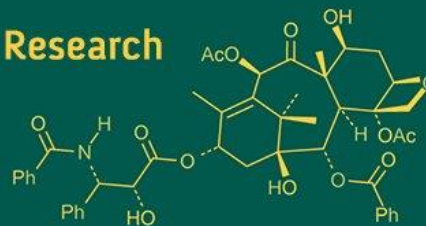
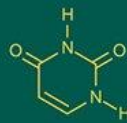
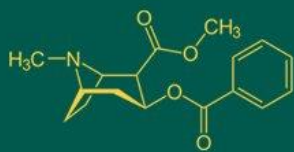


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Stigmatization: A major inhibiting factor to practice of holistic and home-based care (HBC) for people living with HIV/AIDS (PLWHA) in Africa

OTOBO David DanielDOI: <https://doi.org/10.33545/26174693.2020.v4.i1a.123>**Abstract**

Africa is the most populated black continent in the world. It has the largest population of youths, and is a very vibrant region. However, Africa also has the highest burden of HIV, with the most common mode of transmission being via sexual transmission. It is endemic and present in every country in Africa. Due to the public health implications of HIV/AIDS related complications, it is paramount to treat the infected patient in terms of both Primordial, Primary, Secondary and Tertiary levels of prevention. The greatest challenge faced amongst people living with HIV (PLWHA) is psychosocial, due to a high prevalence of stigmatization and discrimination. This has driven a lot of PLWHA into isolation and has inhibited them from seeking for medical care. Not seeking for medical care can lead to late presentations, more transmissions, and even death. This vice of stigmatization has also inhibited HIV patients from adhering to their medications and keeping up with their medical appointments.

Keywords: HIV, HBC, PLWHA, Nigeria, prevalence, Africa, stigmatization**Introduction**

Africa is the world's largest black continent. It is also the world's most Human Immunodeficiency Virus (HIV) endemic continent, with over 25.7 million people living with HIV and 470,000 people died from AIDS-related illnesses in 2018 ^[1]. Although there are effective therapies for the medical management of HIV and related complications, the real burden is often psychological with a social conscript on the patient. In order to effectively manage a HIV patient, we need to do so from a holistic point of view. This is realizing that the patient is not an island and as such manage the patient alongside his/her family, friends and community. This approach is most fitting to the Family Medicine concept of Home-Based Care (HBC).

In order to utilize the tenets of Holistic medical practice, Family medicine physicians adopted and began the practice of Home-Based Care (HBC) ^[2]. However, now far from their grasp, HBC is now increasingly utilized around the world in the wholesome management of the elderly, chronic and acutely ill people such as HIV/AIDS, tuberculosis, and malaria. Home based care brings into lamplight the strengths of the families and communities. Although in Africa, home based care is almost often solely practiced as family care. However, due to the decreasing resources, families can no longer carry these responsibilities along ^[3]. When we equally utilize the essential components (figure 1), effective HBC can be achieved for People living with HIV/AIDS (PLWHA) in Africa. The optimal aim is to ensure they live a normal life while enjoying their full human rights with the support of their family and community.

The aim of these paper is to discuss how stigmatization can be an obstacle to holistic and home-based care of PLWHA in Africa.

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Fig 1: The essential components of Home-Based Care (HBC) encompassing the Clinical, Nursing, Psychosocial and Counselling/spiritual components of management.

Discussion

By definition, stigmatization which is the action of describing or regarding someone or something as worthy of disgrace or great disapproval; is almost always the case when it comes to majority of the society relating with people

living with HIV [4]. This may largely be due to the fact that Africans link HIV to an ailment for the promiscuous and a wayward lifestyle. A perception enhanced by childhood stories of HIV always being linked with promiscuity and wayward livelihood. In a region with a very low comprehensive Sex Education rate, majority of the society carries their childhood understanding to adulthood. Hence, seeing HIV as a fitting punishment for a once wayward life style. No room for explanation is given to those who got it via vertical transmission or even from a sexual assault incidence. In the society, you can barely secure a decent job or get married to a non-infected person. Atimes, even secure a desired accommodation/place of residence. It is almost a No-No. In fact, due to this discrimination, in Nigeria, you often see a lot of sign posts saying “if you are HIV +ve man/woman and you are looking for a HIV spouse, call +234#####. Though at first light it seems modest, it is medical suicide. As reinfection can promote drug resistance [5]. These, amongst other forms of stigma can lead to or even worsen their sickness (Figure 2)

