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Purpose

The purpose of this exploratory cross-sectional study is to determine the factors which predict or influence willingness to participate in rapid testing methods if offered in ER waiting rooms.

Aims

Describe the relationships between:

- Personal factors (self-esteem), coping resources (social support), and cognitive appraisal (perceived stigma; perceived risk for AIDS, AIDS knowledge) and an individual's willingness to participate in ER rapid HIV testing and enter care if HIV infected
- Health seeking and coping (problem and emotion-focused coping, risky drug and sexual behavior) and an individual's willingness to participate in ER rapid HIV testing and enter care if HIV infected
- Sociodemographic factors and an individual's willingness to participate in ER rapid HIV testing and enter care if HIV infected

Participants & Procedure

- 267 non acute ER patients 19-65 yrs.
- 163 Women
- 104 Men
- 203 African American
- 53 Caucasian
- 3 Latino
- 6 Native American

Conceptual Model

Nyamathi's Comprehensive Health Seeking and Coping Paradigm (CHSCP):

Nyamathi developed the CHSCP by extracting and modifying components of the Scholfeldt Paradigm of Health Seeking Behaviors and the Lazarus Theoretical Schema of Coping and Adaptation to provide a model to enhance or promote health seeking and coping of clients.

This modified version of the model consists of:

- Personal Factors (self-esteem)
- Coping Resources (social support)
- Sociodemographic factors (age, education, marital status, employment status, and social economic status)
- Cognitive Appraisal (perceived stigma, perceived risk for AIDS and AIDS knowledge)
- Health Seeking and Coping behavior (problem-focused and emotion-focused coping strategies and risky drug and sexual behavior)
- Health Outcome (willingness to be tested and enter care if needed)

Instruments

- Coopersmith's Self-Esteem Inventory
- Interpersonal Support and Evaluation List-12
- Attitudes Toward People with HIV
- Perceived Risk for AIDS
- AIDS Knowledge
- Risky Drug and Sexual Behavior
- MOS Emotion-Focused and Problem Focused Coping Strategies
- Researcher Developed Outcome Questions

Analysis

- Multiple Regression
- ANOVA
- Spearman Correlation

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Results

- Personal factors (**self-esteem**) coping resources (**social support**) and cognitive appraisal (**perceived stigma, perceived risk for AIDS, AIDS knowledge**) predicted likelihood of testing ($R^2=0.07$; $p=0.002$) with, CDC Knowledge as an independent predictor ($p=0.002$).
- Personal factors (**self-esteem**) coping resources (**social support**) and cognitive appraisal (**perceived stigma, perceived risk for AIDS, AIDS knowledge**) predicted likelihood of care entry ($R^2=0.07$; $p=.004$) with social support as an independent predictor ($p=0.04$).
- Emotion- focused coping inversely predicted care entry ($p=0.04$)
- Income ($p=0.03$) correlated with likelihood to test (Higher income participants tended to have lower likelihoods to test).
- Race correlated with likelihood to test $p=0.01$ and care entry $p=0.02$ (Caucasians had higher mean score for likelihood to test and care entry than non-Caucasians)

Conclusions

- These findings provide a basis for identification of at-risk individuals and the development of psychosocial interventions to increase HIV testing/care entry in groups such as African American men.
- Consideration must also be given to demographic variables such as race and income in intervention development.