HIV Disclosure: Concept Analysis

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ABSTRACT: The aim of this paper was to clarify disclosure and to identify attributes, antecedents and consequences of disclosure. Walker and Avant, 2005 model was used to describe and clarify the concept disclosure. Literature review was conducted by performing a search on scientific database using key terms: Disclosure, Social support and HIV. Twenty articles were selected of which ten were found to be useful in analysis of this concept. Disclosure is a process with the following attribute: communicating, timing, relationship status, experiencing the event, protecting someone. The antecedents identified were psychosocial factors, anticipated consequences and social support systems. Consequences identified were both positive and negative. These findings add to the body of knowledge on the disclosure concept.

Key terms: Disclosure, Social Support and HIV.

I. INTRODUCTION AND BACKGROUND
There are so many tremendous efforts made by stakeholders in order to reduce the prevalence of HIV/AIDS. Sub Saharan Africa still has a high number of people living with HIV/AIDS. Zimbabwe has the fifth highest HIV prevalence in Sub-Saharan Africa at 15%. 1.4 million people are living with HIV including 170 000 children, equating to 4% of the global total. New infections dropped by 34% between 2005 and 2013, with behaviour change and communication and high treatment coverage thought to be responsible for this decline. Yet it still very high at 15% as in 2014(UNAID, 2014).

Many people who are tested and are HIV positive find it difficult to tell someone about their HIV status and this has serious outcomes for their future. However there are some benefits and challenges of disclosure. It is important that they disclose their status to anyone of their choice to promote support and continuity of care among PLWHA. Disclosure is the backbone of effective HIV management and is recommended from the day one tests HIV positive, without delay. If only people manage to disclose their HIV status we would win the war for fighting HIV/AIDS.

Antiretroviral Therapy was initiated in 2003, to promote quality of life and to prolong it. A concept analysis of HIV disclosure will close the gap of different definitions and help in coming up with an ideal definition that will help in the management and care of PLWHA.

II. OBJECTIVE
The objective of this paper is to explain a concept analysis on HIV disclosure among PLWHA.

III. METHODOLOGY
Walker and Avant 2005, model was utilised in this concept analysis paper.

IV. DATA SOURCES
The articles that were reviewed and analyzed were downloaded from Google Scholar and Pubmed.

V. STUDY SELECTION
Literature review was done to find out definition of disclosure in HIV/AIDS. The aim was to explain well as to determine any differences in the definition and explanation of disclosure. Literature review of 20 articles was conducted from 2000 to 2016. Out of the 20 articles reviewed only 10 were only chosen for further analysis on the concept.
VI. RESULTS

Of the 20 articles reviewed assisted with the definition of the concept, however the articles had different approaches in defining disclosure 10 were dropped because they failed to explain the concept and it is these differences that opened the room for discussion and clarification of the disclosure concept.

The selected 10 articles described disclosure as a selective process that is done by the client at their own time. It was also noted that the key drive to non-disclosure is stigma, isolation and discrimination (Hay et al, 2000).

Ten articles were dropped because they were ambiguous with scanty information about the concept and were also too general. Stutterheim et al, 2014 considered disclosure as selective process that occurs based on the individual’s beliefs about the integrity of honesty and confidentiality of those who will have received the information. Obermeyer, et al 2011, defined disclosure as a process of whereby one reveals revealing one’s HIV status whether positive or negative.

Centre for Disease control CDC (2016) explained the meaning of disclosure as telling someone that you are living with HIV.

Concept Analysis

A concept analysis is a guide that is used to come out with concrete attributes of a given concept so as to put in place a clear practical definition that will guide operation for purpose of improving interaction through effective communication among health workers as they perform their role, (Walker & Avant, 2005). It is difficult to know the meaning of a concept but the best can be done to come out with something. The aim of this paper is to explore and describe the experiences of clients when they disclose their statuses, therefore there is a need to explain what disclosure is and what it is not. Clients need to understand that the benefits of disclosure outweigh risks because gaining life cannot be compared with anything.

This concept paper will use Walker and Avant, (2005) which has eighty steps, which are;

Step 1. Identify a concept
Step 2. Determine the purpose of the concept analysis
Step 3. Identify uses of the concept
Step 4. Define the concept
Step 5. Constructing model case
Step 6. Define borderline
Step 7. Identify antecedences and consequences
Step 8. Define empirical reference

Definition of disclosure

Disclosure in HIV by Sutterheim et al, 2014 is identified as a selective process that occurs based on the individual’s belief about the integrity of honesty and confidentiality by those whose who will have received the information.

