

CHAPTER IV

RESULTS

This study involved 360 registered nurses. There were 17 who had no responses or gave incomplete information, and they were eliminated. Hence, the data obtained from 343 participants was analyzed (a response rate of 95.27 %) for the results of this study.

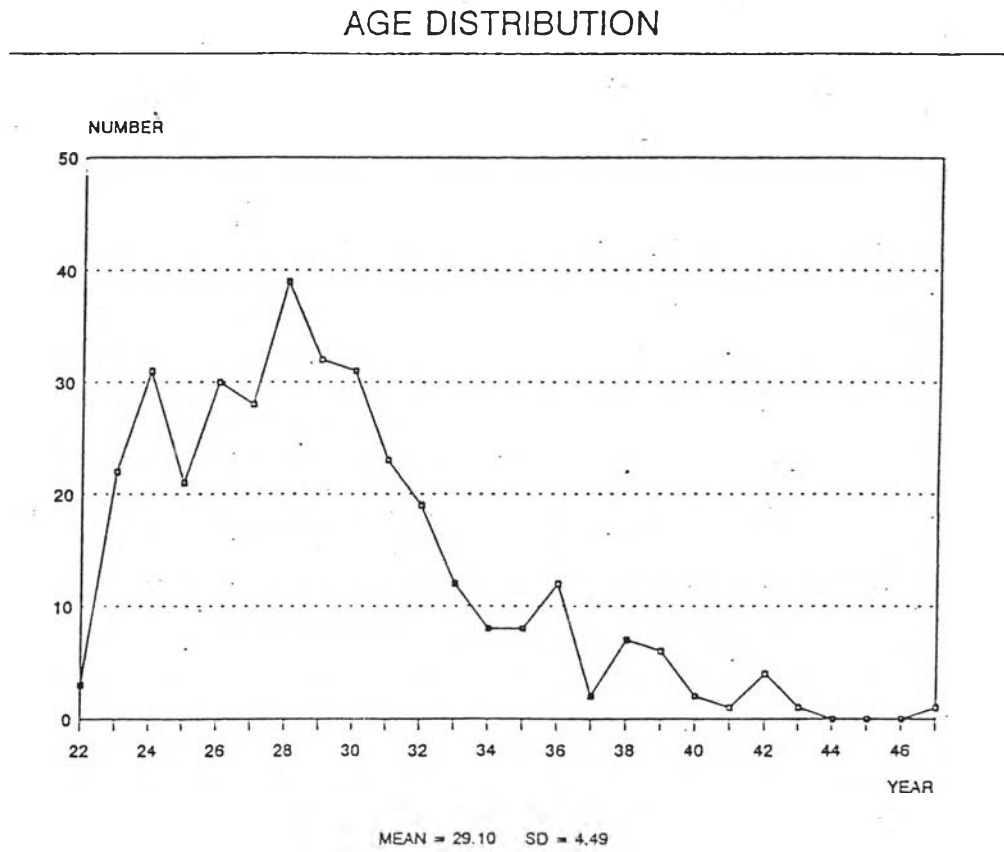
The following tables and figures present descriptive statistics of the results.

Table 4.1 Frequency and Percentage Analyses of Demographic Characteristic of the respondents. (N = 343)

Demographic characteristics	NO.	%
Sex		
Female	339	98.8
Male	4	1.2
Marital status		
Single	219	63.8
Married	120	35.0
Separated	3	0.9
Position		
Head nurse	28	8.2
Staff nurses	315	91.8

Thus, most of the participants were female (98.8%), single (63.8%), and staff nurses (91.8%)

Figure 4.1 Age Distribution.



As shown in Figure 4.1, the average age was 29.10 years. The oldest and the youngest respondents were 47 and 22 years old, respectively.

