

Evaluation of a peer intervention program in the hospital setting to improve people newly diagnosed with HIV's health-related quality of life.

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October 11-13, 2022 | Barceló Sevilla Renacimiento



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Background

- ART → ↑ Life → ¿Quality?
 - Anxiety
 - Depression
 - Stigma
- Peer Education → 
- Spain → **Prospective, randomized, two-arm controlled study to evaluate two interventions to improve adherence to antiretroviral therapy in Spain**
Isabel Ruiz ¹, Antonio Olry, Miguel Angel López, José Luis Prada, Miguel Causse
- Improves health-related quality of life?

Are peer interventions for HIV efficacious? A systematic review

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Affiliations + expand

PMID: 21598034 PMCID: PMC3607378 DOI: 10.1007/s10461-011-9963-5

[Free PMC article](#)

Abstract

Behavioral interventions to prevent HIV or assist HIV-positive persons often incorporate peers, yet empirical support for their efficacy is only recently accumulating. We describe the results of a review of the global literature, **identifying 117 studies evaluating the efficacy of peer-based interventions** in the area of HIV/AIDS. About half were conducted in the developing world and half in Western nations. Across a range of populations and intervention modalities, the majority of studies provided some support for peer interventions according to outcome indicators in the domains of sexual risk behavior, attitudes and cognitions, HIV knowledge, and substance use. However, outcomes assessed using biomarkers and other non-self-report variables were less likely to indicate intervention efficacy. Overall, findings suggest that we can have some confidence in peer interventions, yet more data are needed demonstrating an effect in the most rigorous study designs and with outcomes that are not potentially affected by respondent bias.

Methods

- Quasi-experimental single-group design
 - Session 1: diagnosis
 - Session 2: results collected/ ART begins
 - Session 3: 1 month after the start of ART
 - Session 4: 4 months after ART
- Independent variable: interventions
- Dependent variables

Assessing quality of life in people with HIV in Spain: psychometric testing of the Spanish version of WHOQOL-HIV-BREF

María Jose Fuster-RuizdeApodaca ^{1, 2}, Ana Laguna ³, Kelly Safreed-Harmon ⁴, Jeffrey V Lazarus ⁴, Santiago Cenoz ⁵, Julia Del Amo ^{6, 7}

- ANOVA
- ANCOVA

Development of a New Instrument for the Assessment of Psychological Predictors of Well-being and Quality of Life in People with HIV or AIDS

Eduardo Remor, Maria José Fuster, Rafael Ballester-Arnal, Sandra Gómez-Martínez, Carmina R. Fumaz, Marian González-García, et al.

AIDS and Behavior
ISSN 1090-7165
AIDS Behav
DOI 10.1007/s10461-012-0230-1




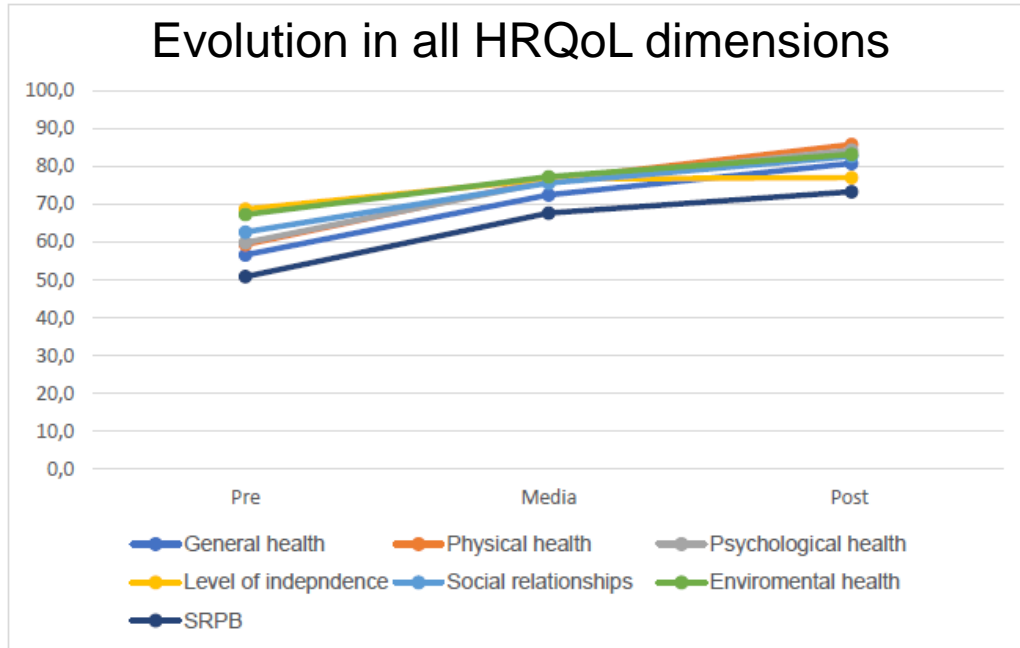
Table 1. Sociodemographic and participation data.

