

Experiences of Stigma and Discrimination for Refugees living with HIV in South Africa: An empirical approach

Ganzamungu Zihindula,

Postdoctoral Fellow, School of Nursing and Public Health, College of Health Sciences, University of KwaZulu-Natal, Durban South Africa.

Abstract

Stigma and discrimination remain some of the main causes of defaulting HIV treatment in sub-Saharan Africa and South Africa specifically. This leads to failure to achieve the 90-90-90 target and the related-Sustainable Development Goal (SDG) for South Africa. While many studies have been conducted and confirmed the exclusion of refugees and other forms of migrants from accessing and using ARVs; this study was conducted to highlight the risks for increased infection for the host community through sexual relations and inter-marriages between refugees and citizens.

The study used qualitative methodology. Data was collected from 24 participants using a semi-structured interview guide. Much of the data comes from existing literature on the topic.

Findings revealed that: Causes of stigma emanates from their cultural and religious practices and beliefs of refugees. Discrimination is experienced at the level of health service delivery, where refugees are screened and tested for HIV, but they are denied access to antiretroviral therapies. Of the 24 participants, 19 reported being in relationships with members of the host community. Of them, 11 are officially married and eight (n=8) are cohabiting with their partners. The other five (n=5) reported not being in any contact with a citizen. Another finding was that most of the PLHIV in the sample were male (17males and 7 females), whereas in literature, among PLHIV in South Africa, females are more in number comparing to males.

Biography:

Ganzamungu Zihindula, completed M. Sc in Demography and Population studies and a PhD in Health Promotion both at UKZN. Beside the research on NCDs, my interests are in HIV/TB and access to healthcare services for migrants both in UK and South Africa. .

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