





Exploring strategies to support the health and well-being of people living with HIV

Thank you for taking part in our study. We are pleased to share the findings of this research and the next steps for our project.

Background to the project

People living with HIV in the UK on treatment have normal life expectancy and receive excellent HIV clinical care. However, this care does not necessarily help with some social or psychological issues that people may face (for example, housing, employment or mental health problems).

The NHS Long Term Plan (<u>https://www.longtermplan.nhs.uk</u>) aims for people with long-term health conditions, like HIV, to be fully involved in decisions about their health and wellbeing. It recognises that 'what matters to someone' is not just 'what's the matter with someone'. Health and wellbeing coaching, social prescribing and community-based support could help people to better manage their own health and improve well-being but have not been tested yet in people with HIV in the UK.

The Needs Informed model of Care for people living with HIV (NICHE) (<u>www.niche.ac</u>) is a five-year NIHR funded research programme aiming to design a new, person-centred model of care to improve the health and well-being of people living with HIV. This includes the design and testing of a health coaching and social prescribing intervention in a trial.

What did we do and who took part?

Last year, we conducted focus groups with people living with HIV and interviews with clinical and non-clinical workers who support people living with HIV. We spoke with 37 people living with HIV and 20 clinical/non-clinical workers.

We wanted to understand the challenges and concerns of people living with HIV in England and what 'living well' means.

We also asked for feedback to help us design a health and well-being coaching intervention. This intervention is being tested in a randomised controlled trial called SPHERE within the NICHE programme. The aim of the trial is to see whether the intervention improves health and well-being in people with HIV.

What did we find?

People with HIV described living well to include:

- living in an unrestricted way (for example, experiencing life in the same way as other people)
- a desire to live fulfilled and satisfying sex lives without fear of stigma
- aspirations of choice (or autonomy) in health and healthcare (for example, having the selfconfidence to advocate for the services you need)

We found that stigma and discrimination continue to affect the health and well-being of people with HIV. Living well means living beyond an HIV status and having good social support (from friends, family and loved ones) and supportive intimate relationships so people age well with HIV and live long, fulfilled and happy lives. The feedback from the focus groups and interviews was also used to design our intervention (see examples in Table below).

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You said	W	/e did
• People should have a choi (format) the intervention	 is delivered face to build rapping coach. Further sessions preferred by the 	sions will be face-to- port with a health will be in the format person being coached online, by phone).
 There was no consensus o number of coaching session delivered 	•	receive a maximum of essions over 3-months.
 It was undecided who worplaced to deliver coaching Some people working in H felt a peer with lived experies be best, but people with H a trained health professio works in HIV services. 	g sessions.professionals have coaches across se includes HIV nursHV servicescoaches across se includes HIV nursHIV preferredHIV pharmacist across se includes HIV nurs	ve been trained as
Staff delivering the intervention of the	receive monthly trained behaviou monthly drop-in social prescribing All have received complete a diary	training and will to reflect on sessions to online support and
People may face barriers a support services	social prescribing closely with local prescribing link v organisations and networks. • Coaches will rece directory that ou resources. This s	e direct contact with a g lead who works l authority social workers, Third Sector d primary care local eive a social prescribing utlines local community hould mean nobody is eiving the support they

need and information on services is

kept up-to-date.







- Reaching the end of sessions may be difficult
- The coaches' training covered topics including boundaries, expectation setting and closure planning.

What happens next?

- The findings about the concerns and ongoing challenges being faced by people with HIV in England have been written up into a journal article. We can share this once it is published.
- Recruitment to the SPHERE trial will open this summer across seven HIV clinics in England.
- We will be interviewing trial participants and staff throughout the duration of the SPHERE trial to understand their views and experiences of coaching sessions, including how they might be improved. Interviews will form part of a process evaluation sub-study.

Where can I learn more?

- For more information on the NICHE research programme, please visit: <u>www.niche.ac</u>
- For more information on the SPHERE trial, please visit: <u>https://www.birmingham.ac.uk/research/bctu/trials/pd/sphere</u>
- If you would like to be kept updated on the study, please email: info@niche.ac

Study details

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