HIV/AIDS-RELATED STIGMA PREVENTION AMONG NURSING STUDENTS

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ABSTRACT

Introduction: Studies have found that most people would keep away from people who are identified as HIV-positive. HIV/AIDS-related stigma is presented mainly because of its correlation with the marginalized groups and its infection process, diseases and death. The stigma of HIV/AIDS can cause some negative effects for people living with HIV/AIDS; discrimination, loss of jobs, violence, particularly in health care setting which can cause a major problem to the delivery of care even by the health workers, especially nurses. Nursing students would become practitioner nurse who would face and service people living with HIV/AIDS in the future, it would be very essential during their training in the college to prepare them to not discriminate and stigmatize the patients with HIV/AIDS. The purpose of this study was to review the potential interventions that have been applied for nursing students to prevent them in stigmatizing people with HIV/AIDS in caring context. Method: A literature review was conducted, searched through databases include MEDLINE, PubMed, and ProQuest from 2005-2016 based on this concept. Results: Four interventions were identified effectively prevent and reduce HIV/AIDS-related stigma among nursing students; combined program of knowledge and contact with PHA (knowledge-contact), brief stigma-reduction curriculum, body mapping as an educational tool, and team awareness seminar model. Discussion: Although several studies verified intervention in preventing HIV/AIDS-related stigma effectively, it is still needed to keep on searching and examining other possible interventions in different setting particularly in ASEAN countries.

Keywords: HIV/AIDS-related stigma, prevention, nurses, nursing students

INTRODUCTION

The number of people living with HIV worldwide continues to increase. It was estimated 36.9 million (34.3 million–41.4 million) people living with HIV by the end of 2014 globally (UNAIDS, 2015). In Indonesia, since the first report of AIDS case in Bali in 1987 the number of cases escalated steadily up to a total of 3,431 in 2005. By the end of 2014, Directorate General CDC & EH Ministry of Health, Republic of Indonesia reported that total number of HIV/AIDS had reached 206,095 with 40,216 of these cases were happened among productive ages (20-49 years). More than half of AIDS cases (67%) were among the risky group of heterosexual. Second group in term of risky acquisition were injecting drug users with a total of 8,462 cases (Ditjen PP & PL Kemenkes RI, 2014).

HIV infection is a chronic and manageable illness, which is usually considered as behaviorally caused illness. It is often thought that the HIV-positive people did something immoral or acts in a wrong way which allowed them to get the virus. Therefore, people make opinion about the cause of how people got infected HIV (Philip, Chadee, & Yearwood, 2014). Studies have found that most people would keep away from people who are identified as HIV-positive, and it will lead them to stigmatizing those living with HIV/AIDS (Varni et al., 2012). HIV/AIDS-related stigma is presented mainly because of its correlation with the marginalized groups (e.g. sex workers, homosexual, IDU) and its infection process, diseases and death. The stigma of HIV/AIDS can cause some negative effects for people living with HIV/AIDS; discrimination, loss of jobs, violence, particularly in health care setting which can cause a major problem to the delivery of care even by the health workers, especially nurses. Advancing in care and treatment to people living with HIV infection does not guarantee that they will not be stigmatized for the rest of their life (Varni et al., 2012; Florom-
Smith & Santis, 2012). Understanding about the nature of HIV/AIDS-related stigma need to be developed in order to reduce the negative effects (Chan, Stoové, Sringermyuang, & Reidpath, 2008).

All nations agreed and committed to end the AIDS epidemic by 2030 through the Sustainable Development Goals (SDGs). This is a golden chance for the AIDS response, where the world is constructing momentum achieving a sustainable, reasonable and healthy future for all. The pilot scheme to reach the goal which is allied to the SDGs is “the UNAIDS 2016-2021 Strategy” and it contents ten targets. The number eight of these 10 targets is “90% of people living with, at risk of and affected by HIV report no discrimination, especially in health, education and workplace settings” (UNAIDS, 2015). However, still stigma is a repeated challenge related to HIV testing, care and prevention, and it may be resulted other difficulties because of its effect among persons in different high-risk groups (Florom-Smith & Santis, 2012).

