Unveiling the Mystery Behind People Living with HIV/AIDS in Davao City

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Abstract

Background: The challenges faced by People Living with HIV/AIDS (PLWHA) globally are numerous. This study explored the difficulties and real-life situations of PLWHA in Davao City. Thematic analysis of qualitative data from eight participants provided a comprehensive understanding of their lived experiences, revealing patterns and recurring topics.

Objectives: The research aimed to uncover the lived realities of PLWHA in Davao City, highlighting stigma-related obstacles, discriminatory behaviors, and societal biases that hinder timely access to government-provided medication and services. Findings are intended to contribute to improved HIV/AIDS prevention, treatment, and support programs for this vulnerable population.

Methods: A qualitative, phenomenological, descriptive design was employed through in-depth interviews with adults over 18 and above during AY 2023–2024. Open-ended questions were used; interviews were audio-recorded, transcribed, and analyzed inductively and deductively using thematic methods.

Results: Three major themes emerged in participants' experiences: (1) Social Support and Understanding, (2) Disclosure and Workplace Challenges, and (3) Access to HIV Care. Coping mechanisms included Addressing Challenges, Support Systems, and Healthcare Services. Insights emphasized Education and Awareness, Empowerment, and challenges with providers and government support.

Conclusion: Lived experiences revealed the importance of mental health services, education, and social support in reducing stigma and improving interventions for PLWHA in the Philippines.

Keywords*: Human Immunodeficiency Virus, Acquired Immunodeficiency Syndrome, prevalence, Philippines.*

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Introduction

The human immunodeficiency virus (HIV) and acquired immune deficiency syndrome (AIDS) continue to pose significant global public health challenges, affecting millions of individuals worldwide, and Davao City is no exception. Despite advances in medical care, treatment accessibility, and awareness campaigns, persons living with HIV/AIDS (PLHIV) still face profound psychological, emotional, and social difficulties. The stigma surrounding HIV remains a persistent barrier—individuals diagnosed with the virus often experience fear of discrimination and judgment, leading many to conceal their status. This concealment perpetuates misinformation, social isolation, and delayed access to care, further hindering efforts to control the epidemic. Moreover, stigma affects not only the individuals diagnosed but also their families, causing emotional distress and strained relationships. These realities highlight the urgent need for comprehensive, stigma-free education, strengthened community engagement, and robust support systems for PLHIV to improve their overall quality of life and well-being.

Globally, HIV remains a serious concern. The Joint United Nations Programme on HIV/AIDS (UNAIDS, 2022) reported that approximately 39 million people were living with HIV, with 1.3 million new infections and 630,000 AIDS-related deaths recorded that year. These figures underscore the ongoing difficulty in reducing transmission and ensuring equitable access to treatment. In the Philippines, data from the Department of Health (DOH) show that as of November 2022, the HIV/AIDS & ART Registry of the Philippines (HARP) had recorded 108,428 cumulative cases since 1984, with 1,251 new HIV-positive cases reported in that month alone. Alarmingly, 23% of those newly diagnosed already had advanced HIV infection, and 919 deaths were recorded for the year.

At the regional level, the Davao Region has emerged as one of the country's HIV hotspots. According to Mendoza (2023), HARP data revealed that in February 2023, the region accounted for 84 HIV/AIDS cases, representing 7% of the total 1,292 cases nationwide—the highest regional share at the time. This situation reflects not only the growing prevalence of HIV in the region but also the continuing challenges in prevention, education, and access to care. The persistence of stigma and misinformation further complicates these issues, emphasizing the need for targeted interventions that promote awareness, enhance support networks, and foster inclusive, compassionate environments for people living with HIV/AIDS in Davao City.

Materials and Methods

Research Design

This study employed a qualitative phenomenological descriptive research design specifically to establish the direct experience and perceptions of people with HIV/AIDS in Davao City. This approach enabled the researchers to gain insight into the participants' individual perspectives, feelings, and attitudes towards the particular matter under consideration.

Research Participants

To identify and recruit the targeted participants for this study, a combination of purposive sampling and snowball (referral) sampling techniques was employed. Purposive sampling ensured that participants were deliberately selected based on specific characteristics relevant to the study—particularly individuals living with HIV/AIDS in Davao City who could provide rich, meaningful insights into their lived experiences. This

approach ensured that all participants possessed the necessary attributes to address the study's objectives. Given the sensitive nature of the topic and the potential difficulty in locating willing participants, snowball sampling was also utilized. Through this method, the researchers relied on trusted social networks and referrals to reach eligible participants who might otherwise be hesitant to participate due to stigma or concerns about privacy.

Collaboration with the City Health Office was established to facilitate safe and ethical recruitment, ensuring that participants were approached with confidentiality and respect. A total of eight participants were successfully recruited for the study, all of whom took part in in-depth interviews to share their personal experiences and perspectives. Individuals below eighteen (18) years of age and those unable to provide informed consent were excluded to maintain ethical integrity and ensure that all participants could fully understand and voluntarily participate in the research. These criteria helped create a cohesive and contextually relevant participant group, enabling a deeper exploration of the lived experiences of people living with HIV/AIDS in Davao City.

Data Sources

The study's participants were residents of Davao City. They constitute the population of people living with HIV/AIDS. To gather information from the participants, the researchers, with the help of a facilitator, conducted in-depth interviews via self-designed questionnaires that included open-ended questions. These questionnaires underwent validation. Furthermore, to ensure the exclusion of critical details, the researcher obtained an audio recording of the entire interview session. Subsequently, the interview was analyzed and interpreted from the transcription.

