

Recognizing and Responding to HIV-related Stigma in Prevention

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Review of Objectives

1. To define and describe HIV-related stigma
2. To describe the ways in which HIV related stigma affects risk behaviors, access and the provider/client relationship
3. To offer recommendations on how to recognize and respond to stigma in individual level prevention interventions

Session Goal

- HIV + stigma is a unique influencing factor that contributes to risk participation
- An understanding of how stigma is experienced by the clients is important
- The approach in individual assessment for prevention can add stigma and disrupt the success of working with clients on their intended goals.
- An understanding of personal (provider) values is an on-going crucial process that can help create safety and success

The Role of the Clinician

- To have comfort and skill necessary to speak to clients about sexual behavior/drug use
- To help client identify and reach their intended goals
- To have knowledge about contextual concerns, culture, stigma, mental health, life issues that may affect prevention goals
- To work with clients on risk reduction steps that are determined by the client
- To be aware of your own bias, values, judgments including those related to HIV status

What is Stigma?

- A powerful discrediting social label that radically changes the way an individual views themselves and are viewed as persons.
- People who are stigmatized are usually considered deviant, or shameful and as a result are shunned, discredited rejected or penalized.

Sources of Stigma

- Racism
- Homophobia
- HIV status
- Age
- Social and economic status
- Cultural stereotypes
- Sexual Orientation
- Gender Identity

Stigma activity

Felt and Enacted Stigma

- **Felt** stigma refers to how someone may anticipate the discrimination and the shameful feelings associated with it (what did you do, or how did you feel or still feel as a result)
- **Enacted** stigma is the actual experiences of the discrimination (what happened)

HIV-related Stigma

- “Sometimes it appears as if the various people with HIV/AIDS have only two things in common:
 - HIV infection
 - HIV related stigma and discrimination”.

What is HIV-Related Stigma?

- HIV/AIDS related stigma is a complex concept that refers to prejudice, discounting, discrediting and discrimination directed at persons perceived to have AIDS or HIV

Factors Contributing to HIV/AIDS-Related Stigma

- HIV/AIDS is **life-threatening disease**
- People are scared of contracting HIV
- Disease is associated with behavior
- People with HIV are responsible for becoming infected
- The disease can be seen (it is visible)

Different Levels of Impact

- Personal (client) internalized
- Personal (client) what happens to them
- Interpersonal (client/provider)
- Institutional (how are people able to access services)

HIV-related Stigma Impacts Prevention

- Negotiation with partners
- Challenges of disclosing HIV+ status
- Sexual expression and comfort in sexuality
- Overall sense of power to initiate change
- Management of HIV disease
- Seeking testing/care for STD symptoms

Stigma at the Provider/Client Level

- Topic of sexual expression with HIV+ patients
- Concern of blaming people with HIV
- Implication of responsibility
- Values and beliefs providers have about “appropriate” behavior

Stigma and the Clinician

- Making assumptions about what HIV+ people do
- Catastrophizing the experience of having HIV
- Having your values and agenda eclipse the concern of the client
- Unrealistic expectations for the clients

Responding to HIV-Related Stigma

1. Recognition of client's history and experience with stigma
2. Bringing up the topic
3. Improving assessment questions to demonstrate clients concerns relating to stigma
4. Build awareness of provider bias/rapport
5. Focus on resiliencies and strengths

Recognizing the patient's history and experience

- Assessment and acknowledgment of what the patient has been doing towards self-care.
- Has HIV changed the way the patient has organized risk behavior?
- How have they experienced stigma since finding out their status?
- What are their current concerns about risk?

Bringing up the Topic

- Why are you asking questions about sexual expression or related risks?
- What will the patient gain from this?
- What is your objective?
- What if the patient has complicated concerns that cannot be addressed?
- Is this an on-going conversation with everyone?

Building a Genuine Rapport

- Inquiry to demonstrate an understanding of the stigma that may exist in the client's life.
- How has stigma impacted the choices the client makes?
- How have they felt stigma with HIV?
- How else do they feel stigmatized?
- How have they resisted stigma in the past?

Building on Strengths

- Are patients motivated to protect others
- Is this motivation greater than the concern of protecting self?
- What are factors that challenge the enactment of self-responsibility?
- How does this sense of responsibility relate to choices made by client?

Addressing Resiliency Factors

How does the client demonstrate strengths and utilize them for risk reduction?

- Social support
- Family connection
- Sexual health
- Activism
- Knowledge
- HIV+ community

Improving Assessment: Considering HIV+ Stigma

- Has having HIV made it harder to enjoy sex?
- Has being HIV+ made it more difficult to find partners?
- Do you think people might reject you if they knew you were HIV+?
- Do you feel that you are treated unfairly because of HIV status?
- How do you feel your status affects your ability to negotiate with partners?

Managing and Resisting Stigma

- People with many stigmatizing experiences find ways to resist the humiliation
- People find coping strategies and new common bonds with others in a similar situation
- People find ways to take care of themselves and not offer up their vulnerability.
- People use their strengths, community, friends, and supporters to counteract the belief system that operates in an oppressive manner

Assessing Strengths and Resiliencies

- What strengths do you rely on when faced with the difficulties of living with HIV?
- What are you most proud of since you found out you have HIV?
- How do you cope with judgment, or rejection?
- Who supports you when you feel struggles related to having HIV?
- When are you at your best?
- How have you resisted stigma or discrimination?

Summary

- Define, recognize and validate the impact of HIV-related stigma in client's lives
- Recognize the impact it may have on choices people make around risk
- Recognize the impact that HIV-related stigma may have on the provider/client relationship
- Notice other layers of stigma that may be operating
- Look for coping strategies and opportunities where clients have resisted stigmatizing conditions
- Help clients define their strengths and resiliencies

References

- How does stigma affect HIV prevention and treatment, CAPS Fact Sheet
- Stigma and Discrimination: Definitions and Concepts, Canadian AIDS Society
- Internalized Stigma Among People with HIV-AIDS, AIDS and Behavior, Vol. 6, No 4, Dec 2002

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