EVALUATING PSYCHOLOGICAL DISTRESS, STIGMA, AND SOCIAL SUPPORT IN A COHORT OF ART-EXPERIENCED MIGRANTS LIVING WITH HIV IN MONTREAL, CANADA

THE ASAP-SWITCH STUDY

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BACKGROUND

Migrant people living with HIV (MLWH) represent and increasing proportion of new referrals for HIV care in Canada. Many MLWH face considerable psychosocial challenges, such as **psychological distress** or **stigma**, which can **interfere** with their **engagement in the HIV care cascade** and have profound health consequences at the individual and populational level. Yet there is still limited research on these psychosocial factors among MLWH in the Canadian context

OBJECTIVE: We briefly describe a cohort testing the feasibility of a free-of-charge ART switch among MLWH and then evaluate the degree of **psychosocial distress**, **HIV-related stigma**, and **social support** among participants.

METHODS

DESIGN: In May 2024, we initiated a 52-week mixed-method prospective cohort study at a hospital-based chronic viral illness clinic (McGill University health Centre) in Montreal (Canada) — Antiretroviral Speed Access Program Switch Study (ASAP—Switch).

PARTICIPANTS: ART-experienced MLWH recently arrived in Quebec (< 2 years) who were switched free-of-charge to Bictegravir / Emtricitabine / Tenofovir Alafenamide (BFTAF)

OUTCOMES

We computed descriptive statistics of sociodemographic and psychosocial variables collected at baseline, before switching to BFTAF.

Social support

- Measured with the **Medical Outcomes Study Social Support Survey (MOS-SSS)**, with higher mean scores on an averaged 0–100 scale indicating better support.

Psychological distress

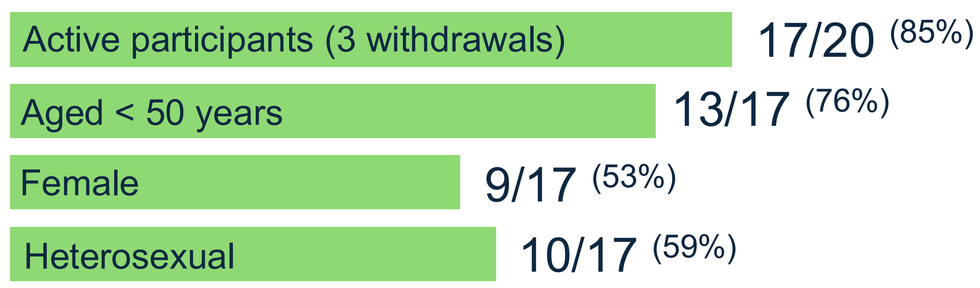
- Assessed using the **Kessler Psychosocial Distress Scale (K6)** with scores of 0-18 showing absence and scores 19-30 showing presence of serious mental illness.

HIV-related stigma

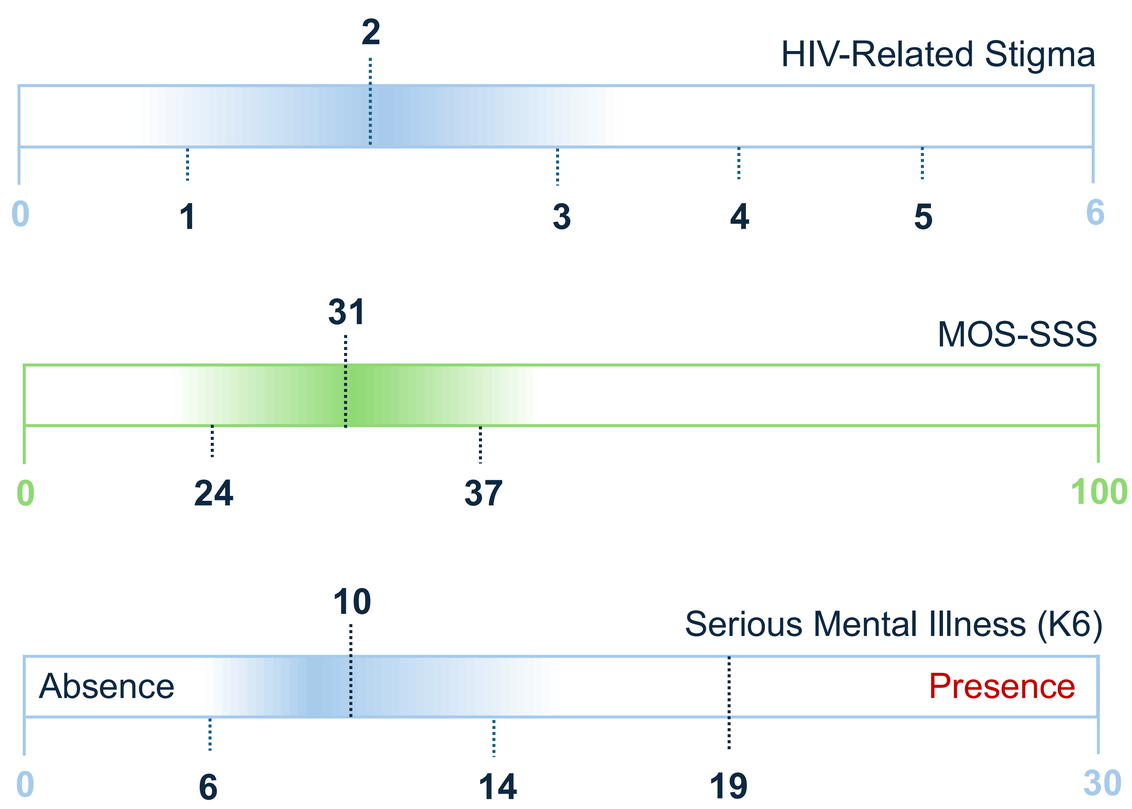
- Measured with the **AIDS-Related Stigma Scale**, with higher scores on a scale of 0-6 indicating greater internalized stigma.

RESULTS

As of December 2024, **20/50 (40%)** participants have been recruited, were prescribed B/F/TAF and completed at least **4/72 weeks of follow-up**.



PSYCHOSOCIAL OUTCOMES Most participants **did not meet criteria** for **serious mental illness** on the K6 scale with a median score of 10 (IQR=6-14) and had a low HIV-related stigma with a median score of 2/6 (IQR=1-3). For social support, mean score on the MOS-SSS was **31** (Standard Deviation = 14.2) indicating low social support.



CONCLUSION

Psychological distress and stigma were low in 17 ART-experienced MLWH, despite limited reported social support. Monitoring these psychosocial indicators along the HIV care cascade and offering adapted mental health interventions for MLWH could improve engagement and retention in care.

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