

HIV/AIDS : stigma as a factor that affects care seeking, care and support of persons with HIV/AIDS in Port Harcourt Nigeria

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Propositions with the dissertation

**HIV/AIDS:
STIGMA as a factor that affects care seeking,
care and support of PERSONS with HIV/AIDS in
Port-Harcourt Nigeria**

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Maastricht, 2010

1. Health care professionals in Sub-Saharan Africa have additional challenges in caring for people living with HIV/AIDS because of the high prevalence of stigma related to the disease of their patients (*Thesis*).
2. For many people living with HIV/AIDS in Sub-Saharan Africa, the use of faith is an important way of coping with HIV/AIDS (*Thesis*).
3. Women living with HIV/AIDS in Port Harcourt Nigeria experience more stigmatization in the family, society and health care institutions compared with their male counterparts. (*Thesis*).
4. Mandatory HIV testing of individuals against their will or knowledge is a violation of medical ethics and human rights which creates moral, ethical and public health effects (*Thesis*).
5. The lack of health insurance accessible to all in Nigeria encourages people to opt for self-selected over the counter (OTC) drugs.
6. Self-efficacy to execute a given behavior such as seeking care increases the likelihood of commitment to action and actual performance of the behavior.
7. The medical use of marijuana is likely to be palliative or provide therapeutic benefits for the symptoms or effects of the HIV/AIDS condition.
(*Cinti, 2008, Journal of International Association of Physicians in AIDS Care 8 (6): 342-346*).
8. In patients with HIV-1 infection who are starting combination antiretroviral therapy (ART), the incidence of immune reconstitution inflammatory syndrome (IRIS) is not well defined and may depend on the CD4 count at the start of ART.
(*Muller, M., Wandel, S., Colebunders R. et al., 2010, The Lancet Infectious diseases, 10 (4): 251-261*).