

“He tells me it is not his job as a man to cook or wash clothes” – Intersectional identities influencing Antiretroviral therapy adherence among women with disabilities living with HIV.

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Background:

Persons with disabilities living with HIV (PWDLWHIV) experience overlapping barriers to antiretroviral therapy (ART) access and adherence. This can be explained in terms of an intersection of social identities such as HIV-positive status, disability, gender, and factors including socioeconomic status (SES), sociocultural beliefs, geographical location, and religion. These identities and factors can be interconnected and occur simultaneously to influence the experiences of women with disabilities living with HIV (WWDLWHIV) who have greater disadvantages in relation to ART access and adherence than men with disabilities living with HIV (MWDLWHIV). This paper argues that the intersection of gender, disability and HIV limits access and adherence to antiretroviral therapy for women.

Methods:

Intersectionality was adopted as a guiding theoretical framework, involving In-depth interviews and structured observations with 29 (19 women, 10 men) PWDLWHIV who were heterosexual. A long qualitative research method involving repeat interviews and structured observations was conducted six months after the first set of interviews with eight of the 29 PWDLWHIV to explore important themes. Interviews were conducted in English, Pidgin English, and participants' local dialects. Data were analysed using reflexive thematic analysis.

Results:

This study highlights the intersectional challenges of WWDLWHIV. Uncovered themes identify stigma, discrimination, parenting pressures, job loss, and shifting gender roles as shaping participants' experiences and the impact of ART adherence. Women face compounded barriers, including abandonment, economic hardship, and caregiving burdens, which further threaten their access and adherence to ART.

Conclusion:

Intersectional barriers, stigma, discrimination, economic hardship, and caregiving burdens significantly hinder ART adherence for women with disabilities living with HIV, highlighting the timely need for targeted, inclusive interventions.

Disclosure of Interest Statement:

None

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