The subject matter of the present study, ‘A Study on Knowledge, Attitude And Practice of nurses on HIV/AIDS Working In Government Health Institutions of Lower Assam’ was undertaken to find out the awareness of nurses regarding HIV/AIDS. At the initial stage, a conceptual framework was prepared to help the investigator to understand how to carry on the research study. Then aim and objectives of the study was also formulated.

**Aim:** To explore knowledge, attitude and practice of nurses who are working in government hospitals of Lower Assam.

**Objectives:**

- To assess the knowledge of nurses on HIV/AIDS
- To assess the attitude of nurses towards HIV/AIDS cases.
- Assessment of nurse’s practice in the working field to prevent spread of HIV infection and caring of their patients.
- To identify the factors those affect the knowledge, attitude and practice of nurses on HIV/AIDS.
- To sort out district wise ranking of nurse’s knowledge, attitude and practice on HIV/AIDS.
6.1. Summary of the study:

To realize these objectives, a descriptive study method was selected and sample population was taken from all categories of government institutions of Lower Assam. A tool was developed for the study and pre-testing was done in the same setting, but the respondents of this trial were excluded from the main study. In the core study, total 700 nurses from twelve districts of Lower Assam participated voluntarily by answering the questionnaire provided to them. Then data were compiled and statistical analysis was done through SPSS (2007 version).

The results showed that majority of participants were from age group of 31-40 years. Almost all participants were female and most of them were from Hindu community. Among the group, most of the participants were married. The general educational qualifications of the subjects ranged from matriculation to master degree. Nursing education of the participants from ANM courses to master degree level comprises the study group. Different categories of nurses ranging from auxiliary nurse, midwives, staff nurse, lady health visitors and ward sisters were included in the study. Most of the nurses had work experience of 10 years. Nearly half of the population of the study group did not attend any HIV/AIDS related training in their service period. It was found that the informal sources of acquiring information by the participants on HIV/AIDS were mainly from reading health related books and journals.
The assessment of the knowledge among the participants was recorded as follows: Very few nurses knew the full form of HIV and AIDS. Few of them could correctly respond on preventive measures of HIV transmission. A small portion were aware of mother to child transfusion and had knowledge of necessary measures to keep one healthy after getting HIV infection. On the other hand, more than half of them were aware of incubation period of HIV, some of them (45 percent) could correctly answer about opportunistic infection, a considerable number were aware about high risk behaviour and more than 80 percent knew the mode of HIV transmission. A group of (41 percent) could answer a question on blood transfusion. Almost same number of the respondents had knowledge about signs and symptoms of HIV; more than half of them were aware of the process of managing a needle prick injury and could identify anti-retroviral agents. The factors such as nursing educational background, general educational background, age, marital status, HIV/AIDS training, working experience, and uses of media did not bear any significant impact on knowledge of the populace. On the other hand factors such as Religion, Caste, Designation, Working institutions were observed to have significant impact on the knowledge of the participants.

Attitude Assessment of the respondents showed that majority of population refused to believe the concept that suffering from HIV is a consequence of one’s past life sin. Nearly half of the population disclosed that they were
indecisive to reveal the HIV positive status of the patient when it was first detected, but they revealed that they would like to take care of their patients having HIV positive status, or those who are suffering from AIDS. It was also clear that majority of the participants preferred to take preventive measures for the infection and were happy to educate patients for the avoidance of opportunistic infections. The mainstream populace expressed their negative attitude towards a person who indulges in unhealthy lifestyle of having multiple sex partners. Moreover a portion of these health workers blamed the women population for the susceptibility of the infection as they do not have courage to raise up their voice for safer sex .Still some of the respondents showed empathy towards HIV infected mothers as their unborn child could be an innocent victim of the infection. A group of nurses strongly expressed the desire to test their blood for HIV positivism to avoid undesirable consequences of the disease, and the greater part of population strongly expressed their opinion against injection drug users. Lastly, a small section of them agreed that they would take part in spreading HIV virus to others if they themselves get infected by the virus. It was also revealed from the study that nursing educational background, general educational background, age factor, religion, designations of the employee, HIV/AIDS training had significant impact on attitude and caste or marital status showed no influence on the attitude of the staff members.
Concerning the practice of nurses, the results came out like this: They took all precautionary measures to prevent spread of infection at their working field, never escaped from taking care of their patients, educated patients, relatives, and friends on safer sex, kept confidentiality in relation to HIV positive status. Regarding taking care of disposal of hospital wastes they expressed that they took care of hospital wastes like syringe, needles, bandages and other things and disposed them safely and discussed/taught on safe disposal of hospital wastes. The respondents also stated that they use to take all precautionary measures for any needle prick or any cut injury, provided mental support while revealing of HIV positive status for the first time, advised patients about healthy habits to combat against opportunistic infections. It was observed that age, HIV/AIDS training and Work experience had significant impact on the practice of nurses at their working field.

