

ATTITUDE OF HEALTH WORKERS TOWARDS CARE OF HIV/AIDS PATIENTS ATTENDING CLINIC AT FEDERAL MEDICAL CENTRE, MAKURDI, BENUE STATE

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ABSTRACT

This research work was carried out on attitude of health workers towards care of HIV/AIDS patients attending clinic at Federal Medical Centre, Makurdi, Benue State. The objectives of the study are: to assess the attitude of health workers towards care of HIV/AIDS patients, determine factors influencing the attitude of health workers towards care of HIV/AIDS patients and identify ways of enhancing the attitude of health workers towards care of HIV/AIDS patients attending clinic. The study was anchored on the Dorothy Orem's Theory of Self-Care. A descriptive design was adopted for the study. Taro Yamane's Formula was used to select a sample size of 271 respondents from a target population of 841 health workers which were used to collect relevant data. The data collected through a questionnaire drafted to measure variables of the study with the aid of closed-ended questions and questions designed on a 4-point Likert scale. Findings revealed that out of 271 health workers, 243 (89.7%), 237 (87.5%), 259 (95.6%) and 251 (92.6%) said they are not am afraid of taking care of HIV positive patients, they will treat patients with HIV if given a choice, HIV and AIDS patients are not a waste of medical resources, and they believe HIV and AIDS patients deserve special treatment, respectively. Also, 147 strongly agreed that level of medical education, 132 strongly agreed that knowledge about HIV and perceived infection risk at work, and 123 strongly agreed with exposure to people living with HIV as factors influencing the attitude of health workers towards care of HIV/AIDS patients. The study recommended that regular, comprehensive training on HIV/AIDS for all healthcare staff should be organized to improve knowledge, foster positive attitudes and correct misconceptions. Also, education should aim to shift attitudes from fear and stigmatization to empathy and professional care, ensuring that all patients receive the same quality of service regardless of their HIV status.

Keywords: Attitude, Health Workers, HIV/AIDS, Patients, Clinic

Introduction

The Human Immune Deficiency Virus (HIV) and Acquired Immune Deficiency Syndrome (AIDS) pose a serious challenge to mankind as the burden of HIV/AIDS remains unacceptably high globally with 36.7million people living with HIV, 1.8million people newly infected with HIV, and 1.0 million AIDS-related deaths. Noticeably, the burden of HIV/AIDS is disproportionately high in sub-Saharan Africa with the continent accounting for 64% of new HIV infections and 70.1% of AIDS-related deaths (Arisegi & Tomori, 2019). HIV/AIDS is a serious public health problem in Nigeria, and the country has the second highest burden of HIV infection in the world with about 3.6million people infected (NACA, 2017). The Government of Nigeria through the National Agency for the Control of AIDS (NACA) have committed huge amount of resources to fighting the epidemic in the country in collaboration with other stakeholders. People living with HIV/AIDS require ongoing health care services as they are potentially at increased risk of developing disorders including cardiovascular and liver disease, accelerated bone loss, metabolic disorders, amongst others. Those able to access medical care are living longer and have improved their health. Thanks to antiretroviral medications. These patients are experiencing acute HIV-related chronic episodes and other types of illness that can require hospitalization and/or supportive care arrangements (Ledda et al., 2017).

Health workers are key players in the efforts of ending HIV/AIDS as a global health problem. The Joint United Nations Programme on HIV/AIDS (UNAIDS) coordinates many efforts and resources in cooperation with governments and non-governmental organizations throughout the world to help minimize the spread of the infection, as well as provide medication for people living with HIV. So health workers are encouraged to care for HIV/AIDS patients and conduct counselling on safety measures that minimize the rate of infection. This involvement has compelled health workers to scrutinize their own practice for ways to keep up-to-date with current knowledge of prevention and treatment modifications of HIV (Yadzir et al., 2021). However, feelings of fear and avoidance of people living with HIV still prevailed among health workers. These negative attitudes or prejudice, as perceived by people living with HIV are associated with a low utilization of HIV care services, poorer ART adherence and thus poorer treatment outcomes (Pitasi et al., 2018).

