

# Stigma and Discrimination against People Living with HIV in Juba, South Sudan

Rose Poni-Gore<sup>1,\*</sup>, Emmanuel Oryem Lino<sup>2</sup>, Ojok Augustine Alex<sup>3</sup>, Rombe Jackson Simaya<sup>4</sup>, Anyang Jacob Bion<sup>4</sup>, Angelo Juan Jette<sup>4</sup> and Doki Simon James<sup>4</sup>

<sup>1</sup>Department of Community Medicine, University of Juba/South Sudan, Juba, Sudan

<sup>2</sup>Clinical Epidemiologist, National Ministry of Health South Sudan, Sudan

<sup>3</sup>Ministry of Health, South Sudan, Sudan

<sup>4</sup>College of Medicine, University of Juba, Sudan

## Abstract

**Background:** Stigma and Discrimination against PLHIV (People living with HIV) exist worldwide, although they manifest themselves differently across countries, communities, religious groups and individuals however there are limited information about its existence in South Sudan.

**Objective:** To determine factors associated with stigma and discrimination among PLHIV in Juba, South Sudan

**Methods:** This research was carried out in Juba, South Sudan. In this cross-sectional study, information was obtained from one hundred two (102) PLHIV and seventy (70) People from the Public using standardized well-structured questionnaires and interviews with those who were unable to read and write and scoring of the responses to questions was done and the data were analyzed using Statistical Package for Social Sciences (SPSS) version 16.0.

**Results:** The researched results have shown that 27.50% of the PLHIV who took part in the survey failed to disclose their status to their partners and members of their families because of the fear of being labeled as being immoral. It was also found that 59.70% of PLHIV who were employed failed to disclose their status at their work place due to the fear of losing their job. On the other hand, 75.70% of the participating public believed that PLHIV don't care if they infect others and this is one of the root causes of stigma and discrimination against PLHIV. Sixty-nine percent of the public interviewed view that PLHIV had many sexual partners and therefore are labeled as immoral, disgraceful and uncultured.

**Conclusion and Recommendations:** The study had been one of the first few researches carried out on stigma and discrimination against PLHIV in South Sudan and we therefore encourage further researchers to do more about combating stigma and discrimination against PLHIV.

**Keywords:** Human immunodeficiency virus; Acquired immunodeficiency syndrome; Fear and ignorance; Stigma and discrimination; PLHIV people living with HIV; Circumcision and tattooing; Inheritance of widows; Comprehensive peace agreement; Anti-retro viral therapy; Juba-South Sudan

## Introduction

Human immunodeficiency virus (HIV) is a single stranded RNA virus that affects the CD4+ve cells, dendritic cells and macrophages that leads to dysfunctional immune system leading to a condition called Acquired immunodeficiency syndrome (AIDS) [1-3] and AIDS is defined as the CD4 count of less than 200 with a set of symptoms and infections which results from compromised immune system due to HIV depletion of CD4 cells consequently, social Stigma and Discrimination against people living with HIV (PLHIV) stir up and become worldwide [4-6], although vary across countries, religious groups and individuals, there are limited information about its existence in South Sudan.

## Background

Fear and ignorance are the powerful drivers of stigma and discrimination towards People living with HIV/AIDS (PLHIV), they lost their Jobs, homes, friends, families and denied lease [7]. Despite the progress in understanding of HIV/AIDS, managing stigma and discrimination continued to be a serious issue in Juba, South Sudan the consequences of discrimination against PLHIV results in poor quality of care and services for those who are infected or ill or suspected of being infected [8,9], frightened away potential clients in need of care by limiting individual access to use of healthcare services such as Voluntary

Counselling and Testing and early enrolment for Antiretroviral drugs. The access and use of these lifesaving services will depend on the degree to which health facilitator's welcome and respect the rights of HIV/AIDS clients [10-12].

## Justification

Stigma and discrimination among PLH/A has created inequalities of class, gender, race and sexuality, increasing the vulnerability of women and girls in the society to HIV infection, aggravated by cultural Practices such as marking, circumcision and tattooing and inheritance of widows.

