

CHAPTER 1

INTRODUCTION

Background and significance of research problem

Acquired Immunodeficiency Syndrome (AIDS), caused by Human Immunodeficiency Virus (HIV), is a serious disease which generates devastating consequences. It can be transmitted from person to person through sexual, parenteral, and prenatal routes (WHO, 1993). Since AIDS was first diagnosed in 1981 in Los Angeles and New York cities (Judson & Vernor, 1988), it has developed into a worldwide epidemic of world populations.

In 1993, there were only 850,000 cases of AIDS reported to the World Health Organization (WHO) from over 180 countries and territories. In fact, in many places the epidemic was out of control (Laurence, 1999). With the 5.8 million additional new infections that have occurred, there were 33.4 million people who are living with HIV and AIDS in the world by the end of 1998 (WHO, 1999). About 95% of HIV infections occurred in Asia, Sub-Saharan Africa, and Eastern Europe (Laurence, 1999). In the United States, as of December 1998, there were 688,200 AIDS cases reported to the Centers Disease Control (CDC, HIV Surveillance Report, 1998). According to the report of the United Nation AIDS (UNAIDS) and WHO on November 23, 1999 in London there are 50 million people infected with HIV worldwide since AIDS was

discovered in 1980, and 16 million of them have died. In 1999, an additional 5.6 million children and adults in the world became infected by HIV (UNAIDS, 1999). Based on other statistics, in 1999 over 2.6 million people died with AIDS in the world. This was the highest record during the last twenty years (Xiao, 1999). There have been many studies conducted to seek for treatment and a vaccine to control the AIDS epidemic, but the results have not been completely effective. AIDS has become the most significant public health crisis of the century.

China is a country of 1.2 billion people. The first AIDS case in China was reported in 1985 in Beijing. As of August 1996, there were 4,305 HIV/AIDS cases reported, and by the end of June 1999, there were 10,676 HIV/AIDS cases reported throughout the country, and by the end of 1999, the cases with AIDS were 17,316 (Ministry of Public Health of China, 1999). With the limitations regarding current diagnosis and reporting systems of HIV/AIDS infected cases the official report is believed to be a fraction of the actual number. According to the China AIDS Prevention Center report in 1999 there were about 400,000-500,000 cases of HIV infection throughout the country.

AIDS now kills more adults worldwide than any other infection. The HIV infection rate has increased by 10% from 1996 to 1997 worldwide. The rate of infections is greater among youth (Laurence, 1999). Centers for Disease Control (CDC, 1998) reported that the total adults and adolescents infected with HIV in the United States were 679,736. Twenty

percent of this number is aged between 13 to 24 years old. These young people are both an important target group and a potential resource for the prevention of HIV infection (WHO 1992).

The world Health Organization (1992) states that adolescence is a period of profound physical and psychological change during which they learn to assume control of their own lives and make mature decisions. However, rapid changes in society including urbanization, industrialization, increased communication and travel, the spread of nontraditional values through the mass media and the decline of the influence and support of the extended family have given many adolescents a wider range of behavior and some behavior may be dangerous. For example sexual behavior, experimenting with injectable drugs or skin-piercing instruments, may lead to HIV infection (WHO 1992).

In addition, adolescents often misunderstand the concepts of invulnerability to HIV as they venture forward on their own (Nelson, 1995). Nelson further stated that adolescents strive to be accepted by peers and society while asserting their individuality and independence. As a result, they often fail to incorporate risk-reducing measures into their own behavior. For these reasons, adolescents, persons aged 13 to 21 years old, have been catastrophically hit by HIV infection and AIDS. The fact that an asymptomatic period of HIV infection lasts 5 to 10 years before the symptomatic disease appears indicates that many adults aged 20 to 29 years with AIDS were initially infected when they were

adolescents (Hein, 1990). Currently, AIDS is the sixth leading cause of death among the age group of 15 to 24 years (Carasso, 1998). The major priorities of the United Nations AIDS (UNAIDS) focused on young people regarding the prevention of HIV and AIDS on World AIDS Day 1999 (Carmichael, 1999).

The world Health Organization estimates that by the end of the year 2000, 42% of global HIV infection will occur in Asia and Oceania (Aboagye-kwarteng & Moodie, 1995). More than 95% of all HIV-infected people live in developing countries. At least one third of those infected with HIV are 10 to 24 years of age, and approximately half of the new HIV infections are in this age group (Carmichael, 1999).

