

Exploring Experiences Engaging in Exercise from the Perspectives of Women Living with HIV: A Qualitative Study

Nora Sahel-Gozin ¹, Kelly K. O'Brien ^{1,2}, Mona Loutfy ^{1,3}

¹. Institute of Health Policy, Management and Evaluation (IHPE), Dalla Lana School of Public Health, University of Toronto, Toronto, ON, Canada,

². Department of Physical Therapy, University of Toronto, Toronto, ON, Canada,

³. Department of Medicine, University of Toronto, Toronto, ON, Canada

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School of Public Health



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Email: nora.sahel.gozin@mail.utoronto.ca

Background & Purpose



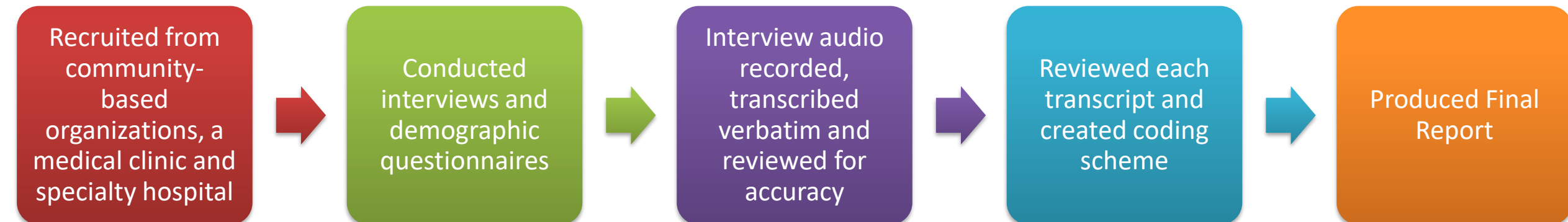
- Increasing role for rehabilitation, specifically **exercise** to enhance health and well-being aging with HIV.
- **Women living with HIV**
 - lower exercise engagement compared to men living with HIV.
 - higher likelihood of not achieving physical activity guidelines compared to their male counterparts.
- Gender is important to acknowledge when understanding engagement in physical activity.
- Limited representation of women living with HIV exists in the exercise literature - difficult to translate evidence on effect and engagement in exercise for this population.
- Need to better understand why women living with HIV may not meet exercise recommended guidelines.
 - Further research needed to explore HIV-positive women's experiences with exercise.

Purpose: To explore experiences engaging in exercise among women living with HIV, specifically i) nature and extent of exercise, ii) factors that characterize exercise experiences, iii) perceived impacts, iv) barriers and facilitators, and v) strategies for uptake.

Methods

- **Design:** Qualitative descriptive study involving online semi-structured interviews.
- **Participants:** Women (cis or trans) living with HIV, 18 ≥ years in Toronto, Canada who may or may not have engaged in exercise.
- **Sampling Strategy:** Purposive and snowball sampling.
- **Recruitment Minimum:** Half women living with HIV who engage in exercise. Attempt to obtain diversity in exercisers and non-exercisers.
 - ‘Engagement with exercise’ defined as meeting the CSEP physical activity guidelines of ‘accruing at least 150 minutes of moderate-to-vigorous-intensity aerobic physical activity within the week of the interview.’
- **Semi-structured interviews:** Interview guide to asking probing questions that included:
 - 1) nature and extent of engaging in exercise,
 - 2) perceived impact of exercise,
 - 3) facilitators and barriers to exercise, and
 - 4) strategies for future exercise engagement.
- **Demographic Questionnaire:** used a web-based questionnaire platform: personal, HIV and health, and exercise characteristics.

Recruitment, Data Collection, and Analysis Steps:



Results

Table 1. Characteristics of participants

Characteristics of Women living with HIV	10 participants
Median Age	52 years (57, 59)
Ethnic Background	
Black of African	4 (40%)
White	2 (20%)
Indigenous	2 (20%)
White and Indigenous	1 (10%)
South Asian	1 (10%)
Have Children	6 (60%)
Median Year of HIV Diagnosis	1999 (1993, 2010)
Exerciser	3 (30%)
Non-exerciser	7 (70%)

