Spirituality: A cultural strength for young people living with HIV

Sharon T. Smith, PhD, RN, APRN-BC
UCSF, SON
July, 27, 2015
Spirituality: A cultural strength for young people living with HIV

• Sharon T. Smith PhD, RN, APRN-BC
• Objectives: 1) The learner will be able to identify the impact spirituality may or may not have on young people living with HIV both negatively and positively. 2) The learner will be able to understand and describe the role of spirituality in young adults with HIV.
• Conflict of interest: The author has no conflict of interest to declare
• Employer: Family Health Centers of San Diego
• Sponsors: Sigma Theta Tau Delta Omicron Chapter, Sandra L. Wise Founder’s Scholarship, Award Number T32NR007081 National Institute of Nursing Research.
Background and Significance

- HIV currently affects more than 73,000 young people in the United States (CDC, HIV/AIDS Statistics and Surveillance, 2012).
- HIV is a “youth-driven” disease (Benton & Ifeagwu, 2008, p. 109).
- Approximately 60% unaware of their status (Benton & Ifeagwu, 2008, p. 109).
- Spirituality important to young adults (Arnett 2002; Smith 2005).
Conceptual Definitions

**Spirituality**
- Encompasses beliefs about the meaning of life that underpin one’s values and relationship with the world, including but not limited to religious beliefs.

**Emerging Adult**
- A more descriptive later phase of adolescence, emerging adulthood is a stage that is empirically and theoretically distinct from adolescence and young adulthood and is distinguished by relative independence from social roles and from normative expectations.
Sample

- N=19
- Age = 19 – 25
- Gender = Male
- Race/Ethnicity= African American – 6, Caucasian – 5, Hispanic – 6, Biracial – 2
## Religious Affiliation

<table>
<thead>
<tr>
<th></th>
<th>Youth</th>
<th>Current</th>
</tr>
</thead>
<tbody>
<tr>
<td>Catholic</td>
<td>47.4%</td>
<td>31.6%</td>
</tr>
<tr>
<td>Baptist</td>
<td>26.3%</td>
<td>21.0%</td>
</tr>
<tr>
<td>Lutheran</td>
<td>5.2%</td>
<td>0%</td>
</tr>
<tr>
<td>Non-Denom.</td>
<td>10.4%</td>
<td>10.4%</td>
</tr>
<tr>
<td>Church Exp.</td>
<td>10.5%</td>
<td>0%</td>
</tr>
<tr>
<td>Spirituality</td>
<td>0%</td>
<td>37.0%</td>
</tr>
</tbody>
</table>
Data Collection Procedure

- Participants were recruited from UCSD, the To Help Everyone Clinic, and via “Snowball effect”.
- Study described to participants
- Informed of rights
- Consent/assent obtained
- Interviews scheduled
- Interview process described
- Confidentiality process explained
- Mandated reporter
Data Collection

- Interviews – 18 individual and 3 second interviews.
- Interviews audio recorded.
- Interviews transcribed verbatim.
- Field notes - after each interview.
- Iterative memos – after each interview.
- Purposive sampling.
- Theoretical sampling.
- Participant incentive - $20.00
Data Analysis

- Coding –
- A) Open coding and in vivo codes -
- B) Axial coding- disclosing, stigma, spiritual experiences, medication adherence, and experiences of living with HIV.
- C) Categories
  Sub-categories
Data Analysis contd.

- D) Concepts – the foundation of grounded theory
- E) Selective coding - relationships made systematically between codes
- F) Theoretical coding - making meaning of HIV, coming to terms with HIV, reconnecting to spirituality, living with HIV and “I am normal.”
Findings

• Spirituality – a cultural strength
• African Americans felt more stigmatized from church and family
• Hypocrisy from church
• Most practice spiritual beliefs despite negative messages.
Spirituality a cultural strength

Spirituality – religious perspective
• African Americans and Hispanics more likely to rely on spiritual faith and practices.

Spirituality- non-religious perspective
• Caucasian relied on non-traditional spiritual strengths –
Spirituality – religious perspective

• P #3: Just because I mean my spirituality may not be healing me, may not, I’m not cured, you know I am not perfect, I’m not normal but I am still o.k. because my spirituality, my beliefs are what’s’ getting me by… (Hispanic male)

• P #7: Um, knowing that there is a God out there and that He won’t let anything happen to me and trying to live my life as best as I can the way he wants and doing my part knowing about my HIV and putting it together and just going by that. (Hispanic male)

• P #8: That’s because um, spirituality it means a lot in my life and it keeps me going every day and it keeps my, what is it? I am not saying high hopes, it keeps me going, it uplifts my spirit. (African-American male)
Spirituality – religious perspective contd.

P #5: He’s supposed to be there for you. He’s supposed to look out for you. You know what I mean. He’s your over-looker person, and then I became homeless, and for two of the years that I have been homeless, I still went to church, and I still believed in God, and then it kept getting worse, and worse. More things happened, and more things happened, more things happened, and now I have so many things that are wrong with my body. It’s messed up, and he’s supposed to look out for you, and take care of you. That shouldn’t happen. (African American male)
Spirituality - non-religious perspective

• P #4: I set up my goals, they are my religion. So, that's what I hold onto to push forward, and that's what I look into. (Caucasian male)

• P #10: There's -- there's something out there because, I mean, just -- I don't believe in the religious stuff, but there's got to be a higher power out there. You know, you know, it's -- I mean, I do believe in karma like crazy. (Caucasian male)

• P #12: …but my spirituality is kind of like my own thing. I really don’t even consult churches or like -- like a pastor or priest or anything. … it’s where I go to connect with the universe is on the dance floor and I just dance around, you know, and it’s like that’s where I connect with God. You know, that’s a form of prayer for me. (Caucasian male)
Rigor and Credibility

• Atlas.ti data software
• Interview quality
• Systematic sampling
• Data-driving coding
• Reflexivity
• Member validation

1. I asked open ended questions.
2. I reported honest positive and negative experiences.
3. Interviews were transcribed verbatim
4. Committee members discussed and agreed on results.
Limitations

- Female participants
- Lack of participants of non traditional Christian beliefs and non-believers
- Very limited heterosexual perspective
Implications

- Increase clinician awareness for spiritual assessments in young people.
- Referrals to spiritual advisors and counselors as needed.
- Further research to understand the impact spirituality has on young people with chronic illness, specifically HIV.
References