Data Collection

The data collection process began after obtaining authorization to conduct research from the Dean of the College of Pharmacy and Chemistry at UIC. The researcher sought permission from the Dean to conduct this research outside the boundaries of the University. The researchers sought ethical approval from the UIC Research Ethics Committee (REC) to comply with established research protocols. To conduct the interview, the researcher personally visited the City Health Office in Davao City and sought permission and assistance from a focal person in the office, who was knowledgeable about the participants' susceptibility.

To identify individuals to be analyzed in the study, snowball sampling was used to gain access to participants through their contacts within the community, specifically the CHO in Davao City. To obtain implied consent from the participants, the researchers secured permits for informed consent forms, and the signed and approved paper was provided by the person in charge at the Reproductive Health and Wellness Center (RHWC) before the actual conduct of the interview. This also allowed the participants sufficient time to review the study before signing the Informed Consent Form (ICF).

The presented research design plan showcased a professional approach to adhering to the ethical principles that are associated with conducting interviews with clients diagnosed with HIV/AIDS. The moderator involved in data collection was a guidance counselor and assisted the researchers during the interview. Furthermore, the plan of engaging the Davao City Health Office and HIV/CARE facilities available within Davao City, including the Reproductive Health Wellness Center, showed a positive attitude towards engaging external sources that can assist in choosing a professional moderator, which further assisted the researcher in choosing the right moderator to facilitate the study. The moderator's emphasis on ethical concerns and patient privacy highlighted a proactive

approach to protecting participants' information and their right to privacy and dignity throughout the research.

Data Analysis

To analyze the data, the researchers employed thematic analysis, a suitable and robust technique for understanding a range of experiences, ideas, or practices within a dataset, as proposed by Braun and Clarke (2006). Descriptive coding, specifically Inductive Thematic Analysis, is the most commonly used analytic method in studies due to its malleability, as it can easily and quickly translate the themes and patterns of the analyzed data.

Additionally, while seeking to extract the relevant details, it was necessary to employ the standard procedure of thematic analysis that includes data familiarization, code production, topic research, theme review, and theme definition, as well as documentation. To accomplish this, the outcomes of this analysis were further constructed in a manner that allowed the logical part of the data to point to the study objectives. Finally, the organized data demonstrated the study's validity and quality.

Role of the Researcher

The primary objective of the researcher was to obtain insight into the firsthand experiences of individuals living with HIV/AIDS. The researcher endeavored to comprehend the cognitive and emotional states of the study participants. It involved asking participants to discuss highly personal matters, such as recent events and past traumatic experiences. Nevertheless, the primary obligation of the researcher during data collection was to safeguard the participants and their confidential data. Before commencing the research, it was essential to clearly describe the mechanisms in place to protect participants and obtain authorization from the relevant research ethics review board.

Ethical Statement

The participation of the participants in this study was voluntary. Before the study, the researchers obtained ethical clearance from the University of the Immaculate Conception Research Ethics Committee (UIC-REC). This study followed the ethical considerations guidelines that adhered to 10 elements, namely, social value; informed consent; vulnerability of research participants; risks, benefits, and safety; privacy and confidentiality of information; justice; transparency; qualifications of the researcher; adequacy of facilities; and community involvement as stipulated in the ICF.

Results

Unveiling the Mystery of People Living with HIV/AIDS in Davao City

During our comprehensive interview, we used probing questions to guide participants, both directly and indirectly, to our main question, resulting in a wide range of responses. Our moderators conducted these one-on-one interviews, which were supplemented by a 15-question, validated questionnaire that included probing questions.

Table 1.
Lived Experiences of People Living with HIV/AIDS

ESSENTIAL THEMES	CORE IDEAS
SOCIAL SUPPORT AND UNDERSTANDING	Knowledge of Family and Friends
	Understanding and Empathy
DISCLOSURE AND WORKPLACE CHALLENGES	Stigma and Discrimination
ACCESS TO HIV CARE TREATMENT	Medication Adherence
	Welcoming Environment of Facilities
	Availability and Procurement

Social Support and Understanding

The ability to rely on understanding and social support is of the utmost significance for individuals living with HIV/AIDS. Along with the much-needed practical help, there is also emotional support. Isolation and anxiety are diminished when patients have a network of supportive peers to whom they can turn for assistance during times of stigma and discrimination.

Knowledge of Family and Friends. The experience of living with HIV/AIDS can present considerable difficulties, and individuals impacted by the virus must have an adequate support system. Family, friends, and personal companions can provide substantial social, practical, and emotional support. Prioritizing understanding over discrimination is a crucial factor in enabling patients to progress in life, as knowledge about a specific disease is essential in such situations.

> **"Sa akoa kay wala ko naka experience kay katong friend nako kay open minded siya..., ang mga friends sab nako na nurse kay nakabalo sab sila, akong family nakabalo sab…"** (Personally, I have not experienced it because my friend is open-minded and understands my situation. Aside from that friend, my friends who are nurses also know, and my family knows…") NAEL0311091989

> "**Actually, saakoa nagchange siya (treatment) pero dili in a bad way, like mas ni okay akong relationship saakong family, kay being healthy ay like kanang mao nana among nahimong bonding ba…** "(Actually, it did change (treatment), but not in a bad way, like my relationship with my family is better because being healthy, like it became our bonding) FEED021111992

Understanding and Empathy. The understanding and empathy of one's close companions are essential tools in the realm of HIV/AIDS management. Suffering from a chronic illness, such as HIV/AIDS, can impose a significant emotional burden.

