P113: Knowledge of HIV and attitudes towards people living with HIV amongst hospital healthcare workers

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BACKGROUND

HIV stigma persists within healthcare. Stigmatising behaviours and poor knowledge around HIV significantly impact the psychological wellbeing of people living with HIV [1-3] and impede access and scale-up of testing, prevention and treatment programmes for HIV [4]. The Positive Voices 2017 survey showed 1 in 7 respondents experienced discrimination when accessing NHS care, negatively affecting quality of care, compounding internalised stigma, and contributing to disengagement from care. [5-7] Our aim was to investigate the knowledge and attitudes towards people living with HIV amongst 2 groups of healthcare staff working in our hospital through a self-directed questionnaire, with a view to identify key areas for improvement to ultimately better the experience and quality of care provided to people living with HIV attending our hospital.

METHOD

We designed a self-directed questionnaire adapted from the "Standardised brief questionnaire for HIV stigma and discrimination amongst healthcare staff" developed by the Health Policy Project [8], and from a similar study undertaken by colleagues at Barts Hospital NHS Trust in 2017 [9]. Questionnaires targeted multiple key domains identified in prior studies including fear of acquisition and social judgement [4,10,11]. Over four random day shifts in May and June 2022 we distributed the paper questionnaire to healthcare staff in the Emergency Department (ED) and in two Geriatric Medicine (GM) wards. Responses were prospectively received through anonymous collection boxes. ED has recently introduced the national opt-out blood borne virus testing program and more frequently sees people living with HIV than GM.

RESULTS - Demographics

Of 110 questionnaires distributed, 86 (78.2%) were completed; 45 responses (52%) from ED and 41 (48%) from GM. 71% of respondents across both groups were under the age of 40, 62% were female and 76% described their sexuality as heterosexual – these characteristics were similar between both groups. The majority (49%) of respondents in both groups identified as British or from any other white background, although respondents belonged to 17 different ethnic groups. GM respondents were 44% doctors and 24% nurses, whilst ED respondents were 48% nurses and 21% doctors [Fig. 1]. Similar proportions in both groups had worked in healthcare for <10 years, 10-30 years or 30+ years [Fig. 2]. Only 29% of ED respondents and 23% of GM respondents reported having received training in HIV stigma and discrimination.

Fig. 1) Healthcare role of respondents

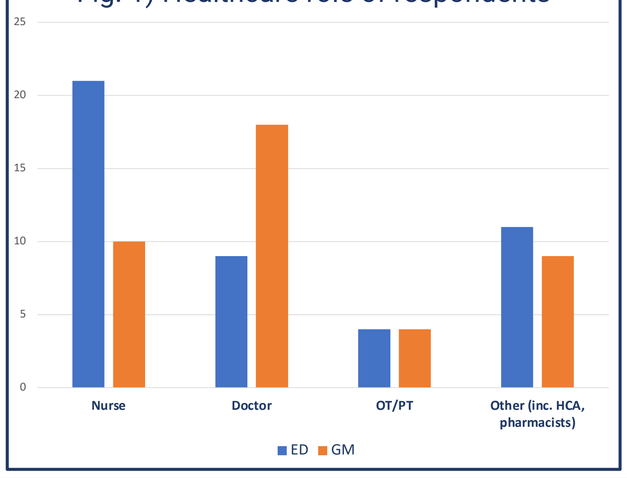
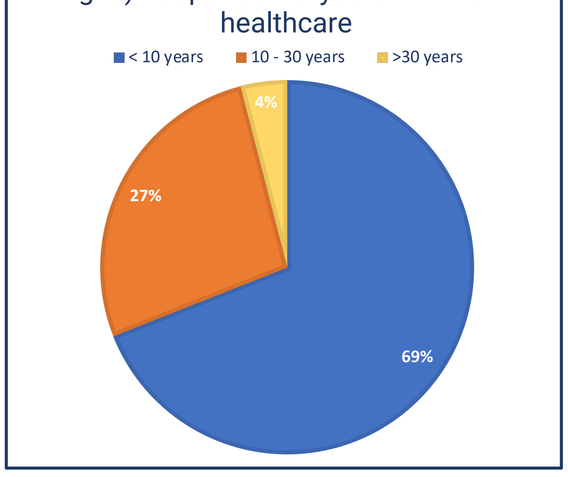
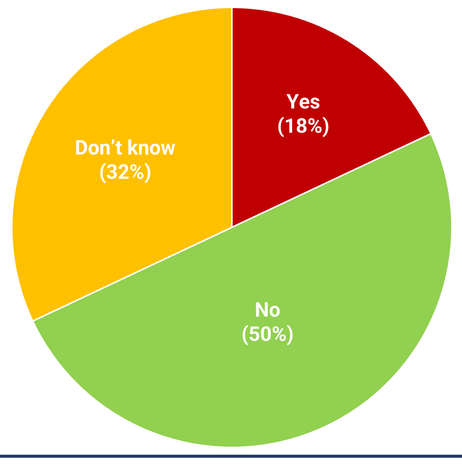


Fig. 2) Respondents' years worked in healthcare



RESULTS – HIV knowledge and beliefs

Fig. 3) If you sustained a needlestick injury from a patient with an undetectable viral load, do you think you would get HIV?



