

AIDS AWARENESS AMONG HOSPITAL CLASS IV EMPLOYEES

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INTRODUCTION

The alarming rise of sexually transmitted disease has put India at the top position in AIDS scenario in the Asian continent. Overall about 6.4 million people are believed to be living with HIV in Asia and Pacific countries. It is the fourth largest cause of death in the world. Researches projected that globally the annual number of deaths due to AIDS would peak about 1.7 million by 2006, instead 3 million AIDS deaths were reported in 2001 alone. Despite its wide spread reach the epidemic is still in early stages.

The number of HIV infected persons in India is about 5 million as estimated by UNAIDS. It also estimates that around 25,000 women and 30,000 newborn babies get infected while 20,000 die every year. It also reported that 18% of the AIDS found are through blood transfusions.

Medical professionals and other health care workers by virtue of their professions can acquire infection from patients, fomites, contaminated environment and patient's specimens either by direct contact or indirect contact. The risk of getting HIV infection through needle stick or prick with inoculation to infected blood is approximately 0.25 to 0.3% and following

mucus membrane exposure is 0.05-0.3%. There are also the reports that some of the infected waste such as used syringes, needle and intravenous drip sets are recycled without proper treatment. This is only due to either the hospital waste is not properly disposed off or taken by the staff in spite of norms laid down to safeguard the health workers involving in handling, transporting; and disposing the bio-medical waste.

The class IV staff who are directly involved in handling, transportation and disposal of biomedical waste are also at risk and need to be made aware of AIDS infection, its mode of spread, importance and method of hospital waste segregation, transportation and disposal. Keeping this in mind, a series of seminars funded by U.T. AIDS Control Society of Chandigarh were organized to educate Class IV employees of PGIMER, Chandigarh from January to May 2000 through teaching learning process by using cognitive, behaviorist and humanistic approaches given by Bloom, Bandura and Knowles respectively.

MATERIAL AND METHODS

One group post-test design was adopted to evaluate the post teaching knowledge about HIV/AIDS. A total number of 808 subjects (including a group of ward servants, safai karamcharis and lab attendants and cleaners) attended the seminars.

A visual test comprising of 16 items was prepared. Nine items were on various modes of HIV/AIDS transmission and seven items were on preventive aspects. The

test was administered to the subjects at the end of each seminar. They were explained about the purpose of test and method of attempting the test.

RESULTS AND DISCUSSION

Characteristics of subjects

Of 808 subjects, 455 (56.3%) were ward servants, 285 (35.3%) safai-karamcharis and 68 (8.4%) other employees including lab attendants, supervisors, head jamadars and cleaners. The age range was between 20 to 60 years with mean age 40.2 ± 9.8 years and majority of them (28.8%) were matriculate.

Awareness about AIDS and its prevention

More than 70% respondents gave correct responses on various forms of transmission of infection and on preventive measures. More than 80% were aware that HIV is transmitted through transfusion of untested blood for HIV, from mother to fetus, sexual intercourse without condom. More than 75% of respondents were aware that HIV is not transmitted by sharing meals with HIV positive, shaking hands, sharing toilets, sharing same swimming pool, coughing and sneezing. 54% were aware that HIV is not transmitted while donating blood.

Regarding preventive measures, more than 80% were aware that they should wear proper shoes while on duty, should wear gloves while handling soiled articles and should handle the waste properly. More than 75% were aware of thorough hand washing and not to carry blood stained used plas-

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Overall knowledge score about AIDS was 80% ranging between 0-16. They scored 77% marks ranging between 0-9 on different modes of transmission and 82% marks ranging between 0-7 on preventive aspect. The maximum number of lab attendants and cleaners scored full marks and more than 50% marks on both the items as compared to ward servants and safai-karamcharis. The studies conducted on lab technicians and nursing orderlies indicated wide variation in their knowledge score, nursing orderlies scored the least.

On further analysis on any association between knowledge score and their age and qualification, it is found that lab attendants' and cleaners' knowledge scores decreased with increases of their age ($r=0.5$) and advancement of qualification ($r=0.5$). Ward servants' knowledge

scores also decreased with increase of their age ($r=0.5$) but increased with advancement of qualification ($r=0.23$). But safai-karamcharis knowledge scores increased with increase of their age ($r=0.11$) and decreased with advancement of qualification ($r=0.12$). This shows that age wise, the knowledge of younger lab attendants and younger ward servants and of elderly safai-karamcharis was high.

The overall knowledge of all class IV employees comprising of different categories was highly satisfactory after attending six hours of teaching including lectures, discussion, demonstrations and return demonstrations.

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