

4-15-2014

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Recommended Citation

Alaka, Mariam, "Knowledge, Attitudes, and Beliefs towards HIV/AIDS among orphans in Lagos, Nigeria" (2014). *Collection of Engaged Learning*. 94.

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Engaged Learning Final Report
April 2014

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Background:

Nigeria has the second largest number of people living with Human Immunodeficiency Virus (HIV) in the world, right after South Africa. There is an estimated 3 million out of 162 million inhabitants living with HIV in Nigeria. While there has been a steady decrease in the number of new infections from 2008 to 2010 in adults, there was an increase among children. HIV/AIDS is a leading cause of children becoming orphans with about 2.2 million children losing one or both parents, according to Federal Republic of Nigeria Country Progress Report [1]. There are about 7.3 million orphans in Nigeria. Orphans are usually more vulnerable to health risks, are usually poorly educated, have more negative life experience, and are more like to engage in sexual intercourse [6, 7].

HIV/AIDS epidemic in Nigeria is more than a medical problem; it is also a social, economic, and development issue. For example, people living in poverty are more likely to have more sexual encounters to help deal with their economic situation, thereby having a higher chance of getting infected by HIV [9]. Nigeria's government has enacted many policies and developed many programs to combat the HIV/AIDS [1]. In 2007, the government created the National HIV/AIDS Prevention Plan which educates the public by mass media, community mobilization, and resource mobilization that focuses on condom usage, injection safety, and etc. [3]. Previous studies in other African countries, such as

Uganda and Senegal, have shown that government policies have played a major role in promoting preventative health behavior and controlling the HIV/AIDS situation [2].

In Nigeria, there are only about 24% of people who can correctly identify ways of preventing the sexual transmission of HIV and who reject major misconceptions about HIV transmission [1]. Since this is a pressing issue for Nigeria, more research is needed. There has been research on the orphans' caregivers' knowledge of HIV/AIDS [5], however there is not any research on orphans' knowledge of HIV/AIDS. While caregivers may know information about HIV/AIDS, how are researchers sure that the information is being correctly relayed to the orphans. In this proposed study, the researchers will focus on the orphans' knowledge and awareness of what HIV/AIDS is, the different way of transmission, and if it's treatable.

Methods:

Settings

Lagos is an urban city located in the southwestern part of Nigeria. Even though it is physically the smallest state in Nigeria, it has a population estimated to be about 10.2 million people with half of them being under age 18. Many children live in slums or forced out to the street due to abuse and poverty. Around the city, there are many children begging and hawking in the street to sell things in order to make money. [12] The participants in this study were orphans whose

needs for food, housing and education was supplied by an orphanage.

The questionnaire

The questionnaire used in the study was based on the standard study of World Health Organization AIDS program knowledge, attitudes, beliefs and practices survey in 1988. The questions were modified in order to better fit the young orphan population. The questionnaire started with a few demographical questions. The questionnaire contained 26 questions and was divided into four general sections: Misconceptions about People living with HIV/AIDS (4 questions); Attitudes to person with HIV/AIDS (6 questions); General knowledge concerning AIDS (8 questions); and Modes of Transmission (8 questions). All the questions were answered with Agree/Disagree/I don't know and there was a section at the end for comments. Responses to all the items were converted to a percentage indicating the proportion of correct responses.

Sampling

In the summer of 2013, the questionnaire was administered to students at two orphanages, SOS Youth Home and Arrows Of God, in a classroom. There were 24 male and 19 females surveyed for a total of 43 orphans. While completing the questionnaire, there was the possibility that may find some questions incomprehensible, so a researcher was available to explain any question or to help translate to Yoruba. Students were also informed not to discuss the questionnaire with their colleagues. After the questionnaire was complete, the researcher reviewed the correct answer and answered any inquiries the students may have. This survey used convenience sampling, because these orphanages housed orphans in the age range necessary and they were easily accessible.

Legal ethical consent

Before the surveys were conducted, the researcher received permission from the director/management of both orphanages. All the orphans available were given the option to participate or opt of the survey. The researcher informed the participants that this was an anonymous, confidential study used for research purposes only and informed consent was obtained verbally.

Results:

There were 43 students who completed the questionnaires and fit the sample. All of the students' questionnaires who were younger than 13 years old and older than 18 years old were discarded. None of the surveys had missing information. The mean age was about 15 years old with a standard deviation of 1.6 years. The sample was 55.8% males.

Misconceptions about People living with HIV/AIDS

In general, the proportions of the respondents' misconceptions were found to be significantly low for all the items. The majority of the respondents disagreed with all the statements. However, about 32.5% believed that they could be immune to HIV if they were well nourished and engaged in sport. Not a single student agreed that AIDS only affect gay people. Also, 18.6 % of them believed that AIDS is a punishment from God.

Attitudes to people living with HIV/AIDS

Only 34.9% of the participants would kiss someone with HIV. About 39.5% of the students still had stigmas in regards to sharing thing. For example, they would not want to wash their clothes, share a public toilet, or swim in a pool with HIV-infected people. 9.3% of the students would not touch someone who was infected with HIV and only 11.6% of the orphans would not play with a student who had HIV/AIDS. 23.2% of the orphans believed that there should be a special school for HIV-infected people.

