WHAT DO THEY REALLY THINK? CONSUMER AND CLINICIAN PERSPECTIVES ON RETENTION IN CARE: A QUALITATIVE REVIEW

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Background:

While the HIV Treatment Cascade (Cascade) has been widely reviewed in the empirical literature, relatively little is understood about individual perspectives. Gathering data from consumers and frontline staff is imperative to complement the data collected in empirical studies. The present study sought to address this gap by conducting a qualitative analysis of clinician and consumer perspectives regarding barriers and potential solutions to improving one aspect of the Cascade, retention in care.

Methods:

Three focus groups comprising 16 clinicians (social workers, doctors, nurses and psychologists), and four groups comprising 14 consumers, were conducted at The Albion Centre (Albion), an inner city HIV clinic in Sydney. Participants were asked about their understanding of factors which impact retention in medical HIV care, as well as their suggestions to enhance service delivery to improve retention rates. Groups were recorded and transcribed, and NVivo v.11 software assisted thematic analyses.

Results:

Similarities between clinician and consumer perceptions of retention were identified, including factors such as mental health, service/process factors, and not prioritising HIV management in an era where it is considered a manageable chronic illness. Clinician responses favoured clinical factors (e.g. physical and psychosocial comorbidities), and consumers identified service delivery factors (e.g. clinic processes). A thorough review of the results will be presented, as well as their association with relevant local, state and national HIV health strategies.

Conclusion:

Understanding the perspective of consumers and frontline clinicians is an imperative platform from which to develop meaningful policy directives. As HIV management moves further into the chronic health domain, deepening our understanding of and response to clinician and consumer perspectives, in conjunction with empirical evidence, serves to provide a rounded model of retention to ensure targets for future policy and practice are meaningful to those they impact most.

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