Background
The decision to initiate antiretroviral treatment (ART) for HIV infection involves a number of factors ranging from treatment guidelines to provider and patient assessments of a patient’s likelihood to adhere to an ART regimen.

Two central factors that subsequently influence the ability to maintain adherence are:

1. Illness appraisals: How people with HIV think about their disease
2. Medication appraisals: How they think about HIV medications

Qualitative Analysis
The narratives were thematically coded for attitudes and beliefs about HIV medications in general, for the self, and for the other.

Procedures
The focus for this analysis was the narrative responses to questions about ART, adherence, and the meaning of the illness for the person and the positive or negative outcome of having this appraisal are confounded.

Results – Illness appraisals

Participant:
“Yeah, for fear of rejection. I have told a few people, but not even taking them yet. But I’m already feeling afraid— it’s like I’m going to die from missing doses, don’t do it, it’s like I’m going to die from missing doses, like, I’m going to die."

Interviewer:
“Taking medications would be stigmatizing."

Participant:
“A corollary of the view that taking HIV medications would expose them to stigma is the concern that the medications might make people acknowledge problem to an illness problem."

Another aspect of changed self-view that participants recounted was the HIV diagnosis affects social support. The majority of participants expressed a belief that the costs of taking HIV medications would be greater than the benefits.

Conclusion
This illness and medication appraisals all represent barriers to initiating a medication regimen and to maintaining adherence. HIV varies with regard to individual differences in illness appraisals into account in helping newly diagnosed clients to cope with their diagnosis, manage their healthcare, collaborate in illness-management about treatment, and prevent future complications from HIV.

Illness appraisals in people with HIV deciding to begin antiretroviral treatment: Implications for patient counseling

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Variable
Male
Ethnicity
White
African American
Latino
Other
Education
<College

Procedures
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Results – Illness appraisals

1) Illness appraisals: How people with HIV think about their disease

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