Figure 4.2 Work Setting

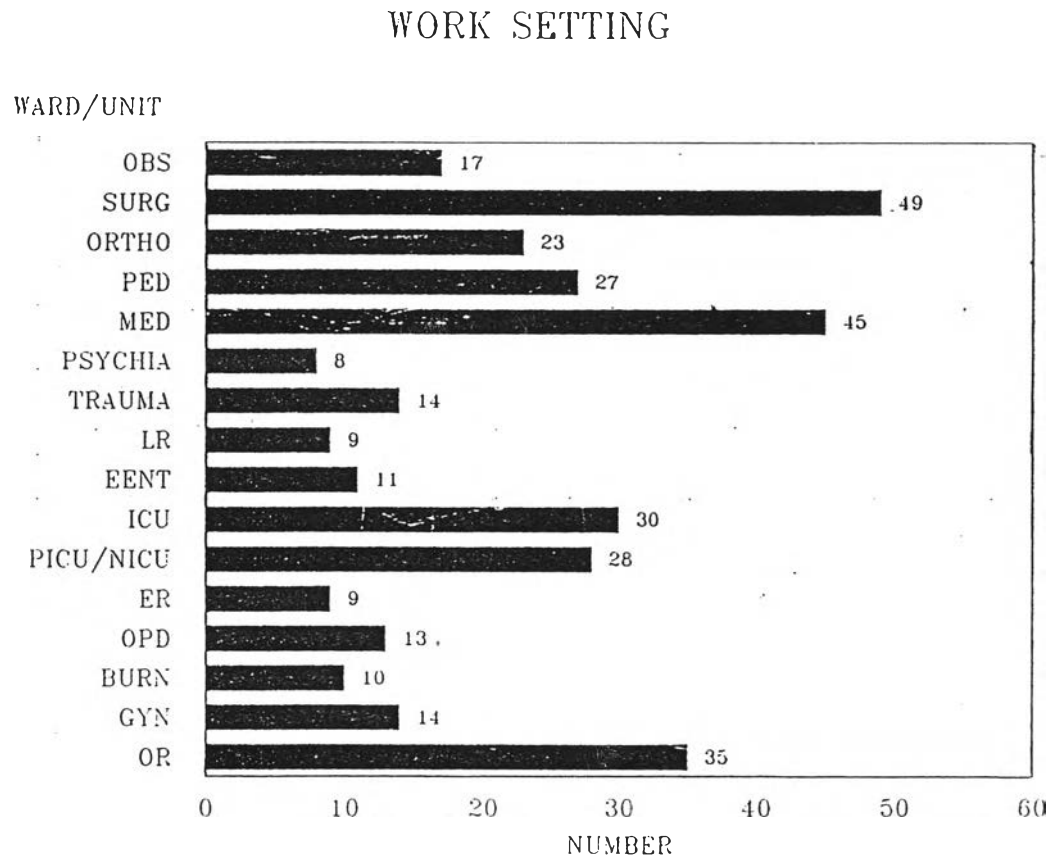
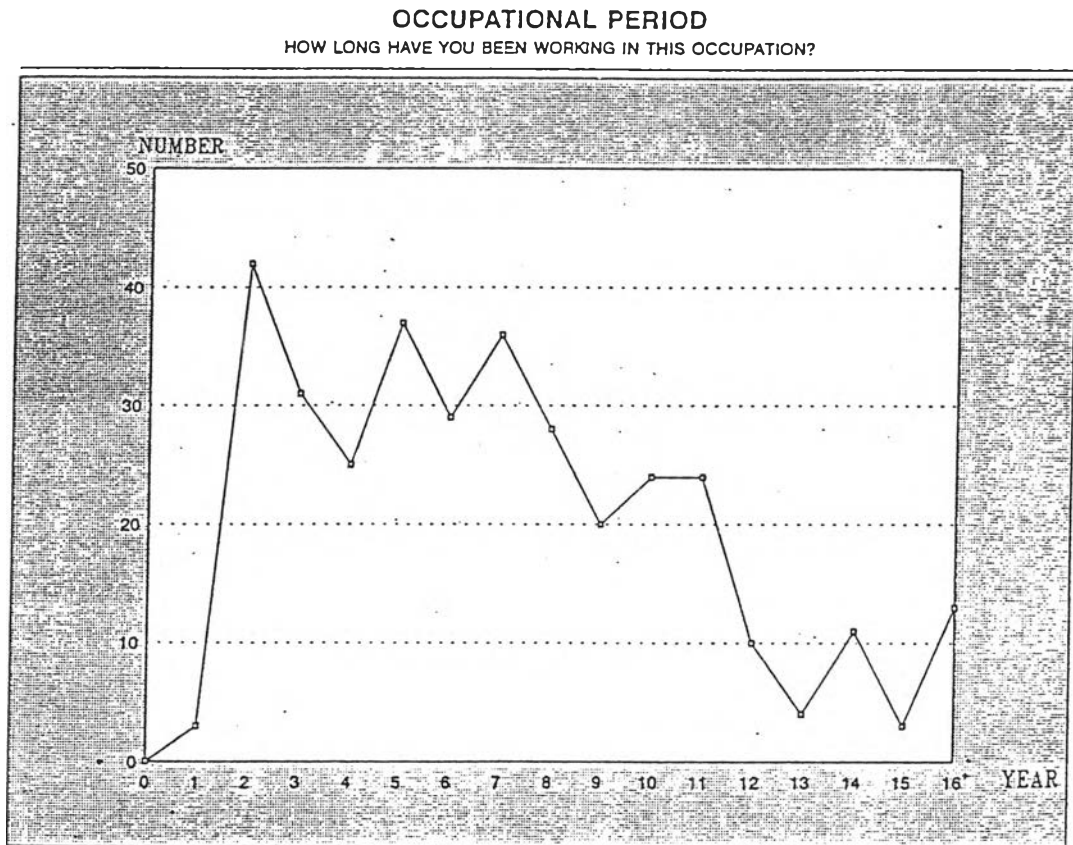


