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## A grounded theory study of HIV-related stigma in US-based health care settings

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Despite biomedical advances in the treatment and care of people living with HIV/AIDS (PLHIV), stigma has remained a persistent global challenge. Health care settings and workers have been identified as important sources of stigma directed towards PLHIV. Studies have addressed the construct of stigma in US health care settings, but mainly from the perspectives of PLHIV. We used grounded theory to understand how health care professionals conceptualize HIV stigma in health care settings and how it may impact HIV patients to describe the pertinent concepts involved in the operationalization of stigma in health care settings and to develop a substantive model that projects a purposive view of HIV stigma in the health context. Our model indicates that stigma may be rooted in historically derogatory representations of HIV and intensified by patient-provider power inequalities. Stigma may be triggered by fear of contracting an incurable disease, inadequate clinical education and training on HIV and stigma, unintentional behaviors and limited contact with HIV patients. Stigma was perceived as injurious to both patient and provider outcomes. Patient outcomes included engagement in care and psychological functioning and provider outcomes included anxiety and nervousness when delivering care to HIV patients. Additional research on provider perceptions of stigma and programs that encourage empowerment, communication and training may be needed for stigma reduction.

### Biography

Mariam Davtyan is a Doctoral Candidate in Public Health at University of California Irvine. In 2005, she has also served as a pediatric and adult HIV/AIDS Researcher at the LAC+USC Maternal, Child and Adolescent Center for Infectious Diseases and Virology (MCA Center). Her work with women of color living with HIV/AIDS has inspired her to study stigma, a significant stressor that leads to poor outcomes. Her research focuses on stigma and discrimination in healthcare settings and within provider-patient interactions. Her current projects use photovoice, a community-based participatory research (CBPR) methodology involving documentary photography, to define and describe the extent of stigma among African American and Latina women living with HIV/AIDS in Los Angeles and to educate healthcare workers about the impact of stigma on patients. She has presented her research at the International Conference on HIV-Stigma at Howard University and the International AIDS Conferences in Melbourne, Australia and Durban, South Africa.

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