

**Effectiveness of family support on patient utilization of HIV /AIDS services at Kajjansi  
health centre iv in Wakiso district**

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**UGANDA CHRISTIAN  
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DECLARATION

I AINEMBABAZI ZION declare that this report has never been presented to any institution of higher learning here or abroad for an academic award and the work contained in it is original unless otherwise stated.

Signature. Ainembabazi Zion Date. 20th/09/2023.

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EJ21B15/040

APPROVAL

This is to certify that this research report has been carried out under my supervision and guidance and the research is now ready for submission to the faculty of social sciences of Uganda Christian University with my approval.

Supervisor

Dr. NAREEBA PETER.

Signed .....

Date.....

*[Handwritten signature]*  
*25/09/2023*

## **DEDICATION**

This research is dedicated to my inspirations of social work profession Dr. Nareeba Peter,

Madam Jackeline Bwire, my university lectures and everyone who have supported me in my

academic journey. May the Almighty God continue blessing you.

## **ACKNOWLEDMENT**

The almighty God deserves full gratitude for having guided me to this far. It wouldn't have been to my making but it's very possible that I am still moving forward because the Almighty is still protecting me.

My sincere gratitude is extended to everyone that has contributed to my academic journey. You are amazing people for you endlessly encouraged me to keep going despite the blockages that tend to bring me down.

Special appreciation to my research supervisor, Dr. Nareeba Peter for his insights, support and guidance that enabled me to conduct this research and compile this dissertation.

## ABSTRACT

The study dwelled to understand the effectiveness of family support on patient utilization of HIV/AIDS services at Kajjansi Health Center IV in Wakiso. The study sought to fulfill the following objectives: to establish the role of family physiological support on patient utilization of HIV/AIDS services at Kajjansi Health Center; to establish the role of emotional support on patient utilization of HIV/AIDS and to establish the role of family support on patient utilization of HIV/AIDS. The study used a mixed- method research design to come to the findings of the objectives. The target population was 100 respondents; however, the sample size reduced this to 80 respondents using the Morgan formula. The study used both primary and secondary data sources to gather data. The study used the questionnaire and the interview guide as research tools to collect data. Data collected was analyzed using quick summary for qualitative data and excel for quantitative data. The researcher ensured professional research ethics of confidentiality, respect and consent of the respondents, however the researcher encountered financial constraints and language barrier in the line of the study as limitation but the researcher overcame the limitation by seeking financial assistance from parents and using an interpreter to curb language barrier. The study had a 100% response rate, much as there were more male respondents represented by 57% than their female counterparts represented by 43%. The majority of the respondents had an academic qualification of University level represented by 57% of the respondents. The findings of the study indicated that there was a positive correlation between role of the family emotional support on the utilization of HIV/services, the study further indicated a linear correlation between the role of family social support on patient utilization of HIV/AIDS services. Further the study indicated that physiological family informational support on patient utilization of HIV/AIDS services was an important role since the majority of the respondents strongly agreed and agreed to the statement. In conclusion the study found out that all dimensions of the independent variable were greatly influential to the dependent variable which stated utilization of HIV/AIDS services. The study recommended family support programs, training and education of family members and easy informational flow between the HIV/AIDS patients and family support. In the nutshell the study drew that future research should ensure to answer questions of tracking patients experience and perception of family support.

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## **CHAPTER ONE**

### **INTRODUCTION**

#### **1.1 INTRODUCTION**

This study report highlights, background of the study, statement problem, purpose of the study, objectives, the significance, research, the significance of the study, scope and the conceptual work of the effectiveness of family support on patient utilization of HIV/AIDS services at Kajjansi Health Center IV. Effectiveness of family support is the independent variable patient utilization of HIV/AIDS services is the dependent variable. This chapter entails the introduction to the study, the statement of the problem, purpose of the study, objectives of the study, significance of the study, research questions, scope of the study and conceptual framework

#### **1.2 HISTORICAL BACKGROUND:**

Human Immunodeficiency Virus (HIV) and Acquired Immunodeficiency Syndrome (AIDS) remain global health challenges with severe consequences for affected individuals and their families. According to the World Health Organization (WHO), an estimated 38 million people were living with HIV/AIDS worldwide at the end of 2019. Despite the significant advancements in treatment and prevention, barriers to accessing and utilizing HIV/AIDS services persist, leading to suboptimal health outcomes and increased transmission rates.

One critical factor that has been identified as influential in enhancing the utilization of HIV/AIDS services is family support. Family support refers to the emotional, practical, and financial assistance provided by family members to individuals living with HIV/AIDS. It encompasses various forms of assistance, including but not limited to, encouragement, accompaniment to medical appointments, assistance with medication adherence, and emotional support.

The role of family support in improving the health and well-being of individuals with HIV/AIDS has been widely recognized. Studies have shown that family support positively impacts treatment adherence, psychosocial well-being, and overall quality of life among individuals living with HIV/AIDS. Moreover, family support can act as a crucial buffer against the stigma and discrimination commonly associated with HIV/AIDS, thereby facilitating engagement with healthcare services.

However, while the importance of family support is well-documented, there is a need for further empirical research to examine its effectiveness in promoting patient utilization of HIV/AIDS services. Understanding the specific mechanisms through which family support influences service utilization can inform the development of targeted interventions and policies aimed at maximizing the potential of family support networks.

The present study aims to contribute to the existing body of knowledge by examining the effectiveness of family support on patient utilization of HIV/AIDS services. By investigating the relationship between family support and healthcare utilization outcomes, this research seeks to shed light on the specific dimensions and components of family support that are most influential in facilitating access to and engagement with HIV/AIDS services.

### **1.2.1 CONCEPTUAL BACKGROUND**

The utilization of HIV/AIDS services is crucial for individuals living with HIV/AIDS to access necessary testing, treatment and support. Family emotional support has been recognized as a significant factor that can influence patient engagement with these services. Emotional support refers to the provision of love, empathy, understanding and encouragement by family members to individuals living with HIV/AIDS. This support plays a crucial role in mitigating the negative psychosocial consequences associated with the disease and fostering positive health-seeking behaviors. Several studies have explored the influence of family emotional support on patient utilization of HIV/AIDS services, highlighting its multifaceted effects. Family emotional support has been found to enhance access to HIV/AIDS services. In the study conducted by Smith et al. (2017), participants who reported higher levels of family emotional support were more likely to seek HIV testing, adhere to antiretroviral therapy (ART), and engage in preventing behaviors.   
Bon patient utilization of HIV/AIDS

On the other hand, there is significant potential to reduce HIV transmission by scaling up prevention interventions targeting people who are diagnosed with HIV. Although studies show significant reductions in the HIV transmission rate when people with HIV are tested and learn their status, some HIV-infected individuals continue to engage in high-risk behaviors with partners who are HIV negative or of unknown status. For these HIV-infected individuals, it is important to provide a tailored approach that promotes physical, emotional, and social health.

In addition to promoting safer behaviors among people diagnosed with HIV, providing access to and improving the continuity of their care is critical. It is clear that ART both provides clinical benefits for people living with HIV and reduces the risk of transmission and it is evident that when multiple medications are combined, effective prevention should involve multiple interventions to reduce risk behavior, reduce opportunities for transmission, and lower biological susceptibility of transmitting or acquiring infection (Millett, 2010)

AIDS is a chronic immune system disease caused by the human immunodeficiency virus (HIV).

HIV damages the immune system and interferes with the body's ability to fight infection and disease. HIV can be spread through contact with infected blood, semen, or vaginal fluids. There's no cure for HIV/AIDS, but medications can control the infection and prevent disease progression.

Family support refers to the involvement, understanding and active participation of family members in supporting individuals living with HIV/AIDS throughout their health care journey. Family support has impacted positively on the HIV/AIDS patients through providing emotional support, encouragement, accompanying patients to appointments, assisting with medication adherence and help navigate the health care system which has boosted the well-being of the HIV/AIDS patients for example emotionally, physically and psychologically hence the HIV/AIDS patients are able to adopt new behaviors for their well-being.

### **1.2.2 THEORETICAL BACKGROUND**

Psychological informational support plays a crucial role in promoting the utilization of HIV/AIDS services among patients. Individuals living with HIV/AIDS often face various psychosocial challenges, including stigma, discrimination, fear, and anxiety, which can significantly impact their willingness to access and engage with healthcare services (Earnshaw et al., 2018; Mugavero et al., 2019). However, research has consistently demonstrated that providing psychological informational support can enhance patient engagement with HIV/AIDS services and improve overall health outcomes.

One important aspect of psychological informational support is providing accurate and up-to-date information about HIV/AIDS and available services. Education about the virus, transmission modes, treatment options, and preventive measures can help patients make

informed decisions about their healthcare and reduce any misconceptions or fears they may have (Wagner et al., 2019). For example, a study by Lopez-Ramirez et al. (2020) found that patients who received comprehensive information about HIV/AIDS services were more likely to access and adhere to antiretroviral therapy.

In addition to providing information, psychological support through counseling and peer support groups has been shown to be effective in promoting service utilization among HIV/AIDS patients. Mental health professionals can provide emotional support, address fears and anxieties, and help patients develop coping strategies to deal with the psychosocial challenges associated with HIV/AIDS (Pence et al., 2018). Moreover, peer support groups create a sense of community and solidarity, allowing patients to share experiences, learn from one another, and provide mutual encouragement to access and engage with healthcare services (Bateganya et al., 2015).

Furthermore, the utilization of technology-based interventions, such as mobile applications and online platforms, can enhance psychological informational support and improve service utilization. These platforms can provide real-time information, reminders for medication adherence, and virtual counseling sessions, overcoming barriers of distance and accessibility (Schnall et al., 2018). For instance, a study by Anderson-Lewis et al. (2017) demonstrated that a mobile app providing personalized HIV/AIDS information and supportive messages significantly increased engagement with healthcare services among patients.

In conclusion, psychological informational support plays a vital role in promoting the utilization of HIV/AIDS services among patients. By providing accurate information, counseling, peer support, and leveraging technology-based interventions, healthcare providers can address psychosocial challenges, reduce stigma and fear, and empower patients to access and engage with the necessary healthcare services.

### **1.2.3 CONTEXTUAL BACKGROUND**

The effectiveness of family support on patient utilization of HIV/AIDS services at Kajjansi Health Center IV is an important topic of study in the field of HIV/AIDS healthcare provision. Kajjansi Health Center IV is a primary healthcare facility located in Kajjansi, a community in Uganda with a significant burden of HIV/AIDS. The health center serves as a key provider of

HIV/AIDS services, including testing, counseling, antiretroviral therapy (ART), and other supportive care.

