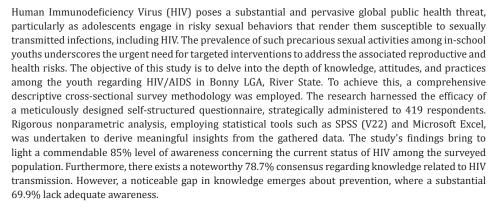


# Evaluation of the Level of Knowledge, Attitude, and Practice on HIV/AIDS among Youths in Bonny LGA of Rivers State

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#### **Abstract**



The attitude towards People Living with HIV/AIDS (PLWHA) is characterized as fair, accounting for 61.9% of the respondents. Concurrently, the practices related to HIV prevention and management exhibit room for improvement, with a suboptimal performance recorded at 65.4%. There was no statistically significant difference between the level of education and knowledge of HIV/HIDs. A similar trend was reported with attitude and practice. The study advocates for targeted interventions aimed at enhancing the knowledge, attitudes, and practices of the youth in Bonny LGA concerning HIV/AIDS. This may encompass educational programs, awareness campaigns, and community-based initiatives designed to foster a comprehensive understanding of HIV while promoting positive attitudes and risk-mitigating practices among the youth population.

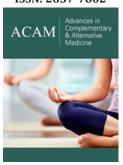
Keywords: Knowledge; Practice; Attitude; Bonny; Rivers state

# Introduction

Nigeria currently holds the disconcerting position of being the second-highest contributor to the global HIV epidemic, with a staggering 9% of the worldwide HIV burden attributed to the country [1,2]. Globally, the number of individuals living with HIV reached 36.9 million in 2017, with 1.8 million newly diagnosed cases and 40,000 deaths from AIDS-related illnesses. The African region, in particular, bears a substantial brunt, harboring 25.7 million individuals with HIV in 2017, and accounting for over two-thirds of new global HIV cases [3]. The term "youth" encompasses individuals aged 15-39, inclusive of both males and females [4]. Unfortunately, this demographic group is particularly vulnerable to sexually transmitted infections, including HIV/AIDS, due to early engagement in sexual activities. Regardless of gender, youths exhibit a propensity for engaging in high-risk sexual practices, experimenting with sexual behaviors, identities, and habits that significantly elevate their susceptibility to STDs, including HIV/AIDS (Nneka et al. 2018).

Circumstances have led many youths to adopt risky behaviors, often overlooking the importance of HIV testing and preventive counseling care. Consequently, youths find





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themselves at the epicenter of the HIV epidemic (Shilpa et al. 2015). The Most-At-Risk Populations (MARPs), comprising illicit intravenous drug users, casual sex workers, and men who have sex with men, contribute significantly to the HIV burden, constituting approximately 32% of new cases in Nigeria (Sampson et al. 2017). Knowledge about a disease is a prerequisite for behavioral change and positive outcomes in primary health prevention. However, despite high levels of HIV/AIDS knowledge, some individuals exhibit poor awareness of preventive measures and remain uninformed about their HIV status, highlighting the need for more comprehensive information dissemination [5]. The spread of HIV in Nigeria is exacerbated by factors of low-risk low-risk perception, engagement in multiple sexual partnerships, and limited access to quality healthcare services [6] (Odigbo et al. 2015). Youths, in particular, are highly susceptible to sexually transmitted infections, including HIV, due to their involvement in risky sexual practices [7]. Misconceptions regarding HIV transmission and prevention persist among this demographic [8,9].

