



Queensland Positive People

INCLUSIVE, INNOVATIVE HIV SERVICES

Positive Change for Positive People

Nathan Butler

Peer Project Officer



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## Acknowledgments

- ☐ ViiV Healthcare – Funding
- ☐ University of Southern Queensland
- ☐ University of Queensland
- ☐ Ethnic Communities Council Queensland
- ☐ QPP's Peer Navigation Team
- ☐ People Living With HIV



## Project Team

- ☐ Owen O'Neil, Katy Seto, Alicia Carter – Provisional Psychologists, University of Queensland
- ☐ Kammna Deo – Student Placement, University of Southern Queensland
- ☐ Chris Howard – Executive Programs Manager, QPP
- ☐ Satrio (Tiko) Nindyo Istiko – Peer Navigation Team Leader, QPP
- ☐ Nathan Butler – Peer Project Officer





## Project Background

- Funded in 2017 to develop Peer Led Stigma Interventions with a focus on Internalised Stigma
- Positive Change for Positive People is underpinned by MIPA Principles
- PLHIV empowering other PLHIV to have an increased awareness of internalised stigma and placing tools in their hands on how to challenge that stigma.
- Queensland HIV action plan 2016 – 2021;
  - *Outcome 4.4.2 Support the implementation of resilience building programs for PLHIV and Outcome 4.3 Provide information and support for people who have experienced HIV related stigma and discrimination.*
- 2018 – 2022 National HIV Strategy;
  - *Eliminating the negative impact of stigma, discrimination, and legal and human rights issues on people's health, as well as minimising the personal and social impact of HIV.*



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## Project Aims

Aim	Anticipated Outcome
1. <b>Reduce the impact of internalised stigma on the wellbeing of PLHIV</b>	<ul style="list-style-type: none"> <li>• Participants show decreased in levels of internalised stigma post intervention</li> <li>• Participants show an increase in resilience post intervention and for resilience to increase or stabilise over time</li> </ul>
2. <b>Increase resilience and wellbeing of PLHIV</b>	<ul style="list-style-type: none"> <li>• Participants show a decrease in distress scaling post intervention with further decreases expected over time</li> <li>• Participants show an increased quality of life as measured by PozQoL</li> </ul>
3. <b>Build upon the capacity of QPP's Peer Navigation program to deliver peer led PLHIV stigma reduction activities</b>	<ul style="list-style-type: none"> <li>• Rollout and uptake of the Resilience and Stigma module through the Peer Navigation Program</li> </ul>



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## Core Activities

- Two core activities
  - Workshop – Positive Change for Positive People
  - Peer Navigation Module – Resilience and Stigma
- Workshop
  - Research
  - Development
  - Peer Navigator Focus Test
  - Final Review
  - Implementation
  - Evaluation
- Peer Navigation Module
  - Development
  - Content and Design Review
  - Final Review
  - Implementation
  - Ongoing Evaluation



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## Workshop

- Expression of Interest
  - Recruitment through case managers, social media, online spaces, peer navigators, self referral
- Screening
  - Phone Interview
  - Pre Intervention Baseline Survey
- Two day workshop
  - Day 1: Understanding Stigma, Understanding Internalised Stigma, Understanding Compassion
  - Day 2: Teaching and engaging with Compassion Focused Therapy
- Follow up
  - Online survey conducted at the one month, three month and six month periods post intervention



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Demographic Data		N	%
Participants Per Workshop	Brisbane 1	3	30%
	Brisbane 2	3	30%
	Rockhampton	4	40%
	<b>Total</b>	10	100%
Gender	Male	6	60%
	Female	3	30%
	Other	1	10%
	<b>Total</b>	10	100%
Age	18 – 25	1	10%
	26 - 30	3	30%
	31 – 35	3	30%
	36 – 40	1	10%
	45+	2	20%
	<b>Total</b>	10	100%
Ethnicity	Caucasian	6	60%
	Sub – Saharan African	1	10%
	South East Asian	1	10%
	Aboriginal and/or Torres Strait Islander	1	10%
	Other	1	10%
	<b>Total</b>	10	100%
Sexual Orientation	Gay	4	40%
	Heterosexual	4	40%
	Other	2	20%
	<b>Total</b>	10	100%



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One Month Follow Up Data	Participant 1	Participant 2	Participant 3
<b>Internalised Aids</b>			
<b>Related Stigma Scale</b>			
Pre Intervention Score	4	4	1
Post Intervention Score	3	1	0
<b>Pre to Post Score Difference</b>	- 1	- 3	- 1
<b>Self-Compassion Scale</b>			
Pre Intervention Scores	50	35	33
Post Intervention Score	43	35	25
Pre to Post Score Difference	- 7	+ 0	- 8
<b>Brief Resilience Scale</b>			
Pre Intervention Score	25	18	21
Post Intervention Score	27	19	10
<b>Pre to Post Score Difference</b>	+ 2	+ 1	- 11
<b>K-10 Scale</b>			
Pre Intervention Score	19	21	34
Post Intervention Score	18	17	37
<b>Pre to Post Score Difference</b>	- 1	- 4	+ 3
<b>PozQoL Scale</b>			
Pre Intervention Score	32	21	DNC
Post Intervention Score	43	24	DNC
<b>Pre to Post Score Difference</b>	+ 11	+ 3	DNC



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## Participant Feedback

- *'The workshop has been life changing for me. The skills and knowledge I left with have helped changed my life for the better, I am so much happier and healthier now'* – Male, 51, Brisbane
- *'I still think about the workshop every day and it continues to help me very much. I am so grateful to have been able to attend and participate in the workshop and would love to participate in any future workshops if they are held'* – Female, 57, Brisbane
- *'This is the best workshop I have ever been to. I really hope we get more like this. It has been really helpful for me and I have learnt so much'* – Female, 49, Rockhampton



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## Peer Navigation Module

### RESILIENCE AND STIGMA

RESILIENCE - THE ABILITY TO BOUNCE BACK IN THE FACE OF ADVERSITY

#### INSIDE THIS MODULE

- 01 WHAT IS STIGMA?
- 02 THE IMPACTS OF STIGMA
- 03 ACTIVITY: UNDERSTANDING OUR THOUGHTS, FEELINGS AND BEHAVIOURS
- 04 COMPASSION AND SELF-STIGMA
- 05 ACTIVITY: BUILDING RESILIENCE THROUGH SELF-COMPASSION

### WHAT ARE THE IMPACTS OF STIGMA?



Stigma affects the entire community through perpetuating fear and false information about the HIV virus.

Stigma impacts people in different ways however some of the common experiences are the following:

- Fear of being tested for HIV
- Not engaging with health care providers or treatment
- Hiding their status from friends and family
- Not seeking new opportunities in life
- Being pessimistic about their future
- Poorer mental health and quality of life
- Choosing to isolate themselves from others
- Choosing to not form relationships with other people

These impacts can lead to feelings of guilt, shame, and/or inferiority. This can lead to people further isolating themselves and feelings of hopelessness impacting quality of life and resulting in poorer health outcomes.



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## Summary

- Internalised stigma can be a challenging subject for participants to identify and wish to challenge.
- Quantitative data was less than optimal and some of these challenges around data collection were identified, however the qualitative data collected demonstrated the positive impacts of the intervention
- The uptake and engagement with the PN module has been high and well received by clients



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