General knowledge items on HIV/AIDS

In regard to differentiating if a person had HIV/AIDS by looking at them, many of the respondents answered incorrectly. More than half of the orphans believed that a person infected with HIV will have physical symptoms (58.13%) and that they can tell the difference between a person with AIDS and without AIDS (53.48%). 32.5% did not know that AIDS was caused by a virus. Also, about 40% believed that there was a vaccine for AIDS.

Modes of Transmission

A higher proportion knew that HIV could be transmitted by vaginal sex (90.7%) than by anal sex (81.4%), which was all higher than oral sex (69.8%). There were some major misconceptions about non-transmissible methods for the disease. 65.1% knew that HIV/AIDS could not be contacted through belonging such as clothes, combs, underwear and towel. They also knew that it could be transferred through food utensils of an infected person. A small percentage (9.3%) thought that HIV/AIDS could be passed by sharing a hug or a handshake with a person living with HIV/AIDS.

Comments

In this section, there was a mix of negative and positive outlooks on HIV/AIDS. Some of the positive comments included AIDS is a disease. AIDS positives should not be treated differently from other people; To me I don't think AIDS shouldn't be taken care of because people die every day; Abstinence is the best to keep yourself pure, hold, and acceptable to God. Some of the negative and incorrect comments included were people with AIDS should be allowed to die so that the rest of the people can be; Viruses are for computer. HIV cannot be caused by a virus; You have to be very careful with the people you play with

Discussion:

Orphans are known to be at higher risk for lack of education, already putting them at higher risk of HIV/AIDS infection. Knowing that all of the orphans in this study attend the orphanage school, the school has the potential to break the knowledge gap. These educational institutes are a daily contact and could be a source of HIV/AIDS knowledge through teachers and posters. There were major limitations in this study. The main being that it was a convenience sampling which means it may not be the best representation of the population. Another was due to. For further research, sexual behaviors and beliefs should be assessed to better understand if the students are at risk of contracting HIV/AIDS. While students may have the knowledge of HIV/AIDS, it does not always translate to behavior.

The level of HIV/AIDS related knowledge was good in this study, with most people showing positive attitudes. Misconceptions about AIDS still exist and need to be addressed by health education programs targeting orphans. It has previously been shown that health education and sustained prevention efforts, such as the introduction of HIV/AIDS education into schools, mass-media campaigns promoting the use of condoms, and the wearing down of individuals' ability to deny risk towards patients with HIV or AIDS positive can be effective in changing people negative attitudes or misconceptions towards AIDS.

Misconceptions about People living with HIV/AIDS

Overall, the students' average was the highest in this section with an 86%. Many of the major misconceptions were recognized by the orphans correctly which shows an improvement compared to other countries. None of the students held the misconception that AIDS only affect gay people. The only major misconception held was that they could become immune to HIV if they are healthy. This error in thought could lead orphans to

engage in behavior which they would be precautious about.

Attitudes to people living with HIV/AIDS

In general, the respondents' attitudes towards AIDS and people with AIDS were found to be tolerant and positive. However, about 40% of the students had negative attitudes about being in close contact with infected people. For example, they would not want to wash their clothes or swim in a pool with HIV-infected people. Even though, they knew that they could not be infected with HIV that way. The most negative attitude held by orphans is against kissing an infected person.

General knowledge items on HIV/AIDS

The results from this study determine that the orphans had a moderate level of knowledge, with a 68.6% average of correct answers. There seem to be confusion about how symptoms are manifested with HIV/AIDS. More than half of the respondents believe that they can tell the difference of someone suffering from AIDS/HIV because of symptoms, which is false. This implies the students may engage in behaviors that lead to the transmission of HIV because they falsely believe that they can identify infected people. The same percentage of students also believed that there is a treatment and a vaccine for HIV/AIDS which is also not true. Students may not take the necessary precautions if they believe that they can be cured from the disease.

Modes of Transmission

The analysis of the 8 items indicated that most participants demonstrated above average knowledge about the how HIV/AIDS can pass

from one person to another. The total average of correct responses was 77.3%, which was the second highest section average. Unfortunately, there is still a major knowledge gap which could translate to them actually being infected with HIV/AIDS. More than 3/4 of the orphans believed that they could not contract the disease by engaging in anal sex. Conceptions about how HIV/AIDS is transmitted through sharing belongings such as clothes and food utensil were thought to be true by more than a quarter of the students. This data aligns with some of the data produced by UNICEF, which shows that 50% of young people around the world had misconceptions about how HIV/AIDS is transmitted [3].

Conclusion

The target population had a moderate level of knowledge, not many misconceptions, and a tolerant attitude towards people living with HIV/AIDS. More testing needs to be completed to better understand the knowledge level and behaviors of orphans. Correct information about HIV need to be taught to the student with health education programs, especially about how HIV is transmitted. Also, the government should take a more active role and implement more programs to reach other residents and orphans who are not in institutions.

Acknowledgements

The author thanks Dr. George Holden for assistance and guidance in this project. She would also like to thank Ms. Susan Kress and Ms. Meleah Harris. Lastly, she really appreciates both orphanages, and all the students who took time to participate in her study.

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