

Health sector-based stigma and discrimination: Evaluation of attitudes and practices of health care providers toward HIV+ patients in Tanzania

American Public Health Association
135th Annual Meeting
November 7, 2007

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Understanding HIV/AIDS-related stigma and discrimination

Stigma:¹

a real or perceived negative response to a person or persons by individuals, community or society...characterized by rejection, denial, discrediting, disregarding, underrating and social distance

Discrimination:²

any measure entailing any arbitrary distinction among persons depending on their confirmed or suspected HIV serostatus or state of health

(1) Health Development Networks (HDN) and Global Network of People Living with HIV/AIDS. 2004. 11th International Conference for People Living with HIV/AIDS. Kampala, Uganda. Oct 2004

(2) UNAIDS 2000. Protocol for the identification of discrimination against people living with HIV. UNAIDS Best Practice Collection: 1-44.

Objectives:

To assess:

1. HIV/AIDS-related Knowledge
2. Attitudes toward patients living with HIV/AIDS (PLWHAs)
3. Perceived risk of infection
4. Discriminatory practices

Methods

- Cross-sectional study design
- Structured questionnaire
 - Multiple choice knowledge items
 - Attitudinal scale
 - Risk ratings
 - Reported frequency of practices
- 3 district hospitals
- Pre-HAART era

