

# Responsibility for HIV Prevention: Patterns of Attribution among HIV-Seropositive Gay and Bisexual Men

Claudine Offer, MPH<sup>1</sup>; Olga Grinstead, PhD, MPH<sup>1</sup>; Ellen Goldstein, MA<sup>1</sup>; Edward Mamary, DrPH, MS<sup>2</sup>; Nicholas Alvarado, MPH<sup>1</sup>; Jason Euren, BA<sup>1</sup>; William J. Woods, PhD<sup>1</sup>

<sup>1</sup>Center for AIDS Prevention Studies: University of California, San Francisco; <sup>2</sup>San Jose State University

## Background

- There is a call for innovative and effective HIV prevention programs that address the needs of people living with HIV/AIDS.
- Personal responsibility has been recognized as a possible motivation to reduce risk behavior.
- Exploration of the attribution of responsibility for HIV prevention is one way to gain further understanding of how responsibility may support risk reduction.

## Study Questions

- What are the attributions of responsibility for prevention among HIV+ gay and bisexual men?
- Are attributions of responsibility different after infection?
- How can these findings be used to improve the effectiveness of HIV prevention interventions for people living with HIV/AIDS?

## Methods

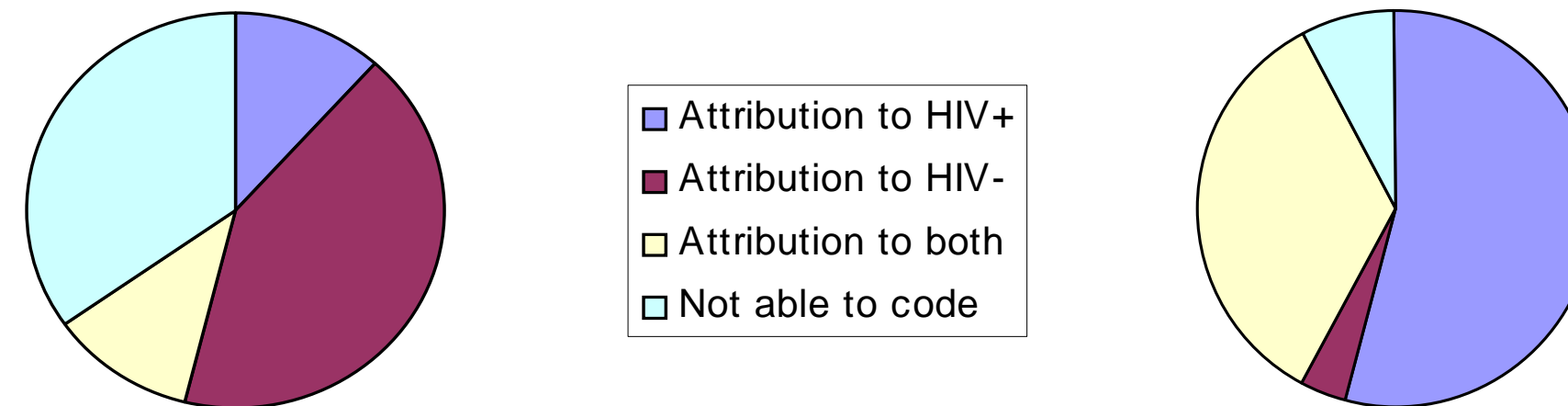
- Analysis of 26 semi-structured qualitative interviews was conducted.
- Inclusion criteria:
  - HIV-positive gay and bisexual men
  - Over 18 years of age
  - Recently infected (within previous two years)
  - English speaking
- Participants were recruited from ASOs, referrals, and word of mouth.
- Recruitment was directed to increase the age and ethnic diversity of the sample.
- Duration of interview was 1-1.5 hours.
- Participants were paid \$50.
- Attribution of responsibility before and after seroconversion was coded as attribution of responsibility to HIV-positive individuals, to HIV-negative individuals, or to both.
- Criteria for assigning attribution included clarity and strength of relevant statements and the number of statements in which attribution was made.

Demographic Characteristics of 26 Study Participants	
Demographic Variable	Frequency (Percentage)
<b>Age</b>	
18-19	1 (4)
20-29	5 (19)
30-39	14 (54)
40-49	6 (23)
<b>Ethnicity</b>	
Caucasian	11 (42)
African American	9 (35)
Latino	4 (15)
Asian/Pacific Islander	1 (4)
Native American/Caucasian	1 (4)

Interview Guide	
<b>Part I: Seroconversion Narrative</b>	
1.	Tell me the story about how it happened that you were infected with HIV.
2.	When did you first test positive for HIV?
<b>Part II: Current Prevention Practices</b>	
1.	What does your life look like now since you became infected with HIV?
2.	How do you express yourself sexually now?
3.	Tell me about the last time you had sex where you were confident that there was no risk of transmitting HIV.
4.	How about the most recent time you had sex where you thought there might have been some risk to transmit HIV?
5.	Have you changed anything about the ways that you use drugs or alcohol since you were infected with HIV?
5a.	(Ask only injection drug users) What about needle use?
5b.	(Ask only injection drug users) Tell me about the last time you injected drugs around other people where you were confident that there was no risk of transmitting HIV through needle use?
5c.	How about the most recent time injected drugs where you thought there might have been some risk to transmit HIV?
6.	What message would you give to a gay/bisexual man who is HIV+ and wants to avoid transmitting the virus to others? What would you tell that person to do?
7.	What message would you give to someone who is HIV- and wants to avoid getting HIV?
8.	Is there anything I didn't ask you that you would like to tell me about? Anything that is important for me to better understand your story?