> **"... like ginatabangan pud ko nila (friends na nurses) na maging cautious, "ayaw lang na ihandle… Dili lang ka diri na set ha kay**

> **naay tb diri so didto lang ka sa isa**...(they help me be cautious, "do not handle that, "do not go to this area because there is TB there," things like that.) CHAL0103061999
>
> **"So, sila jud ang akong foundation…, So ana siya sa akoa na "nak, kumusta naman ka? Kumusta imong health?"** (They are my foundation …, especially my mom. She always asks me about my health, and I reassure her that I am still fighting.) ROED0604062000
>
> **"Actually, they (family) can help me by doing nothing, kana lang…, makakuha na kog support actually sa akong family or friends pag akoa siyang iopen up mismo, murag mulighter gud ang akong feeling, kana lang."** (Actually, they can help me by doing nothing, just that..., I will just tell them…, It is like I can only get support from my family or friends when I open up to them, it feels lighter when I do that, that is it.) FEED021111992

Supportive relationships are essential for those coping with the complexities of HIV/AIDS, as they provide a haven of compassion and understanding that counteract the pervasive emotions of isolation and despair. These connections foster a sense of inclusion and approval, thereby alleviating the social disapproval often associated with the condition. Supportive individuals for HIV patients empower these individuals to confront their diagnosis with resilience and assistance in navigating treatment, overcoming obstacles, and envisioning a future filled with optimism and hope by cultivating an atmosphere of care and support.

Disclosure and Workplace Challenges

Concerns regarding stigma and discrimination complicate the process of determining whether to disclose one's HIV status in a professional setting. A relatively large number of patients struggle with the fear of outcomes and stigma, which can prevent a patient from getting a job or pursuing education. This leads to anxiety in expressing their social status as they act in a bid to avoid the inquiries. Sustaining the demands of running a business and at the same time, HIV medication presents a whole other set of challenges.

Stigma and Discrimination. Stigma and discrimination surrounding HIV disclosure remain significant barriers for individuals living with HIV in the workplace. Fear of prejudice, job loss, and social exclusion often leads to reluctance in disclosing one's HIV status. These individuals have the right to choose whether to disclose their status in the workplace or not; yet, some of them have had to reveal it, as it may also harm them. One participant shared that it eventually came to the point where he needed to disclose his status, as he is also working in the medical field. He can encounter different opportunistic diseases, which may also harm his health. As a precaution, he decided to disclose his status to their head, which led to indirect discrimination. They worry that revealing their status, especially since most of them are professionals, will result in negative consequences, so some of them choose to conceal their status.

> **"...bag o ra nako gi disclose ba kay naka avoid man gud ko muhandle although naka undergo ko ug treatment naga avoid lang mn gud kog mga patients na naay tuberculosis or pneumonia… "** (...just disclosed it because I was avoiding handling, although I was

undergoing treatment, I was just avoiding patients with tuberculosis or pneumonia…) CHAL0103061999

"...naka ingon lang ang akong head nurse na dili ka bagay sa ward kay mag handle kag mga in ana na cases unya bug at ang trabaho… Somehow although dili siya direct na feel nako…, ignan ko na dili ko bagay sa ingon ani ingon ana, somehow murag naa guy gamay na stigma ba na in ana." (...my head nurse just said that I am not suitable for the ward because I handle those cases... Somehow, even if it is not direct, I just feel that…, telling me I am not suitable for this or that, somehow there is a small quantity of stigma like that.) CHAL0103061999

"Actually, the worry is always there…, Actually, I am a teacher by profession, so that if ever na ma disclose man yun it might be used against me. So, yun yung fear ko, so that is why I always keep that info about me." (Actually, the worry is always there…, Actually, I am a teacher by profession, so if ever my status is disclosed, it might be used against me. So, that is my fear, so that is why I always keep that information about me.) ROED0604062000

Nevertheless, despite these challenges, specific individuals attest to the fact that the impact on their business operations was minimal, thereby underscoring the tenacity and flexibility with which HIV-positive individuals manage their health obligations alongside their professional involvements.

"Sa karun, wala man nuon koy na encounter." (Currently, I have not encountered any.) NAEL031109198

Adherence to Medication. Medication adherence is crucial for the successful management of HIV/AIDS. Organizational factors affect ART since they can pose challenges to the implementation of the recommended regimens for persons with HIV/AIDS. Studies show that workplace accommodations substantially enhance compliance with ART.

Challenges that affect self-administration of the medications by the participants include: barriers experienced at the place of work, and HIV status disclosure. Lack of disclosure of HIV positive status in the workplace as a result of discrimination or the possibility of it may hinder the provision of necessary adjustments and assistance at the workplace. Additionally, people experience difficulties in strictly following their dosing schedule with medications because of stress at the workplace, new shifts, and tight timetables.

"Kay naga work man gud ko tapos akong work ba kay 12 hours so shifting pa gyud akong schedule, usahay kay day, usahay kay night, so mao to ba sometimes sobraan ka busy kay sa hospital man gud ko ga work…" (Because I work and my work is 12 hours long, so my schedule shifts, sometimes during the day, sometimes at night, so sometimes I am just too busy because I work in a hospital…) CHAL0103061999

The importance of encouraging friendly organizational climates in which persons do not have to fear losing their jobs or facing other retaliatory measures if they disclose their HIV status. It is crucial to support HIV/AIDS policy and educational campaigns, as well as programs for reducing stigma, and providing reasonable workplace accommodations to eliminate challenges faced in the workplace and ensure medication adherence by the affected population.

