

OPTIMISING SERVICE PROVISION FOR ASIAN-BORN MIGRANTS LIVING WITH HIV IN AUSTRALIA: A QUALITATIVE STUDY

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Background:

Existing literature has highlighted structural and social barriers to healthcare and well-being among people living with HIV (PLHIV) who have migrated to Australia. This study builds on this work, qualitatively exploring opportunities to optimise care and support for Asian-born PLHIV in Australia.

Method:

Data were collected through in-depth semi-structured interviews with 18 participants: nine individuals working in the HIV sector (e.g., peers, case managers), and nine Asian-born PLHIV residing in Australia. Interview questions focused on participants' experiences of delivering or receiving HIV-related care and support, with a particular focus on the intersection of HIV and migration. Data were analysed inductively using reflexive thematic analysis.

Results:

Participants' accounts revealed a tension between exclusion and empowerment in their experiences of HIV care in Australia. For many Asian-born PLHIV, navigating the healthcare system was shaped by structural and cultural challenges, including complex bureaucracy, language barriers, and intersecting experiences of racism and HIV-related stigma. These barriers limited access to timely care and compounded feelings of isolation, particularly when disclosing HIV status within their cultural or migrant communities. Despite these challenges, participants described culturally responsive peer-led initiatives, integrated mental health and legal services, and transnational HIV networks as potentially valuable resources for bridging service gaps and supporting continuity of care and well-being. Importantly, they emphasised the transformative role of community-driven approaches, highlighting the value of leadership opportunities for Asian-born PLHIV in shaping services that affirm their identities, experiences, and needs.

Conclusion:

Addressing both structural and identity-based barriers within healthcare, and fostering inclusive, holistic, and empowering services, may lead to better health and wellbeing outcomes among Asian-born PLHIV who live in Australia. Future research

should investigate the long-term impact of sustained engagement and identify strategies to strengthen support systems for migrant populations living with HIV.

Disclosure of Interest Statement:

This study is part of the broader project, HIV Futures 10, funded by the Australian Government's Department of Health and Aged Care and run by the Australian Research Centre in Sex, Health and Society (ARCSHS), based at La Trobe University in Melbourne. DM has received research grants and honoraria from Gilead Sciences and ViiV Healthcare unrelated to the current study.