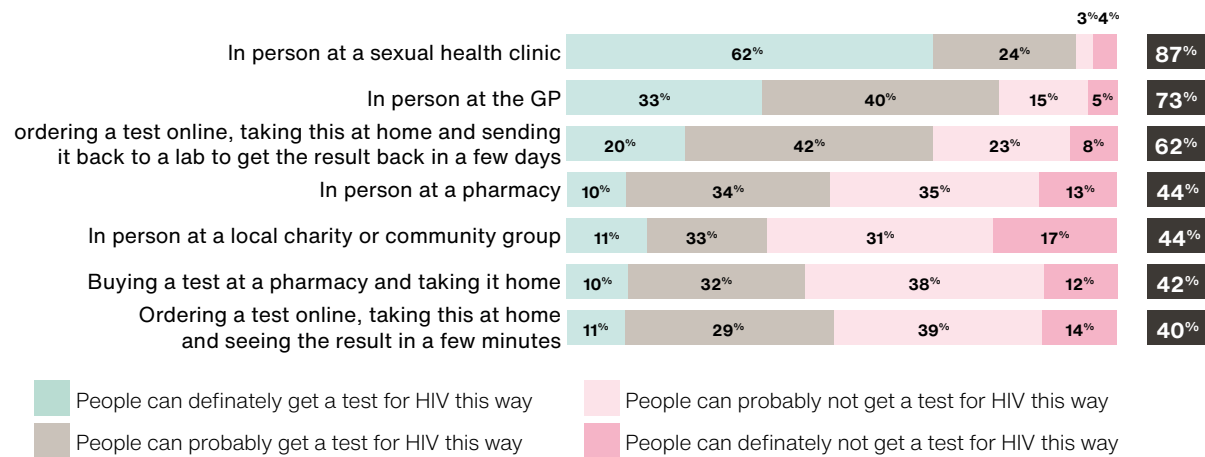
Exploratory focus group, 18–40, South East (London)

ⁱ Q.3 Below are a number of statements about HIV which may or may not be true. I would like you to indicate whether you are certain the statement is true, you feel that the statement is true, you feel that the statement is false or you are certain that the statement is false. Base: London respondents (n=1,013); 18–34s (n=354); 35–64s (n=502); 65+ (n=157); ABC1s (n=718); C2DEs (n=295); Non-religious respondents (n=307); Religious respondents (n=661); Heterosexual cisgender respondents (n=864); LGBT respondents (n=90); Respondents who know someone living with HIV (n=181); Respondents who don't know someone living with HIV (n=797).

8.2.4 Testing

Majorities of Londoners think they can get an HIV test at a sexual health clinic, at the GP, or by ordering one onlineⁱ

Below are some ways that people in the UK may or may not be able to access a test for HIV right now. Showing % who say how certain they feel that it is possible to get an HIV test for each option



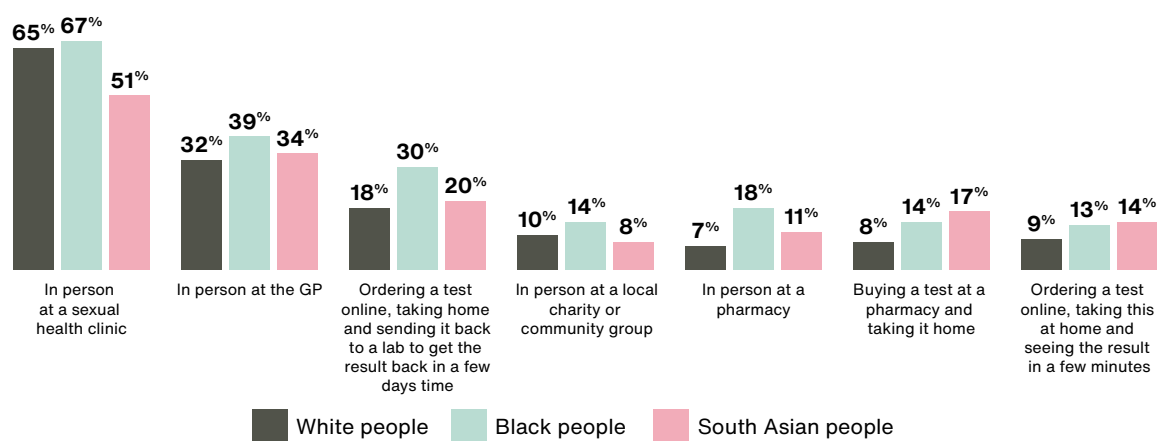
NET: believe they can get a test this way

These results are broadly consistent with the rest of the UK.

ⁱ Q.4 Below are some ways that people in the UK may or may not be able to access a test for HIV right now. For each please rate how certain you are that it is possible to get a test for HIV in this way. – Summary. Base: London respondents (n=1,013).

Black people are more likely to think they can definitely get an HIV test through all the options than other ethnicitiesⁱ

Below are some ways that people in the UK may or may not be able to access a test for HIV right now. Showing % who say how certain they feel they can definitely get tested in this way for each option



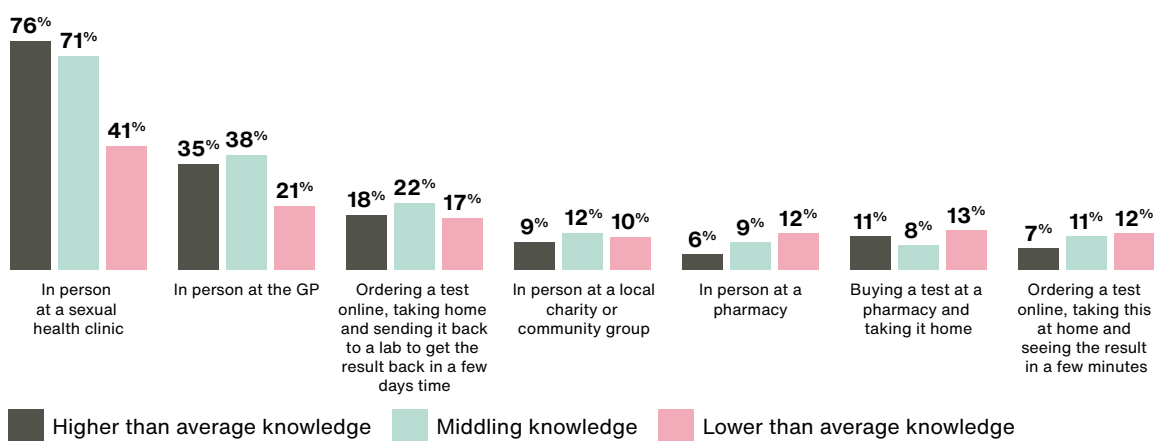
Racial disparities are narrower in London than UK-wide. Black people in the UK as a whole are substantially more certain than White people. Black Londoners are less certain than Black people in the rest of the UK, and White Londoners are more certain than White people in the rest of the UK (see section 3.4).

ⁱ Q.4 Below are some ways that people in the UK may or may not be able to access a test for HIV right now. For each please rate how certain you are that it is possible to get a test for HIV in this way. Base: White respondents (n=656); Black respondents (n=147); South Asian respondents (n=78).

* Caution: small sample size (n<100).

Those with lower-than-average knowledge of transmission are less likely to think they can definitely get tested at a clinic or GPⁱ

Below are some ways that people in the UK may or may not be able to access a test for HIV right now. Showing % who say how certain they feel they can definitely get tested in this way for each option



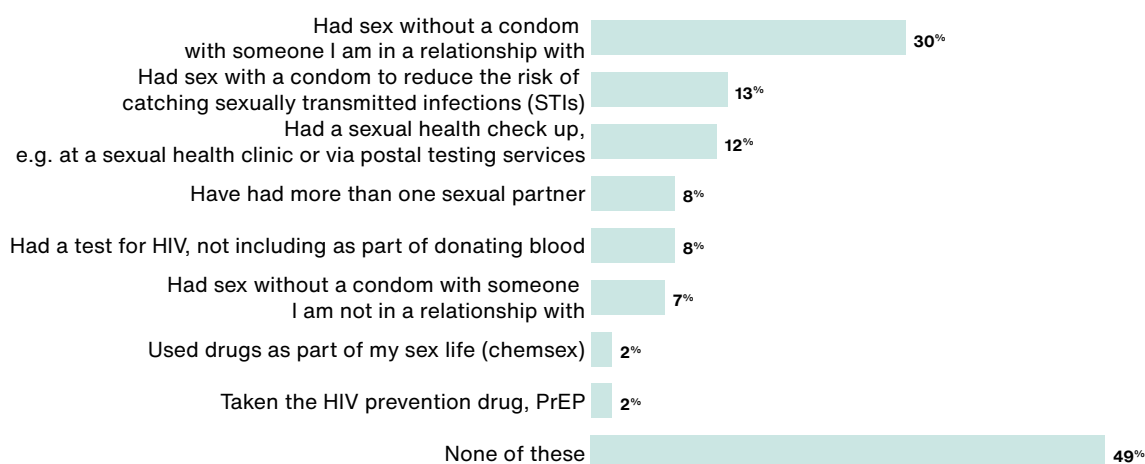
Regardless of knowledge of transmission, Londoners are marginally more likely than people in the UK as a whole to believe that they are able to access a test through all of these options (see section 3.4).

