

Navigating Quality of Life: effects of a peer navigation program for PLHIV in Australia.

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Background

We explored the effects of a peer navigation program on the Quality of Life (QoL) of people living with HIV (PLHIV) in Victoria. The program employed peer navigators living with HIV to guide people who were newly diagnosed or experiencing challenges related to health, wellbeing and managing life with HIV.

Methods

Our research took a community participatory approach, using mixed methods to observe program delivery and effects in real-world settings.

Interviews with 27 clients were conducted July-October 2020, transcribed and thematically analysed.

We also report analyses from the responses of a separate cohort of 36 clients to a validated measure of QoL (PozQoL), administered through a survey completed following first appointment and repeated at 2 and 4 months, between December 2018-2020. Multiple linear regressions tested the significance of the relationship between time since baseline and changes in PozQoL scores. Covariates were age, gender, sexuality and whether participants were Australian born.

Results

Interview participants were nineteen men, seven women and one person who was non-binary. Of the men, thirteen were gay, three were heterosexual and three were bi+. Twenty participants were born overseas, of whom ten were born in East or Southeast Asia, five in Europe and New Zealand, three in South America and two in Southern Africa.

Interviews showed how peer navigation relieved feelings of self-stigma, loneliness and concerns related to health and life goals, particularly for the newly diagnosed. The peer relationship offered participants a model which helped transform stigmatising beliefs about HIV and their own self-image. Navigators also shared insights, empathy, reassurance, and introduced participants to community members, programs and social services.

The impact of an HIV diagnosis on life goals was more enduring for participants who experienced stigma and discrimination migrating to Victoria or in their countries and families of origin. Socially isolated heterosexual men, women and recent migrants benefitted greatly from emotional support and connection to PLHIV community.

Participants also accessed the program over the phone or online during COVID-19 restrictions. They received welfare checks and help with access to medicine and income, but experienced challenges maintaining employment, social support and other activities which supported QoL.

Changes in PozQoL scores were not statistically significant. Prior to COVID-19, PozQoL scores indicated improvements in social, functional, psychological and health concern domains. However, this plateaued during COVID restrictions. Our ability to test for significance was limited by sample and effect size.

Conclusions

Our study found consistent qualitative evidence to suggest that the activities and strategies employed by the PNP can improve factors related to QoL. Our ability to test the significance of observed improvement in PozQoL scores was limited by sample size and confounders. These findings guide the aims, scope, activities and evaluation of similar programs, particularly those assessing themes or validated measures of QoL.

Our study found consistent qualitative evidence to suggest that peer navigation can address contemporary factors related to quality of life for people living with HIV.

These findings guide the aims, scope and evaluation of peer navigation programs, particularly those assessing themes or validated measures of quality of life.



The peer navigation team (photograph: Daniel Bourke).

Disclosure of Interest Statement

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