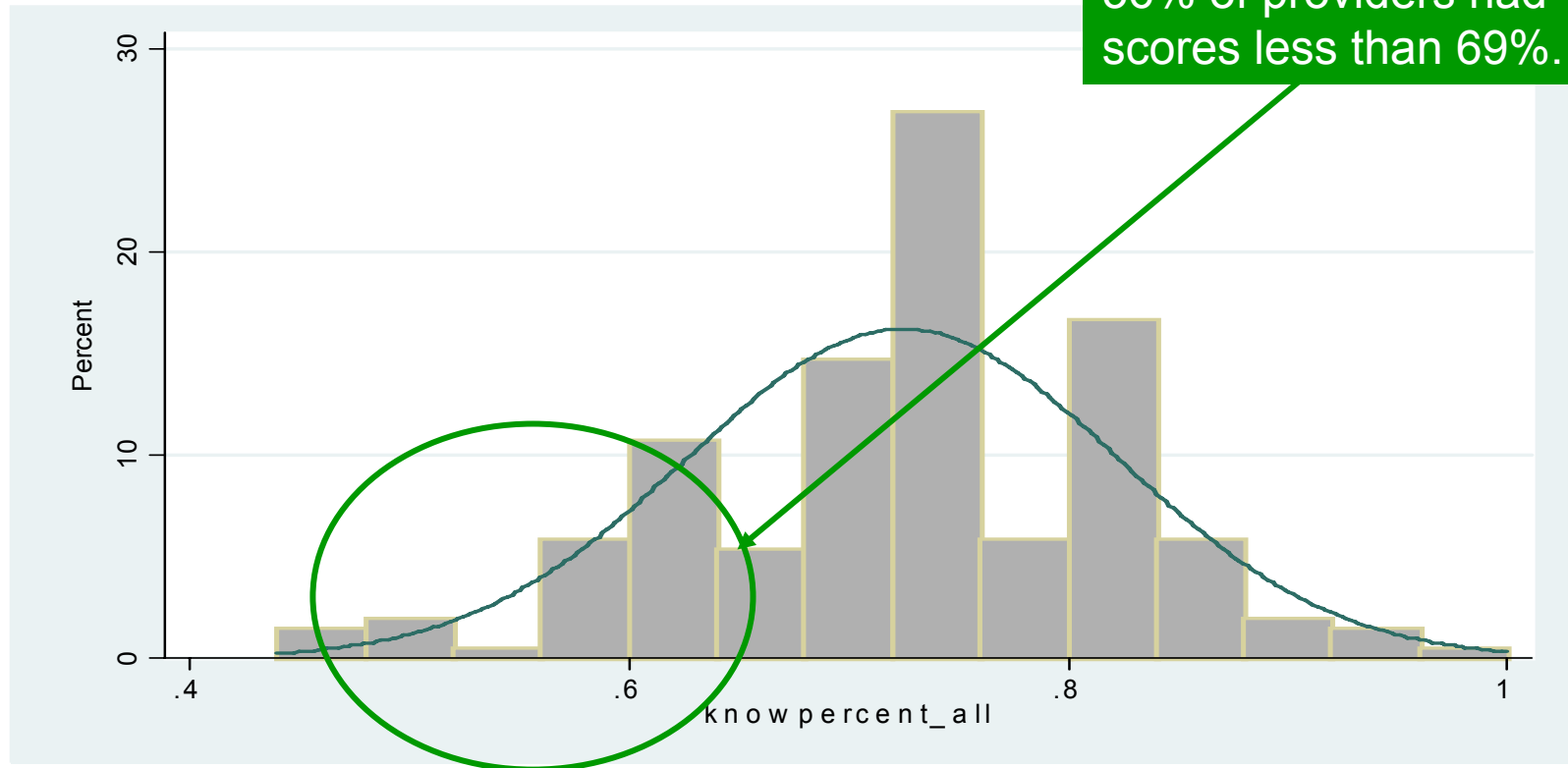


Provider Sample

Provider Characteristics	N = 204
Gender	
Male	31%
Female	69%
Provider Type	
Doctors	39%
Nurse / Midwife	37%
Medical Assistant	22%
Direct Patient Care	89%
Mean Age (yrs)	39.7
Mean years working in health care	16.4
Received HIV Training	51%

