

## Internalized HIV Stigma, Mental Health, Coping, and Perceived Social Support among People Living with HIV/AIDS in Aizawl District, Mizoram

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**Abstract :** The stigma associated with HIV/AIDS negatively affect mental health and ability to effectively manage the disease. While the number of People living with HIV/AIDS (PLHIV) has been increasing day by day in Mizoram (a small north-eastern state in India), research on HIV/AIDS stigma has so far been limited. Despite the potential significance of Internalized HIV Stigma (IHS) in the lives of PLHIV, there has been very limited research in this area. It was therefore, felt necessary to explore the internalized HIV stigma, mental health, coping and perceived social support of PLHIV in Aizawl District, Mizoram. The present study was designed with the objectives to determine the degree of IHS, to study the relationship between the socio-demographic characteristics and level of IHS, to highlight the mental health status, coping strategies and perceived social support of PLHIV and to elucidate the relationship between these psychosocial variables. In order to achieve the objectives of the study, six hypotheses were formulated and statistical analyses conducted accordingly. The sample consisted of 300 PLWHA from Aizawl District, 150 males and 150 females, of the age group 20 to 70 years. Two- way classification of "Gender" (male and female) and three-way classification of "Level of IHS" (High IHS, Moderate IHS, Low IHS) on the dependent variables was employed, to elucidate the relationship between Internalized HIV Stigma, mental health, coping and perceived social support of PLHIV. The overall analysis revealed moderate level of IHS (67.3%) among PLHIV in Aizawl District, with a small proportion of subjects reporting high level of IHS. IHS was found to be significantly different on the basis of disclosure status, with the disclosure status of PLHIV accounting for 9% variability in IHS. Results also revealed more or less good mental health among the participants, which was assessed by minimal depression (50.3%) and minimal anxiety (45%), with females with high IHS scoring significantly higher in both depression and anxiety ( $p < .01$ ). Examination of the coping strategies of PLHIV found that the most frequently used coping styles were Acceptance (91%), Religion (84.3%), Planning (74.7%), Active Coping (66%) and Emotional Support (52.7%). High perception of perceived social support (48%) was found in the present study. Correlation analysis revealed significant positive relationships between IHS and depression as well as anxiety ( $p < .01$ ), thus revealing that IHS negatively affects the mental health of PLHIV. Results however revealed that this effect may be lessened by the use of various coping strategies by PLHIV as well as their perception of social support.

**Keywords :** Aizawl, anxiety, depression, internalized HIV stigma, HIV/AIDS, mental health, mizoram, perceived social support

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