AETC-NMC
AIDS Education and Training Center
National Multicultural Center
HOWARD UNIVERSITY COLLEGE OF MEDICINE

**Case Study Adapted from Addressing HIV Care and Asian American Model**

Feng is a 22 year old Chinese American male who is gay and has had multiple partners over the last several years. He recently graduated from college and has found a position as an engineer in a prestigious firm. As the only male child, his parents are very proud of his accomplishments.

He has been experiencing flu-like symptoms for several weeks and upon the urging of his friends, has visited a clinic outside of his community. Feng chose this clinic because he does not want to run into any friends or associates of his family. He has not yet disclosed his sexual orientation to his family because of their traditional values and expectations regarding the role of the male child. His older sister is the only member of his family to whom he has disclosed his sexual orientation.

Although they are not close, she is accepting of his lifestyle. Although the Feng's father speaks some English, his mother speaks primarily Chinese. Feng reports that he has been "dating" but currently there is no one special in his life.

## *Discussion*

In this case, there are a number of cultural issues that are important to consider in providing the most effective care.

1. The patient's sexual orientation, the traditional views and values of his culture, the language barriers within his family, and the patient's limited social support are factors that can impact treatment adherence and outcomes.

2. Acknowledging and reinforcing his decision to seek care would help to ease the tension, establish trust and empower the individual.

3. In many cultures, seeking help is considered a sign of weakness and the patient may even feel that he does not deserve care because of the shame he has brought not only upon himself but his family.

The patient's position in his family as the only male child cannot be emphasized enough. The obligations attached to this role must be fully understood from the patient's perspective when making recommendations and referrals. To address the many issues presented here, the provider could link the patient to a peer group living with HIV/AIDS for support and information that will help him to maintain a positive attitude.

The provider could also be helpful in preparing and empowering the patient to begin the process of disclosing his sexual orientation and possible serostatus to his family. This may entail identifying a culturally competent interpreter to be part of the patient's process of disclosure.

- Discuss other Cultural Competence issues that may impact retention into care and treatment.