

Approved

BLACK WOMEN DIAGNOSED AS HIV-POSITIVE: THEIR PSYCHOLOGICAL EXPERIENCES AND COPING MECHANISMS

by

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SUMMARY

Despite the seriousness of HIV and AIDS in women in South Africa, little attention is being paid to special needs of women infected with HIV and the problems they face. Little research that has been conducted on the subject mainly concentrated on the effects of being HIV-positive, emphasising the negative implications thereof. Specific research on how women cope with everyday life, while simultaneously diagnosed with HIV-infection, is still scarce in South Africa. This study investigates how black women who are living with HIV-infection experience and cope with everyday life.

The study was conducted from Lazarus and Folkman's cognitive phenomenological model of coping and Antonovsky's salutogenic perspectives. In the literature study, HIV with specific reference to women was reviewed. The cognitive phenomenological model of coping and the salutogenic theory were also reviewed.

Data was collected by means of unstructured interviews, which were audio-recorded. The research group consisted of four black women who have been diagnosed HIV-positive for at least six months. Three open-ended questions were asked, namely: a) "how have you been experiencing your life since you were diagnosed HIV-positive?" b) "how are you coping with your situation?" and c) "how can you advise other women in the same situation as you?"

A qualitative method of data analysis was used in the study and was described in detail. Twenty-three different categories of experience were identified and further grouped into experiences of being HIV-positive and the ways of coping employed by the women in the study. The categories were then integrated with the literature and theoretical information on coping and salutogenesis.

It was found that the experiences differed from woman to woman. These experiences included experiences in relation to self e.g. emotional experiences; and experiences in relation to others e.g. reactions from other

people and problems associated with disclosure of HIV status. All women in this study employed both problem-focused and emotion-focused coping strategies. The context also seemed to play a role in the experiences and the coping strategies used by the women.

Die vroue en hulle probleme wat hulle gevind het om die gevolle van hiv te vertel aan ander gesien is heel belangrik om te verstaan. Alle vroue wat hiv-positiel is was en het gebruik gemaak van beide soorte kopestrategieë. Die konteks soos hierdie vroue leef en werk het ook 'n rol gespeel in hul ervaringe en kopestrategieë wat hulle gebruik.

KEY WORDS:

BLACK WOMEN, HIV-POSITIVE, PSYCHOLOGICAL EXPERIENCES, PRIMARY APPRAISAL, SECONDARY APPRAISAL, PROBLEM-FOCUSED COPING, EMOTION-FOCUSED COPING, SALUTOGENESIS, GENERALIZED RESISTANCE RESOURCES, SENSE OF COHERENCE.

OPSOMMING

Ongeag die ernstigheid van MIV en VIGS in vrouens in Suid Afrika is daar tot dusver min aandag aan die spesifieke behoeftes van hierdie vrouens en die probleme wat hulle ervaar geskenk. Die beperkte navorsing wat wel daaroor gedoen is het hoofsaaklik gefokus op die effek daarvanom MIV-positief te wees en meer spesifiek die negatiewe gevolge daarvan. Spesifieke navorsing oor hoe vrouens daarby aanpas in die alledaagse lewe is steeds gering. Hierdie studie vors na hoe swart vrouens met MIV-infeksie die situasie beleef en in die alledaagse lewe daarby aanpas.

Die studie is gedoen binne die teoretiese raamwerke van Lazarus en Folkman se kognitief-phenomenologiese model van aanpassing en Antonovsky se salutogenetiese perspektief. MIV met spesifieke verwysing na vroue was bespreek in die literatuuroorsig.

Data is ingesamel deur gebruik te maak van ongestruktureerde onderhoude. Die navorsingsgroep het uit vier swart vrouens, wat vir minstens ses maande HIV gehad het, bestaan. Drie oop-einde vrae is aan hulle gestel, naamlik: a) "hoe ervaar jy jou lewe sedert jy MIV-positief gediagnoseer is?" b) "hoe pas jy aan by jou situasie?" c) "hoe sal jy ander vrouens in dieselfde situasie as jy adviseer?"

'n Kwalitatiewe metode van data-ontleding is gebruik in hierdie studie, en dit word in detail beskryf. Drie-en-twintig verskillende beleweniskategorieë is gëidentifiseer en verder gegroepeer in terme van die orvaring om MIV-positief te wees en die verskillende wyses van aanpassing daarby. Die kategorieë is daarna gëintegreer met die bestaande literatuur en die teoretiese raamwerke van aanpassing en salutogenese.

Die resultate het getoon dat die belewenis van MIV van vrou tot vrou verskil. Hierdie belewenisse sluit in die verhouding tot die self, byvoorbeeld emosionele belewenisse; en belewenisse in verhoudings met ander, byvoorbeeld die reaksies van ander mense en probleme

geassosieer met die mededeling van 'n positiewe MIV diagnose. Alle vroue in hierdie studie het gebruik gemaak van beide probleem-gesentreerde en emosie-gesentreerde aanpassingstrategieë. Die konteks waarin die vrou haar bevind blyk ook 'n rol te speel in die belewenis en die aanpassingstrategieë wat gebruik word.

INTRODUKSIEN

CHAPTER 1: INTRODUCTION

1.1 PROBLEEMSTELLING

1.2 KOMMUNIKASIE EN AANPASSEN

SLEUTELWOORDE:

SWART VROUENS, MIV-POSITIEF, PSICOLOGIESE ERVARINGS, PRIMÈRE BEOORDELING, SEKONDERE BEOORDELING, PROBLEEM-GESENTREERDE AANPASSING, EMOSIONEEL-GESENTREERDE AANPASSING, SALUTOGINESE, ALGEMENE WEERSTANDS BRONNE, GEVOEL VAN SAMEHORIGHEID.

CHAPTER 2: METHODS

2.1 PROTOTYPING

2.2 DISCLOSURE AND REACTION

2.3 KVINNELIJKE AANPASSENDE STRATEGIES

2.4 KVINNELIJKE AANPASSENDE STRATEGIES

2.5 DISCLOSURE AND REACTION

2.6 DISCLOSURE AND REACTION

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ERRATA

Change the word "loose" to "lose" on the following pages

- p. 10, line 22
- p. 69, line 9
- p. 71, line 28
- p. 72, line 11
- p. 74, line 12
- p. 80, line 14 & 15

Change the word "loosing" to "losing" on

- p. 17, line 11
- p. 72, line 5, 6, 8
- p. 80, line 10
- p. 82, line 11

p. 11, line 19: "women are" should be "women were"

p. 12, line 21: "legions" should read "lesions"

p. 17, line 25: "reported against" should be "reported by"

p. 17, line 26: "occur" should be "occurs"

p. 25, line 27: "undimensional" should be "unidimensional"

p. 35, line 9: the word "her" should be inserted before "children"

p. 41, line 13: "a individual" should read "an individual"

p. 46, line 6: "a" should be inserted before "friend's"

p. 53, line 10: "hem" should be spelt "them"

p. 63, line 10: the word "a" should be inserted before "few"

p. 71, line 21: "concern and" should read "concern with, and"

p. 85, line 21: "live the way" should be living the way"

p. 92, line 6/7: "Hate feelings" should be "Feelings of hate"

p. 96, line 25: "other people" should be "some people"

p. 101, line 7: "a" should be inserted before "daily"

p. 103, line 8: the word "the" should be inserted before "better"

p. 103, line 29: "by another should read "to another"