China is a geographically large developing country in Asia. There have been great social, cultural, economical and political changes in China. Beijing is the capital and one of the biggest cities in China. Since 1978 when China announced that it was an open country, many foreigners as well as western culture come into China while bringing advanced technologies. As a consequence, there has been an impact on Chinese traditional culture. The impact has been on people's values, beliefs and behavior, especially adolescents. They are interested in everything new, and they are willing to explore and try to do everything. They easily accept information from mass media including movies, magazines, and television and tend to adopt what has come without proper judgement. At the same time, the relationship between parents and adolescents is changing. In the past,

most adolescents obeyed their parents according to Chinese traditional culture, which maintains that it is a virtue to be obedient to parents. They seldom thought of or made any decisions by themselves. With the opening and changing society in China, western culture has been introduced. Adolescents greatly changed in their way of life and way of thinking. On the other hand, there has also been some changes in Chinese parents' thinking. They accept western concepts in some aspects. For example, when a child grows up to 18 years old he or she will be treated as an adult. They will try to provide some opportunities for their children in order to make them independent.

Nowadays, adolescents in China learn to assume control of their own lives and make mature decisions for themselves in light of the consequences of western culture. They begin to separate from their families for various reasons. In Beijing, many adolescents will go to other cities to study or stay in the university's dormitory and become more independent.

The changes of adolescents include not only their thoughts but also their behavior. For example, they prefer to eat fast food, wear luxurious clothes, watch western movies and listen to modern music. In addition, many entertainment places have been established in Beijing, including night clubs, coffee shops, and saloons. Adolescents go to these places for recreation during the weekend, holidays or other occasions. These places provide opportunities for young males and females to get to know

each other, and may lead to dating and end up with sexual relationships. Based on the reviewed literature, use of condoms is not common in these group of adolescents who are not married (Wolfert, 1993). They are reluctant or shy to purchase condoms from shops. This behavior puts them into risky situations for contracting HIV and AIDS. In China, 6.6% of male adolescents and 1.7% of female adolescents have had sexual intercourse (Chen, Zhang, Li, & Yang, 1997).

Studies regarding knowledge, attitude and behavior among adolescents have been conducted mostly in western countries. For knowledge regarding HIV/AIDS, the findings of DiClemente, Zorn, and Temoshok, (1986, 1987), indicated that adolescents have inadequate knowledge. Brown and Lourie, (1994); Friesen and coinvestigators (1996); Davis, Noel, Chan, and Wing, (1998), revealed that although there was a high level of knowledge regarding HIV and AIDS in previous studies, there is much misinformation and misconception among adolescents. For attitudes regarding AIDS, fears of contagion and misconception of AIDS were cited as a primary concern by adolescents (DiClemente et al., 1986, 1987). Adolescents' attitudes of invincibility may increase their risk of HIV transmission, especially when combined with their misconceptions and misinformation about AIDS (Lawrance, Levy, & Rubinson, 1990). And also, many studies concerning adolescents have focused on risk behavior for contracting HIV (Carasso, 1998). Behaviors common to the developmental stage of adolescents may put them at risk for contracting HIV (Kaplan, & Schonberg, 1994).

In China, few studies have been done to investigate adolescents' knowledge, attitudes and risk behaviors regarding AIDS. This study aimed at describing knowledge, attitude and risk behaviors regarding AIDS among adolescents aged 18-21 years. The findings of the study will provide basic information for nurses and health care providers to plan for appropriate intervention, to enhance knowledge and positive attitudes regarding HIV/AIDS to prevent risk behaviors among adolescents in China.

Objectives of the study

1. To describe knowledge regarding HIV/AIDS among Chinese adolescents.
2. To describe attitudes regarding HIV/AIDS among Chinese adolescents.
3. To describe risk behaviors regarding HIV/AIDS among Chinese adolescents.

Research questions

1. What is the knowledge regarding HIV/AIDS among Chinese adolescents?
2. What are the attitudes regarding HIV/AIDS among Chinese adolescents?
3. What are the risk behaviors regarding HIV/AIDS among Chinese adolescents?

Scope of the study

The study was conducted on selected adolescents who studied in the second, third and fourth year of two urban universities in Beijing. The data collection was done during December 1999 and January 2000.

Definition of terms

- Knowledge regarding AIDS** An understanding of the current information about HIV/AIDS including causal agent, transmission, manifestation, treatment and prevention. In this study, knowledge regarding HIV/AIDS will be measured using an instrument developed by the investigator based on the literature review.
- Attitude regarding AIDS** The mental network of concepts, beliefs, feelings and actions regarding AIDS. In this study, attitude regarding HIV/AIDS will be measured using instrument modified by the investigator based on the questionnaire developed by DiClemente, Zorn, Temoshok, (1986).
- Risk behavior regarding AIDS** Practices or activities which put the individual at risk of contracting the AIDS infection. In this study, risk

behavior regarding HIV/AIDS will be measured using the instrument developed by the researcher based on the literature review.

Adolescent

Male and female 18-21 years old studying in the second, the third and the fourth years of university.

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