Figure 1. Components that characterize women’s experiences with exercise

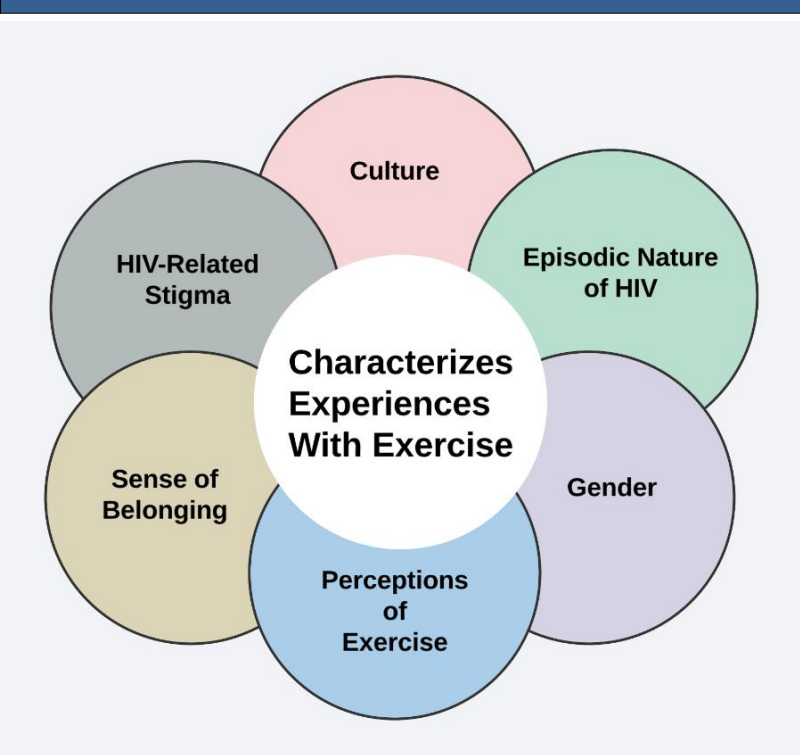


Table 3. Components that characterize women’s experiences with exercise and supporting quotes

Culture	<i>“... culturally, a woman with her child, there is uh something, she cannot do like exercises, she there just to cook, to go to bring the children to school, to wash clothes...” (P2)</i>
Gender	<i>“...there was a time I almost gave up on exercise all together ... You have a full-time job and you have small kids, you’re attending diapers, they’re crying, they’re not well and you have to cook. So much to balance, you know, very little time in a day.” (P5)</i>
HIV-Related Stigma	<i>“And, people think they’re going to catch [HIV]... So, it’s like a woman going to the gym and people may think, you know, uh negative things the dirty looks, the rudeness, the ignorance as a whole, right?” (P6)</i>
Episodic Nature of HIV	<i>“...because of my [HIV] medication, I get tired and uh so I might not have a good day with exercise.... Depends on how I feel when I wake because I also have diabetes as well, right?” (P6)</i>
Sense of Belonging	<i>“With a teacher, you go [exercise] and let’s go! Put the music and everyone [exercises]... because so many people around, you have to [exercise].” (P7)</i>
Perceptions of Exercise	<i>“Like working out is not... it’s a luxury... And, because of that, a lot of people don’t work out.” (P3)</i>

Table 2. Facilitators, barriers and strategies for exercise uptake

Facilitators to Exercise	Barriers to Exercise	Strategies for Exercise Uptake
<ol style="list-style-type: none"> 1) Achieve a healthier lifestyle 2) Exercise to curb negative thoughts 3) Having an exercise buddy 4) Financial incentives from community-based organizations 	<ol style="list-style-type: none"> 1) Limited resources 2) Restricted gym hours 3) Limited financial support 4) Cold weather 	<ol style="list-style-type: none"> 1) Create social interactions 2) Provide online classes 3) Raise awareness 4) Practical support, (child-care and financial incentives)

Summary & Conclusions



Summary

- To our knowledge, this study was the first of its kind to explore the intersecting experiences and perceptions of exercise from the perspectives of women living with HIV in Canada.
- Results indicated that these multiple layers of intersecting components comprised one's lived experiences with exercise and can account for variability in engagement with exercise amongst women living with HIV.

Conclusions

- This study provides a better understanding of the complexity of the experiences and perceptions of experiences with physical activity and exercise among women living with HIV.
- Results may help to inform the future tailored delivery of rehabilitation exercise-focused interventions for women living with HIV in the community. This may increase skills and capacities to enable women living with HIV to make informed choices to improve their health, and health care engagement.

CHALLENGES

- Included: periods of low recruitment, lack of non-verbal communication for participants without web cameras, and incomplete demographic questionnaire.

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