ⁱ Q.4 Below are some ways that people in the UK may or may not be able to access a test for HIV right now. For each please rate how certain you are that it is possible to get a test for HIV in this way. – Summary. Base: Higher than average transmission knowledge London respondents (n=161), Average transmission knowledge London respondents (n=546), Lower than average transmission knowledge London respondents (n=306).

8.3 Related behaviours

Condomless sex is common amongst Londoners, albeit typically within relationshipsⁱ

Which of the following, if any, have you done in the last 18 months?



Condomless sex does not necessarily mean sex is 'unprotected'. Some who report engaging in condomless sex may also be taking PrEP (although only 2% of Londoners report to have taken PrEP) or have a sexual partner who is taking effective treatment for HIV.

Further, it should be noted that we did not define 'relationship' as a monogamous relationship where both parties know their HIV status.

ⁱ Q.11 Which of the following, if any, have you done in the last 18 months? Base: London respondents (n=1,013).

13% of Londoners report engaging in sexual behaviours with a higher risk of exposure to HIV in the last 18 monthsⁱ

Which of the following, if any, have you done in the last 18 months?



Londoners are more likely to have engaged in higher risk sexual behaviour, had condomless sex, and had an HIV test than people in the UK as a whole (8%, 30%, and 7% respectively)

Those most likely to say they have engaged in potentially higher risk sexual behavior include:

- **men (18%)** compared with women (8%)
- **gay and bisexual men (42%)** compared with heterosexual cisgender people (11%)
- **those aged 18-34 (20%)** compared to those aged 35-64 (10%) and 65+ (3%)
- **those who have high social media usage (17%)** compared with medium (5%) and low* (3%) usage
- **broadsheet readers (20%)** compared with tabloid readers (16%) and broadcast news viewers (14%)
- **those who know someone living with HIV (23%)** compared with those who don't (10%).

Reflecting this; **Ethnic minorities, young Londoners, and Londoners who know someone living with HIV**, are the demographics most likely to be concerned about getting an STI.

The following *disagree* with “*I am not personally worried that I might get a Sexually Transmitted Infection (STI)*”:

- **Black people (32%)** compared with White people (14%)
- **Those aged 18-34 (21%)** compared with 65+ (12%)
- **those who know someone living with HIV (26%)** compared with those who don't (17%)

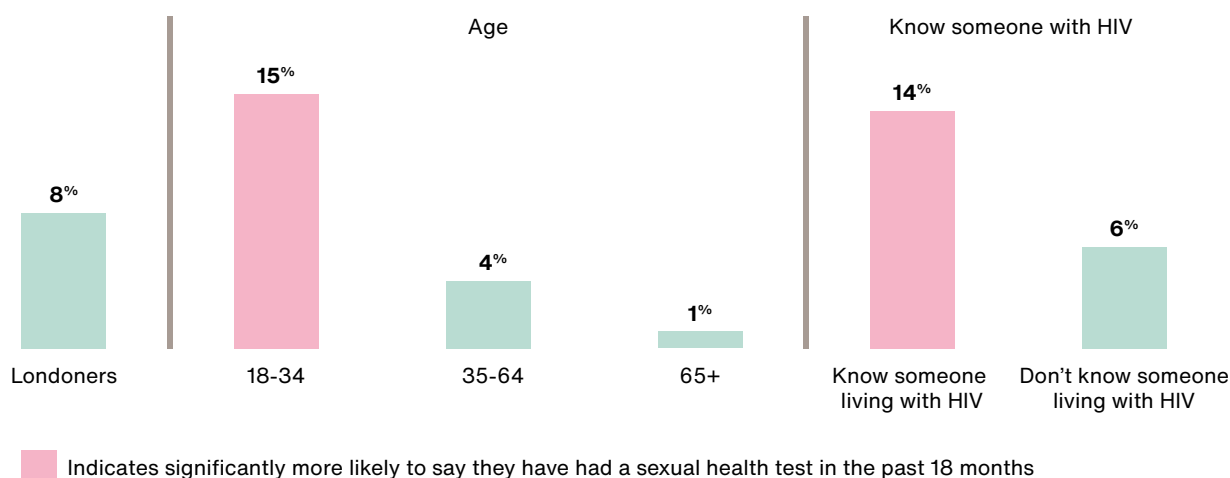
ⁱ Q.11 Which of the following, if any, have you done in the last 18 months? Base: London respondents (n=1,013); Men (n=495); Women (n=518); 18-34s (n=354); 35-64s (n=502); 65+ (n=157); Heterosexual cisgender respondents (n=864); Gay/bisexual men (n=55); High social media usage respondents (n=662); Medium social media usage respondents (n=262); Low social media usage respondents* (n=56); Broadsheet readers (n=426); Tabloid readers (n=496); Broadcast news viewers (n=524); Respondents who know someone living with HIV (n=181); Respondents who don't know someone living with HIV (n=797).

Q.12 To what extent do you agree or disagree with each of the following statements about life in the UK today? Base: London respondents (n=1,013); 18-34s (n=354); 65+ (n=157); White respondents (n=656); Black respondents (n=147); Respondents who know someone living with HIV (n=181); Respondents who don't know someone living with HIV (n=797).

* Caution: small sample size (n<100).

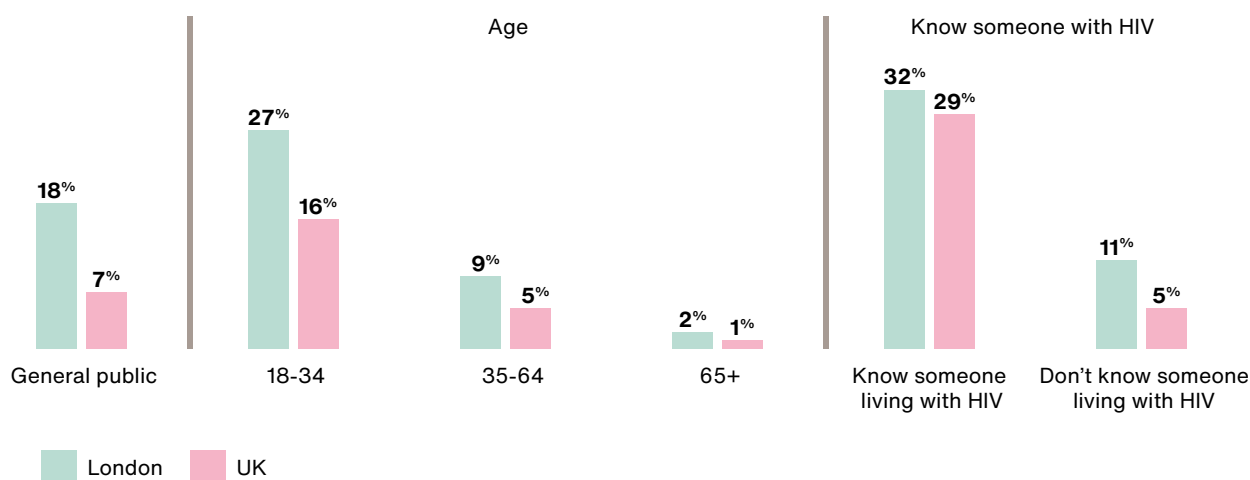
London groups who are more likely to report potentially higher risk behaviours are also more likely to have been tested recentlyⁱ

Percentage who report getting an HIV health test in the past 18 months



Younger people in London are even more likely than younger people in the UK overall to have had an HIV test in the past 18 monthsⁱⁱ

Percentage who report getting an HIV health test in the past 18 months



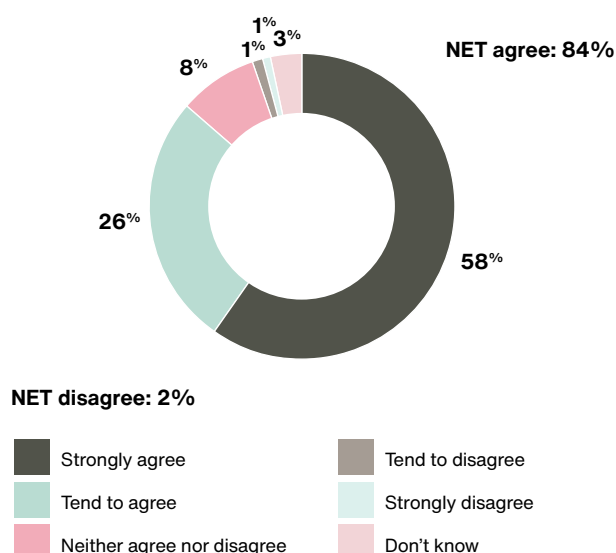
- i Q.11 Which of the following, if any, have you done in the last 18 months? Base: London respondents (n=1,013); 18-34s (n=354); 35-64s (n=502); 65+ (n=157); Respondents who know someone living with HIV (n=181); Respondents who don't know someone living with HIV (n=797).
- ii Q.11 Which of the following, if any, have you done in the last 18 months? Base: London respondents (n=1,013); 18-34s (n=354); 35-64s (n=502); 65+ (n=157); Respondents who know someone living with HIV (n=181); Respondents who don't know someone living with HIV (n=797). Base: All respondents (n=3,002); 18-34s (n=864); 35-64s (n=1,497); 65+ (n=641); Respondents who know someone living with HIV (n=337); Respondents who don't know someone living with HIV (n=2,605).

