

# **SOCIO-BEHAVIOURAL CHARACTERISTICS OF WOMEN PARTICIPATING IN THE Cohort of AustralLian wOmen WITH HIV (CLIO) STUDY**

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## **Background:**

CLIO is a prospective clinic-recruited cohort established in 2022 to address significant knowledge gaps around women living with HIV in Australia. We present key baseline data among the women in CLIO who self-completed a detailed socio-behavioural survey.

## **Methods:**

Using descriptive statistics, we summarise self-reported social determinants of health, including experiences with financial and food insecurity, stigma and discrimination, and health services access, as well as self-reported quality of life using PozQol.

## **Results:**

Ninety-seven women self-completed the CLIO survey, of whom 31 (32%), 30 (31%) and 36 (37%) were aged  $\leq 40$ , 41-50, and  $>50$  years, respectively. 41% were born in Australia/NZ, with 26%, 16% and 10% born in Asia, Africa and Europe, respectively. The majority were Australian citizens (66%) or permanent residents (24%). The highest level of education was university degree (35%) followed by certificate/diploma (31%). 59% were engaged in full-time or part-time employment (59%). 30% reported '*often*' worrying about finances or experiencing food security stress. 54% reported they '*do not feel comfortable*' disclosing their HIV status when attending a GP, specialist, hospital, or pharmacy, and 28% reported not having accessed any health services due to fear of social stigma or discrimination. While 26% of women felt they been treated differently by health care workers due to their HIV status, this was reported more among women  $\leq 40$  years (39%) compared with women aged 41-50 (23%) and  $>50$ -years (17%). Approximately 44% of women had low/moderate quality of life score ( $<45$ ): 48%, 36% and 47% for women aged  $\leq 40$ , 41-50, and  $>50$ -years.

**Conclusion:**

Financial stress, fear of stigma and discrimination, and low/moderate quality of life were prevalent across the culturally and age-diverse CLIO cohort. These findings highlight potential issues and barriers for women accessing both HIV and other non-HIV related clinical care and require further investigation.

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