

A Qualitative Study of Thirty-Two Persons living with HIV/AIDS on the US/Mexico Border

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Study Objectives

- **Examine the psycho-social & cultural factors that affect access to social & medical services along the US/Mexico Border by persons living with HIV/AIDS**

Study Participants

- **voluntary HIV patients**
- **VAC 5, NM, 5, El Paso 6, AZ 4 & CA 12**
- **Ages 18 -64**
- **US/Mexico border Hispanic residents**
- **Diverse transmission experiences**
- **Males 21, females 11**

Collaborative Study Partners

- **Valley AIDS Council –Harlingen, TX**
- **Centro Familiar, La Fe, El Paso, TX**
- **Camino de Vida, Las Cruces, NM**
- **Arizona Border HIV/AIDS, Tucson, AZ**
- **San Ysidro Health Center, San Ysidro, CA**

Methodology

- **face to face interviews**
- **Journey metaphor**
- **How HIV learned**
- **How they dealt with diagnosis**
- **Beliefs or attitudes as inhibitors**
- **Experience as a patient**
- **Female bilingual interviewer**

Contents Examined

- **Primary Exposure**
- **Risk Factors**
- **Precipitating Event to Care**
- **Meaning of Diagnosis**
- **Beliefs/Attitudes as Inhibitors**
- **Patient Satisfaction**
- **Stigma & Exposure to MSM**

Analysis

- **Analysis involved classification of information, organized to identify patterns & relationships**
- **Each interview transcript was reviewed individually & coded by topic**
- **Findings represent aggregate data**
- **No individual participants or care provider agencies are identified**

Primary Source of HIV Transmission (N=32)

	f	%
MSM	15	47
FSM	10	31
MSF	3	9
Intravenous	3	9
Blood transfusion	1	3
Totals	32	

Risk Behavior Types by Frequency & Percentage (duplicate counts)

	f	%
Multiple males	14	44
■ Multiple females	4	12
■ Sex HIV+ male	13	41
■ Sex HIV+ female	1	3
■ Needle Sharing	3	9
■ male sex work	2	6
■ Female sex work	2	6

Risk Behaviors by Frequency & Percentage (duplicate counts) Continued

	f	%
■ Spouse extra affair	6	19
■ Unprotected sex*	9	28
■ Alcohol abuse	3	9
■ Drug abuse history	4	12
■ Blood transfusion	1	3

Precipitating Care Event by Frequency & Percentage

■ Hospitalization	10	31%
■ Blood test	12	37%
■ learned Spouse +	5	16%
■ Symptoms	5	16%

Meaning/response to HIV Diagnosis by frequency & % (N=32 Duplicate Count)

■ Eminent death	22	69%
■ Emotional upset	20	62%
■ Fear	5	16%
■ Anxiety	7	16%
■ Surprise	6	19%
■ No emotion	2	6%

Inhibitors to Care Access by Duplicate Frequency Count

■ Fear Others knowing	5	16%
■ Fear others reaction	4	12%
■ Limited English*	6	19%
■ Lack of information	14	44%
■ Transportation	2	6%
■ I D card	4	12%

Patient Satisfaction by Frequency & Percentage

	f	%
■ Very Positive	16	50
■ Positive	15	47
■ Limited experience	1	03
■ Total	32	100

Comfort/Exposure to MSM

Response types by Frequency & Percentage

***Duplicate counts**

■ No problem	13	41%
■ Comfortable	15	47%
■ *Strange initially	4	12%
■ Negative	1	3%
■ *Fellow victims	6	19%
■ Fear	1	3%

Negative : That's what I do not like about the clinic..fags. I am different because I got HIV for doing drugs & having sex with prostitutes & lots of women

Stigma Type Experiences by Type & Frequency *Duplicate Count

	f	%
Not experienced	13	41
Self conscious	10	31
*Fear/disclosure	14	44
Ostracized	02	06

Ostracized Experiences

Case example :After a volunteer talk he overheard someone refer to him as “joto.” (queer)

Case example 2: In Mexican hospital patient was isolated in dirty room when it was learned he was HIV+

Summary/Conclusions I

- **Sample 21 males, 11 females**
- **Living on US/Mexico Border**
- **MSM most common source transmission**
- **FSM husbands 2nd common source**
- **Unprotected sex common risk**
- **Sex with multiple partners high risk**

Summary Conclusions II

- **Having symptoms or hospitalized are routes to care**
- **Eminent death is associated with initial diagnosis of HIV**
- **HIV & AIDS are perceived as same**
- **Lack of information most common barrier**
- **Anticipated language barrier**

Summary/Conclusions III

- **Most common form of stigma is self consciousness**
- **Fear of rejection forces these patients to distance themselves from family, friends, & delays care**
- **These patients find disease of HIV/AIDS as force that binds them not transmission route to disease**
- **We are all in this boat together, they say.**

Limitations of Study

- **Transcript & translation errors**
- **Shared meaning differences**
- **Gender/sexual orientation differences**
- **Subject tells interviewer what he/she thinks interviewer wants to hear**
- **Effect of being recorded**
- **Subject selection process**
- **Relevant experience of interviewer**
- **Nature of qualitative studies**

Limitations of Qualitative Studies

- **In-depth interviews provide only the attitudes, beliefs or opinions of the participant at a particular time**
- **The quality of the data is contingent on a clear understanding by both participant & interviewer of shared information meaning**
- **Sample is not representative**
- **Results are not generalizable to other populations**

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