"Prevention with Positives": Incorporating HIV Prevention Into Routine Care of Persons Living with HIV Infection

Adopted by the ANAC Board of Directors, November 3, 2009

Position:

It is the position of Association of Nurses in AIDS Care that:

- Routine screening for at-risk sexual and needle-sharing behavior by HIV-infected persons be incorporated into nursing assessments, regardless of perceived risk on the part of the nurse;
- Nursing plan of care for HIV-infected persons include ongoing provision of prevention messages, education regarding risk/harm reduction, positive reinforcement of changes to safer behavior; and
- Nurses acquire updated training in evidence-based strategies to best assist HIV-infected patients develop an individualized risk/harm reduction plan.

Problem Statement:

Reducing HIV transmission must include an emphasis on preventing transmission by persons known to be HIV-infected. Health care professionals can substantially affect HIV transmission by screening HIV-infected patients for risky behaviors, communicating prevention messages, and referring patients to community agencies when additional counseling and support are indicated.

Despite evidence demonstrating benefits of clinician-initiated discussions regarding risky behaviors, multiple barriers limit implementation in HIV care settings. Barriers most often reported by providers include inexperience or discomfort asking questions and responding to issues that arise; incorrect assumptions about patients' participation in risky behavior; time constraints; and reimbursement issues (Bull, 1999; Tao, 2003; Duffus, 2003).

Background:

HIV prevention efforts have generally focused on behavior change in persons who are not HIV-infected. However, reduction of HIV transmission also requires an emphasis on risk reduction among HIV-infected persons (Indyk and Golub, 2006; Wilson, 2006). Research shows that persons who know they are HIV-infected tend to reduce behaviors that put others at risk (Valleroy, 2000; Fox, 2003). At the same time, recent reports, such as rising rates of STDs among HIV-infected MSM, suggest that these behavior changes are difficult to maintain over time (Crepeaz and Marks, 2002; Phipps, 2009). Furthermore, increasing rates

1 Adapted from Centers for Disease Control and Prevention (2003). Incorporating HIV Prevention into the Medical Care of Persons Living with HIV. MMWR, Vol 52 No. RR-12, 1-26.
of STD co-infections are worrisome because of STDs synergistic effect on HIV infectivity and susceptibility (Flemming, 1999).

In 2003, the Centers for Disease Control and Prevention partnered with the Health Resources and Services Administration, the National Institutes of Health, and the HIV Medicine Association of the Infectious Disease Society of America to recommend incorporation of HIV prevention strategies into routine health care of HIV-infected persons (CDC et al, 2004). The recommendations are categorized into three major categories:
1. screening for HIV transmission risk behaviors and STDs;
2. providing brief behavioral risk-reduction interventions in the clinical setting and referring selected patients for additional prevention interventions and other related services; and
3. facilitating notification and counseling of sex and needle-sharing partners of infected persons.

To facilitate adoption of the recommendations, a number of provider-directed "Prevention with Positives" curricula have been developed.

Incorporating HIV prevention into routine nursing care of HIV-infected persons is consistent with the nursing profession's historical concerns for the health of the individual as well as the community. It is not unusual for nurses to perform needed health care activities when other health care professionals do not have the time, skill or interest. Nurses, in fact, are well positioned to intervene with risk assessment and risk reduction counseling. They have assessment, communication, and teaching skills. They may also have more opportunities to incorporate these activities into routine patient care in all care settings.

Nurses who want to improve their HIV prevention assessment and counseling skills through a Prevention with Positives training can obtain program information through their state AIDS Education and Training Center (AETC; www.aidsetc.org/) or the Denver STD/HIV Prevention Training Center (www.denverptc.org/).

References:


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Tao, G., et al. (2003). Do physicians provide counseling with HIV and STD testing at physician offices or hospital outpatient departments? AIDS, 17, 1243-47.