African American Older Adults with HIV: Exploring Intersectionality and HIV Care Outcomes

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Faculty Disclosure

• No financial relationships to disclose
Objectives

Upon completion of this activity, you will be able to:

1. Define internalized, anticipated, and enacted HIV stigma
2. Describe intersectionality and intersectional stigma as it relates to HIV
3. Recognize the ways in which HIV stigma and discrimination intersect to impact HIV care outcomes among older African Americans
4. Identify strategies to reduce stigma’s impact on HIV care outcomes
HIV Stigma

• HIV stigma is defined as prejudice, discounting, discrediting, and discrimination that are directed at people perceived to have HIV or AIDS
HIV Stigma

• Enacted
  – Actual experiences of discrimination by others

• Anticipated
  – Expectations that they will be treated negatively in the future

• Internalized
  – Internal endorsements of negative thoughts about HIV
Figure 1. Relationships between stress, stigma, and health care engagement among older African Americans living with HIV/AIDS.

Intersectionality

• “a theoretical framework for understanding how multiple social identities such as race, gender, sexual orientation, SES, and disability intersect at the micro level of individual experience to reflect interlocking systems of privilege and oppression (i.e., racism, sexism, heterosexism, classism) at the macro social-structural level.” (Lisa Bowleg, 2012)


Intersectional Stigma

• A concept that describes the convergence of multiple stigmatized identities within a person or a group.

• Living with multiple stigmatized identities may affect behaviors as well as individual and population health outcomes.
Intersectional Stigma

- Racism
- Ageism
- Heterosexism
- Sexism
Conceptual Framework for HIV-Related Stigma, Engagement in Care, and Health Outcomes – Turan, B. et al 2017


Fig. 1. Final path analysis for intersectional stigma types, depression and HIV-related clinical outcomes for an integrated model of intersectional stigma mechanisms among women living with HIV in Canada (N = 1367). Note. Standard coefficients are reported with standard errors in parentheses. Covariates include age, ethnicity, immigration status, relationship status, education level and years living with HIV. *p < 0.05, **p < 0.01, ***p < 0.001.

Fig. 2. Final structural equation model for a latent construct of intersectional stigma, depression and HIV-related clinical outcomes for an integrated model of intersectional stigma mechanisms among women living with HIV in Canada (*N* = 1367).

*Note.* Standard coefficients are reported with standard errors in parentheses. Covariates include age, ethnicity, immigration status, relationship status, education level and years living with HIV. 

*Fig.*: *p* < 0.05, **p** < 0.01, ***p*** < 0.001.
AFRICAN AMERICAN OLDER ADULTS LIVING WITH HIV: EXPLORING INTERSECTIONAL STIGMA AND HIV – A PILOT MIXED-METHODS STUDY
Figure 1. Rates of Retention in Care and Viral Suppression among all PLWH in the US, Blacks aged 55+ in the US, and Blacks aged 50+ in Ohio and Kentucky

- US Overall
- US All 55+
- US Black 55+
- Ohio Black 50+
- Kentucky Black 50+*

*Kentucky Data are Incomplete

Purpose

• The purpose of this study was to examine the relationships among HIV-related stigma, discrimination, and engagement in HIV care outcomes.
Methods – Study Design

• Pilot Mixed Methods Study
  – Quantitative Phase (N = 53)
    • Online Survey – REDCap
  – Qualitative Phase (n = 20)
    • Semi-structured in-depth interviews
      – In progress
Methods – Study Participants

• Individuals were eligible if:
  1. Diagnosed with HIV
  2. Identified as Black or African American
  3. Age 50+
  4. Currently living in Ohio

• Recruited through Equitas Health

• Analytic Sample
  - N = 53
    • 61 opened the survey; 4 did not consent; 4 did not complete the survey
HIV-related Stigma

• **Stigma Revised Scale (Berger HIV Stigma Scale)**
  - 10 items (“Strongly Disagree” to “Strongly Agree”)
    • Overall Stigma Score (Range = 10 to 40)
    • Personalized Stigma (Range = 3 to 12)
    • Disclosure Stigma (Range = 2 to 8)
    • Negative Self-Image Stigma (Range = 3 to 12)
    • Public Attitudes Stigma (Range = 2 to 8)