Data analysis from the 2012 National HIV/AIDS and Reproductive Health Survey (NARHS) indicates regional disparities, with the south-south geopolitical zone, where Rivers State is situated, exhibiting the highest HIV prevalence at 5.5%. Rivers State, specifically, has the highest prevalence within the region at 15.2%, as per the 2015 Global AIDS Response [6]. A more recent survey in 2019 categorized Rivers State as a highburden, low-saturation priority state with a prevalence rate of 3.8% [10]. Bonny Local Government Area (L.G.A) is not exempt from the pervasive impact of HIV/AIDS, with high prevalence rates attributed to factors such as unemployment, empowerment denial, multiple sexual partners, cohabitation, unsafe sex, and prevalent misconceptions. The presence of multinational companies in the area further exacerbates the situation, attracting sex workers who are predominantly patronized by the youth demographic. Notably, there is a death rate of studies on Youths' Empowerment and Mitigation Campaign (EMC) in Bonny L.G.A, emphasizing the critical need for this investigation. In light of the aforementioned issues, this study aims to scrutinize the correlates of knowledge, attitude, and practice among the g youths in Bonny Local Government Area concerning HIV/AIDS.

# Method

## Design/population

The research employed a descriptive cross-sectional survey design, involving a sample of 419 participants within the age range of 15-39 years in Bonny Local Government Area (LGA) of Rivers State, Nigeria.

**Scope of study:** The research covered eight wards in the study area, and a convenience sampling method was employed for administering the questionnaires.

**Research instruments and tools:** An in-house self-report questionnaire was used. The reliability of the questionnaire was assessed using Cronbach's alpha, yielding a commendable coefficient of 0.8. This indicates a high level of internal consistency

and reliability in the measurement tool, instilling confidence in the accuracy and precision of the data gathered through the survey.

#### **Ethical consideration**

Ethical clearance and approval were obtained from the Ethics and Research Committee of the Ministry of Health Rivers State.

## Sampling techniques

The sampling technique utilized was stratified random sampling, encompassing 40 villages distributed across eight wards. To enhance the representativeness of the sample, a meticulous pretesting of the self-structured questionnaire was conducted in Wards 1 and 9 in Bonny LGA.

### **Data collection**

Data collection was a collaborative effort involving the primary researcher and two trained research assistants, carefully selected from the community before initiating data collection at the community level, permission was diligently sought from the house chiefs, demonstrating a commitment to ethical considerations and community engagement. This step ensured that the research activities were conducted with the approval and cooperation of the local authorities.

#### Result

# Demographic data of respondents

The percentage of female respondents that took part in the survey was 52.03% and more than  $1/4^{th}$  of the respondents were between the age of 15 and 19 (38.67%). The respondents were single (78.04%), and SSCE holders (42.24%). This is shown in Table 1 below.

**Table 1:** Demographic data of respondents N=419.

Characteristics	Response	Freq (%)	Percentage (%)			
Gender of	male	201	47.97			
respondents	Female	218	The 52.03			
	15-19	162	38.67			
	20-24	103	24.58			
Age range of respondents	25-29	97	23.15			
respondents	30-34	36	8.59			
	35-39	21	5.01			
	FSLC	63	15.04			
The highest	WASSCEE/ NECO	177	42.24			
qualification of respondents	ND	69	16.47			
l	HND/BSC	103	24.58			
	M.Sc.	7	1.67			
	Single	327	78.04			
	Married	78	18.62			
Marital status of	Divorced	7	1.67			
respondents	Widow/ Widower	7	1.67			
	Separated	0	0			

# Knowledge of bonny youth on HIV/AIDS concept, transmission, and prevention

According to the study findings, there was a notable level of knowledge among youths in Bonny Island, Rivers State, with 85% demonstrated an understanding of the HIV/AIDS concept, 78.7% knowing HIV transmission, and 69.9% possessing information about the prevention of HIV/AIDS. While the differences in performance among individual items were not statistically significant (p=0.9999, F=2.055), certain demographic trends were observed. Specifically, the analysis revealed that the female gender exhibited a slightly higher percentage (46%) of knowledge on HIV/AIDS compared to males. Moreover, participants within the age range of 15-

19 years demonstrated a knowledge level of 32%, indicating a commendable awareness among this age group. Educational attainment, as measured by possession of the West African Senior School Certificate (WASSC), correlated positively with knowledge, with 36% of those with WASSC reporting better understanding. Furthermore, marital status appeared to influence knowledge levels, as 66% of single participants exhibited a higher degree of awareness regarding HIV/AIDS. Although these variations did not reach statistical significance, the observed trends offer valuable insights into potential factors influencing HIV/AIDS knowledge among youths in Bonny Island. There was no statistically significant difference between the level of education and knowledge of HIV/HIDs (P=098) Table 2.