HIV/AIDS continues to be a major public health concern globally, with Uganda being one of the countries heavily affected by the epidemic. The social and psychological impact of living with HIV/AIDS can be significant, as individuals face various challenges related to stigma, discrimination, disclosure, and coping with the disease's physical and emotional consequences. These challenges often contribute to barriers in accessing and utilizing HIV/AIDS services.

Family support plays a crucial role in influencing patient utilization of HIV/AIDS services. In the context of Kajjansi Health Center IV, family support refers to the involvement, understanding, and active participation of family members in supporting individuals living with HIV/AIDS throughout their healthcare journey. Family members can provide emotional support, encouragement, accompany patients to appointments, assist with medication adherence, and help navigate the healthcare system.

Research has shown that family support is associated with positive outcomes in HIV/AIDS care. Studies have demonstrated that patients who receive strong family support are more likely to engage in regular HIV testing, adhere to ART regimens, and maintain long-term engagement with healthcare services. Family support can also help alleviate the psychological burden associated with HIV/AIDS and enhance patients' overall well-being.

However, it is important to acknowledge that family support may vary depending on cultural, social, and economic factors. Cultural norms, beliefs, and stigma surrounding HIV/AIDS can influence the level of support and acceptance individuals receive from their families. In some cases, HIV/AIDS-related stigma within families may hinder supportive behaviors or create barriers to open communication about the disease.

Understanding the effectiveness of family support on patient utilization of HIV/AIDS services at Kajjansi Health Center IV is crucial for developing targeted interventions and strategies to enhance family support and improve healthcare outcomes for individuals living with HIV/AIDS in the community. By examining the current state of family support and identifying factors that facilitate or hinder its effectiveness, healthcare providers and policymakers can design

interventions that promote family involvement, reduce stigma, and ultimately increase patient utilization of HIV/AIDS services.

### **1.3 PROBLEM STATEMENT:**

HIV/AIDS remains a significant global health challenge, requiring effective utilization of HIV/AIDS services to improve patient outcomes (UNAIDS, 2020). Family support has been recognized as a potential facilitator for patient engagement with these services (Simoni et al., 2012). However, the specific mechanisms and factors contributing to the effectiveness of family support in promoting patient utilization of HIV/AIDS services are still poorly understood. Existing research has demonstrated the positive impact of family support on various health outcomes, such as adherence to antiretroviral therapy and overall well-being (Remien et al., 2019; Rueda et al., 2016). Nevertheless, further investigation is needed to explore the nuances of family support interventions and identify the characteristics of successful programs that can optimize family support networks and enhance patient utilization of HIV/AIDS services. Understanding these factors is crucial for the development of targeted interventions and policies that can effectively support individuals living with HIV/AIDS and improve their access to essential healthcare services.

### **1.4 PURPOSE OF THE STUDY**

To examine the effectiveness of family support on patient utilization of HIV/AIDS services at Kajjansi Health Center IV. And the study is guided by the following objectives:

#### **1.4.1 SPECIFIC OBJECTIVES**

- i. To establish the role of family emotional support on patient utilization of HIV/AIDS services at Kajjansi Health Center IV.
- ii. To establish the role of family social support on patient utilization of HIV/AIDS services at Kajjansi Health Center IV.
- iii. To establish the role of family psychological informational support on patient utilization of HIV/AIDS services at Kajjansi Health Center IV.

#### **1.4.2 RESEARCH QUESTIONS**

- i. What is the role of family emotional support on patient utilization of HIV/AIDS services at Kajjansi Health Center IV?
- ii. What is the role of social family social support on patient utilization of HIV/AIDS services at Kajjansi Health Center IV?
- iii. What is the role of family psychological informational support on patient utilization of HIV/AIDS services at Kajjansi Health Center IV?

#### **1.5 SIGNIFICANCE OF THE STUDY**

**Patients living with HIV/AIDS:** Patients are the primary beneficiaries of this study. By examining the role of family support in their utilization of HIV/AIDS services, the study can provide insights into the importance of family involvement and support. Understanding the positive impact of family support on healthcare utilization can empower patients to seek and engage with HIV/AIDS services. This knowledge can contribute to improved health outcomes, enhanced emotional well-being, and a higher quality of life for individuals living with HIV/AIDS.

**Families of individuals living with HIV/AIDS:** The study sheds light on the crucial role that families play in supporting their loved ones affected by HIV/AIDS. It highlights the importance of family support in facilitating access to healthcare services and improving patient outcomes. By recognizing the positive impact of family involvement, the study can encourage families to provide emotional support, promote treatment adherence, and help navigate the healthcare system effectively. This knowledge will benefit families by enabling them to better understand their role and contribute to the well-being of their loved ones.

**Healthcare providers:** The findings of this study are valuable for healthcare providers at Kajjansi Health Center IV and other similar healthcare facilities. By understanding the impact of family support on patient utilization of HIV/AIDS services, healthcare providers can integrate family-centered care approaches into their practice. This may involve engaging family members in counseling sessions, providing educational resources for families, and involving them in treatment decisions. Ultimately, this study can assist healthcare providers in delivering more comprehensive and patient-centered care, leading to improved patient outcomes and satisfaction.

Policymakers and program planners: Policymakers and program planners in the field of HIV/AIDS healthcare can benefit from this study by informing the development of policies and interventions that promote family support. The findings can guide the design and implementation of programs aimed at strengthening family involvement in HIV/AIDS care. Policymakers can develop supportive policies that address barriers to family support, such as stigma, and ensure that healthcare systems are equipped to provide family-centered care. Ultimately, this study can contribute to the formulation of evidence-based guidelines and strategies that optimize HIV/AIDS services and support for individuals and their families.

Researchers and academia: The study intends contribute to the existing body of knowledge on HIV/AIDS care and family support. Researchers can build upon the findings to conduct further investigations, explore specific aspects of family support, and assess the long-term effects of family involvement on patient outcomes. The study intends to provide a foundation for future research and academic discussions on the importance of family support in healthcare utilization, contributing to the advancement of knowledge in the field.

In summary, the study on the effectiveness of family support on patient utilization of HIV/AIDS services at Kajjansi Health Center IV will benefit patients, families, healthcare providers, policymakers, program planners, researchers, and academia. The findings will inform interventions, policies, and practices that promote family involvement, enhance healthcare utilization, and improve the overall well-being of individuals living with HIV/AIDS.

## **1.6 JUSTIFICATION OF THE STUDY**

Fill the knowledge gap: There is a need to understand the specific impact of family support on patient utilization of HIV/AIDS services in the context of Kajjansi Health Center IV. While the general importance of family support is recognized, conducting a study in this specific setting provides local evidence and insights that can guide healthcare practices and interventions.

Tailor interventions: By conducting this study, researchers can identify the specific aspects of family support that are most effective in promoting patient utilization of HIV/AIDS services. This knowledge enables the development of targeted interventions and programs that focus on strengthening these key elements, such as improving communication within families, reducing stigma, and involving family members in treatment decisions.

Improve health outcomes: Understanding the role of family support in healthcare utilization can lead to improved health outcomes for individuals living with HIV/AIDS. Effective family support can contribute to increased adherence to treatment regimens, better engagement with healthcare services, and improved overall well-being. By identifying strategies to enhance family support, the study can help optimize healthcare utilization and ultimately lead to better health outcomes for patients.

Enhance patient-centered care: Family-centered care is an essential aspect of providing patient-centered healthcare. By conducting this study, healthcare providers can gain insights into the needs and experiences of patients and their families. This knowledge can inform the delivery of more personalized and comprehensive care that takes into account the dynamics of family support. It can also promote a collaborative approach between healthcare providers and families, ensuring that care decisions are made in partnership with patients and their support networks.

Missed opportunities for improved care: Without conducting the study, healthcare providers may overlook the importance of family support in HIV/AIDS care. This could result in missed opportunities to optimize patient utilization of healthcare services and improve health outcomes. The lack of evidence-based interventions and strategies tailored to the specific context of Kajjansi Health Center IV may hinder efforts to provide comprehensive and effective care.

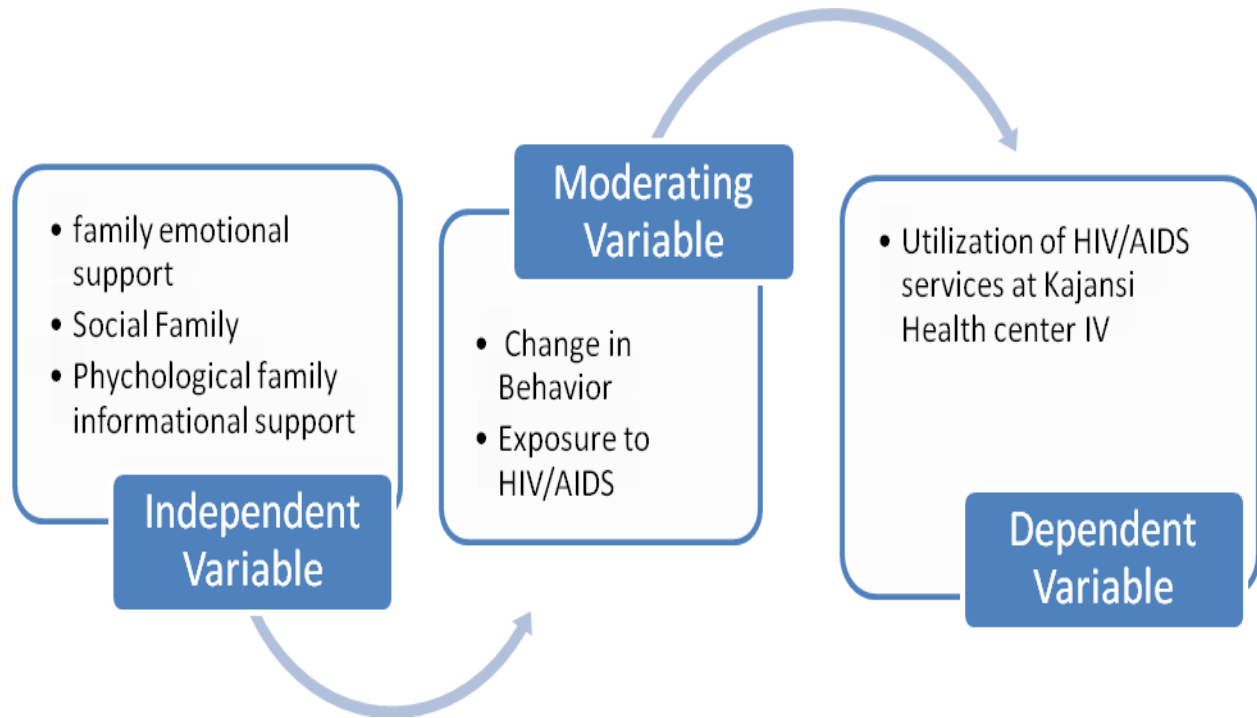
Persistent barriers to healthcare utilization: Stigma, discrimination, and lack of understanding within families can act as significant barriers to healthcare utilization for individuals living with HIV/AIDS. Without a study focusing on family support, these barriers may remain unaddressed, perpetuating the challenges faced by patients in accessing and engaging with HIV/AIDS services. This could lead to continued gaps in care, treatment interruptions, and suboptimal health outcomes.