## Objective

To determine factors associated with stigma and discrimination among PLHIV - To assess the level of stigma and discrimination experienced by People living with HIV - To establish the root causes of

**\*Corresponding author:** Rose Poni-Gore, Assistant Professor of Community Medicine, University of Juba/South Sudan, Juba, CES P.O. Box 82, Sudan, Tel: +211955511872; E-mail: [roseponi196@gmail.com](mailto:roseponi196@gmail.com)

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stigma and discrimination and the impact on gender, social, economic and political life of People living with HIV in Juba, South Sudan.

## Methods

The research was conducted in Juba Capital of South Sudan, in the period from December 2013 to 30th June 2014 a cross sectional study focused on three Payams (Districts) of Juba County; Munuki, Kator and Juba. Hospitals are Juba teaching Hospital (JTH) ART Centre and Juba Military hospital (JMH) ART Centre where all the people living with HIV (PLHIV) on antiretroviral therapy (ART) both gender from 15-46 years and above converged to collect their medications [13,14]. The details of the study participants are depicted in Tables 1-5.

### Sample size

Sample size is one hundred and two (102) were obtained from PLHIV on retroviral therapy in Juba County and the seventy (70) samples of the participants from the public [15,16]. The consent of the participants was sought and then the questionnaires were administered to the participants who could read and write and those who could not

	Frequency	Percent	Valid Percent	Cumulative Percent
Female	59	57.8	57.8	57.8
Male	43	42.2	42.2	100.0
Total	102	100.0	100.0	

Table 1: The gender of people living with HIV in Juba.

	Frequency	Percent	Valid Percent	Cumulative Percent
Juba Payam	19	18.6	18.6	18.6
Kator Payam	33	32.4	32.4	51.0
Munuki Payam	50	49.0	49.0	100.0
Total	102	100.0	100.0	

Table 2: The residence of people living with HIV in Juba.

	Frequency	Percent	Valid Percent	Cumulative Percent
Yes	62	60.8	60.8	60.8
No	40	39.2	39.2	100.0
Total	102	100.0	100.0	

Table 3: The employment of people living with HIV in Juba.

	Frequency	Percent	Valid Percent	Cumulative Percent
Student	3	2.9	2.9	2.9
Low skilled worker	13	12.7	12.7	15.7
Professional	12	11.8	11.8	27.5
Organized forces	22	21.6	21.6	49.0
Farmer	1	1.0	1.0	50.0
Private	11	10.8	10.8	60.8
Others	40	39.2	39.2	100.0
Total	102	100.0	100.0	

Table 4: The occupation of people living with HIV in Juba.

	Frequency	Percent	Valid Percent	Cumulative Percent
Less than 200 ssp	44	43.1	43.1	43.1
200-500 ssp	23	22.5	22.5	65.7
500-1000ssp	19	18.6	18.6	84.3
1000 and above	16	15.7	15.7	100.0
Total	102	100.0	100.0	

Table 5: The monthly income of people living with HIV in Juba.

read were interviewed by the researchers [17-19].

## Data analysis

The questionnaire responses were collected and analyzed using Statistical Package for Social Scientist (SPSS) version 16.0.

## Results

The study was carried out among 102 PLHIV, 38.2% were in the age range of 35-44 and 5.9% were in the age range of 55 and above, among 102 PLHIV, 57.8% of the participants were female and the research drew participants from the three Payam in Juba, with the highest percentage of 49.00% residing in Munuki Payam (Figure 1). The details of the study participants are depicted in Tables 6-10.

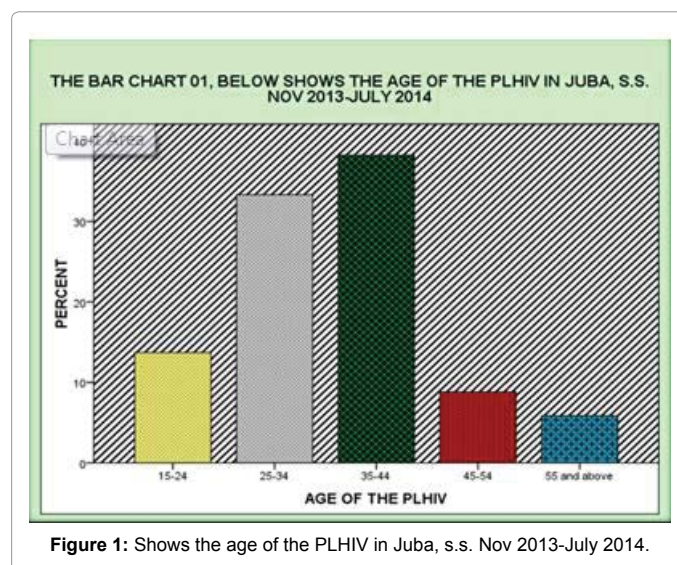


Figure 1: Shows the age of the PLHIV in Juba, s.s. Nov 2013-July 2014.

