

# ABSTRACT

Background: HIV continues to have a major impact on morbidity and mortality in Zimbabwe. Religion/Spirituality (R/S) including traditional beliefs and practices (TP) play an important role for most people living with HIV (PLWHIV) in Zimbabwe. PLWHIV conceive and practice healing holistically, embracing not only the physical conditions, but also the spiritual, psycho-emotional, social, and ecological dimensions. Objective: This scoping review aims to systematically map the research done around R/S and TP and HIV in Zimbabwe. It intends to describe what is known about the role and influence of R/S on the experience of living with HIV in Zimbabwe in general and especially, to illustrate the influence of R/S and TP on the physical and psychological wellbeing of PLWHIV, and the access to HIV care. Design: This scoping review followed the Joanna Briggs Institute's guidelines. The online databases Medline & ATLA were used to identify articles published between 2010–2021 about R/S and TP and HIV in Zimbabwe. The review includes textual papers, qualitative, quantitative, and mixed studies. Results: 638 records were found and screened for inclusion. 46 records were considered relevant for the qualitative and quantitative synthesis. Most articles (27) addressed the influence of traditional beliefs and practices on health and HIV and 16 records examined the influence of religious beliefs and religious groups' attitude on HIV. The qualitative synthesis illustrates the influence of R/S and TP on physical and psychological wellbeing and on access to HIV care of PLWHIV in Zimbabwe, thus portraying the medical relevance of R/S issues and TP. Further synthesis identified three areas of conflict with biomedical practice: The bio-psycho-socio-spiritual understanding of health and illness, the notion of patriarchy, and the perception of sexuality and procreation. Here religious/spiritual ontologies may lead to compromised biomedical therapy outcomes. Conclusion: This scoping review includes papers of authors from different backgrounds (theology, medicine, sociology). The synthesis of the content of the records revealed a coherent picture of themes addressed and problems identified. Thus, this review is a fair description of the experience of living with HIV in Zimbabwe and the medical relevance of R/S and TP. The findings show that religious/spiritual ontologies need to be considered and integrated into the design of new health programs. It must be the aim to avoid compromised therapy outcome and to further a holistic support of PLWHIV. This is only possible in collaboration with religious stakeholders and traditional practitioners.