A theory-based computer mediated communication intervention to promote mental health and reduce high-risk behaviors in the LGBT population

Jean Marie DiNapoli, MS, RN a,⁎, Mary Joy Garcia-Dia, MA, RN b, Leila Garcia-Ona, RN, MA-ANP-BC c, Deirdre O'Flaherty, MSN, APRN d

a Mount Sinai Medical Center, New York, NY 10029, USA
b Mount Sinai Medical Center, New York, NY 10128, USA
c Mount Sinai Medical Center, One Gustave L. Levy Place, Box 1495, New York, NY 10029, USA
d Lenox Hill Hospital, NY 10075, USA

1. Introduction

The Healthy People 2020, 2020 (2012) report has identified that isolation, lack of social services, and a shortage of culturally competent providers serve as barriers to the health of lesbian, gay, bisexual, and transgender (LGBT) individuals who have HIV/AIDS. These LGBT individuals suffer social, emotional, psychological challenges in addition to the physical debilitating effects of HIV/AIDS throughout their lifetime. In addition, the stigma they face puts them at increased risk for anxiety, loneliness, depression, isolation, substance abuse, chronic stress, rejection, internalized stigma, and suicidal ideation (Courtenay-Quirk, Wolitski, Parsons, & Gomez, 2006; Hatzenbuehler, 2010; Reich, Lounsbury, Zaid-Muhammad, & Rapkin, 2010). These mental health issues are often barriers that keep LGBT individuals from seeking healthcare that would help prevent the spread of sexually transmitted infections and contribute to improved well-being among these individuals. Thus, there is a significant need for innovative interventions to facilitate healthy sexual behaviors and well-being in this population.

2. Innovating a Theory-Based Intervention

The use of technology-enabled social and community support and group interventions through computer mediated self-help (CMSH) with LGBT individuals may help meet mental health needs of this group, and support healthy lifestyle practices. Research would be needed to examine the effectiveness of such an intervention in comparison to more traditional self-help groups. But an important first step is to articulate the theoretical rationale and framework for proposed interventions used in advance practice nursing (Kenney, 2013).

Reed’s (2009, 2014) theory of self-transcendence provides theoretical rationale for the development and use of a CMSH intervention in nursing practice. Self-transcendence theory proposes that individuals who face increased vulnerability or mortality may acquire an increased capacity for self-transcendence and its positive influence on mental health and well-being. The use of technology-enabled social and community support and group interventions through computer mediated self-help (CMSH) with LGBT individuals may help meet mental health needs of this group, and support healthy lifestyle practices. This article presents an overview of steps taken to propose a theory-based CMSH intervention for testing in research and eventual application in practice.
and temporal (such as through introspective activities, acceptance of self, and reflection on one’s past and future), interpersonal (by engaging with others and in learning), or transpersonal (through spiritual meaning and expression) (Reed, 2014). It is theorized that self-transcendence facilitates well-being in situations where a person experiences vulnerability or is attempting to overcome a difficult life event. Based upon this theory, we proposed that a CMSH intervention could facilitate self-transcendence among LGBT individuals.

3. Overview of the Research Literature

Research supports the significance of self-transcendence among individuals with HIV/AIDS. Several researchers (e.g., Coward, 2005; Mellors, Riley, & Erlen, 1997; and Ramer, Johnson, Chan, & Barrett, 2006) found a significant relationship between self-transcendence and well-being or quality of life for persons with HIV/AIDS (New York City Commission on HIV/AIDS, 2005). Mellors, Erlen, Coontz, and Lucke (2001) studied how patients with AIDS transcend the emotion and physical suffering of their illness and go on to live meaningful and productive lives. In 1993, Coward and Lewis explored self-transcendence in gay men with AIDS (Coward and Lewis, 1993). In addition, Coward (2003) focused on how middle-aged adults diagnosed with serious illness, advanced cancer, and HIV confronted their mortality.

Another phenomenological study by Coward (1995) described the lived experience of self-transcendence in a diverse group of patients with AIDS. The study showed that self-transcendence is exhibited by individuals reaching out for help (family, clergy, support group) and helping others. The realization of personal mortality becomes particularly strong when a person contracts HIV/AIDS; Ramer et al. (2006) found that this event can lead LGBT individuals to either lose hope or transcend out of the situation and find meaning through spirituality.

