

My Virus, My Healthcare: Perspectives of sub-Saharan African Migrant Women with HIV/AIDS on Treatment and Care in Belgium

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Introduction

- ❖ Belgian national health insurance ensures universal coverage to HIV/AIDS patients
- ❖ ART reduces HIV/AIDS from **spreading**
- ❖ ART enhances positive living
- ❖ Tailored treatment and care restores self-dignity
- ❖ ART decreases the number of motherless children
- ❖ ART makes **motherhood** possible for many



Aim

- ❖ To explore the perspectives of SSA migrant women with HIV/AIDS on treatment and care received in



Method

- ❖ **Design:** qualitative study with semi-structured face-to-face interviews and observations during consultations
- ❖ **Participants:** 22 participants recruited from AIDS Reference Centers (ARC)
- ❖ **Eligibility criteria:** > 18years, SSA female descent, diagnosed HIV+ > 3 months, French or English speaking, on treatment in Belgium
- ❖ **Procedure:** patient was invited to participate by the treating physician.
- ❖ **Analysis:** Thematic content analysis

Results: Participant characteristics n=22

Age range	23-66 years
Years living with HIV (range)	4-27 years
Familial situation	
- No intimate partner	4
- Have intimate partner	18
- Living with intimate partner	13
- Not living with intimate partner	9
- Have children	18
- No child	4
- Pregnant after HIV diagnosis	9
Intimate partner status	
- HIV positive	4
- HIV negative	18
Antiretroviral therapy	
- On treatment	21
- Not on treatment	1
Education	
- University/Higher	12
- Primary/secondary	9
- None	1
Mode of transmission	
- Heterosexual	21
- Homosexual	0
- Work-related	1

Results: Perspectives/reality

- What women think
 - Treatment and modern healthcare services free
 - Treatment restores self-dignity, improves self-image
 - Continuation of mothering and caregiver role
 - Fosters HIV prevention and good sexual health
- What really happens
 - Healthcare cost significantly covered by the national health insurance
 - Patients unaware of real cost of ART
 - Legal status determines access to treatment and care except in emergency
 - HIV-related stigma impedes treatment adherence

Quote

"I live well with HIV/AIDS. I support and adhere to my treatment" (P 49 years old)



Woman - doctor talk about HIV/AIDS, prevention, treatment and care



ART- Hopes and dreams for the future

Conclusions:

- ❖ Sub-Saharan African migrant women in Belgium view life with HIV/AIDS in Belgium tolerable despite seriousness of the disease because of good treatment and care
- ❖ Dispensed treatment and care improves quality of health and restores self-esteem
- ❖ View HIV/AIDS treatment and information as prevention of new infections to self and others
- ❖ Believe HIV/AIDS Information as part of a process to promote sexual and reproductive health
- ❖ Believe prevention is cheaper and better than treatment/cure
- ❖ ART incentive to breaking barriers with stigma

Policy Implications

- ❖ For sustainable prevention purposes legal status of HIV/AIDS patients should cease to be treatment criteria
- ❖ To get zero HIV/AIDS generation HIV prevention strategies should be redesigned and tailored to fit each group in its cultural setting.

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Acknowledgements

- ❖ Study participants
- ❖ ARC Health care professionals
- ❖ Drs. Sue-Liza Eta & Mariam Koita, UCL Belgium