The mental health of people living with HIV in the Asia-Pacific: A review

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Background

Mental health and HIV is becoming increasingly recognised as an important issue worldwide. Poorly managed mental health can negatively affect HIV disease progression, adherence to treatment, and also worsen physical symptoms[1,2].

In high-income countries, mental health care has been incorporated into the management of people living with HIV (PLWH) for a number of years. However, in low-income countries (LIC), many patients do not have access to basic mental health services. The Asia-Pacific region has the second-highest prevalence of HIV infection in the world and many of the nations are regarded as low-to-medium income[3]. It is believed that common mental disorders are prevalent in large numbers across the region, with cultural stigmatisation and discrimination contributing to mental health disorders, as well as poverty and poor education. However, due to poor mental health infrastructure, the most vulnerable key populations’ mental health requirements are not being met[1].

Rationale and Methods

Due a paucity of data regarding the prevalence of common mental health disorders across the Asia-Pacific region, this review was designed to study the current literature on the topic.

The review primarily focused on the prevalence of ‘common mental health disorders’, including depressive disorders, anxiety disorders and stress. Where possible, information on ‘factors affecting mental health’ would be collected also. In order to identify papers, both a manual search as well as online databases including MEDLINE and PsychInfo were used.

We were aiming to review studies which had collected quantitative data relating to mental health symptoms or common mental health disorders in HIV positive individuals. This would make it possible to compare the results of studies. We omitted case studies, reviews and letters. Together, these two searches gathered 34 papers in total.

Discussion

The majority of studies reported large numbers of participants affected by common mental health disorders. Despite many of the studies not comparing figures with the general population, previous literature on rates of depression across the Asia-Pacific region showed rates of 1.3-5.5%. These reported rates in the general population are mostly lower than those reported in the studies included in this review. Similarly, anxiety rates in the general population in Asia-Pacific have been shown to be considerably lower than the figures reported for PLWH in this review.

Whilst this review suggests CMD’s are prevalent in large numbers in PLWH, gaps remain between the acknowledgment of psychosocial factors as important to the daily lives of PLWH and the application of adequate resources to provide quality mental health support in LIC. Poverty in these regions likely influences access to services and this influences a person’s ability to adhere to care. The stigma of mental illness and HIV deepen these challenges, along with several other factors. Further research should recognise the urgency to implement an effective strategy to tackle these mental disorders by studying psychosocial interventions best suited to this region.

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References