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Met and unmet health, welfare and social needs of people accessing HIV services

Findings from Positive Voices survey 2017

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on behalf of the Positive Voices study group





Public Health DISCIOSURES

No personal funding disclosures

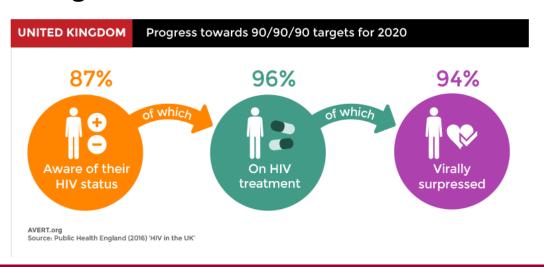
Positive Voices awarded grants from Gilead and ViiV



Background



- >90,000 people accessing HIV services in the UK, vast majority on HIV treatment and undetectable
- People with HIV have a wide range of complex health and social care needs, in addition to their HIV
- Their specific needs, and the extent to which these needs are currently being met is unknown





Presentation objectives



- Present national estimates of the met and unmet health and social needs of people accessing HIV services in the UK
- Explore the areas of greatest unmet need and their contributing factors





Methods (P317)

- February September 2017
- Nationally representative
 Random sample from HARS
 ~20% patients/clinic
- Clinic-based recruitment
 Face to face, post or email
- → Self-completion Paper (87%) or online (13%)
- Incentive
 £5 high street voucher
- Results:

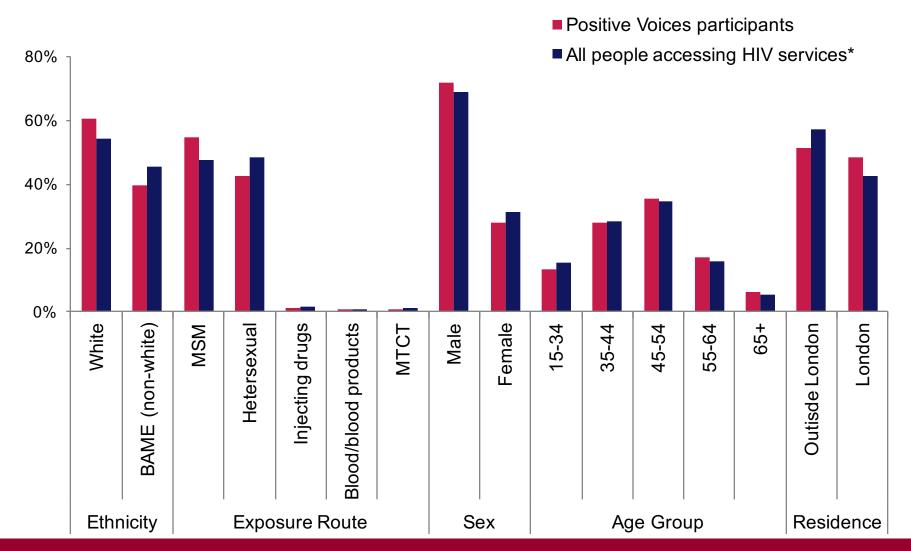
73 clinics4,418 responses51% response rate





Participant characteristics







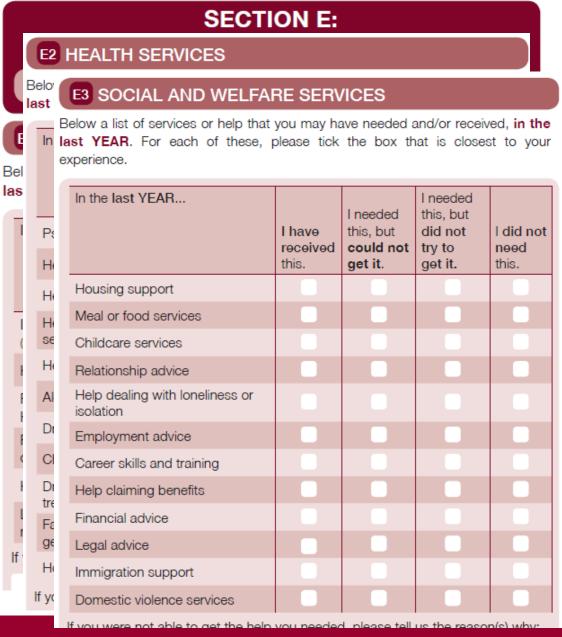
Met and unmet needs

Three sections

HIV-related services (6)

Health-related services (11)

Social & Welfare services (12)





Defining "Need":

those who needed this help in the past year

E1 HIV RELATED SERVICES

YEAR. For each of these services, please tick to Population that is closest to your experience.

