

# The Disclosure of Celebrity HIV Infection: Its Effects on Public Attitudes

## ABSTRACT

**Objectives.** Despite the magnitude of the acquired immunodeficiency syndrome (AIDS) epidemic, studies have shown low levels of public concern about human immunodeficiency virus (HIV)/AIDS. We investigated the effects of celebrity disclosure of HIV infection on the AIDS-related perceptions of urban men.

**Methods.** Measures of AIDS-related perceptions were collected from 361 men waiting for mass transportation in downtown Chicago; 252 were assessed at three time points prior to and 109 were assessed at two time points after professional basketball star Earvin "Magic" Johnson's disclosure of his HIV infection.

**Results.** Significant increases in concern about AIDS, interest in AIDS information, and talking with friends about AIDS occurred after celebrity disclosure of HIV infection.

**Conclusions.** Celebrity disclosure of HIV seropositivity demonstrated a marked change in AIDS-related perceptions among the men surveyed. Changes in awareness due to celebrity disclosure may lead to increased readiness to reduce risk and could be viewed as a window of opportunity for HIV prevention efforts. (*Am J Public Health*. 1992; 82:1374-1376)

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### Introduction

More than 135 000 persons in the United States have died from complications of acquired immunodeficiency syndrome (AIDS), 209 000 have been diagnosed with AIDS,<sup>1</sup> and more than 1 million are believed to be infected with the human immunodeficiency virus (HIV).<sup>2</sup> Heterosexually contracted HIV has increased by more than 8% from 1991 to 1992.<sup>1,3</sup> However, public perceptions about HIV/AIDS have not paralleled the magnitude of the epidemic. Surveys have shown a lack of concern about AIDS among the general public.<sup>4-8</sup> Consequently, the social climate in the United States has not facilitated population-wide HIV-risk reduction.

One potential agent of change in the social climate regarding AIDS is disclosure of celebrity HIV seropositivity. If we assume that identification with a target celebrity results in personal relevance, the disclosure of a celebrity's HIV seropositivity should affect one's self-perceived susceptibility. A recent occurrence of just such an event afforded us the opportunity to investigate this hypothesis. In a national press conference on November 7, 1991, basketball star Earvin "Magic" Johnson disclosed that he was HIV seropositive.<sup>9</sup> The present study investigated the effects of Johnson's self-disclosure on the AIDS-related perceptions of urban men.

### Methods

#### Study Design

To conduct a community assessment of men's perceptions of HIV/AIDS, we collected data at main arteries of the mass transit system in Chicago, which ranks eighth in reported AIDS cases among U.S. metropolitan areas.<sup>1</sup> Data were col-

lected in the summer and fall of 1991 (n = 169), and 10 and 5 days before Magic Johnson's disclosure (on October 28 [n = 58] and November 2 [n = 25], respectively), providing three baseline data points; data were also collected 3 and 10 days after Johnson's disclosure (on November 10 [n = 49] and November 16 [n = 60], respectively), with questions added to assess specific knowledge about his self-disclosure.

#### Measures and Procedure

Measures were derived from questions related to risk perceptions, interest in AIDS information (see Table 1), frequency of talking with friends about AIDS, and risk behavior histories. All questions were reviewed for content and clarity by an HIV health educator and were pilot tested prior to the study.

Men were approached as they waited for mass transportation. Asked to complete surveys about AIDS, potential subjects were told that the survey would take approximately 10 minutes, could be completed while they waited for their train, and contained personal and sensitive questions. Those agreeing to participate were provided with both a survey attached to a clipboard and a pencil. After returning the survey, participants were given a flyer that described the study, pro-

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vided accurate information about HIV/AIDS transmission, and included a phone number for further information. Participants were also compensated with a city mass transit token.

**Sample Description**

Of the 435 men who were approached, 361 (83%) participated. The respondents were 28.8 years of age (SD = 8.0); 94% completed high school; 42% reported an annual income of less than \$10 000; 55% were African American; 84% were unmarried; 51% had two or more sexual partners in the past year; 7% had histories of injection drug use; 12% had sexual partners who used injection drugs; 23% had had sex with a prostitute; 19% had had homosexual contact; 32% had a history of a sexually transmitted disease; 33% had been tested for HIV antibodies; and 7% were HIV seropositive. Nonparametric and parametric statistical tests did not show any differences in sample characteristics across the five assessment points. Although it cannot be assumed that the participants are representative of men living in Chicago, their demographic characteristics approximate those of Chicago urban communities with high AIDS incidence rates.<sup>10,11</sup>

