

Making Life Better for HIV Patients in Jos South Local Government Through Caring and Provision of Balance Diet: Suggestion for Counselling

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Abstract

This study was conducted to investigate making life better through caring and provision of balance diet for HIV patients in Jos South Local Government of Plateau State Nigeria. Aspect covered among others, include family care and provision of balance diet to HIV patients; adequate love, trust and companionship of one's well-being; and perception of the family on counselling HIV patients and they themselves. A randomized sample of 100 respondents in Jos South Local Government in Plateau State was sampled. To achieve the purpose of this study, three research questions were raised, using simple percentage scores. The research adopted the survey design. Major findings of this study indicated that making life better through care and provision of balance diet to HIV patients performed poorly, negligence of sincere family care and provision of adequate diet. This shows that absolute counselling is urgently needed to both HIV patients and their families. Counsellings Suggestions/Recommendations were made which included that Government should sponsor free adequate balance diet in all government schools. It was concluded that genuine love, trust, interest, direction and purposeful goals are needed by the family members, friends and others through counselling to assist the HIV patients come out of their hidings. It is the opinion of the researchers that immediate family members of HIV patients will rise up to their responsibilities.

Introduction

It is important to note that HIV/AIDS is both a social and health problem and has been identified as a veritable threat to the future of the family of HIV patients in particular and the nation in general.

There is need for family members of such case of the victims with such terminal disease called HIV/AIDS, who are also called special group in the family that require special assistance from their families first and also the world around them.

Commitment in terms of care and provision is the foundation of any strong family. It is the source of energy which families use to maintain their integrity, which set them apart from any other human group; and if members of the family know what is expected of them, it is likely they will perform it well. Minett (2000) on the feelings of commitment in terms of care and provisions summarized below as symptoms of psychological effect of members of the family (including HIV patients in the family). Listed among others are:

- (i) Love and companionship
- (ii) Protection and support
- (iii) Care, praying and training
- (iv) Provision of food (delegated to parents).
- (v) Shelter, promotes security

This implies, strong caring family members feel a sense of obligation to help each individual reach his or her potential within the context of the family. Croucher (1995) stated that family commitment is a dynamic skill. It actively involves family members in promoting each other's well-being no matter the challenges they go through. With this care and love, there is a focus on the positive qualities of individuals and how these can be used to strengthen family relationships. Croucher, further added that such commitment also allows for understanding and tolerance of others' shortcomings. This means that genuine acceptance of another member's faults and mistakes are a powerfully binding force in strong families.

No wonder, Morris Conkey and Kern (2003) emphasized that caring and love is a committed relationship that is characterized by daily investment of time and energy in family activities. It involves the development of a lifestyle which is built around all the things a family has to do. This may include setting priorities and may mean sacrificing some worthy cause in order to consider the best interests of the family first, especially HIV/AIDS patients.

AIDS which is the acronym that stands for Acquire Immune Deficiency Syndrome; is caused by Human Immune Virus popularly known by everyone, old and young alike as HIV. This terminal disease stay in the body of the victim of the AIDS patients for likely more than decades before the symptom is seen. AIDS refers only to the last fatal stage of the HIV infection. Garland (2003) and WHO (1990) remarked that almost all countries of the world have witnessed the terminal disease. HIV/AIDS has remained a devastating health problem and the much that been done is to search for strategies that could help the victim of this deadly disease live through their new conditions with minimal anxiety while waiting for their ultimate end.

