Non-specialist Psychosocial Support Interventions for Women Living with HIV

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Key Findings

While outcomes were mixed, the available evidence suggests that support group and individual mentorship psychosocial support interventions may improve coping, self-esteem, and social support, and reduce depression, stress, and perceived stigma among women living with HIV. Interventions are optimally delivered by women living openly with HIV or by them together with others. Interventions should be relevant, acceptable and tailored to the health of women living with HIV. This may be best facilitated through theoretically-grounded interventions designed using formative research.

Evidence included in this review

Nine controlled trials, including six individually-randomized controlled trials, one facility-randomized controlled trial, and two non-randomized trial designs. Total sample size per study ranged from 71-1,200 participants. Studies measured fourteen different outcomes including: self-esteem; coping (active, positive, self-coping); avoidant coping; coping: help from others; positive social support; social support availability; social support satisfaction; negative social support; depressions; HIV discomfort; HIV stigma; mood; HIV worry; and stress using a variety of different metrics. No studies measured SRH decision-making. Meta-analysis was not conducted due to the limited number of articles measuring the same outcomes using a consistent approach.

Quality assessment

Study quality varied. Most studies were relatively methodologically rigorous, with randomization to study arms; however, not all were comparable between arms on baseline sociodemographic characteristics and outcome measures. Follow-up time extended from eight weeks to eighteen months.

Clinical Implications

To improve well-being, SRH, and uphold women’s rights, both physical and psychological health must be prioritized. Priorities and SRH preferences of women living with HIV as individuals should remain at the center of healthcare provision, which should consequently not focus solely on reducing vertical HIV transmission.
Further research

Future studies using consistent outcome metrics are needed to understand the most effective intervention types and delivery mechanisms, as well as the relationship between psychosocial support and sexual and reproductive health and rights.

References


Abstract

Many women living with HIV experience a range of physical, social, and psychological challenges linked to their HIV status. Psychosocial support interventions may help women cope with these challenges and may allow women to make better decisions around their sexual and reproductive health (SRH), yet no reviews have summarized the evidence for the impact of such interventions on well-being and SRH decision-making among women living with HIV. We systematically reviewed the evidence for non-specialist delivered psychosocial support interventions for women living with HIV, which are particularly relevant in low-resource settings. Outcomes of interest included mental, emotional, social well-being and/or quality of life, common mental health disorders, and SRH decision-making. Searching was conducted through four electronic databases and secondary reference screening. Systematic methods were used for screening and data abstraction. Nine articles met the inclusion criteria, showing positive or mixed results for well-being and depressive symptoms indicators. No studies reported on SRH decision-making outcomes. The available evidence suggests that psychosocial support interventions may improve self-esteem, coping and social support, and reduce depression, stress, and perceived stigma. However, evidence is mixed. Most studies placed greater emphasis on instrumental health outcomes to prevent HIV transmission than on the intrinsic well-being and SRH of women living with HIV. Many interventions included women living with HIV in their design and implementation. More research is required to understand the most effective interventions, and their effect on sexual and reproductive health and rights.

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