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BELIEFS AND PERCEPTIONS ABOUT ACQUIRED IMMUNODEFICIENCY SYNDROME (AIDS) OF A NIGERIAN RURAL COMMUNITY: IMPLICATION FOR PREVENTION AND POLICY INITIATIVES

*JOMBO, G.T.A, *EGAH,D.Z, **AKOSU T.J & ***BELLA S.I.

*Department of Medical Microbiology, Jos University Teaching Hospital, PMB 2076 Jos Plateau State.

**Department of Community Health, Jos University Teaching Hospital, PMB 2076 Jos Plateau state.

***NKST Comprehensive Health Centre Aku, Ushongu LGA Benue State.

ABSTRACT

Acquired Immunodeficiency syndrome (AIDS) has assumed a disease of epidemic dimension both in Nigeria's rural and urban communities. Different people have varying knowledge and beliefs about this disease. This study was designed to assess the beliefs and perceptions of the people of Ihugh community in that regard.

A structured questionnaire was interviewer administered to assess their beliefs and perceptions about AIDS, results were analyzed by simple descriptive methods.

Of the 500 respondents, 65%(n=325) believed that AIDS is found only in cities while 69.7%(n=345) were of the opinion that AIDS can be cured by traditional means. Sixty five percent (n=326) believed that some people are destined for AIDS while 75.8%(n=482) were of the opinion that AIDS can be acquired through witches and wizards; 71.1%(n=488) believed AIDS can be acquired through curses. A large number of the respondents (63.0%) claimed they did not know where to go for routine HIV screening.

Conclusion: Health education program should be designed for the people of Ihugh community in the context of their peculiarities. This should include town cry, health talk at their worship centres and local gatherings. The electronic and print media are not the best based on their peculiarities.

KEY WORDS: Beliefs; Perceptions; Acquired Immunodeficiency Syndrome.

Correspondence: Dr Jombo G T A

Tel. 08039726398. Email. jombogodwin@yahoo.com

INTRODUCTION

In 1981 when the first case of AIDS was reported in USA, little did the entire medical world anticipate that the entire world was marching towards yet another disaster in the near future (1,2). This was as a result of immense technological breakthroughs and discoveries available at the

moment for detection, prevention and treatment of various infectious diseases (3,4). The new disease demystified technological advancement of humanity. By the end of 2003, at least 40 million people worldwide were living with human immunodeficiency virus (HIV) the causative agent of AIDS.

As at July 2004, 20 million lives had been lost in sub Saharan Africa alone; at least 28 million

people on the continent are infected with the HIV virus. This constitutes about 70% of the total world's HIV infections. Not less than 12 million children are already orphaned from the disease, globally, 6,000 people are infected each day, one has led to the erosion of the social and economic progress of the past 20 years, among other nightmarish statistics, and there are 5,500 AIDS-related funerals every day in Africa alone(2,5-10).

The first case of AIDS in Nigeria was reported in 1986. In the late eighties, the prevalence of HIV in Nigeria was less than 0.1%. By 1991, it rose to about 1.8% and by end of 1999, 7% of the Nigerian population were living with this virus (11-14). This explains how fast the disease is spreading, and by the end of December 2003, HIV seroprevalence sentinel survey showed that Cross river state had the highest prevalence of 12%. This was followed by Benue state (9.3%), while Osun state had the lowest prevalence of 1.2% in the country (15).

Due to the rising scourge of this disease, the government(federal, state and local), non-governmental organizations(NGO), corporate This study was therefore designed to assess the knowledge, beliefs and perceptions of the people of this community about AIDS. This will in turn serve as a pointer as to what extent the current health education campaign has been successful in the locality. It is only then that a new health campaign strategy can be fashioned out to meet the peculiarities of the community so as to stem the wave of spread of this disease.

MATERIALS AND METHODS

Steaudy Area

The study was carried out at Ihugh, a village community in Vandeikya LGA of Benue state. It is located at 28 kilometres outside Gboko town, with a projected population of 6000 people based on 1991 population census and is entirely of Tiv

every 15 seconds. There are at least 3 million new infections each year leading to more than 2 million deaths annually. More than 85% of AIDS related deaths occur in people between 20 and 45 years of age.