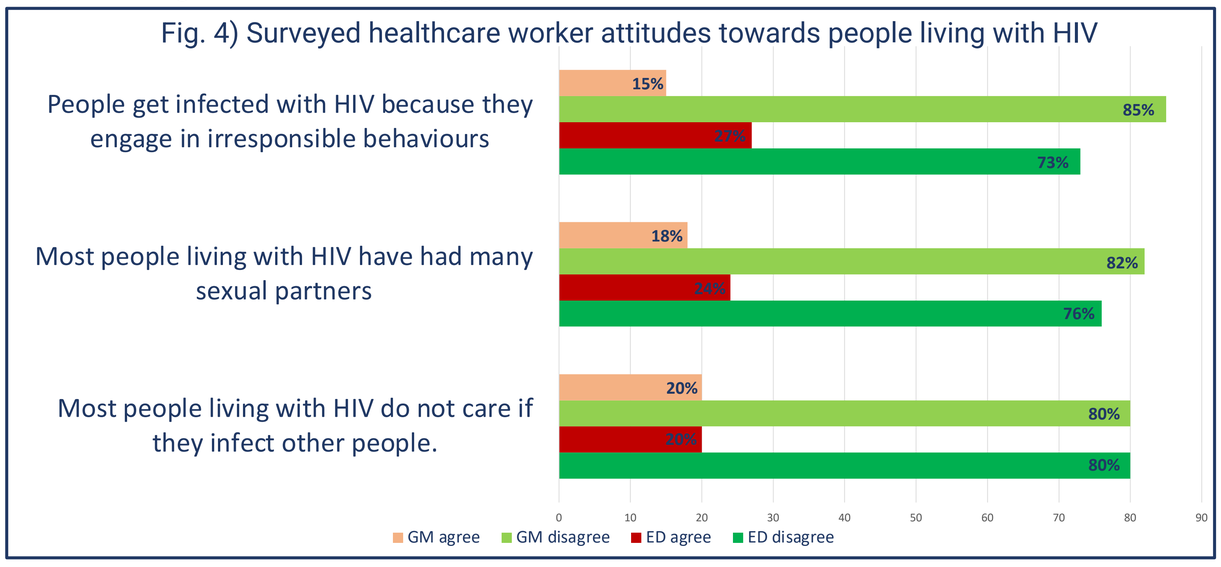
Half (50%) of respondents knew HIV is untransmittable by sustaining a needlestick injury from a person with an undetectable HIV viral load (U=U) [Fig. 3]. The majority of respondents (69% in ED; 85% in GM) had not heard of U=U. Staff were more likely to have heard of U=U if they had cared for people living with HIV in the preceding 6 months (30.3% vs 5.3%), whereas respondents were more likely to fear HIV acquisition if they had not had exposure (62% vs 25%) and if they had not attended HIV stigma training (38% vs 15%).

When treating people living with HIV, 21% of respondents (25% in ED; 16% in GM) use infection control measures that they would not otherwise use for HIV negative people.

33% of respondents did not think or were not sure if being on treatment affected PLWHIV's risk of transmitting HIV to their negative partner through sex. 29% of respondents did not think or were not sure if PLWHIV could conceive and give birth to a HIV negative child.

Respondents who thought they would get HIV if they sustained a needlestick injury from people with undetectable HIV viral load were more likely to agree with stigmatising statements in Figure 4.

Fig. 4) Surveyed healthcare worker attitudes towards people living with HIV



1 in 4 respondents, including 19.4% of nurses and 11.1% of doctors, felt 'not confident at all' discussing HIV status with a patient. 16.5% of respondents would be at least a little hesitant to work alongside a co-worker living with HIV. The majority (86%) of respondents would like more education about HIV.

CONCLUSION

Our findings demonstrate limited knowledge about HIV in our surveyed healthcare workers, in particular around occupational transmission routes and risk, perpetuating stigmatising beliefs, attitudes and infection control practices.

Findings support previous evidence suggesting that HIV knowledge is inversely related to level of stigmatised attitude and fear of HIV acquisition, and that improved HIV knowledge reduces stigma [12,13].

These survey results support the need and demand for further HIV training for healthcare workers in our hospital and help identify priority areas for intervention.

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