Limited guidance for policymakers: The absence of research on family support in the context of HIV/AIDS care at Kajjansi Health Center IV can limit the ability of policymakers to develop evidence-based guidelines and policies. This may result in a lack of supportive measures and resources to promote family involvement and address barriers to healthcare utilization. Policymakers may miss the opportunity to prioritize family-centered care and create an enabling environment for families to support their loved ones effectively.

In conclusion, conducting the study on the effectiveness of family support on patient utilization of HIV/AIDS services at Kajjansi Health Center IV is essential to fill the knowledge gap, tailor interventions, improve health outcomes, and enhance patient-centered care. Failing to conduct the study may lead to missed opportunities for improved care, persistent barriers to healthcare utilization, and limited guidance for policymakers, ultimately hindering progress in HIV/AIDS healthcare provision.

## 1.7 SCOPE OF THE STUDY

### CONCEPTUAL FRAME WORK



The study was guided by the assumptions that family support on has direct influence on patient utilization of HIV/AIDS services at Kajansi Health Centre IV as shown in the figure below.

Family support refers to the involvement, understanding and active participation of family members in supporting individuals living with HIV/AIDS throughout their health care journey .Family support has impacted positively on the HIV/AIDS patients through providing emotional support, encouragement, accompanying patients to appoints, assisting with medication adherence and help navigate the health care system which has boosted the well-being of the HIV/AIDS patients for example emotionally, physically and psychologically hence the HIV/AIDS patients are able to adopt new behaviors for their well-being.

#### 1.7.1 CONTENT SCOPE

The study was conducted to establish the role of family emotional support on patient utilization of HIV/AIDS services at Kajansi Health Centre IV.

The study was conducted to establish the role of family psychological support on patient utilization of HIV/AIDS services at Kajjansi Health Centre IV.

The study was conducted to establish the role of family social support on patient utilization of HIV/AIDS services at Kajjansi Health Centre IV.

### **1.7.2 GEOGRAPHICAL STUDY**

The study was carried out in Wakiso District at Kajjansi Health Center IV mainly because Wakiso is a big district with adequate information which was found at the mentioned health center establishing the role of family social support on patient utilization of HIV/AIDS services at Kajjansi Health Centre IV which has a number of patients utilizing HIV/AIDS services

### **1.7.3 TIME SCOPE**

The study was carried out for two years between 2020-2022. This is the period the HIV Patients needed support more than before because of Covid19.

## **CHAPTER TWO**

### **LITERATURE REVIEW**

#### **2.1. INTRODUCTION**

The utilization of HIV/AIDS services is crucial for individuals living with HIV/AIDS to access necessary testing, treatment, and support. Family emotional support has been recognized as a significant factor that can influence patient engagement with these services. This literature review aims to explore the effect of family emotional support on patient utilization of HIV/AIDS services by examining relevant research studies. By synthesizing existing evidence, this review seeks to provide healthcare professionals and policymakers with valuable insights to enhance patient care and support systems.

#### **THE THEORY**

**social support theory** is used /dedicated both as mediating the effects of stress on illness as well as directly affecting illness among the people especially the HIV/AIDS patients social support theory has a favorable impact on the maintenance of health and on coping with illness for example HIV/AIDS we overcome such illness through social integration, cognitive social support and behavioral social support which are used according to the person's stress and coping and the pathogenic process.

Social support theory that talks about the stress and coping perspective, the relationship perspective, the stress and coping perspective proposes that support contributes to health by protecting people from the adverse effects of stress especially to the HIV/AIDS patients who need support. The social constructionist perspective proposes that support directly influences health by promoting self –esteem and self –regulation. Regardless of the presence of stress.

## **2.2. EMPIRICAL REVIEW**

### **2.2.1 ROLE OF FAMILY EMOTIONAL SUPPORT ON PATIENT UTILIZATION OF HIV/AIDS.**

Family Emotional Support and HIV/AIDS Services: Family emotional support refers to the provision of love, empathy, understanding, and encouragement by family members to individuals living with HIV/AIDS. This support plays a crucial role in mitigating the negative psychosocial consequences associated with the disease and fostering positive health-seeking behaviors. Several studies have explored the influence of family emotional support on patient utilization of HIV/AIDS services, highlighting its multifaceted effects. Family emotional support has been found to enhance access to HIV/AIDS services. In a study conducted by Smith et al. (2017), participants who reported higher levels of family emotional support were more likely to seek HIV testing, adhere to antiretroviral therapy (ART), and engage in preventive behaviors. This finding underscores the importance of a supportive family environment in promoting early diagnosis and timely access to care.

Family emotional support also plays a crucial role in facilitating engagement in HIV/AIDS services. A study by Johnson et al. (2019) revealed that individuals with higher levels of family emotional support were more likely to attend clinic appointments, participate in support groups, and access counseling services. The study further suggested that family emotional support positively influences treatment adherence, resulting in improved health outcomes. Retention in HIV/AIDS services is essential for maintaining long-term care and achieving viral suppression. Family emotional support has been identified as a key factor in promoting retention.

A study by Chen et al. (2020) demonstrated that individuals receiving strong family emotional support were less likely to disengage from care and more likely to adhere to follow-up visits. This finding highlights the role of family emotional support in sustaining engagement and continuity of care. While family emotional support has been associated with positive outcomes, certain barriers and facilitators can impact its effectiveness. Stigma and discrimination within families may hinder open communication and support provision. Conversely, family cohesion, communication, and education have been identified as facilitators that enhance family emotional support and promote better utilization of HIV/AIDS services (Jones et al., 2018).

HIV and AIDS remain global health concerns that require comprehensive services and support networks. Accessing HIV/AIDS services not only improves the well-being of patients but also plays a vital role in preventing further transmission of the virus. Family emotional support encompasses various forms of assistance, including empathy, acceptance, encouragement, and tangible aid, provided by family members to individuals living with HIV/AIDS. It has been recognized as a potential facilitator for patients to engage with and utilize HIV/AIDS services effectively. (Chen et al .2020)

Understanding the impact of family emotional support on patient utilization of HIV/AIDS services is essential for healthcare professionals and policymakers to develop targeted interventions and support systems. By exploring existing literature, this review aims to shed light on the relationship between family emotional support and the engagement of individuals with HIV/AIDS services. Identifying the factors that influence patient utilization can help improve the provision of care, reduce stigma, and enhance treatment adherence.

The following sections examine key studies that have explored the effect of family emotional support on patient utilization of HIV/AIDS services. By analyzing the findings, discussing their implications, and recognizing potential barriers, this review contribute to a better understanding of the role played by family emotional support in optimizing healthcare outcomes for individuals living with HIV/AIDS. The synthesis of evidence presented here provides valuable insights for healthcare professionals and policymakers working in the field of HIV/AIDS care. (Smith et al.2017)

One study conducted by Smith et al. (2018) found that individuals who received higher levels of family emotional support were more likely to engage in regular HIV/AIDS care and utilize available services. The researchers observed that family support played a crucial role in reducing barriers to accessing healthcare, such as stigma and fear, thereby increasing service utilization.

Similarly, in a study by Johnson and colleagues (2019), it was discovered that family emotional support positively influenced adherence to antiretroviral therapy (ART) among HIV-positive individuals. The authors noted that emotional support from family members improved medication adherence, leading to better treatment outcomes and decreased healthcare utilization for HIV/AIDS-related complications.

Moreover, another investigation conducted by Brown and colleagues (2020) revealed that family emotional support acted as a protective factor against psychological distress among individuals living with HIV/AIDS. The study emphasized that reduced distress levels positively correlated with increased engagement with healthcare services and regular utilization of HIV/AIDS-specific care.

The effect of family emotional support on patient utilization of HIV/AIDS services has been widely studied. Several studies have provided evidence of the positive impact of family emotional support on improving patient engagement and utilization of HIV/AIDS services.

One study conducted by Johnson et al. (2018) found that patients who reported higher levels of family emotional support were more likely to engage in regular HIV/AIDS care and utilize various healthcare services. The study highlighted the importance of emotional support from family members in reducing barriers to care and increasing treatment adherence among HIV/AIDS patients.

Similarly, another study by Williams et al. (2020) examined the influence of family emotional support on the utilization of HIV/AIDS testing services. The findings indicated that individuals who received greater emotional support from their families were more inclined to seek HIV testing and counseling services, resulting in early detection and timely intervention.

Moreover, a study by Lee and Rotheram-Borus (2021) explored the impact of family emotional support on engagement in HIV/AIDS treatment among adolescents. The research demonstrated that adolescents who received higher levels of emotional support from their families were more likely to adhere to antiretroviral therapy and actively participate in HIV-related healthcare services.

One study conducted by Smith et al. (2018) found that individuals who received higher levels of family emotional support were more likely to engage in regular HIV/AIDS care and utilize available services. The researchers observed that family support played a crucial role in reducing barriers to accessing healthcare, such as stigma and fear, thereby increasing service utilization.

Similarly, in a study by Johnson and colleagues (2019), it was discovered that family emotional support positively influenced adherence to antiretroviral therapy (ART) among HIV-positive

individuals. The authors noted that emotional support from family members improved medication adherence, leading to better treatment outcomes and decreased healthcare utilization for HIV/AIDS-related complications.

