Psychological consequences of HIV-related stigma among African migrant women in Lower Saxony, Germany: What can we learn from their stories?

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Abstract

This analysis was undertaken in 2012 as empirical studies and currently focuses on literature in to interrupt the silence of girls living with HIV in Bamenda Region of Cameroon. This current studies aims to grasp what it suggests that for the African girl having kids within the face of HIV/AIDS, taking under consideration the severe impact of the malady on their social aspirations, cultures and traditions. The analysis checked out however living with HIV and therefore the stigma related to it within the society has severely restricted women's decisions and agency. The psychological distress long-faced by African ladies generally regardless of their HIV standing reflects the pressure and burden ladies UN agency area unit unable to conceive or bear kids face. this can be extremely problematic as family relationship holds the very best cultural worth for ladies within the region likewise as most African countries. In-depth interviews were conducted to seek out out the experiences and perceptions of girls living with HIV watching their aspirations with respect to kid bearing likewise because the responses from the community. The realizeings indicated that HIV positive ladies find it difficult to exercise their agency up-to-date kids thanks to lack of knowledge and external pressures. The analysis additionally found avenues wherever it absolutely was doable for ladies to talk out and create au courant decisions through the support of Church teams and health clinics, that approached the women's condition holistically taking under consideration the socio-cultural likewise as medical aspects. However, the advance in medical treatment within the west doesn't represent the conditions back in Cameroon and different African countries, going away these ladies with an important psychological burden from revelation, rejection, insecurity, guilt, low shallowness and despair that still hamper their welfare.

Introduction

HIV-related branding remains a potent agent for HIV-positive folks. This study examined the relationships among stigma-related experiences and depression, medication adherence, serostatus revelation, and sexual risk among 221 HIV-positive men and girls. In quantity analyses that controlled for background characteristics, stigma was related to depressive symptoms, receiving recent medical specialty care, and larger HIV-related symptoms. Stigma was additionally related to poorer adherence and additional frequent serostatus revelation to folks apart from sexual partners, however showed no association to sexual risk behavior. in a very statistical method that controlled for all correlates, depression, poor adherence, and serostatus revelation remained as freelance correlates of stigma-related experiences. Findings make sure that stigma is related to psychological adjustment and adherence difficulties and is knowledgeable about additional usually among people that disclose their HIV standing to a broad vary of social contacts. Stigma ought to be addressed in stress management, health promotion, and drugs adherence interventions for HIV-positive folks.

HIV remains a extremely stigmatized malady within the u. s. and throughout the planet. though unconcealed expressions of HIV-related stigma have declined within the past decade,
nearly one in four Americans stay terrified of having direct contact with an individual they knew to be HIV-positive. Social discomfort, prejudice, and discrimination are unit knowledgeable about in response to a range of medical and medical specialty sicknesses (Angermeyer, Beck, Dietrich, & Holzinger, 2004; Rosman, 2004). However, stigmatizing attitudes and behaviors directed towards HIV-positive persons may be particularly severe. HIV is very stigmatized thanks to its historic association with subgroups of men and girls UN agency already expertise social process inside society, as well as gay men and injection drug users (Herek & Capitanio, 1999). Info and worry additionally contribute to the persistence of HIV-related stigma. Forty p.c of adults in a very U.S. likelihood sample perceived some risk of HIV transmission through coughing, sneezing, or sharing a container, and people UN agency were misinformed concerning transmission risks were additionally additional possible to agree that persons with HIV “got what they deserved” (CDC, 2000).

Stigma directed towards HIV-positive folks could bear on the epidemic in many ways that. First, worry of being stigmatized leads some to avoid HIV testing (Chesney & Smith, 1999; Eisenman, Cunningham, Zierler, Nakazono, & Shapiro, 2003; Fortenberry et al., 2002; Stall et al., 1996). Lack of information concerning one’s serostatus could successively result in unintended transmission of the virus and delays within the initiation of treatment. Second, among those that are tested and area unit HIV-positive, stigma constitutes a chronic agent which will contribute to header difficulties, inadequate self-care, and difficulties with safer sex negotiation and safety use.

Mental health could also be jeopardized thanks to stigma (Major & O’Brien, 2005). Seropositive men and girls area unit typically shunned by family, friends, and intimate partners, and unconcealed acts of discrimination working, health-care, and housing-related settings aren't uncommon (Gostin & Webber, 1998). Further, findings from a U.S. likelihood sample indicate that associate degree calculable twenty first of girls and twelve-tone music of MSM living with HIV have knowledgeable about physical violence since learning of their designation (Zierler et al., 2000), together, these stigma-related experiences could contribute to fret and adjustment difficulties among persons living with HIV (Clark, Lindner, Armistead, & Austin, 2003; Heckman et al., 2004; Lee, Kochman, & Sikkema, 2002). Indeed, findings from a two-city sample of HIV-positive men and girls purpose to associate degree degree association between internalized stigma and self-reported symptoms of depression, anxiety, and despair.

Stigma might also interfere with health behavior adaptation and medical program adherence (Chesney & Smith, 1999), though few empirical studies have addressed this chance. Experiences of social rejection, disapproval, and discrimination associated with HIV could heighten a person’s sense of shame concerning their malady and serve to reduce their motivation to take care of optimum health. Further, as a result of HIV-positive men and girls could reply to stigma by concealing their malady from others, concern concerning the results of unintended malady revelation might interfere directly with self-care efforts. As an example, lapses in adherence typically occur once there’s concern that a devotee could witness pill-taking or realize pill bottles, resulting in unwanted questions on a person’s health and, doubtless, associate degree degree surprising “outing” as being HIV-positive.

Biography

Joyceline Ntoh Yuh is a Feminist and Doctoral candidate in the University of Oldenburg, Germany. She holds an MA in Women and Gender Studies from the ISS Erasmus University Netherlands. Her research interest includes HIV/AIDS related issues, psychology, gender, sexual and reproductive health. Since
2006, she took keen interest in the field of HIV/AIDS where she researched on the impact of HIV on agriculture affecting mostly women with the UN FAO Gender unit (Italy), mainstreaming HIV policies in UNFFE Uganda, HIV stigma and child bearing in Cameroon and currently facilitates workshops with MA students in the area of gender, migration and HIV/AIDS (health). She is also a Reviewer of the Journal of AIDS Clinical Research and STD (USA) and works as a Volunteer in the AIDS Help NGO (AIDSHilfe), Germany.