Care of HIV-positive and AIDS patients requires special skills and attitudes. However, Ishimaru et al. (2017) stated that health workers including nurses hold negative attitudes towards people living with HIV/AIDS. Such negative attitudes come in the form of discrimination and stigma. Stigma and discrimination undermine all efforts to reach out to people with HIV information, HIV testing, treatment, and HIV preventive modalities to reduce their risk of infection.

Negative attitudes in health workers towards people living with HIV manifested through practices, including denial of care, verbal abuse, lower standards of care, placement of a patient at the end of a queue, disclosure of a patient's HIV status to colleagues/ family members without consent, irrespective of when people living with HIV arrived at the facility and gossiping about the patient. Very often, attitudes are generally associated with the level of knowledge and those who hold negative attitudes are often those with lower levels of knowledge regarding HIV. However, people may have knowledge, but the knowledge itself does not necessarily translate into their attitudes or practices (Yadzir et al., 2021).

The attitude of health workers influences the willingness and ability of people living with HIV to access healthcare and influences the quality of healthcare they receive. Health professionals' attitudes may indicate their level of preparedness in caring for HIV/AIDS patients.

The attitude of health professionals toward HIV patients have numerous causes including type of medical profession, lack of knowledge about the modes and risk of HIV transmission, judgmental attitudes, assumptions about the sexual lives and perceived immoral behaviour of people living with HIV, occupational risks from handling non-sterile injecting equipment or accidental exposure to blood or blood products, lack of access to supplies and training in infection prevention and standard precautions, despite evidence that nonsexual contact with HIV/AIDS positive individuals and also taking careful precautions while working with blood, blood products and other body fluid of HIV patients carry no risk of HIV transmission (Esan et al., 2022).

The frequency of exposure to HIV patients, blood and body fluids among health workers vary according to their occupation, procedures performed and use of preventive measures. However, absence of assurance that they will be protected from the virus and without access to drugs for post-exposure prophylaxis, health workers may engage in behaviour that can prevent HIV patients and other vulnerable individuals from receiving lifesaving care and support. This can impact negatively on interventions and act as barriers to adherence to antiretroviral therapy among people living with HIV (Esan et al., 2022). Therefore, this study on attitude of health workers towards care of HIV/AIDS patients attending clinic at Federal Medical Centre, Wadata, Makurdi, will pave way for a better understanding of the phenomena under study.

Statement of the Problem

Since the beginning of the HIV epidemic, approximately 78 million people have been infected with HIV, with an approximate 35 million people dying due to AIDS-related illnesses and an estimated 36.7 million people living with HIV worldwide by the end of 2015 (UNAIDS, 2018). In 2017 the number of people newly infected with HIV and the number of people who died from AIDS-related illnesses was approximately 2.1 million and 1.1 million, respectively (Boakye & Mavhandu-Mudzusi, 2019).

The burden of Human Immunodeficiency Virus and Acquired Immune Deficiency Syndrome (HIV/AIDS) remains unacceptably high globally with 36.7 million people living with HIV, 1.8 million people newly infected with HIV, and 1.0 million AIDS-related deaths. Noticeably, the burden of HIV/AIDS is disproportionately high in sub-Saharan Africa with the continent accounting for 64% of new HIV infections and 70.1% of AIDS-related deaths (UNAIDS, 2017).

Although some successes have been recorded, but the burden of HIV/AIDS remains high in Nigeria. Thus, the current National Strategic Framework 2017-2021 was designed to fast-track the national response towards ending AIDS in Nigeria by 2030. However, it is quite worrisome that despite the huge amount of resources committed to making the vision of an AIDS-free Nigeria with zero new infections and zero AIDS-related discrimination and stigma a reality, the reverse is true, as the services are grossly underutilized due to the prevalent stigma and discrimination against persons living with HIV/AIDS (Arisegi & Tomori, 2019).

