How geography, culture, and social relationships shape PLWH's experiences of HIV-related stigma? ---- A qualitative study of PLWH and healthcare providers in Delaware



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Abstract

Studies show HIV-related stigma impedes the health and wellbeing of people living with HIV (PLWH). HIV-related stigma is often studied through psychosocial perspectives without considering structural influences. Drawing on qualitative data from 42 PLWH and 14 care providers who resided in Delaware, this study examined PLWH's experiences of HIV-related stigma and explored how geography, culture and social relationships shaped their experiences of HIV-related stigma. Results suggest differences based on geographic location, race and ethnicity, gender identity, and social relationships. While Hispanic and Haitian communities suffer greater HIV-related stigma, sexual minority cultures empower PLWH to counteract stigma. Implications of HIV-related stigma reduction interventions are discussed.

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Research Questions

- What HIV-related stigma do PLWH in Delaware experience?
- How do aspects of geography, culture and social relationship shape PLWH's experience of HIV-related stigma?

Method In-depth interview conducted in Wilmington, Syrma, and Georgetown Interviews lasted 30-60 minutes and were recorded, transcribed, and coded 42 PLWH and 14 care providers

Results

Geographic Aspects

Similarities: 1. HIV-related stigma is still prevalent; 2. HIV-related stigma affects PLWH's disclosure choices; 3. Education is perceived as the best way to eliminate stigma.

Differences: 1. PLWH in Wilmington are more willing to disclose and disclose to more people, compared to Smyrna and Georgetown; 2. HIV-related stigma is greater in Georgetown: "down here" was greater, and people "down here" were close minded and "not very progressive" (GP06-F).

Cultural Aspects • *Latino Culture:* "They didn't know anything about HIV."

- *Haitian Culture:* "You are possessed by the evil."
- *Sexual Minority Culture*: "Gay men are way more open about it"

Among PLWH, 16 identified as Black, 13 as Latino(a), 7 as White, and 5 as another race or ethnicity; 28 identified as men; and 20 identified as LGBTQ Mean age: 46 years old Mean years LWH: 10.7 years

Social Relationship Aspects

Family: "They didn't really want to be around me"

Healthcare Settings: "You had to endure the little dirty looks from the nurses and stuff"

Workplace: "That is how I keep my job"

Using a diverse sample, this study explores the intersectionality of HIV-related stigma across social settings. Consistent with previous studies (Bowleg, 2012), the results show that PLWH's experiences of HIV-related stigma reflect interlocking influences of social structural factors on individuals, including urban-rural divide, racism, and heterosexualism. One noteworthy point is gender identities have a complicated impact on HIV-related stigma. On one hand, PLWH who are sexual minorities might experience double layers of stigma. On the other hand, sexual minority culture provides an inclusive environment for PLWH to cope with HIV-related stigma. These nuances found in Delaware enlighten researchers, policy makers, health professionals and social workers that HIV prevention and stigma reduction programs should be tailored to be culturally responsive to different locations and different communities.

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Conclusions & Discussion