Table 2: Knowledge of bonny youth on HIV/AIDS concept, transmission, and prevention.

Question Item	SA		A		D		SD		Positive		Negative	
	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
Concept	201	(48)	157	(37)	46	(11)	13	(3.1)	358	(85)	60	(14)
Transmission	224	(53.4)	106	(25.2)	48	(11.5)	39	(9.53)	330	(78.7)	88	(20.9)
Prevention & Treatment	143	(34)	150	(35.8)	78	(18.6)	47	(11.2)	293	(69.9)	125	(29.9)

# Attitude and practice of bonny youths towards HIV/AIDS

A generally fair attitude (61.9%) was recorded among youths in Bonny L.G.A. However, suboptimal patterns of response were observed in all the items studied under this category. In terms of practice, a poor level (65.4%) was observed among youths in Bonny

L.G.A. Notably the observed practices included engaging in sexual activities before reaching puberty age, improper execution of HIV tests, and imperfect use of condoms. There was no statistically significant difference between level of education and attitude and practice of HIV/AIDs (Table 3).

Table 3: Attitude and practice of bonny youths towards HIV/AIDS.

Attitude and Practice of Youths towards HIV/AIDS (N=419)												
	S	A	A		D		SD		+ve%		-ve%	
Attitude	143	(34.13)	116	(27.68)	79	(18.85)	77	(18.38)	259	(61.81)	156	(37.23)
Practice	146	(34.9)	127	(30.4)	71	(16.9)	73	(17.3)	274	(65.4)	144	(34.3)

# **Discussion of Findings**

This research examined adolescents' knowledge, attitudes, and behaviors toward HIV/AIDS in the Bonny LGA of Rivers State. The majority of participants were male (47.97%), female (52.03%), and between the ages of 15 and 19 (8.67%). The study reported appreciable knowledge of HIV (85%), fair knowledge about HIV prevention (69.9%), a fair mentality (61.9%), and poor behavior (65.4%). Age, educational levels, marital status, and religion were identified as important determinants of research participation. Oladeinde et al. [5] conducted a study with 371 respondents, revealing high levels of awareness regarding HIV/AIDS. However, the study noted low knowledge of preventative strategies, poor knowledge of HIV, and a willingness among participants to use free, voluntary counseling and testing for HIV/AIDS services. In contrast, Kandasamy et al. [11] reported findings from a study involving 754 participants aged 16 to 40. The results indicated a strong understanding of HIV among 80% of participants, with 90% possessing knowledge of how the disease is spread, and over 80% being aware of ways to avoid HIV/AIDS. Collins et al. (2018) demonstrated in their research a sufficient awareness of HIV transmission and prevention. Despite this, some misunderstandings

concerning the modes of transmission were identified. Similar reports on HIV awareness and misconceptions were found in the papers of Joseph et al. (2019) [12], and Okonkwo & Okpara, contributing to a consistent body of literature in this domain.

According to reports, it is less common for family members in sub-Saharan African nations to disclose their own positive HIV status, indicating persistent discrimination against those living with HIV/AIDS. This discrimination is expected to worsen in the region [9]. The prevalence of myths and false beliefs about HIV/ AIDS is identified as a significant factor contributing to stigma and prejudice. Many young people are believed to face an increased risk of HIV due to the associated stigma, fear of neglect, and prejudice (HI and Youth, 2018). Factors such as low-risk risk perception, engaging in multiple partnerships, and limited access to highquality healthcare services are also considered contributors to this elevated risk [6]. Yousif, & Nazik [13] reported a poor attitude toward people living with HIV/AIDS. The study recorded percentages indicating that only 7% of respondents believed they could eat and drink with People Living with HIV (PLHIV), while 16% thought they could work and live with PLWHIV. However, a69% expressed unwillingness to wear clothing previously used by

PLWHIV, and a substantial 97.5% were hesitant to use needles that had been used by infected individuals. Despite these reservations, 57.5% reported a willingness to provide care for people living with HIV. The reported attitudes reflect a complex landscape of perceptions and behaviors towards individuals affected by HIV/AIDS.

