## Assessing Internalized Stigma among People Living with HIV Receiving Medical Care in Texas

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### **BACKGROUND**

Internalized HIV-related stigma is when HIV positive individuals hold negative beliefs about HIV as true for themselves

Reducing HIV-related stigma is part of the National HIV/AIDS Strategy: Goal 3 Step 3c-Reduce stigma and eliminate discrimination associated with HIV

National and state level estimates of stigma among HIV-infected persons are needed

### **OBJECTIVES**

- -To assess the prevalence of internalized stigma among HIV infected persons receiving medical care in Texas
- -To identify an association, if any, between stigma and depression

### **METHODOLOGY**

- -The Medical Monitoring Project (MMP) is an annual cross sectional survey of a nationally representative sample of HIV-infected adults receiving HIV care in the U.S. and Puerto Rico.
- -Data Collection period: 2011-2014 in Texas Participant Interviews (Self-Reported)
- -Stigma was measured by the modified 6-item Internalized AIDS-Related Stigma Scale<sup>1</sup>

Disagree=0, Agree=1 Summed; Range: 0 (low) – 6 (high)

- -Depression was measured using Patient Health Questionnaire (PQH-8)<sup>2</sup>
- -Mean stigma scores were compared by sociodemographic, using one-way ANOVA (p<0.05)
- -Priority Groups represent those communities that are disproportionately affected by HIV in Texas. This is based on data that looks at incidence rates, morbidity, and disparities among health outcomes across the state.

Internalized AIDS-Related Stigma Scale<sup>1</sup>

- -It is difficult to tell people about my HIV infection
- -Being HIV positive makes me feel dirty
- -I feel guilty that I am HIV positive
- -I am ashamed that I am HIV+
- -I sometimes feel worthless because I am HIV positive
- -I hide my status from others

Figure	1.	Mean	Stigma	<b>Scores</b>	by	Demograp	phics,	TX
MMP	20	11-201	4					

MIMIP, 2011-2014			
	n	Mean Score	P-value
		(95% CL)	
Total Sample	1885	2.7 (2.6-2.8)	-
Female	463	3.2 (3.0-3.4)	<0.001
Male	1247	2.6 (2.5-2.7)	Ref
Transgender	25	2.4 (1.5-3.3)	0.74
Black, non-Hispanic	716	2.6 (2.5-2.8)	0.70
Hispanic/Latino	545	2.9 (2.8-3.0)	0.004
White, non-Hispanic	423	2.6 (2.4-2.7)	Ref
Other	51	2.7 (2.1-3.3)	0.6
18-24	54	2.9 (2.3-3.5)	Ref
25-34	277	2.9 (2.6-3.1)	0.87
35-44	433	2.8 (2.6-3.0)	0.60
45-54	619	2.7 (2.5-2.8)	0.40
≥55	352	2.5 (2.3-2.8)	0.20
Heterosexual or straight	839	3.1 (2.3-2.5)	Ref
Homosexual, gay or lesbian	874	2.4 (3.0-3.2)	<0.001
Time since diagnosis			
<5 years	413	3.0 (2.8-3.2)	Ref
5 to 9 years	399	2.8 (2.6-3.0)	0.30
>10 years	923	2.5 (2.4-2.6)	<0.001

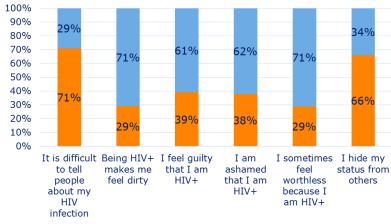


# -Seventy one percent of participants agreed that it is difficult to tell people about my HIV and sixty six percent agreed that they hide their status from others

- -Thirty nine percent of participants agreed with feeling guilty for being HIV positive and thirty eight percent agreed with being ashamed for being HIV positive
- -Twenty nine percent of participants agreed that being HIV positive makes them feel dirty as well as twenty nine percent agreed with sometime feeling worthless because of their HIV status

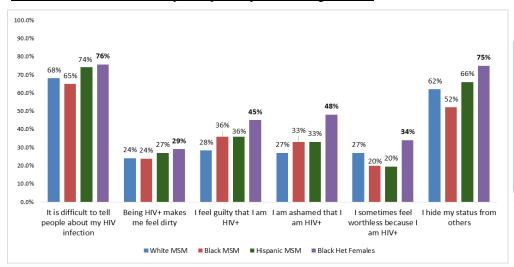
### RESULTS





■ Agreed ■ Disagreed

### Chart 2. Distribution of Priority Groups' Responses to Stigma Scale



- -Among all priority groups, over half agreed that is difficult to tell people about their HIV infection and over half agreed with hiding their status
- -A higher proportion of black heterosexual women agreed with each statement in the scale compared to the other priority groups

Chart 3. Percentage of Priority Groups with "major or other depression"

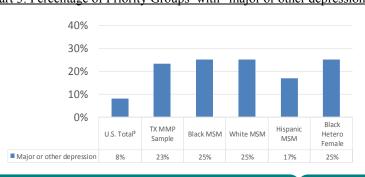
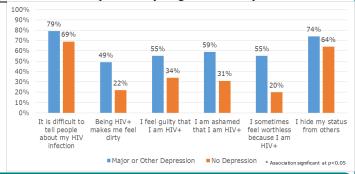


Chart 4. Depression by Stigma Scale responses\*



-The percentage of MMP participants classified with major or other depression was almost three times larger than the depression percentage in the general population<sup>3</sup>

-Participants who where classified w/ major or other depression tend to agree more with the statements. More than 50% of participants w/ depression agreed with feeling guilty, being ashamed, and feeling worthless because of their HIV status

### **CONCLUSIONS**

- -Internalized HIV-related stigma is common among persons receiving HIV care in Texas
- -Efforts to reduce depression among HIV-infected persons could benefit from addressing internalized HIV-related stigma
- -Individual and community level stigma reduction efforts may help address stigma in Texas

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