

Demographic Factors, Social Supports, and Quality of Life of HIV infected Persons in Ghana

Presentation by
Tina Abrefa-Gyan, PhD
Norfolk State University

October 28, 2014

Acknowledgements

- Funding Support
 - Norfolk State University

Presentation Overview

- Purpose and Significance of Presentation/Prevalence of HIV/AIDS in Ghana
- Literature Review/prevalence of HIV/AIDS in Ghana
- Theoretical Framework
- Methodology/Research Design/Research Questions/Hypothesis
- Results from the Study
- Discussions- Study's Implications for Social Work

Purpose of Presentation/Prevalence of HIV/AIDS in Ghana

- Purpose: To discuss the study and its findings
- Population estimate for July 2014 was 25,758,108
- HIV prevalence rates: 1.8% (CIA, 2013), Currently at 1.4%.
- Prevalence rates are significantly higher in other countries; Lesotho (23.10%), Botswana (23%), South Africa (17.90%), and Zimbabwe (14.70%) (CIA, 2014).
- **Why should we care?**
 - A generalized epidemic: infection rate is above 1% among the general population (UNAIDS, 2009)

Literature Review Summary

- Compared to Asia, Europe, and USA/Canada, few studies have been conducted on the topic in Ghana, and Africa in general.
- Social supports and quality of life differed by demographic factors. E.g., Gender influenced social supports in all settings
- Findings from prior literature are consistent with findings from this study

Theoretical Framework

- The Social Determinants of Health, defined as:

“Social determinants of health are those conditions of life deeply connected to the foundations of existence, to the entirety of economic and social life.”



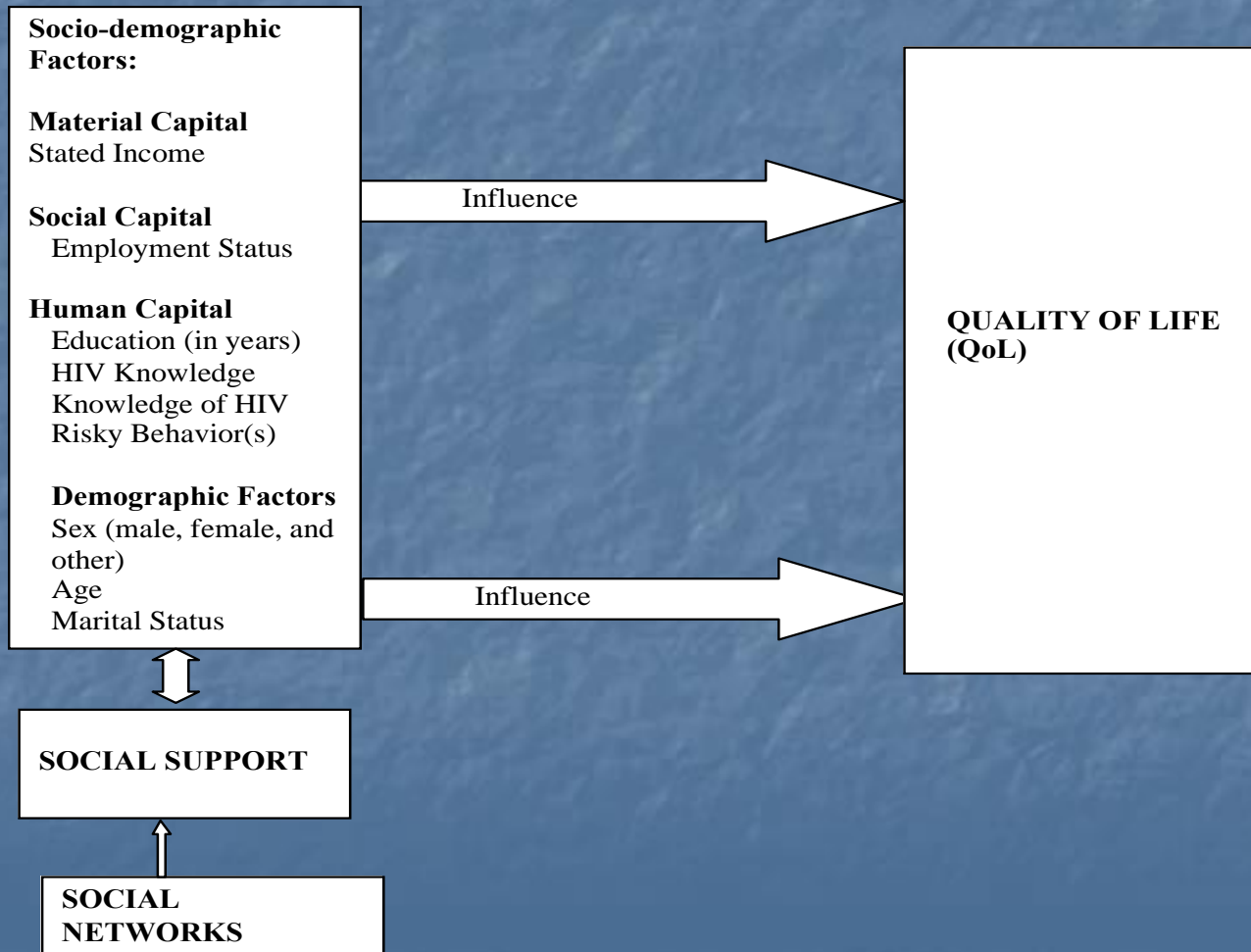
- The “entire social environments, including the distribution of power and privilege may play a role in the health of populations, such as social networks, educational systems, and family structure.”