In the last YEAR	I have received this help.	I needed this help, but could not get it .	I needed this help, but did not ask or look for it.	I did not need this help.		
Information about living with HIV (including websites)		NEED				
HIV treatment advice						
Professional help to take your HIV tablets on time or correctly						
Peer support/social contact with other people with HIV						
Help disclosing your HIV status						
Long term condition management support						
If you were not able to get the help you needed, please tell us the reason(s) why:						



Defining "Unmet need":

those who received this help in the past year, of those who needed it

E1 HIV RELATED SERVICES

YEAR. For each of these services, please Closest to your experience.

Population in the past nent that is

In the last YEAR	I have received this help.	I needed this help, but could not get it.	I needed this help, but did not ask or look for it.	I did not need this help.		
Information about living with HIV (including websites)		UNMET NEED				
HIV treatment advice						
Professional help to take your HIV tablets on time or correctly						
Peer support/social contact with other people with HIV						
Help disclosing your HIV status						
Long term condition management support						
If you were not able to get the help you needed, please tell us the reason(s) why:						



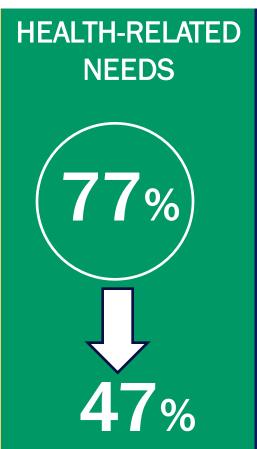
Public Health Results: What help do you need?