8.4 Attitudes to HIV

8.4.1 people living with HIV

Londoners widely agree those with HIV deserve the same support and respect given to those with other health conditionsⁱ

People living with HIV deserve the same level of support and respect as people with any other long-term health condition



In general responses in London are broadly in line with the rest of the UK. Significantly more likely to *agree* with this statement are:

- **women** compared with men (87% vs. 79%)
- **Those aged 65+ and 35-64** compared with those aged 18-34 (92% and 87% respectively vs. 75%)
- **White and Black people**, compared with South Asian* people (86% and 89% respectively, vs. 62%)
- **non-religious people** compared with religious people (91% vs. 82%)
- **those who recognise barriers against LGBT people**, compared with those who do not (91% vs. 80%)
- **those with higher and average knowledge of HIV transmission** compared with those with lower-than-average knowledge (94% and 91% respectively, vs. 66%).

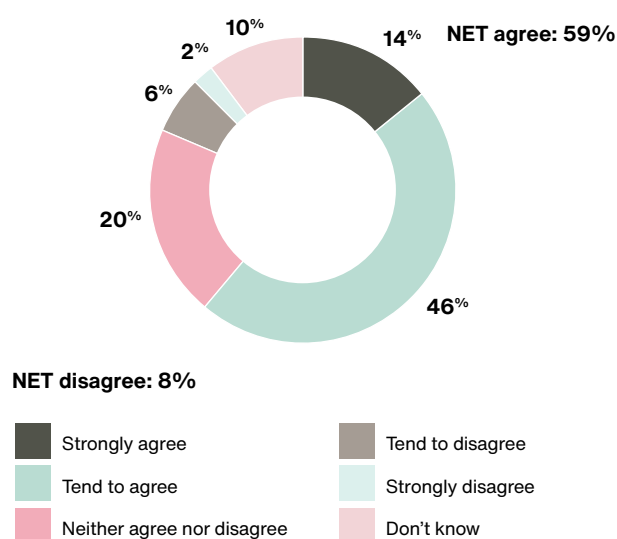
ⁱ Q.6 Following is a number of statements about HIV. Could you please indicate how strongly you agree or disagree with each of them? Base: London respondents (n=1,013); Men (n=495); Women (n=518); 18-34s (n=354); 35-64s (n=502); 65+ (n=157); White respondents (n=656); Black respondents (n=147); South Asian respondents (n=78); Non-religious respondents (n=307); Religious respondents (n=661); Higher than average HIV transmission knowledge respondents (n=161); Average HIV transmission knowledge respondents (n=546); Lower than average HIV transmission knowledge respondents (n=306); Respondents who recognise barriers for LGBT people (n=742); Respondents who don't recognise barriers for LGBT people (n=142).

* Caution: small sample size (n<100).



Londoners who personally know someone with HIV are more likely to agree that society is more positive than ever towards those with HIVⁱ

'Society is more positive toward people living with HIV than it has ever been'



In general responses in London are broadly in line with the rest of the UK. Significantly more likely to *agree* with the statement are:

- **those aged 65+ and 35-64** compared with those aged 18-34 (70% and 61% respectively vs. 53%)
- **White people**, compared with ethnic minority participants (63% vs. 56%)
- **those with higher and middling knowledge of HIV transmission** compared with those with lower-than-average knowledge (66% and 63% respectively, vs. 49%)
- **those with high awareness of PrEP** compared with those with medium and low awareness (72% vs. 64% and 59% respectively)
- **those who personally know someone with HIV** compared with those who do not (70% vs. 59%).

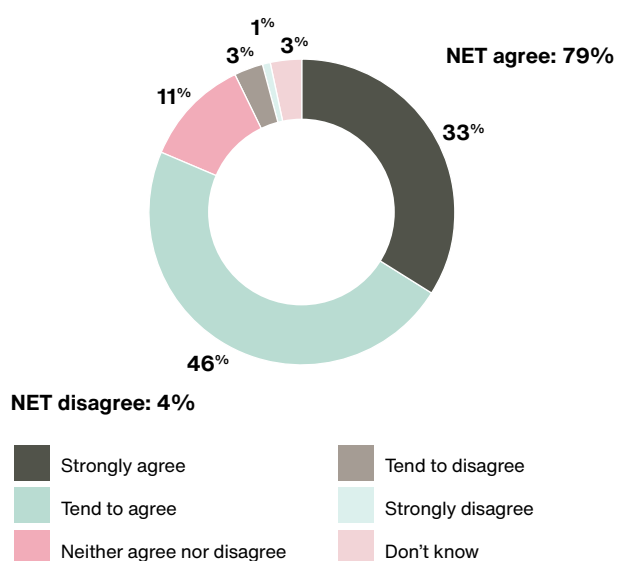
Significantly more likely to *disagree* with the statement are:

- **men** compared with women (10% vs. 6%).

ⁱ Q.6 Following is a number of statements about HIV. Could you please indicate how strongly you agree or disagree with each of them? Base: London respondents (n=1,013); Men (n=495); Women (n=518); 18-34s (n=354); 35-64s (n=502); 65+ (n=157); White respondents (n=656); Ethnic minority respondents (n=332); Higher than average HIV transmission knowledge respondents (n=161); Average HIV transmission knowledge respondents (n=546); Lower than average HIV transmission knowledge respondents (n=306); High PrEP knowledge respondents (n=116); Medium PrEP knowledge respondents (n=409); Low PrEP knowledge respondents (n=273); Respondents who know someone living with HIV (n=181); Respondents who don't know someone living with HIV (n=797).

4 in 5 Londoners feel that people with HIV still frequently face negative judgement from othersⁱ

‘People living with HIV often face negative judgement from others in society’



Londoners are less likely to agree with this statement than the public UK-wide (79% vs. 84%). Significantly more likely to *agree* with this statement in London are:

- **women** compared with men (82% vs. 75%)
- **Those aged 35-65** compared to those aged 18-34 (82% vs. 74%)
- **non-religious people** compared with religious people (87% vs. 77%)
- **LGBT people** compared with heterosexual cisgender people (96% vs. 79%)
- **those with higher and middling knowledge of HIV transmission** compared with those with lower-than-average knowledge (84% and 89% respectively, vs. 60%)
- **those who recognise barriers against LGBT people**, compared with those who do not (85% vs. 75%).

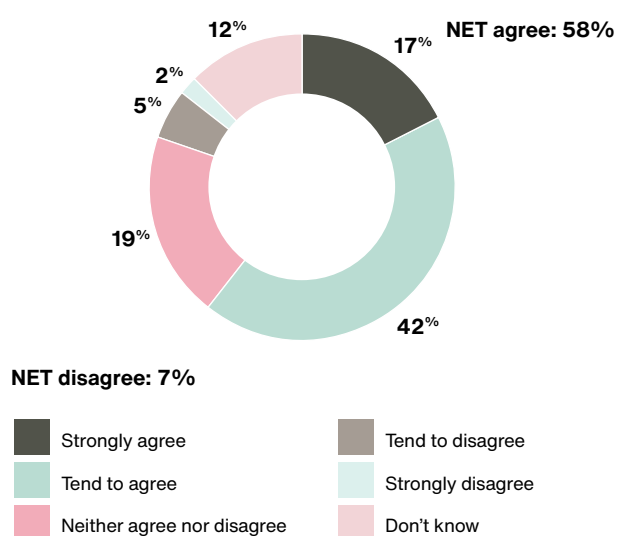
Significantly more likely to *disagree* with the statement are:

- **those with low awareness of PrEP** compared with those with medium awareness (6% vs. 2%).

ⁱ Q.6 Following is a number of statements about HIV. Could you please indicate how strongly you agree or disagree with each of them? Base: London respondents (n=1,013); Men (n=495); Women (n=518); 18-34s (n=354); 35-64s (n=502); Heterosexual cisgender respondents (n=864); LGBT respondents (n=90); Higher than average HIV transmission knowledge respondents (n=161); Average HIV transmission knowledge respondents (n=546); Lower than average HIV transmission knowledge respondents (n=306); Medium PrEP knowledge respondents (n=409); Low PrEP knowledge respondents (n=273); Respondents who recognise barriers for LGBT people (n=742); Respondents who don't recognise barriers for LGBT people (n=142).

Over half also believe people are likely to feel ashamed about living with HIVⁱ

'People living with HIV are likely to feel ashamed about it'



Londoners are slightly more likely than the public UK-wide to agree with this statement (58% vs. 53%). Significantly more likely to *agree* with this statement in London are:

- **those aged 18-34** compared with those aged 35-64 and 65+ (68% vs. 56% and 42%)
- **ethnic minority people** compared with White people (64% vs. 57%)
- **those with high social media usage** compared with those with medium and low usage* (64% vs. 50% and 40% respectively)
- **those who perceive HIV to have low seriousness**, compared with those who have a perception of high seriousness (70% vs. 59%).

