Role of HIV-Support Groups in Mitigating Adverse Sexual Health Outcomes among HIV Positive Adolescents in Uganda

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Abstract: Group-based strategies in the delivery of HIV care have opened up new avenues not only for meaningful participation for HIV positive people but also platforms for deconstruction and reconstruction of knowledge about living with the virus. Yet the contributions of such strategies among patients who live in high risk areas are still not explored. This case study research assessed the impact of HIV support networks on sexual health outcomes of HIV positive out-of-school adolescents residing in fishing islands of Kalangala in Uganda. The study population was out-of-school adolescents living with HIV and their sexual partners (n=269), members of their households (n=80) and their health service providers (n=15). Data were collected via structured interviews, observations and focus group discussions between August 2016 and March 2017. Data was then analyzed inductively to extract key themes related to the approaches and outcomes of the groups' activities. The study findings indicate that support groups unite HIV positive adolescents in a bid for social renegotiation to achieve change but individual constraints surpass the groups' intentions. Some adolescents for example reported increased fear which led to failure to cope, sexual violence, self-harm and denial of status as a result of the high expectations placed on them as members of the support groups. Further investigations around this phenomenon show that HIV networks play a monotonous role as information sources for HIV positive out-of-school adolescents which limit their creativity to seek information elsewhere. Results still indicate that HIV adolescent groups recognize the complexity of long-term treatment and stay in care leading to improved immunity for the majority yet; there is still scattered evidence about how effective they are among adolescents at different phases in the disease trajectory. Nevertheless, the primary focus of developing adolescent self-efficacy and coping skills significantly address a range of disclosure difficulties and supports autonomy. Moreover, the peer techniques utilized in addition to the almost homogeneous group characteristics accelerates positive confidence, hope and belongingness. Adolescent HIV-support groups therefore have the capacity to both improve and/or worsen sexual health outcomes for a young adolescent who is out-of-school. Communication interventions that seek to increase awareness about 'self' should therefore be emphasized more than just fostering collective action. Such interventions should be sensitive to context and gender. In addition, facilitative support supervision done by close and trusted health care providers, most preferably Village Health Teams (who are often community elected volunteers) would help to follow-up, mentor, encourage and advise this young adolescent in matters involving sexuality and health outcomes. HIV/AIDS prevention programs have extended their efforts beyond individual focus to those that foster collective action, but programs should rekindle interpersonal level strategies to address the complexity of individual behavior.

Keywords: adolescent, HIV, support groups, Uganda

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