Percentage of patients with a need

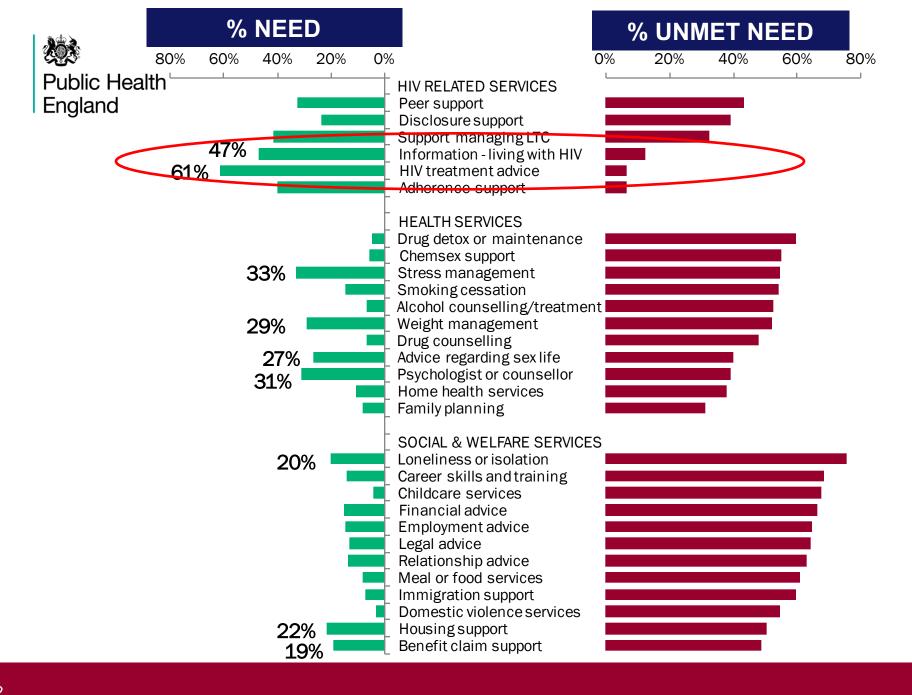
Percentage of needs that were unmet







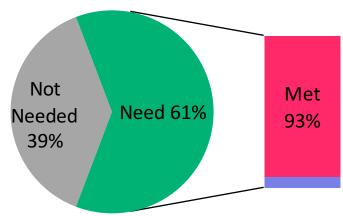
SOCIAL AND



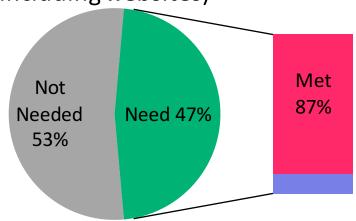


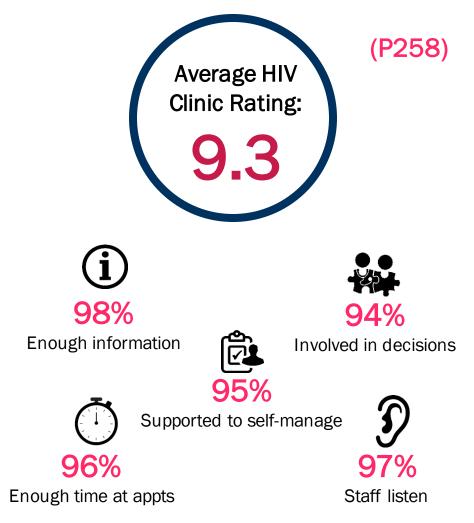
HIV treatment advice and information

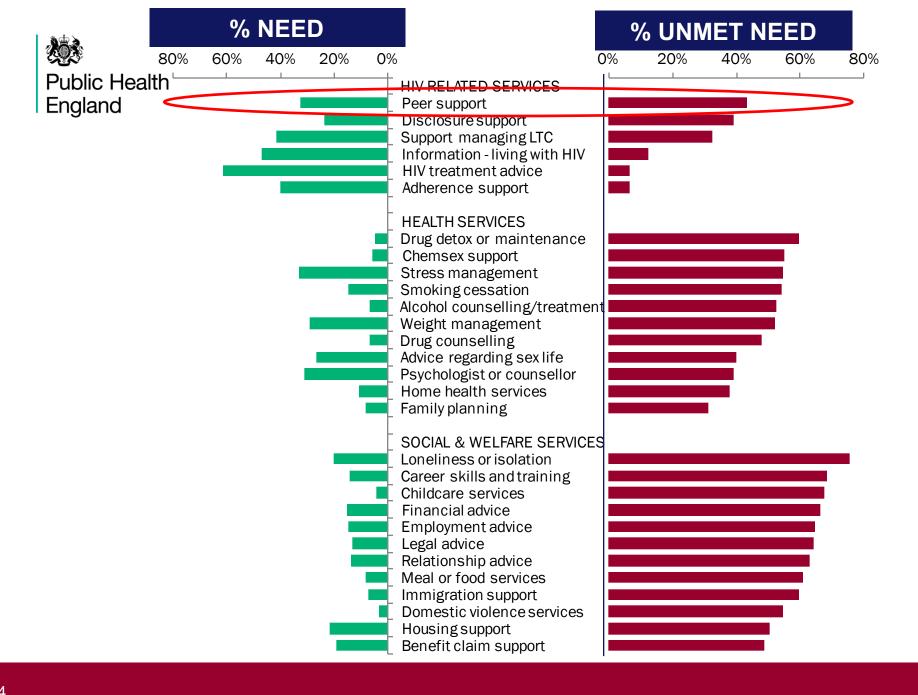
HIV treatment advice



Information about living with HIV (including websites)