Everyday Discrimination

• **Everyday Discrimination Scale**
  – Measures chronic and routine unfair treatment in everyday life.
  – In your day-to-day life, how often do any of the following things happen to you? (e.g., You are threatened or harassed)
  – 9 items
    • “Never” to “Almost everyday”
    • Range = 0 to 45
    • Follow-up questions ask about reason for discrimination

Major Discrimination

• **Major Experiences of Discrimination Scale**
  
  – Assesses lifetime experiences of discrimination
  
  – 9 items

  • e.g., For unfair reasons, have you ever not been hired for a job

  • Follow-up questions (What do you think was the main reason for this experience?)

Engagement with Health Care Providers

- **Engagement with Health Care Provider Scale**
  - Assesses the perception of engagement with health care providers
  - 13 items
    - “Please rate the degree to which each statement reflects your provider’s behavior toward you…”
      - “listens to me”; “involves me in decisions”
    - “Always to Never”
    - Range = 13 to 65 (higher scores denote poor engagement)

Engagement in Care

• Medication Adherence

1. Thing about the past 4 weeks, on average how would you rate your ability to take all of your HIV antiretroviral medications as your doctor prescribed? (Very Poor to Excellent)

2. Thinking back over the past 3 months, has there ever been a time where you missed taking all of your antiretrovirals for 4 days or more? (yes/no)
Engagement in Care

• Missed Clinic Visits
  1. In the past 12 months, did you miss any HIV clinic appointments (does not include appointments canceled and rescheduled)
  2. In the past 6 months, did you miss any HIV clinic appointments

• Knowledge of CD4 cell counts and Viral Loads
  1. Do you know your current CD4 cell count?
  2. Do you know your current viral load?
Analysis

• Exploratory Analysis
  – Pearson’s Product Moment Correlations among the study variables
  – Standardized Mean Differences (SMD)
    • T-tests
Participants Characteristics

- Mean age - $53.6 \pm 2.1$ (range = 50 to 58)
- Median years living with HIV – 2 years (0 – 7 years)
- Majority identified as men (94.3%)
- Approximately 36% identified as bisexual or gay
- Approximately 60% had a college degree or higher
- 49.1% had a history of injection drug use
<table>
<thead>
<tr>
<th>HIV-Related Stigma Scale</th>
<th>Mean (SD)</th>
<th>95% CI</th>
</tr>
</thead>
<tbody>
<tr>
<td>Overall Stigma</td>
<td>29.5 (2.7)</td>
<td>28.8 – 30.3</td>
</tr>
<tr>
<td>Personalized Stigma</td>
<td>9.2 (0.9)</td>
<td>8.9 – 9.4</td>
</tr>
<tr>
<td>Disclosure Stigma</td>
<td>5.8 (0.7)</td>
<td>5.6 – 6.0</td>
</tr>
<tr>
<td>Negative Self Image Stigma</td>
<td>8.5 (1.5)</td>
<td>8.1 – 8.9</td>
</tr>
<tr>
<td>Public Attitudes Stigma</td>
<td>6.1 (1.1)</td>
<td>5.8 – 6.3</td>
</tr>
<tr>
<td>Engagement with Health Care Providers</td>
<td>32.2 (8.7)</td>
<td>29.8 – 34.6</td>
</tr>
<tr>
<td>HIV-Related Stigma Items</td>
<td>Percentage Agree to Strongly Agree</td>
<td></td>
</tr>
<tr>
<td>----------------------------------------------------------------------------------------</td>
<td>-----------------------------------</td>
<td></td>
</tr>
<tr>
<td>I have lost friends by telling them I have HIV</td>
<td>96.1</td>
<td></td>
</tr>
<tr>
<td>I have stopped socializing with some people because of their reactions to my having HIV</td>
<td>79.3</td>
<td></td>
</tr>
<tr>
<td>I worry that people who know I have HIV will tell others</td>
<td>75.4</td>
<td></td>
</tr>
<tr>
<td>I have been hurt by how people reacted to learning I have HIV</td>
<td>94.3</td>
<td></td>
</tr>
<tr>
<td>I am very careful who I tell that I have HIV</td>
<td>83</td>
<td></td>
</tr>
<tr>
<td>Most people with HIV are rejected when others find out</td>
<td>86.7</td>
<td></td>
</tr>
<tr>
<td>Having HIV makes me feel that I am a bad person</td>
<td>75.4</td>
<td></td>
</tr>
<tr>
<td>Most people think that a person with HIV is disgusting</td>
<td>84.8</td>
<td></td>
</tr>
<tr>
<td>Having HIV makes me feel unclean</td>
<td>75.4</td>
<td></td>
</tr>
<tr>
<td>I feel I am not as good a person as others because I have HIV</td>
<td>84.9</td>
<td></td>
</tr>
</tbody>
</table>
Everyday and Major Discrimination

