Emotional and mental stability a tool to adolescent and young people living with HIV and AIDS adherence issues

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A adolescent and young people (15-24 years) living with HIV not only deal with their physical health but also their emotional health, psychological stability, disclosure and stigma. Although some adolescent and young people living with HIV are able to surpass this, but when this challenge interjects with romantic relationship, self-stigma and discrimination, depression and anxiety, adherence and retention in care is threatened. In Lagos Nigeria as at 2017, 60% of adolescent and young people living with HIV in our network and support groups had decline in adherence and clinical appointment, which is a big threat to retention; all of which can be traced to emotional and mental instability, resulting from self-stigmatization, inability to disclose their status and poor negotiation skill in terms of sex, Stigma among same sex relationship. A four weeks peer education program with the aim of meeting emotional and mental wellbeing of Adolescents and Young People Living with HIV (AYPLHIV) accessing care in four ART centers in Lagos State Nigeria. The program extensively addressed optimum adherence strategies, negotiation skill in terms of sex and managing relationship and life skills, self-esteem, goal setting and adaptation strategies for disclosure. The participant was closely monitored for another three months to note any improvement in their viral load and retention in care and results achieved were amazing as improved adherence ranging from 65% to 75%, 60% disclosed status, 85% negotiated condom use with their partner consistently through the results were amazing but more could still be achieved. Adolescent and young people living with HIV are diverse with different issues at different ages, more like the different stages in life, Adherence for young people is a big issue so also is starting and retaining them on treatment; one way is to tackle this issue is to help them to fully understand how to go about their treatment and to better understand themselves as well as the Undetectable = Untransmittable would help them focus well on adhering to treatment of which will strengthen the realization of their abilities, coping with normal stresses of life, productive contribution to their community and adherence. Inclusion of Peer-to-peer mentors and young Emotional and Psycho-social experts in Adolescent and young people HIV response cannot be over emphasized. Furthermore, the Undetectable = Untransmittable concept should be promoted targeting adolescent and young people who are negative which would help in changing their perspective on stigmatization and discrimination so as to reduce pressure from discrimination from the environment on positive AYPLHIV.

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