Significantly more likely to *disagree* with the statement are:

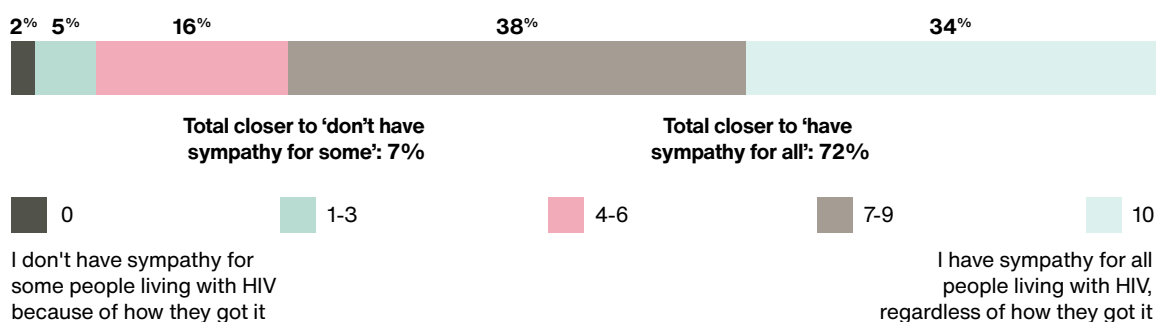
- **those who don't recognise barriers against LGBT people**, compared with those who do (17% vs. 7%)
- **those who personally know someone with HIV** compared with those who do not (13% vs. 6%).

ⁱ Q.6 Following is a number of statements about HIV. Could you please indicate how strongly you agree or disagree with each of them? Base: London respondents (n=1,013); 18-34s (n=354); 35-64s (n=502); 65+ (n=157); White respondents (n=656); Ethnic minority respondents (n=332); High social media usage respondents (n=662); Medium social media usage respondents (n=262); Low social media usage respondents* (n=56); Respondents with a high perception of HIV's seriousness (n=555); Respondents with a low perception of HIV's seriousness (n=174); Respondents who recognise barriers for LGBT people (n=742); Respondents who don't recognise barriers for LGBT people (n=142); Respondents who know someone living with HIV (n=181); Respondents who don't know someone living with HIV (n=797).

* Caution: small sample size (n<100).

One third of Londoners say they have sympathy for people living with HIV regardless of how they acquired itⁱ

Please select the statement that comes closest to your view



The following groups are Significantly more likely to say they 'have sympathy for all people living with HIV regardless of how they acquired it' (selecting 10):

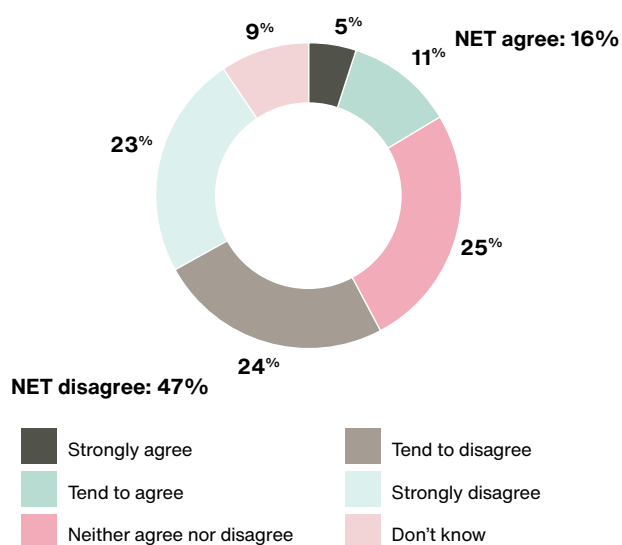
- **women** compared with men (39% vs. 28%)
- **Black and White people** compared with South Asian people* (40% and 35% respectively vs. 16%)
- **non-religious people** compared with religious people (51% vs. 27%)
- **broadsheet readers and broadcast news viewers** compared with tabloid readers (36% and 36% respectively, vs. 29%)
- **those with higher and average knowledge of HIV transmission** compared to those with lower-than-average knowledge (44% and 41% vs. 16% with low knowledge).

ⁱ Q.5 Please pick the statement that best represents your view. Base: London respondents (n=1,013); Men (n=495); Women (n=518); White respondents (n=656); Black respondents (n=147); South Asian respondents (n=78); Non-religious respondents (n=307); Religious respondents (n=661); Broadsheet readers (n=426); Tabloid readers (n=496); Broadcast news viewers (n=524); Higher than average HIV transmission knowledge respondents (n=161); Average HIV transmission knowledge respondents (n=546); Lower than average HIV transmission knowledge respondents (n=306)

* Caution: small sample size (n<100).

Over a tenth of Londoners think people with HIV have probably had lots of sexual partnersⁱ

'People living with HIV have probably had lots of sexual partners'



Londoners were slightly more likely to agree with this than the public UK-wide (16% vs. 11%). Those more likely to agree with this statement are:

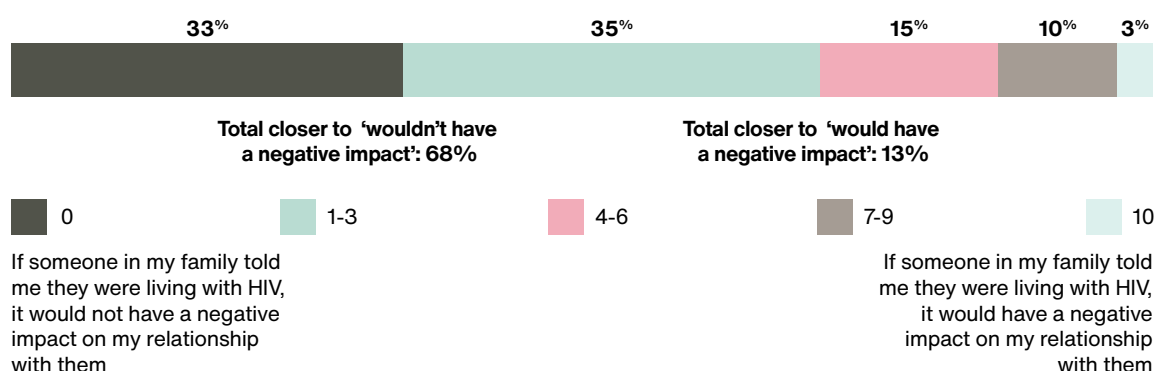
- **men** compared to women (20% vs. 12% women)
- **those aged 18-34** compared with those aged 35-64 (21% vs. 12%)
- **religious people** compared with non-religious people (19% vs. 6%)
- **those who personally know someone with HIV** compared with those who do not (27% vs. 13%).

ⁱ Q.6 Following is a number of statements about HIV. Could you please indicate how strongly you agree or disagree with each of them? Base: London respondents (n=1,013); Men (n=495); Women (n=518); 18-34s (n=354); 35-64s (n=502); Non-religious respondents (n=307); Religious respondents (n=661); Respondents who know someone living with HIV (n=181); Respondents who don't know someone living with HIV (n=797).

8.4.2 Attitudes to relationships with people living with HIVⁱ

A third of Londoners completely agree if someone in their family told them they had HIV, it would not negatively impact the relationship*

Please select the statement that comes closest to your view



Significantly more likely to select 'If someone in my family told me they were living with HIV, it *would not* have a negative impact...' (selecting 0) are:

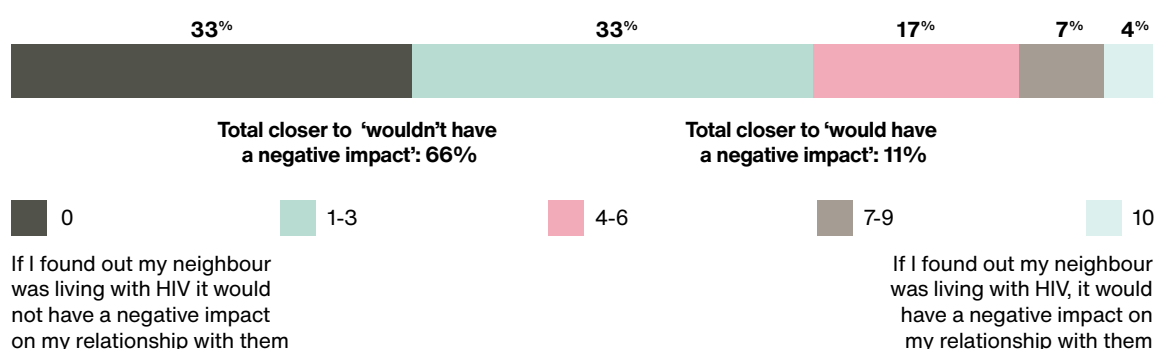
- **women** compared with men (38% women vs. 29% men)
- **non-religious people** compared with religious people (51% vs. 27%)
- **LGBT people** compared with heterosexual cisgender people (54% vs. 32%)
- **those with low* and medium social media usage** compared to those with high usage (45% and 39% respectively, vs. 30%)
- **those with higher and middling knowledge of HIV transmission** compared with those with lower-than-average knowledge (46% and 39% respectively, vs. 19%)
- **those who perceive HIV to have low seriousness**, compared with those who have a perception of high seriousness (49% vs. 31%).

i Q.5 Please pick the statement that best represents your view. Base: London respondents (n=1,013); Men (n=495); Women (n=518); Non-religious respondents (n=307); Religious respondents (n=661); Heterosexual cisgender respondents (n=864); LGBT respondents (n=90); High social media usage respondents (n=662); Medium social media usage respondents (n=262); Low social media usage respondents* (n=56); Higher than average HIV transmission knowledge respondents (n=161); Average HIV transmission knowledge respondents (n=546); Lower than average HIV transmission knowledge respondents (n=306); Respondents with a high perception of HIV's seriousness (n=555); Respondents with a low perception of HIV's seriousness (n=174).