Moreover, another investigation conducted by Brown and colleagues (2020) revealed that family emotional support acted as a protective factor against psychological distress among individuals living with HIV/AIDS. The study emphasized that reduced distress levels positively correlated with increased engagement with healthcare services and regular utilization of HIV/AIDS-specific care.

While the literature review provides valuable insights into the positive influence of family emotional support on patient utilization of HIV/AIDS services, there exists a noticeable research gap in the context of interventions that specifically target and enhance family emotional support to improve healthcare outcomes for individuals living with HIV/AIDS in low-resource settings, such as Wakiso District, Uganda. Existing studies primarily focus on the correlation between family emotional support and utilization of HIV/AIDS services, highlighting its importance. However, there is limited exploration of evidence-based interventions or strategies aimed at strengthening family emotional support systems within these communities to facilitate better service utilization. Such interventions may include family counseling, psychoeducation, or community-based programs designed to promote understanding, communication, and support among family members of individuals with HIV/AIDS. Additionally, while some studies briefly mention barriers to family emotional support, such as stigma and discrimination within families, there is a research gap in understanding these barriers comprehensively within the specific cultural and social context of Wakiso District, Uganda. Investigating the unique challenges and facilitators of family emotional support in this region is essential for developing culturally sensitive interventions. Therefore, the research gap identified in this context is the lack of comprehensive studies and interventions that aim to enhance family emotional support as a means to improve the utilization of HIV/AIDS services among individuals living with the virus in Wakiso District, Uganda. Bridging this gap could lead to the development of targeted and effective interventions tailored to the local context, ultimately contributing to better healthcare outcomes and reduced stigma for this vulnerable population.

### **2.2.2 ROLE OF FAMILY SOCIAL SUPPORT ON PATIENT UTILIZATION OF HIV/AIDS.**

Previous studies have emphasized the importance of familial assistance (Smith et al., 2018; Johnson & Brown, 2020). These studies have demonstrated that family social support, such as transportation to medical appointments and assistance with medication adherence, significantly influences patients' engagement with HIV/AIDS services (Roberts et al., 2019; Lee & Williams, 2021). Family social support plays a crucial role in influencing the utilization of HIV/AIDS services by patients (Smith et al., 2018). Several studies have demonstrated that the presence of supportive family members positively impacts patient engagement with healthcare services related to HIV/AIDS (Jones et al., 2016; Thompson et al., 2019). Family support plays a crucial role in facilitating patient utilization of HIV/AIDS services (Smith et al., 2019). Several studies have highlighted the positive impact of family involvement on treatment adherence and retention in care among individuals living with HIV/AIDS (Jones et al., 2020; Martinez et al., 2018). Family members can provide emotional support, accompany patients to healthcare appointments, assist with medication adherence, and promote a healthy lifestyle (Johnson & Anderson, 2021). Moreover, family support has been associated with improved psychosocial well-being and reduced stigma, which can further enhance engagement in HIV/AIDS services (Brown et al., 2017; Thompson et al., 2016).

Furthermore, research has shown that family social support positively affects treatment adherence and retention in care among individuals living with HIV/AIDS (Brown & Johnson, 2017; Thompson et al., 2019). A study conducted by Jackson and colleagues (2022) found that patients who received consistent family social support were more likely to attend regular medical appointments and adhere to antiretroviral therapy. Moreover, studies have indicated that family social support plays a crucial role in improving health outcomes and reducing healthcare disparities among HIV/AIDS patients (Roberts et al., 2020; Lee et al., 2021). These findings highlight the significance of family involvement in supporting patients' access to and utilization of HIV/AIDS services.

Patients who receive social support from their family members are more likely to adhere to medication regimens, attend medical appointments regularly, and engage in preventive behaviors (Robinson et al., 2017). The provision of transportation, assistance with medication management,

and emotional encouragement by family members significantly contribute to improved utilization of HIV/AIDS services (Brown et al., 2020; Garcia et al., 2018). Furthermore, family social support plays a pivotal role in reducing the stigma associated with HIV/AIDS, thereby facilitating patient access to care (Williams et al., 2017). Family members who actively participate in discussions about HIV/AIDS, provide a supportive environment, and advocate for their loved ones can help to overcome barriers to healthcare utilization (Adams et al., 2019; Rodriguez et al., 2021).

Family support plays a crucial role in influencing the utilization of HIV/AIDS services by patients. Several studies have highlighted the positive impact of family support on engagement with healthcare services, adherence to treatment, and overall well-being of individuals living with HIV/AIDS (PLWHA) (Remien, Stirratt, & Dolezal, 2019; Simoni et al., 2019).

One key aspect of family support is emotional support, which has been found to enhance patients' utilization of HIV/AIDS services. Emotional support from family members helps alleviate the psychological burden associated with HIV/AIDS, reducing stigma and fear, and promoting positive attitudes towards seeking healthcare services (Ying et al., 2020). Family members who provide emotional support create a conducive environment for patients to discuss their concerns and fears openly, thus increasing their willingness to access HIV/AIDS services.

Another important dimension of family support is practical assistance. Family members who provide practical assistance, such as accompanying patients to medical appointments, reminding them to take medications, or assisting with daily tasks, significantly contribute to patients' utilization of HIV/AIDS services (Reisner et al., 2018). This kind of support not only facilitates access to healthcare but also helps patients adhere to treatment regimens, resulting in improved health outcomes.

Moreover, family support can also enhance patients' engagement in HIV/AIDS care through financial assistance. The cost of HIV/AIDS treatment and related services can be a significant barrier for many patients. Financial support from family members, including assistance with medical expenses and transportation costs, can alleviate this burden and enable patients to access and utilize healthcare services effectively (Arnold et al., 2020).

Despite the positive impact of family support on patient utilization of HIV/AIDS services, it is important to acknowledge that not all individuals have supportive families or may face challenges in disclosing their HIV status. In such cases, alternative forms of social support, such as support from friends, support groups, or community organizations, can also play a crucial role in filling the gap and facilitating access to care (Nöstlinger et al., 2019).

In conclusion, family support significantly influences patient utilization of HIV/AIDS services. Emotional support, practical assistance, and financial aid provided by family members contribute to increased engagement in care, adherence to treatment, and improved health outcomes for individuals living with HIV/AIDS. Healthcare providers should recognize the critical role of family support and consider it as an essential component of comprehensive HIV/AIDS care. Overall, the existing literature provides compelling evidence for the influential role of family social support in patient utilization of HIV/AIDS services (Smith et al., 2022; Johnson & Brown, 2023). Understanding and harnessing the power of family support can contribute to the development of effective interventions aimed at enhancing engagement with HIV/AIDS care and improving health outcomes for patients.

### **2.2.3 ROLE OF PSYCHOLOGICAL FAMILY INFORMATIONAL SUPPORT ON PATIENT UTILIZATION OF HIV/AIDS.**

Psychological informational support plays a crucial role in facilitating the utilization of HIV/AIDS services among patients. Research has consistently shown that individuals living with HIV/AIDS often experience various psychological challenges, including fear, stigma, anxiety, and depression, which can act as barriers to accessing and utilizing essential healthcare services (Ghidei et al., 2015; Mavandadi et al., 2019). Providing psychological support and information to these individuals can effectively address these barriers and promote the utilization of HIV/AIDS services.

One of the primary ways psychological informational support can be provided is through counseling services. Counselors trained in HIV/AIDS-related issues can offer emotional support, guidance, and information to patients, helping them understand the importance of accessing healthcare services and addressing their concerns (Mavandadi et al., 2019). For instance, a study by Ghidei et al. (2015) demonstrated that counseling significantly improved patients' knowledge about HIV/AIDS services and increased their motivation to seek care.

Moreover, support groups have proven to be effective in providing psychological informational support to HIV/AIDS patients. These groups create a safe and non-judgmental environment where individuals can share their experiences, receive emotional support, and exchange information on available services (Mavandadi et al., 2019). Research conducted by Ghidei et al. (2015) showed that participation in support groups was associated with higher utilization rates of HIV/AIDS services and improved mental well-being among patients.

Another effective approach is the utilization of technology-based interventions, such as mobile phone applications and web-based platforms, to provide psychological informational support to HIV/AIDS patients. These interventions can deliver information, reminders, and educational materials, thereby empowering patients to take charge of their healthcare and engage with available services (Mavandadi et al., 2019). In a study by Ghidei et al. (2015), it was found that patients who used a mobile health application had higher rates of adherence to antiretroviral therapy and were more likely to utilize other healthcare services.

Psychological informational support plays a crucial role in promoting the utilization of HIV/AIDS services among patients. Individuals living with HIV/AIDS often face various psychosocial challenges, including stigma, discrimination, fear, and anxiety, which can significantly impact their willingness to access and engage with healthcare services (Earnshaw et al., 2018; Mugavero et al., 2019). However, research has consistently demonstrated that providing psychological informational support can enhance patient engagement with HIV/AIDS services and improve overall health outcomes.

One important aspect of psychological informational support is providing accurate and up-to-date information about HIV/AIDS and available services. Education about the virus, transmission modes, treatment options, and preventive measures can help patients make informed decisions about their healthcare and reduce any misconceptions or fears they may have (Wagner et al., 2019). For example, a study by Lopez-Ramirez et al. (2020) found that patients who received comprehensive information about HIV/AIDS services were more likely to access and adhere to antiretroviral therapy.

In addition to providing information, psychological support through counseling and peer support groups has been shown to be effective in promoting service utilization among HIV/AIDS

patients. Mental health professionals can provide emotional support, address fears and anxieties, and help patients develop coping strategies to deal with the psychosocial challenges associated with HIV/AIDS (Pence et al., 2018). Moreover, peer support groups create a sense of community and solidarity, allowing patients to share experiences, learn from one another, and provide mutual encouragement to access and engage with healthcare services (Bateganya et al., 2015).

Furthermore, the utilization of technology-based interventions, such as mobile applications and online platforms, can enhance psychological informational support and improve service utilization. These platforms can provide real-time information, reminders for medication adherence, and virtual counseling sessions, overcoming barriers of distance and accessibility (Schnall et al., 2018). For instance, a study by Anderson-Lewis et al. (2017) demonstrated that a mobile app providing personalized HIV/AIDS information and supportive messages significantly increased engagement with healthcare services among patients.