Access to HIV Care

The denial of treatment and health care is also a paramount social problem since the likelihood of passing on the disease to other people, mortality, morbidity, and even the costs related to the healthcare system all rise. The HIV epidemic also has had impacts that are felt in most areas of people's lives; nonetheless, barriers to healthcare persist for PLHIV. Moreover, perceived stigma or stigmatization in the future and stereotyping are known to have acted as a hindrance to the utilization of health facilities among the PLHIV. UNAIDS places significant emphasis on the mitigation of stigma and discrimination, which significantly impedes the health-related quality of life for people living with HIV (PLHIV).

Welcoming Environment of Facilities. Ensuring that patients with HIV have adequate access to medication is a critical component of their care and treatment.

> **“Positive siya kay akong tambal is easy to access man siya.“** (It has been mostly positive because my medicine is easy to get.) (NAEL0311091989)
>
> **"...wala man like para saakoa kay accessible jud ang treatment para sa inani."** (...so it is like, it is not like there is no treatment accessible for me.) CHAL0103061999
>
> **“...it's because I know ang mga muhandle saakoa is well trained ug kanang kabalo pud sila na kanang naa ingon ana na balaod.”** (...because I know those handling me are well-trained and knowledgeable about the laws.) FEED021111992
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> **“...ma feel jud nako ang walay ano walay judgment, walay pang down and then grabe pd kaayo sila ka ano oy grabe pd sila ka welcoming…, 5 years, 6 years na ko nag balik-balik diri ha but never pa nako na na feel gyud.”** (...I truly feel no judgment, no negativity, they are incredibly welcoming and kind. I have been coming here for 5 or 6 years, but I have never felt discrimination before.) ROED0604062000
>
> **"They embraced me with two hands."** (They embraced me wholeheartedly.) EFAR0109101985

Availability and Procurement. Other tests, such as viral load monitoring and CD4 count, are crucial in assessing the effectiveness of treatment interventions and the disease's progression. However, the availability of these tests in specific geographic locations might be a challenge due to factors such as infrastructural development and supply chain issues, among others. Institutional barriers to healthcare access can be directly identified through problems with accessibility to specific medical tests, such as CD4 counts, which are crucial

in determining the extent of the disease and treatment regimen, or the costs associated with them.

> **"Karon rako nabal an kuan d i ang CD4 di ay dili di ay siya free. Like sa uban every six months man ata mag CD4 sila."** (Now I've just found out that the CD4 count isn't free. Like others, they do CD4 every six months) CHAL0103061999

The findings indicate that the majority of respondents held a favorable opinion regarding treatment experience and accessibility. One of the key factors cited by the respondents as significantly contributing to satisfaction is the accessibility of medication. In addition, patients attribute their courage and lack of embarrassment in utilizing the services to the expertise of the personnel who are responsible for their case. An individual shares a reassuring instance of their treatment visits, where they felt supported and welcomed, highlighting the morale-boosting effects of consistent assistance.

Patients also bring attention to the matter of procurement and availability of specific services, including CD4 count testing. This highlights the need to raise awareness and potentially advocate for healthcare services that are easily accessible and affordable. In general, the response indicates a combination of contentment regarding the treatment process and an acknowledgment of persistent obstacles and opportunities for enhancement in the realm of HIV care.

Table 2.
Coping Mechanisms of People Living with HIV/AIDS

ESSENTIAL THEMES	CORE IDEAS
EMOTION FOCUSED	Self Distractions
	Positivity
RELATIONSHIPS AND SUPPORT SYSTEMS	Support Groups and Networks
	Family and Friends Support
	Peer Comfort and Understanding
SUPPORTIVE HEALTHCARE SERVICES	Accessibility of Services

Emotion Focused

The social and mental challenges AIDS patients experience require proper management through universal coping mechanisms and self-management skills.

Self Distractions. Some of the active coping styles that are deemed very useful by the HIV patients include watching movies, listening to music, walking with dogs, and diversion. The above means are constructive methods through which HIV patients can enhance their well-being and keep their minds off the illness. One of the critical findings of the study is the search for self-distractions as essential components of HIV management,

since patients can get more mental and emotional stability when they focus on something else that is more positive and interesting.

> **"So other than that naga walk ko kauban akong dog, mo adto sa public places mag ingkod lang and meditate gamay."** (Apart from that, I walk my dog, go to public places, sit down, and meditate a bit.) GEWI0506101995

> **"Naa man pd like mag tan-aw ug movie, maminaw ug music,."** (Yes, like watching movies or listening to music) EFAR0109101985

The dialogue reveals various strategies of emotional regulation in patients and their approaches to coping with hopelessness and pain. The first patient said he could free his mind and wander around, taking his dog for a walk or visiting some public space. The patient also highlighted that these hobbies can significantly help him manage stress, especially when his friends are not around. This highlights the importance of finding comfort in fellowship and physical surroundings as a countermeasure against hopelessness. Additionally, one of the patients mentioned that self-care intervention likely included watching films or listening to music as a way to cope with life's stressors and challenges.

