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Learning Objectives

- Discuss Stigma and related stressors
- Describe the biobehavioral conceptualization of stress and coping in HIV
- Explain the coping process in the context of stigma
- Define Healthy Coping Strategies



What is Stigma?

- Stigma is characterized by associations with physical imperfection and membership in a negatively regarded social group.
 - Enacted stigma refers to acts of discrimination such as social rejection
 - Perceived stigma refers to the extent that one is aware of negative societal attitudes



How Does Stigma Show Up?

- Physical
- Social
- Behavioral
- Psychological
- Cognitive



Physical

- Fast heartbeat
- Stomach problems and indigestion
- Headaches
- Backaches
- Muscle pain and tension



Social

- Pulling away from others/social withdrawal
- Easily Irritable with others
- Social Isolation



Behavioral

- Problems sleeping
- Using alcohol or drugs
- Overeating and comfort foods



Psychological

- Get angry easily
- Feel fearful
- Feel blue and depressed
- Feel irritated or hostile
- Feel bad about yourself



Cognitive

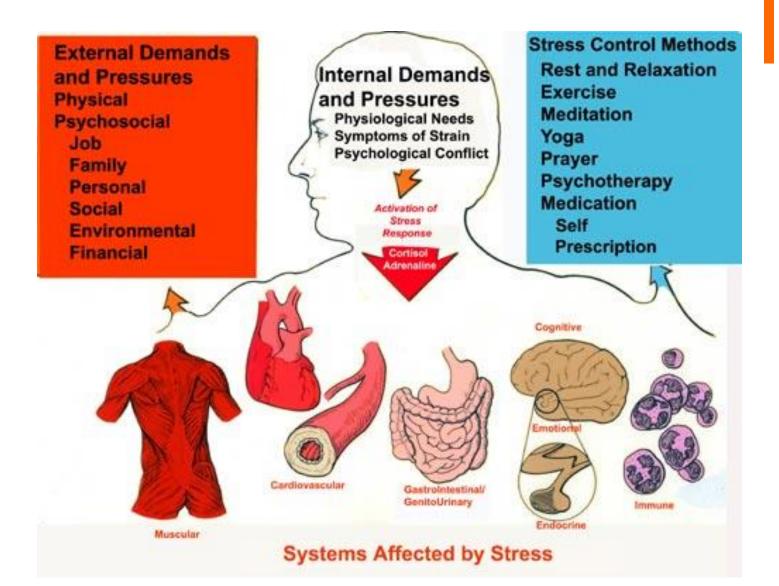
- Feel worn out/unmotivated
- Feel overwhelmed
- Negative Thought Spirals



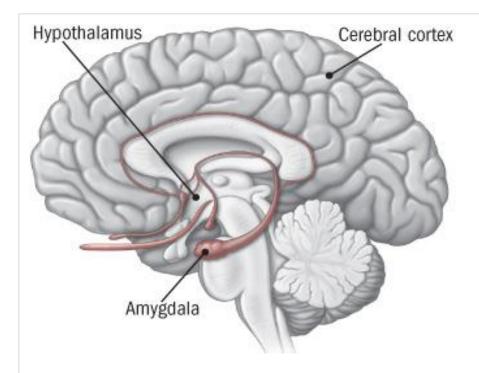
What can we do?

- Understand
- Identify
- Adjust

Biobehavioral Model

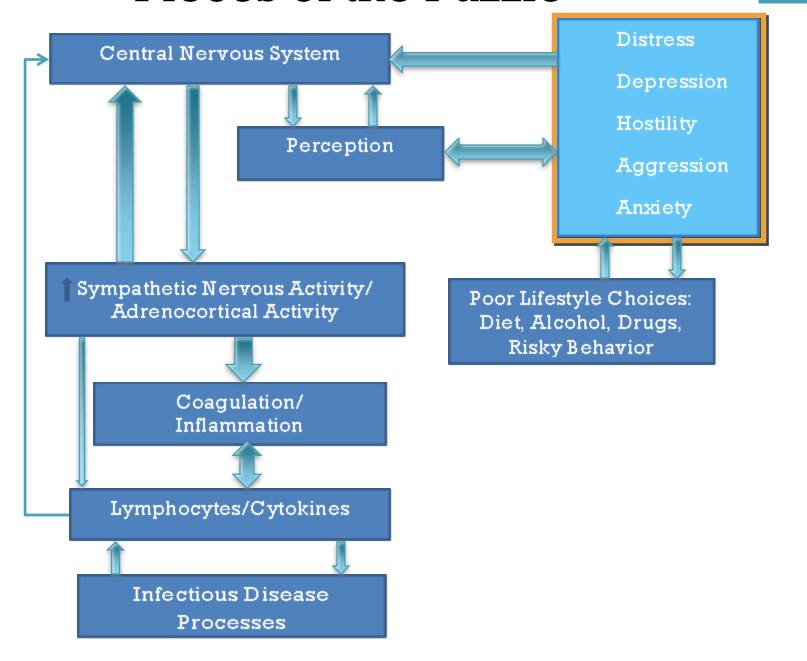


Stress Response



When someone experiences a stressful event, the amygdala, an area of the brain that contributes to emotional processing, sends a distress signal to the hypothalamus. This area of the brain functions like a command center, communicating with the rest of the body through the nervous system so that the person has the energy to fight or flee.

