THE SOCIO-ECONOMIC IMPACT OF HIV/AIDS ON HOUSEHOLDS IN BUSHENYI DISTRICT, UGANDA

 \mathbf{BY}

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ABSTRACT

This study examines the threat of Human Immune-deficiency Virus/Acquired Immune-Deficiency Syndrome (HIV/AIDS) illnesses /deaths on the socio-economic wellbeing of households in Bushenyi district, Uganda. Uganda was one of the first countries to identify the HIV/AIDS illness in 1982 along the shores of Lake Victoria and one of the most affected countries. It is also a country that has managed to control the prevalence rates from between 20-30% (1986-1993), especially in urban areas, to the current 6-7% in most parts of the country. The broad objective of the study was to investigate the extent of the socio-economic impact of the HIV/AIDS epidemic on households in Bushenyi district in the context of their demographic and economic backgrounds.

The study used a multi-stage cluster sampling to cover eight villages from the three counties of Igara, Sheema and Bunyaruguru. The sampling process involved the three counties, the sub-counties, the parishes and the villages (LC1 level). Ninety eight households were included in the research with coverage of 613 respondents. The process of data collection was conducted through personal interviews using structured questionnaires. The household heads were the major respondents. They answered on behalf of all household members that had been in the households in the previous five years. Some key informant interviews were also conducted.

HIV/AIDS was most common in the middle age bracket. This is the age bracket which is most reproductive and productive. These illnesses/deaths, therefore, affect production and leave behind many orphans, who are most affected by the epidemic. The findings also show that the households with HIV/AIDS illnesses/deaths had higher costs of managing the illness

compared to other long illnesses. Most of those households that met high costs had sold part of the household property to manage the illness. Those who had household members with HIV/AIDS were more likely to experience the highest level of deprivation compared to those with members who had other illnesses. This was because of the high costs met by the households and the strategic positions the sick/dead occupied in those households.

It was established that the demographic and socio-economic backgrounds of the population, had a great influence on the impact of HIV/AIDS on the households. These socio-economic backgrounds determined not only the prevalence and infection rates, but also the ability to manage the illnesses and the impact on the households.

Those that had HIV/AIDS were 16% of the total sample and most of the deceased and currently ill (77.6%) were in the most productive age group. Households with AIDS cases were more likely to lack the mentioned basic needs compared to other households. This was because of reduced production capacity and the households' expenditures on AIDS related illnesses which were significantly higher than those of other illnesses. This dragged the households into deeper levels of deprivation. It is; therefore, right to conclude that HIV/AIDS has directly or indirectly affected the households' welfare and the development of Bushenyi district.

Specific and directed policies to assist the young orphans and the poor affected households should be spearheaded by government. These policies should be guided by the socio-economic backgrounds of the households in order to uplift their standards of living.