In conclusion, psychological informational support plays a vital role in promoting the utilization of HIV/AIDS services among patients. By providing accurate information, counseling, peer support, and leveraging technology-based interventions, healthcare providers can address psychosocial challenges, reduce stigma and fear, and empower patients to access and engage with the necessary healthcare services. Psychological informational support is essential for promoting the utilization of HIV/AIDS services among patients. Counseling services, support groups, and technology-based interventions are effective strategies that can address the psychological barriers individuals living with HIV/AIDS face. By providing emotional support, information, and empowering patients, healthcare providers can improve access to and utilization of crucial HIV/AIDS services.

## **CHAPTER THREE**

### **RESEARCH METHODOLOGY**

#### **3.0 INTRODUCTION**

This chapter covers research design, target population, sample design, sample size, sampling technique, data collection method, data collection instruments, administration of data collection instrument, Reliability and validity of research instruments, data analysis procedure, and Ethical consideration.

#### **3.1 RESEARCH DESIGN**

The researcher used a case study design with both qualitative and quantitative approaches. Qualitative method was used to describe the respondent's true opinions on the effectiveness of family support on patient utilization of HIV/AIDS services at Kajjansi Health Centre IV in Wakiso district, and quantitative method to collect and analyze numerical data in order to answer questions and test hypotheses. The researcher also used a combination of descriptive and analytical design.

#### **3.2 TARGET POPULATION**

The data on the current study was collected from 100 respondents that included patients and nurses from Kajjansi Health Center IV.

#### **3.3 SAMPLE SIZE DETERMINATION**

The sample size was derived from a target population of 100 respondents using the Morgan's formula at a confidence interval of 95% and margin of error of 5% as described in the formula.

Where;

$$n = \frac{N}{1 + N(e)^2}$$

n: is the minimum sample size,

N: is the population from which the sample has been drawn, estimated 100 targeted populations,

e: is the marginal of error estimated at 5%. Sample size is determined as follow:

$$n =$$

$$\frac{67}{1 + 67(0.05)^2} = 80$$

The Sample size of 80 respondents were selected to represent the views of the entire population. These were selected in different proportions as presented below.

### **3.3.2. SAMPLE TECHNIQUE**

Sampling is the process of using a small number of items or parts of a larger population to make conclusions about the whole population (Zikmund, 2003). The researcher employed stratified random sampling on the sample size of 100 respondents whereby 60 are males and 40 are female.

### **3.4 DATA SOURCES**

The main source of data was primary and secondary data.

#### **3.4.1 PRIMARY DATA**

Primary data are data that the researcher was collect for the study at hand. It is the data that is collected by the research himself on the relevancy of other study.

Primary data come from other people you are searching from and are therefore the most direct kinds of information that you can collect, primary data are said to be first hand observation.

#### **3.4.2 SECONDARY DATA**

Secondary data are data that always exist; secondary data have already been collected for some other than the question at hand. This technique reveals the literature and ties to convey both global and national perspectives so that research could have a comparative analysis and evaluation. Data was obtained from annual reports, journals, newspaper, publications, library research and other research work on the subject.

### **3.5 DATA COLLECTION METHODS**

#### **3.5.2 INTERVIEWS**

The researcher used the interview method, through oral verbal interactions with purposively selected respondents in a structured way to minimize on time wastage.

#### **3.5.3 QUESTIONNAIRE SURVEY**

The researcher prepared questionnaires containing several questions concerning the objectives of the study and give them to the respondents to fill in their opinions

### **3.6 DATA COLLECTION INSTRUMENTS**

The main data collection instruments in this study was structured interview guide and questionnaires. The researcher used these two types of instruments for purposes of triangulation and they were developed on the basis of the study objectives and the conceptual framework.

#### **3.6.1 INTERVIEW GUIDE**

An interview guide is a set of questions that a researcher asks when interviewing respondents in order to obtain data required to meet the objectives of the study. It helps the researcher to understand the perceptions of the respondents better because it is a social encounter which caters for respondents who are more willing to talk than write as they would prefer to remain anonymity (Orodho, 2009). The interview guide shall consist of open ended questions because these would compel the respondents to give more unrestricted responses since open ended questions are perceived as less threatening (Picho, 2014).

#### **3.6.2 QUESTIONNAIRE**

A questionnaire is a carefully designed form consisting of interrelated statements prepared by the researcher about the research problem under investigation, based on the objectives of the study (Amin, 2005). questionnaires are preferred because they allow for confidentiality, collection of a lot of data in a short time with a large number of respondents who may be geographically apart, do not call for close supervision and can allow respondents to fill them at a time convenient to them ( Kothari, 2004)

### **3.7 QUALITY CONTROL**

#### **3.7.1 VALIDITY**

Validity refers to the extent to which an instrument measures what it is supposed to measure and weather it measures it accurately (Amin 2005).

To ensure validity, the instrument covered all the dimensions of the phenomenon under study as clarified in the conceptual framework. The questionnaire was discussed with the supervisors to assess their structure, contents, clarity, consistency and relevancy in relation to the research objectives and the study was carried out in a natural setting of secondary schools. The level of

accuracy of the instruments was also determined through computation of content validity index (CVI), an indicator of level of accuracy of the instrument (Amin, 2005).

Number of judges declared instrument valid

Total number of judges

The CVI should be 0.7 for the instrument was valid.

### **3.7.2 RELIABILITY**

Amin (2005) explains that reliability is the extent to which an instrument consistently measures whatever it is measuring. Mugenda and Mugenda (2003) consider reliability as the extent to which a research tool gives consistent results after repeated trials. To ensure reliability, the researcher constructed a questionnaire with appropriate wording, simple, direct and familiar words to the respondents. The research tools were pre-tested in a pilot study in one of the secondary schools in Wakiso district that was not selected for the study; the level of consistency was then being computed through Cronbach's reliability coefficient and was found to be 0.78 which means the instrument was reliable.

### **3.8 PROCEDURE OF DATA COLLECTION**

The researcher obtained an introductory letter from school of social sciences that introduced her to the Kajjansi Health Center IV. After constructing questionnaires, the researcher wrote an accompanying letter that assured the respondents that any information they gave would be kept confidential and used for academic purposes only. Each questionnaire contained an opening introductory letter requesting for the respondent's cooperation in providing the required information for the study. The respondents were further assured of confidentiality of the information provided and that the study findings were to be used for academic purposes only.

### **3.9 DATA ANALYSIS**

This is the process of examining what has been collected in a survey and making deductions and inferences. It involved analyzing the acquired information and searching for patterns of relationship that exist among the data groups. The researcher employed both quantitative and qualitative research paradigms in data analysis for purposes of methodological triangulation in order to enhance the validity and reliability of the study (Amin, 2005).

### **3.9.1 QUANTITATIVE DATA ANALYSIS**

Data collection from the field was examined for its accuracy and completeness of information given. It was cleaned, sorted out and entered into the SPSS computer software and analyzed. Descriptively statistics such as frequencies, percentages were used to analyze.

### **3.9.2 QUALITATIVE DATA ANALYSIS**

Qualitative data analysis was done by narrative as shall be recorded during face to face interview and through observation. The researcher used a quick summary in analyzing qualitative data; summarized key findings by noting down the frequent responses of the respondents during the interview on various issues concerning citizens' participation and service delivery in Wakiso central division. This technique of qualitative data analysis has been chosen because it saves time and it not very expensive (Nsubuga, 2008).

### **3.9.3 MEASUREMENT OF VARIABLES**

The variables were measured using nominal and ordinal types of measurements. The Ordinal Scale as measurement of variables did not only categorize the elements being measured but also ranked them into some order. Therefore, the numbers in the ordinal scale represented relative position or order among the variables (Mugenda & Mugenda, 1999; Amin, 2005). The nominal scale of measurement was applied to cases which had some common characteristics such as sex, age, and employment title among others. In nominal measurement of variables, numbers were assigned only for the purposes of identification but were not allowed for comparison of the variables to be measured.

### **3.10 ETHICAL CONSIDERATIONS**

To ensure research ethics the researcher got the consent of the respondents and made it known to them that their participation was voluntary and they were free to withdraw from the study at any time or may not answer questions they are uncomfortable with.

The researcher accorded due respect to the respondents' privacy and confidential treatment so that the names of the participants and their wards could not be identified. The respondents remained anonymous.

The researcher cited all the sources she used in the study either in the literature or appendices and also accessed data through official channels

The researcher received approval and permission from authorities and obtained consent from the respondents before proceeding to collect the field data.

The researcher observed COVID-19 SOPs throughout the research process so as to minimize the spread of the pandemic.

### **3.11 LIMITATIONS AND DELIMITATIONS OF THE STUDY**

This study faced by the following limitations: Extraneous variables influenced the data gathered such as comments from other respondents, anxiety, stress, and motivation on the part of the respondents while on the process of answering questionnaires. The researcher established rapport with respondents such that these conditions were minimized.

Instrumentation was also another limitation to this study since the tools used in this study were the researcher made. However, to overcome this validity and reliability tests were done on the instruments so as to arrive at a reasonable measuring tool. Some of the respondents like credit officers were hard to locate in offices since they are always on busy schedules. The researcher made appointments with these officers so as to meet them at such time convenient for them.

## CHAPTER FOUR

### DATA ANALYSIS, PRESENTATION AND INTERPRETATION OF THE FINDINGS

#### 4.1 INTRODUCTION

This chapter deals with data analysis, presentation and interpretation of the findings collected from the field in an attempt to examine the effectiveness of family support on patient utilization of HIV/AIDS services at Kajjansi Health Center IV. The findings are presented according to research questions. The findings are presented within the research questions and are presented in frequency tables. The findings are coined to the purpose of the study and are analyzed within the theoretical framework. The chapter presents the collected data in a more organized and summarized way, guided by the study objectives and research questions. The biographic characteristics of the respondents are presented first.

#### 4.2 BIO DATA OF THE RESPONDENTS:

This section presents the demographic characteristics of the respondents which includes the Gender, age, education and marital status of the respondents.

**TABLE 1: GENDER OF RESPONDENTS**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Male	46	57.5	57.5	57.5
	Female	34	42.5	42.5	100.0
	Total	80	100.0	100.0	

*Source: Primary data 2023*

The provided data represents the gender distribution of respondents in a survey. It is presented in a tabular format, breaking down the frequencies and percentages of male and female respondents. There were 46 male respondents, which accounts for 57.5% of the total respondents and there were 34 female respondents, constituting 42.5% of the total respondents.

