

Abstract

Topic: “These days everyone is juicing up”: experiences of living with HIV and AIDS in Masvingo Province, Zimbabwe.

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The Human Immune Virus (HIV) and Acquired Immune Deficiency Syndrome (AIDS) are a pandemic that has worsened the plight of vulnerable communities and environments in Africa. Southern Africa remains the epicenter of the epidemic, although evidence is showing that HIV/AIDS is stabilizing and declining in some countries like Malawi, Namibia, Rwanda, and Zimbabwe. In Southern Africa, World Health Organization (WHO), launched targets for providing anti-retroviral therapy in low and middle income countries and this resulted in expansion of treatment services in Sub Saharan Africa UNAIDS (2010). Since 2001, the introduction of generic anti-retroviral drugs resulted in expansion of treatment and care services for AIDS on a global scale and HIV infection has become a treatable chronic illness, death rates have been drastically reduced and the symptom spectrum has improved, in the region (Bartlett, 2006).

Zimbabwe has an estimated prevalence rate of 13.7(adults) and 2.9(children) percent (National AIDS Council, 2011; Ministry of Health and Child Welfare). One million and one hundred people are estimated to be living with HIV in the country. AIDS is the leading cause of morbidity and mortality in Zimbabwe, although with the advent of anti-retroviral therapy. In Zimbabwe 593,168(CD4 \leq 350) children and adults are in need of anti-retroviral therapy in the country (National AIDS Council, 2011; Ministry of Health and Child Welfare, 2011). At the moment anti-retroviral therapy coverage is 56 percent for adults and 30 percent for children (UNAIDS, 2011, National AIDS Council, 2011). Although access to anti-retroviral drugs reduces the death toll, the impact of AIDS will remain severe for many years and this affects the children and adults living with HIV and AIDS in many aspects(Boullé,2010). While studies have been done to show the prevalence and magnitude of the HIV and AIDS epidemic, this study shows evidence of how the people who are on Anti-Retroviral therapy are experiencing and coping with the condition and treatment.

The study aimed at exploring the experiences of children and adults living with HIV in Masvingo who have been commenced on anti-retroviral therapy. Attention is given to knowledge, attitudes and practices of HIV infected accessing anti-retroviral therapy services in the community. Their individual experiences and challenges that are a result of living with the impacts of HIV and AIDS were mapped out and explored in this study. The other aim of the study was to explore adherence, sexual and reproductive issues. The study through adopting mixed methods has managed to produce some insights into the experiences of the HIV and AIDS affected.

The study combined qualitative and quantitative approaches in order to incorporate and reduce the limitations of current approaches and methodologies employed when conducting HIV and AIDS affected studies. A case study design, guided the research framework and the design gave a holistic assessment of the impacts of the HIV and AIDS epidemic at various levels in the household. Data collection was done at multi levels and combined methodologies were used in order to gain, a more coherent understanding of the experiences of the HIV and AIDS affected. A structured questionnaire was administered households (249) in the

community. The structured questionnaire was used to profile the socio-economic status and presence of HIV and AIDS affected/infected persons in the household. After analyzing the household survey findings and profiling the households that had persons with HIV and AIDS, in-depth (36) and key informant (12) interviews were conducted. In-depth interviews were done with individuals accessing anti-retroviral therapy services and the members of the households of those people. Two focus group discussions were also conducted with HIV infected men and women on anti-retroviral therapy in the community. By mapping out community inter-household resource flows, the study allowed the researchers to provide a complete picture of factors and relationships that influenced coping for the individuals on anti-retroviral therapy. The household livelihood survey was conducted twice over a two year period and the qualitative data was conducted in stages over the two year period from (2008-2010). Household survey data was analyzed using SPSS and a thematic analysis approach was adopted for the qualitative data. The mixed method approach gave the researchers a more detailed picture of how the HIV infected on anti-retroviral therapy are coping.

Findings demonstrate that anti-retroviral drugs have improved quality of life and drastically reduced chronic illness and deaths. The findings show that stigma and discrimination are major problems affecting prevention, disclosure and adherence. The term 'everyone is juicing up' is a stigmatizing and discriminatory reference used when referring to taking anti-retroviral therapy in the community. The findings shed light on how relying on external funded projects for anti-retroviral affects the availability of the drugs: persons on anti-retroviral drugs constantly live with fear of drug stock outs in the event of ceasing of funding by donors. Other barriers to adherence included the interpersonal relationships between couples and families, as well as the personal challenge of living with a life threatening illness and taking medications for life. The findings also reveal that there are gender inequalities; sexual and reproductive issues for the HIV infected people accessing drugs. Spiritual issues and themes were coming out as critical issues to be considered. Thus, although services and quality of life has improved due to anti-retroviral therapy, there is a need for more studies and interventions to address the challenges experienced by the HIV and AIDS on anti-retroviral therapy.

Key Words: anti-retroviral drugs, antiretroviral therapy, Coping, HIV and AIDS, livelihood, Stigma and Discrimination, treatment, adherence,