Indeed, the importance of adequate balance diet in man's strength of combat against disease, has for instance been recognized even by the creek and Roman physicians over more than 2500 years ago, although, of course it is only that a full understanding about the actual connection between good nutrition and good health and prevention against disease came to be achieved Uguru (2008), Nwoye (1994) concurred that of course, it is obvious that one cannot understand how balance diet is related to good health until one has become sufficiently aware of the power of life contained in food and the fundamental truth that a typical human being is composed of many materials which are themselves a product of a wide variety of foods we eat. Uguru (2008) remarked that the food we eat is vital to human survival since it performs when adequately supplied the following three major functions within the body:

- (a) Provision of heat and energy;
- (b) Provision of necessary nutrients required to build and repair the tissues of the body; and
- (c) Supply of the nutrients required by the body to regulate its various chemical processes. Which is at times been referred to as the "seven wonders of the world" but in specific terms they include: Carbohydrate, Fat, and Proteins, Minerals, Water, Vitamins and Cellulose. (Uguru, 2008)

The Problem

Those who are diagnosed as HIV/AIDS patients find themselves in a new self, in a body with seemingly new limitations where life value have change and become meaningless to them.

They also find themselves powerless over their new circumstances. Diagnosis of AIDS brings with it the fear of death and physical harm (Nwoye, 1994)

They are psychologically devastated as they are diagnosed HIV positive, they begin to suffer loneliness as their families and friends are aware of their new status. They indeed, begin to carry the spirit of guilt and such victims of HIV/AIDS also become physically and socially imbalance. They experience automatic pain in every part of their bodies. With the type of panic they find themselves in, they suddenly feel like going from friends and their nuclear family not to talk about the molestation rained on them by extended family members give the impression that they are seen as being promiscuous which implies they are the main cause of their misfortune. In fact, the world around them do not remember' that the means of transmission of HIV / AIDS is not only through sexual transmission that causes AIDS.

Research Questions

1. What are the perception of HIV patients and family members on caring and provision of balance diet to those living with HIV in the same house with them?
2. What aspects of care are needed by HIV patients in Jos South LGA of Plateau State?
3. What are the perceptions of the family on whether or not their HIV patients need Counselling?

Design: The study was a descriptive research that surveyed making life better for HIV patients in Jos South Local Government Nigeria through caring and provision of balance diet.

The target population of this study consisted of all the 140 HIV/AIDS participants and their families who attended the retreat organized for them in Jos South LGA of Plateau State, Nigeria.

The sample population of 100 was randomly selected from the 140 HIV/AIDS participants who attended the retreat organized for the families in Jos South Local Government Area of Plateau state, Nigeria. The subject of this study was 100 families. (Both 50 HIV female patients and male HIV male patients and their families).

The instrument used for this study was a 10 item questionnaire titled Making Life Better for HIV patients, in Jos South Local Government Area of Plateau state through caring and provision of Balance Diet: Suggestion for Counselling. (MLBHPJSGPSCPBD).

The questionnaire was made up of items on making life better for HIV patients through caring and provision of balance diet; and was divided into two sections. Part "A" solicited data on personal information such as name of respondent, sex, status, job description, religion, parent, child, age range and part "B" comprised of 10 items based on care and provision of balance diet. Respondents were instructed to tick responses that are in agreement with their views.

The draft questionnaire was first ratified by two counselors before subjected to scrutiny by two experts in test and measurement unit of the Department of Arts and Social Science Education of the University of Jos. Due to their independent judgments, valuable criticisms and suggestions with the necessary corrections from the researchers, the instruments were administered to the HIV patients and their families who participated in the retreat organized for families in Jos South Local Government Area of Plateau State, Nigeria with the help of two research assistants. Also, the face to face direct delivery method was used and completed questionnaires were retrieved at the spot.

The instrument was objectively scored using the following scoring procedure: Strongly agree (4 points): Agree (3 points) Disagree (2 points); Strongly Disagree (1 point) for positive statement; and for negative sentences, the reverse was the situation, this implies, Strongly

Agree (1 point); Agree (2 points); Disagree (3 points and Strongly Disagree (4 points). In presenting findings relevant to these areas of focus, table of figures of result drawn are around each of the items explored in the study. Since the instrument, sought for factual information, the stability of opinion was sought using test – retest to determine the consistency of the instrument after an interval of two weeks. Pearson Product Moment Correlation Co-efficient Formula was used in computing the correlation coefficient of the instrument which has the reliability co-efficient of 0.82.

