

An Action Research Approach to Developing Culturally Relevant Interventions: The Stigma of HIV in a Vietnamese Community

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This was a collaborative project between faculty at Memorial University of Newfoundland and the University of Medicine and Pharmacy of Ho Chi Minh City, Vietnam, and representatives of a poor community located on the outskirts of a major city in Vietnam. The project used an action research approach in working with a community to identify a health issue they wished to address. First, the faculty members formed an advisory committee of 10 key members of the community and helped them to reach consensus on the issue to be addressed. Next, they collected primary data on the issue and summarized the data for the advisory committee. The faculty members and the advisory committee held meetings at which they agreed on community interventions to address the health issue. It is anticipated that these interventions will be implemented in fall 2007.

The project had three objectives. The first was for Canadian and Vietnamese faculty to work with an advisory committee comprising representatives of a poor community in Vietnam to identify a community health issue. (The issue, which was chosen by consensus, was the stigmatizing of persons with HIV.)

The second objective was for the faculty members to gather data describing the health issue, identify its underlying causes, and elicit suggestions for improving the situation from the perspective of community members. The advisory committee had input into data-collection methods (the participants would include persons with HIV and their family members, community members, and health professionals). Semi-structured interviews were used to explore participants' perception of the stigma and their suggestions for addressing the problem. Interviews were conducted with 10 community members with HIV, 10 family members of persons with HIV, 10 other community members, and 5 health professionals working in this community. Three focus groups were held: one for persons with HIV, one for persons who had a family member with HIV, and one for community members and health professionals. Interviews and focus groups were audiotaped, tran-

scribed verbatim, and translated into English. Faculty members then categorized the participants' perceptions of the stigma into themes and categorized the participants' suggestions for interventions.

The findings reveal that many community members equated HIV infection with heroin addiction and prostitution. While the community members said they understood how HIV was transmitted, most said they had some fears about becoming infected. The descriptions of the stigma provided by persons with HIV and family members led to the emergence of themes including *shunned by neighbours*, *viewed as poor parents*, and *ignored by health professionals*. Suggestions for reducing the stigma surrounding HIV obtained from different sources included the following: providing community members and health professionals with information about the stigma; educating families, the general public, and health professionals about HIV; and altering the behaviours of persons with HIV.

The third objective of the project was for faculty members to work with community representatives to identify and implement ways of addressing the health issue. Several meetings were held during which the faculty members presented the findings from the interviews and focus groups to the advisory committee and suggested possible interventions for reducing the stigma of HIV in the community. The suggested interventions included four types of education session: (1) for family members, on how to care for the infected person; (2) for health workers, on counselling skills; (3) for persons with HIV, on their own role in reducing the stigma; and (4) for hospital nurses, on the stigma of HIV and their role in the stigma. It is anticipated that these interventions will be implemented in fall 2007 and will be evaluated by measuring their comfort level among persons with HIV.

The overall goal of this project was to demonstrate how faculty can work with community leaders in a poor Vietnamese community to address a health issue. Challenges in using an action research approach to community development will be identified.

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