The result of the analysis showed that training on HIV/AIDS had highly significant impact on the practice of nurses in their working field. The district-wise ranking regarding knowledge, attitude and practice among the respondents were recorded as follows: Knowledge assessment ranking - Barpeta was at the first rank, Dhuburi was at the second rank, Kamrup district was at the third rank. The Attitude assessment ranking - Nalbari was at the first, Baska was at the second rank, Kamrup Metro was at the third position and lastly, the practice assessment ranking - Baska was at the first rank, Nalbari and Chirang is at the second and third rank.
6.2. Conclusions:

The study of nurse’s knowledge, attitude and practice and its relation to the demographic variables and overall mean scorings of knowledge attitude and practice revealed that the nurses of Lower Assam exhibited moderately good knowledge on the current issues, flaxen attitude to work with people with HIV and AIDS and comparatively lower level of practice at their working field. It was observed that Religion, Caste, Designation, Working institutions had significant impact on the knowledge of the participants. Nursing educational background, general educational background, age factor, religion, designations of the employee, HIV/AIDS training had significant impact on attitude and caste, marital status had significant control on the attitude of the staff members. Age, HIV/AIDS training and Work experience had a major impact on practice levels of the nurses at their working field. It is said that among the knowledge, attitude and practice of a person, attitude always comes first; since good attitude can easily bring about change in the knowledge and practice of any one. Proper recognition of the good effort done by the employees always proves to be encouraging for developing positive attitude of nurses towards better delivery of health care services. Although this state is still considered as a low prevalence zone for the dreaded infection, still it is considered as an extremely vulnerable zone because of its location, socio-economic and cultural factors that integrates to the speedy spread of the disease. Like
other parts of the globe, the health sector of this province is also facing lots of problems in combating the disease. Until a vaccine or an effective treatment becomes available, fighting the pandemic seems to be impossible in the current scenario. To prevent further spread of HIV infection, the only existing method seems to be the education and training of nurses, because through them it is possible to educate patients, their families and friends regarding the prevention of HIV and AIDS transmission. This implies that nurses are in a pivotal position regarding the prevention of HIV and AIDS transmission. Accordingly, they need to reduce both personal and occupational risks of becoming infected with HIV themselves. Hence, the development of educational guidelines and training of nurses is necessary. Before in-service education, guidelines on the prevention of HIV and AIDS transmission can be developed, any knowledge deficit and negative attitudes of nurses regarding the prevention of HIV and AIDS transmission should be identified.

6.3. Recommendations:

Result of this report can be utilized to enhance nursing care by:-

1) Recruiting of new nurses in government service, as young nurses have more favorable attitude towards caring HIV and AIDS patients.

2) Opening of promotional avenue should be kept open for all nurses on their performance basis, which will encourage nurses to work
properly as this report shows designation as an influencing factor for positive attitude.

3) Encouraging team work should be encouraged in health care settings to enhance cohesiveness among health workers for better knowledge, attitude and practice.

4) Creating provision for recognition of nurses’ good work with encouragement and rewards.

5) Training of nurses especially because they do not have required trained knowledge.

6) Improving working environment by providing available supplies to maintain universal precautions.

7) Providing for close monitoring of nurses in their working field for guidance and supervision.