Studies have established strong links between attitude of health workers towards people living with HIV and poor utilization of HIV counseling, screening and treatment services, as well as poor compliance with HIV infection prevention practices (Arrey et al., 2017; Fiorentino et al., 2018). It is therefore not surprising but very disturbing that a good number of people living with HIV are still not making themselves available for the needed HIV/AIDS care. In the study area, the researcher got reports that some patients that some infected people are not receiving HIV/AIDS care. From the disclosure that the attitude of health workers towards people living with HIV/AIDS can be an obstacle to treatment and care thereby impeding efforts to combat the disease, it became imperative to conduct an empirical study to find out if the attitude of health workers can be responsible for non-use of HIV/AIDS care. Hence this study on attitude of health workers towards

care of HIV/AIDS patients at Federal Medical Centre, Wadata, Makurdi, Benue State. It is hoped that the recommendations will help improve the attitude of health workers towards HIV/AIDS patients and the overall fight against the ailment.

Aim and Objectives of the Study

The study investigated attitude of health workers towards care of HIV/AIDS patients attending clinic at federal medical Centre, Makurdi, Benue State. Specifically, this study seeks to achieve the following objectives:

- i. To assess the attitude of health workers towards care of HIV/AIDS patients attending clinic at Federal Medical Centre, Makurdi, Benue State.
- ii. To determine factors influencing the attitude of health workers towards care of HIV/AIDS patients attending clinic at Federal Medical Centre, Makurdi, Benue State.
- iii. To identify ways of enhancing the attitude of health workers towards care of HIV/AIDS patients attending clinic at Federal Medical Centre, Makurdi, Benue State.

Research Questions

- i. What is the attitude of health workers towards care of HIV/AIDS patients attending clinic at Federal Medical Centre, Makurdi, Benue State?
- ii. What are the factors influencing the attitude of health workers towards care of HIV/AIDS patients attending clinic at Federal Medical Centre, Makurdi, Benue State?
- iii. What are the ways of enhancing the attitude of health workers towards care of HIV/AIDS patients attending clinic at Federal Medical Centre, Makurdi, Benue State?

Theoretical Framework

This study is anchored on Dorothy Orem's Theory of Self-Care. The Theory of Self-Care developed between 1959 and 2001. The theory postulates that each individual initiates and performs activities aimed at maintaining life, health, and well-being. It emphasizes that clients' self-care need is a requirement of everybody; man, woman and children. Nursing becomes necessary when the client is unable to fulfill biological, psychological, developmental or social needs. Sometimes, nurses help one to maintain a required self-care by performing some but not all measures by supervising others who assist the patient and by instructing individuals as they gradually move towards self-care. The theory of self-care includes: self-care, self-care agency, therapeutic self-care demand and nursing agency. Health workers need to relate and communicate with patients in a friendly and caring manner. They need to treat patients well and avoid being rude, harsh and abusive. Health workers must endeavour to demonstrate a high sense of professionalism and shun all unethical behaviours as they handle issues and manage the affairs of HIV patients.

Methodology

Descriptive design was adopted in the research. It enables researchers to accurately collect all the relevant information relating to the problem under study. The research setting of this study was Federal Medical Centre, Wadata, Makurdi, Benue State. Federal Medical Center Makurdi (FMC). The population of the study comprises all the frontline health workers who usually come in contact with patients every day and have volunteered to give information to aid this study. The sample of the study was 271 health workers out of 841. This was calculated using Taro Yamane's Formula to determine reliable sample size. Convenience sampling, which is a non-probability sampling technique where participants are selected based on ease of availability and proximity to the researcher. The instrument that was used in this study was a questionnaire. A total of 271 copies of the questionnaire were administered to the respondents and retrieved on the spot using

face-to-face method to ensure high return rate. The data collected was analyzed using descriptive statistical measures and presented in simple frequency tables and their percentages shown.

