

Letter to the Editor: Supporting the Sick and the Vulnerable

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Dear Editor,

In a recent article by Camellia et al. [1], the authors pointed out that there is a need for a structured and integrated model of peer support in the public health sector's treatment of pregnant women with human immunodeficiency virus (HIV). Their study addressed psychosocial barriers as part of an integrated approach to support care and treatment adherence among HIV-positive pregnant women.

The United Nations International Children's Emergency Fund reported that around 110 000 children and adolescents died from HIV-related causes in 2021. Another 310 000 individuals were newly infected, resulting in a total of 2.7 million young people living with HIV [2]. Thousands of pregnant women with HIV give birth, resulting in perinatal HIV exposure to their children. However, it has been reported that progress in HIV prevention and treatment for children has nearly flatlined in recent years. The World Health Organization estimated that 53% of pregnant women living with HIV in the South-East Asia region had received antiretrovirals to prevent mother-to-child transmission of HIV [3]. Although there have been achievements, the treatment gap between children and adults is still a major public health problem among HIV-positive pregnant women. HIV-positive individuals can be viewed as vulnerable people who need understanding and care from the communi-

ty. Hence, support and guidance are needed to assist them.

To further support HIV-positive individuals, understanding the concept of illness and health is key for developing a plausible policy and campaign to address this public health concern. In some cultures, HIV stigma is strongly present, and the negative attitude toward those with HIV affects those individuals. Thus, inculcating the value of *pakikipagkapwa* (fellowship) is essential to build and sustain healthy relationships amidst public health concerns [4]. Sick and vulnerable people feel supported and loved when they receive assurance, understanding, acceptance, and care. Studies have shown that public health and religious care are needed by individuals experiencing adversities in life, including HIV-positive pregnant women. Local government, faith-based organizations, and other private institutions can be instrumental in providing recovery and services to the sick and the needy [5]. Hence, collaboration among stakeholders is needed to support the well-being of the vulnerable. In addition, supportive care should be provided to the families of HIV-positive individuals. Information dissemination and counseling should also be extended to them. This will improve coping and guidance among sick people and their family members.

CONFLICT OF INTEREST

The author has no conflicts of interest associated with the material presented in this paper.

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