This organizations and private individuals have taken the initiative to properly educate the general public about AIDS so as to reduce the alarming rate of its transmission and spread. This can be successful through correct character modification and positive behavioral changes.

Ihugh, a rural settlement in Benue state was quoted to have the highest prevalence of HIV(10.7%) in the state by the last sentinel survey (15). This was as compared to Makurdi(9.7%), the state capital and Otukpo(7.7%), an urban centre in the state by the same survey. Considering a prevalence of as low as 1.2% in Osun State and as high as 10.7% at Ihugh in Benue State calls for concern.

ethnicity. Over 95% of the people are peasant farmers.

Procedure

Five hundred subjects were recruited into the study within the age range of 15 to 70 years during the period of study (June-July 2004). Individual consent was obtained. Selection of subjects was done on market days in the locality using the EPI modified cluster sampling survey methodology. An interviewer administered questionnaire was used to collect data by five trained interviewers. Information on beliefs and views on AIDS among the respondents was obtained.

ETHICAL ISSUES

Ethical clearance was sought and obtained from the Benue state ministry of Health for this study.

DATA ANALYSIS

The data obtained was analyzed by simple descriptive method.

RESULTS

All the 500 respondent's questionnaires were properly filled by the interviewers, 299(60%) were males while 201(40%) were females. (Table I). The age range was 16 to 75 years and peak age range

was 26 to 35 years, mean age was 34 years with a bimodal age of 29 and 44 years. The median age was 33 years with a mean deviation of 1.34 and standard deviation of 1.52.

Figure I shows the educational level of the respondents. Two hundred and seven (41.4%) respondents had no formal education while 126(25.2%) of them attended primary school. One hundred and fifty (30.0%) attended secondary school and 17(3.4%) attended tertiary education.

Table I: Age and Sex distribution of the people of Ihugh community in Benue state.

| A ge Interval(Yrs) | M(%) | F(%) | TOTAL(%) |
|-----------------------|----------|----------|-----------|
| 16-25 | 71(14.2) | 33(6.6) | 104(20.8) |
| 26-35 | 87(17.4) | 62(12.4) | 149(29.8) |
| 36-45 | 53(10.6) | 45(9.0) | 98(19.6) |
| 46-55 | 41(8.2) | 37(7.4) | 78(15.6) |
| 56-65 | 32(6.4) | 11(2.2) | 43(8.6) |
| 66-75 | 15(3.0) | 13(2.6) | 28(5.6) |
| TOTAL | 299(60) | 201(40) | 500(100) |

Peak Age range = 26-35 Years Mean Age = 34 Years

Modal Age = Bimodal = 29, 44 Years

Median Age =33 Years

Mean Deviation = 1.34

 $Standard\ deviation = 1.52$

Table II shows the scores of the various responses of the respondents to the statements on the questionnaire. Three hundred and twenty five (65%) of the respondents believed that AIDS is only found in the cities as compared to 175(35%) who denied it. A total of 345(69.7%) and 94(19%) of the respondents were of the opinion that AIDS can be cured by traditional medicine and orthodox medicine respectively. On the contrary, 150(30.3%) and 403(81%) respectively of the respondents denied the above two notions. Three hundred and fifty five (73%) of the respondents replied AIDS cannot be cured by any means while 128(27%) believed AIDS can be cured. A total 326(65.6%) of the respondents were of the opinion that some people are destined to have it while 171(34.4%) denied that notion.

Concerning the mode of transmission of AIDS, a large proportion of the respondents was of the opinion that AIDS can be acquired: from witches and wizards (75.8%); through dreams (67.0%) and a smaller proportion consented to the view that AIDS can be acquired through breathing air (12.5%).

Only 23 out of 500(4.6%) respondents had done HIV screening in the past, while 77 out of 493(15.4%) had listened to a talk about AIDS.

Table III gives the various reasons why the respondents could not avail themselves for routine HIV screening. A large number of the respondents did not know where to avail themselves for the test (63.0%), 298(77.2%) respondents could not do the test due to financial reasons and 337(76.0%) was for fear of stigmatization.