Figure 4.2 shows ward or unit distribution of participants (i.e. where they were working).

Figure 4.3 Occupational Period.



As shown in Figure 4.3, most respondents had worked in nursing for about 2 - 8 years. The average period was 6.71 years with a minimum of 6 months, and a maximum of 24.6 years.

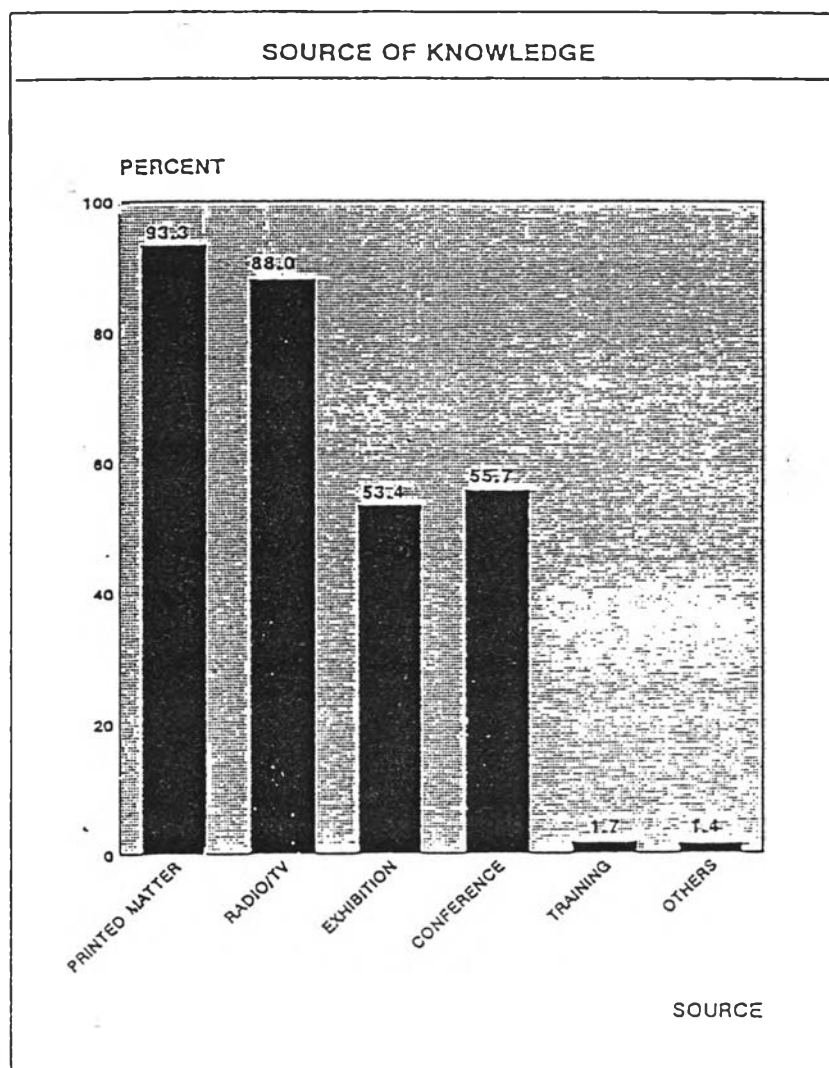
Table 4.2 Experiences in Direct Exposure to Patients' Exudate, In-service Accidents, and Experiences in Caring for HIV-infected Patient.

Type	Yes		Never	
	N	%	N	%
* Experience in direct exposure to patients' exudate	250	72.9	93	27.1
* In-service accidents	302	88.0	40	11.7
* Experience in caring for HIV-infected patient	305	88.9	38	11.1

As shown in Table 4.2, 72.9 % of target subjects had direct exposure to patients' exudate during their work. Eighty-eight percent have had in-service accidents (e.g. needle stick, sharp injury, etc.). And 88.9% had provided care for HIV-infected patients.