Positivity. According to the Fogarty International Center at NIH, hope can motivate positive behavior in HIV patients, including planning for the future. Maintaining optimism and a positive perspective is an effective coping strategy for those living with HIV/AIDS. Regardless of the obstacles presented by the condition, cultivating optimism, setting goals, celebrating accomplishments, and focusing on the present moment all contribute to resilience, mental well-being, and a sense of purpose and meaning.

> **"Kung magkaproblema man gud ko, ang problem lamg akong problemahon, dili na nako iapil ang akong status. Ing ana tapos positive lang."** (There are struggles and hardships for everyone, whether a person is living with HIV or not; there are always challenges. That is it, stay positive.) FEED021111992

> **"Stay positive lang jud and ampo**." (I just stay positive and pray.") NAEL0311091989

> **"Mao ng positive lang jud akong hunhuna perme sukad sa pag take nakog tambal na naa jud diay tambal ma provide."** (So, I have been thinking positively ever since I started taking the medication, knowing that there is medicine available.) SUMA0204141987

The patients' responses highlight the importance of focusing on solutions rather than the problems themselves. Separating HIV status from other challenges allows patients to create more effective coping strategies. This approach demonstrates a strong sense of control and resilience, valuing what can be managed above what cannot. The patients' stories underscore the importance of maintaining a positive attitude as a crucial component of resilience. Patients who adopt a positive outlook and focus on what can be done in the current moment are more likely to participate in health-promoting actions.

Relationships and Support Systems

Having a supportive system of friends, family, or support groups nearby helps patients with understanding, encouragement, and emotional support. These connections give patients a sense of belonging, lessen their feelings of loneliness, and help them cope with all the challenges of being a person living with HIV.

Support Groups and Networks. HIV programs employ support groups to allow health care personnel to provide information to persons living with HIV.

> **"Ang support group isa gyud to ang naay ah… dako kaayo natabang sa akoa and then hearing a lot of people, so na inspired ko, na motivate ko sa ilaha."** (The support group really helped me a lot, and then hearing many people, they inspired me, and I was motivated by them.) ANVI0711251969

> **"Makita man gud nimo ang support system na mag tinabangay mo. Kana bitawng makita nimo sa imuhang kaugalingon na unsa ka ka willing na aside sa maminaw ka ug unsa pud ang matabang nimo sa iyaha.**" (You can really see the support system you have been looking for. That is how you will see in yourself how willing you are to listen and what you can do to help them.)GEWI0506101995

The outcomes that are contained in the dialogue underscore the importance of support groups and networks to people living with HIV/AIDS. Individual experiences demonstrate that these networks are valuable sources of emotional and practical support during times when close family or friends are unavailable.

Family and Friends Support. In many instances, the added psychological pressure on the families forced them to stay as close as they had ever been, while at the same time providing tremendous support to the PLWHA.

> **"So isa sa nakatabang nako is akong parents and family, sila jud ang naka kuan."** (So, one thing that helped me was my parents and family, they really understood.) NAEL0311091989

> **"Murag ang akoa lang is, makakuha na kog support actually sa akong family or friends pag akoa siyang iopen up mismo, murag mulighter gud ang akong feeling."** (It is like I can only get support from my family or friends when I open up to them; it feels lighter when I do that, that is it.) FEED021111992

> **"Syempre, I was motivated and I have my inspiration, ang mga bata, my family, ang my friends…"** (Of course, I was motivated and I have my inspiration, the children, my family, and my friends…) ANVI0711251969

> **"Sa akoa kay naa koy friends sa church na aware jud sila, and sa ilaha man gud is wala sila nag judge sa akoa, open kaayo ko mag storya sa ilaha about sa akong status kung unsay mga battles nako."** (I have friends in church who are very understanding. They do not judge me, and I can openly talk to them about my struggles.) GEWI0506101995

Families' support clearly had a significant impact on the PLHIV on several levels. Because of family support, PLHIV made substantial choices, which include being tested for HIV, taking medicine regularly, and participating in HIV-training programs. PLHIV regained hope for the future and appreciated their families more. The families of the following patients also provide emotional support to their loved ones.

In essence, those PLHIV/AIDS get great strength from the combined support of their family and community networks. These connections are essential in enabling people to tackle the obstacles of their condition with enthusiasm and drive because they provide an environment of understanding, acceptance, and a sense of belonging.

Peer Comfort and Understanding. Support from peers for those living with HIV has gained importance and is regarded as a means of actively participating in self-management. It plays a vital role in promoting understanding and empathy for those living with HIV/AIDS. Sharing experiences with other PLHIV fosters a special connection and sense of validation.

> **"Kay when it comes to depression man gud and basta connected lang siya sa HIV murag magka sinabot dayun kay pareha man ug situation. Pero sa non-PLHIV ka nag open up lisud siya kay dili pa gani pareha ug situation, wala rajud naga tando lang sila ana."** (Yes, for example, with another PLHIV, even if your stories are different, when it comes to depression or anything related to HIV, it is like you instantly connect because you are in the same situation. However, with non-PLHIV, it is hard for them to understand because they are not in the same situation.) GEWI0506101995

This emphasized an essential feature of peer support and knowledge in the context of living with HIV (PLHIV). The patient notes how connecting with another PLHIV may provide comfort and understanding that non-PLHIV persons may not have, especially when addressing complex problems like depression. In contrast, the patient expresses difficulties opening up to non-PLHIV persons. The patient's statement emphasizes the special connection and shared experiences among people living with HIV/AIDS, which may foster empathy and solidarity that can be absent in relationships with people who do not have comparable experiences.

Supportive Healthcare Services.