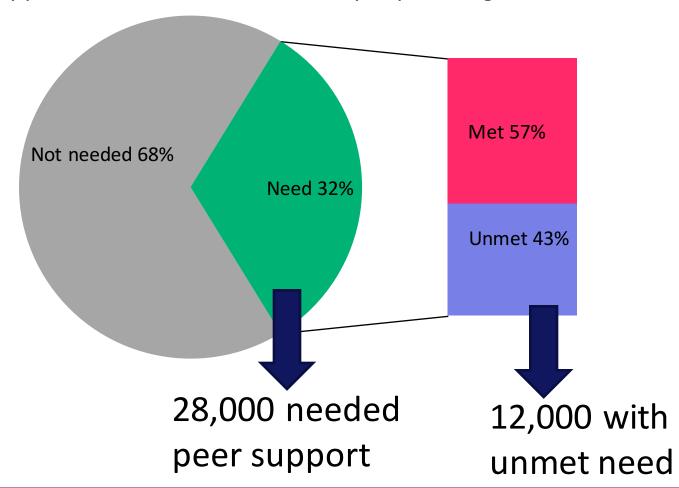


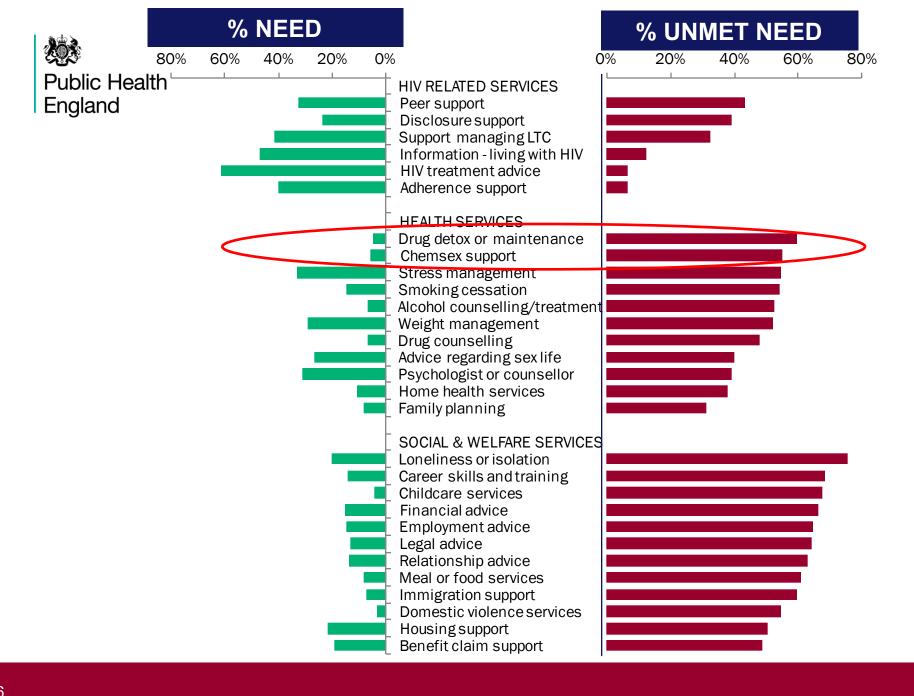




Public Health Peer support

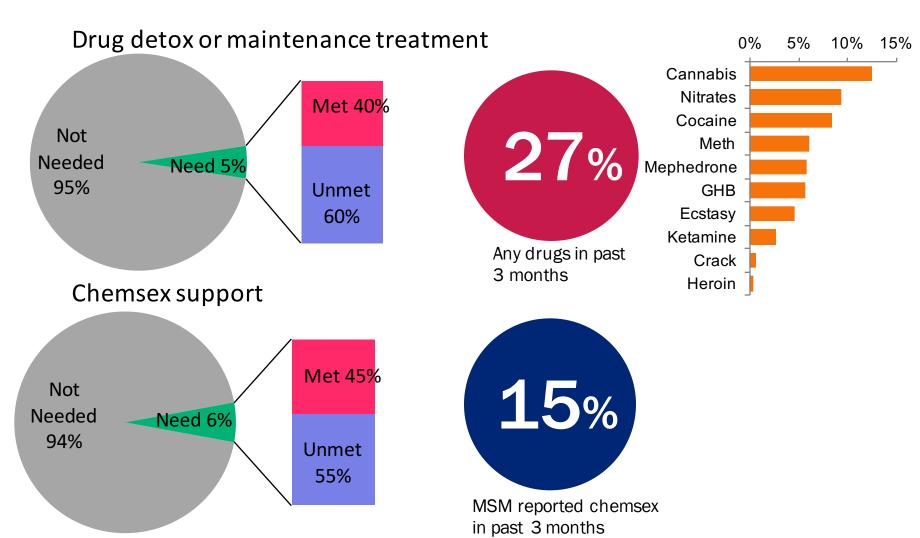
Peer support/social contact with other people living with HIV

