Assessment of knowledge attitudes and beliefs about HIV/AIDS among young people residing in high risk communities in Aden governorate, Republic of Yemen

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Executive Summary

Although Yemen is a country with low HIV prevalence, conditions exist that could well lead to a rapid spread of HIV/AIDS. Poverty, social disparities, and illiteracy are among important determinants, which could lead to rapid spread of HIV/AIDS in Yemen. HIV/AIDS becomes one of UNICEF primary concerns because the epidemic is undermining many of the basic Child Rights.

To provide baseline indicators pertaining to the knowledge and attitudes towards HIV/AIDS among inhabitants of four poor communities in Sheik Othman and Dar Saad districts in Aden governorate that allow designing a package of integrated interventions in these poor areas and to monitor the progress and evaluate the achievement, a community based cross-sectional analytical study was undertaken among young people aged 15 to 24 years. A sample of 342 girls and 259 boys formed the material for this study. Data was collected by well qualified and trained interviewers, using a pre-tested instrument, administered by personal interview technique.

The study indicated that the although percentage of those who have ever heard about AIDS is high (89%), there are still wide and significant gaps that need to be tightened between male and females, age groups, educational levels, and income groups. Whereas only 6% of males never heard about AIDS, 16% of females did not and whereas only 7% of high-income group never heard about AIDS, 20% of the low income did not. The “ever heard” percentage also increases remarkably as the young people got older from 79.0% among the youngest group (15-16 years) to 93% among the oldest (20-24 years) as well as with increase in educational level from 76% for illiterate to 100% for those at Diploma and University level.

Nevertheless, when knowledge measured by knowing at least three correct modes of transmission or knowing at least three correct methods of prevention only 45% and 28% respectively acquaint this type of knowledge.

Although the majority of the respondents seemed to be well informed about the major modes of transmission such as extra marital sex (95%), sharp instruments/needles
(95%), blood transfusions (91%), homosexual contact (84%), and mother to child transmission (67%); misconceptions are prevalent. High percentages still believe that AIDS could be transmitted by mosquitos' bites (66%), kissing (56%), clothes (49%), eating/drinking (46%), swimming pool (42%), bathrooms (40%), and touching (28%).

Regarding attitude towards HIV/AIDS, the majority shows a good awareness about the danger of the HIV/AIDS to the country (91%) and welling for voluntary testing (86%). Nevertheless, negative attitudes towards HIV/AIDS patients are rather prevalent and there is a common attitude that AIDS patients need to be isolated in special health settings (78%), if not prison (18%) or killed (13%). Misconceptions demonstrate itself through the finding that 79% mentioned that they do not accept to buy grocery from a person who is infected with AIDS and 77% do not agree that an infected teacher continue teaching at school. Seventy-two percent of the participants believed that the government should take action to prevent the spread of AIDS. The most commonly chosen action are providing specialized health facilities/cadre for treating AIDS patients (45%), awareness raising (27%), closing hotels/places facilitating sexual promiscuity (24%).

All the above-mentioned negative and stigmatizing attitudes can lead to an unsafe atmosphere with grave consequences for patients living with AIDS and their families as well as for the whole community. It also contradicts with International Laws that have been signed, among other countries, by Yemen.

Regarding the perception of risk and inspite that 52% and 47% heard that prostitution and homosexuality respectively are present in their areas, the possibility of existence of AIDS cases in Aden is underestimated by 41% of the respondents and acquiring HIV infection by 28%. For that reason, the perception of risk and the importance of behavioural changes need to be stressed.

The fact that some of behavioural changes mentioned (e.g. avoiding others' clothes, avoiding swimming pools, and keep away from patients) reflects poor knowledge and wide misconceptions about modes of HIV/AIDS transmission and therefore necessitates stressing the lack of scientific evidences for these misconceptions. On the other hand, the fact that only 28% think that proper use of condoms can protect
from HIV/AIDS also mirrors poor knowledge about one of the important behavioural changes that could reduce the risk.

Based on the findings of the study, certain recommendations in the reference population have been submitted. Education found to be one of our most important weapons against the spread of HIV/AIDS. Thus, fostering public awareness especially among young population is crucial at this stage to facilitate development of intervention programs, fight stigma and ensure delivery of care to those who are affected. TV found by the study to be the current and the future leading source of knowledge about HIV/AIDS. The fact that it is used equally by both males and females means that it should be used to minimize the significant gap in knowledge between sexes. In the view of the fact that school teachers, health workers, and religious leaders were mentioned as future preferred sources of knowledge (36%, 31% and 28% respectively) about HIV/AIDS, stress the need to re-educate these groups on spreading the message to the general public on such a sensitive issue.

Last but not least, the fact that 79% of the study population have spare time and 24% found to be jobless and want to use the spare time to learn some skills and improve their income signifies that beside HIV/AIDS education, offering skills training and income-generating activities especially for women and girls as well as for street/beggar children and unemployed to improve their general welfare is important to reduce their vulnerability to HIV/AIDS. Other efforts include supporting peer education groups and setting up counseling centers, in which young people learn about HIV/AIDS through group talks, sports and performances need to be considered.