Care and support are crucial for the following reasons: they enable prompt access to treatment upon HIV diagnosis; they encourage treatment compliance to achieve viral suppression for HIV-positive individuals, protecting their own health and preventing HIV-related infections in others; they improve the prevention and management of HIV-related infections; and they improve coping with the difficulties of living with HIV (UNAIDS, n.d.-b).

Accessibility of Service. The emphasis on accessibility in HIV testing programs highlights the need to reach out to various populations effectively. Facility-based testing, delivered by competent healthcare experts, not only provides accessibility but also allows for timely medical response.

> **"Naka add to or reduce sa akong ano, wala man murag neutral man siya pero kanang naka add siya in the sense na kanang syempre**

> **accessible ang services… If ever na kung in ana siguro maenjoy pa nako akoang life, murag ing ana."** (They neither added nor reduced anything; it is like they are neutral, but they added in the sense that the services are accessible and courageous… If ever, if that happens, maybe I can still enjoy my life, like that.) FEED021111992
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> **"Dako jud silag tabang kay kung later part nakay kung naa ga tambal na available man gud gina free na nila kung naay reseta from the doctor, ug naay vitamins mo hatag na sila kay mo ask man sila ug kaya nimo."** (They really provided significant help because later on, if there were medications available, they would give them for free with a prescription from the doctor, and if there were vitamins, they would ask if you could afford them.) ANVI0711251969

The patients are reflecting on how accessible services and assistance have affected their lives as HIV/AIDS patients. They express their gratitude for the support offered, noting that, while it did not immediately change their circumstances, it significantly improved their capacity to manage and preserve hope for the future. The patients recognize that the services have improved their circumstances. The patient highlights the advantages of the services' accessibility, saying that it gives their experience an extra dose of bravery and support.

Table 3.

Insights of Participants regarding HIV/AIDS

ESSENTIAL THEMES	CORE IDEAS
IMPORTANCE OF EDUCATION AND AWARENESS	Education Combating Stigma
	Eliminating Misconceptions
EMPOWERMENT	Acceptance and Resilience
STRUCTURAL BARRIERS	Stigma within Healthcare Providers
	Insufficient Government Support

Importance of Education and Awareness

Education Combating Stigma. Education is one of the best HIV-prevention tools. It aims to equip young people with the skills, attitudes, and values necessary to achieve their health, well-being, and dignity, foster healthy relationships, and understand their own rights and those of others. It is essential to fully understand the revolutionary significance of education in HIV prevention. Through the inculcation of values such as respect, inclusion, and acceptance, education can effectively undermine the stigma and discrimination associated with HIV/AIDS.

By educating people, we not only provide them with the means to defend themselves, but we also foster a more empathetic and compassionate community that is committed to fighting HIV/AIDS together. Almost all of the patients shared the same sentiments regarding the importance of education in combating the stigma they still face today; they strongly believe that when people are educated, all misconceptions will fade away. In fact, they are aware of existing advocacies that aim to empower their community and combat the prevalent stigma against PLHIV. However, they stated that it needs to be updated because it is no longer serving its purpose.

> **"... kay kung ma educate man gud sila ang stigma and discrimination ma wala siya kay educated man gud sila with regards to mode of transmission."** (... the stigma and discrimination may lessen because they are educated about the mode of transmission.) ANVI0711251969

> **“ang family sa akoang bata nakothe father, kadtong mga kinamaguwangan na anak niya nagpa HIV test sila together with sila so na educate sila. So pag disclose nako wala ko nag lisod…”** (The family of my child's father, his siblings, they got HIV tested together, so they were educated. So when I disclosed…) ANVI0711251969

> **"Maaong mas nindut na i enhance lang jud ang advocacy karun about sa stigma and discrimination…"** (Enhancing advocacy would be crucial because despite years of advocacy, stigma persists…) GEWI0506101995

These statements emphasize how crucial education is in the fight against HIV/AIDS-related stigma and discrimination. Increasing knowledge and comprehension make it more likely for people to accept and assist those who have been diagnosed with the viral illness. Positive feedback from those who tested positive for HIV indicates that programs like community HIV testing help spread this knowledge. However, stigma persists despite efforts, suggesting that continuous advocacy and education are necessary to dispel misconceptions and promote acceptance.

Education helps people become more empowered to make decisions about their relationships and health by educating them about HIV/AIDS and its transmission mechanisms, prevention approaches, and the value of accepting and supporting those who are infected. Moreover, by debunking misconceptions and fostering compassion and understanding for those who are impacted, education is essential in the fight against HIV-related stigma and discrimination.

Eliminating Misconceptions. Misconceptions can lead to a poor understanding and awareness of a specific subject matter. Eliminating misconceptions helps to provide accurate information, thereby correcting myths and subjective nuances in HIV/AIDS. This signifies correcting wrong information, including the spread of fake news or false information, not just to the youth but to the general population.

