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The Importance of Positive Psychological Factors among People Living with HIV: A Comparative Study

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Abstract: We aim to identify the differences in psychological well-being, resilience, and coping strategies between healthy subjects and HIV patients. The design followed in this work was empirical, not experimental, and cross-sectional with a correlational objective. The sample included a total of 399 participants (199 patients with HIV and 200 without pathology). The instruments applied for data collection were as follows: a questionnaire on socio-demographic data, the Psychological Well-being Scale, the Resilience Scale and the Coping Strategies Questionnaire. The study period was from February 2018 to January 2020. Patients with HIV had a significantly lower score than healthy subjects, in the resilience factors of perseverance and self-confidence. Subjects with HIV scored less in all dimensions of psychological well-being, with the exception of the dimension of autonomy. Finally, it was observed that HIV-positive subjects used rational coping strategies less frequently than healthy subjects, based on social support seeking and problem-solving coping. However, HIV patients scored higher in emotional coping strategies than healthy individuals.

Keywords: nursing; HIV; psychological well-being; resilience; coping strategies; adaptation



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1. Introduction

Human immunodeficiency virus (HIV) infection and AIDS diagnosis are currently a global public health problem. This pathology, in addition to producing a significant burden of disease in terms of morbidity and mortality, has had an enormous impact on the demography and economy of the countries most affected [1]. Currently, estimates provided by WHO and UNAIDS in 2017 state that 36.7 million people worldwide were diagnosed with HIV at the end of 2016. In the same year, approximately 1.8 million subjects were infected [1]. In Spain, the latest data show that, until 30 June 2019, 3244 new cases of HIV were detected [2].

The history of HIV infection is broad, not only scientifically, but also sociologically, in the way that it has impacted society [3]. Thus, the diagnosis of this pathology has complex psychological and social repercussions, which apparently hinder the well-being of these patients; thus, it is necessary to develop a process of adaptation to the disease [4–6].

HIV infection is a highly complex pathology, with a multifactorial process, which must be addressed from a biopsychosocial model. The subjects living with this disease deal with numerous physiological, socio-cultural, economic and psychological stressors that constitute a potential threat to their physical and mental health [7,8].

In this way, the social stigma associated with the diagnosis of HIV is considered a significant threat to combating the disease [9]. In addition, previous studies show that stigma is associated with more severe disease symptoms such as fatigue, gastrointestinal discomfort, numbness or body changes. It is even stated that people living with pathologies with clear social stigma suffer more perceived psychological stress [10,11]. Such stress,