Vulnerability, Stigma, Trauma and Resiliency in the Face of Coronavirus Adversity: Results among a Cohort of People Living with HIV in Ontario, Canada

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Background/Methods

- The Ontario HIV Treatment Network Cohort Study (OCS) is a community-driven, multi-site clinical cohort of over 8000 People living with HIV (PLWH) who received care in Ontario.
- A COVID-19-specific module was added to the virtual interviewer-administered questionnaire between May-December 2020.
- Little is known about how the coronavirus crisis is impacting the socio-cultural and environmental conditions that promote positive psychological, behavioural, and/or social adaptation among PLWH.
- Resilience, or positive adaptation to challenging situations, has potential to improve health outcomes for PLWH, particularly during periods of crisis.
- Experiences of trauma (traumatic recurring thoughts) during COVID-19, perceptions of vulnerability to COVID-19 and HIV stigma in healthcare compounded by COVID-19 were assessed by sex, chi-square tests were performed.
- Composite variables for each of these themes examined correlations between subpopulations (by sex and race/ethnicity) with a composite variable of resiliency (made up of three resiliency questions), chi-square tests were performed.



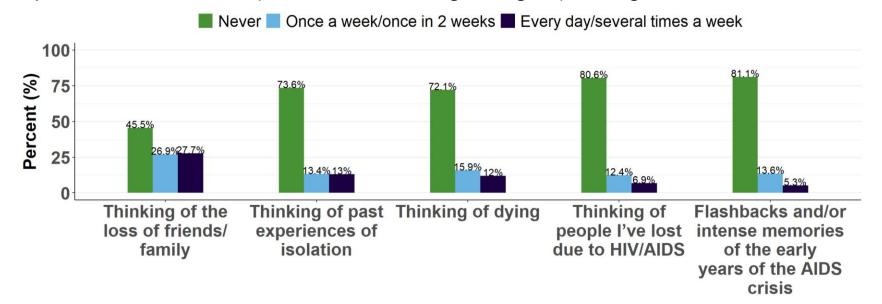


Sociodemographic characteristics and experiences of trauma

- 1153 participants answered COVID-19 module between May-December 2020
- Median age 53 years (48 among women, 55 among men)

- 273 women (32% White, 57% Black, 10% Other)
- 880 men (69% White, 11% Black, 20% Other)
- 66% identifying as gay/lesbian/bisexual/queer

Experiences of trauma (traumatic recurring thoughts) during the coronavirus crisis



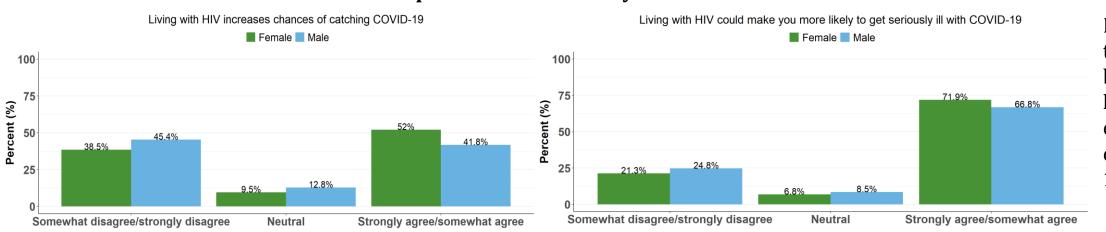
Women reported significantly (p<0.05) more trauma (more than once a week) about: the loss of family/friends (38%-vs.-25%), past experiences of isolation (18%-vs.-11%), dying (19%-vs.-10%), people lost due to HIV/AIDS (10%-vs.-6%).





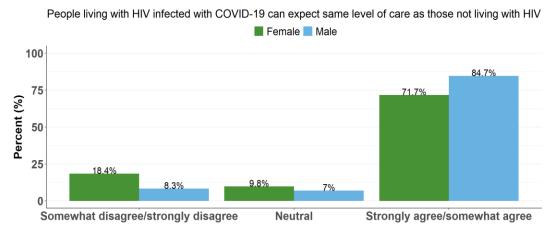
Results: Vulnerability and Stigma

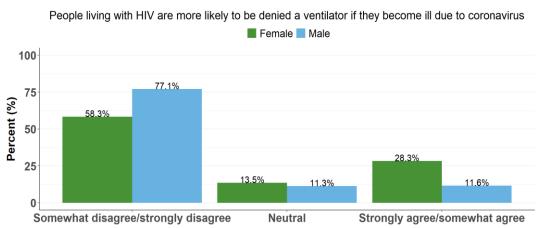
Perceptions of vulnerability to COVID-19



More women than men believed PLWH had increased chances of catching COVID-19 (p=0.015).

Perceptions of stigma in healthcare due to COVID-19



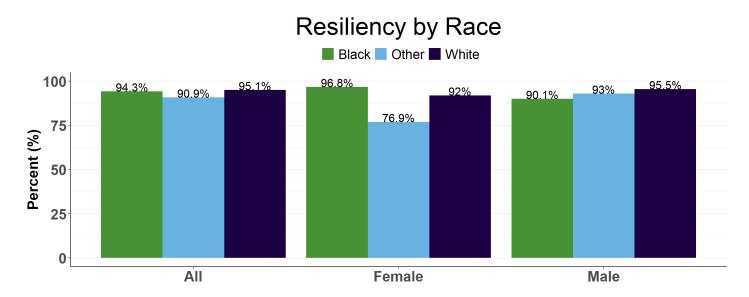


More woman than men believed that PLWH are more likely to be denied a ventilator (p < 0.001)



Resiliency and Implications

Among people perceiving stigma in healthcare, there was a greater experience of trauma (45%-vs.-31%, p<0.001). Among people experiencing trauma, there were greater perceptions of vulnerability to COVID-19 (74%-vs.-66%, p=0.012) and perceptions of stigma in healthcare (28%-vs.-18%, p<0.001). However, despite these feelings, overall resiliency was high.



- Individual resiliency characteristics were high including: employed creative ways to alter difficult situations (74%), controlled their reactions (81%) and believed they could grow in positive ways by dealing with difficult situations (87%).
- The composite resiliency variable (demonstrating any of the above three resiliency measures) showed differences by race and sex.
- Black women demonstrated significantly more resiliency compared to Other and White women (p=0.01) whereas White men demonstrated more resiliency compared to Other and Black women, although not significantly (p=0.075).

Implications: Despite feeling vulnerable, perceiving stigma in healthcare, and experiencing traumatic recurring thoughts, PLWH reported strong resiliency beliefs and behaviours. Resiliency during crisis is a powerful resource in fostering positive adaptation among PLWH and could be essential for effective psychosocial interventions.

