CHAPTER 4

Conclusion, limitations and recommendations

4.1 INTRODUCTION

This chapter concludes the study, discusses its limitations, and makes recommendations for practice and further research.

The study was undertaken at a time when there was a need to point out that while discussions on the origin of HIV/AIDS were interesting, the main task was to give people enough information to protect themselves from contracting the virus.

It should be noted that people with HIV have no symptoms indicating the presence of the virus in their blood and instead the virus multiplies and circulates in their body. The virus spreads throughout the body, including blood and other cells.

It is essential to empower service providers like volunteers, care group members and homebased caregivers to help spread information.

4.2 LIMITATIONS OF THE STUDY

The findings of the study may not be widely and directly generalised for the following reasons:

- Only one clinic in Mutale area was selected for this study because the researcher was directly involved with all the services in this clinic.
- Not all the clients attending the community clinic had a chance of being included in the study because only fourteen clients were involved in the study.

4.3 **RECOMMENDATIONS**

In order to empower clients through health education, the researcher made the following recommendations:

- Nurses to give health education on topics pertaining to HIV/AIDS at the clinic before starting with the routine every day.
- Nurses to visit the community, social gatherings giving information about HIV/AIDS.
- HIV/AIDS counsellors working at the clinic to initiate a support group for HIV/AIDS clients to continue to empower them with knowledge to give to family member and other members of the community.
- Community HIV/AIDS day to be conducted quarterly to remind people and update them on new information.
- Clients can be certificated for having knowledge of HIV/AIDS to motivate and encourage them to attend HIV/AIDS day.
- Content of the programmes of HIV/AIDS day should be well organised.
- Questionnaires should be given to the clients quarterly to assess their knowledge.
- Clinic committee members should also receive training on HIV/AIDS matters.
- Information should be given in accordance with the need identified.

4.4 RECOMMENDATIONS FOR FURTHER RESEARCH

The researcher recommends that further research be undertaken on:

- Perceptions of HIV/AIDS of stakeholders in the community.
- Effects of implementing ideas, thoughts and strategies leant at community HIV/AIDS day.
- How to manage support groups, formed in the communities.
- The role and influence of NGOs in upgrading clients' perception.

4.5 GUIDELINES TO FACILITATE UNDERSTANDING OF HIV AND AIDS OF CLIENTS AND COMMUNITY

The researcher recommends the following guidelines to facilitate clients' and communities' understanding of HIV and AIDS:

- Strategies to help people to change their sexual behaviour by providing real understanding of how serious the epidemic become.
- Youth are themselves the best counsellors to communicate with other young people.
- Income-generating activities are one strategy for reducing dependency on income from prostitution.
- Finding an effective network for the distribution of condoms is essential considering cultural sensitivity.
- Using different strategies when promoting condom use considering rural areas, ensuring that women have access to condoms and empowering them to negotiate for condom use.
- Promote communication by putting sexuality on the agenda in local community and to reach local leaders.
- Dealing with polygamous way of life, the spouses of one man within or outside marriage, should communicate between themselves to reach a common strategy for increased protection.
- Advocating total sexual abstinence is a hard path to follow but to put the message of safer sex is possible, consider values and attitudes.
- Empowering single women and making them aware of the risk of HIV infection.
- Help the community to develop its own capacity to sustain decision-making about a
 protective lifestyle through home-based care and counselling.
- Helping the community to accept that AIDS is part of community life and is here to stay,
 pointing at the possible options that can limit the spread.

4.6 CONCLUSION

Clients still confuse HIV and AIDS. People ignore measures to protect themselves from the virus due to insufficient knowledge. They are not clear about the definition of HIV/AIDS. People are aware that sexual intercourse can transmit the virus and blood. It is important to emphasise that only infected persons can transmit the virus. The third mode of transmission, which is mother to child, was poorly indicated. People need to be given information that if one creates a barrier, infection will not be possible.

Although HIV/AIDS is a dangerous virus, it is not easily transmitted. Living with an HIV-positive person or employing an HIV-positive person cannot transmit the virus. The two people have to be engaged in some activity that will make it possible for the transfer of infected fluid.