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Title

Exploring the link between sociodemographic factors and barriers to adherence:

survey data collected from people with HIV

Priority 1 (Research Category)

Survey research or cross-sectional study

Presenters

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Abstract

Context: At-risk subpopulations of people with HIV (PWH) in Montreal may experience sub-optimal

adherence to antiretroviral therapy (ART) due to barriers. However, what barriers these subpopulations

disproportionately face remains unclear.

Objective: This study aims to establish a risk stratification model to determine which sociodemographic

groups are most affected by barriers.

Study design and analysis: A cross-sectional survey between January and November 2022 was self-

administered online and in-person.

Setting or dataset: PWH were recruited using convenience sampling at the Chronic Viral Illness Service

(CVIS), McGill University Health Centre and HIV community centres (REZO, AIDS Community Care

Montreal) in Montreal, Canada.

Population: People with HIV.

Intervention/instrument: The survey examined 5 sociodemographic variables (gender, age, sexual orientation, immigration status, and education level) and ART adherence barriers within six domains, identified from prior literature. Barrier domains included thoughts and feelings (e.g., about HIV, ART); activities; social and material context; medication; health experience; and healthcare services. Barrier items were measured on a 0 (no difficulty) - 10 (maximum difficulty with adherence in the last 4 weeks) visual analogue scale, which were categorized as 0, 1-3, and 4-10.

Outcome Measures: Hierarchical clustering was employed to identify sociodemographic groups and survey response patterns. The number of clusters were determined by a distribution table and within-sum-of-square plots. A descriptive analysis was performed on sociodemographic features and labels were assigned based on those features.

Results: Data from 221 PWH were analyzed. Mean age was 51.1 years (SD=12.5). Two-thirds were men (n=148;67%). Five clusters were determined. Three clusters had primarily reported difficulty with adherence (i.e. adherence barriers) (1-3/10: %, 4-10/10: %), labelled as 1) male immigrants with a post-secondary education (21%, 68%); 2) heterosexual immigrants with a secondary education (70%, 16%); and 3) heterosexual female immigrants (13%, 31%). Two clusters primarily reported no adherence difficulties (0/10: %): 4) homosexual males (84%); and 5) homosexual males with post-secondary education (48%).

Conclusions: This analysis reflects the potential role of recognizing PWH sociodemographic profiles in HIV care, such as immigration status, to identify and manage barriers to adherence.

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