	Frequency	Percent	Valid Percent	Cumulative Percent
Yes	74	72.5	72.5	72.5
No	28	27.5	27.5	100.0
Total	102	100.0	100.0	

Table 6: The disclosure of status of PLHIV to their families in Juba.

	Frequency	Percent	Valid Percent	Cumulative Percent
Yes	25	24.5	40.3	40.3
No	37	36.3	59.7	100.0
Total	62	60.8	100.0	
unemployed	40	39.2		
Total	102	100.0		

Table 7: Disclosure of PLHIV in their work places in Juba.

	Frequency	Percent	Valid Percent	Cumulative Percent
Yes	20	19.6	19.6	19.6
No	82	80.4	80.4	100.0
Total	102	100.0	100.0	

Table 8: Denial of job, treatment and social services to PLHIV in Juba.

	Frequency	Percent	Valid Percent	Cumulative Percent
Good	97	95.1	95.1	95.1
Bad	5	4.9	4.9	100.0
Total	102	100.0	100.0	

Table 9: The relationship of PLHIV at work places.

Also among 102 PLHIV, 55.90% were married Figure 2 shows HIV prevalence is very high among married couples From Juba teaching hospital JTH ART Centre 38.2% of PLHIV underwent basic education and this was indicative that HIV prevalence and stigma is higher among semi illiterate as shown above on the bar chart Figure 3. Based on the employment status of the participants, the population of those who are employed is approximately twice in term of percentage (60.8%) and the research indicated that out of those employed, organized forces was having 21.6% and the research has also shown that 43.1% of PLHIV were earning less than 200 South Sudanese pounds Figure 4 (less than 50 \$ USA) and this means that HIV is spread among people of low socioeconomic status.49.0% of the PLHIV were tested because of the doctors' recommendations and this signifies fear of being stigmatized and discriminated is significant, also 72.5% of the PLHIV had disclosed their status to their partners and family members and of those who disclosed their status Figure 5, 81.4% had good relationship with their families despite their seropositive status. among the 102 PLHIV, only 62 of the participants were employed and 59.70% of the 62 PLHIV didn't disclose their status at their work places Figure 6. The study revealed that 80.4% of PLHIV had not been denied job, treatment and social services and 95.10% of PLHIV admitted that they were treated well at their work places by their colleagues. Out of 102 PLHIV who were involved in the research, 85.30% believed that all the healthcare workers are willing to treat PLHIV Figure 7, and 61.80% believed that healthcare workers can provide the same quality of services to all patients despite their status. 70 Participants from the public showed that the male constituted 71.4%, 64.30% were in the range of 25-34 years of age\, 57.10% were not married.

The majority of the participants whom we interviewed were not employed and this was 77.10% and 71.10% were students This researched has also shown that 58.60% of the participants have been for voluntary testing and counselling, 80.00% have positive perception about PLHIV. 67.10% believed that women would be more traumatized

	Frequency	Percent	Valid Percent	Cumulative Percent
Yes	39	38.2	38.2	38.2
No	63	61.8	61.8	100.0
Total	102	100.0	100.0	

Table 10: The quality of services provided to PLHIV in Juba. The tables below show the opinion of the public about PLHIV

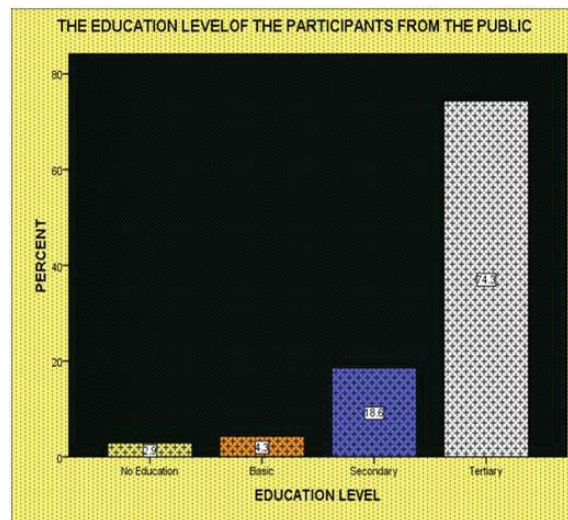


Figure 3: Shows education level of the participants from the public.

