Summary

Human Immunodeficiency Virus (HIV) has become one of the most serious infectious diseases challenges to public health, it is considered as the most devastating disease of the recent decade due to its high morbidity, mortality and economic impacts. The negative attitudes among people and healthcare providers prevent many people from seeking HIV testing, returning for their results, or securing treatment, possibly turning what could be a manageable chronic illness into a death sentence and perpetuating the spread of HIV.

The quality of care received by HIV-infected individuals and AIDS patients can be affected by the reaction of healthcare providers. In this regard, nurses have a key position in the delivery of care. Knowledge, attitudes and delivery of care have important role in HIV/AIDS prevention care and treatment among health providers specially nurses. Therefore, it is important to assess knowledge, practice and attitudes towards people living with HIV/AIDS among nurses.

Aim of the Study:

The aim of this study was to assess knowledge, attitudes and practices of nurses working with HIV/AIDS patients.

Research question:

This study is based on answering the following question:

• What are the knowledge, attitudes and practice of nurses working with HIV/AIDS patients?

Research settings:

The study was conducted at El-Homiaat Hospital in El-Abbassia.

Subjects of the study:

It was convenient sample. The subjects of the present study included 65 nurses, which represented about 85% of total nurses number.

Tools of data collection:

Data were collected using the following tools:

1- Interviewing Questionnaire:

This tool was designed by the investigator in a simple Arabic language based on review of related literature. It includes: socio-demographic data of nurses such as age, sex, education, marital status, monthly income and nurses' years of experience, source of information about HIV.

2- HIV Knowledge Questionnaire (HIV-KQ-18):

It was developed by **Carey and Schroder (2002)**. It was utilized to measure knowledge about HIV regarding prevention and modes of transmission. The HIV-KQ-18 consists of 18 "true", "false", or "don't know" statements.

3- AIDS Attitude Scale (AAS):

It was developed by **Froman et al. (1992)**. The scale is based on a three point Likert scale "disagree", "may be" and "agree". It is composed of two subscales: 14 sympathetic items and 7 avoidant items.

4- Nurses' Practice Checklist (NPC):

It is an observation checklist developed by the investigator after reviewing related literatures. The Nurses' Practice Checklist consists of 37 items divided into two main categories, which is devoted to assess nurses' Communication Skills (items 1-23) and Safety Measures (items 24-37).

Pilot study:

The pilot study was conducted on seven nurses from the hospital; those nurses were excluded from the actual study sample.

The main findings of this study revealed that:

• An analysis of socio-demographic characteristics showed that the mean age of studied nurses was (28.4 ± 7.15) , more than two thirds of studied nurses (67.7%) aged older than 30 years old and the majority of them (75.4%) were females and more than half of them (60%) were married. Slightly less than half of studied nurses (46.2%) were diploma nurses followed by (33.8%) graduated from technical institutes of nursing. Studied nurses' most reported source of information about HIV was co-workers (64.6%) followed by the formal education (60%) and all studied nurses neither optional nor mandatory performed periodical checkups.

• An analysis of HIV knowledge questionnaire showed that studied nurses have satisfying knowledge about the modes of transmission of HIV such as sexual intercourses (anal 66.2%, oral 58.5%, intercourse during menses 73.8%). Additionally, studied nurses showed lack of knowledge about condom use. More than half of studied nurses rejected the presence of female condom

(53.8%). Also, (30.8%) from studied nurses didn't know the difference between condom type and lubricant type in preventing HIV transmission.

• An analysis of Nurses' Practice Checklist (NPC) showed a lack of communication skills demonstrated by studied nurses such as use of complicated medical terms in front of the patients (52.3%), not dedicating time to talk to HIV/AIDS patient (66.2%). Also, more than half of studied nurses rarely decreased patient's fear and worry (55.4%) and more than half of them refrained from touching the patient (61.5%). Regarding confidentiality, near two thirds of studied nurses didn't maintain the patient's confidentiality regarding HIV status (66.2%).

• Regarding safety measures, studied nurses were constant in following the infection control measure. The most observed protective measure that used by studied nurses was gloves (90.8%). Also 66.2%, 72,3% and 83.1% from studied nurses were able to constantly use aprons, masks and eye shields respectively. Furthermore, studied nurses changed gloves from patient to another (100%), avoided recapping of used needles (98.5%) and washed hands after contacting with patients (72.3%).

• An analysis of AIDS Attitude Scale clarified that more than two thirds of studied nurses accepted that the patient with AIDS should be accorded the same care (69.2%) and respect (67.7%) as any other patient. Additionally, more than half of studied nurses were able to do anything to make HIV/AIDS patient's life easier (61.5%). Also, studied nurses showed negative attitudes toward children who got AIDS from drug abuse (53.8%) and IV drug users (47.7%).

• Regarding the relationship between knowledge, attitudes and practices, there is no significant relation between knowledge and attitudes or practices among studied nurses (P>0.05).

It is concluded that nurses working with HIV/AIDS patients have satisfying level of knowledge about modes of transmission of HIV and less knowledge about HIV related preventive methods especially condom use and safe sexual practices. However, studied nurses expressed high levels of sympathetic attitudes towards people living with HIV/AIDS, avoidant attitudes were observed. Negative attitudes towards specific groups such as homosexuals and intravenous drug users were found among studied nurses. However, practice level was unsatisfying among studied nurses regarding communication skills, a satisfying commitment to the safety measures were exhibited. There was no significant relation between knowledge, attitudes and practices of studied nurses but their poor practice of communication skills were closely related to their negative attitudes toward people living with HIV/AIDS.

In the light of these findings it was recommended that:

- Psychological counseling should be provided for HIV/AIDS patients in facilities serving HIV/AIDS patients and should be delivered by psychiatric professionals.
- Raise organizational awareness to encourage empathic attitude and caring experience of nurses working with HIV/AIDS patients. This include, administration could create programs/interventions to relief moral distress and negative attitudes to promote caring behavior.
- Provide psychological care for nurses working with HIV/AIDS patients to prevent psychological burden and decrease their negative attitude toward HIV/AIDS patients.
- Initiate group therapies and support groups for HIV positive people and nurses working with HIV/AIDS patients to exchange their experiences in how to accept and deal with HIV positive people and AIDS patients.