The data analysis were based on the three research questions using simple percentages.

Result and Discussion

The summary of the findings from the data analysis of this study as related to the research questions are presented in Tables 1, 2 and 3.

Research Question 1: What are the perception of HIV patients and family members on caring and provision of balance diet to those living with HIV in the same house with them?

Table I: Frequency of respondents.

Subjects	Number	Percentage
HIV Patients	40	40
Family members	60	60
Total	100	100

The above assertion coupled with observations and happenings in families corroborate this finding. Lack of care and provision of balance diet among family members lead to decreased involvement with their families which may not nurture a feeling of belongingness among the family members. The table also does not give a picture of genuine interest in what others are doing. This genuine interest which lead to caring, provision of balance diet, love and companionship, sharing of ideas and feelings of empathy, the sharing that form the basis for a set of common goals between Caring family members, serve to give the family direction and purpose are not really existing. This is contrary to Kanu (1999) opinion that sees the family as an important agency for providing the affection that helps to ensure the emotional stability which people need to live and make progress in their own society

Research Question 2: What aspects of care are needed by HIV patients in Jos South Local Government Area of Plateau State, Nigeria?

Table 2: Aspects of Care that are needed by HIV patients

S/N	STATEMENT	SA	A	D	SD
1	I drink enough water frequently everyday.	50	45	50	
2	I am being fed, cleaned and dressed up by my family daily.	80	10	46	
3	My family member(s) administer my drugs to me every day in love.	25	20	50	5
4	My family relate intimately with me through encouragement and praying regularly.	9	20	00	
5	My diet include beans (Protein) and I eat cooked food that has fats which contain vitamins A, D, E and KThe food I eat has carbohydrates and certain mineral such as iron, iodine, potassium and calcium and drink vitamins in my diet daily.	95	5	0	0
6		15	5	50	30

The table generally pictures HIV patients' responses on care and provisions of balance diet they needed. Statement one indicates the respondents responses on average effort of HIV patients' family members on drinking water frequently on a daily basis. This suggests the immediate and urgent need of counselling among the family members and the HIV patients themselves, for water itself is healing and life. This is in line with Oyedeji (2006) declaration, that water is the best medication in the world and all ailments are caused by chronic dehydration (poor water drinking habit).

Statement 2 pointed 90% effort on their feeding, cleaning and dressing up they received from the family members. 10% of these HIV patients' families dislike feeding, cleaning and dressing up their HIV patients which can even be done, through encouragement if they don't want their ultimate end very fast.

Statement 3 features the low percentage of drug administration with 25% strongly Agree, 20% agree while the rest 55% do not see the need to administer drugs at all. This is very sad knowing fully well that the drugs the HIV patients take with balance diet will help to build, repair or maintain the tissues of their bodies before the final state of death.

Statement 4 indicates here close intimacy of family members, that is highly commendable, this will surely promote warmth, confidentiality and trust in the HIV patient.

Statement 5 shows that the HIV patients' protein and vitamins being inclusive in their diet by 99%. This is a plus and is very encouraging that both the HIV patients and their family members are cooperating at this stage to achieve a common goal of good expectation of prolonged healthy life.

Finally, statement 6 gives a red signal of only 20% agreed to eat carbohydrates and certain minerals such as iron, iodine; potassium, and calcium and also drink vitamins. It is rather unfortunate that most of them do not know that carbohydrates is even least expensive source of energy, vitamins give the body good health and proper nourishment. This is seriously an indication of the need for counseling HIV patients and their family members who are basically the respondents of this research.

Research Question 3: What are the perceptions of the family on whether or not their HIV patients need counseling?