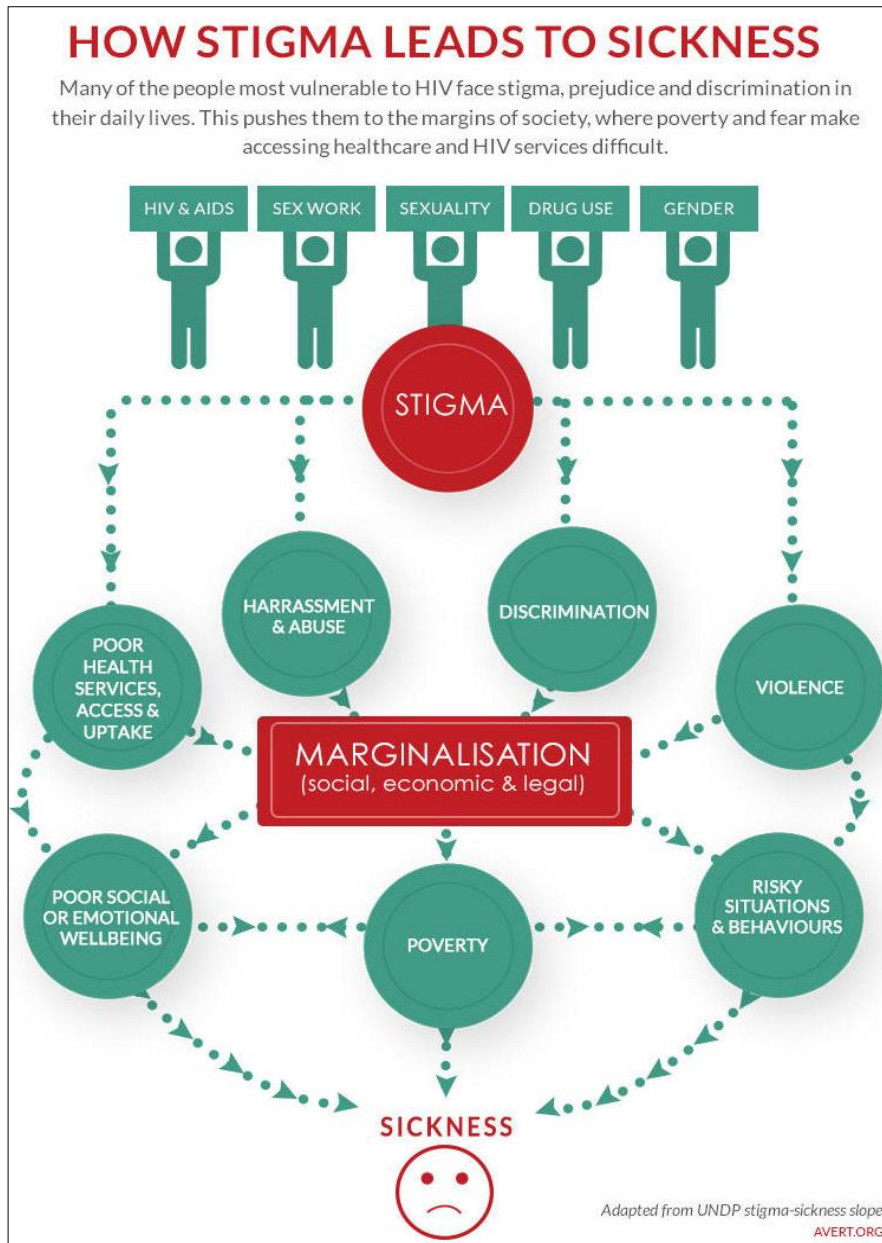


Fig 2: Showing how stigma leads to sickness. [6]

Types of stigmatization

In his work “overcoming stigma” related to mental health crisis, Gretchen Grappone describes 7 types of stigmatization, which could be so well associated with what HIV patients pass through [7]. Maybe due to the fact that the burden these people face in the society is first psychological, before medical. Hence, putting it in the perspective of people living with HIV;

1. **Public Stigma:** This is basically when the public endorses negative stereotypes and prejudice, that results in discrimination against people with HIV.
2. **Self-Stigma:** Well, this happens when a person with HIV internalizes public stigma.
3. **Perceived Stigma:** this is the notion or believe that others have bad and negative foresight about people with HIV
4. **Label Avoidance:** Sadly, this is a situation when a person fails to seek medical treatment or help to avoid being assigned a stigmatizing label. This is one of the most harmful forms of stigma.
5. **Stigma by Association:** This happens when the effects of stigma are extended to persons or people linked to the person with HIV. This is also known as courtesy or associative stigma.
6. **Structural Stigma:** As prevalent in Africa, this are institutional policies or some other societal structure like parastatals, organizations or places of work/school that has less opportunities for people with HIV for whatever reason.
7. **Health Practitioner Stigma:** This occurs whenever a healthcare professional allows stereotypes and prejudices about HIV to negatively affect the patient’s care.

How stigmatization prevents holistic and HBC

From the components point of view (Figure 1), Stigmatization can prevent Home Based Care by;

1. **Clinical care:** Early diagnosis, rational treatment and follow-up care plans will be interrupted. As people will be scared to get tested, follow up on treatment if positive or even adhered to their follow-up care plans. So as to avoid labels, public stigma and health practitioner stigma.
2. **Nursing care:** Efforts to promote and maintain good health, hygiene and nutrition will be suffocated. As patients will be in depression from perceived, public and self-stigmatization.
3. **Counselling and Spiritual:** Often, counselling is left to the primary care provider. This is done before and after the tests. In health practitioner stigma, a bias that can affect the patient negatively can occur. This may be seen when health providers fail to remain empathic and professional. While spiritual support may be hard to come by because of the HIV-Promiscuity stereotype in Africa, amongst other things. Also, people are more likely to look to spirituality for a cure, rather than counsel.
4. **Psychological and social care:** This is where the burden often lies, as family and friends are often brought in at this point to help PLWHA have a more wholesome and comfortable life. However, they can be alone and abandoned by family and friends for fear of stigma by association amongst others. Failure at this point often drives patients into mental health crisis.

Society also fails here, and these patients may even lose their jobs or place of residence. Well, this is where almost all the types of stigmatization plays out.

All forms of stigmatization have a direct and indirect negative impact on people living with HIV. In fact, not just stigmatization against the disease itself, but also against other people with mental health challenges, sexuality, genders, etc.

Conclusion

There is a lot of work to be done in tackling the menace of stigmatization in Africa. Stigmatization does more harm than good to the PLWHA and the society around them. As failure in early diagnosis and seeking medical intervention can directly affect the society, they live in. By this, there may be positive correlation between high incidence of stigmatization and high rate of HIV neo-infection.

Abbreviations

HIV – Human Immunodeficiency Virus
 PLWHA – People living With HIV and AIDS
 CSE – Comprehensive Sexual Education

Keywords

Stigmatization, Home Based Care (HBC), HIV, Africa, Holistic care

Conflict of interest

Authors declare no conflict of interest

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