

# PROJECT PEER: UNCOVERING THE IMPACT OF GIPA/MEPA AND THE WISE PRACTICES OF INFORMAL AND FORMAL SUPPORTS

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## Introduction

The Greater Involvement and Meaningful Engagement of People living with HIV (GIPA/MEPA) principles promote the inclusion of people living with HIV/AIDS within HIV research and HIV-related services.

In Canada, there are many People Living with HIV Engaged in Employment Roles (PEERs) in all work sectors. There is a paucity of research into the supports available to PEERS who work within the HIV sector and face complex challenges.

This CIHR funded study surveyed 60 PEERS and 53 AIDS Service Organizations directors across Canada (dates). The data was analyzed [this way]. Here we report on the results.

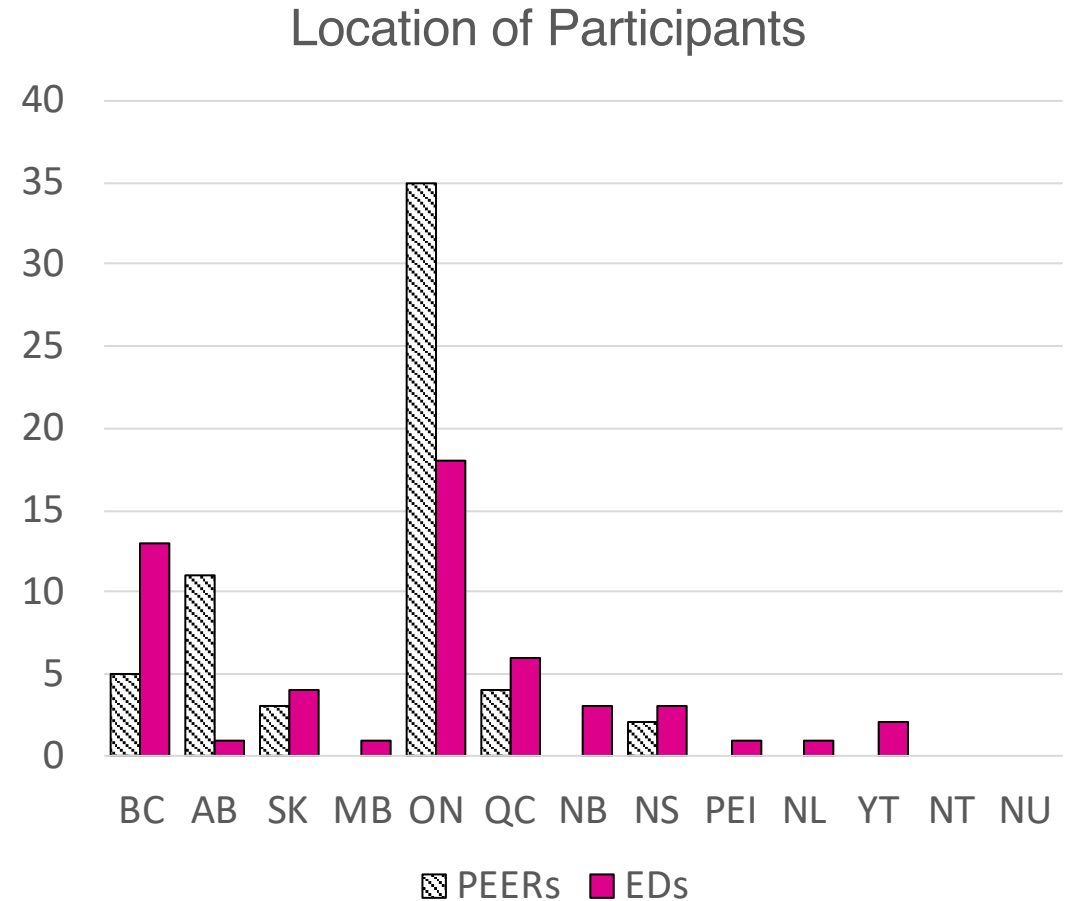
## Highlights

- 120 organizations across Canada were contacted, and 60 surveys were gathered from PEERs and 53 from ASO EDs. using convenience sampling.
- The survey was implemented in French and English.
- 15 EDs (28.3%) identified formal supports specific to PHAs;  $n=41$  PEERs identified some type of formal support
- Mental health and clinical supervision supports were the least likely resource to be offered to PEERs.

## METHODS & PROCEDURES

- Two surveys including 54 open- and closed-ended questions for PEERs and 65 for EDs was created by the research team. Items surveyed were in the areas of workplace support (including mental health), job roles, and benefits and challenges.
- The 15 persons in this research team are from community and academia.
- Statistical analysis was performed and thematic analysis of the qualitative items. Here, we present the descriptive data.
- The team produced a list of HIV-allied organizations and bilingual (English/French) online surveys.

## RESULTS: DEMOGRAPHICS



*Figure 1.* Location of PEERs and EDs by province.

# DISCUSSION OF DEMOGRAPHICS

- The positions/job titles of PEERS are listed in Table 1. Many participants noted their positions as "other," including cleaners, and peer support navigators.
- 77.4% of EDs ( $n=41$ ) reported working with people living with or affected by HIV as their primary mandate.
- 45% of PEERs ( $n=27$ ) noted having multiple roles at their organization.
- 44.3% of PEERs ( $n=27$ ) reported holding a full-time permanent position, versus 8.2% ( $n=5$ ) who reported holding a part-time permanent position, and 48.3% ( $n=28$ ) who held casual, contractual, or volunteer-based positions.