Presentation Of Results

Table 1: Age Distribution of Respondents

Age	Frequency (f)	Percentage (%)
21-30	40	14.8
31-40	114	42.1
41 – 50	74	27.3
51 and above	43	15.8
Total	271	100
Gender		
Male	102	37.6
Female	169	62.4
Total	271	100
Religion		
Christianity	211	77.8
Islam	56	20.7
Others	4	1.5
Total	271	100
Tribe		
Tiv	120	44.3
Idoma	92	33.9
Igede	40	14.8
Others	19	7
Total	271	100
Marital Status		
Single	78	28.8
Married	162	59.8
Divorced	9	3.3
Widowed	22	8.1
Total	271	100
Health Professional Status		
Medical Doctor	19	7
Nurse/midwife	128	47.2
Lab Technician	27	10
Others	97	35.8
Total	271	100
Work Experience (Years)		
1-5	28	10.3
6-10	61	22.5
11-15	81	29.9
16-20	68	25.1
21 years and above	33	12.2
Total	271	100

Source: Field survey, 2025

The majority of respondents 114 which represents 42.1% are within the age bracket of 31–40 years, 74 (27.3%) were 41 – 50, while 43 (15.8%) were between 51 years and above. On gender, most of the respondents 102 (37.6%) were male and the remaining 169 (62.4%) were female. Concerning religion, the majority of respondents 211 which represents 77.8% are Christians, 56 (20.7%) are Muslims and 4 (1.5%) practice other religions. Regarding tribe, the majority of respondents 120 which represents 44.3% are Tivs, 92 (33.9%) are Idomas, while 40 (14.8%) are Igede by tribe. On marital status, majority of respondents 162 which represents 59.8% are married, 78 (28.8%) are single, while 22 (8.1%) are widowed. Concerning health professional status, majority of respondents 128 which represents 47.2% are nurse/midwives, 97 (35.8%) are other health workers, while 27 (10%) are lab technicians. Lastly, regarding work experience (years), majority of respondents 81 which represents 29.9% have 11-15 years work experience, 68 (25.1%) have 16-20 years work experience, while 61 (22.5%) have 6-10 years work experience.

Table 2: Respondents assessment of health workers' attitude towards care of HIV/AIDS patients.

Item	Options	Frequency (f)	Percentage (%)
I am afraid of taking care of patients that are diagnosed HIV positive	Yes	28	10.3
	No	243	89.7
If I am given a choice I will not treat a patient with HIV	True	34	12.5
	False	237	87.5
HIV and AIDS patients are a waste of medical resources	Yes	5	1.8
	No	259	95.6
	I cant tell	7	2.7
I believe that HIV and AIDS patients deserve special treatment	Yes	251	92.6
	No	20	7.4
As healthcare providers we should not discuss the status of HIV positive patients with people not involve in their care	Agree	252	92
	Disagree	7	2.7
	Undecided	12	4.4
As health care providers we need to eliminate shame and rejection associated with HIV	Yes	257	94.8
	No	14	5.2

Source: Field survey, 2025

Table 2 above assessed health workers' attitude towards care of HIV/AIDS patients and out of 271 (100%) respondents, 243 (89.7%) said they are not am afraid of taking care of HIV positive patients, 237 (87.5%) said they will treat patients with HIV if given a choice, 259 (95.6%) said HIV and AIDS patients are not a waste of medical resources, 251 (92.6%) said they believe HIV and AIDS patients deserve special treatment, 252 (92%) agreed that as healthcare providers they should not discuss the status of HIV positive patients with people not involve in their care, while 257 (94.8%) said as health care providers they need to eliminate shame and rejection associated with HIV.

Table 3: Responses on factors influencing the attitude of health workers towards care of HIV/AIDS patients.