Pieces of the Puzzle



Biological Resilience

Determined (in any given moment) by the interaction of our genetic endowment and our

environment

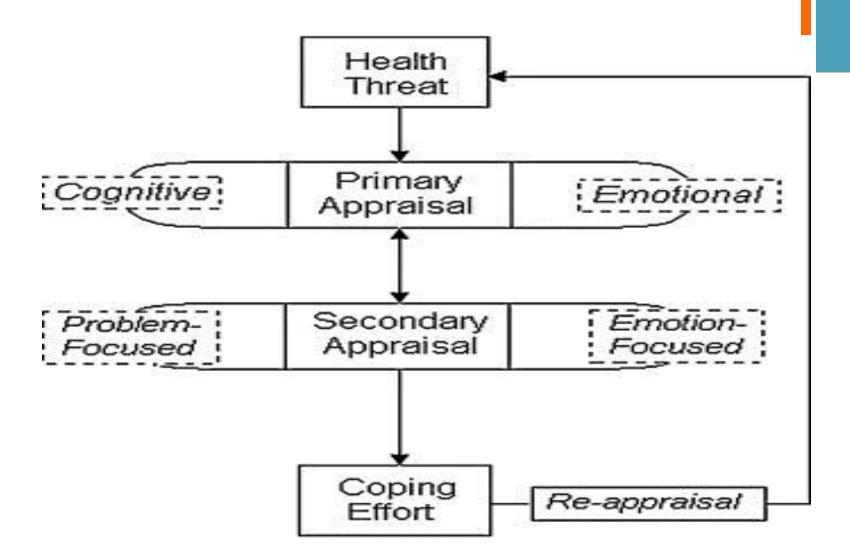


Cognitive/Psychological Processes

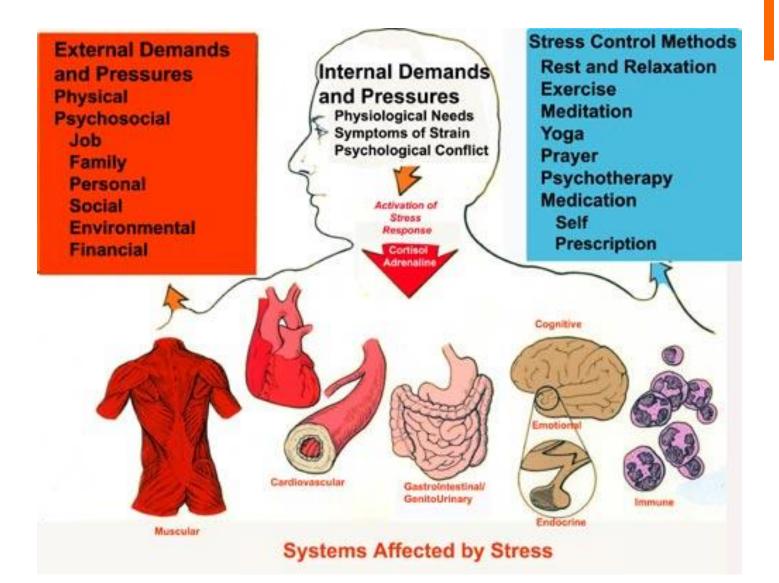
- Thoughts
- Feelings



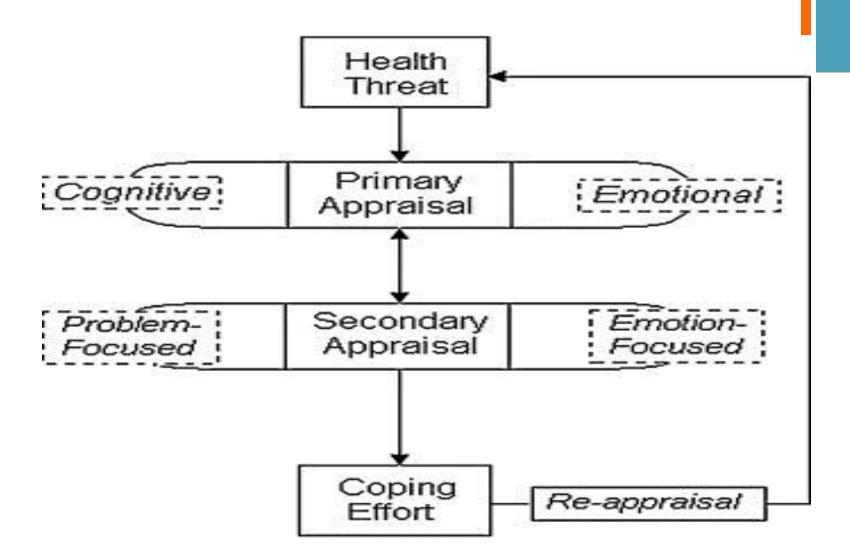
Coping!