Figure 4.4 Source of Knowledge



Most of the nurses had improved their knowledge about AIDS. Ninety-nine percent had read information from printed matter such as newspapers, journals, and textbooks. Eighty-eight percent had watched television or listened to the radio. Over half of them (55.7 %, 53.4 %) had joined in some conferences or exhibitions. Only 1.7 % had joined special training or study tours.

Table 4.3 Range of Scores, Mean, and Standard Deviation of Total Intention and Subscale of Intention.

Scale	Possible range of scores	Mean	SD
Intention	16 - 400	185.07	35.83
Attitude	9 - 225	96.68	24.33
Norm	7 - 175	87.42	15.88

Table 4.4 Percentage of Intention Level.

Categories	Intention scores	Frequency	Percentage
Low Intention	< 161	75	21.86
Moderate Intention	161 - 226	230	67.06
High Intention	> 226	38	11.08
Total		343	100

Of all 343 nurses enrolled in this study, their intentions to take care of HIV-infected patients were 21.86% with low intention level, 67.06 % with moderate intention level, and 11.08 % with high intention level.

Table 4.5 The Relationship between Some Demographic Characteristics and the Level of the Intentions to Take Care of HIV-infected Patients. (N = 343)

Type	Intention level						P-value
	Low		Moderate		High		
	N	%	N	%	N	%	
Marital status							
Single	47	21.3	150	67.9	24	10.9	0.49
Married	26	22.0	78	66.1	14	11.9	
Age (years)							
≤ 25	17	21.5	56	70.9	6	7.6	0.66
26 - 30	38	24.1	102	64.6	18	11.4	
31 - 35	13	18.6	49	70.0	8	11.4	
≥ 36	7	19.4	23	63.9	6	16.7	
Occupational period(months)							
≤ 36	17	22.4	54	71.1	5	6.6	0.43
37 - 72	23	25.0	59	64.1	10	10.9	
73 - 108	18	21.7	55	66.3	10	12.0	
≥ 109	17	18.5	62	67.4	13	14.1	
Position							
Staff Nurses	69	21.9	211	67.0	35	11.1	0.99
Head Nurses	6	21.4	19	67.9	3	10.7	

Table 4.5 (Continued)

Type	Intention Level						P-value
	Low		Moderate		High		
	N	%	N	%	N	%	
*Direct exposure to patients' exudate							
Yes	54	21.5	167	66.5	30	12.0	
Never	21	22.8	63	68.5	8	8.7	0.55
*Occupational accidents							
Yes	68	22.5	200	66.2	34	11.3	
Never	7	17.5	29	72.5	4	10.0	0.62
*Experiences in AIDS patients care							
Yes	65	21.3	204	66.9	36	11.8	
Never	10	26.3	26	68.4	2	5.3	0.48

There were no statistically significant differences in the relationship between demographic characteristics and three levels of intention using the Chi square test.

Table 4.6 Correlation Matrix between Each Variables in this Study.

	TINT	ATT	NORM	SAT	FEA	KNO	EXP	POL	DIFF	AGE	PER
TINT	1.00	.896**	.779**	.354**	-.317**	.025	.108	.094	-.178**	.074	.075
ATT		1.00	.523**	.330**	-.344**	-.002	.130	.101	-.141	.134	.145
NORM			1.00	.342**	-.238**	.045	.050	.070	-.187**	.017	-.002
SAT				1.00	-.124	-.012	.146	.182**	-.154	.076	.049
FEA					1.00	-.037	-.046	-.136	-.220**	-.061	-.031
KNO						1.00	-.033	-.063	-.064	.113	.155
EXP							1.00	.368**	-.251**	.166	.156
POL								1.00	-.109	.033	.012
DIFF									1.00	-.136	-.105
AGE										1.00	.939**
PER											1.00

One-tailed significant

** p-value = .001

TINT = Total intention

ATT = Attitude

NORM = Subjective norm

SAT = Job satisfaction

FEA = Fear of AIDS

KNO = Knowledge about AIDS

EXP = Nurse's experience or skill

POL = Hospital policy about AIDS care

DIFF = Difficulty to follow Universal precaution

AGE = Age

PER = Occupational period

As shown in table 4.6, there were statistically significant correlations among some independent variables and total intention scores. This shows that nurses who had greater job satisfaction, those who had less fear towards AIDS, and those who perceived less difficulty in adhering to the universal precaution practices, had stronger intention to take care of HIV-infected patients than other nurses. Similarly, for the component of intention, Pearson's coefficients of correlation indicated that there was significant correlation between attitudes towards performing care and these variables, i.e. job satisfaction, fear of AIDS, experience and skill in caring, difficulty to follow universal precaution, age, and occupational period. And significant correlations also existed among the subjective norm and the following variables: job satisfaction, fear of AIDS, and difficulty to follow universal precaution.