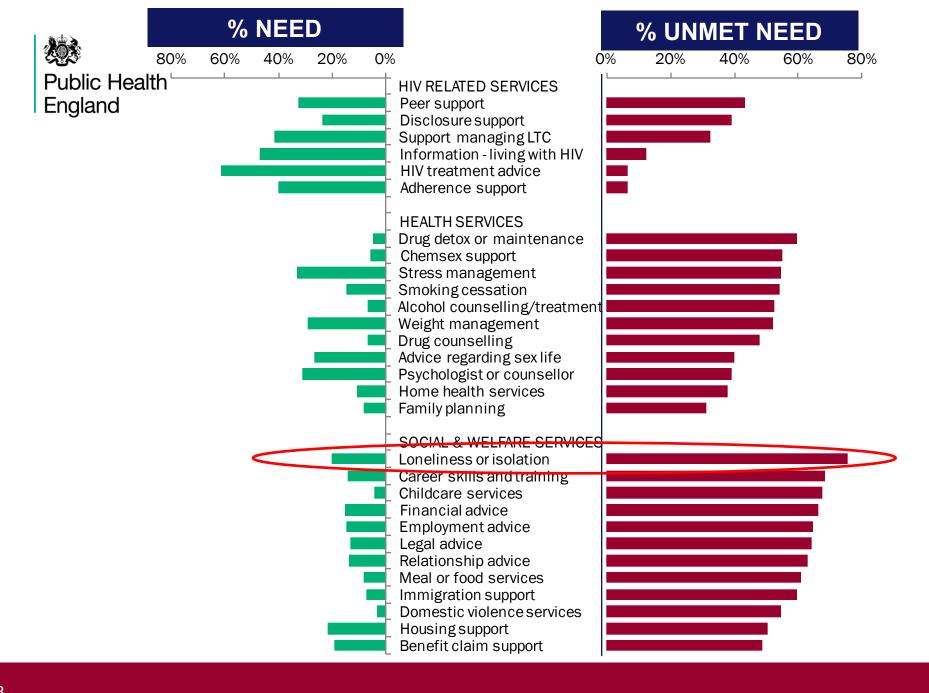






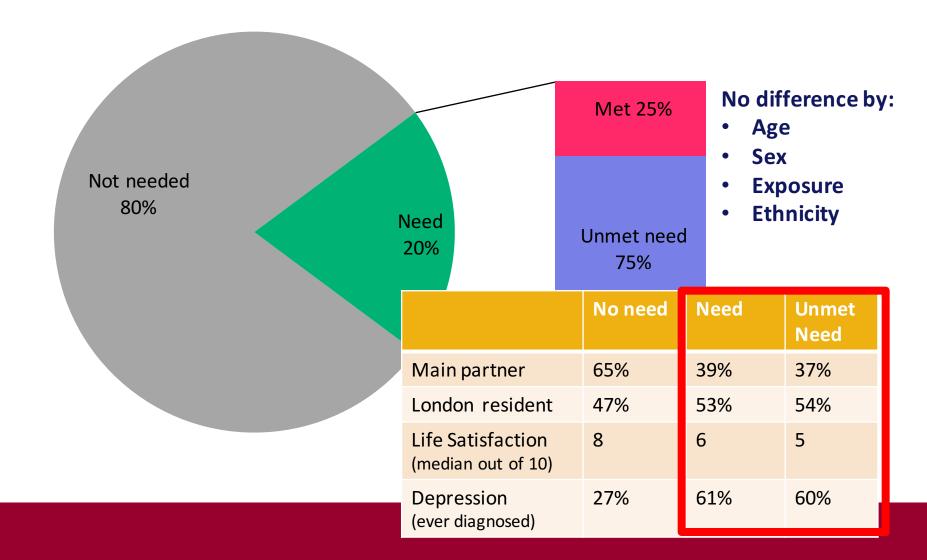
Drug treatment and Chemsex

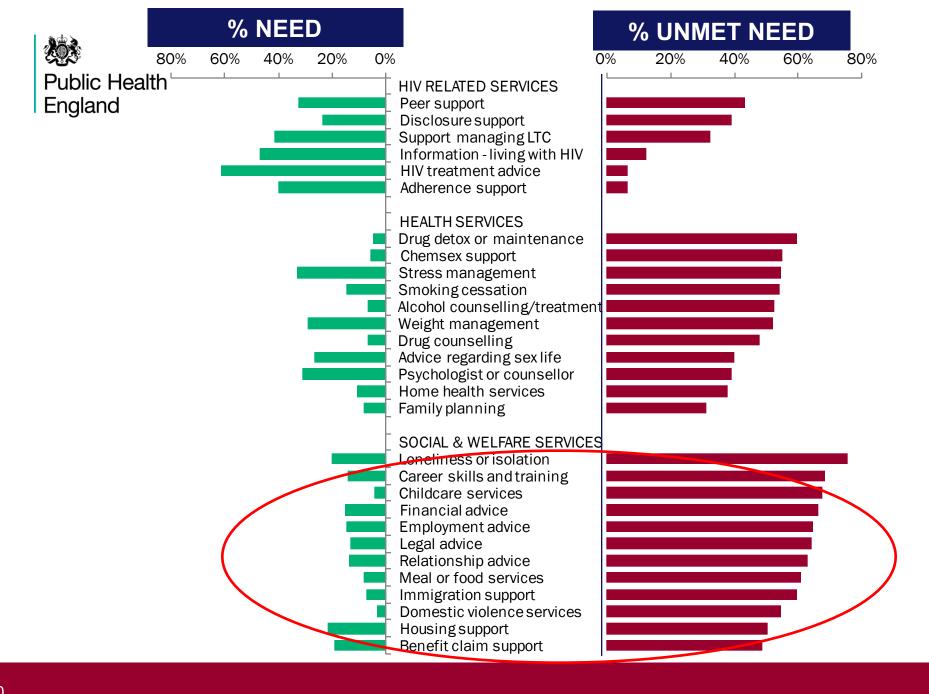






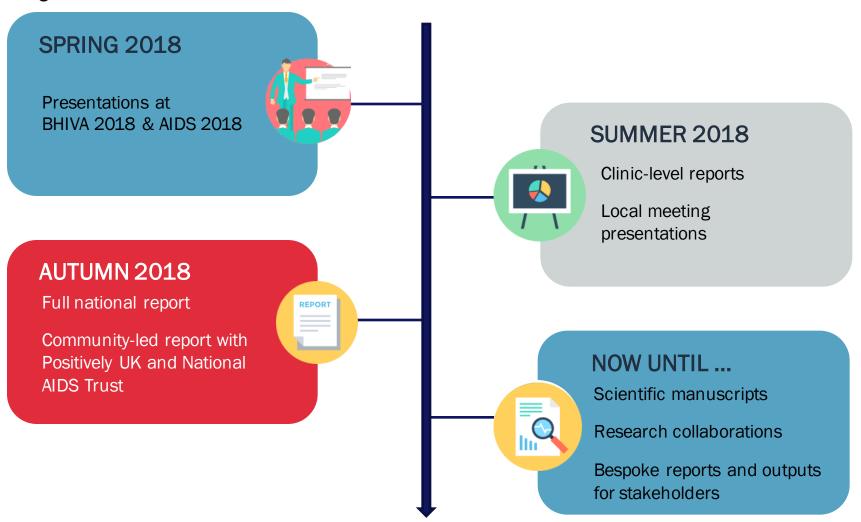
Help dealing with loneliness and isolation







Positive Voices 2017 outputs





Public Health Limitations

- Non-response bias
- Self-reporting does not always reflect actual need
- No specific detail on where, when, how services were accessed
- Limited data on why services were not accessed



Public Health Conclusions

- Provision of HIV-related services for those who need them is very good
- There are major gaps in the provision of social and welfare services, as well as certain health-related services
- This comprehensive needs assessment provides important data for local commissioners, health service providers and support organisations to identify gaps in service provision and inform the development of service specifications
- Further breakdowns (e.g. by risk-group, lifestyle risk behaviours, geography) are needed to inform advocacy and tailor local response





to all Positive Voices survey participants &

staff at 73 recruiting HIV clinics

Positive Voices Study Group

Dr Richard Gilson (UCL), Dr Anthony Nardone (PHE), Dr Maryam Shahmanesh (UCL), Prof Helen Ward (Imperial College) Prof Graham Hart (UCL), Prof Jane Anderson (PHE), Yusef Azad (NAT), Prof Jonathan Elford (City University), Dr Ann Sullivan (C&W), Dr Cath Mercer (UCL), Dr Alan McOwan (C&W), Jess Peck (NHS England), Prof Jackie Cassell (Brighton and Sussex Medical School), Julie Musonda (UK-CAB), Jane Bruton (NHIVNA), Meaghan Kall (PHE), Dr Valerie Delpech (PHE)