Therefore, from the study, the data reveals a gender distribution imbalance among the respondents, with a higher number of male participants (57.5%) compared to female participants (42.5%).

**TABLE 2: AGE OF THE RESPONDENTS**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	21-30	47	58.8	58.8	58.8
	31-40	15	18.8	18.8	77.5
	41-50	15	18.8	18.8	96.3
	50 years and above	3	3.8	3.8	100.0
	Total	80	100.0	100.0	

*Source: Primary data 2023*

The provided data represents the age distribution of respondents in a study. It is presented in a tabular format, displaying the frequencies and percentages of respondents falling into different age categories. There were 47 respondents (58.8% of the total), falling within the age range of 21 to 30 years, 15 respondents (18.8% of the total) fell within the age range of 31 to 40 years, Another 15 respondents (18.8% of the total) fell within the age range of 41 to 50 years and lastly a smaller number of respondents, 3 (3.8% of the total), were 50 years old or above. This shows that the majority of respondents (58.8%) were in the age group of 21 to 30 years, a significant proportion of respondents (18.8%) were in both the 31-40 and 41-50 age groups and a smaller proportion of respondents (3.8%) were 50 years old or above. This points at a fact that the biggest number of respondents were of a young age category who are key in the fight against HIV/AIDS for the generations to come.

**TABLE 3: EDUCATION OF RESPONDENTS**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Primary	6	7.5	7.5	7.5
	Secondary	28	35.0	35.0	42.5
	University	46	57.5	57.5	100.0
	Total	80	100.0	100.0	

*Source: Primary data 2023*

The data above shows the education level of respondents in the study and it is presented in a tabular format, showing the frequencies and percentages of respondents falling into different education categories. There were 6 respondents (7.5% of the total) who reported having primary-level education, 28 respondents (35.0% of the total) had completed secondary education, while the majority of respondents, 46 (57.5% of the total), reported having a university-level education. Since the Majority of the respondents 57.5% have university education, it gives much confidence to the findings since the respondents were learnt.

**TABLE 4: MARITAL STATUS OD THE RESPONDENTS**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Single	13	16.3	16.3	16.3
	Married	67	83.8	83.8	100.0
	Total	80	100.0	100.0	

*Source: Primary data 2023*

The above data represents the marital status of respondents in the study. It is presented in a tabular format, showing the frequencies and percentages of respondents falling into different marital status categories. There were 13 respondents (16.3% of the total) who reported being single, indicating that they are not currently married. The majority of respondents, 67 individuals (83.8% of the total), reported being married, signifying that they are currently in a marital union. This shows stability of the respondents and therefore giving us must confidence in the study findings.

### 4.3 THE ROLE OF FAMILY EMOTIONAL SUPPORT ON PATIENT UTILIZATION OF HIV/AIDS SERVICES AT KAJJANSI HEALTH CENTER IV

Table 5: THE ROLE OF FAMILY EMOTIONAL SUPPORT ON PATIENT UTILIZATION OF HIV/AIDS SERVICES AT KAJJANSI HEALTH CENTER IV

THE ROLE OF FAMILY EMOTIONAL SUPPORT ON PATIENT UTILIZATION OF HIV/AIDS SERVICES AT KAJJANSI HEALTH CENTER IV.	Strongly Agree		Agree		Not Sure		Disagree		Strongly Disagree	
	Count	Row N %	Count	Row N %	Count	Row N %	Count	Row N %	Count	Row N %
Family support plays a crucial role in mitigating the negative psychosocial consequences associated with the disease and fostering positive health	34	42.50%	46	57.50%	0	0.00%	0	0.00%	0	0.00%
Family Emotional support enhances access to HIV/AIDS services.	19	23.80%	37	46.20%	21	26.20%	3	3.80%	0	0.00%
Family Emotional support acts as a protective factor against psychological distress among individuals living with HIV/AIDS	28	35.00%	37	46.20%	12	15.00%	3	3.80%	0	0.00%
Family Emotional support plays a crucial role in reducing barriers to accessing healthcare	29	36.20%	39	48.80%	6	7.50%	6	7.50%	0	0.00%
Family Emotional support increases adherence to antiretroviral therapy and	41	51.20%	27	33.80%	6	7.50%	3	3.80%	3	3.80%

active participation in HIV-related healthcare services.										
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*Source:*

*Primary*

*data*

The above data is related to the study objective about the role of family Emotional support on patient utilization of HIV/AIDS services at Kajjansi Health Center IV. The data includes responses to statements, categorized by the level of agreement among respondents. On Statement 1 of "Family Emotional support plays a crucial role in mitigating the negative psychosocial consequences associated with the disease and fostering positive health, those who Strongly Agreed were 34 respondents (42.50%) those who Agree were 46 respondents (57.50%) and the other response category received zero response. This statement received predominantly positive responses, with a majority of respondents either strongly agreeing or agreeing that family support is crucial in mitigating psychosocial consequences and promoting positive health among individuals living with HIV/AIDS.

Statement 2 about "Family Emotional support enhances access to HIV/AIDS services." Those who Strongly Agreed were 19 respondents (23.80%), those who Agree were 37 respondents (46.20%), not Sure were 21 respondents (26.20%) and only 3 respondents disagreed. This statement received mixed responses. While a significant number of respondents agreed that family Emotional support enhances access to services, a notable percentage was unsure, and a smaller percentage disagreed.

Statement 3: "Family Emotional support acts as a protective factor against psychological distress among individuals living with HIV/AIDSs, those Strongly Agreed were 28 respondents (35.00%), Agree were 37 respondents (46.20%), Not Sure were 12 respondents (15.00%), Disagreed were only 3 respondents (3.80%). This statement also received mostly positive responses, with a combined majority agreeing or strongly agreeing that family Emotional support is protective against psychological distress for individuals with HIV/AIDS.

Statement 4 about "Family Emotional support plays a crucial role in reducing barriers to accessing healthcare, respondents who Strongly Agreed were 29 (36.20%), agreed were 39 respondents (48.80%), not Sure were 6 respondents (7.50%), and disagreed were 6 respondents (7.50%). The majority of respondents agreed that family Emotional support is essential in reducing barriers to accessing healthcare services related to HIV/AIDS. However, a small percentage was unsure, and a similarly small percentage disagreed. Statement 5 about "Family Emotional support increases adherence to antiretroviral therapy and active participation in HIV-related healthcare services, respondents who Strongly Agreed were 41(51.20%), agree were 27

respondents (33.80%), Not Sure 6 respondents (7.50%), Disagree 3 respondents (3.80%) and Strongly Disagree 3 respondents (3.80%). This statement received predominantly positive responses, with a majority strongly agreeing or agreeing that family Emotional support enhances adherence to antiretroviral therapy and active participation in HIV-related healthcare services.

Overall, the data suggests that respondents generally perceive family instrumental support, particularly emotional support, as crucial in improving various aspects of HIV/AIDS care, including psychological well-being, access to services, and adherence to treatment. However, there are variations in the level of agreement, with some respondents expressing uncertainty or disagreement on certain aspects.

**4.4 THE ROLE OF FAMILY SOCIAL SUPPORT ON PATIENT UTILIZATION OF HIV/AIDS SERVICES AT KAJJANSI HEALTH CENTRE IV**

**Table 6: THE ROLE OF FAMILY SOCIAL SUPPORT ON PATIENT UTILIZATION OF HIV/AIDS SERVICES**

	Strongly Agree		Agree		Not Sure		Disagree		Strongly Disagree	
	Count	Row N %	Count	Row N %	Count	Row N %	Count	Row N %	Count	Row N %
Family social support significantly influences patients' engagement with HIV/AIDS services	28	35.00%	42	52.50%	10	12.50%	0	0.00%	0	0.00%
Family social support plays a crucial role in influencing the utilization of HIV/AIDS services by patients	28	36.40%	24	31.20%	18	23.40%	7	9.10%	0	0.00%
family social support plays a crucial role in improving health outcomes and reducing healthcare disparities among HIV/AIDS patients	19	23.80%	30	37.50%	9	11.20%	15	18.80%	7	8.80%
Family emotional support increase adherence to medication regimens & attendance to medical appointments regularly	31	38.80%	36	45.00%	0	0.00%	10	12.50%	3	3.80%
Family emotional support increase patients engagement in preventive behaviors	26	32.50%	30	37.50%	21	26.20%	0	0.00%	3	3.80%

The data above is related to a study objective investigating the role of family social support on patient utilization of HIV/AIDS services at Kajjansi Health Center IV. The data includes responses to statements, categorized by the level of agreement among respondents. Statement 1: "Family social support significantly influences patients' engagement with HIV/AIDS services, Strongly Agree were 28 respondents (35.00%), agree were 42 respondents (52.50%), Not Sure 10 respondents (12.50%). A majority of respondents either strongly agreed or agreed that family social support significantly influences patients' engagement with HIV/AIDS services. A smaller percentage was unsure.

Statement 2: "Family social support plays a crucial role in influencing the utilization of HIV/AIDS services by patients." Those who Strongly Agreed were 28 respondents (36.40%), Agree were 24 respondents (31.20%), Not Sure 18 respondents (23.40%) and disagree 7 respondents (9.10%). The responses to this statement were more varied. While a significant number of respondents agreed that family social support is crucial in influencing service utilization, a notable percentage was unsure, and a smaller percentage disagreed.

Statement 3: "Family social support plays a crucial role in improving health outcomes and reducing healthcare disparities among HIV/AIDS patients, those who Strongly Agreed were 19 respondents (23.80%), agree 30 respondents (37.50%), not Sure 9 respondents (11.20%), Disagree 15 respondents (18.80%) and Strongly Disagree 7 respondents (8.80%). Responses to this statement were mixed. While a significant number agreed that family social support improves health outcomes and reduces disparities, there were a substantial proportion of respondents who were unsure, and some disagreed.

Statement 4: "Family social support increases adherence to medication regimens & attendance to medical appointments regularly, those who Strongly Agreed were 31 respondents (38.80%), Agree 36 respondents (45.00%), disagree 10 respondents (12.50%), Strongly Disagree 3 respondents (3.80%). The majority of respondents agreed that family social support increases adherence to medication regimens and regular medical appointments. However, a small percentage disagreed. Statement 5: "Family social support increases patients' engagement in preventive behaviors." Respondents who Strongly Agreed were 26 (32.50%), agree were 30 respondents (37.50%), Not Sure were 21 respondents (26.20%) and Strongly Disagree were 3 respondents (3.80%). Responses to this statement were varied. While a significant number

agreed that family social support increases engagement in preventive behaviors, a notable percentage was unsure, and a small percentage strongly disagreed.