Statement	SA	A	D	SD
Level of medical education is a factor influencing the attitude of health workers towards care of HIV/AIDS patients	147	78	37	9
Knowledge about HIV and perceived infection risk at work is a factor influencing the attitude of health workers towards care of HIV/AIDS patients	132	83	42	14
Exposure to people living with HIV is a factor influencing the attitude of health workers towards care of HIV/AIDS patients	123	94	39	15
Fear of contagion is a factor influencing the attitude of health workers towards care of HIV/AIDS patients	114	93	46	18
Social stigma is a factor influencing the attitude of health workers towards care of HIV/AIDS patients	120	78	50	23
Culture and religion are factors influencing the attitude of health workers towards care of HIV/AIDS patients	107	70	53	41

Source: Field survey, 2025

Among the 271 respondents, 147 strongly agreed and 78 agreed that level of medical education is a factor influencing the attitude of health workers towards care of HIV/AIDS patients. Similarly, 83 agreed and 132 strongly agreed that knowledge about HIV and perceived infection risk at work is a factor influencing the attitude of health workers towards care of HIV/AIDS patients. In addition, 94 agreed and 123 strongly agreed with exposure to people living with HIV is a factor influencing the attitude of health workers towards care of HIV/AIDS patients. Also, while 93 agreed and 114 strongly agreed with fear of contagion, 78 agreed and 120 strongly agreed with social stigma, and 70 agreed and 107 strongly agreed that culture and religion are factors influencing the attitude of health workers towards care of HIV/AIDS patients.

Table 4: Responses on ways of enhancing the attitude of health workers towards care of HIV/AIDS patients.

Statement	SA	A	D	SD
Education and training is a way of enhancing the attitude of health workers towards care of HIV/AIDS patients	152	74	34	11
Creating a supportive environment is a way of enhancing the attitude of health workers towards care of HIV/AIDS patients	144	78	37	12
Addressing specific issues is a way of enhancing the attitude of health workers towards care of HIV/AIDS patients	138	73	42	18
HIV stigma reduction interventions is a way of enhancing the attitude of health workers towards care of HIV/AIDS patients	153	81	27	10
Reorienting health systems is a way of enhancing the attitude of health workers towards care of HIV/AIDS patients	157	72	33	9

Source: Field survey, 2025

Among the 271 respondents, 152 strongly agreed and 74 agreed that education and training is a way of enhancing the attitude of health workers towards care of HIV/AIDS patients. In the same vein, 78 agreed and 144 strongly agreed with creating a supportive environment as a way of enhancing the attitude of health workers towards care of HIV/AIDS patients. In addition, 73 agreed and 138 strongly agreed with addressing specific issues as a way of enhancing the attitude of health workers towards care of HIV/AIDS patients. Also, while 81 agreed and 153 strongly agreed with HIV stigma reduction interventions, 72 agreed and 157 strongly agreed with reorienting health systems as ways of enhancing the attitude of health workers towards care of HIV/AIDS patients.

Conclusion

In line with the findings of the study, it was discovered that respondents have a positive attitude towards care of HIV/AIDS patients. It was also discovered that level of medical education, knowledge about HIV and perceived infection risk at work, exposure to people living with HIV, fear of contagion, social stigma, and culture and religion are factors influencing the attitude of health workers towards care of HIV/AIDS patients. Furthermore, the results revealed that education and training, creating a supportive environment, addressing specific issues, and reorienting health systems are ways of enhancing the attitude of health workers towards care of HIV/AIDS patients.

Recommendations

Based on the results of the study, the following recommendations were made:

- i. Regular, comprehensive training on HIV/AIDS for all healthcare staff should be organized to improve knowledge, foster positive attitudes and correct misconceptions.
- ii. Training should emphasize the correct and consistent practice of universal precautions to reduce the fear of transmission and encourage confidence in providing care.
- iii. Education should aim to shift attitudes from fear and stigmatization to empathy and professional care, ensuring that all patients receive the same quality of service regardless of their HIV status.
- iv. Facilities must implement policies and training to actively combat discrimination, ensuring that patient rights are protected and all individuals have equitable access to quality healthcare.

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