BACKGROUND

Unmet need for family planning (FP) among women living with HIV (WLHIV) is over 60%, compared to 18% among women in the general population. WLHIV experience various forms of stigma and discrimination (S&D), which have the potential to reduce demand for family planning (FP) services. As part of a larger project testing interventions to integrate FP into HIV services at the community level in Busia County of Western Kenya, this study explores the perceptions and experiences of WLHIV seeking FP and HIV services from community health volunteers (CHVs) in rural Kenya, to gain an understanding of how S&D affect their access and use of these services.

METHODS

This is a quasi-experimental, pre/post research design, with a comparison site. The intervention was conducted in Samia Sub–County of Busia County, with Busuta Sub-County as the control site. Intervention consisted of a five-day training of CHVs in FP counselling using the community version of the balanced counseling strategy-plus job aids (BCS+) and how to mitigate the effect of HIV-related S&D, as well as a three-day training in business skills for income generating activities (IGAs) that will enable them to sustain their operations. The study population consisted of WLHIV (N=1,611) and CHVs (N=210). The baseline survey was undertaken in November and December 2015; results are presented here for WLHIV.

RESULTS

EXPERIENCES OF STIGMA OR DISCRIMINATION IN THE PAST 12 MONTHS DUE TO HIV STATUS

PROPORTION OF CLIENTS WHO EVER EXPERIENCED VARIOUS FORMS OF STIGMA & DISCRIMINATION DUE TO THEIR HIV STATUS

PERCEIVED INTERNAL STIGMA

Agreement Rating: Having HIV makes me feel I'm a bad person

Strongly disagree

Disagree

Agree

Strongly agree

0% 20% 40% 60% 100%

Physically abused

Verbally insulted

Gossiped about HIV

Excluded from family activities

0% 20% 40% 60% 100%

Agreement Rating: People with HIV do not get good health care if others know about their HIV status

Don't Know

Strongly disagree

Disagree

Agree

Strongly agree

0% 20% 40% 60% 100%

Agreement Rating: Most people believe a person who has HIV Is dirty

Don't Know

Strongly disagree

Disagree

Agree

Strongly agree

0% 20% 40% 60% 100%

CONCLUSION

Stigma and discrimination appear to be deeply embedded among rural WLHIV, particularly internal stigma and perceived external stigma. Interventions aimed at strengthening the integration of FP into HIV services should include specific measures to combat S&D among WLHIV. CHVs and other community based extension workers may achieve greater impact by working through WLHIV support groups.

FOR MORE INFORMATION

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The Evidence Project is made possible by the generous support of the American people through the United States Agency for International Development (USAID) under the terms of cooperative agreement no. 422-00A-1-2410207. The contents of this document are the sole responsibility of the Evidence Project and Population Council and do not necessarily reflect the views of USAID or the United States Government.