The major contact for HIV/AIDS care and treatment is the health sector (e.g., clinics, health centers, hospitals), and of course PLWHA will face the health providers including nurses. Stigmatization may be occurred throughout health care providers where they avoid to make direct contact with the PLWHA. When nurses and other health care providers develop unfriendly responses to PLWHA, it will lead to the barrier in the effectiveness of HIV care and treatment. Studies found that a significant number of health care professionals and health care students including nursing students possess stigmatizing attitude which result negative effect on their willingness and commitment to provide care and interaction with PLWHA. Refusing health care and keeping HIV patients away from others, represent attitude of HIV-related stigma showed by nurses and other health care providers (Philip et al., 2014).

Past researches identified that some nurses and nursing students were unenthusiastic to provide care and treatment for PLWHA with the main reason is fear of contagion, that is the reason why the attitudes of both nurses and nursing students toward PLWHA have long been examined and evaluated (Pickles, King, & Belan, 2009). This review focused only on nursing students since they would become practicing nurses in the future and are most likely contacted to caring for those who are living with HIV/AIDS (Farotimi, Nwozichi, & Ojediran, 2015). During their educational program in collage of nursing school, it is very crucial moment to provide nursing students interventions to access the knowledge, attitude and practice to enable them delivering safe, high quality care to PLWHA and prevention of HIV/AIDS-related stigma and discrimination. This paper reviews the potential intervention approaches that have been applied for nursing students to prevent them in stigmatizing people with HIV/AIDS in caring context.

METHOD

There were three computerized databases operated as identification resources: MEDLINE, PubMed, and ProQuest database. We systematically searched studies that published from 2005 to February 2016 which implemented particular interventions in preventing nursing students stigmatizing PLWHA. In order to obtain the related articles, we combined some keywords; HIV/AIDS, HIV-related stigma, AIDS-related stigma, people living with HIV/AIDS, nurses, nursing student with the Boolean operator “and” and “or”.

The criteria used for study selection were: intervention among nursing students handling for people with HIV/AIDS, stigma prevention and or reduction, original studies, published in English language, and no limitation where the studies conducted. Studies which include other health care students were excluded. Furthermore we also eliminate the review studies for the review process. Three reviewers (AR, DW, and RP) investigated every titles and abstracts identified by those three databases search. Each investigator applied inclusion and exclusion criteria to judge the eligibility of the studies found.

Our search yielded 178 publications. During searching process, we had modified the keywords entering through databases including the order, single and double words, and using of Boolean operator as well. It was assumed that the primary study about this theme was still limited. Screening both titles and abstracts were conducted to ensure whether the articles met specified criteria above. There was four eligible studies which were matched with study criteria and reviewed in this study, and the findings of this review study were based on those selected studies.
RESULTS
Four journal articles met all inclusion and exclusion criteria, and the study reports were from Hong Kong, India, Canada, and the US (Table 1). All the studies were published in English in between 2010-2014. Each of investigators (AR, DW and RP) appraised these four articles independently and finally combined the results in final discussion.

There was only one study which comparing single intervention with combined intervention, that was AIDS knowledge-only program compared to combined program of knowledge and contact with PHA (knowledge-contact). The other three studies investigating single intervention in preventing the stigmatization among nursing students toward PLWHA including: brief stigma-reduction curriculum, body mapping as an educational tool, and team awareness seminar model.

DISCUSSION
Several essential findings have emerged from this review study of intervention to prevent and reduce stigmatizing attitude among nursing students. This review study reported four types of HIV/AIDS-related stigma preventing intervention: knowledge-contact intervention, brief stigma-reduction curriculum, body mapping as an educational tool, and team awareness seminar model. In order to make final decision and produce policy, it still need to examine the findings carefully.

AIDS knowledge-only program content of teaching AIDS knowledge and infection control skills. As the result it had impact on increasing of AIDS knowledge and acceptance people living with HIV/AIDS, but it did not degrade stigmatizing attitude and feeling of contracting HIV. However, combined program of knowledge and contact with PHA (knowledge-contact) intervention were significantly effective program in reducing stigmatizing attitudes among nursing students toward PHA. Contact means interaction with individual or groups being stigmatized because of HIV/AIDS (Mahat & Eller, 2009).