> **“Basin ang gina isip didto kay “Ah kani siya naa siyay HIV hugawan siya” “makatakod siya” so mao na ilang mga gina isip ba, unlike if**

knowledgeable na jud kaayo ka..." (Maybe what they think there is, "Oh, he has HIV, he is dirty,"" he is scary," things like that, unlike if you are very knowledgeable…) CHAL0103061999

"Sabi ko might as well iaware sa jud and mga bata kay para pd dili sila mag avoid kay naa mn gud koy madungog na pati sa cr ma takdan na sila…" (...I think there is a need jud to imposed an awareness campaign..." "We might as well raise awareness among the children so they will not avoid it because they might hear about it even in the restroom…" "I think there is a need to impose an awareness campaign...") ROED060406200

"Pwede daghan man like HIV101 sa mga barangay, sa mga schools murag ana. E-implement to nila or ipush to nila ang in-ana para at least mas ma educate kay kung ma educate man gud sila ang stigma and discrimiation ma wala siya..." (There can be many initiatives like HIV101 in barangays, in schools, like that. They should implement or push for that, so at least people can be more educated because if they are educated, the stigma and discrimination may lessen…) ANVI0711251969

"...Unta na sa mga tao na nakabalo na ingun ana dili lang unta basta-basta sa pag trato sa mga tao nga naay sakit na ingun ani (PLHIV) kay matambalan mani, dili man sab basta-basta na matakod..." (... It is different when people think of you like that. Hopefully, those who know better will not treat people with this illness differently because it can be treated, and there is no need to be afraid..) SUMA0204141987

"...pero as long as na katong tao na siguro mag discriminate sa akoa or something na makabalo siya, so tagaan lang nako siyag explanation regarding ana, and depende na lang sa iyaha kung unsaon niya pag accept..." (...but if someone discriminates against me or something like that, I will just explain to them, and it is up to them how they accept it…) NAEL0311091989

These findings highlight the need to refute myths around HIV/AIDS via education and awareness-raising initiatives. As one of the comments pointed out, misconceptions can result in stigma and discrimination, which can have detrimental effects, including social isolation and even suicide. One of the respondents even experienced being mistreated. It was the time when she was working in another country. She shared how she was treated the first time she was diagnosed. She was separated and was put inside a closed room in a building where she was not allowed to go out; she could only open her window if she picked up her food, which resulted in her feeling depressed during that tough time in her life. By this, it is clearly observed that giving people accurate information, especially in underprivileged communities, may help people make educated decisions and lessen the stigma and fear around HIV/AIDS.

Additionally, educating children about the importance of dispelling myths and misconceptions is crucial. Young people can learn the facts about prevention and

transmission by participating in community efforts like HIV101 and school curriculum, which can help to dispel stigma from an early age.

Empowerment

HIV management can be further improved through community support as well as support of their own HIV empowered selves. The present study supports the previous findings that suggest that networking, especially by means of community-based peer support services, is effective in facilitating better health for patients diagnosed with HIV.

With such, it is only possible to reach positive outcomes on combating HIV and the negative impact that it brings to those who are affected, and the protection of high-risk populations if the governments provide sufficient support. This can be achieved through the development of proper statutory and regulatory measures that support the enhancement of appropriate structures for efficient HIV prevention, treatment, and support. This can be realized by enacting appropriate legal frameworks and policies that foster a conducive environment for effective HIV prevention, treatment, and care.

> **"..tag bigay sila ng ano ng 6 thousand kay murag na daut na jud ko ato. 2018 ba yun or 2019 during that course of treatment…"** (...they gave me about 6 thousand because it seemed like I was really in bad shape at that time. Was that 2018 or 2019 during that course of treatment…) ROED060406200
>
> **"...because of the support group, because of the other organizations na naga tabang sa ilaha na mas ma empower sila, mas maka bangon sila, mas gi dawat nila ilahang status with their help and support na wala sila ni give up..."** (...because of the support group, because of the other organizations that help them, they are more empowered, they can rise, they can accept their status with their help and support, and they will not give up...) ANVI0711251969
>
> **"Isa rin siya ang akoang relationship with God, relationship with my family, and my relationship with the support group and other organizations and agencies na naga hata ug help mga PLHIV..."** (It is also my relationship with God, my relationship with my family, and my relationship with the support group and other organizations and agencies that provide help to PLHIVs...) ANVI0711251969
>
> **"Sa akoa kay naa koy friends sa church na aware jud sila, and sa ilaha man gud is wala sila nag judge sa akoa, open kaayo ko mag storya sa ilaha about sa akong status kung unsay mga battles nako..."** (I have friends in church who are very understanding. They do not judge me, and I can openly talk to them about my struggles…) GEWI0506101995

The cost of HIV treatment is significantly offset by the support provided by government agencies such as the Department of Social Welfare and Development (DSWD). Such organizations help PLHIV receive vital healthcare and medicines that would otherwise be difficult to afford, enabling their overall well-being and adherence to

treatment regimens. Furthermore, as the respondents explicitly mentioned, PLHIV may require assistance from other government departments or organizations.

Moreover, the results show that expenses incurred when seeking medical treatment are not a significant concern for PLHIV, as they are provided with some form of financial aid from the government, as well as the DSWD. It is due to a collaborative effort between communities that are living with HIV and ailing organizations that administer and provide resources and support.

Acceptance and Resilience. Stigma is a social phenomenon that underscores one of the key determinants that shapes services, work-linked environments, and PLHIV general self-acceptance – acceptance of one's HIV positive status.

