

Compliance in Niger: a socio-anthropological approach useful for action

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Background

LASDEL (Laboratoire d'études et de recherches sur les dynamiques sociales et le développement - Laboratory of studies and research on social dynamics and development) is a unique experience in constituting a social science laboratory in Africa, with African scholars, and the fruit of the cooperation between various institutions:

- Universities of Niger et Benin
- Ecole des Hautes Etudes en Sciences Sociales (EHESS)
- Institut de Recherche en Développement (IRD)
- Centre National de la Recherche Scientifique (CNRS)
- Institut Universitaire d'Etudes du Développement (IUED), Switzerland
- Association nigérienne pour les études et les recherches sur les dynamiques sociales et le développement (ASDEL)

Context

Compliance is the key factor to the success and durability of antiretroviral therapies, particularly in poor resources settings.

In cooperation with SOLTHIS, LASDEL has carried out qualitative field surveys which enabled to reveal the difficulties and limits in the dialogue between care workers and patients concerning AIDS, in a context marked by many malfunctions in health systems and multi-faceted strategies and practices among people living with AIDS.

Objectives

General objective: A socio-anthropological study on therapeutic compliance of patients with ARV treatments in Niamey.

Specific objectives:

- to better understand the difficulties related to compliance in ARV intake,
- to analyse the representations, logics of action and constraints of people living with AIDS and their families, and of care providers
- to tackle the functioning of health structures, and of HIV projects and NGOs in order to help improving compliance among AIDS patients.

Methods

Duration: 3 years (2005-2008)

5 sites in Niamey : Hôpital national, Hôpital Lamordé, Service de santé des Armées, Centre de traitement ambulatoire, Hôpital régional Poudrière

Number of patients interviewed: 86

Number of health workers interviewed: 45

The first stage of the study focussed on 3 main aspects:

- existing healthcare system,

- situation of AIDS patients,
- specific problems related to compliance.

Second stage: home visits.

Third stage: food aid.

Fourth stage: care providers and Aids.

Results

The following results were observed:

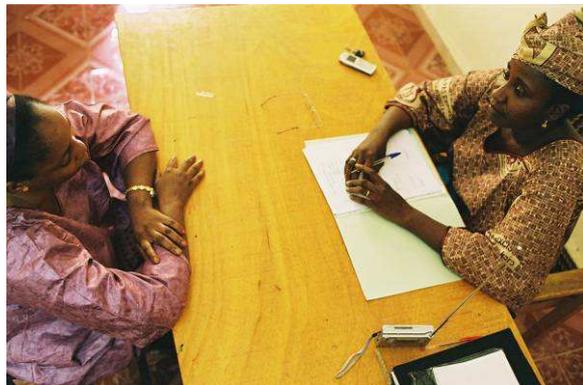
- great difficulty among AIDS patients to evoke their problems concerning compliance with care workers and therapeutic educators;
- pre-eminence of personal and sponsorship relationships over standardized procedures and administrative forms;
- misunderstandings and ambiguous situations surrounding home visits;
- lack of attention to what the patients have to say;
- many avoiding strategies on behalf of the patients;
- unfriendly family contexts generally more inclined to reject people living with AIDS than to help them;
- problems to reach very poor patients;
- unsought for lost-to-follow-up patients;
- professional instability of doctors who have been trained to ARV prescription;
- lack of experience in team-working;
- mistrustful feelings between professional categories and services.

Conclusion

The gap is wide between both parties' intentions or speeches and their effective practices.

Such surveys are intended to help external interveners to avoid, as often as possible, to base their interventions on preconceived schemes or "all-in-one" techniques, as can be proved by the problems encountered in the introduction of therapeutic patient education among ARV prescribing services.

Photos à intégrer entre les textes :



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