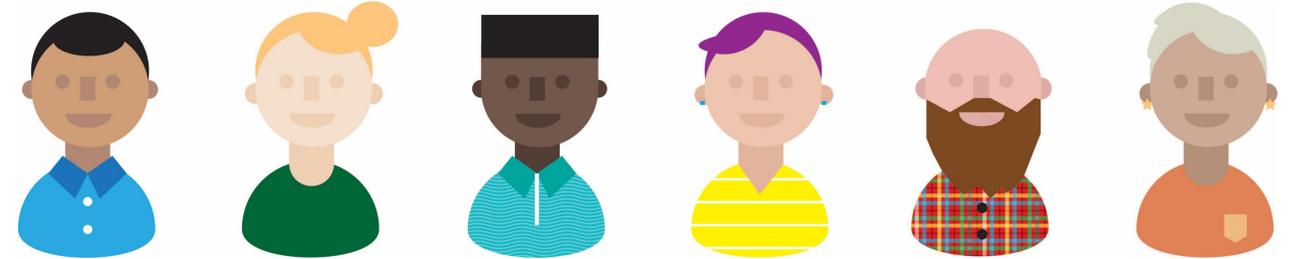


STIGMA IN SPECIAL APPALACHIAN POPULATIONS

Stigma As A Barrier To Care In the HIV and Transgender Communities

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Stigma is being markedly different or perceived to be different than the rest of a population as defined by Erving Goffman. Stigma from internal and external sources causes negative health outcomes for the people experiencing the stigma. Barriers to healthcare are exacerbated by the stigma experienced in the special populations of people living with HIV and AIDS, as well as stigma experienced by members of the transgender community. Additional stigma experienced by these two populations includes experienced and anticipated stigma. These two groups also experience stigma and rejection from the greater LGBTQ community.



METHODS

- The research strategy included a search through several electronic databases as well as key publications in infectious disease, gender studies, public health, and psychology. Thorough reviews of literature, as well as past key informant interviews were utilized for this study.
- Surveys focusing on stigma were also administered to people living in East Tennessee in the target populations of people that are living with HIV and AIDS and also to members of the transgender community.
- 135 total surveys were completed and evaluated. 65 respondents identified as transgender and 70 identified as Persons Living with HIV & AIDS (PLWHA).
- The survey was made up of 16 questions that had a rating scale where respondents were asked: "Because of feelings of shame or stigma related to your HIV status (or being transgender), have you discontinued medical care for any of the following reasons?"
- Survey questions had a scale of strongly agree to strongly disagree and included a not applicable option. Survey respondents were also able to share qualitative comments.

RESULTS

- Both populations in the study as well as the respondent in the intersection of both groups experience stigma that causes barriers to healthcare, linkage to care, and healthcare outcomes. This was evidenced by their survey responses and qualitative comments.
- Both populations reported that stigma from internal and external sources caused barriers to healthcare and health seeking behaviors.
- 70 Percent of Transgender respondents reported "being afraid of being treated differently by a healthcare provider because of being transgender".
- 65 Percent of the People Living with HIV & AIDS (PLWHA) were "afraid of confidentiality" and their HIV status being disclosed inappropriately.
- 55 Percent of the People Living with HIV & AIDS (PLWHA) had thoughts of hopelessness because of their HIV status during the past 6 months.
- None of the respondents identified as non-binary.

	People Living with HIV & AIDS	Transgender	Total
Male	55	8	63
Female	15	57	72
Total	70	65	135

135 Total Surveyed

CONCLUSION

- The populations studied experience internal and external stigmas that create barriers to healthcare and linkage to care.
- Both populations reported that stigma from internal and external sources caused barriers to healthcare and health seeking behaviors.
- Healthcare providers can actively reduce stigma by creating an empathetic and judgment free environment for clients in special populations.
- In Appalachia, healthcare providers need more training to better address the needs of their transgender patients and patients living with HIV.
- People living with HIV and AIDS are better connected to healthcare when they have a Ryan White medical case manager.

RECOMMENDATIONS

- Healthcare workers can actively reduce stigma by creating an empathetic and welcoming environment. This may require continuing education and training for the healthcare providers so they can meet the needs of their patients.
- A welcoming environment starts at the front desk. Front line employees should be trained to address patients by preferred name and pronouns. This may mean an update to current EHR or paper charts.

LIMITATIONS

- This study did not study other factors to linkage to healthcare such as health insurance status, social support networks, and other factors such as distance to primary care provider or distance to specialty medical providers.
- Other determinants of health such as proximity to greenways, parks, and community recreation areas were also not studied. Those determinants increase likelihood of overall health status.
- Key clinical measures of health outcomes for people living with HIV and AIDS, such as their CD4 Cell Count and their HIV Viral Load, were not collected. CD4 Cells are specialized cells of the immune system that are destroyed by HIV. Higher CD4 Cell counts are correlated to better outcomes in people living with HIV and AIDS.

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