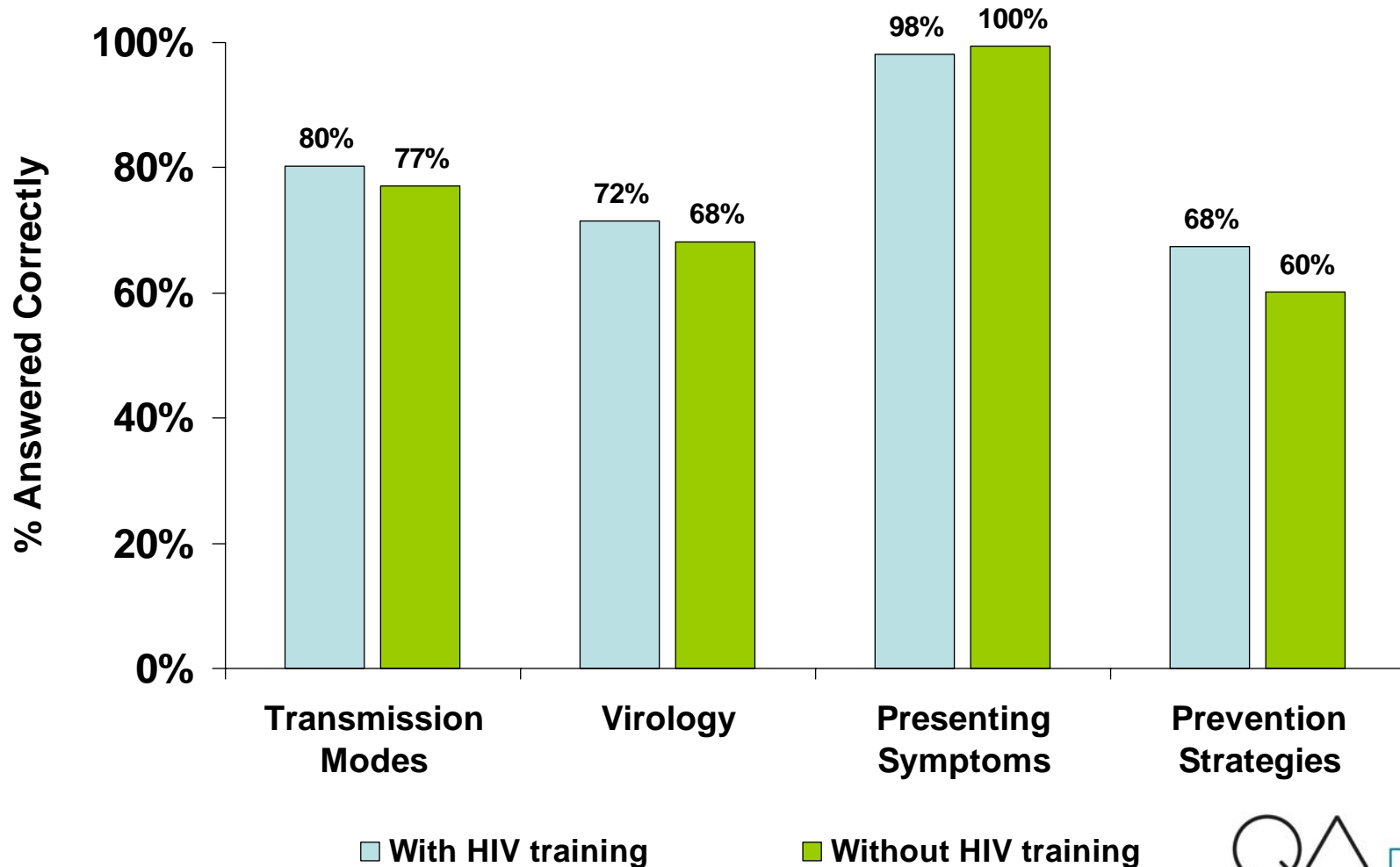
Provider Knowledge Score Overview

36% of providers had scores less than 69%.



Mean % Answered Correctly = 72%
(Range 44 to 100%)

Provider Knowledge by *HIV Topic Areas*



HIV Knowledge Items: *Most Often Missed*

Selected Knowledge Items: N=204	% Correct
Transmission Modes: Blood and semen are the only bodily fluids that transmit HIV.	41%
HIV Virology: Persons infected w/ HIV will likely develop antibodies w/in 6 mos.	40%
Prevention Strategies: HIV transmission can be prevented by not recapping needles Equipment used for PLWHAs must be disinfected more rigorously	39% 33%