**Table 1.** Employment roles of PEERs and EDs.

Primary Position/Job Description	Frequency
Paid Peer Worker (e.g. Peer Health Navigator, Peer Research Associate)	14
Outreach Worker	3
Research Coordinator	2
Case Manager	5
Volunteer Coordinator	1
Program Manager/Director	3
Administrative Staff	4
Other	28
<b>Total Responses</b>	<b>60</b>

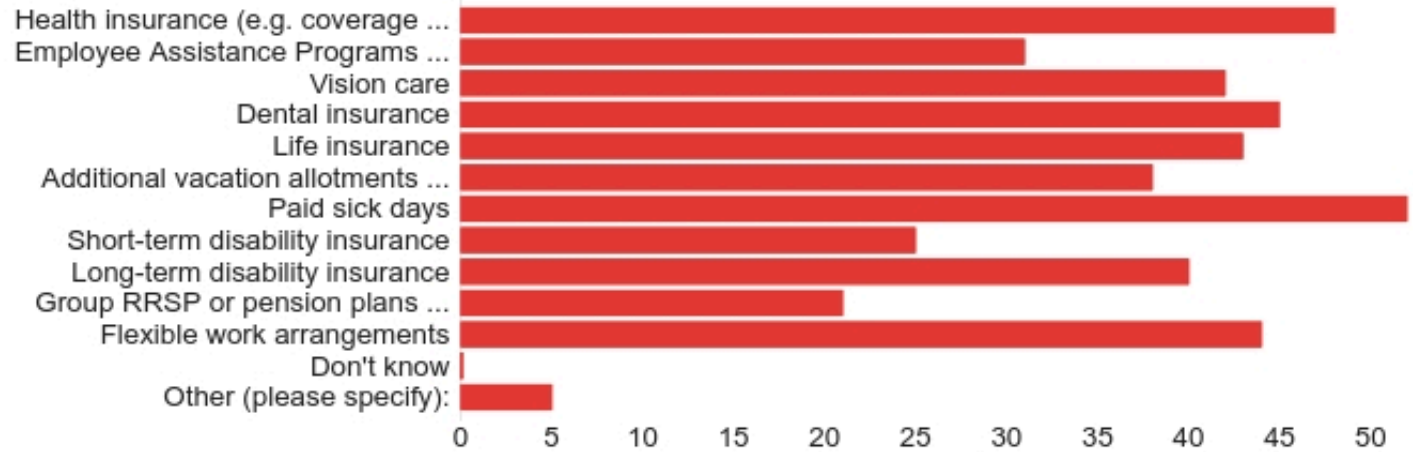
  

Primary Position/Job Description	Frequency
Executive Director	46
Program Manager/Director	2
Outreach Worker	3
Other: CEO	2
<b>Total Responses</b>	<b>53</b>

# RESULTS

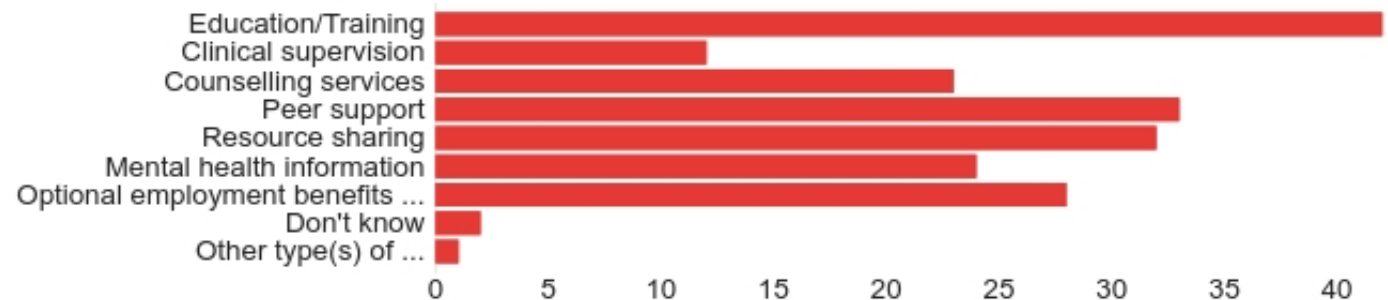
- When asked about GIPA/MEPA organizational practices, approximately 10% ( $n=6$ ) of PEERs reported principles not being practiced, versus 5% of EDs ( $n=3$ )
- 28.3% of Eds ( $n=15$ ) reported having formal services for PHAs
  - $n=8$  of those said that formal services were available to all employees, not specific to PHAs
- 68.3% of PEERs ( $n= 41$ ) identified formal services available to them (Fig. 3)
  - Clinical supervision and mental health information was the least likely to be available to PEERs

## EDs - Employment Benefits for Employees?



**Figure 2.** ED responses for employment benefits available to employees.

## PEERs - What type of support is available to you?



**Figure 3.** PEER responses of formal services available to them at work.

## PRELIMINARY CONCLUSIONS

In general, PEERs and EDs demonstrated agreement with GIPA/MEPA principles.

There is a need for mental health supports, as well as supports for other areas (e.g. aging, supervision) for PEERs.

ASOs benefit from addressing PEERs in the workplace; however, they are often limited by funding.

Building in information through bulletins, email information, and local resources can help within these contexts.

## NEXT STEPS

- Complete analysis of the data by the end of 2020.
- Glean recommendations for HIV-related workplaces who employ persons living with HIV.
- KTE will include at least one manuscript and KTE community-friendly products.
- Creation of a comprehensive policy/wise practices framework.

### QUESTIONS?

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