



HIV ageing and ethics

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Impact of stigma on ethical issues

- 'It is hard to think of a single question of bioethics that goes unraised by [HIV]AIDS, that is not deepened by [HIV] AIDS' (Murphy, 1994:3)
- Pre-existing moral problems have been sharpened 'to an often excruciating degree' by HIV/AIDS (Crofts, 1991:37).



Ethics and morality

- Ethics – Greek *ethikos* – custom or habit
- Morality – Latin – *moralitas* – custom or habit

- Different ways of thinking about, understanding and examining how best to live a moral (or ethical) life

- Critically reflective activity

(Johnstone, 2009; Beauchamp and Childress, 2009)



Values in Code of Ethics for Residential Aged Care (2001)

- the right of individuals to:
 - be treated with respect
 - life, liberty, and security;
 - to have their religious and cultural identity respected;
 - self-determination;
 - an appropriate standard of care to meet individual needs;
 - the right to privacy and confidentiality;

***And the recognition that human beings are social beings with social needs*.**



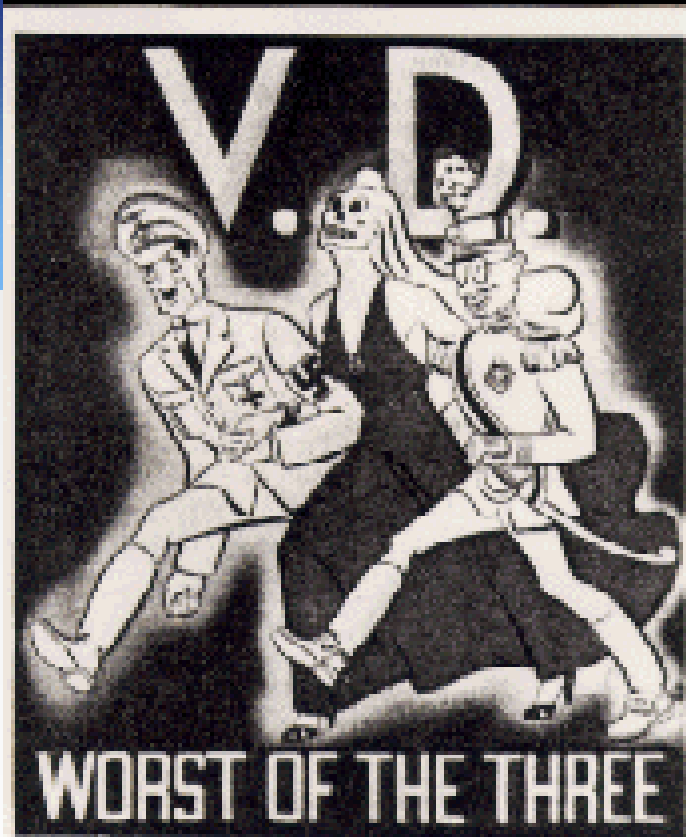
Stigma

- ‘a mark of disgrace, a stain, as on one’s reputation’, or, ‘a characteristic mark or sign of defect, degeneration, disease’ (Macquarie Dictionary, 1991: 1718).



Background to HIV stigma

- Related to stigma of STIs (associated with women - misogyny)
- Related to homophobia (associated with misogyny)





J. D. Crowe. Cartoon for San Diego Tribune. 1987.





Homophobia and misogyny

- Not only do homosexuals constitute a pariah group, they do so because the [...] act is thought to imply a descent into the foreign and inferior nature of the female (Millett, 1972; p.334).



Homophobia and HIV

- Second case of 'gay plague' disease diagnosed (Australian, 11 May 1983)
- Gays accused of being donors 'out of spite' (Daily Telegraph, 17 November 1984)
- 'Exterminate gays' – doctor (Sunday Telegraph, 2nd March 1985)



Key ethical issues in aged care for PLHIV

- Discrimination and stigma
 - Fear of infection
- Confidentiality and privacy



HIV-related discrimination

- any unfavourable treatment on the basis of known or imputed HIV status; action or inaction that results in people being denied full or partial access to otherwise generally available services or opportunities because of known or imputed HIV status (Department of Health, Housing, Local Government and Community Services, Creative Agency Brief, cited in Rotem *et al.*, 1994:vii).



Aged care examples

- Refused admission to nursing home or hostel
- Breaches of confidentiality
- Lack of recognition of partner
- Excessive infection control precautions
- Presumed to be gay, HIV positive
- Not feeling safe – cultural danger
- Multiple jeopardies
- Isolation – risk of elder abuse

(Kaiser Daily HIV/AIDS Report, 2003; also adapted from Barrett, 2008)



Fear of infection as basis for discrimination

- Risks are very low for HCW caring for PLHIV. Standard precautions protect against HIV;
- Fear of contagion associated with homophobia, lack of knowledge, fear of the unknown and lack of emotional involvement; also with notions of 'guilty' vs 'innocent' , distrust of infection control education, inconsistent practices by HCW
- Associated with HCW belief they have a 'right to refuse to care' for PLHIV
- Information about transmission alone can't address such fear.



Effective strategies to reduce fear in HCW

- Use of HIV positive speakers for education
- Actually caring for PLHIV or knowing someone with HIV
- Interventions to reduce stigma – education, counselling, coping skills, mentoring, consciousness-raising – many strategies work
- Safe environment to discuss fears of mortality, disease, sex



Confidentiality

- Confidentiality exists when a person discloses some information to another, who pledges not to divulge the information to anyone else unless the confider consents (Beauchamp and Childress, 2009);



Promoting confidentiality in aged care for PLHIV

- Staff education/training
- System changes



Strategies for action

- Education including ethics – moral ‘consciousness-raising’
- Prevention of discrimination as a quality and safety issue
- Develop HIV-and GLBTI-friendly services – use of ‘change champions’; need for systemic change (Barrett, 2008)
- HIV/AIDS Care organizations to continue to be activists, not to marginalize those growing older. Stigma and discrimination campaign (Menadue, 2009).
- Social justice and human rights approach



Conclusion

- Stigma affects all ethical issues in HIV, need to understand and demystify its origins;
- There is a need for ongoing ethical analysis and activism



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Stigma, discrimination and HIV/AIDS: the links.
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