total N participants	43
N Questionnaires	
Initial measurement (baseline)	43
Two measures	4
Three measures	30
Sociodemographic data	
Sex, n (%)	
Man	40 (93)
Woman	3 (7)
Age (M ± SD)	39.14 ± 10.18
Educational level	
No studies	3 (7)
Primary	10 (23.3)
Secondary	14 (32.6)
Higher	16 (37.2)
Work situation	
Working with contract	21 (48.8)
Working without contract	4 (9.3)
Doesn't work	14 (32.6)
Occupational disability	1 (2.3)
No reply	3 (7)
Sexual orientation	
Heterosexual	8 (18.6)
Homosexual	25 (58.1)
Bisexual	7 (16.3)
Prefers not to respond	3 (7)
Transmission pathway	
Sexual relation	41 (95.3)
Doesn't know	2 (4.7)
ART Start Time (days, M±SD)	20.47±18.04



Results

- Significant **+** Evolution all the predictors

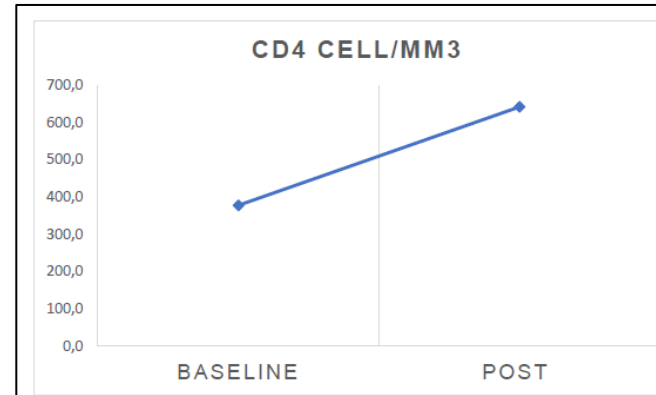


- Changes between the 3 evaluation measures ($p < 0,05$)

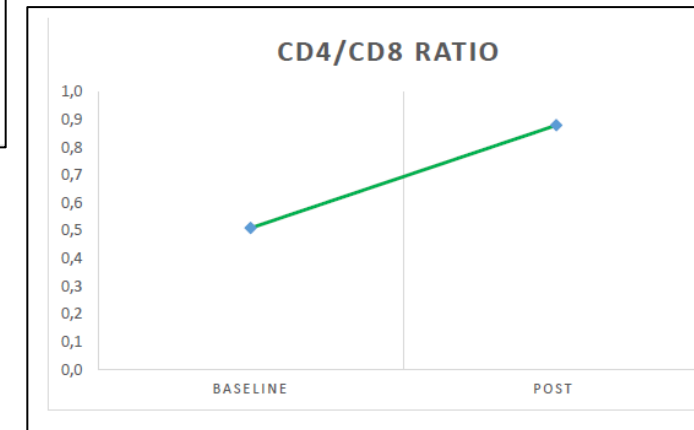
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Avoidant coping ($p < 0,05$)



- Psychological health ($p = 0,12$)
- Social relationships ($p = 0,13$)



- Social relationships ($p = 0,44$)
- Overall health perception ($p = 0,68$)

Conclusions

- The results showed a positive evolution in all the dimensions of participants' HRQoL.
- There was a large change in health perception, physical health, psychological health, and environmental health.
- The change was moderate to high in the social and spiritual relationship dimensions, which measure existential issues relevant to the PLHIV process such as stigma, concern about the future, and death. In line with other studies, this was the dimension where participants scored the lowest.
- A positive change in most of the measured quality-of-life predictors was also found after the intervention.

Conclusions

- We also highlight the reduction in risk predictors of quality of life such as dissatisfaction with sexuality, negative disease representation, perceived and internalized stigma, depressive mood, and emotional loneliness.
- The results showed that the improvement in psychological health and social relationships resulting from the peer intervention was associated with immune recovery.
- This peer intervention assessment study increases the evidence of the effectiveness of a peer intervention in the field of positive prevention. Moreover, the intervention carried out is structured and designed according to the existing evidence on the protective and risk factors of quality of life

Conclusions

- In sum, this study represents an important advance in the area of evaluation of peer intervention programs for positive prevention in the hospital setting

Thank you!

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