**Results**

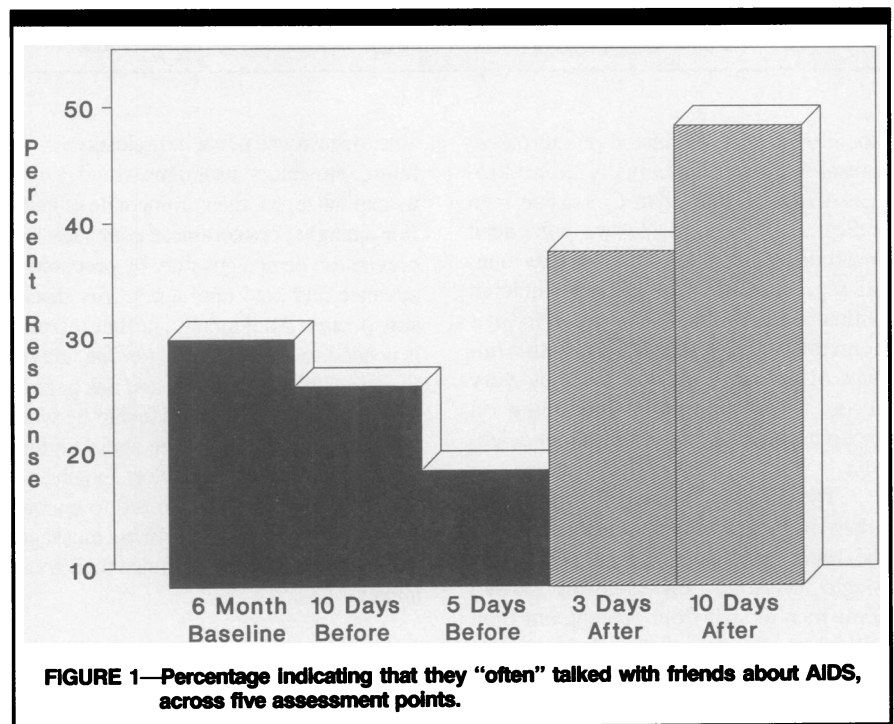
Analyses of variance on the five assessment times with respect to AIDS-related perceptions indicated significant differences in concern over an acquaintance getting AIDS ( $F [4, 353] = 3.23, P < .01$ ); the assessment taken 3 days after Johnson's disclosure demonstrated greater levels of concern than all three baseline points, and the assessment taken 10 days after showed greater concern than two of the baseline points. Self-concern and self-estimated risk of HIV infection also showed a similar pattern of increased concern but were not statistically significant (see Table 1).

Interest in getting more AIDS information changed significantly from baseline to postdisclosure ( $F [4, 341] = 2.96, P < .02$ ). Of men assessed 3 and 10 days after disclosure, 58% and 56%, respectively, were very interested in getting more AIDS information, as compared with 42%, 38%, and 32% of men at the three successive baseline assessments (see Table 1). Similarly, men were more likely to discuss AIDS with friends after the disclosure ( $\chi^2 [4] = 10.89, P < .03$ ) (see Figure 1).

**TABLE 1—Mean (SD) for Perceived Susceptibility and Interest Variables across Assessment Times before and after Magic Johnson's Self-Disclosure**

	Before Disclosure		After Disclosure		95% Confidence Interval	
	6 Months	10 Days	5 Days	3 Days		
I am concerned that I will get AIDS <sup>a</sup>	2.36 (1.13)	2.38 (1.02)	2.48 (.96)	2.63 (1.11)	2.65 (1.04)	2.35, 2.57
I am concerned that someone I know will get AIDS <sup>a</sup>	2.84 (1.07)	2.77 (.99)	2.68 (.95)	3.27 (.94)	3.15 (.94)	2.83, 3.04
What is your risk for getting the AIDS virus? <sup>b</sup>	2.35 (1.11)	2.24 (.99)	2.28 (.98)	2.35 (1.07)	2.78 (1.24)	2.28, 2.52
How interested are you in getting more information about AIDS? <sup>c</sup>	3.21 (.84)	3.13 (.84)	3.04 (.89)	3.52 (.65)	3.44 (.77)	3.19, 3.36

<sup>a</sup>Ratings on a 4-point scale: 1 = not true for me; 4 = very true for me.  
<sup>b</sup>Ratings on a 5-point scale: 1 = no risk at all; 5 = extremely high risk.  
<sup>c</sup>Ratings on a 4-point scale: 1 = not at all interested; 4 = very interested.

