



## Poverty, financial stress and quality-of-life among PLHIV in Australia from 1997 to 2016



Funded by the Australian Government Department of Health

## Acknowledgements

**This study is only of value because so many people living with HIV in Australia have taken time and effort to participate in HIV Futures surveys and have generously supported the project for many years.**

# Acknowledgements

## **PLHIV organisations**

Living Positive Vic, Positive Life NSW, Positive Living SA, Queensland Positive People, Positive Women Vic, PozHet, Straight Arrows, Positive Living Centre

## **AIDS Councils**

WAAC, ACON, ACON Northern Rivers, VAC, AAC of the ACT, QAC, TasCAHRD, NTAHC

## **Clinicians and clinics**

MSHC, Northside clinic, RPA Sexual health, East Sydney Doctors, Kirkton Rd Clinic, Western Suburbs Haven, Interchange General Practice, Clinic 34, Cairns Sexual Health Service, Lismore Sexual Health, Dubbo Sexual Health, RDNS and many others.

## **Government**

Victorian Department of Health and Human Services, NSW Ministry of Health, Government of Western Australia Department of Health

## **Aboriginal and Torres Strait Islander services and multicultural health services**

Anwernekenhe National Aboriginal and Torres Strait Islander HIV/AIDS Alliance, Multicultural HIV and Hepatitis Service, Centre for Ethnicity and Health

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## Quality of life – the fourth 90



“The WHO strategy ... stops short of providing an explicit target for health-related quality of life. It thus fails to take into account the needs of PLHIV who have achieved viral suppression but still must contend with other intense challenges such as serious non-communicable diseases, depression, anxiety, financial stress, and experiences of or apprehension about HIV-related discrimination.”

*Lazarus et al 2016, Beyond the viral suppression of HIV – the new quality of life frontier, BMC Medicine*

## Method

- Cross-sectional survey, self report questionnaire completed online or hardcopy
- Data for HIV Futures 8 collected between July 2015 and June 2016
- Study advertised through PLHIV organisations, PLHIV networks, clinics and other services, online (social media, website advertising)
- This paper, descriptive analysis and hierarchical regression



## Number of participants in HIV Futures surveys (national and NSW)

	Futures 1	Futures 2	Futures 3	Futures 4	Futures 5	Futures 6	Futures 7	Futures 8
Year	1997	1999	2001	2003	2005/06	2008/09	2012/13	2015/16
National (N)	925	924	898	1059	982	1106	1058	895
Approx. percent of PLHIV in Australia	8.0	8.0	6.0	8.1	6.4	6.6	4.1	3.8

## HIV Futures 8: participants

	N	%
New South Wales	306	34.5
Victoria	265	29.9
Queensland	136	15.3
Western Australia	78	8.8
South Australia	65	7.3
Tasmania/ACT/NT	36	4.2

## HIV Futures 8: participants

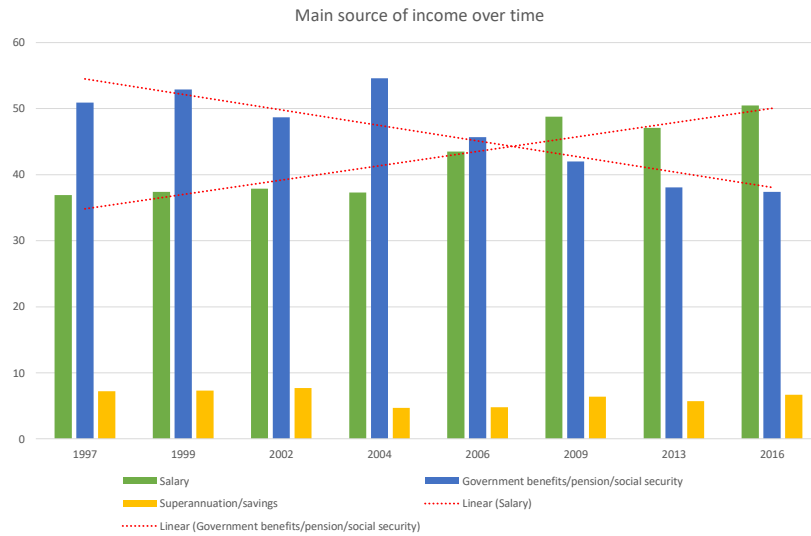
- Average age 51 years (19-86 years, range)
- 90.5% men
- 8% women
- 78% men identified as gay
- 2.3% Aboriginal or Torres Strait Islander
- 88.5% English is first language
- 72.5% born in Australia
- 73.2% live in inner city or suburbs
- 17.2% regional centre
- 9.7% rural