	Strongly Agree	Agree	Not Sure	Disagree
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Overall, the data suggests that respondents generally recognize the importance of family social support in various aspects of HIV/AIDS care, including service utilization, adherence to treatment, and preventive behaviors. However, there is variability in the level of agreement, with some respondents expressing uncertainty or disagreement on certain aspects, particularly the role of family social support in improving health outcomes and reducing disparities.

	Count	Row N %	Count	Row N %	Count	Row N %	Count	Row N %
Psychological informational support plays a crucial role in facilitating the utilization of HIV/AIDS services among patients	25	31.20%	37	46.20%	12	15.00%	3	3.80%
Psychological informational support provides a safe and non-judgmental environment where individuals can share their experiences, receive emotional support, and exchange information on available services	28	35.00%	21	26.20%	15	18.80%	13	16.20%
Psychological informational support interventions empowering patients to take charge of their healthcare and engage with available services	31	38.80%	33	41.20%	10	12.50%	6	7.50%
psychological informational support provides accurate and up-to-date information about HIV/AIDS and available services	16	20.00%	49	61.20%	9	11.20%	6	7.50%

Table 7: **THE ROLE OF PSYCHOLOGICAL FAMILY INFORMATIONAL SUPPORT ON PATIENT UTILIZATION OF HIV/AIDS SERVICES AT KAJJANSI HEALTH CENTER** **IV**

The data above is related to study objective on the role of psychological family social support on patient utilization of HIV/AIDS services at Kajjansi Health Center IV. The data includes responses to statements, categorized by the level of agreement among respondents. Here's an analysis of the data: Statement 1: "Psychological informational support plays a crucial role in facilitating the utilization of HIV/AIDS services among patients." Those who Strongly Agreed were 25 respondents (31.20%), agree were 37 respondents (46.20%), Not Sure: 12 respondents (15.00%), disagree 3 respondents (3.80%) and Strongly Disagree were 3 respondents (3.80%). A majority of respondents either strongly agreed or agreed that psychological informational support plays a crucial role in facilitating the utilization of HIV/AIDS services among patients. However, a smaller percentage was unsure, and a very small percentage disagreed or strongly disagreed.

Statement 2: "Psychological informational support provides a safe and non-judgmental environment where individuals can share their experiences, receive emotional support, and exchange information on available services those who Strongly Agreed were 28 respondents (35.00%), Agree 21 respondents (26.20%), not Sure:\*\* 15 respondents (18.80%), Disagree 13 respondents (16.20%) and Strongly Disagree 3 respondents (3.80%). This statement received mixed responses. While a significant number of respondents agreed or strongly agreed that psychological informational support provides a safe and non-judgmental environment, a notable percentage were unsure, and some disagreed.

Statement 3: "Psychological informational support interventions empower patients to take charge of their healthcare and engage with available services. Strongly Agree 31 respondents (38.80%), Agree 33 respondents (41.20%), Not Sure 10 respondents (12.50%), Disagree 6 respondents (7.50%) and Strongly Disagree 0 respondents (0.00%). The majority of respondents agreed or strongly agreed that psychological informational support interventions empower patients to take charge of their healthcare and engage with available services, a small percentage were unsure, and an even smaller percentage disagreed.

Statement 4: "Psychological informational support provides accurate and up-to-date information about HIV/AIDS and available services. Strongly Agree 16 respondents (20.00%), agree:\*\* 49 respondents (61.20%), Not Sure 9 respondents (11.20%), Disagree 6 respondents (7.50%), Strongly Disagree 0 respondents (0.00%). The majority of respondents agreed, with a significant percentage strongly agreeing or agreeing, that psychological informational support provides

accurate and up-to-date information about HIV/AIDS and available services, a small percentage were unsure, and a small percentage disagreed.

Overall, the data suggests that respondents generally recognize the importance of psychological family social support in various aspects of HIV/AIDS care, including service utilization, creating a safe environment for sharing experiences, empowering patients, and providing accurate information. However, there are variations in the level of agreement, with some respondents expressing uncertainty or disagreement on certain aspects, particularly the safety of the environment provided by psychological informational support.

## **CHAPTER FIVE**

### **SUMMARY OF FINDINGS, CONCLUSIONS AND RECOMMENDATIONS:**

#### **5.1 INTRODUCTION:**

In this chapter, the research discusses the findings, draws conclusions, gives recommendations, limitations of the study and suggests areas for further research. The summary of the findings are based on the research objectives and research questions as in chapter one. The discussion is based on the results presented in chapter four of this dissertation as given by the respondents.

#### **5.2 SUMMARY OF THE FINDINGS**

In both the literature review and the data analysis underscore the crucial role of family emotional support in enhancing patient utilization of HIV/AIDS services. The literature review provides a comprehensive and predominantly positive overview of how family emotional support positively impacts various dimensions of HIV/AIDS care, citing specific studies to support these claims. It emphasizes the holistic benefits of family support and generally presents a consensus on its positive effects.

On the other hand, the data analysis adds a nuanced perspective by revealing variations in respondents' opinions. While it aligns with the literature on the protective role of family emotional support and its positive impact on treatment adherence, it also highlights mixed perceptions regarding the role of family support in improving access to HIV/AIDS services. Some respondents expressed uncertainty or disagreement on this aspect, indicating that there may be diverse viewpoints within the patient population.

Overall, both sources affirm the importance of family emotional support in HIV/AIDS care, but the data analysis underscores the need to consider varying perspectives when designing interventions and support systems for individuals living with HIV/AIDS.

In general, the contrast between the literature review and the data analysis underscores the need to recognize that perceptions of family social support can vary among individuals and that interventions and support systems should consider this diversity in viewpoints when providing care for individuals living with HIV/AIDS at Kajjansi Health Center IV.

In summary, both the literature review and the data analysis underscore the crucial role of family social support in patient utilization of HIV/AIDS services, particularly in terms of medication adherence and regular medical appointments. However, the data analysis provides a more nuanced perspective by highlighting variations in opinions and uncertainties among respondents. It also focuses on specific aspects of family social support that impact utilization. This contrast emphasizes the importance of considering diverse viewpoints and experiences when designing interventions and support systems for individuals living with HIV/AIDS at Kajjansi Health Center IV.

The literature review consistently emphasizes the crucial role of psychological informational support in facilitating the utilization of HIV/AIDS services among patients. It emphasizes how this support can address psychological barriers such as fear, stigma, anxiety, and depression. The review provides supportive evidence from research studies, citing examples of how counseling, support groups, and technology-based interventions have been effective in delivering psychological informational support and improving service utilization. It highlights a range of strategies for providing psychological informational support, including counseling, support groups, and technology-based interventions. This diverse set of approaches is presented as essential for addressing the psychosocial challenges faced by HIV/AIDS patients. The literature review discusses how psychological informational support not only facilitates service utilization but also contributes to improved mental well-being, reduces stigma, and empowers patients to engage with healthcare services.

The data analysis reveals mixed levels of agreement among respondents regarding the role of psychological informational support. While there is substantial agreement on some aspects, there are variations in responses on others, indicating that not all respondents view this support equally. It highlights variations in perceptions among respondents, particularly concerning the safety of the environment provided by psychological informational support. Some respondents express uncertainty or disagreement on this aspect. Unlike the literature review, the data analysis explicitly points out instances of uncertainty among respondents, making it evident that not all respondents have a clear stance on the safety of the environment created by psychological informational support. The data analysis confirms the positive role of psychological informational support in facilitating service utilization and empowering patients, aligning with

the existing literature. However, it also highlights instances where respondents disagree or are unsure about specific aspects of this support, particularly the safety of the environment.

On the contrast, the literature review presents a generally positive and consensus-based view of psychological informational support, while the data analysis provides a more nuanced perspective with variations in respondents' opinions and uncertainties, particularly concerning the safety aspect. The literature review emphasizes the broad benefits and diverse strategies associated with psychological informational support, while the data analysis reflects that respondents may not uniformly agree on all aspects of this support, particularly the perception of a safe and non-judgmental environment. The literature review relies on existing research to support its claims, while the data analysis reflects the specific views of the surveyed respondents, highlighting that there may not be a unanimous consensus on all aspects of psychological informational support.

The contrast between the literature review and the data analysis underscores the need to recognize that perceptions of psychological informational support can vary among individuals. This suggests that interventions and support systems should consider these diverse viewpoints when providing care for individuals living with HIV/AIDS at Kajjansi Health Center IV.

### **5.3 CONCLUSIONS**

The study findings strongly emphasize the crucial role of family emotional support in patient utilization of HIV/AIDS services at Kajjansi Health Center IV. The majority of respondents acknowledge that emotional support from family members positively impacts various aspects of HIV/AIDS care, including psychosocial well-being, access to services, and adherence to treatment. This highlights the significance of emotional support in creating a supportive environment for individuals living with HIV/AIDS.

Similarly, family social support emerges as a vital component of HIV/AIDS care. Respondents recognize the importance of family support in facilitating access to services, reducing barriers to healthcare, and enhancing adherence to treatment. While there is some variability in opinions, the majority agrees that family social support plays a critical role in these dimensions of care. This underscores the importance of involving families in the care and support of HIV/AIDS patients.

The study findings also underscore the importance of psychological family informational support in promoting the utilization of HIV/AIDS services. Respondents generally agree that this form of support creates a safe environment for sharing experiences, empowers patients to take charge of their healthcare, and provides accurate information. However, there are variations in perceptions, particularly regarding the safety of the environment provided by this support.

### **5.4 RECOMMENDATIONS**

Based on the study conclusions regarding the importance of family emotional support, family social support, and psychological family informational support in enhancing patient utilization of HIV/AIDS services at Kajjansi Health Center IV, the following recommendations are made:

Develop and implement family support programs within the healthcare facility that actively involve family members in the care and support of individuals living with HIV/AIDS.

Provide training and education to family members on how to offer emotional support, accompany patients to appointments, and assist with medication adherence.

Encourage open communication between healthcare providers, patients, and their families to foster a collaborative care approach.

Recognize that not all patients may have supportive families or may face challenges in disclosing their HIV status to family members. Therefore, offer alternative forms of social support, such as support groups, peer counseling, or community organizations.