Brief stigma-reduction curriculum showed promising intervention in reducing stigmatizing attitudes among nursing students toward PLWHA. After accepting the curriculum, students’ knowledge related to HIV was higher and reduced HIV/AIDS-related stigma. The students realized this curriculum application would change the way they care PLWHA and suggest their friends join the course provided. (Lohrmann & Välimäki, 2000) concluded students who have positive attitude toward PLWHA have more willingness to deliver care.
Table 1. A Summary of Research on HIV-Related Stigma prevention among nursing students

<table>
<thead>
<tr>
<th>Author</th>
<th>Aim</th>
<th>Intervention</th>
<th>Country</th>
<th>Results</th>
</tr>
</thead>
<tbody>
<tr>
<td>(Yiu, Mak, Ho, &amp; Yu, 2010)</td>
<td>Comparing knowledge-only program with knowledge-contact on nursing students’ attitudes, behaviors, and emotions towards PHA</td>
<td>AIDS knowledge-only program vs combined program of knowledge and contact with PHA (knowledge-contact)</td>
<td>Hong Kong</td>
<td>Knowledge-contact program was significantly greater than knowledge program in reducing stigmatizing attitudes among nursing students toward PHA.</td>
</tr>
<tr>
<td>(Shah, Heylen, Srinivasan, Perumpil, &amp; Ekstrand, 2014)</td>
<td>(a) assess the acceptability and feasibility of a brief stigma-reduction curriculum among Indian nursing students and (b) examine the preliminary effect of this curriculum on their knowledge, attitudes, and intent to discriminate</td>
<td>Delivering brief stigma-reduction adapted from the ICRW curriculum and delivered in English</td>
<td>India</td>
<td>This brief intervention resulted in decreased stigma levels and was also highly acceptable to the nursing students</td>
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<tr>
<td>(Maina, Sutankayo, Chorney, &amp; Caine, 2014)</td>
<td>Applying body mapping as an educational tool, including a nursing student, an expert facilitator, a PHA and a course professor.</td>
<td>Applying body mapping as an educational tool</td>
<td>Canada</td>
<td>The body mapping exercise as an educational can be a valuable tool for HIV education for first year nursing students.</td>
</tr>
<tr>
<td>(Cadiz, O’Neill, Butell, Epeneter, &amp; Basin, 2012)</td>
<td>Evaluated the effectiveness of an educational intervention, addressing nurse impairment, for addressing nursing students’ knowledge acquisition, changes in self-efficacy to intervene, and changes in substance abuse stigma</td>
<td>Team awareness seminar model</td>
<td>USA</td>
<td>Seminar (with Team Awareness) significantly affected knowledge and self-efficacy to intervene but did not significantly affect stigma.</td>
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Reflecting the role of body mapping, students were placed in a position to appreciate and accept another, accept the differences and challenge between persons, moreover it changed attitude in HIV-related stigma. Body mapping as an educational tool will be very useful to increase new knowledge and skills in dealing with HIV/AIDS. Negative attitudes towards PLWHA can affect with the quality of nursing care and can cause anxiety to nurses and patients (Bektaş & Kulakaç, 2007). Team awareness seminar model influenced the knowledge and self-efficacy, however it did not affected the stigma. Educational program which was based on evidence must play a crucial role in order improving teaching strategies to facilitate nursing students understand and overcome negative attitudes in HIV/AIDS-related stigma (Pickles et al., 2009).

LIMITATIONS
Some limitations were identified during analysis of the integrative review of the literature on HIV/AIDS-related stigma prevention among nursing students. First, difficulties to access the full text version from operated databases which result minimum resources. Second, the investigators ability in combining searching method during literature searching, and it lead to the limit in number of studies which might meet the criteria. The last identified limitation was the number of databases that investigators can access freely that caused the boundary to the broader sources.
CONCLUSION AND RECOMMENDATION

An integrative review of the literature was done to filter intervention in preventing and reducing HIV/AIDS-related stigma among nursing students effectively. Several studies verified intervention in preventing HIV/AIDS-related stigma such as: knowledge-contact intervention, brief stigma-reduction curriculum, body mapping as an educational tool, and team awareness seminar model. Although some interventions are effective in application, still it is needed to keep on searching and examining other possible interventions in different setting particularly in ASEAN countries.

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