## ART use over time (all participants)

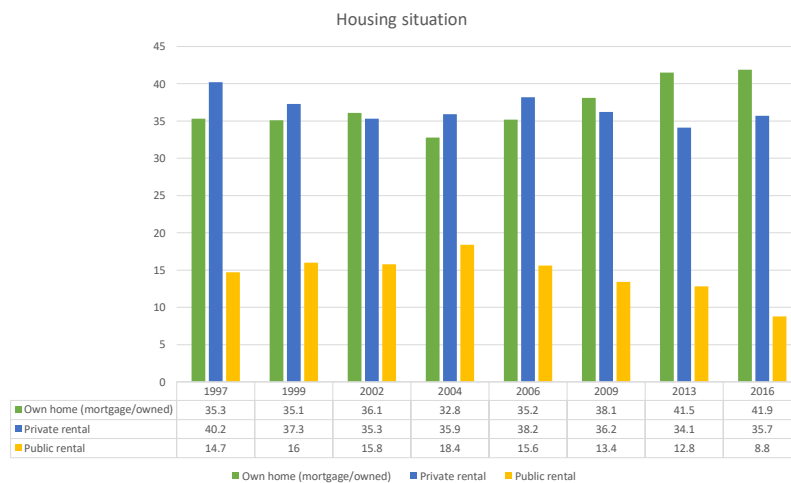
	Futures 1 1997	Futures 4 2003	Futures 7 2012/13	Futures 8 2015/16
<b>Currently using ART (%)</b>	79	71	88	97
<b>Not using (%)</b>	21	29	12	3
Never used (%)	67	44	72	70
Used previously (%)	33	56	28	30
<b>At most recent test:</b>				
<b>CD4 &lt;500 mm<sup>3</sup> (%)</b>	69	55	40	30
<b>Viral load undetectable (%)</b>	46	60	92	90*

