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PERUVIAN, SPANISH AND AMERICAN NURSING FACULTY ATTITUDES TO CARING FOR PEOPLE LIVING WITH HIV/AIDS

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HIV & NURSING CARE

- Knowledge, attitudes, motivation and acceptance

  → **IMPROVEMENT** (1)

- Fear to get infected by a patient(2)

- Don't want patients' lab results as confidential (3)

(1) Rubio-Aliste, R., Marinez-Lacasa , X., Jiménez-Gómez, N., Quintana-Riera, S. Evolución de los conocimientos y actitudes del personal de enfermería respecto de la infección por el virus de la inmunodeficiencia humana (VIH). Enfermería Clínica, 2005; 15: 321-328.

(2) Merino Godoy, A. Actitudes y conocimientos de profesionales de Enfermería sobre el paciente VIH+/SIDA. Nure Investigación, 2004.

(3) Morales Acedo, M.J., Vargas López, J., Gil Zarzosa, J., Ramos Díaz, J.C., Mora García, E., Martínez Blanco., J. Actitudes y comportamientos de los profesionales de urgencias ante el HIV. Medicina General, 2000; 27: 740-742

HIV & NURSING STUDENTS

- Negative attitudes (4)

- Stereotypes (5)

- Fear of accidental infection (5, 6)

- Would prefer to work with other type of patient (7)

- Unsure how to use universal protection (8)

(4) Tomás-Sábado J, Aradilla A. Actitud ante el SIDA en estudiantes de enfermería. ¿Cuál es el papel de la formación académica? Educ Méd 2003;6:87-92.
(5) Serrano Gallardo, P., Giménez Maroto, A.M. Actitud ante el sida de los estudiantes de enfermería de la Escuela Puerta de Hierro (Universidad Autónoma de Madrid). Enfermería Clínica, 2006; 16(1): 11-18.
(6) Álvarez Vera, M., Guillem París, C., Navarro Pereira, R. Actitud ante el sida en estudiantes de enfermería. Ágora de Enfermería, 2008; 12(4):13
(7) Nazik E, Arslan S, Özdemir F & Apay S. Turkish Nursing Students' Attitudes About Patients Living With HIV/AIDS. Sex Disabil, 2012; 30: 433–439
(8) Earl C. Thai Nursing Students' Knowledge and Health Beliefs About AIDS and the Use of Universal Precautions. A Cross-Sectional Descriptive research Study. AAOHN journal, 2010; 58 (8): 331-334

AND WHAT ABOUT FACULTY?

Leyva y cols., 2016

29,79% agree with identifying those patients with HIV

14,89% believe that AIDS is the biggest plague of our time

12,77% believe people with AIDS should be considered victims

10,64% consider there is some transmission risk in the daily life activities

10,64% agree that women with HIV should not be allowed to get pregnant

10,64% believe that every time we touch a patient with AIDS we must use gloves

10,64% believe that the diagnostic test should not be anonymous and voluntary

Survey (n=47).

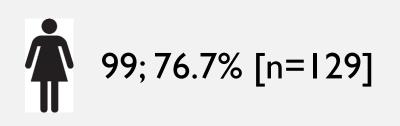**79,80% positive attitudes.**

No significant difference by age or group

AIM OF THE STUDY

- To identify the attitudes of caring for PLHIV among nursing faculty

METHODS

- Cross-sectional study with nonrandomized electronic sampling.

- Data collection using the Healthcare Provider HIV/AIDS Stigma Scale (HPASS),

- 30-item validated and reliable instrument with three tendency factors: Prejudices, stereotypes, and discrimination.

- Sociodemographic data were collected.

- Descriptive and inferential statistical analysis was performed using R (v.3.1.1).
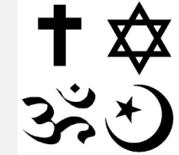
- Generalized linear model.

RESULTS I

99; 76.7% [n=129]

Mean age: 49,8 (SD=12.3)
Years teaching 14. 8(±12,1) [n=109]
Teaching undergraduates 87;68.0%
[n=128]
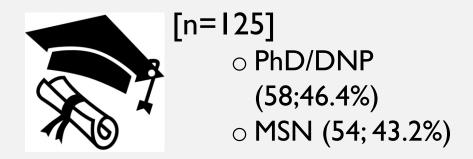
1 → 18; 14.2% (PR=80%)
2 → 13; 10.2% (PR=50%)
3 → 31; 24.4% (PR=37,50%)
4 → 65; 51.2% (PR=30%)

[n=122]
  ○ Catholic (58; 47.5%)
  ○ Agnostic (24; 19.7%)

Importance of religion [n=127]
  ○ Very important (41; 32.3%)
  ○ Important (39;30.7%)

[n=125]
  ○ PhD/DNP
    (58;46.4%)
  ○ MSN (54; 43.2%)

RESULTS II

VARIABLE	MEAN (SD)	n
Stereotypes	2.74 (0.82)	119
Discrimination	2.24 (0.73)	119
Prejudices	2.06 (0.91)	119
TOTAL	2.39 (0.71)	119

1 = Very positive; **2 = positive**; 3 = somewhat positive; 4 =somewhat negative; 5 = negative; 6 = Very negative attitudes

RESULTS III

- **TOTAL SCORE:**
  - Giving very low importance to religion → significantly associated to _lower scores_ (p=0.009) ===== better attitudes.
  - Peruvian faculty tended to get _higher scores_ (UNI1 p=0.008 and UNI2 p=0.012 respectively) ===== worse attitudes.
  - No other explicative variable showed significant association to the total score.

RESULTS IV

- **DISCRIMINATION SUBSCALE:**

  - Very little importance to _religion_ → significantly associated to _lower scores_ (p=0.010) ===== better attitudes.

  - _Peruvian_ faculty tended to get _higher scores_ (UNI1 p=0.001 and UNI2 p=0.002 respectively) ===== worse attitudes.

- **STEREOTYPING SUBSCALE:**

  - Very little importance to _religion_ got _lower scores_ (p = 0.049)

  - A highest tendency to stereotyping in _older faculty_ was observed (p = 0.003)

- **PREJUDICE SUBSCALE:**

  - Very little importance to _religion_ got significantly _lower scores_ (p = 0.014).

RESULTS V

University 2 Total HPASS results are 0,744 times higher than University 4 (statistically significant)

UNIVERSITY	HPASS TOTAL	HPASS STEREOTYPING	HPASS DISCRIMINATION	HPASS PREJUDICE
U1	-0,170 p=0,574	-0,079 p=0,821	-0,035 p=0,910	-0,621 p=0,117
U2	**0,744 p=0,021**	0,700 p=0,058	**0,827 p=0,013**	0,658 p=0,115
U3	0,460 p=0,058	**0,669 p=0,017**	0,456 p=0,066	0,107 p=0,734

Compared with University 4 (reference value)

CONCLUSIONS

1. Nursing Faculty show positive attitudes to caring for people living with HIV

2. Importance given to religion & age has a significant impact in attitudes.

3. Educational activities may be necessary.

4. Qualitative or mixed methods are needed

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