

CHAPTER ONE

FOREWORD

1.1 INTRODUCTION AND MOTIVATION

The headlines scream of HIV/AIDS being a global pandemic and it is true that HIV has reached every corner of the globe. Never in history has there arisen such a widespread and fundamental threat to human development. Yet it is sub-Saharan Africa that is the hardest hit region and mainland southern Africa that experiences the most severe HIV/AIDS epidemic in the world (Jackson, 2002). Countries like Botswana and South Africa have the highest infection rates with as many as one in three adults affected (Clark, 2002).

Millions of children are being orphaned in these regions and years have been knocked off life expectancy. AIDS threatens food security, productivity, human resource availability and development (Jackson, 2002). It severely leaves its mark on the individual and the family, but its impact reaches through to the macro-economic level as well. This is a long term development disaster on a scale never witnessed before and sub-Saharan Africa is bearing the brunt of it.

The global pandemic as it is called, is looking more and more like two distinct epidemics – one global and one regional (Jackson, 2002). Two dominant HIV-transmission patterns are described by UNAIDS (2000) today: heterosexual sex throughout sub-Saharan Africa and intravenous drug injecting, together with some sexual transmission among men who have sex with men, everywhere else. It is to be understood though, that these are not exclusive patterns of course, but it matters that these are the predominant modes of transmission.

The devastating fact about African HIV/AIDS scenario is that women are several times more likely to be infected than men. Gender inequality is a fundamental

driving force of the AIDS epidemic (Women's Health Weekly, 2000). Biological and social factors make women and girls far more vulnerable to HIV/AIDS than men. Women are anatomically and physiologically much more susceptible and penile penetration puts women at great risk. Socio-culturally, women in (South) Africa tend to wield little power in heterosexual relationships. The socialisation process of both men and women right from childhood, as well as the stereotyping of their roles in society, has exposed women more to HIV infection as compared to their male counterparts (Henderson, 1996).

The term *gender* refers to the widely shared expectations and norms within a society about appropriate male and female behaviour, characteristics and roles. It is a social and cultural construct that differentiates women from men and defines the ways in which women and men interact with each other (Gupta, 2001). In sub-Saharan Africa this very often means that it is unacceptable for a woman to say no to unwanted and unprotected sex unless they want to risk abuse or even violence (Esu-Williams, 2000). Both men and women are socialised to believe that men have a right to have sex regardless of their wives' consent, even if he had been demonstrably unfaithful and was infected with HIV (Urdang, 2001). This state of affairs is further exacerbated by the fact that very often the women is economically dependant upon the man.

The fact that women are so vulnerable is a vital issue in the spread of HIV/AIDS in sub-Saharan Africa. Women's rights and needs have to be taken seriously if any kind of slowing of the epidemic is to occur. Equity in all fields – health, education, environment and the economy – are essential if women are to act to protect themselves when it comes to HIV/AIDS (Women's Health Weekly, 2000). Issues surrounding women and poverty, education, training, health matters, violence, economy, power and decision-making, are issues that will have a major impact on the spread of HIV and AIDS.

1.2 AIMS OF THE STUDY

There are four aims for this literature review:

- The first aim is to highlight the plight of women in (South) Africa in the context of the HIV/AIDS epidemic sweeping the continent. Evidence indicates (UNAIDS, 2000) that there are now more HIV infections in women than in men. Some of the major contributing factors that cause women to remain so vulnerable are highlighted.
- The second aim of this study, is to review the salutogenic perspective. This objective emanates from the conviction that the empowerment of HIV-positive women through an integrated psychotherapeutic intervention is possible. This is seen in the context of Positive Psychology through whose lenses are viewed the paradigm of salutogenesis. Psychology has been functioning mainly in the paradigm of pathogenic thinking. In contrast thereto, the salutogenic perspective searches for the origins of health without emphasising the dichotomy between health and disease. The salutogenic perspective questions how people can learn to live and cope well, with stressors (in this instance HIV/AIDS), and possibly even turn their existence into an advantage.
- The third aim is to review existing psychotherapeutic interventions regarding people who are infected with HIV/AIDS and to ascertain which approaches have provided demonstrable value and advantages, if any, to those who are HIV-positive.
- This study is couched in the context provided by a review of the statistics that exist concerning HIV/AIDS worldwide, but more specifically pertaining to Africa and Southern Africa.

1.3 **TERMINOLOGY**

Key words that are relevant to this study are:

Women – new evidence suggests that in sub-Saharan Africa, there are more women infected with HIV/AIDS than men. Due to a number of issues which include socio-cultural and gender factors, women are extremely vulnerable in the context of this disease in Africa.

Gender – it is a social and cultural construct that refers to the widely shared expectations and norms within a society about appropriate male and female behaviour, characteristics and roles. It differentiates women from men and defines the way in which women and men interact with one another.

HIV (Human Immunodeficiency Virus)/AIDS (Acquired Immune Deficiency Syndrome) - a disease which is mainly sexually transmitted, but can also be transmitted through contact with contaminated blood and syringe needles. It has swept across the world with virtually 50 million people currently being infected. Africa is the epicentre of the pandemic and it is estimated that two out of every three cases are diagnosed on this continent.

Salutogenesis – comprised of the Latin word *salus* = health, and the Greek word *genesis* = origins, salutogenesis seeks to focus on the origins of health, as opposed to the pathogenic model which seeks to explain illness. This paradigm ponders why some people are located towards the positive end of the health ease/dis-ease continuum, whatever their location at any given time. It compels us to formulate and advance the theory of coping.

Fortigenesis – broadens the concept of salutogenesis to refer to the origins of psychological strength in general. From the Latin *fortis* = strong, fortify and fortitude, it is a more embracing, more holistic concept than salutogenesis. It is

the search for an understanding why and how some people find the strength to withstand and overcome pressures towards increasing entropy, whereas others do not.

General Resistance Resources (GRR's) – such as money, ego strength, education, cultural stability and social support etc., they facilitate effective tension management in any situation of demand and making sense out of the countless stressors with which people are constantly bombarded.

Sense of Coherence – is a dispositional orientation that embraces components of perception, memory, information processing and affect, into habitual patterns of appraisal, based on repeated experiences of sense-making that have been facilitated by GRR's.

Intervention – in this context, a psychotherapeutic intervention that “comes between” the infected person and the HIV/AIDS disease and which intends to provide comfort, information, re-framing of meaning and reality, strength, resilience and coping.

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1.4 METHODOLOGY

This study is a literature review that explores, reflects upon and integrates the issues of women and HIV/AIDS in sub-Saharan Africa. This includes the concept of salutogenesis which describes the most potent weapon in the arsenal of therapy, building strength, as well as the existing interventions that prevail in the context of this disease.

This literature review will serve as a basis for further doctoral studies and will constitute a chapter in a doctoral thesis to follow.