

An evaluation of quality of life through educational, vocational and housing outcomes for adults living with perinatally acquired HIV

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Background: Adolescents and young adults living with perinatally acquired HIV (AYAPaHIV), particularly those who ever had a CDC-C diagnosis are at increased risk of cognitive impairment and mental health disorders compared with HIV-negative peers. We evaluated educational and employment outcomes in AYAPaHIV using a modified HEADSSS assessment.

Methods: PaHIV aged ≥16 years attending a specialist service self-completed a modified HEADSSS questionnaire of educational, vocational and housing measures from August – December 2018. Results were compared with age and geographically-matched population data from the Office for National Statistics (ONS).

Results: 78 PaHIV completed questionnaires
 22/78 (28%) had prior CDC-C diagnosis.
 61/78(78%) had VL<200
 ➤ 44 (56%) female
 ➤ 62 (79%) Black
 ➤ Median age 23 years (IQR 20-26)

Employment

23/50(46%) AYAPaHIV aged 16-24 were employed, comparable to 55% of 16-24 year olds employed in the general population. However, fewer AYAPaHIV aged 25-34 (19/28, 68%) were employed compared with 84% in the age-matched general population (p=0.0245).

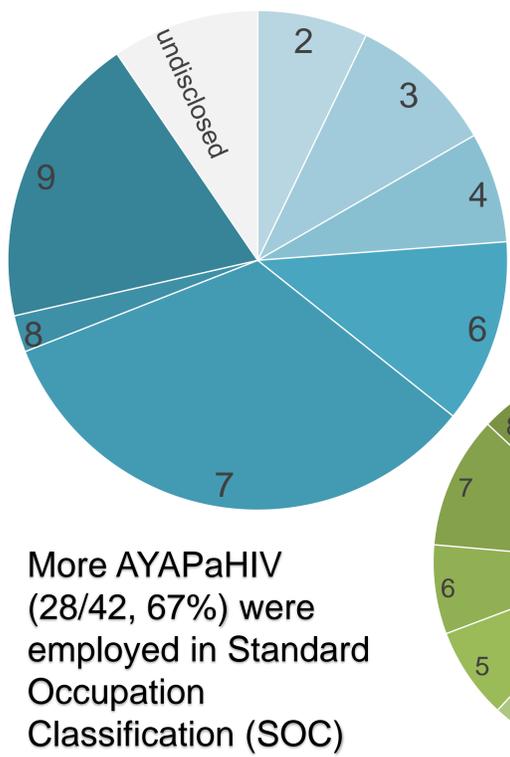
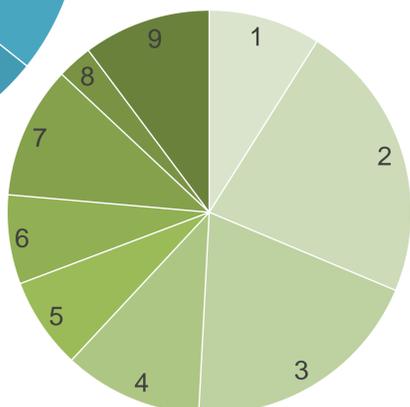


Figure 1 (left) AYAPaHIV aged 16-34 employment sector. Figure 2 (below) 2011 census employment sector for 16-34 year olds.



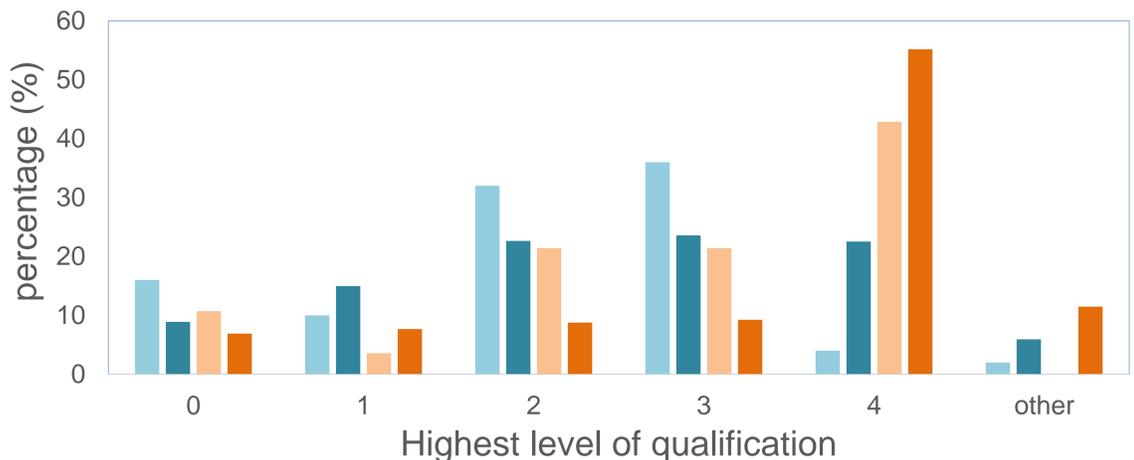
More AYAPaHIV (28/42, 67%) were employed in Standard Occupation Classification (SOC) tiers 6-9 (service / sales / or elementary - cleaners, wait staff) than the general population aged 16-34 (31%, p<0.0001).

Fewer (10/42, 24%) PaHIV occupied managerial or professional roles (SOC 1-5) than in the general aged matched population (69%, p<0.0001).

10/14(71%) of AYAPaHIV aged 18-21 earn less than £10000 yearly, and 12/25 (48%) of AYAPaHIV aged 22-29 earn less than £20000 yearly. This is not significantly different from the income of their age-matched peers nationally.

Education

Fewer AYAPaHIV aged 16-24 had Level 4 (university level or equivalent) qualifications than the general population (p=0.0017), but this was not significant in those aged 25-34 years (p=0.19).



■ AYAPaHIV aged 16-24 ■ 2011 Census 16-24 ■ AYAPaHIV aged 25-34 ■ 2011 Census 25-34

Highest level of qualification	AYAPaHIV age 16-24 % (n=x/50)	2011 ONS Census 16-24 %	AYAPaHIV age 25-34 % (n=x/28)	2011 ONS Census 25-34 %
0- No qualifications	16 (8)	9	11 (3)	7
1 (<4 GCSEs /equivalent)	10 (5)	15	4 (1)	8
2 (5+ GCSEs /equivalent)	32 (16)	23	21 (6)	9
3 (2+ A Levels/ equivalent)	36 (18)	24	21 (6)	9
4 (University degree/equivalent)	4 (2)	23	43 (12)	56
Other (Foreign degrees)	2 (1)	6	0	12

Housing

49/78 (63%) AYAPaHIV live with parents/relatives, compared to 34% of 16-34 year olds in London in 2017 (p<0.0001).

Conclusion : In this cohort, AYAPaHIV achieved significantly lower educational and employment outcomes in adult life when compared to UK age-matched controls. The potential impact on quality of life warrants additional investigation and support.

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