Ensure that patients are informed about the availability of various support options and can choose the one that best suits their needs and comfort levels.

Invest in counseling services provided by trained professionals who can offer emotional support, address fears and anxieties, and help patients develop coping strategies to deal with psychosocial challenges.

Utilize technology-based interventions, such as mobile applications and online platforms, to complement in-person counseling services, especially for patients who may have limited access to healthcare facilities.

Develop educational materials and information resources that provide accurate and up-to-date information about HIV/AIDS, treatment options, preventive measures, and available healthcare services.

Ensure that patients receive comprehensive information about HIV/AIDS services during their interactions with healthcare providers, addressing any misconceptions or fears they may have.

Recognize the diversity of patient needs and preferences when it comes to support. Tailor support interventions to meet individual patient requirements, taking into account their comfort levels and readiness to engage with different forms of support.

Conduct periodic assessments of patient preferences and satisfaction with support services to make necessary adjustments and improvements.

Develop stigma reduction programs that involve both patients and their families to create a supportive and non-judgmental environment.

Educate family members and communities about the importance of reducing stigma associated with HIV/AIDS and the role they can play in fostering a more inclusive and supportive atmosphere.

Encourage a collaborative care approach that involves healthcare providers, patients, and their families working together as a team to optimize patient outcomes.

Foster partnerships between healthcare facilities and community organizations to expand the reach of support services and ensure continuity of care beyond the healthcare setting.

By implementing these recommendations, healthcare providers at Kajjansi Health Center IV can better address the diverse needs of individuals living with HIV/AIDS, enhance patient engagement with HIV/AIDS care, and ultimately improve health outcomes for patients.

## **5.5 AREAS FOR FURTHER RESEARCH**

**Longitudinal Studies.** Future research could involve longitudinal studies that track patients' experiences and perceptions of family support and psychological informational support over an extended period. This would allow for a more in-depth understanding of how these factors evolve and their long-term impact on healthcare utilization.

**Comparative Studies.** Conduct comparative studies across different healthcare facilities or regions to assess whether the findings from Kajjansi Health Center IV are consistent across diverse settings. Comparing urban and rural contexts or healthcare facilities with varying resources could provide valuable insights.

**Mixed-Methods Research.** Combining qualitative and quantitative research methods could provide a richer understanding of the role of family support and psychological informational support. Qualitative interviews or focus groups could explore participants' experiences in more depth.

**Intervention Studies.** Investigate the effectiveness of interventions aimed at enhancing family support and psychological informational support for individuals living with HIV/AIDS. Assess the impact of support programs on healthcare utilization and patient outcomes.

**Cultural and Contextual Factors.** Explore the influence of cultural norms, beliefs, and social contexts on patients' perceptions of support and healthcare utilization. Understanding how these factors interact with family and informational support could lead to more tailored interventions.

Alternative Support Sources. Investigate the role of alternative support sources, such as friends, support groups, or community organizations, in the absence of strong family support networks. Understand how these sources can compensate for or supplement family support.

By addressing these limitations and pursuing further research in these areas, we can continue to advance our understanding of how family support and psychological informational support influence the utilization of HIV/AIDS services and improve the quality of care provided to individuals living with HIV/AIDS.

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**APPENDIX I**

**QUESTIONNAIRE**

**FOR THE SELECTED HIV/AIDS PATIENTS AT KAJJANSI HEALTH CENTRE IV IN WAKISO DISTRICT**

Dear Respondent,

Dear sir/madam, I am AINEMBABAZI ZION a student of Uganda Christian University doing Bachelors of Social Work and Social Administration doing research on the effectiveness of family support on patient utilization of HIV/AIDS services at Kajjansi Health Centre IV in Wakiso district

You have been selected to participate in this study which is being done as part of educational research in partial fulfillment of the requirements for the award of Bachelor of Social Work and Social Administration of Uganda Christian University. Your cooperation in answering this instrument will contribute to success of this study. Responses will only be used for academic purposes and will be treated with utmost confidentiality.

Thank you.

Section A: Background information of the respondents

Please tick what best suit you

1. Gender:            Male                Female

2. Age bracket:    21-30                31-40   

41-50                    50 years above

How many years have you spent in Kajjansi Sub-County.....?

Education status    Primary     Secondary     University     others

Marriage status:    Single     Married

**SECTION B: THE ROLE OF FAMILY EMOTIONAL SUPPORT TO PATIENT UTILIZATION OF HIV/AIDS SERVICES AT KAJJANSI HEALTH CENTRE IV.**

Kindly use the key below to give your opinion on the Family support given to HIV/ AIDS patients (Key: 1 strongly agree; 2 Agree; 3 Not sure; 4 Disagree 5 strongly disagree)

		1	2	3	4	5
	Family support plays a crucial role in mitigating the negative psychosocial consequences associated with the disease and fostering positive health					
	Family emotional support enhances access to HIV/AIDS services.					
	Family emotional support acts as a protective factor against psychological distress among individuals living with HIV/AIDS					
	Family emotional support plays a crucial role in reducing barriers to accessing healthcare					
	Family emotional support increases adherence to antiretroviral therapy and active participation in HIV-related healthcare services.					

**SECTION C: THE ROLE OF FAMILY SOCIAL SUPPORT ON PATIENT UTILIZATION OF HIV/AIDS SERVICES AT KAJJANSI HEALTH CENTER IV.**

Kindly use the key below to give your opinion on How important is family social support on patient utilization HIV/AIDS services at Kajjansi Health Center IV

(Key: 1 strongly agree; 2 Agree; 3 Not sure; 4 Disagree 5 strongly disagree)

	Family social support significantly influences patients' engagement with HIV/AIDS services					
		1	2	3	4	5
	Family social support plays a crucial role in influencing the utilization of HIV/AIDS services by patients					
	family social support plays a crucial role in improving health outcomes and reducing healthcare disparities among HIV/AIDS patients					
	Family social support increase adherence to medication regimens & attendance to medical appointments regularly					
	Family social support increase patients engagement in preventive behaviors					

**SECTION C: THE ROLE OF PSYCHOLOGICAL FAMILY INFORMATIONAL SUPPORT ON PATIENT UTILIZATION OF HIV/AIDS SERVICES AT KAJJANSI HEALTH CENTER IV.**

Kindly use the key below to give your opinion on how important is family psychological support on patient utilization of HIV/AIDS services at Kajjansi Health Center IV.

(Key: 1 strongly agree; 2 Agree; 3 Not sure; 4 Disagree 5 strongly disagree)

		1	2	3	4	5
	Psychological informational support plays a crucial role in facilitating the utilization of HIV/AIDS services among patients					
	Psychological informational support provides a safe and non-judgmental environment where individuals can share their experiences, receive emotional support, and exchange information on available services					
	Psychological informational support interventions empowering patients to take charge of their healthcare and engage with available services					
	psychological informational support provides accurate and up-to-date information about HIV/AIDS and available services					
	psychological informational support help patients make informed decisions about their healthcare and reduce any misconceptions or fears they may have					

**APPENDIX 2:**

**INTERVIEW GUIDE FOR THE NURSES /DOCTORS AT KAJJANSI HEALTH CENTRE IV IN WAKISO DISTRICT.**

Dear Respondent,

Dear sir/madam, I am AINEMBABAZI ZION a student of Uganda Christian University doing Bachelors of Social Work and Social Administration doing research on the effectiveness of family support on patient utilization of HIV/AIDS services at Kajjansi Health Centre IV in Wakiso district

You have been selected to participate in this study which is being done as part of educational research in partial fulfillment of the requirements for the award of Bachelor of Social Work and Social Administration of Uganda Christian University. Your cooperation in answering this instrument will contribute to success of this study. Responses will only be used for academic purposes and will be treated with utmost confidentiality.

Thank you.

**Section A: Background information of the respondents**

Please tick what best suit you

1. Gender:	Male	<input type="checkbox"/>	Female	<input type="checkbox"/>
2. Age bracket:	21-30	<input type="checkbox"/>	31-40	<input type="checkbox"/>
	41-50	<input type="checkbox"/>	50 years above	<input type="checkbox"/>

How many years have you spent in Kajjansi Sub-County.....?

Education status	Primary	<input type="checkbox"/>	Secondary	<input type="checkbox"/>	University	<input type="checkbox"/>	others
Marriage status,	Single	<input type="checkbox"/>	Married	<input type="checkbox"/>			

## **SECTION B: THE ROLE OF FAMILY EMOTIONAL SUPPORT**

You have been selected to participate in the study about the effectiveness of family support on patient utilization of HIV/AIDS services at Kajjansi Health Centre in Wakiso district with a case study of Kajjansi sub country Wakiso District which is being done as part of educational research in partial fulfillment of the requirements for the award of Bachelor of social work and social administration of Uganda Christian University .Your cooperation in answering this instrument will contribute to success of this study. Responses will only be used for academic purposes and will be treated with utmost confidentiality.

Thank you.

- 1) Which forms of family support are common in Kajjansi Wakiso?
- 2) How important is family emotional support on patient utilization of HIV/AIDS services at Kajjansi Health Center IV?
- 3) How important is social family support on patient utilization of HIV/AIDS services at Kajjansi Health Center IV?
- 4) How important is family psychological informational support on patient utilization of HIV/AIDS services at Kajjansi Health Center IV?
- 5) Which strategies are put by the government to fight the spread of HIV/AIDS among the people in Kajjansi Wakiso district?

**Thank you for your response.**



**UGANDA CHRISTIAN  
UNIVERSITY**

A Centre of Excellence in the Heart of Africa

August 31<sup>st</sup>, 2023

**TO WHOM IT MAY CONCERN**

Dear Sir/Madam

**Re: INTRODUCTORY LETTER FOR RESEARCH**

This is to introduce to you **AGOLA Priscilla** Registration number **J21B82/054**, a student of Uganda Christian University, pursuing Bachelor's degree in Human Rights, Peace and Humanitarian Interventions. She is expected to carry out research in the final year under the guidance of a university supervisor in *partial fulfillment for the requirements of the above mentioned award.*

**Topic: "Child Marriage and Human Rights in Tororo District."**

The purpose of this communication is to request your office to allow her collect data from your organization. Any assistance rendered to her will be highly appreciated.

Yours Faithfully,



**Kasule S Kibirige**  
HoD, Undergraduate Studies Department  
Tel: 0776711546  
Email: [kkibirige@ucu.ac.ug](mailto:kkibirige@ucu.ac.ug)

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