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Stigma and discrimination around HIV: Experience of HIV care clinic in Oran

Benabdellah A, Bestaoui L, Touati S, Labdouni M H, Adda-Bouhadda N, Kouidad-Belkadi S A and Zaoui O F University of Oran, Algeria

Background: Patients living with HIV (PLHIV) sometimes experience discrimination. There is little understanding of the causes, forms and consequences of this stigma in Algeria. This qualitative study explored perceptions and experiences of PLHIV regarding both the quality of healthcare and the attitudes and behaviors of healthcare providers and family in Oran.

Methods: Interviews were held with a purposively selected group of 70 PLHIV recruited from the HIV care clinic in Oran. Data were analyzed using the content analysis approach.

Results and Discussion: Almost all the participants reported experiencing stigma and discrimination by their healthcare providers and their family in a variety of contexts. Participants had encountered a situation where a colleague has breached the confidentiality of a patient in relation with HIV. Participants mentioned at least four forms of stigma: Refusal of care, suboptimal care, excessive precautions and physical distancing and humiliation and blaming. Some participants felt that being gay was linked to HIV. Sex workers are more broadly discriminated against and it highlights that discrimination behavior can impact on the willingness of sex workers to seek health care and treatment. A number of the participants felt that discrimination and stigma were more likely to occur in non-HIV-focused healthcare settings. Participants noted incidents, such as a dentist wearing two pairs of gloves when working on a person with HIV. Several participants felt that non-disclosure is after the easier path to choose than disclosure. Family members can represent a prime source of stigma for PLHIV. Family and community believed that the infected person did an immoral thing. General knowledge about HIV/AIDS is especially poor among young people and women.

Conclusions: It is imperative to engage both healthcare providers, family, community and PLHIV in designing interventions targeting stigma. Additionally, specialized training programs in universal precautions for health providers will lead to stigma reduction.

benabdellah_anwar@yahoo.fr