* Low base size (n=56)

Similarly, only a third confidently say if a neighbour told them they were living with HIV, it would not damage the relationshipⁱ

Please select the statement that comes closest to your view



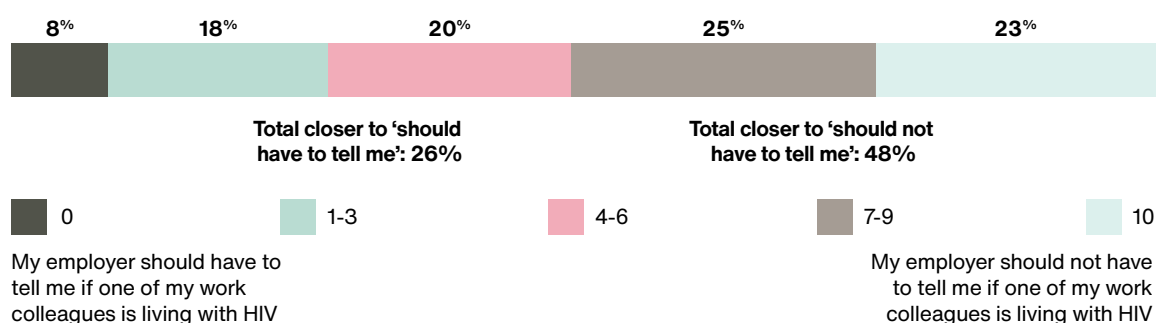
Significantly more likely to select 'If I found out my neighbour was living with HIV it *would not* have a negative impact on my relationship with them' (selecting 0) are:

- **women** compared with men (38% women vs. 27% men)
- **those aged 65+** compared with those aged 18-34 and 35-64 (43% vs. 28% and 33% respectively)
- **non-religious people** compared with religious people (49% vs. 26%)
- **LGBT people** compared with heterosexual cisgender people (52% vs. 32%)
- **those with low* and medium social media usage** compared to those with high usage (43% and 41% respectively, vs. 28%)
- **broadsheet readers and broadcast news viewers** compared with tabloid readers (34% and 33% respectively, vs. 29%)
- **those with higher and average knowledge of HIV transmission** compared with those with lower-than-average knowledge (45% and 38%, vs. 18%)
- **those who perceive HIV to have low seriousness**, compared with those who have a perception of high seriousness (50% vs. 29%).

ⁱ Q.5 Please pick the statement that best represents your view. Base: London respondents (n=1,013); Men (n=495); Women (n=518); 18-34s (n=354); 35-64s (n=502); 65+ (n=157); Non-religious respondents (n=307); Religious respondents (n=661); Heterosexual cisgender respondents (n=864); LGBT respondents (n=90); High social media usage respondents (n=662); Medium social media usage respondents (n=262); Low social media usage respondents* (n=56); Broadsheet readers (n=426); Tabloid readers (n=496); Broadcast news viewers (n=524); Higher than average HIV transmission knowledge respondents (n=161); Average HIV transmission knowledge respondents (n=546); Lower than average HIV transmission knowledge respondents (n=306); Respondents with a high perception of HIV's seriousness (n=555); Respondents with a low perception of HIV's seriousness (n=174) *Low base size (n=56)

Londoners, like most in the UK, are more divided on whether an employer should have to disclose someone's HIV statusⁱ

Please select the statement that comes closest to your view



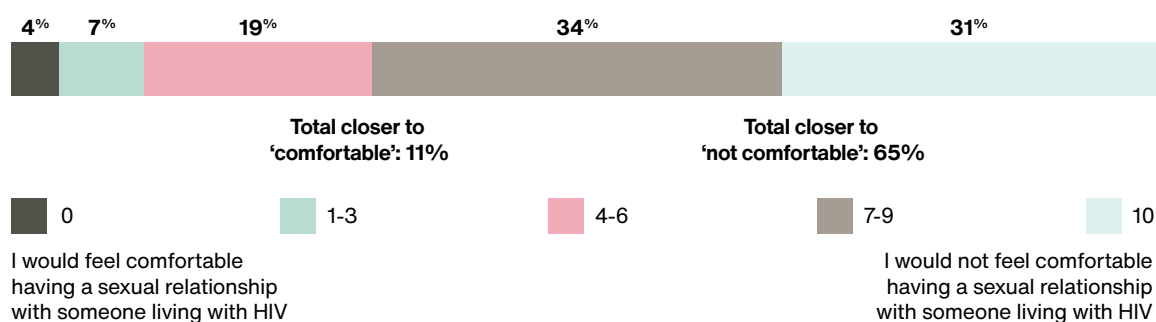
Significantly more likely to select 'My employer *should not* have to tell me if one of my work colleagues is living with HIV' (selecting 10) are:

- **non-religious people** compared with religious people (38% vs. 17%)
- **LGBT people** compared with heterosexual cisgender people (44% vs. 22%)
- **broadsheet readers and broadcast news viewers** compared with tabloid readers (26% and 23% respectively, vs. 17%)
- **those with higher and average knowledge of HIV transmission** compared with those with lower-than-average knowledge (29% and 27% respectively, vs. 13%)
- **those with high awareness of PrEP** compared with those with low awareness (34% vs. 20%)
- **those who perceive HIV to have low seriousness**, compared with those who have a perception of high seriousness (42% vs. 18%)
- **those who personally know someone with HIV** compared with those who do not (31% vs. 22%).

ⁱ Q.5 Please pick the statement that best represents your view. Base: London respondents (n=1,013); Non-religious respondents (n=307); Religious respondents (n=661); Heterosexual cisgender respondents (n=864); LGBT respondents (n=90); Broadsheet readers (n=426); Tabloid readers (n=496); Broadcast news viewers (n=524); Higher than average HIV transmission knowledge respondents (n=161); Average HIV transmission knowledge respondents (n=546); Lower than average HIV transmission knowledge respondents (n=306); High PrEP knowledge respondents (n=116); Low PrEP knowledge respondents (n=273); Respondents with a high perception of HIV's seriousness (n=555); Respondents with a low perception of HIV's seriousness (n=174); Respondents who know someone living with HIV (n=181); Respondents who don't know someone living with HIV (n=797).

Just 4% of Londoners indicate they would definitely feel comfortable having a sexual relationship with someone living with HIVⁱ

Please select the statement that comes closest to your view



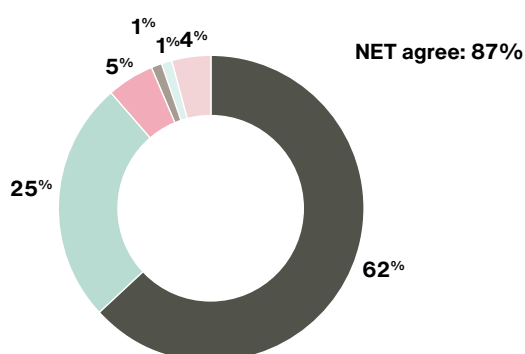
Significantly more likely to select 'I *would not* feel comfortable having a sexual relationship with someone living with HIV' are:

- **those aged 65+ and 35-64** compared to those aged 18-34 (39% vs. 34% and 23%)
- **heterosexual cisgender people** compared with LGBT people (34% vs. 13%)
- **those who don't recognise the barriers faced by LGBT people** compared with those who do (44% vs. 31%)
- **those who do not personally know someone with HIV** compared with those who do (33% vs. 24%).

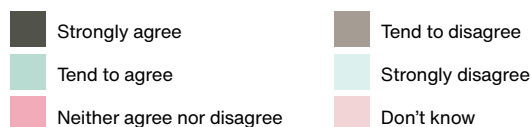
ⁱ Q.5 Please pick the statement that best represents your view. Base: London respondents (n=1,013); 18-34s (n=354); 35-64s (n=502); 65+ (n=157); Heterosexual cisgender respondents (n=864); LGBT respondents (n=90); Respondents who recognise barriers for LGBT people (n=742); Respondents who don't recognise barriers for LGBT people (n=142); Respondents who know someone living with HIV (n=181); Respondents who don't know someone living with HIV (n=797).

A large majority of Londoners think people with HIV should tell any sexual partnersⁱ

'People living with HIV should always tell any sexual partners, even if they definitely can't pass it on because they are on effective treatment'



NET disagree: 2%



Londoners answered this question broadly in line with the rest of the UK. Significantly more likely to *agree* with this statement in London are:

- **women** compared with men (89% vs. 84%)
- **those aged 35-64 and 65+** compared with those aged 18-34 (88% and 97% respectively, vs. 81%)
- **heterosexual cisgender people** compared with LGBT people (89% vs. 81%)
- **those with higher and average knowledge of HIV transmission** compared with those with lower-than-average knowledge (86% and 94% respectively, vs. 75%).