> **"...sa akong workplace gidawat ko nila as one na naay HIV na wala ko naka feel ug discrimination, and I think that is one thing na I have that others do not have, isa ka bagay first is ang acceptance gyud and then slowly move forward…"** (...at my workplace, they accepted me as someone with HIV without feeling discrimination, and I think that is one thing that I have that others do not have, one thing first is acceptance, and then slowly move forward…) ANVI0711251969
>
> **"...gusto nako ipakita sa ilaha na PLHIV ko pero dako ko ug tabang na daghan kog mabuhat and then kanang open akong kamot bisan asa..."** (...I want to show them that I am a PLHIV, but I can still do a lot, and I am open to help in any way….) GEWI0506101995
>
> **"So that time na nag pa test ko, nag positive siya (for HIV) so for me okay lang, gi dawat lang nako siya pero deep inside murag sakit jud siya pero wala nakoy mabuhat…"** (So when I got tested, I tested positive (for HIV), and for me, it was okay, I accepted it, but deep inside, it felt painful, but there was nothing I could do…) NAEL0311091989

The themes of acceptance and resilience among those living with HIV/AIDS are highlighted by these findings. These individuals exhibit remarkable acceptance of their status and the willingness to continue with their lives, despite the initial difficulties and emotional upheaval that accompany a positive diagnosis. As it enables people to accept their diagnosis and embrace their identity as people living with HIV (PLHIV), acceptance is essential to coping with HIV/AIDS.

Structural Barriers

To Stigma with Healthcare providers. Stigma, particularly among healthcare practitioners, complicates the provision of healthcare, thereby adding further obstacles to effective healthcare management. Concerned stakeholders in health care in Nigeria should be the first in fighting such stigma with a view to improving HIV control in the nation. This cross-sectional study looks at revisiting prejudice among healthcare practitioners towards people living with HIV/AIDS (PLWHA) as a barrier to competent care. A survey conducted internationally found that, out of 1,500 respondents, 94% of respondents in Egypt, Denmark, Jordan, and Nigeria regarded HCPs as discriminatory toward clients.

> **"Nurse man tana sila,under man tana sila sa healthcare, pero nganong dili sila kaayo kasabot ani na situation. Nganong naa**

> **gihapoy gamay sa stigma, gamay na discrimination na dapat knowledgeable man sila in the first place…""** (They are nurses, they are in healthcare, but why don't they understand this situation? Why is there still some stigma, some discrimination? They should be knowledgeable about this in the first place.) CHAL0103061999

Unfortunately, there is an evident stigma surrounding this vulnerable population that is ironically from the healthcare providers themself. Although it is not that prevalent, it is still present and is affecting the mentality and perspective of People Living with HIV/AIDS towards themselves and their treatment course. The respondents believed that as healthcare providers, they are expected to be the primary medical support system, which would help them feel more empowered and accepted by the community. However, some of these healthcare providers made them think the opposite.

Insufficient Government Support. Political challenges included low and heterogeneous political commitment to HIV and a conservative legal environment that contributed to a ban on opiate substitution therapy, creating low treatment coverage.

> **"sa mga bukid kay ang lisud sa ilaha is ang pamasahe kay dili man tanan sa bukid dali ra maka kuan…"** (In rural areas, transportation costs can be a barrier…) GEWI0506101995

Discussion

People living with HIV/AIDS (PLHIV) continue to face multifaceted challenges encompassing stigma, discrimination, and psychosocial distress, all of which affect their health, treatment adherence, and overall quality of life. Family empathy and support are indispensable in helping PLHIV cope with emotional isolation (Lin et al., 2012), while disclosure of HIV status—though often hindered by workplace stigma and fear of discrimination—remains necessary in specific contexts, such as for health professionals who require workplace accommodations (Restall et al., 2019). Positive patient experiences with healthcare services have been linked to higher medication adherence and reduced anxiety (Somi et al., 2021). Coping mechanisms, emotional resilience, and strong social support systems, including family and peer networks, play critical roles in mitigating stress and enhancing well-being (Li et al., 2006; Øgård-Repål et al., 2021; Vong & Jailani, 2023). Peer support networks have been shown to reduce stigma and foster self-acceptance among PLHIV (Dunbar et al., 2020; Yang et al., 2023; Pantelic et al., 2023).

Globally, organizations such as UNAIDS and WHO emphasize the importance of accessible HIV testing, education, and stigma-free care in promoting early diagnosis and treatment compliance (UNAIDS, n.d.-b; WHO, 2019). Education remains a powerful tool for prevention and stigma reduction by correcting misconceptions, fostering inclusivity, and empowering communities (UNICEF, 2003; UNESCO, 2022; William, 2021, 2022). Community-based initiatives and empowerment programs have also been effective in improving treatment outcomes and quality of life (Ma et al., 2023; Thompson et al., 2016), supported by enabling laws and institutional policies that address structural inequities (Zakumumpa et al., 2022). However, stigma among healthcare practitioners persists as a serious barrier to competent care, often stemming from misinformation and prejudice (Moseholm et al., 2022; Aziz et al., 2023). Finally, political and governance challenges—such as weak institutional capacity, resource mismanagement, and limited policy

commitment—continue to constrain access to equitable HIV/AIDS services (Khalid et al., 2019), underscoring the need for stronger advocacy, funding, and systemic reform.

Conclusion

In conclusion, this research study aimed to unveil the mystery behind people living with HIV/AIDS in Davao City. In the exploration of the lived experiences, coping mechanisms, and insights of individuals living with HIV/AIDS in Davao City, the study successfully unveiled the mystery behind these vulnerable populations. The results of the study not only illuminated the difficulties and capabilities of this community but also emphasized the importance of comprehensive healthcare, social support, and empowerment in fostering the health and fortitude of those who are living with HIV/AIDS. Through its emphasis on amplifying the perspectives and experiences of participants, this study advocates for a more inclusive and compassionate approach to healthcare and support services for individuals impacted by HIV/AIDS, thereby enhancing our collective comprehension of the condition.

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