

**Antiretroviral therapy among high-risk women in Burkina Faso: adherence issues and parallel therapeutic resources**

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**Background:** Recent initiatives have facilitated the access to antiretroviral treatments (ART) in Africa. Such long-term therapy may turn difficult to implement in hard-to-reach and marginalized populations who are only used to short-term treatments prescribed for acute infections. Parallel therapeutic resources (traditional medicine, therapeutic prayer, etc...) can complicate the relationships with modern medicine. The aim of this work is to understand the effect of psychological and cultural determinants on parallel resources behaviours, and to study its relationship with ART therapy.

**Methods:** This qualitative study enrolled HIV-infected women, treated or not with ART, from a cohort of high-risk women in Bobo-Dioulasso, Burkina Faso. A face-to-face questionnaire was administered about their perception of HIV disease, the psychological problems they meet, the type of parallel therapeutic resources they used and their level of ART adherence for the ones.

**Results:** A total of 44 women were enrolled, including 17 taking ART. Overall, 30 reported 39 parallel resources. The use of parallel therapeutic resources was determined by HIV disease perception. Among women taking ART, adherence seemed altered by parallel therapies (4/7 women with low adherence used parallel therapeutic resources, and 5/7 women with low adherence were from people living with HIV associations).

**Conclusions:** Decision of use parallel therapeutic resources is mainly influenced by the way women perceive their HIV disease. This therapeutics has negative effects on adherence to ART and women from people living with HIV associations have ART adherence difficulties, stressing the need of psychological support to HIV-infected individuals in Africa. It may help them modulate their disease perception and thereby their adherence to ART.

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