## Results

### Attribution of Responsibility



### Before Seroconversion

- **Attribution of Responsibility to HIV-Negative People**

“And I know most of the time I didn't use condoms, and I know sometimes I did use condoms. So it was like playing Russian roulette with my life.”

“So I would use condoms if I thought something was risky or somebody was HIV positive for sure. And other times I would just take like educated risks. And I knew I was risking myself. I mean, I had all the information and I chose to go ahead and do it anyway knowing that I potentially would become positive.”
- **Attribution of Responsibility to Both HIV-Negative & HIV-Positive People**

“You know I made the decision to sneak out of the house and to do all of this stuff you know, to put myself at risk. And you know I put myself out there. I think that you know I was taken advantage of on some level. But at the same time I know that I kinda also put myself out there.”

“I guess I feel upset a little but I feel he maybe should have been more responsible because I was the inexperienced one. But I also recognize that it takes two people to not make the decision that we didn't make or however that works.”

- **Attribution of Responsibility to HIV-Positive People**

“I thought about killing him, and then I thought I would go and kill myself. Then I thought I don't want to go sit on death row for killing this motherfucker.... I was like, “Can I knowingly have him put in jail for knowingly giving me this shit?” And I thought about that there was a law that's saying that it was a crime to, you know infect someone knowingly with the HIV virus.”

### After Seroconversion

- **Attribution of Responsibility to HIV-Positive People**

“Anybody that is a positive that's dealing with someone that's negative there is a risk. And it actually is the responsibility for that person. It's a responsibility for the positive person.”

“Because I care about others.... I just can't live happy and relaxed having it in my head I'm infecting people. I just can't. I can't live with that.”

“I don't want to be alone for the rest of my life, and yet, I can never see myself going into another relationship again.... Because I don't know how it happened I don't want it to happen to anybody else and I will not expose them to it...”
- **Attribution of Responsibility to Both HIV-Positive and HIV-Negative People**

“I would say talk about it. Just bring it up [HIV status] no matter how – I mean you're negative and you want to stay that way, then bring it up. I mean it's on your shoulders to bring it up. Even though it should be on the other [HIV-positive] person's shoulders to talk about it, just understanding that they got so much fear, they got so much issues, so much – all this stuff going on.”

“I also believe that it's up to everybody to protect themselves. But somebody who's positive, I think, needs to really hit the high road and avoid, to the best of their ability, from passing it on to anybody else.”

### Obstacles to HIV Prevention

All of the participants described personal HIV transmission prevention strategies. Several important factors emerged as obstacles to participants' ability to enact these strategies.

- **Age and a Lack of Sexual Experience**

“And I guess I took my cue from that because he was far more experienced and had been having sex for 10 years already. Hindsight is 20/20 but foolishly I took my cue from the wrong person.”
- **Substance Use/Addiction**

“Well, basically I was using drugs. And some-times I would use rubbers, sometimes I wouldn't and I don't know. It's like when you're doing drugs your head gets fogged.”
- **Survival Issues**

“The possibility was there that I was infected with HIV but HIV was not killing me today and what was, what was killing me today was, not necessarily killing me, but what was causing me suffering today was, “I don't have a place to live. It's cold. I don't have anywhere to sleep tonight. It's raining.”

## Conclusions

- Overall, participants attributed responsibility for HIV prevention to HIV-negative individuals prior to seroconversion and to HIV-positive individuals after seroconversion. In fact, after seroconversion only one participant attributed responsibility for HIV prevention solely to the HIV-negative partner.
- The pattern of attributions can be seen as a shift in attribution or as a consistent sense of self (or personal) responsibility.
- The attributions reveal HIV-positive participants' strong desire to avoid transmitting HIV, the strong sense of burden that participants experience as HIV-positive men, and complex intrapersonal, interpersonal, and contextual challenges of maintaining prevention strategies.
- To avoid further stigmatization of HIV-positive persons, HIV prevention programs must address the issue of responsibility by acknowledging the strong sense of responsibility among HIV-positive gay and bisexual men and remaining sensitive to the burden that this sense of responsibility brings.
- Participants related obstacles that must be addressed in order for HIV-positive individuals to be able to enact their ideals regarding HIV prevention.

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- For more information on parent study, Seroconversion Narratives in AIDS Prevention (SNAP), see <http://www.caps.ucsf.edu/projects/SNAP/index.php>

**Address correspondence to**  
**Claudine Offer, MPH**  
 Center for AIDS Prevention Studies  
 University of California, San Francisco  
 50 Beale St., Ste. 1300  
 San Francisco, CA 94105  
 e-mail: [Claudine.Offer@ucsf.edu](mailto:Claudine.Offer@ucsf.edu)

University of California  
 San Francisco



AIDS Research Institute