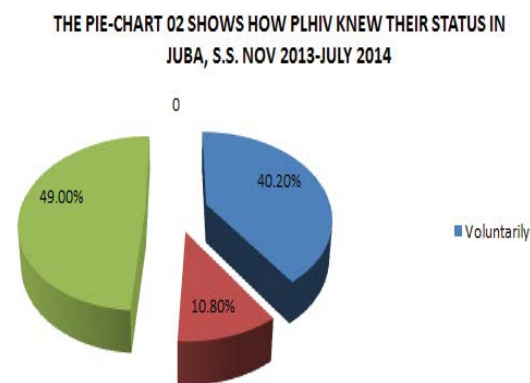


Figure 4: Shows how PLHIV knew their status in Juba, s.s. Nov 2013-July 2014.

THE PIE-CHART 01, BELOW SHOWS THE MARITAL STATUS OF PLHIV IN JUBA, NOV 2013-JULY 2014

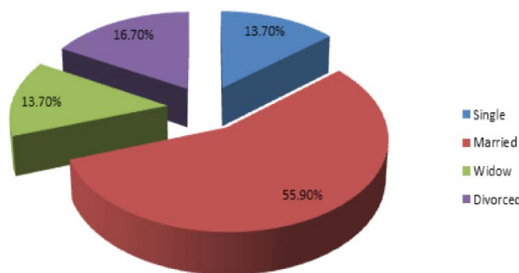


Figure 2: Shows the marital status of PLHIV in Juba, Nov 2013-July 2014

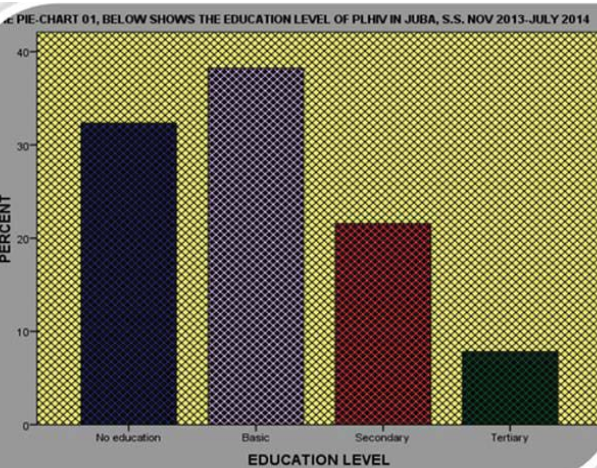


Figure 5: shows the education level of PLHIV in Juba, s.s. Nov 2013-July 2014.

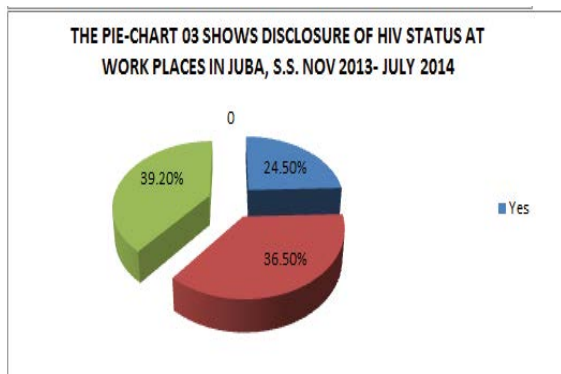


Figure 6: Shows disclosure of HIV status at work places in Juba, s.s. Nov 2013-July 2014.