Attitudes toward PLWHAs

Overview

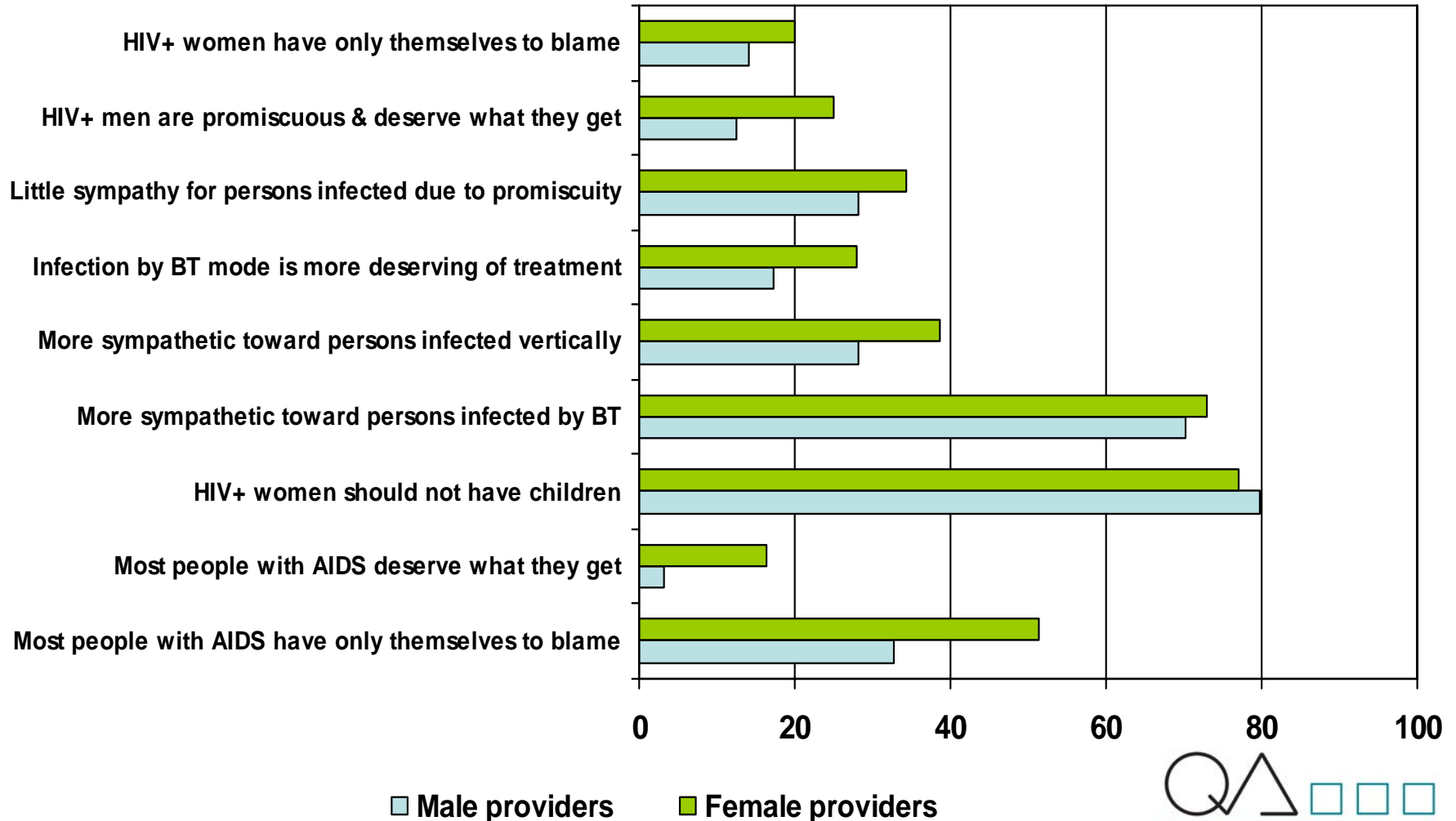
Most Common Beliefs

- Blame for Infection
- Differences in sympathy by perceived mode of infection
- Concerns of exposure to HIV

