

Module I

Introduction: Psychosocial Factors Related to HIV/AIDS Care

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General Overview – Module 1

- Factors associated with HIV/AIDS care and intervention
 - **Social**
 - Culture and Economic Dependence
 - Political Response (country and district level)
 - Stigma and Discrimination
 - Family and Community Response
 - **Psychological**
- Challenges to HIV care in Rwanda
- Group Exercise – Situational Analysis

Social Factors and PLWHA

- **Social factors impacting PLWHA include:**
 - Gender
 - Age
 - Cultural Norms and Economic Dependence
 - Country and District Level Political Response
 - Stigma and Discrimination
 - Family and Community Response

Social Factors and PLWHA Con't

- Gender
 - Women viewed as significantly vulnerable and high risk group
 - Women sex workers particularly at risk
 - Women whose husbands or male sex partners who have sex with other women are at significant risk
- Young people under 20 years of age, particularly young women/girls between 15 and 20 are at significant risk

Cultural Norms and Vulnerability of Women

- HIV infection for women transmitted through heterosexual intercourse is the most likely means of transmission
- Among female sex workers, HIV infection rates as high as 50% (Heise & Elias, 1995; Agyei-Mensah, 2005)
- As much as $\frac{1}{4}$ to $\frac{1}{3}$ of women between ages of 15 and 49 become infected in large Eastern and Central urban centers of Africa (Heise & Elias, 1995; Agyei-Mensah, 2005). This includes Rwanda.
- In Rwanda, women infected at a rate of 45% compared to their male counterparts

Social Factors and PLWHA Con't

- Age
 - Approximately 22,000 children under age 16 infected with HIV (WHO, 2006)
 - Most infections of children in Rwanda are perinatally acquired
 - Some infections due to child sex workers who have been orphaned due to death of parents from AIDS or HIV related complications.

Cultural and Socio-Economic Factors in Sub-Saharan African and HIV Transmission

- **Distal**
 - Micro/macro socio-economic and cultural influences of disease such as
 - Migration
 - Poverty
 - Urbanization
 - Culture
 - War
 - Religion
 - Politics
- **Proximal**
 - Biological
 - Sexual behaviors

Social Factors and PLWHA Con't

- Stigma and Discrimination
 - Stigma and discrimination in the community
 - Stigma and fear of job loss; discrimination in the workplace
 - Stigma and fear of social isolation

Social Factors and PLWHA Con't

- **Family and Community Response**
 - Families have 2 common reactions – supportive or alienation
 - Families can be a key source of support in helping the HIV infected person deal with psychosocial challenges they will be confronted with as it relates to their HIV status
- **Communities can have 3 common reactions**
 - Denial that HIV is a problem in the community
 - See the problem as the fault and responsibility of the HIV infected person
 - Be proactive and create a community response that combats stigma, promotes self-protection and education and encourages psychosocial and medical wellbeing

Psychological Factors and PLWHA

- Mental Health Status and Ability to Perform Basic Daily Living Activities
- People with HIV/AIDS often experience
 - Depression
 - Increased Anxiety
 - Isolation
 - Participation in Risky Behaviors
 - Poor Coping Strategies
 - Ability to be resilient

Psychological Factors and PLWHA

- Depression
- Anxiety
- Isolation
- Participation in Risky Sexual Behaviors
- Poor Coping
- Ability to Be Resilient

Psychological Factors and PLWHA

- Mental health status can change depending on a few key factors:
 - Receipt of diagnosis
 - Denial and Acceptance of Diagnosis
 - Family and community response to HIV+ status
 - Illness related affects (biological) on mental health

Psychological Factors and PLWHA

- Psychological Tasks/Activities Impacting PLWHA
 - Personal hygiene (self-care)
 - Ability to work (physical health and ability to perform laborious activities)
 - Run a household (meet family needs such as cooking, cleaning, caring for children, working on the farm, etc.)
 - Socialize (participate in community/family activities; rituals/ceremonies)
 - Psychological and social stress of family caregivers
 - Economic Dependence

Critical Issues and Major Challenges to HIV Care in Rwanda

- Rwanda's health infrastructure
- Inadequate equipment and human resource capacity
- Lack of financial resources in health sector
- Adequate medical facilities
- Increase in Psychosocial Intervention Programs
- Stigma and discrimination
- Care coordination

Group Exercise: Situational Analysis

There are many elements within a situation or environment that is often complex and changing. Understanding the situation is the beginning step in designing some type of programmatic or intervention response. The more we know about the situation, the more solid will be the foundation of the program or intervention you develop. Situational analysis involves analyzing problems in a broad sense. The degree of the problem, along with needs and assets, examining relevant research, relevant environment impact and a pooling of the knowledge and experience of those conducting the analysis. Involving others in situational analysis helps to build a better understanding of the context or situation and creates opportunities for strong arguments to support a needed program or intervention.

Group Exercise Con't

Conduct a brief situational analysis of HIV in Rwanda.

The analysis will focus on 6 major areas:

1. Who is most affected and why? Consider vulnerable groups such as children, youth, sex workers, women, etc.)
2. Identify the **Social** issues impacting transmission and need for services for PLWHA. Consider cultural and political factors as well.
3. Identify **Psychological** issues impacting PLWHA
4. Identify the status of Care Coordination
5. Identify Critical issues/major challenges
6. Identify one key intervention strategy that can help to meet the needs of PLWHA. Make an argument for why this intervention strategy will have a positive impact.