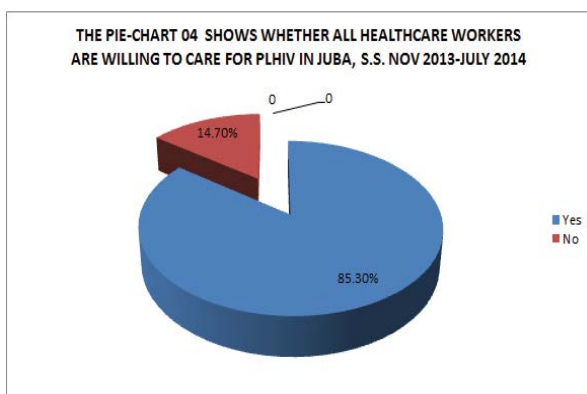


Figure 7: Shows whether all healthcare workers are willing to care for PLHIV in Juba, s.s. Nov 2013-July 2014.

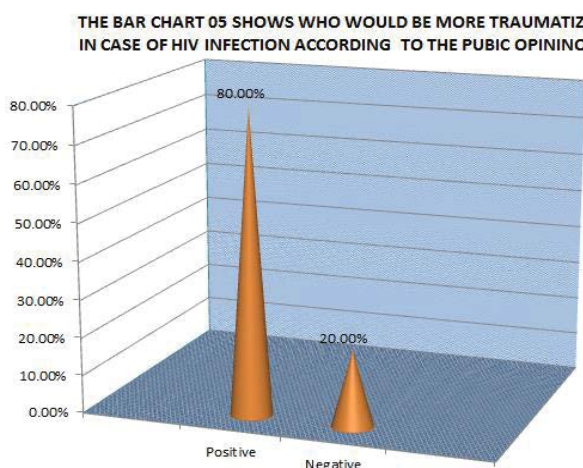


Figure 8: Shows who would be more traumatized in case of HIV infection according to the public opinion.

than men in case of HIV infection Figure 8. 68.6% of the participants said Men were unlikely to disclose their status to their partners in case of HIV infection. 41.4% believed that HIV is a punishment Figure 9, 75.7% believed that most people living with HIV do not care if they infect others, 28.60% felt that PLHIV should feel ashamed of themselves and 68.60% believed that PLHV had multiple sexual partners and 71.40% believed that PLHIV could have avoided if they had wanted to and lastly 68.60% believed that PLHIV got infected because of the irresponsible behaviours as shown in Figure 10. The ratios of the study results along with percentage are shown in Tables 11-24 accompanied by respective figures.

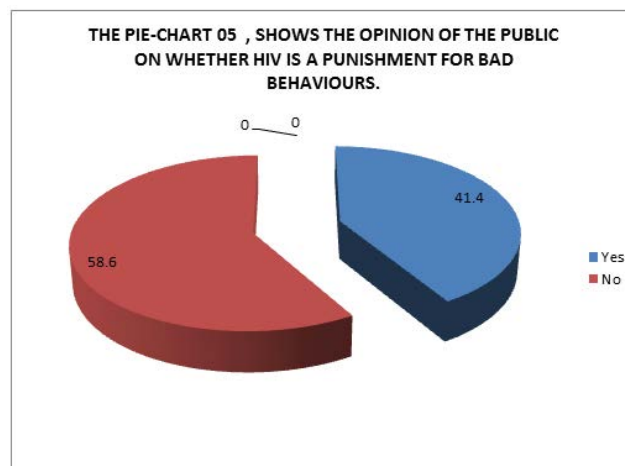


Figure 9: Shows the opinion of the public on whether HIV is a punishment for bad behaviours.

THE BAR CHART 06 SHOWS THE OPINION OF THE PUBLIC ON WHETHER PLHIV CARE IF THEY INFECT OTHERS

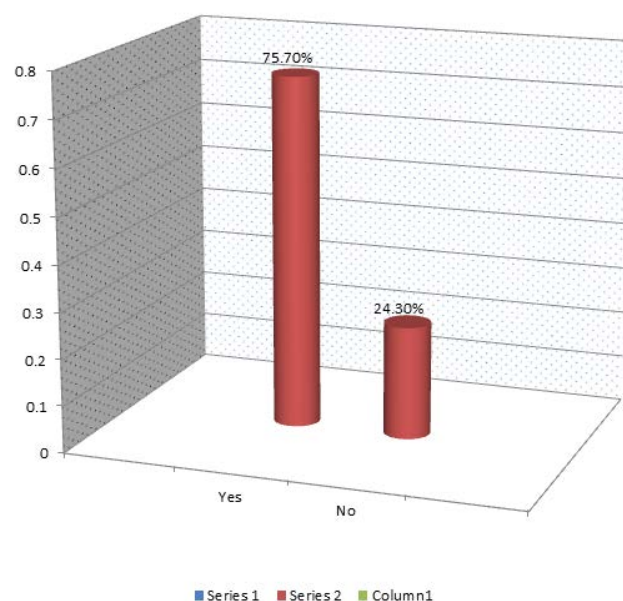


Figure 10: Shows the opinion of the public on whether PLHIV care if they infect others.