Significantly more likely to *disagree* with this statement are:

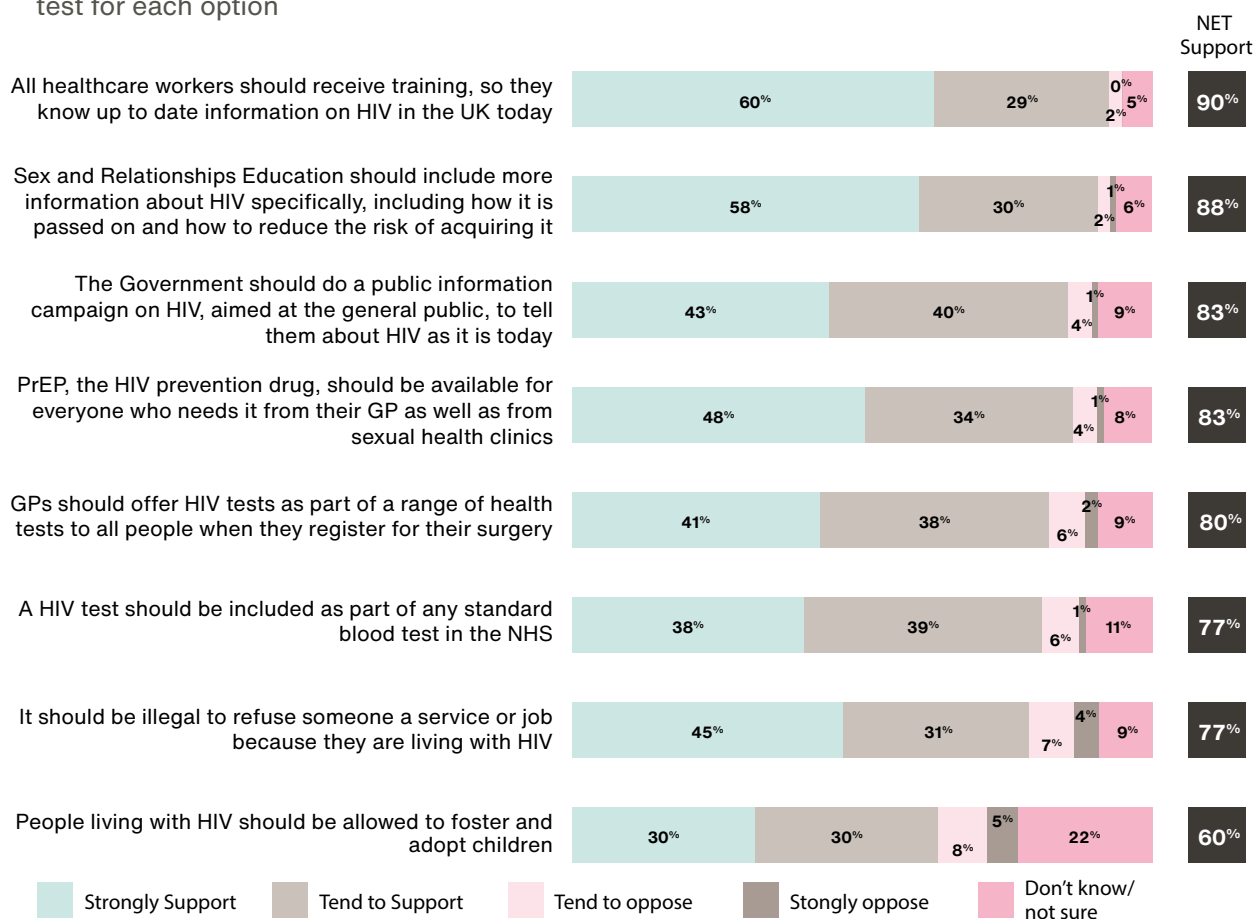
- **those who perceive HIV to have low seriousness**, compared with those who have a perception of high seriousness (5% vs. 1%).

ⁱ Q.6 Following is a number of statements about HIV. Could you please indicate how strongly you agree or disagree with each of them? Base: London respondents (n=1,013); Men (n=495); Women (n=518); 18-34s (n=354); 35-64s (n=502); 65+ (n=157); Heterosexual cisgender respondents (n=864); LGBT respondents (n=90); Higher than average HIV transmission knowledge respondents (n=161); Average HIV transmission knowledge respondents (n=546); Lower than average HIV transmission knowledge respondents (n=306); Respondents with a high perception of HIV's seriousness (n=555); Respondents with a low perception of HIV's seriousness (n=174).

8.5 Support for policy interventions on HIV

Majorities of Londoners support policies aimed at reducing transmission of HIV and / or improving the lives of those with HIVⁱ

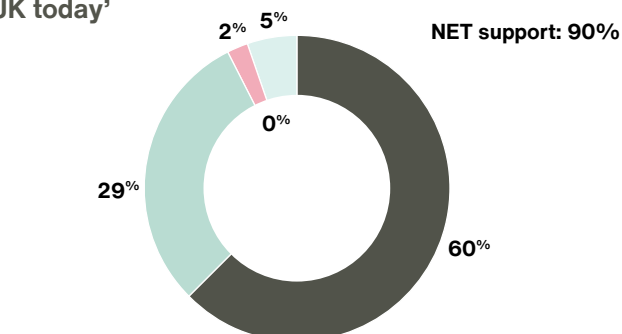
Below are some ways that people in the UK may or may not be able to access a test for HIV right now. Showing % who say how certain they feel that it is possible to get an HIV test for each option



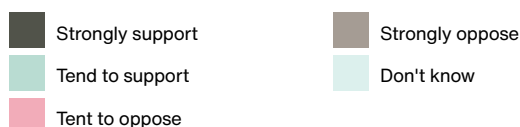
ⁱ Q8. Below are some ideas that have been suggested for how to help reduce the transmission of HIV and / or improve the lives of those living with HIV. Some of these are already the case, some aren't. To what extent, if at all, do you support each of the following? Base: London respondents (n=1,013)

9 in 10 Londoners support all healthcare workers receiving training so they know up to date information about HIV in the UK todayⁱ

'All healthcare workers should receive training, so they know up to date information on HIV in the UK today'



NET oppose: 2%



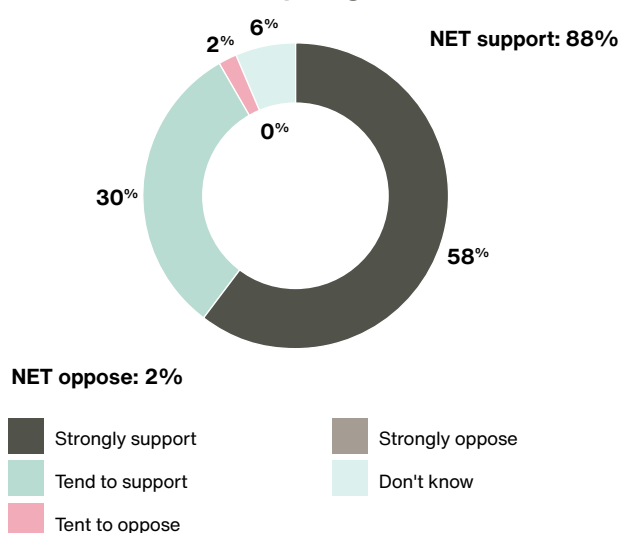
Those more likely to *support* this include:

- **Those aged 65+ and 35-64** compared with those aged 18-34 (95% and 92% respectively, vs. 85%)
- **non-religious people** compared with religious people (95% vs. 89%)
- **LGBT people** compared with heterosexual cisgender people (98% vs. 91%)
- **those with higher and average knowledge of HIV transmission** compared with those with lower-than-average knowledge (94% and 96% respectively, vs. 77%)
- **those with high or medium awareness of PrEP** compared with those with low awareness (97% or 95% respectively, vs. 85%)
- **those who recognise barriers against LGBT people** compared with those who don't (96% vs. 91%).

ⁱ Q.8 Below are some ideas that have been suggested for how to help reduce the transmission of HIV and / or improve the lives of those living with HIV. Some of these are already the case, some aren't. To what extent, if at all, do you support each of the following? Base: London respondents (n=1,013); 18-34s (n=354); 35-64s (n=502); 65+ (n=157); Non-religious respondents (n=307); Religious respondents (n=661); Heterosexual cisgender respondents (n=864); LGBT respondents (n=90); Higher than average HIV transmission knowledge respondents (n=161); Average HIV transmission knowledge respondents (n=546); Lower than average HIV transmission knowledge respondents (n=306); High PrEP knowledge respondents (n=116); Medium PrEP knowledge respondents (n=409); Low PrEP knowledge respondents (n=273); Respondents who recognise barriers for LGBT people (n=742); Respondents who don't recognise barriers for LGBT people (n=142).

