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Use of Digital Health Technologies (DHTs) Among LGBTQIA+ Populations in the WHO South-East Asia Region

A Rapid Systematic Review

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Background

- Digital health technologies (DHTs), including mobile health applications, telehealth services, and social media platforms, offer important opportunities to **enhance access to care and support the well-being of LGBTQIA+ individuals.**
- LGBTQIA+ individuals often face **stigma and limited access** to culturally competent healthcare.
- In many Asian contexts, where systemic discrimination remains prevalent, these technologies may **provide more inclusive health resources** and avenues for **social connection.**
- However, the existing **evidence** on their use and effect is **fragmented.**

Aim

This systematic review aims to synthesise current research on the **utilisation, impacts, and barriers** associated with DHTs for **LGBTQIA+ populations in Asia,** with the goal of informing **policy development** and future **intervention design.**

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Methods



PICOS framework

P — LGBTQIA+ individuals in Asia

I — DHTs

C — Any comparator

O — Health-related, psychosocial, and economic outcomes, and barriers to DHT use

S — Randomised controlled trials and observational studies

Protocol registration

- The protocol was registered in PROSPERO (CRD42024528096)

PROSPERO
International prospective register of systematic reviews

Data search

- PubMed, Embase, Cochrane
- From inception to **April 3, 2024**.
- No language or date restrictions.

Study selection

- Two reviewers independently screened titles and abstracts using Covidence software, followed by full-text assessment of potentially eligible studies.
- Discrepancies were resolved through discussion and consensus.

Data extraction

- Data extraction was conducted by one reviewer.
- Risk of bias was assessed by one reviewer.

Data Synthesis

Data synthesis employed a **narrative synthesis**.

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Results



Included studies

- Across the **10,302** primary studies imported for screening, we included a total of **28 records** which evaluated any type of DHTs for LGBTQIA+ populations.
- Included studies were predominantly from **China (n = 18; 64.2%)**



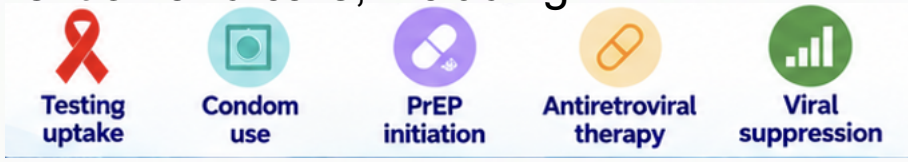
Type of DHTs

- DHTs included, but were not limited to:



Key health related outcomes

DHTs were most commonly associated with HIV prevention and care, including:



Other outcomes

Fewer studies focused on psychosocial outcomes, including:



Implementation factors

Many studies described barriers and facilitators, highlighting the importance of:



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Limits and Conclusions



Limitations

- Rapid review design may introduce a **potential risk of bias**.
- The evidence base is relatively **small (28 studies)** and heterogeneous.
- Most studies were from China and focused on men who have sex with men, **limiting generalisability** to other LGBTQIA+ subgroups and Asian contexts.

Conclusions

- DHTs can **expand access and utilisation** of multiple services among LGBTQIA+ populations, particularly for **HIV-based interventions.**
- Evidence remains **scarce for other LGBTQIA+ subgroups**
- Research has mainly focused on **clinical-related outcomes,** with limited attention to psychosocial and broader health and wellbeing outcomes.
- **Trust, anonymity, and community-driven digital inputs** are important for promoting engagement.

Future Implications

- Strengthen **methodological standardization** to improve the quality and comparability of future studies.
- Expand research to **underrepresented LGBTQIA+ subgroups** and across Asian countries.
- Adopt a more **comprehensive analytical approach** and broader health and wellbeing outcomes.
- Inform the development of **scalable, equitable, and inclusive DHT interventions and policies** for LGBTQIA+ populations in Asia.