\*91% among people currently taking ART

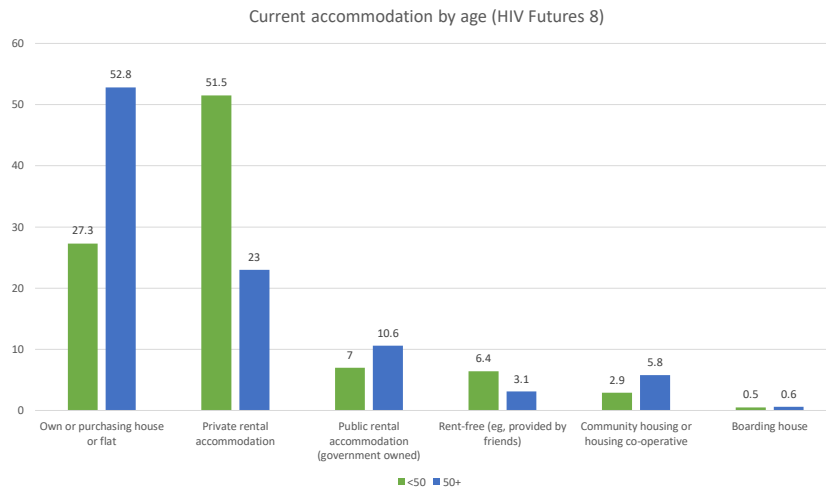
## Main source of income



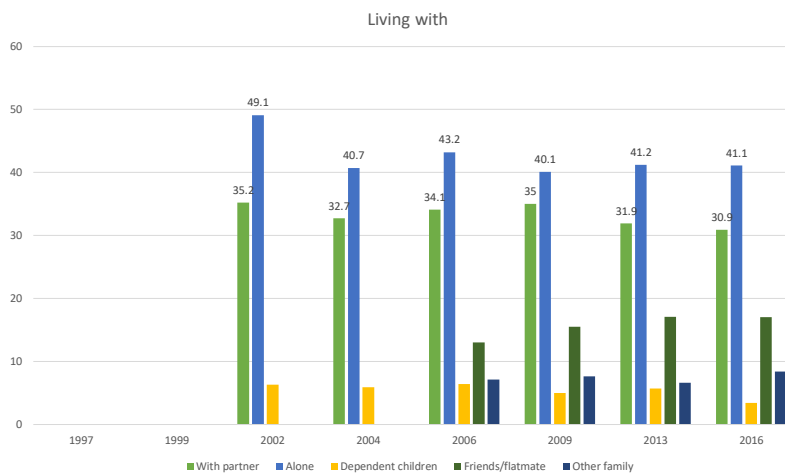
## Housing



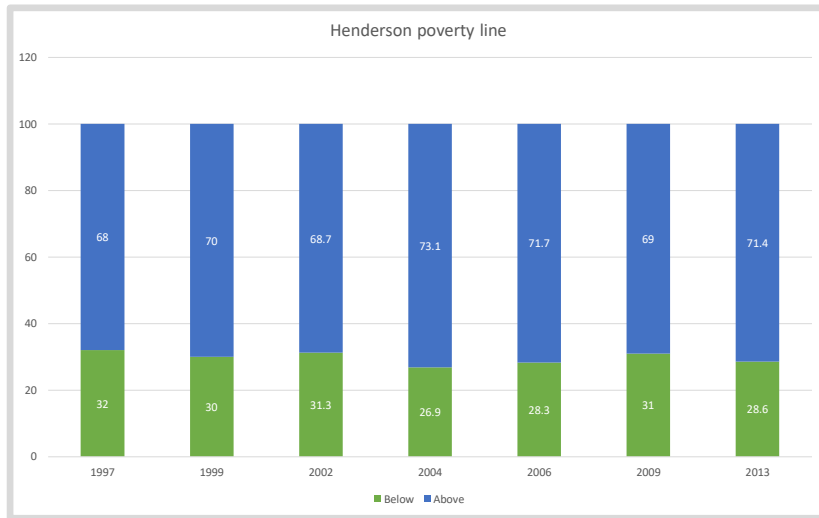
## HIV Futures 8: housing



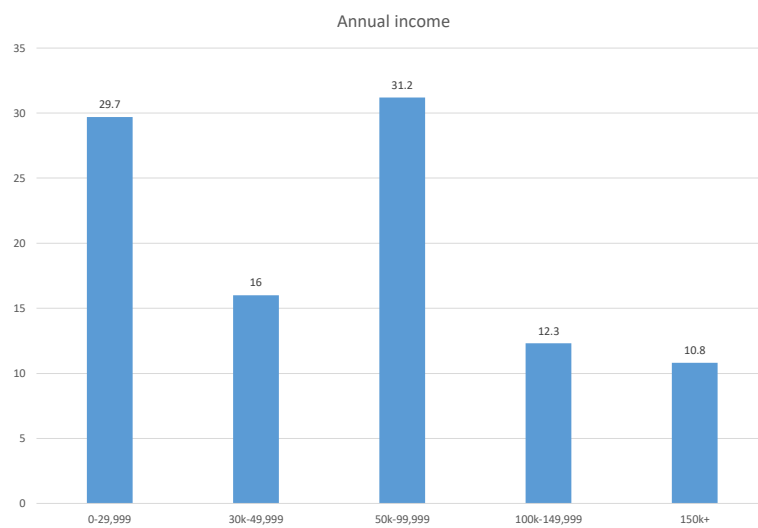
## Living alone



## Assessment of poverty



## Household income (2016)





## Indicators of financial stress

In the past 12 months did any of the following happened to you because of a shortage of money?	% (n)
Asked for financial help from friends or family	21.2 (190)
Could not pay electricity, gas or telephone bills on time	19.8 (177)
Went without meals	13.7 (123)
Asked for help from welfare or community organisations	12.6 (113)
Pawned or sold something	11.1 (99)
Could not pay the mortgage or rent on time	7.8 (70)
Was unable to heat home	6.8 (61)

23% (n=205) had experienced two or more of the above, indicating significant financial stress

## People who are financially stressed:

- Report poorer mental health
- Report poorer physical health
- Have been diagnosed with a mental health condition (74% vs. 45%) and taken medications for a mental health condition in the past 6 months (53% vs. 26%)
- Be diagnosed with an ongoing health condition other than HIV (mean number of co-morbidities 2.03 vs. 1.73)
- Report a lower level of resilience
- Report lower levels of social support
- Report experiencing higher levels of HIV-related stigma

NB. All differences significant compared to those reporting no financial stress, controlling for age, gender, sexuality

## People who are financially stressed reported:

- difficulties traveling to places they need to go (39.6% experience difficulty at least sometimes vs. 14%)
- difficulties paying for specialist medical services (35% vs. 10%)
- having experienced long waiting lists when accessing specialist services (31% vs. 17%)
- having experienced discrimination in a healthcare context (medical services, dentistry, hospital) in the past two years (26% vs. 13%)
- feel less capable of engaging actively with healthcare providers and have lower capacity to navigate the healthcare system (based on the Health Literacy Scale).

NB. All differences significant compared to those reporting no financial stress, controlling for age, gender, sexuality

## Use of community support services for PLHIV

Among participants experiencing financial stress, in past 12-months:

- 35% accessed financial assistance
- 17% accessed financial advice
- 15% accessed legal advice
- Many people also use pantry services and other practical support and care services

## Summary

- Overall increase in financial stability over time, but...
  - 46% living on household incomes substantially lower than the average Australian income
  - Nearly 1 in 4 experienced significant financial stress in past 12-months
- Poverty and poor health are often connected and that is evident in these data, including more challenges accessing healthcare services
- HIV related stigma and social isolation is also experienced to a greater extent among people who are financially stressed
- The community sector plays an important role in supporting PLHIV experiencing poverty



## Thank you