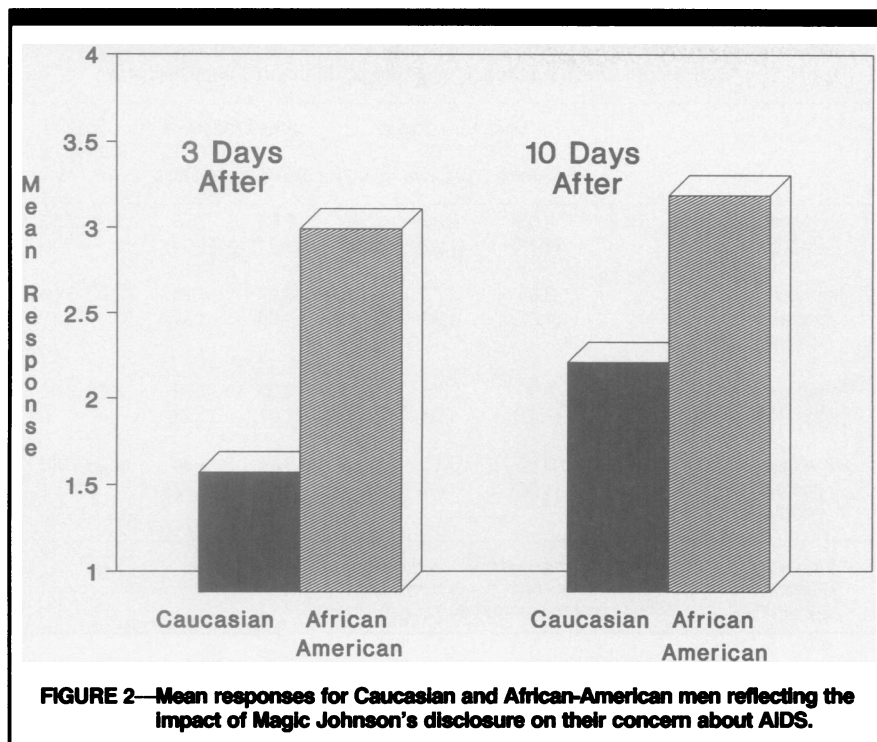


All men surveyed at both postdisclosure assessments indicated that they had heard about Magic Johnson. While 86% had discussed the disclosure 3 days after, 100% had talked about it by 10 days after. Comparisons between African-American and Caucasian men showed no differences in talking with friends about the disclosure. However, significant differences were found on the question "Are you more concerned about AIDS since hearing about Magic Johnson?" (Measurement was taken using a 4-point scale ranging from "Not at all" to "Much more

concerned.") African-American men indicated that Johnson's disclosure increased their concern about AIDS to a greater extent than did Caucasian men both 3 days after ( $t[30] = 4.25, P < .01$ ) and 10 days after ( $t[35] = 3.43, P < .01$ ) (see Figure 2).

**Discussion**

The shift in social climate identified in the present study appears to be a function of Magic Johnson's self-disclosure, although lack of experimental control does



not allow for the exclusion of alternative causal factors. Substantially more African-American men than Caucasian men indicated that the disclosure influenced their concern about AIDS. Because mental representations of persons afflicted with a health problem are related to their perceptions of susceptibility,<sup>12</sup> the impact of celebrity disclosures may vary across subpopulations, depending on group associations with the target celebrity.

The impact of celebrity disclosures on urban men's perceptions sets the stage for risk-reducing behaviors. We conclude that Magic Johnson's self-disclosure caused some men to shift from precontemplation toward contemplation of self-change.<sup>13,14</sup> With continued awareness and information, men may engage in self-reevaluation processes that ultimately inspire behavioral changes.<sup>13</sup> Thus, disclosure of celebrity HIV seropositivity provides a natural enhancement for AIDS prevention messages. Given the likely, albeit unpredict-

able, occurrence of such disclosures in the future, prevention programs would do well to capitalize on their immediate impact. For example, concentrated education and prevention campaigns may be prepared in advance and held until a celebrity disclosure occurs. Additionally, further research is needed to understand better the link between celebrity disclosure and risk perceptions, as well as the relationship between any resultant change in the social climate and changes in risk behavior. Finally, social risks should be minimized to encourage disclosure, and celebrity messages should be tailored to maximize their social impact. □

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