Less Common Beliefs

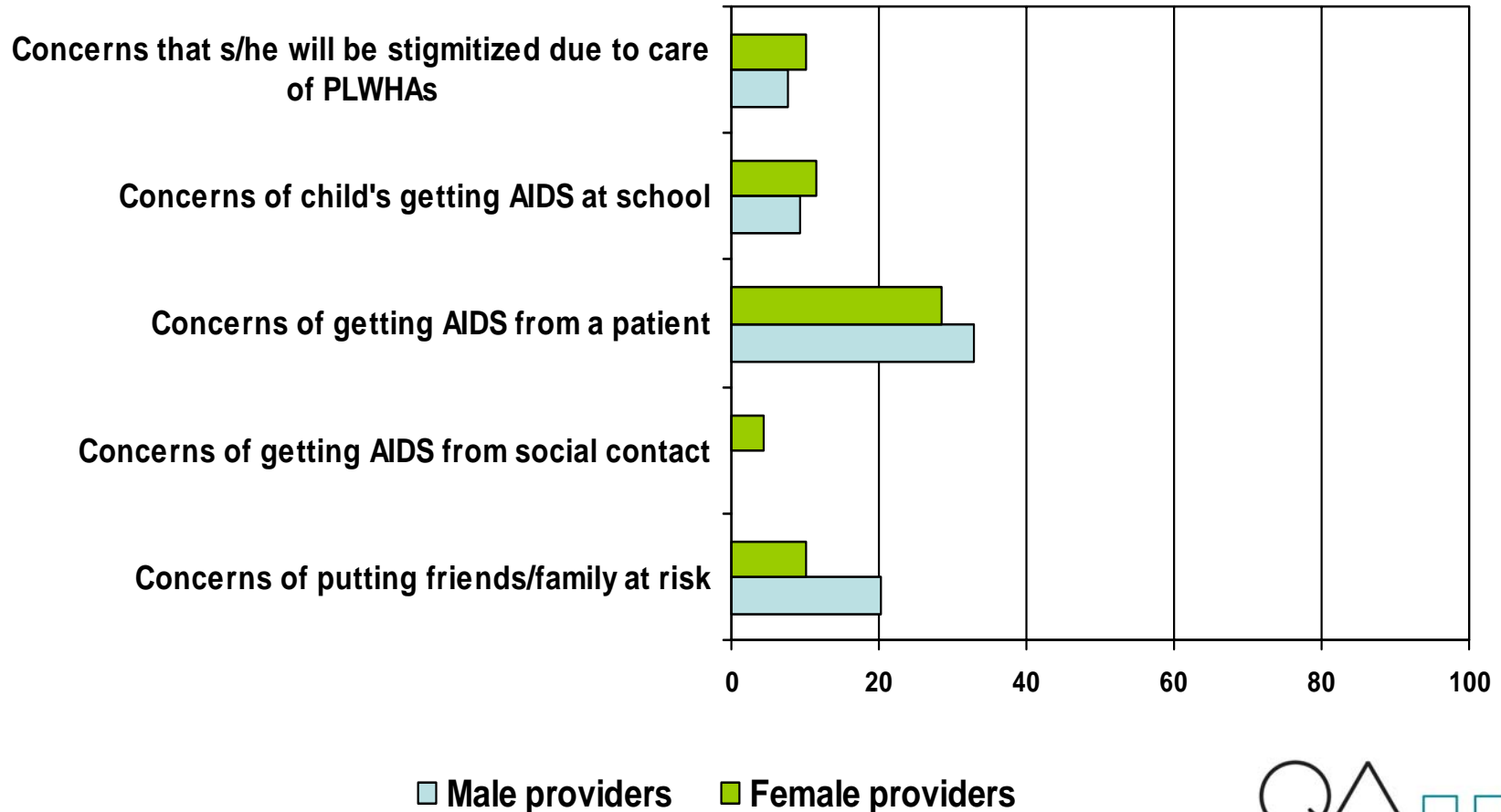
- Desire for separation

Attitudes toward PLWHAs: Selected Items (% Agreed)



Attitudes toward PLWHAs

Selected items (% Agreed)



■ Male providers ■ Female providers

Positive Attitudes toward PLWHAS

- Right to same quality of care
- Importance of working in caring manner
- Importance of respectful treatment
- Sympathetic toward suffering
- Willingness to provide care

Perceived Risk

Casual Contact

- **Perceived risk**
 - **72% assigned risk to at least 1 casual contact scenario**

Examples of Casual Contact with PLWHAs:

Shaking hands

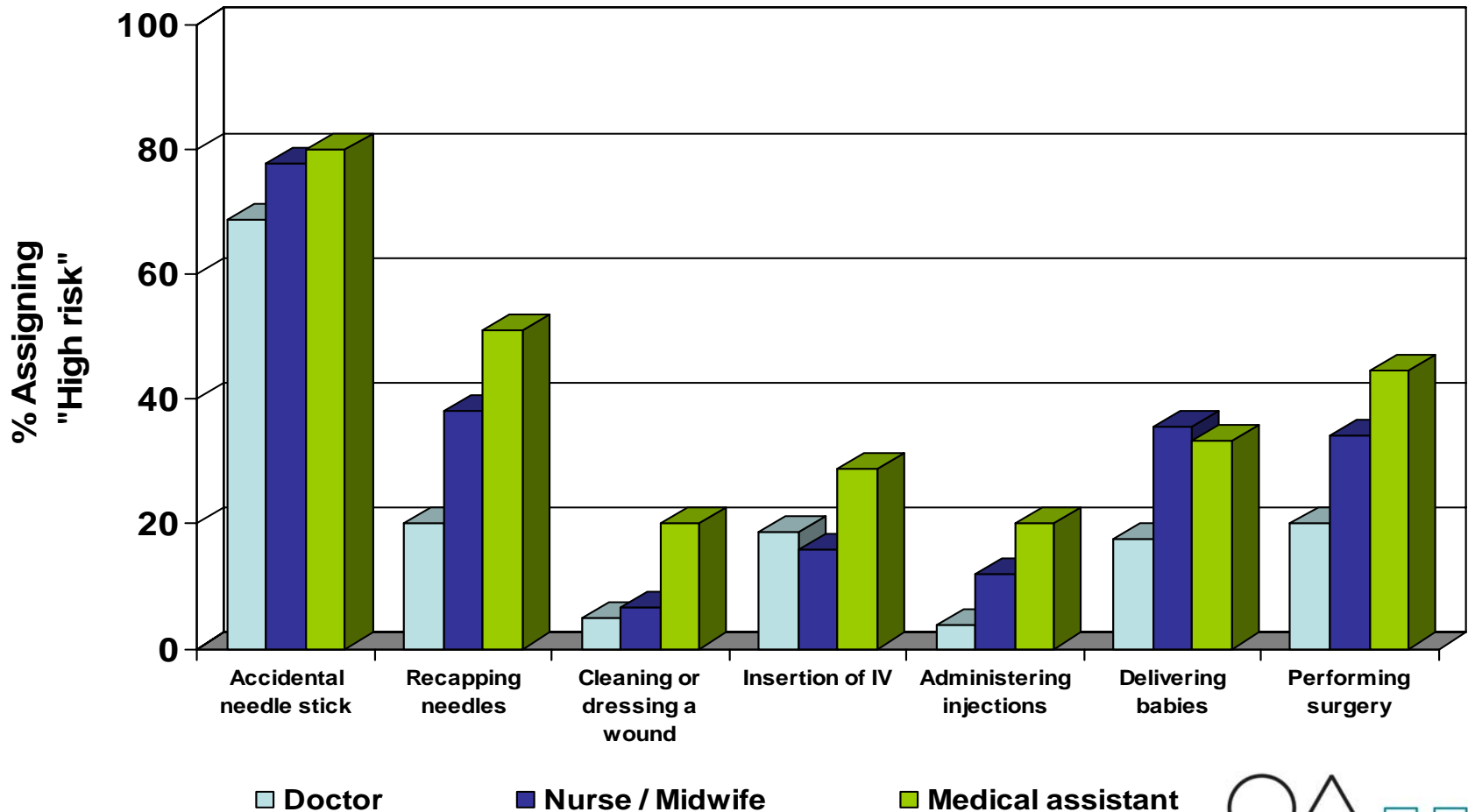
Sharing a drinking glass

Being sneezed on

Everyday work contact

Touching during patient assessment

Perceived Risk *Medical Procedures*



Discriminatory Practices Results

- Active denial of services 5%
- Passive denial of services 10%
- Sub-standard treatment 8%
- Selective use 35%*
- Financial discrimination 2%

Summary measure:

47% of providers reported at least one of these practices occurred at least some of the time.

Associated Factors:

Estimated parameters	Attitudes	Self Practice (Selective Use)
Multivariate regression coefficient	β	Odds Ratio
Explanatory Variables		
Knowledge of HIV	-0.54*	1.28
Perceived risk of infection	3.02*	1.36
Attitudes	NA	2.66*

* p < 0.05

Conclusion:

Summary of Findings

- Misconceptions of HIV transmission
- Positive and negative attitudes
- Concerns of occupational exposure
- *Potential* engagement in discrimination

Conclusion:

Study Limitations

- Qualitative review
- Questionnaire Design
- Unmeasured factors
- Cross-sectional data

Conclusion: *Next Steps*

- Relationship of factors
- Mixed methods approach

- Continuous HIV/AIDS education
- Communicative forum
- Anti-discrimination policies

Acknowledgements

- **This work was supported by:**

U.S. Agency for International Development (USAID) through the Quality Assurance Project (Contract No. Number GPH-C-00-02-0004-00) and the Health Care Improvement Project (Contract No. GHN-I-00-07-00003), both managed by University Research Co., LLC (URC).

- **Electronic report:** <http://www.qaproject.org/>
- **Additional questions/comments:**
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