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Experiences and Self- care Practice of People Living with HIV not receiving antiretroviral therapy in rural community around Bale-Goba, Ethiopia: implication for HIV treatment programs

Kalkidan Tefera
United Nation World Food Programm Addis Ababa, Ethiopia

Abstract

Thought antiretroviral treaphy (ART) availability is increasing from time to time with the aid of international organizations, some people living with HIV (PLHIV) and eligible for treatment have choose to adopt self-care practices there by risking early AIDS- related mortality. A qualitative study was conducted in rural Ethiopia to gain Insights in to PLHIV self-care practices and experiences and explore the implication for successful delivery of ART care between June 2011 and 2011, in depth interviews were conducted with PLHIV who had dropped out of the treatment (n=50) and those that opted not to initiate medication (n = 70). Data was entered into origin 8 statistical software. PLHIV used therapeutic and physical health maintenance, psychological well -being and healthy lifestyle self- care practice to maintain physical health and mitigation HIV- related symptoms. Herbal remedies, faith healing and self-prescription of antibiotics and other controversial medicines to treat HIV- related ailments were used for therapeutic and physical health maintenance purposes; Psychological well-being self-care practices used were religiosity/ spirituality and positive attitudes toward HIV infection. These practices were modulated by close social network relationships with other PLHIV, family members and peers, who acted as sources of emotional, material and financial supports. Cessation of sexual relationship, adoption of safe sex to avoid re-infections and uptake of nutritional supplements were the commonly used risk reduction and healthy lifestyle practices respectively. While these self-care practices may promote physical and psychological well-being and mitigation AIDS- related symptoms, at least in the short term, they however undermine PLHIV access to ART care thereby putting PLHIV at risk of early AIDS- related mortality. The use of scientifically unproven herbal remedies raises health and safety concerns; faith healing may create fatalism and resignation with death while the reported self- prescription of antibiotics to treat HIV – related infections raises concerns about future development of microbial drug resistance amongst PLHIV. Collectivity, theses self-care practices undermine efforts to effectively abate the spread and burden of HIV and reduce AIDS- related mortality. Therefore, there is need for sensitization campaigns on the benefits of ART and risk associated with wide spread self-prescription of antibiotics and use of scientifically unproven herbal remedies.

Biography

KalkidanTefera is a graduate from Alkan Medical Collage with B. Pharm. Aditionaly she got her B.A. from Addis Ababa University with Foeign language & literature. She has completed her B.Phram. project at age og 25 under the title of Experiences and Self- care Practice of People Living with HIV not receiving antiretroviral therapy in rural community around Bale-Goba, Ethiopia: implication for HIV treatment programs.'' Now she is working as Staff Assistance in United Nations World Food Program.