Biobehavioral Model



Coping!



Cognitive Appraisal

Primary Appraisal: Perceiving the Threat

Secondary Appraisal: Process of Bringing to Mind a Response to the Threat



I just coped with it!





Coping

 An individual's efforts to manage demands that are believed to exceed available resources
 - (Lazarus & Folkman, 1984)

■ By changing the way he/she *thinks* about the situation (*cognitive appraisal*)

or

By altering their behaviors in the situation

Coping Processes

- Can Be:
 - Emotional
 - Behavioral
 - Social
 - Cognitive
- **Create A:**
 - Physiological Response

Problem-Focused Coping

- Changing a problem, or aspect of a problem causing distress.
- Problem-focused coping may involve:
 - decision making
 - conflict resolution
 - information or advice seeking
 - goal setting
 - problem solving



Emotion-Focus Coping

- regulating the emotional response connected to a stressful situation.
- Emotion-focused coping strategies could involve:
 - cognitive reappraisal and reframing
 - emotional expression
 - behavioral changes (i.e., engaging in pleasant activities)
 - physical stress reduction (i.e., exercising, r deep breathing)



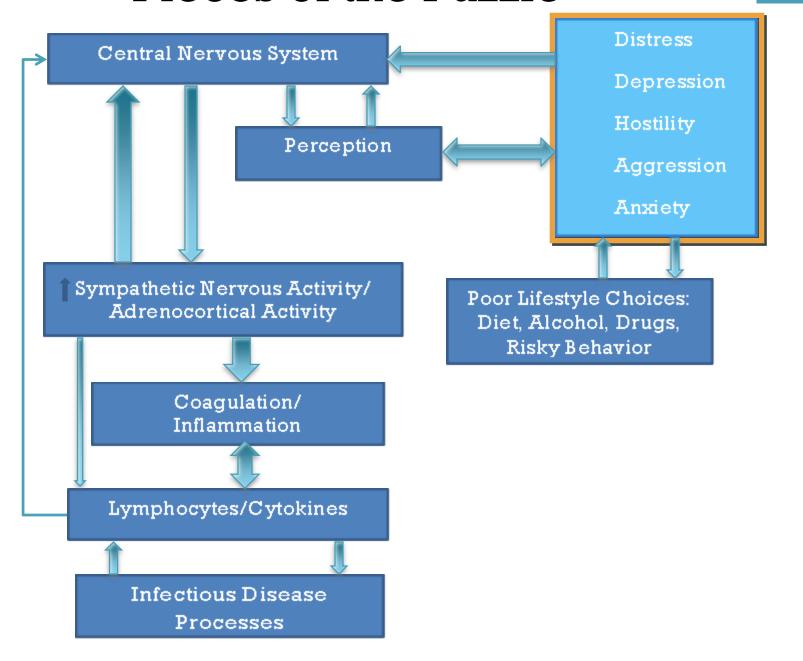


Stressor is:	Controllable	Uncontrollable
Use:	Problem-Focused	Emotion-Focused

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Passive:	Cognitive and Behavioral Avoidance: denial not thinking about it procrastinating	 Smoking, eating, drinking alcohol, doing drugs Not taking medication Missing doctor's appointment Stuffing feelings, giving up

Pieces of the Puzzle



Focus: Quality of Life (QOL)

- ■QOL In Question:
 - Medical Complications
 - Co-morbidities
 - Substance Use
 - Poorer Mental Health
 - Social Isolation



+ Lack of Social Support

- High levels of:
 - Loneliness
 - Depression
 - Insufficient instrumental and emotional support



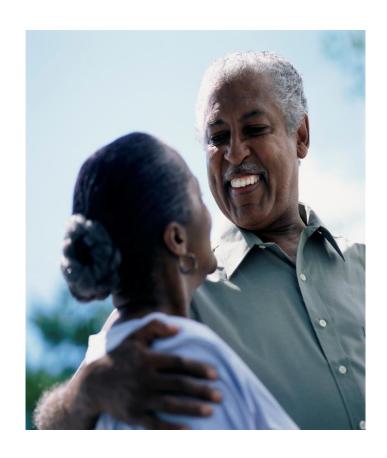
- ■Estimated Prevalence -50%
- Depression linked to: poor HAART adherence

The Aging Process

- Associated with:
 - Increased Social Isolation
 - Greater Depressive Symptoms
 - Transition from informal to formal care settings



Active Coping



Social Support an essential coping skill

Thank You!

QUESTIONS?