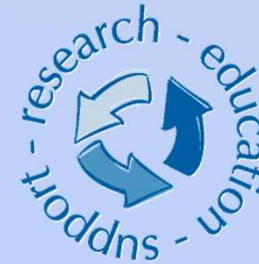


15th Annual Conference of the
National HIV Nurses Association (NHIVNA)



National HIV Nurses Association

Kemoh Rogers

Anglia Ruskin University, Essex

27-28 June 2013- The International Convention Centre, Birmingham

- ▶ NHVIVA Conference
- ▶ Birmingham 27-28 June 2013
- ▶ Kemoh Rogers
- ▶ Anglia Ruskin University



Title

- ▶ Mapping Unknown Territory:
The Narratives of Individuals
and Couples in HIV
Serodiscordant Relationships
(SDRs)



Research question

- ▶ “How do individuals and couples experience HIV serodiscordance”?



TODAY'S DISCUSSION POINTS

- ▶ Background
- ▶ Aims/objectives
- ▶ Methodology and methods
- ▶ Experiences of individuals and couples
- ▶ Summary
- ▶ QUESTIONS FROM AUDIENCE



Study Background

- ▶ Serodiscordant relationships - emergent phenomenon in HIV
- ▶ Antiretroviral medications enhanced the longevity/quality of life
- ▶ Regular serodiscordant relationships-both partners know through HIV tests
- ▶ Heterosexual/men having sex with other men (MSM)
- ▶ (Bekerman's, 2005; Smith, 1998, 2002)



Aims

- ▶ To explore the individual and collective experiences of both the HIV positive and negative partners
- ▶ Provide evidence that informs interdisciplinary/nursing policy and practice for supporting people living in HIV serodiscordant relationships.



Methodology

- ▶ Grounded theory by Strauss and Corbin (1990, 1997, 1999)
- ▶ Symbolic interactionism (Blumer, 1969)
- ▶ (Qualitative)



Grounded theory

- ▶ Concurrent data generation and analysis
- ▶ Constructs discovered to produce theory of serodiscordance using the data as a point of departure
- ▶ Data preceded theory and the theory emerged from and is grounded in the data;




Symbolic interactionism

- ▶ Human beings act toward things on the basis of the meanings that the things have for them
- ▶ Meaning arises out of the social interaction that one has with one's fellows
- ▶ Meanings are handled in, and modified through an interpretive process by the person in dealing with the things s/he encounters
- ▶ Behavioural and cultural patterns inferred (reflexivity) from subjective and emic experiences of research participants – their symbol



Methods

- ▶ Favourable NHS multicenter ethics approval by the South East London REC 1
 - ▶ 32 one hour in-depth interviews from 24 participants purposively recruited from three NHS Hospitals GUM clinics in NE London:
 - Couples & individuals; negative and positive partners interviewed within clinics
 - MAXQDA used to manage data sets through coding and retrieval
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Findings

Participants

				Country of origin	Gender	Age (yrs)
	No.	Participants	Interviews	Africa: 19	F+: 10	Mean = 39
Couples	8	16 (8*2)	24 (8*3)	Europe: 3	F-: 3	Range; 28-58
Individuals	8	8	8	Asia: 2	M+: 5	
					M-: 6	
	Total	24	32	24	24	



TRUSTING EXPERIENCE

007 F HIV-, (Individual interview; participated as couple) I think two years ago... he didn't have any (condom) and he was like oh, no, no, no there is no condom. But I said it's ok it's fine. He said not, I said no that's the way I want it, and I want it, that's it (laughs). ..I know it happens (HIV infection) but I've lived with him before when we didn't know that he had contracted anything. And we lived together and we were so free. We did so many things together that, we had sex, but then I didn't have it so why now that it was just a little bit of accident... if it happens then that's the way God wants it. May be that's the way God wants

it.



- ▶ *010 F+, (individual interview, participated as couple). My viral load just went undetectable and it always stayed that way. So I said to my doctor that willingly, I, we want to try not using condoms. So she explained to us the risks that could be there and also you know if he can regularly do tests as well now that we are doing, we are having unprotected sex. And she explained that the risks are very low as well. Where my, well my health is very good as well. My immune system has gone up and my viral load is zero. And you know we have been together; we have been together for like four years before, eh, before I went for the test and maybe I have had it all that time and he didn't catch it and yet at that time I was not even taking any treatment anyway. So we were confident ourselves and so far it's been good.*



Mistrusting experience

- ▶ 008 F- (Couple interview) *I wasn't, we were not using. Well, we didn't know (in raised voice). ...That while we were together before we both didn't know that this is the situation, we were not using condom and we were ok. ... Well the condom, we started using condom when we got to know. For me, something you don't know, ...cannot kill you but when you know, when you know about it oh, then the fear of all, how am I? I hope am not going to get it, or contract it.*



Supporting serodiscordance

- ▶ Supportive clinic
- ▶ 014M1 +(Couple interview); *There has been, I have been to the clinic with him just the once. But there is no, there is no special eh, time for us to go together. Eh, normally its just me going on my own and they support me quite well really.*



Supporting serodiscordance

- ▶ *011F- (participated as individual) From the clinic? I have not had support. But when I call them, the support they give me is that they say when you need us call us any time. If you want to ask anything or you want to know anything you just call us. We will be there for you. That's what they did for me.*



Disclosing serodiscordance

- ▶ *010F+ (individual interview; participated as couple). Oh, that wasn't easy. I had to wait until we were very calm you know. And because it was itching me a lot and anyhow I had the choice of not telling him but then am thinking if am going to live with this man for the rest of my life and am going to be on treatment and everything and they are going to do tests to the children and you know, you cant hide this thing. So, (pause; three seconds) first of all I had to pull, get myself together you know in terms of expecting the worst. Say for example well may be him leaving me that's it. So I had to be ready for that. So I said ok, I am just going to say it anyway. You know if he wants to go its ok,*



Disclosing

- ▶ *003F+ Long silence (five seconds) I don't think he has discussed it with any of his friends or any member of his family. Because from what he told me, he said you know, he does not think they will welcome the news. So he has not discussed it with anybody*



discussions

- ▶ SDRs are symbols
- ▶ Theory grounded in data
- ▶ Trusting and mistrusting experience
- ▶ Use attributes such as blood results, God, Not knowing does not kill
- ▶ Supportive clinic
- ▶ Disclosure



Summary

- ▶ Individuals and couples experience HIV serodiscordance differently
- ▶ To provide appropriate support, nurses should appreciate that
- ▶ *Any attempt at successful planning and reform must be aimed at the values of those experiencing the phenomenon. They provide inextricable tie to the social situations in which they find themselves (Cooley, 1926)*



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- ▶ Homerton PCT
- ▶ NHIVNA
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- ▶ City university, London
- ▶ Anglia Ruskin University, Cambridge & Chelmsford
- ▶ Participants
- ▶ Staff at research sites
- ▶ QUESTIONS FROM AUDIENCE



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