

U.S. Agency for International Development

> Bureau for Global Health

## SUCCESS STORIES

HIV/AIDS

## **Indians Living with HIV/AIDS Benefit from Friendlier Hospitals**

STIGMA AND DISCRIMINATION are often cited as the true killers in the HIV/AIDS pandemic: Just when AIDS-affected families are at their most desperate, many find themselves shunned by neighbors, cut off from schools and workplaces, and unable to access proper health care.

In India, where experts caution HIV/AIDS cases could explode in the next decade, many people living with HIV/AIDS find stigma and discrimination to be most severe where they least expect it: in the hospital. A widespread problem, health officials say poor treatment of HIV/AIDS patients is

aggravated by insufficient training of health care workers and inadequate policies to protect care providers and patients alike.

The Indian government and several medical institutions have taken steps to remedy the situation, however, and hospitals are working to create friendlier environments for people with HIV/AIDS. The National AIDS Control Organization has begun to train health care workers in clinical management of HIV/AIDS, and India's National AIDS Prevention and Control Policy explicitly calls for program and policy initiatives to curb stigma in health care settings.

"At first, hospital managers were not certain that AIDS-related stigma and discrimination were 'real' issues."

— An Indian researcher

Researchers with the Population Council/Horizons project and a local nongovernmental organization are building on this momentum by designing new ways to create HIV/AIDS patient-friendly hospital settings. Investigators, supported by the U.S. Agency for International Development (USAID), are collaborating with three New Delhi hospitals to carry out the study, which has been endorsed by the Indian government.

During preliminary interviews with health care workers and patients, researchers found that persons living with HIV/AIDS and their caregivers reported harsh treatment from health care workers. The study team also found that, within health care settings, misconceptions about HIV transmission, negative attitudes toward persons living with HIV/AIDS, inadequate training and supplies for infection control, and lack of institutional policies on confidentiality and HIV testing all contribute to treatment inequality.

Based on initial findings, hospital managers and project researchers designed tools such as the "Self-assessment Checklist for a Patient-friendly Environment" to help managers identify hospital



strengths and weaknesses and improve their services. Hospital staffs were also engaged in developing and reviewing policy guidelines to help them assess their own institutional policies.

Managers at each hospital then worked with the project team to draft an action plan to improve services for persons living with HIV/AIDS and working conditions for staff. The action plans vary by hospital but include recommendations such as posting information on universal precautions, training more health care workers from each department in pre- and

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Women stand in line at a busy New Delhi hospital.

post-test HIV counseling, and offering staff participatory sensitization training, designed and implemented by local AIDS organizations.

"At first, hospital managers were not certain that AIDS-related stigma and discrimination were 'real' issues," said Vaishali Sharma Mahendra of the Population Council/Horizons project. "But once data ... on what was happening in their own hospitals was shared with them, they could see that stigma and discrimination are indeed real, and planned activities for where they needed to improve."

In 2003, researchers will evaluate the project by analyzing survey data, scores on the self-assessment checklist, and institutional progress on action plans. The checklist will be revised for broader use across India and will be distributed by the National AIDS Control Organization.

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