

PREVALENCE OF DEPRESSION AND ANXIETY AMONG HUMAN
IMMUNODEFICIENCY VIRUS PATIENTS ATTENDING BAR HOSTESS
EMPOWERMENT & SUPPORT PROGRAMME CENTRE IN NAIROBI

By

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A Thesis Presented to the School of Applied Human Science

Of

Daystar University

Nairobi, Kenya

In Partial fulfilment of the requirements for the degree of

Master of Arts

In Counselling Psychology

DAYSTAR UNIVERSITY

September 2022

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In accordance with Daystar University policies, this thesis is presented in partial fulfilment of requirements for the School of Human and Social Sciences.

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DECLARATION

I declare that this thesis is my original work and has not been submitted to any other college or university for academic credit.

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ACKNOWLEDGEMENTS

My greatest gratitude goes to God almighty for giving me the strength, knowledge and above all good health for the duration of my programme. I also wish to express my heartfelt appreciation to my Supervisors Dr Stella Nyagwencha and Dr Winnie Waiyaki for their assistance, direction and helpful criticisms throughout the research process. I also wish to thank my lovely friends and colleagues for their support their, understanding, encouragement and prayers during the entire period of my study. I also wish to thank my ever-dedicated colleagues, for their criticism and support throughout the research process.

God bless you all!

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LIST OF ABBREVIATIONS AND ACRONYMS

AIDS	Acquired Immunodeficiency Syndrome
ART	Antiretroviral Treatment
CHASE	Coping with HIV/AIDS in the Southeast
CMV	Cytomegalovirus
DNA	Deoxyribonucleic Acid
HAART	Highly Active Antiretroviral Therapy
HCSUS	HIV Costs and Services Utilization Study
HIV	Human Immunodeficiency Virus
HTLV-III	Human T-Cell Lymphotropic Virus 3
LAV	lymphadenopathy-associated virus
NACA	National AIDS Control Agency
NACOSTI	National Commission for Science, Technology and Innovation
PCP	Pneumocystis Carinal Pneumonia
QOL	Quality of Life
RNA	Ribonucleic Acid
SPSS	A Software Package for Social Statistics
UNAIDS	United Nations Programme on HIV/AIDS
WHO	World Health Organization

ABSTRACT

Depression and anxiety episodes among HIV-positive patients have been linked to the fast progression of HIV to AIDS. The purpose of the study was to determine the prevalence of depression and anxiety among HIV-positive patients under the Bar Hostess Empowerment and Support Programme along Juja road Centre in Nairobi, Kenya. Other objectives include; establishing the prevalence of depression and anxiety among HIV-positive patients under the Bar Hostess Empowerment and Support Programme Centre in Juja road Centre in Nairobi County; to investigate risk factors that contribute to depression and anxiety among HIV-positive patients and to establish the coping mechanisms used among HIV positive patients. The study was guided by Aaron Beck's Cognitive Behavioural Theory and anxiety disorder theory. The study used a cross-

sectional research design. The study adopted a systematic sampling technique. A sample size of 80 participants was selected to take part in this study. The research instruments to be adopted were the Beck Anxiety Inventory (BAI) and the Beck Depression Inventory (BDI)-II as tools to measure the prevalence of depression and anxiety. Data were analysed using SPSS version 28 and the findings were presented in charts and tables. The study found the prevalence of anxiety was 34.2% while that of depression was 36.1%. The study found that 40% of patients attending the BHESP Centre in Juja road Centre in Nairobi County suffered from severe anxiety levels-27.5% experienced moderate anxiety, 18.8% mild anxiety and only 13.8% experienced minimal anxiety levels. The study found that 36.3% experienced moderate depression 25.0% experienced clinical depression, 23.8% experienced mild depression and only 15.0% did not experience depression. This implies that there is a need for the provision of services for managing depression and anxiety among individuals living with HIV in Nairobi County.

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