PEER NAVIGATION- PESPECTIVES OF HEALTH CARE PROFESSIONALS

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Introduction

Peer Navigation (PN) for people living with HIV (PLHIV) is a rapidly expanding HIV service delivery model. Emerging evidence suggests PN can facilitate greater access to HIV health and social care and enhance clinical outcomes. However, little is known of the relationship between PNs and the patient's healthcare team. What are the experiences and perspectives of working with PNs for s100-GPs, the central co-ordinators of HIV care?

Methods

This paper reports on findings from the qualitative the evaluation of the Queensland Positive People's (QPP) PN program, a state-wide community-based HIV program supporting recently diagnosed PLHIV and those re-engaging in care. organisation in Queensland.

This arm of the evaluation involved semi-structured interviews with six s100-GPs (11% of the population) operating across Queensland to explore their perceptions and experiences of the QPP PN program.

Findings

S100-GPs highly valued the emotional, practical and informational supports PNs provided to patients. PNs were described as 'translators', 'bridges' and 'problem solvers' who could support clients to disentangle some of the complex social and health system barriers clients encountered when seeking to navigate the formal health care system. S100-GPs also valued the 'normalising' role PNs played as they shared lived experiences of HIV and supported newly diagnosed PLHIV to adjust to their diagnosis and negotiate disclosure and stigma. Overall, the findings demonstrated s100-GPs positive perceptions of PN; however, they also identified some challenges s100-GPs faced in engaging with and referring to PN services including limited knowledge of the PN, confidentiality and communication between clinicians and PNs.

Conclusion

This study highlights the value of PN and its ability to extend HIV care beyond the clinical encounter. However, this presentation will also examine the ongoing issues of effective referral and engagement between primary care, particularly non-s100-GPs, and the community sector.