Londoners broadly support more information on HIV being provided through SRE in schoolsⁱ

‘SRE should include more information about HIV specifically, including how it is passed on and how to reduce the risk of acquiring it’



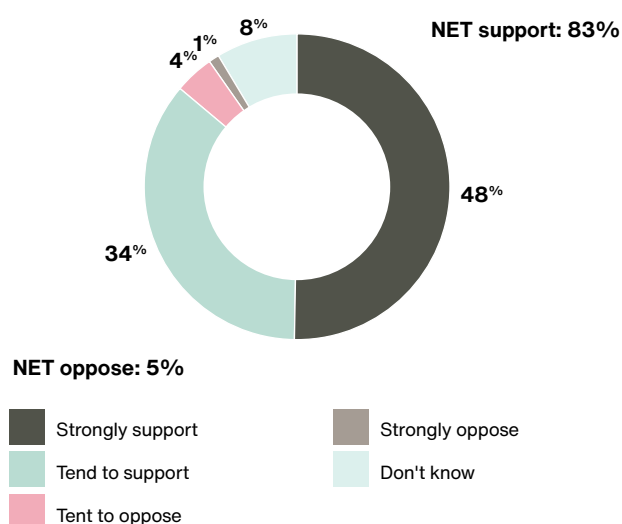
Those more likely to *support* this include:

- **Those aged 65+ and 35-64** compared with those aged 18-34 (95% and 89% vs. 84%)
- **non-religious people** compared with religious people (95% vs. 86%)
- **LGBT people** compared with heterosexual cisgender people (98% vs. 89%)
- **those with higher and average knowledge of HIV transmission** compared with those with lower-than-average knowledge (94% and 94% respectively, vs. 75%)
- **those with high or medium awareness of PrEP** compared with those with low awareness (95% or 94% respectively, vs. 82%)
- **those who personally know someone with HIV** compared with those who do not (95% vs. 89%).

ⁱ Q.8 Below are some ideas that have been suggested for how to help reduce the transmission of HIV and / or improve the lives of those living with HIV. Some of these are already the case, some aren't. To what extent, if at all, do you support each of the following? Base: London respondents (n=1,013); 18-34s (n=354); 35-64s (n=502); 65+ (n=157); Non-religious respondents (n=307); Religious respondents (n=661); Heterosexual cisgender respondents (n=864); LGBT respondents (n=90); Higher than average HIV transmission knowledge respondents (n=161); Average HIV transmission knowledge respondents (n=546); Lower than average HIV transmission knowledge respondents (n=306); High PrEP knowledge respondents (n=116); Medium PrEP knowledge respondents (n=409); Low PrEP knowledge respondents (n=273); Respondents who know someone living with HIV (n=181); Respondents who don't know someone living with HIV (n=797).

More than 4 in 5 Londoners support PrEP being available for anyone that needs it from their GPⁱ

'PrEP, the HIV prevention drug, should be available for everyone who needs it from their GP as well as from sexual health clinics'



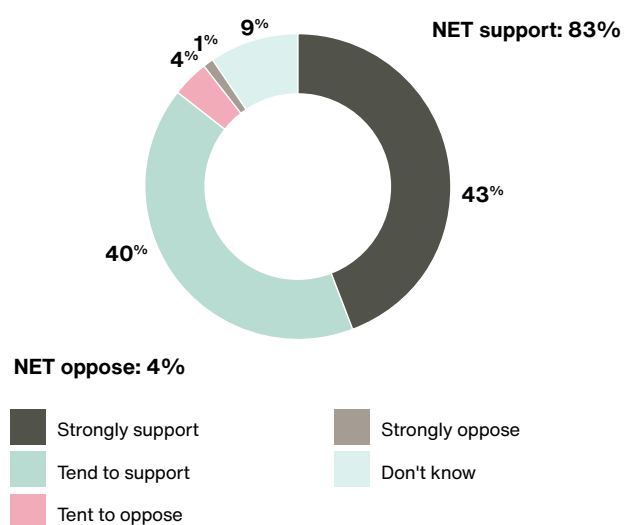
Those more likely to *support* this include:

- **non-religious people** compared with religious people (88% vs. 82%)
- **LGBT people** compared with heterosexual cisgender people (96% vs. 83%)
- **those with higher and average knowledge of HIV transmission** compared with those with lower-than-average knowledge (85% and 89% respectively, vs. 71%)
- **those with high or medium awareness of PrEP** compared with those with low awareness (91% or 90% respectively, vs. 75%)
- **those who recognise barriers against LGBT people** compared with those who don't (89% vs. 83%).

ⁱ Q.8 Below are some ideas that have been suggested for how to help reduce the transmission of HIV and / or improve the lives of those living with HIV. Some of these are already the case, some aren't. To what extent, if at all, do you support each of the following? Base: London respondents (n=1,013); Non-religious respondents (n=307); Religious respondents (n=661); Heterosexual cisgender respondents (n=864); LGBT respondents (n=90); Higher than average HIV transmission knowledge respondents (n=161); Average HIV transmission knowledge respondents (n=546); Lower than average HIV transmission knowledge respondents (n=306); High PrEP knowledge respondents (n=116); Medium PrEP knowledge respondents (n=409); Low PrEP knowledge respondents (n=273); Respondents who recognise barriers for LGBT people (n=742); Respondents who don't recognise barriers for LGBT people (n=142).

More than 8 in 10 Londoners also support the Government doing a public information campaign on HIV to tell them about how it is todayⁱ

‘The Government should do a public information campaign on HIV, aimed at the general public, to tell them about HIV as it is today’



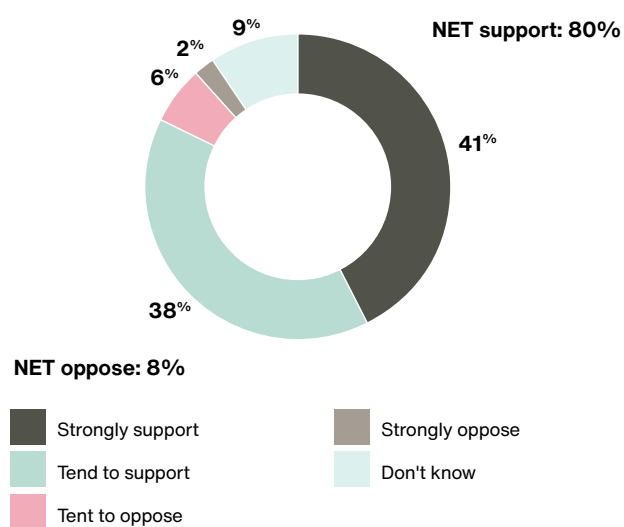
Those more likely to *support* this include:

- **those with high and medium social media usage** compared with those with low usage* (84% and 85% respectively, vs. 67%)
- **those with higher and middling knowledge of HIV transmission** compared with those with lower-than-average knowledge (85% and 89% respectively, vs. 72%)
- **those with high or medium awareness of PrEP** compared with those with low awareness (91% or 91% respectively, vs. 81%)
- **those who recognise barriers against LGBT people**, compared with those who don't (90% vs. 81%)
- **those who personally know someone with HIV** compared with those who do not (91% vs. 84%).

ⁱ Q.8 Below are some ideas that have been suggested for how to help reduce the transmission of HIV and / or improve the lives of those living with HIV. Some of these are already the case, some aren't. To what extent, if at all, do you support each of the following? Base: London respondents (n=1,013); High social media usage respondents (n=662); Medium social media usage respondents (n=262); Low social media usage respondents* (n=56); Higher than average HIV transmission knowledge respondents (n=161); Average HIV transmission knowledge respondents (n=546); Lower than average HIV transmission knowledge respondents (n=306); High PrEP knowledge respondents (n=116); Medium PrEP knowledge respondents (n=409); Low PrEP knowledge respondents (n=273); Respondents who recognise barriers for LGBT people (n=742); Respondents who don't recognise barriers for LGBT people (n=142); Respondents who know someone living with HIV (n=181); Respondents who don't know someone living with HIV (n=797). *Low base size (n=56)

4 in 5 Londoners support GPs offering HIV tests as part of a range of tests for new patientsⁱ

‘GPs should offer HIV tests as part of a range of health tests to all people when they register for their surgery’



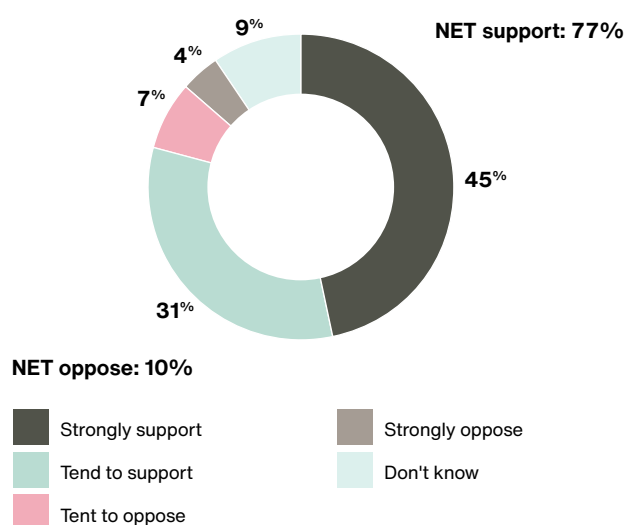
Those more likely to *support* this include:

- **LGBT people** compared with heterosexual cisgender people (92% vs. 80%)
- **those with higher and middling knowledge of HIV transmission** compared with those with lower-than-average knowledge (80% and 87% respectively, vs. 67%)
- **those with high or medium awareness of PrEP** compared with those with low awareness (88% or 89% respectively, vs. 73%)
- **those who recognise barriers against LGBT people** compared with those who don't (86% vs. 77%)
- **those who personally know someone with HIV** compared with those who do not (88% vs. 80%).

