

This thesis was aimed at probing economic, social and psychological impact upon families and the community by the presence in the community of people living with HIV/AIDS. Moreover, it sought to identify community and familial attitudes toward those people. Data collection relied on interviews, focus group discussions and observations of various community activities related to such people. Collected data were cross-checked, classified and categorized according to set objectives. The analysis was guided by predetermined conceptual/theoretical frameworks. Analyzed results were then analytically and descriptively presented.

Findings were as follows :

1. Social, economic and psychological impact experienced by families and the community.
 - Economically speaking, people living with HIV/AIDS were deprived of income to care for themselves and families. Some had to quit their jobs. Or even when they still held on to their jobs, their income was too meager to meet normal living and medical expenses.
 - Socially, the number of orphans increased due to the death of either fathers or mothers caused by HIV/AIDS.

- Psychologically, when they learned they had been infected with HIV/AIDS, they initially felt very upset and aggressive. However, as time went by, they slowly began to face reality and were able to adjust their thoughts and feelings back to normal. Certainly, the adjustment process was time-consuming. And if infected people were accorded the sympathy and understanding care by their families and recognition from the community, such a process was considerably sped up. As regards the parents of the infected not only did they feel very tormented having had to lose their offspring before due times, they had to painstakingly attend upon their chronically ill offspring and care for the orphaned grandchildren as well.

2. Community and familial attitudes toward people living with HIV/AIDS.

Community members accepted them, visited them, talked with them and even encouraged them to participate in community affairs and activities. They also expected their relatives not to abandon but care for them. Their major advice for those relatives was the they specifically pay attention to the issue of cleanness. As for family members caring for the infected ones, they were expected to have more and better knowledge about HIV/AIDS and treat them properly.