Although reaching out to others and engaging in various communications with others are expressions of self-transcendence, no research has been published concerning self-transcendence and the use of computer-mediated communication. The growth of computer-mediated communication such as CMSH creates a new way of social contact, linking and connecting individuals with shared interests, goals, and values (Desouza & Dutta, 2008). Related research supports the potential significance of CMSH in facilitating interpersonal dimension of self-transcendence.

In a study done by Smith and Rapkin in 1995 (cited in Coursaris & Liu, 2009), 40 percent of people living with HIV/AIDS (PLWHA) have unmet needs for social interaction. “In light of the social conditions of prejudice and discrimination, the Internet can be a feasible, acceptable, and promising source of information and emotional support for PLWHA” (Coursaris & Liu, 2009, p. 912). Coursaris and Liu (2009) also described Reeves’ study done in 2000 examining the Internet use of HIV-positive individuals and its impact on their coping abilities. Authors concluded that through the Internet, individuals acquire more HIV/AIDS information, augment their social support, and facilitate coping by helping others.

LGBT individuals are physically and mentally challenged with the progressive effects of HIV/AIDS and thus, have increased psychosocial needs which may not be totally met by surrounding care givers. Results from the research literature suggest that socializing through CMSH can increase LGBT individuals’ capacity to inwardly reflect on the meaning of their own lives living with the disease, interact safely and connect with others with empathy, and perhaps acquire a more optimistic outlook on their future. Through this social interaction, LGBT persons may achieve a sense of self-worth, sense of belonging, find new meaning despite their diagnosis, and ultimately achieve a sense of being healed.

4. Linking Theory to Intervention

Reed’s theory of self-transcendence (2014) suggests that individuals who experience vulnerable life events such as living with HIV may acquire the capacity for self-transcendence, which can in turn foster well-being and quality of life. Through social and community support via the CMSH group, LGBT individuals may improve their ability to cope with HIV, increase their sense of well-being, and improve their adherence to healthy behaviors and retention in care. According to Coursaris and Liu (2009):

A number of previous studies have identified some of the advantages that CMSH groups can offer: lack of stigmatization due to anonymity, easier openness or more candor due to social distance within the groups, availability and easier access that minimizes barriers of time and location, diversity of members’ perspectives, similarity of members’ experience, and a large amount of information and resources. (p. 912)

Through the use of CMSH groups, clinicians can implement theory-informed strategies (intrapersonal, interpersonal, and transpersonal) such as blogs, chat rooms, Skype, Website, group intervention sessions to expand the LGBT individuals’ social and community support. The use of CMSH allows open communication and interaction where LGBT individuals can find meaning and new purpose in life thus promoting their self-transcendence. In addition, utilizing the self-transcendence scale as a link from theory to practice can provide a framework for assessing and fostering self-transcendence as illustrated by the diagram (Fig. 1).

5. Linking Intervention to Research for Practice

As advanced practice nurses, we are interested in using a theory-based intervention to facilitate health and well-being in our patient population. Specifically, we plan to test the effects of a self-transcendence-based computer mediated communication intervention (such as CMSH) on the mental health and risk behaviors in LGBT individuals. We propose that the use of technology-enabled social and community support and group interventions through CMSH will provide LGBT identified individuals a safe and open communication experience that promotes trust, privacy, acceptance, and freedom to disclose with no pressure. We also expect that this group intervention will provide an opportunity to learn from other participants’ lived experiences.

The CMSH social support activities (for example, using mailing lists, Internet newsgroups, discussion/bulletin boards/forums, and live chat rooms) may allow the LGBT community to expand their personal boundaries inwardly through introspection, outwardly through listening and caring concern for others, and temporally by reflecting on their past experiences and anticipating their futures – all of which help build hope for the future and strengthening their present situation. LGBT individuals who achieve self-transcendence may better accept their diagnoses and overcome their own fears of death and stigma of the disease.

To date, no research has been found in which self-transcendence theory is applied to computer based communications. Therefore, an important next step is to examine whether significant relationships exist among CMSH participation, self-transcendence, and indicators of mental health and positive health behaviors. Finding support for these relationships would provide needed rationale for further refinement and testing of the CMSH intervention model to improve emotional well-being and reduce high-risk behaviors among LGBT individuals. Studying the potential effectiveness of CMSH groups as compared to traditional support in promoting their mental well-being, could contribute needed practice knowledge for advanced practice nurses. Further investigation on the effectiveness of CMSH in meeting the
psychosocial needs of LGBT can provide creative nursing theory-based solutions in transforming the nursing care of vulnerable population in today’s digital age.

References


