Patient experiences with HIV/AIDS care in Ontario: Findings from the OHTN Cohort Study (OCS)

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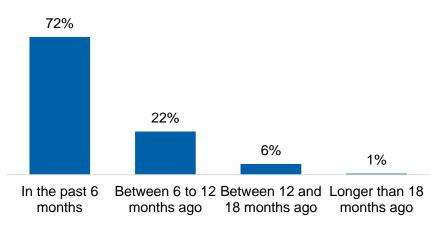


- The OHTN Cohort Study (OCS) is a longitudinal study representing >8,000 participants who are living with HIV and receive care in 15 HIV clinics in Ontario.
- The relationship between higher patient satisfaction and retention in HIV care have been well documented in literature.
- Patients' evaluation of various aspects of the HIV care experiences can help identify potential unmet needs.
- We examined 2019-2020 patient survey data from OCS participants evaluating services provided during their most recent clinic visit by:
 - HIV care providers: excellent/very good/good/fair/poor
 - non-HIV providers: always/often/sometimes/rarely/never
 - clinic staff : excellent/very good/good/fair/poor
- 2691 participants were included in the analysis.
- Participant characteristics:
 - 77% male, 23% female.
 - Median age was 54.
 - White (60%) , Black (22%), Asian /Latin American/Arab (12%), multi-race (4%), Indigenous (2%).

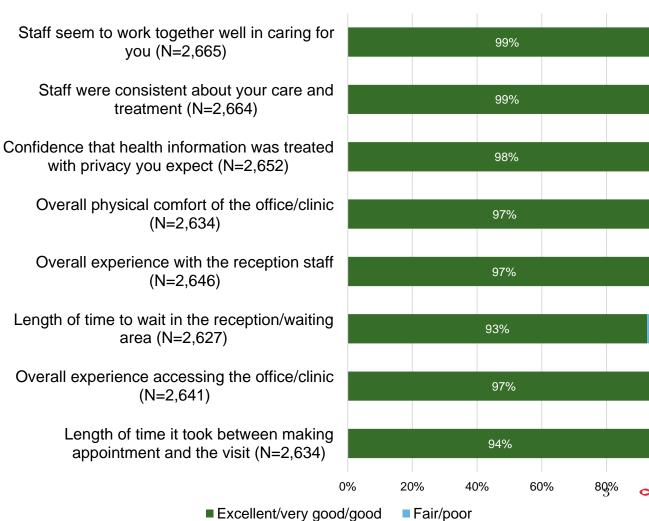


Results: Most participants have recently seen their HIV care provider and indicate high levels of satisfaction with clinic and staff

Last time visited primary HIV care provider



- 94% visited their primary HIV provider in the past year.
- 97% evaluated their recent visit as 'excellent/very good/good'.
- 98% rated how clinic staff worked together (providing care and maintaining privacy) 'excellent/very good/good'.



Care experiences in HIV Clinic



Results: Participants have high satisfaction with HIV care provider and overall positive experiences with non-HIV providers

Care experiences with Primary HIV healthcare providers Care experiences with other healthcare providers They made you feel comfortable Feel comfortable talking about specific 92% 98% disclosing your status (if needed). healthcare needs (e.g.reproductive... They had adequate knowledge of HIV to Were confident in their knowledge about 88% 99% provide treatment/care (N=1,703) treating HIV (N=2,657) Did not make you feel stigmatized or They did not make you feel stigmatized 99% 94% discriminated against (N=2,651) or discriminated against (N=1,820) Gave you clear instructions about what They gave you clear instructions about 99% 93% you need to do after your visit (N=2,645) what you need to do after your visit... Treated you with dignity and respect They treated you with dignity and respect 99% 90% (N=2,675) (N=1,835)Were sensitive to your needs and They were sensitive to your needs and 98% 90% preferences (N=2,660) preferences (N=1,827) Explained things in a way that was easy They explained things in a way that was 99% 94% to understand (N=2,674) easy to understand (N=1,834) Spoke using a language you could They spoke using a language you could 99% 96% understand (N=2,672) understand (N=1,833) Listened to your concerns (N=2,668) 98% They listened to your concerns (N=1,827) 91% Knew about your medical history They knew about your medical history 98% 87% (N=2,647) (N=1.817)Excellent/very good/good Fair/poor Often/Always Never/Rarely/Sometimes

• Almost all participants (99%) reported that they were confident in their primary HIV provider's knowledge treating HIV

 87% reported that their non-HIV providers were often/always aware of their medical history and 88% reported that their non-HIV providers often/always had adequate knowledge of HIV to provide treatment/care.

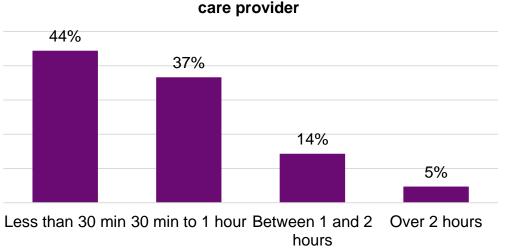
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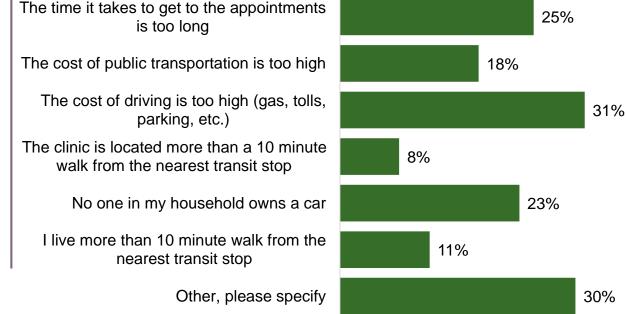


- 29% of respondents experience some challenge in accessing HIV care.
- The top challenges were related to transportation expenses, delays in getting appointments and health-related accessibility

Time takes to travel (one-way) to current primary HIV

• 19% travelled an hour or more to their HIV clinic.





Challenges in accessing primary HIV care provider

Implications: While participants were satisfied with their care, they indicated less satisfaction for non-HIV providers due to gaps in communication. While participants indicate high quality HIV care, their care is largely in HIV specialty clinics. With challenges in travel, the expansion of virtual care and e-consult could improve access to high quality care for people living with HIV in Ontario.

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