Table 3: Perceptions of the family on whether or not their HIV patients need counselling

S/N	STATEMENT	SA	A	D	SD
1	Counselling suggestions on making life better through caring and provision of balance diet for HIV patients is the best.	48	14	2	0
2	Suggestions for Counselling on making life better through Caring and provision of balance diet of HIV patients will enhance the effective functioning of the HIV patients.	94	4	1	1
3	Suggestions for Counselling on making life better through Caring and provision of balance diet of HIV patients would make family members sensitive to their HIV patient's need.	94	6	0	0
4	Counselling suggestions on making life better through caring and provision of balance diet for HIV patients will enable the HIV patients trust and have confidence in the family members.	97	3	0	0

Table 3 indicated perception of family on counselling of their HIV patients and the family members themselves.

Statement 1, with 98% of the respondents are with the opinion that counselling assistance on making life better through care and provision of balance diet would make HIV patients look better while 2% disagreed on the same issue.

On Statement 2, 94% strongly agreed 4% agree while 2% disagreed that counselling assistance on making life better through care and provision of balance diet will enhance the effective functioning of the HIV patients.

Statement 3 shows that the respondents totally agreement 94%, strong agree, 6 % agree) that counselling assistance on making life better through care and provision of balance diet would make family members sensitive to their HIV patients needs.

Finally, Statement 4 indicates that counselling will enable the HIV patients trust and have confidence in the family members with 97% strongly agreed and 3% agreed.

Discussion

The aim of this research was to investigate making life better through care and provision of balance diet for HIV patients in Jos South Local Government of Plateau State, Nigeria. These aspects are assess on family care and provision to their HIV patients, adequate balance diet or good feeding of HIV patients and counselling need for both HIV patients and their families.

The findings obtained from this study revealed that making life better through care and provision of balance diet to their HIV patients are poorly demonstrated as indicated in table 2, numbers 1,3 and 6 above. The findings of this research also fully agree that HIV patients should avail themselves properly to adequate provision of balance diet and good feeding. It also exposes the negligence of sincere family care and provision of balance diet.

The study further observed that absolute support of counselling is highly appreciated both by the HIV patients and their family members.

It is the opinion of the researchers that counselling is much more vital to reduce, if not eradicate the pain involved in the socially, physiologically and psychological trauma the HIV patients face. This goes to support the need for counselling also by their family members and all other associates of the HIV patients. Since everyone needs counselling whether young or old.

Counselling Suggestions/Recommendations

In view of what has been discussed in this paper, the researchers suggest that the under-listed recommendations should be followed and implemented. As Nigeria moves with effort to fight the scourge of HIV/AIDS and people living with HIV are expected to live a better life through caring and provision of balance diet. It has to be with the full cooperation of their family members. Thus, counselling can assist to eliminate the emotional, physiological and psychological trauma the HIV patients encounter. This will go a long way to improve their low self-esteem.

To a large extent an improvement through counselling can caution the unfriendly and irrational behaviour of their family members too.

Since each of the nutrient facts examined in this study show that human being are essentially sustained in health by what they eat, HIV patients should begin to eat adequate balance diet.

Government should sponsor free adequate balance diet in our government schools. Proper emphasized of adequate balance diet should come up frequently on the school time-table. The Ministry of Education should sponsor public lectures, workshops for teachers and guidance counselor to the public especially families, parents and HIV patients alike, on care and adequate balance diet.

Conclusion

This study investigated making life better through care and provision of balance diet for HIV patients in Jos South Local Government in Plateau state, Nigeria: suggestion for counselling. Theoretical insights show that making life better and provision of balance diet to HIV patients have so far performed poorly. Included in this findings, is sure evidence that careful care and provision of balance diet to growth and positive change which lead to genuine love, trust, interest, direction and purpose are needed by the family members friends and others through counseling to assist the HIV patients come out of their hiding place.

In view of the challenges above, this emphasizes on the counsellors' important interceptive roles and the Federal Government prompts and constant aid, it is the opinion of the researchers that the immediate family members will rise up to their responsibilities to the people living with HIV in their family.

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