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THE PSYCHOSOCIAL CIRCUMSTANCES OF COMMUNITY CAREGIVERS: A CASE OF TSHWANE REGION

ABSTRACT

Globally, the HIV/AIDS epidemic is number six in the top ten disease burdens. This epidemic was viewed as an obstacle to the achievement of Millennium Development Goal (MDG) Number 1 which deals with poverty eradication. The HIV/AIDS epidemic undermines economic development and exacerbates poverty (World Health Organisation [WHO], 2012). The Republic of South Africa has adopted the implementation of the Home and Community Based Care (HCBC) and Support Programme, as a strategy to address this epidemic.

This qualitative research study sought to explore the psychosocial circumstances of community caregivers working in Tshwane Region. Individual interviews were conducted with 14 community care workers using a semi-structured interview schedule. The participants were sampled by using purposive sampling and they represented three different communities, namely urban, rural and from informal settlements.

Thematic content analysis was used to analyse data collected. Six themes summarised the findings of the research. Both negative and positive effects of the psychosocial circumstances that affect work performance, home and personal lives of community caregivers working in Tshwane Region were discovered through the research. For most caregivers the circumstances are so dire that they have compromised their marriages, family relationships as well as their health conditions.

However, a few caregivers are benefiting much better from the services. These are those that were trained and accredited as Child and Youth Care Workers. They earn a living wage and have learned better skills to deal with work situations. However, poor communication and withholding information from staff have led to other caregivers being disillusioned and jealous of those that have progressed, as they feel unfairly treated and discriminated against either due to their age or level of education.

Low stipends contribute to more dissatisfaction, as the caregivers cannot afford their living expenses while they are also vulnerable to the same conditions as their beneficiaries. This goes

together with lack of support and supervision and being left to fend for themselves in service rendering and acquiring resources. The available care for the carer's programme seems ineffective and least appreciated.

It is hoped that this study will contribute to the knowledge base on the psychosocial circumstances of community caregivers in Tshwane and provide useful information to influence and improve the existing Framework for Home and Community Based Care and Support Programmes in Tshwane.