DISCUSSION

The study was designed to find out the knowledge and perceptions of the people of Ihugh community in Benue state about AIDS. This was against the backdrop of the recently quoted National sentinel report of a 10.7% HIV seroprevalence of the community, a figure exceedingly high.

Of the 500 subjects studied, 41.4 %(n=207) did not attend primary school while 25.2 %(n=126) attended only primary school. According to WHO classification of illiteracy (16), 66.6 %(n=333) of the population are illiteracy gives rise to ignorance and all its attendant ills such as poverty and inability to

seek for proper medical attention. The situation is the reverse in the developed parts of the world (17-19) where people are well informed about their health and have unrestricted access to information about their health as well as other environmentally related health issues. This accounts for the low prevalence of HIV in those parts of the world (19-21). It is easier to effect changes in beliefs of well-informed people than that of the uninformed.

A large proportion of the respondents believed that AIDS could be cured by traditional methods. This poses a serious public health problem since the people may disregard all the scientifically proven preventive measures with the belief that they can be cured if they eventually go down with the disease. This will eventually render the control measures put in place irrelevant. It further buttresses the fact that, the ongoing health education campaign by the various organizations (governmental and non-governmental) has not yet been internalized by the people of this community.

Seventy five point eight percent (n=365) of the respondents believed that AIDS can be acquired through witches and wizards, 71.1 %(n=347) through curses and 67.0 %(n=318) through dreams. This explains the role superstition plays in the life of these people. These beliefs also have some religious connotations since majority of the people practice both Christianity and traditional religion. Generally, beliefs that hinge on people's religion are usually difficult to eradicate easily

(22,23). This could account for these deep-rooted wrong beliefs about AIDS transmission. The public health implication here is that, the actual modes of spread of this virus are not given adequate attention hence promoting the spread of the virus in the community.

Only 4.6 % (n=23) of the respondents had HIV screening in the past. This is extremely low and 83.6 %(n=416) had not listened to any teaching about AIDS. This calls to question the reliability of the media used by government and other agencies to reach out to the people of this community. The television is not accessible by these people; over 95% of the people do not own a radio. Hence, the heavily utilized electronic media (radio and television) by government and other agencies to reach out to these people has not yielded the desired results. This situation may be similar to many other rural settlements spread across the country and other parts of tropical Africa (24,25).The modes information dissemination in countries like Japan, Germany and Italy are quite impressive (26,27).

Seventy-seven percent (n=298) of the respondents attributed their inability to carry out routine HIV screening to lack of funds. In other words, the cost of HIV screening is beyond the reach of an average Nigerian. This problem can be overcome if government would supply HIV screening kits at highly subsidized rate and within comfortable reach to the majority of her teeming population. The 63.0 %(n=302) respondents who said they do not know where to avail themselves for routine HIV test further strengthens this view. With out this approach the success of the present control program put in place by government will only continue to be a mirage.

Fear of stigmatization was also found to be a major factor hindering people's submission to routine HIV test as 76.0 %(n=337) attested to this fact. This boils down to lack of proper health education in the community. In other parts of the world where people are well enlightened, they are ever willing to submit themselves for routine HIV screening (28).

CONCLUSION

The high prevalence of HIV infection in Ihugh community is due to high level of illiteracy, their superstition coupled with their religious belief. It is also due to failure of the heavily utilized electronic and print media by government and other agencies to reach the people of this community.

There is therefore the need for government and other concerned bodies to re-design a new prevention and control program bearing in mind the esteemed cultural beliefs, values and traditions of these people. Town cry, health talks at village gatherings and worship centres in the locality can be effective alternatives. In addition, government needs to explore other equally effective alternative means of communication with this people that will overcome language barriers and at no cost to the target audience. It is only then that the government control policy and program will yield the desired result.

Finally, since both the electronic and print media are not the best of means to reach out to the people of this community, home grown resource persons should also be adequately equipped with the basic infrastructure to carry this doctrine of AIDS to their door step.