Why develop an HIV/AIDS Educational Module?

Among African Americans, HIV/AIDS has a widespread and disproportionate impact such that it is of public health significance. Complex social, behavioral, genetic, and environmental factors appear to influence individual and group susceptibilities, yet we are only in the beginning stages of discovering these details and the impact of their interactions in vulnerable ethnic groups. Of these factors, undoubtedly the role played by patient knowledge of HIV/AIDS genetics and epidemiology in determining HIV susceptibilities is amplified when the level of this knowledge affects social and behavioral factors related to HIV/AIDS transmission. In North Carolina, it has been reported that many HIV-positive individuals experience multiple barriers to appropriate HIV/AIDS care and therefore frequently experience unmet medical and support services needs. We are interested in measuring the extent to which disparities in HIV morbidity and AIDS mortality reflect erroneous or incomplete knowledge of the genetics and epidemiology of the responsible viruses and the disease susceptibilities they induce.

Our hypothesis is that an improved knowledge of HIV/AIDS genetics and epidemiology as it relates to the North Carolina African American experience may help to reduce exposure to social and behavioral factors that adversely influence HIV morbidity and AIDS mortality. To test this hypothesis, we are looking for UNC faculty collaborators interested in producing educational modules tailored for use among adult North Carolina African Americans. These modules would provide accurate information on the genetics and epidemiology of HIV/AIDS. These modules would be introduced in the format of a community workshop. With the informed consent of participants, we would distribute questionnaires before and after the workshop to measure initial attitudes and perceptions, provide data on the impact of the workshop on participant’s genetic knowledge and to gauge changes (as a result of this genetic and epidemiological knowledge) on their perceptions regarding social and behavioral risk factors for HIV/AIDS. Specifically we would inquire how updated knowledge of HIV/AIDS genetics and epidemiology has affected their ideas about sexual risk factors, injected drug use, sexually transmitted disease, stigma, MSM, and access to health care. The impact of the
educational modules would be quantified and an association calculated on the relationship of intervention to the frequency of risk behaviors and disease incidence.