Factors associated with depressive symptoms among women living with HIV in England, 2017 – data from 2017 Positive Voices survey

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BACKGROUND AND OBJECTIVE

- Women living with HIV lack representation in research
- Mental health issues, such as depression and anxiety, impact on quality of life and other health outcomes
- This study aims to identify risk factors for depressive symptoms among women living with HIV

METHOD

Study design: Cross-sectional study
Dataset: Positive Voices is a cross-sectional, probability survey of people with HIV, conducted between January and September 2017.
Outcome: Depressive symptoms as measured by GHQ-12 which measures mental state "over the past few weeks" with a score of 4 or higher, out of 12.
Statistical analysis: Risk factor analysis using directed acyclic graph (DAG) to identify confounders for consideration in multivariable logistic regression (Figures 1a & 1b).
Risk factors: Demographic, lifestyle, health-related factors

RESULTS

DEMOGRAPHIC CHARACTERISTICS

n=1,016 women included in the analysis

Ethnicity

- 62% Other minorities
- 20% Black African
- 18% White British
- 6% Other minority

56% had a total household income of less than £20,000 per year

Median age: 44 years (range 20-84)

PREVALENCE OF DEPRESSION

27% of women reported having depressive symptoms (GHQ12 score 4-12)
More than half (53%) reported GHQ-12 score 0 (no depressive symptoms)
A further 1 in 5 (20%) reported very few symptoms (GHQ-12 score 1-3)

RISK FACTORS ASSOCIATED WITH DEPRESSION

- The strongest risk factors associated with depressive symptoms in women were having unmet needs for help with isolation and poor ART adherence
- Factors also associated with depressive symptoms in women were: financial instability, recent pain symptoms, mobility problems, not having a partner or having a partner they were not close to, avoiding healthcare when needed due to fear of discrimination in the previous year and higher burden of diagnosed chronic conditions.
- Depression was not associated with substance use or other demographic factors such as age, body mass index (BMI), religion and ethnicity.

DISCUSSION

- Economic, health and social factors were associated with depression in women.
- These modifiable risk factors can be mitigated through targeted, bespoke, holistic interventions to acknowledge, address and improve the mental health and well-being of women.
- The excellent cascade of care for HIV results in low numbers of women reporting lower ART adherence. Hence, assessing the association of ART adherence with depression lacks precision, resulting in wide confidence intervals (CI).

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