In their research in Edo state, Obarisiagbone et al. 2019, used a descriptive cross-sectional survey with 440 participants and a stratified sample approach. They reported a respectable level of knowledge (61.6%), a favorable attitude (59.3%), and weak preventative actions. In Cross Rivers State, Okonkwo, Ameh, Out, and Okpara in 2017 found that while there is a high level of awareness of HIV and its routes of transmission, there are gaps in knowledge of the consequences of HIV. In a study in 2016, Adedokun, Olarinoye, and Ilesanmi found that adolescents continue to engage in hazardous sexual practices and that marital status is a strong predictor of HIV infection. Aiyedun & Ajuwon [14] used 208 respondents in their study on the knowledge of HIV/AIDS and sexual behavior among fishermen in Ajaokuta and Lokoja, Kogi State. Cross-sectional survey design was used for this research, and systematic random sampling was used as the sample method. Their findings demonstrated the ignorance and dangerous behavior of the Ajaokuta fishermen. Nwaneri et al. 2018 used a cross-sectional descriptive survey with 460 unmarried respondents aged 15 to 30 yield were recruited from a federal university in Enugu State with the aid of multistage sampling to report poor knowledge of the disease and bad practices on HIV/AIDS. Poor knowledge and inadequate preventative procedures were observed by Obarisiagbon et al., 2019, in their investigation of the state of Edo [15-35].

# Conclusion

The study delved into exploring the factors associated with the knowledge, attitude, and practices of youths in Bonny concerning HIV. It revealed that there was a high level of knowledge regarding HIV and its transmission. However, the study identified a gap in knowledge related to the prevention of HIV, with a corresponding poor practice of preventive measures. Moreover, the research indicated that the attitude of the youths towards HIV/AIDS and people living with AIDS was fair. Despite this fair attitude, there was a notable deficiency in the implementation of preventive practices [36-55].

# Recommendation

The Knowledge, attitude, and practice of people concerning HIV/AIDS are expected to be good. That is, the study result should been 10 perfection. On these premises, the recommendations below were made:

i. It is recommended that the knowledge on HIV/AIDS, its trans, mission, and prevention be improved upon. More understanding of what HIV/AIDS is, its nature, the mode of transmission, and the best preventive measures are needed. This can be achieved by creating more HIV/AIDS awareness among youths through the use of information, Education, and Communication (IEC) strategy of sharing information

using print (posters, flyers, and leaflets or interpersonal communication in a way that is suitable to the target population. The government and concerned agencies should be of help here [56-75].

- ii. On the attitude of people toward HIV/AIDS patients, it is recommended the observed trend be reversed. Poor attitude towards HIV patients is the root cause of stigmatization and discrimination. More usable manpower is lost to this act. Government and health agencies should carry out more enlightenment campaigns to the general population to dissuade negative attitudes and provide a welcoming-positive HIV-positive group.
- iii. It is recommended here that the practice of youths with HIV/ AIDS be improved. This can be achieved through a behavioral change communication strategy. Improved practice may guarantee a decrease in HIV prevalence.
- iv. Further enlightenment is still needed to educate the general populace about some practices that stem from 'harmless' traditions that fuel the spread of HIV. More effort should be channeled to the males since the females have better knowledge of HIV.

# **Conflict of Interest**

No conflict of interest is associated with this work.

# **Contribution of Authors**

We declare that this research work was done by the author(s) named in this article and all liabilities about claims relating to the content of this article will be borne by the authors. All authors read and approved the manuscript for publication.

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