(Hofritcher, 2001, p. 11, as cited in the WHO SDH Report, 2010)

Theories

- Social capital, social support, and social network theory
- Concepts from the intersection domains of social capital, social network and social support theories .

Theoretical Framework



Model: Conceptualization of Socio-demographic Factors, Social Support, and Quality of Life (Adapted from Oakes & Rossi, 2003)

Methodology-Study Setting

- Study was conducted in **Accra, Ghana**
- Subjects were PLWAs belonging to various support groups managed by the NAP+ Ghana
 - NAP+ Ghana was formed to help improve the lives of PLWAs
 - Group members **meet at least once a month**
- The support groups come together to deal with the **complexity of issues working against PLWA in Ghana including stigma and discrimination**
- Study was conducted from **September-October 2013**

Study Design

- Cross-sectional design survey
- Most of the respondents self-reported (**read**)
- Just a few requested for assistance in completing surveys (**listened**)

Sample and Sampling Strategy

- N = 300
- Participants were notified about the research project through flyers posted at the agency and from agency representatives
- Participants orally consented to the study
- Surveys were used to gather data.

Procedures

- Individual participants were directed to meet with this researcher at her office (within the agency) to complete surveys
- Compensation for their time: GH ₵ 10 (USD \$4.76)

Measurement

- Demographic Questionnaire: For variables like sex, age, income, marital status, etc.
- QoL instrument: Medical Outcomes Study HIV Health Survey (MOS-HIV) scale
- Social Support instrument: MOS Social Support Survey
- Original versions of instruments were used
- Permission from the instrument developers granted

Methodology-Research Questions

1. Is there an association between overall social support and quality of life?
2. Are both socio-demographic factors and social supports of individuals with HIV/AIDS associated with their quality of life?

Results from the Study- Demographics

Demographic Factors	N	%
<i>Female</i>	231	<i>77.0</i>
Belong to other Groups	272	90.7
<i>Less Educated (0-12)</i>	291	<i>97.0</i>
<i>Married</i>	152	<i>50.7</i>
Unemployed	287	95.7
HIV/AIDS Diagnosis for >4 years	201	67.0
Family Member Benefit	300	100
Christian	280	93.3
<i>Group Attendance for ≥ 1 year</i>	263	<i>87.7</i>
<i>Have Children</i>	242	<i>80.7</i>

- **Total N = 300**
- All respondents (100%) reported income of less than **GH ₵100.99 (USD \$46.33)**
- Ranged in **age from 18 to 60 years**

Results-Hypotheses Tested

- The hypotheses were rejected
- *Ho₁: There is no association between overall social support and quality of life*
- A moderate correlation was found between overall social support and overall quality of life
($r = .51, p = .01$)

Results-Hypotheses Tested

- *Ho₂: There is no relationship between socio-demographic factors and social supports combined with the quality of life of individuals with HIV/AIDS.*
- The overall equation was significant; $p < .0005$.
- $R^2 = .415$ (41.5%)
- Significant demographic factors [younger ($B = -.002$, $p = < .0005$); male ($B = .154$, $p = < .0005$); attended support group meetings for over a year ($B = .043$, $p = .009$); educated ($B = .070$, $p = .023$).
- Overall social support was not significant; ($p = .081$).

Discussions-Study's Implications for Social Work

- **Practice:** Encourage the use of more interventions that will enhance the receipt of increased social support in Ghana
- **Policy:** Fund the development of more interventions aimed at increasing social supports in Ghana
- **Research:** Preliminary quantitative study on the topic in Ghana. Other researchers can build on knowledge by further investigating relationships among variables in other settings in Ghana and other developing countries

Group Discussion

- Questions
- Suggestions