This discussion guide is designed to be just that—a guide. You don’t need to use all of it. As a facilitator, you can pick and choose which questions to ask. Questions are in bold italics, marked “Q”. Facilitation notes and suggestions (not necessarily to be read aloud) are in italics.

For more information about the PWNCares series and for links to stream or download the PWNCares video, visit pwn-usa.org/pwncares.

Active listening activity

This can be done either as a large group activity or a partner activity. If as a partner activity, you can use or adapt this script below.

Turn to the person next to you. We’re going to do a short activity. Practice active listening when you’re not speaking. That means when you’re listening, you’re not practicing what you’re saying. You are truly listening to your partner. Put your hands together. The partner with larger hands is partner B. Partner A will answer the questions first, and Partner B’s job is to actively listen and silently show your partner, with your face and your body, that you are paying attention to what they are sharing with you.

Before Everything Changed

In the video, five women living with HIV discuss their experiences—good and bad—with health care providers as people living with HIV. Kamaria describes doctor visits as a rare occurrence before her diagnosis. Alicia, on the other hand, says she went to the doctor regularly, as she was always on top of her health. For KeivaLei, the biggest before/after difference in seeing a doctor is around her transition rather than her HIV diagnosis. For Tranisha, who was born with HIV, doctor visits have always been a way of life.

Q: Which of the women were you most able to relate to when they described their attitudes toward going to the doctor before HIV? Why?

Give participants 2-3 minutes to answer this question.

Q: Has going to the doctor changed since your diagnosis? If so, how?

Give participants 2-3 minutes to answer this question.
The New Normal

In this section, the women describe different barriers to care they’ve experienced as people living with HIV. For KeivaLei, not prioritizing her HIV care and not being adherent to her medication made her reluctant to go to the doctor. For Tranisha, picking up her medications from the pharmacy was a challenge. Kamaria says that the number of different doctors and the effort of making appointments is stressful for her.

Q: Have you experienced challenges or barriers to making or going to doctor appointments or getting your medications? If so, what are those? Have you resolved them?

Give participants 2-3 minutes to answer this question.

Getting Care, Getting Respect

In the third part of the video, the women describe experiences in health care settings where they felt they were disrespected, discriminated against, and/ or treated dismissively. They also explain how they reacted to those experiences and how it affected their choices around health care afterward.

KeivaLei felt like she was given an “extra” exam when a doctor found out she was living with HIV. Alicia’s doctor didn’t want to touch her, and prescribed a medication that didn’t address the problem she had come for. Kamaria’s clinic did not want to have a conversation about changing her treatment regimen. Tranisha’s doctor was dismissive when she tried to explain the challenges she was facing, and threatened to stop prescribing her medications.

Q: Have you voiced your opinion to your health care providers about your treatment regimen or other needs you have? How did it go?

Give participants 2-3 minutes to answer this question.

Q: What are a couple of things health care providers do that make you uncomfortable? How could they change those behaviors?

Give participants 2-3 minutes to answer this question.

Q: Have you felt discriminated against by a health care provider? Did you feel it was related to your HIV status, your gender identity, your race or ethnicity, or a combination? Explain.

Give participants 2-3 minutes to answer this question.
In the fourth part of the video, the women interviewed describe some of the elements and experiences that make for strong relationships with care providers.

Tranisha describes not feeling judged by her doctor; never feeling rushed; and feeling they are part of a team. KeivaLei talks about being able to bring her dog with her, not feeling judged for her appearance, and feeling like her health was important to the clinic—and how that kept her coming back. Kamaria describes an ER doctor who sat down with her patiently and asked her what she needed, and how it helped get her back on treatment. Alicia explains that her providers remember what she tells them from one visit to the next.

Q: How is your relationship with your care provider(s)? What makes it good or bad? What could your providers do to strengthen that relationship?

Give participants 3-5 minutes to answer this question.

Social support is critical for women living with HIV to thrive and leads to better health outcomes. In-person support groups can be very therapeutic. Your local AIDS service organization or clinic may offer support groups. You can locate local services at www.poz.com/directory

In addition to local in-person services and groups, there are national and international groups that host calls, webinars, videoconferences, and periodic events, as well as sharing information, blogs and other resources for women living with HIV. Here are a few:

Positive Women’s Network - USA
www.pwn-usa.org

The Well Project
thewellproject.org

The International Community of Women Living with HIV (ICW)
www.icwglobal.org

Global Network of People Living with HIV
www.gnpplus.net

Make sure you are getting accurate information about HIV, treatment options and issues relevant to people living with HIV! Here are a few good sources of HIV-related information and resources:

www.thebody.com
www.poz.com
www.hivplusmag.com

Fear of intimate partner violence may prevent women living with HIV from disclosing their HIV status to their partners. If you are worried about this or about any signs of intimate partner violence, call

National Domestic Violence Hotline: 800-799-SAFE (7233)

thehotline.org

Women with HIV suffer from high rates of depression, and many may feel like their alcohol or drug use is out of control. This is nothing to be ashamed of. Help is available. Call

SAMHSA’s National Helpline: 800-662-HELP (4357)