	Frequency	Percent	Valid Percent	Cumulative Percent
15-24	17	24.3	24.3	24.3
25-34	45	64.3	64.3	88.6
35-44	8	11.4	11.4	100.0
Total	70	100.0	100.0	

Table 11: The age of the members from the community.

	Frequency	Percent	Valid Percent	Cumulative Percent
Female	20	28.6	28.6	28.6
Male	50	71.4	71.4	100.0
Total	70	100.0	100.0	

Table 12: The gender of the members from the community.

	Frequency	Percent	Valid Percent	Cumulative Percent
Juba Payam	22	31.4	31.4	31.4
Kator Payam	14	20.0	20.0	51.4
Munuki Payam	34	48.6	48.6	100.0
Total	70	100.0	100.0	

Table 13: The residence of the members of the community.

	Frequency	Percent	Valid Percent	Cumulative Percent
Single	40	57.1	57.1	57.1
Married	30	42.9	42.9	100.0
Total	70	100.0	100.0	

Table 14: The marital status of members of the community.

	Frequency	Percent	Valid Percent	Cumulative Percent
Yes	16	22.9	22.9	22.9
No	54	77.1	77.1	100.0
Total	70	100.0	100.0	

Table 15: The employment status of member of the community.

	Frequency	Percent	Valid Percent	Cumulative Percent
Student	50	71.4	71.4	71.4
Low skill laborers	4	5.7	5.7	77.1
Professional	5	7.1	7.1	84.3
Organized forces	2	2.9	2.9	87.1
Others	9	12.9	12.9	100.0
Total	70	100.0	100.0	

Table 16: The occupation of member of the community

	Frequency	Percent	Valid Percent	Cumulative Percent
Yes	41	58.6	58.6	58.6
No	29	41.4	41.4	100.0
Total	70	100.0	100.0	

Table 17: The number of people went for HIV testing.

	Frequency	Percent	Valid Percent	Cumulative Percent
Positive	56	80.0	80.0	80.0
Negative	14	20.0	20.0	100.0
Total	70	100.0	100.0	

Table 18: The perception of the public about PLHIV in Juba.

	Frequency	Percent	Valid Percent	Cumulative Percent
Positive	62	88.6	88.6	88.6
Negative	8	11.4	11.4	100.0
Total	70	100.0	100.0	

Table 19: Opinion of the members of the community about Government.

	Frequency	Percent	Valid Percent	Cumulative Percent
Female	22	31.4	31.4	31.4
Male	48	68.6	68.6	100.0
Total	70	100.0	100.0	

Table 20: Who would disclose his/her status in case of infections.

	Frequency	Percent	Valid Percent	Cumulative Percent
Yes	20	28.6	28.6	28.6
No	50	71.4	71.4	100.0
Total	70	100.0	100.0	

Table 21: The opinion of the public whether PLHIV should feel ashamed of themselves.

	Frequency	Percent	Valid Percent	Cumulative Percent
Yes	48	68.6	68.6	68.6
No	22	31.4	31.4	100.0
Total	70	100.0	100.0	

Table 22: The opinion of the public on whether the PLHIV had multiple sexual partners.

	Frequency	Percent	Valid Percent	Cumulative Percent
True	50	71.4	71.4	71.4
False	20	28.6	28.6	100.0
Total	70	100.0	100.0	

Table 23: Public opinion on whether PLHIV should have avoided HIV infection if they had wanted to.

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	True	48	68.6	68.6	68.6
	False	22	31.4	31.4	100.0
	Total	70	100.0	100.0	

Table 24: The opinion of the public on whether PLHIV have been engage in irresponsible behaviors.

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