- **Everyday Discrimination**
  - Mean = $24.9 \pm 8.14$
  - 95% CI = $22.6 - 27.1$

- **Major Discrimination**
  - Mean = $6.6 \pm 2.1$
  - 95% CI = $6.0 - 7.2$
What do you think is the MAIN reason for these experiences?

Everyday Discrimination

- Gender: 15.1%
- Race: 96.2%
- Age: 20.8%
- Sexual Orientation: 13.2%
Everyday Discrimination

- Approximately 33.0% (n = 18) of participants selected more than one reason for discrimination.
  - 13.2% (n = 7) selected race and age
What do you think is the MAIN reason for these experiences?

Major Discrimination

<table>
<thead>
<tr>
<th>Reason</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gender</td>
<td>17.0</td>
</tr>
<tr>
<td>Race</td>
<td>88.7</td>
</tr>
<tr>
<td>Age</td>
<td>22.6</td>
</tr>
<tr>
<td>Sexual Orientation</td>
<td>9.4</td>
</tr>
</tbody>
</table>
Major Discrimination

- Approximately 32.0% (n = 17) selected more than one reason.
  - 15.1% (n = 8) selected race and age
Overall HIV Stigma and Everyday Discrimination

$r = .493; p = .0002$
Personalized Stigma and Everyday Discrimination

$r = .617; p < .0001$
Public Attitudes and Everyday Discrimination

\[ r = .536; \ p < .0001 \]
Engagement with HCP and Everyday Discrimination

$r = .411; p = .002$
Thinking about the past 4 weeks, on average how would you rate your ability to take all of your HIV antiretroviral medications as your doctor prescribed?

49.1% stated in the past 3 months there was a time where they missed taking all of their medication for 4 days or more.
Currently Seeking HIV Care: 32.1%
Missed Clinic Appts - 12mo: 31.4%
Missed Clinic Appts - 6mo: 29.4%
Aware of Current CD4 Cell Count: 18.9%
Aware of Current Viral Load: 15.1%

62.5% reported undetectable viral loads
Missed Medications and HIV Stigma

SMD = 0.647
p = .02
Missed Medications and Negative Self-Image

SMD = 0.710
p = .01
Missed Medications and Disclosure Stigma

SMD = 0.565
p = .04
Missed Medications and Everyday Discrimination

SMD = 0.615
p = .03
Missed Medications and Major Discrimination

SMD = 0.850  
p = .003
Missed Clinic Visits and Everyday Discrimination

SMD = 0.700
p = .001
Missed Clinic Visits and Major Discrimination

SMD = 1.35
p < .0001
Missed Clinic Visits and Engagement with Health Care Provider

SMD = 1.13
p = .0005
Discussion

• Almost half of participants stated difficulty taking their medication

• Almost a third of participants missed a clinic visit within the past 12 months

• Participants poorly engaged in HIV care had greater experiences of discrimination and HIV-related stigma
Next Steps

• Complete the qualitative phase of the study
  – Understand qualitatively how these stigmatized identities intersect to impact care engagement

• Examine the longitudinal impacts of intersectional stigma on HIV care outcomes among older African Americans Living with HIV
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