Obermeyer, et al 2011, defines disclosure as process whereby an individual is supposed to reveal his or her own HIV status whether positive or negative.

Greeff et al, (2007) defines disclosure as telling someone that one is living with HIV. The above definitions vary in some sort.

Defining Attributes

These are traits or characteristics of a concept that are closely linked with it and will assist in differentiating a particular concept from any related concept, (Walker & Avant, 2005).

The following are the attributes of disclosure that were identified after analysis of the articles. These include: communicating something, timing, protecting someone, relationship status improving something, holding significant health related information, assistance needed to cope, tolerance for unpredictable results and expectancy of serious response, (Eutace et al 2010).

Identifying antecedents and consequences

According to Walker & Avant (2005) antecedence are those events that must take place before the concept being described take place. In this concept paper the antecedents identified were; psychosocial factors, anticipated effects and support systems Clair et al. 2005, highlighted that in order for disclosure to take place psychosocial factors come into play. If individuals perceive that they are going to be viewed negatively, then they are bound not to disclose but if the individuals feel that they will be accepted by others in the society then they will be motivated to disclose.
Anticipated consequences may have negative or positive effects to disclosure. Some clients feel less burdened if they disclose their HIV status, (Clair et al, 2005).

Social support systems provide environment that is conducive for disclosure to take place. Presence of others who have already disclosed may facilitate the individual’s disclose the HIV status (Clair et. al, 2005).

In a nut shell these mentioned antecedents affect decision to disclosure.

**Consequences of disclosure**

These are effects that follow an instance of a concept (Roger 2000). In this concept consequences obtained through literature review were; social isolation at work or home. Even though Zimbabweans are at an advanced stage of HIV management, job discrimination and loss still rife in some isolated areas (Bowen & Black, 2003).

**Constructing a model case**

Mrs P is a 32 year old woman who enrolled at an opportunistic infection management clinic. She tested HIV positive, her CD4 cell count was 450. She went through the counselling process for initiation of antiretroviral therapy. She also informed her family about her HIV status.

**Analysis**

The case for Mrs P demonstrated all the attributes of disclosure. Despite the fact that the husband was not there she did not conceal her HIV status.

**Borderline**

Mr S is 25 year old man who presented with HIV positive result at an OI clinic. He was angry because of his status, blaming his wife for the status. However he went through the counselling process and agreed that he was going to inform his wife about his status. He also feared that he was going to lose his job.

**Analysis**

Mr S does not possess all the attribute of disclosure however he was willing to inform his wife.

**Contrary case**

Mr X is attended to at the Opportunistic Clinic with a positive HIV result of more than three months. He has not informed anyone about his HIV status and has missed his review dates.

**Analysis**

Mr X lacks all the attributes of disclosure and as he has not been complying with his treatment. Upon counselling he exhibits a denial attitude and exhibited fear of rejection.

**Empirical Referents**

Empirical referents are groups of actual phenomenon that unfold and bring to the light the concept itself by their presence, Walker & Avant, (2005). In the context of this paper the attributes of empirical referents include timing, communication, and type of relationship as well as protecting someone.

**Communication**

Clients with good communication skills are more likely to disclose their HIV status. Self-confidence is also an important factor of dealing with confrontational situations like disclosure.

**Protecting Someone**

Someone who wants to protect his/her partner from HIV infection is seen by disclosing the HIV status.

**Timing**

Good timing in a communication skill. It entails identifying appropriate time to disclose one’s HIV status.

**Relationship Status Improving**

The empirical referent for improving relationship status means that once the infected partner discloses his/her HIV status, trust worthiness and openness prevails among the two and there is a likelihood of happily engaging in sexual activities using preventive measures.

**Experiencing event**

An individual who has accepted and disclosed his/her HIV status is bound to take their medication as prescribed even if it means a life time treatment.

**VII. CONCLUSION**

Issues of disclosure have been widely studied and it has been viewed as telling someone else about oneself. Various studies have shown that availability of support systems increases chances of disclosure among people living with HIV. Disclosure is the backbone of HIV management. It is an individualized multidimensional process which requires mental stability and individual’s preparedness, (Heggeness et al 2016).

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