ⁱ Q.8 Below are some ideas that have been suggested for how to help reduce the transmission of HIV and / or improve the lives of those living with HIV. Some of these are already the case, some aren't. To what extent, if at all, do you support each of the following? Base: London respondents (n=1,013); Heterosexual cisgender respondents (n=864); LGBT respondents (n=90); Higher than average HIV transmission knowledge respondents (n=161); Average HIV transmission knowledge respondents (n=546); Lower than average HIV transmission knowledge respondents (n=306); High PrEP knowledge respondents (n=116); Medium PrEP knowledge respondents (n=409); Low PrEP knowledge respondents (n=273); Respondents who recognise barriers for LGBT people (n=742); Respondents who don't recognise barriers for LGBT people (n=142); Respondents who know someone living with HIV (n=181); Respondents who don't know someone living with HIV (n=797).

Over three quarters of Londoners agree it should be illegal to refuse someone a service or job because they are living with HIVⁱ

'It should be illegal to refuse someone a service or job because they are living with HIV'



Those more likely to *support* this include:

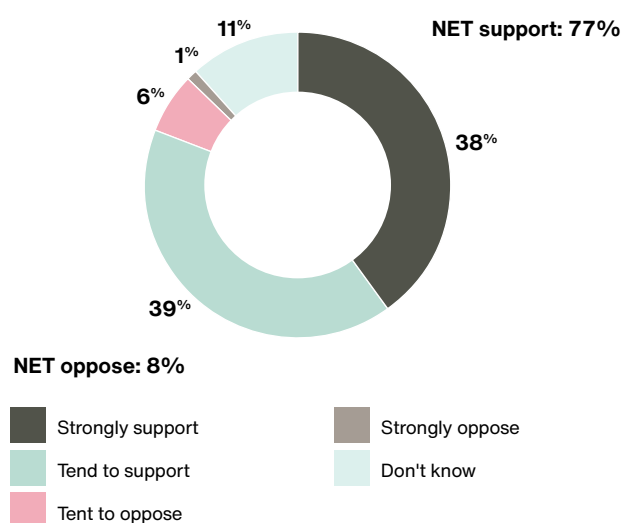
- **women** compared with men (80% vs. 74%).
- **Those aged 35-64** compared with those aged 18-34 (80% vs. 71%).
- **non-religious people** compared with religious people (82% vs. 76%)
- **LGBT people** compared with heterosexual cisgender people (88% vs. 78%)
- **those with higher and middling knowledge of HIV transmission** compared with those with lower-than-average knowledge (80% and 86% respectively, vs. 61%)
- **those with high or medium awareness of PrEP** compared with those with low awareness (92% or 85% respectively, vs. 70%)
- **those who recognise barriers against LGBT people** compared with those who don't (84% vs. 68%).

It is illegal to discriminate against a person based on their HIV status under the Equality Act 2010. However, despite this many people living with HIV still experience discrimination, including in employment. This question looked at levels of support, rather than awareness of the law, but the significant minority of people who either disagree with the statement or who aren't sure is concerning for NAT and indicates that they may be more likely to fall foul of the law.

ⁱ Q.8 Below are some ideas that have been suggested for how to help reduce the transmission of HIV and / or improve the lives of those living with HIV. Some of these are already the case, some aren't. To what extent, if at all, do you support each of the following? Base: London respondents (n=1,013); Men (n=495); Women (n=518); 18-34s (n=354); 35-64s (n=502); Non-religious respondents (n=307); Religious respondents (n=661); Heterosexual cisgender respondents (n=864); LGBT respondents (n=90); Higher than average HIV transmission knowledge respondents (n=161); Average HIV transmission knowledge respondents (n=546); Lower than average HIV transmission knowledge respondents (n=306); High PrEP knowledge respondents (n=116); Medium PrEP knowledge respondents (n=409); Low PrEP knowledge respondents (n=273); Respondents who recognise barriers for LGBT people (n=742); Respondents who don't recognise barriers for LGBT people (n=142).

There is broad support for HIV tests being included as part of standard blood tests in Londonⁱ

'A HIV test should be included as part of any standard blood test in the NHS'



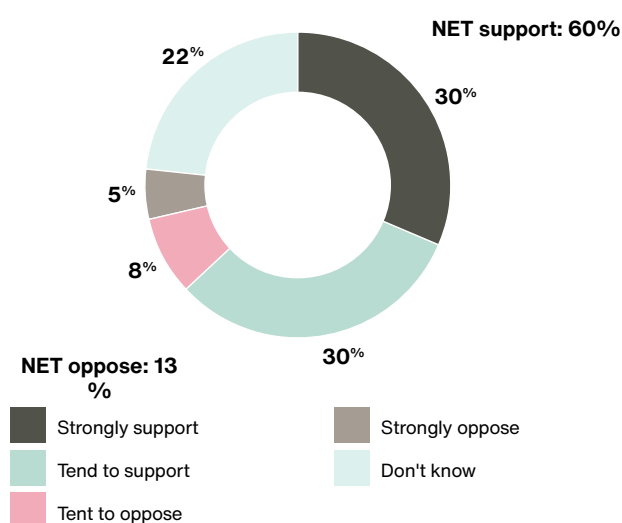
Those more likely to *support* this include:

- **those with higher and middling knowledge of HIV transmission** compared with those with lower-than-average knowledge (83% vs. 74% and 68% respectively)
- **those with high or medium awareness of PrEP** compared with those with low awareness (85% or 84% respectively, vs. 75%)
- **those who perceive HIV to have high seriousness** compared with those who have a perception of low seriousness (85% vs. 78%)
- **those who recognise barriers against LGBT people** compared with those who don't (83% vs. 70%)
- **those who personally know someone with HIV** compared with those who do not (86% vs. 77%).

ⁱ Q.8 Below are some ideas that have been suggested for how to help reduce the transmission of HIV and / or improve the lives of those living with HIV. Some of these are already the case, some aren't. To what extent, if at all, do you support each of the following? Base: London respondents (n=1,013); Higher than average HIV transmission knowledge respondents (n=161); Average HIV transmission knowledge respondents (n=546); Lower than average HIV transmission knowledge respondents (n=306); High PrEP knowledge respondents (n=116); Medium PrEP knowledge respondents (n=409); Low PrEP knowledge respondents (n=273); Respondents with a high perception of HIV's seriousness (n=555); Respondents with a low perception of HIV's seriousness (n=174); Respondents who recognise barriers for LGBT people (n=742); Respondents who don't recognise barriers for LGBT people (n=142); Respondents who know someone living with HIV (n=181); Respondents who don't know someone living with HIV (n=797).

A clear majority of Londoners support people with HIV being allowed to adopt and foster childrenⁱ

'People living with HIV should be allowed to foster and adopt children'



Those more likely to *support* this include:

- **Those aged 18-34** compared with those aged 35-64 and 65+ (70% vs. 58% and 42%)
- **ABC1s** compared with C2DEs (63% vs. 54%)
- **non-religious people** compared with religious people (68% vs. 57%)
- **LGBT people** compared with heterosexual cisgender people (87% vs. 59%)

- **those with high* social media usage** compared with those with medium and low* usage (68% vs. 49% and 41% respectively)
- **Broadsheet readers and broadcast news viewers** compared with tabloid readers (67% and 65% respectively, vs. 59%)
- **those with higher and average knowledge of HIV transmission** compared with those with lower-than-average knowledge (67% and 63% respectively, vs. 51%)
- **those with high or medium awareness of PrEP** compared with those with low awareness (85% or 73% respectively, vs. 50%)
- **those who recognise barriers against LGBT people** compared with those who do not (68% vs. 53%)
- **those who personally know someone with HIV** compared with those who do not (77% vs. 58%).

Those more likely to *oppose* this include:

- **those aged 65+** compared to aged 18-34 and 35-64 (21% vs. 13% and 10%)
- **gay and bisexual men** compared with LGBT people in general (14% vs. 8%)
- **religious people** compared with non-religious people (16% vs. 8%).

ⁱ Q.8 Below are some ideas that have been suggested for how to help reduce the transmission of HIV and / or improve the lives of those living with HIV. Some of these are already the case, some aren't. To what extent, if at all, do you support each of the following? Base: London respondents (n=1,013); 18-34s (n=354); 35-64s (n=502); 65+ (n=157); ABC1s (n=718); C2DEs (n=295); Non-religious respondents (n=307); Religious respondents (n=661); Heterosexual cisgender respondents (n=864); Gay and bisexual men (n=55); LGBT respondents (n=90); High social media usage respondents (n=662); Medium social media usage respondents (n=262); Low social media usage respondents* (n=56); Broadsheet readers (n=426); Tabloid readers (n=496); Broadcast news viewers (n=524); Higher than average HIV transmission knowledge respondents (n=161); Average HIV transmission knowledge respondents (n=546); Lower than average HIV transmission knowledge respondents (n=306); High PrEP knowledge respondents (n=116); Medium PrEP knowledge respondents (n=409); Low PrEP knowledge respondents (n=273); Respondents who recognise barriers for LGBT people (n=742); Respondents who don't recognise barriers for LGBT people (n=142); Respondents who know someone living with HIV (n=181); Respondents who don't know someone living with HIV (n=797).
*Low base size (n=56)

Thank you

National AIDS Trust, Fast-Track Cities London and Britain Thinks would like to thank all those who have contributed to this research programme.

If you would like to find out more about the data collected, including queries on data access for further research, please email info@nat.org.uk

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We're the UK's HIV rights charity. We work to stop HIV from standing in the way of health, dignity and equality, and to end new HIV transmissions.

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