Table 4.7 Stepwise Multiple Regression of all Predictor Variables which Interact with the Intention.

Variables	R	R ²	R ² change	B	Beta	T	P
1. Job satisfaction	0.346	0.120	0.120	1.556	0.315	6.365	0.000
2. Fear of AIDS	0.440	0.195	0.073	-0.828	-0.273	-5.520	0.000
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Constant				123.377		5.839	0.000

Table 4.7 is a stepwise multiple regression of all predictor variables interacting with the intention. There were two variables which were able to explain significantly variation of nurses' intentions, i.e. job satisfaction and fear towards AIDS. The value of R² indicating about 20 % of the variation in the intention score was explained by both variables. An increase in job satisfaction by one score was expected to increase intention by 1.556 score, while an increase in fear of AIDS by one score decreased intention by 0.828 score.

Table 4.8 Stepwise Multiple Regression of all Predictor Variables Influencing Attitudes toward Performing Care.

Variables	R	R ²	R ² change	B	Beta	T	P
1.Fear of AIDS	0.337	0.114	0.144	-0.620	-0.300	-6.143	0.000
2.Job satisfaction	0.442	0.195	0.081	0.948	0.282	5.762	0.000
3.occupatio- nal period	0.460	0.212	0.017	0.063	0.131	2.692	0.008
----- Constant	-----	-----	-----	----- 61.196	-----	----- 4.277	----- 0.000

Table 4.8 shows the result of stepwise multiple regression analysis for each component of intention. For attitude towards performing care, three independents significantly influenced the variance in attitude. About 21% of the variation was explained by the included variables, i.e. fear of AIDS, job satisfaction and occupational period. An increase in fear of AIDs by one score was expected to decrease intention by 0.62 score, while an increase in job satisfaction by one score increased intention by 0.948 score, and an increase in occupational period by 1 month was expected to increase intention by 0.063 score.

Table 4.9 Stepwise Multiple Regression of all Predictor Variables Influencing Subjective Norm.

Variables	R	R ²	R ² change	B	Beta	T	P
1.Job satisfaction	0.332	0.110	0.110	0.677	0.309	6.089	0.000
2.Fear of AIDS	0.384	0.147	0.037	-0.260	-0.194	-3.816	0.000
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Constant				54.387		5.658	0.000

Table 4.9, has similar results to Table 4.8. For subjective norm, the amount of variance explained in this variable by two predictors, i.e. job satisfaction and fear of AIDS, was 15 % ($R^2 = 0.147$). An increase in job satisfaction by one score increased intention by 0.677 score, while an increase in fear of AIDS one score decreased intention by 0.260 score.

Table 4.10 Stepwise Multiple Regression of all Predictor Variables Influencing Mild level of Intention.

Variables	R	R ²	R ² change	B	Beta	T	P
1.Fear of AIDS	0.459	0.210	0.210	-0.755	-0.410	-3.971	0.00
2.Job satisfaction	0.514	0.264	0.054	0.652	0.236	2.286	0.02
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Constant				143.263		5.573	0.00

Table 4.11 Stepwise Multiple Regression of all Predictor Variables Influencing Moderate level of Intention.

Variables	R	R ²	R ² change	B	Beta	T	P
1.Job satisfaction	0.253	0.064	0.064	0.663	0.252	3.955	0.00
2.Fear of AIDS	0.287	0.082	0.018	-0.204	-0.134	-2.113	0.03
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Constant				153.41		11.15	0.00



Tables 4.10 and 4.11 show the results of stepwise multiple regression analysis on mild and moderate levels of intention. For mild level of intention, two independent variables significantly influenced the variance in nurses' intention to take care. About 26 % of the variation was explained by the included variables, i.e. fear of AIDS and job satisfaction, while the amount of variance explained in moderate intention by two predictors, i.e. job satisfaction and fear of AIDS, was 8 %. Additionally, for high level of intention, there was no variable which was included in the regression model .

Suggestions from respondents

The open-ended question requested the respondents to recommend their need for more effectiveness in providing care for HIV-infected patients. The response rate was 55.68% (191 from 343 respondents). Some needs indicate were as follows:

1. Adequate medical instruments and medical supplies for universal precaution practice (including amount and quality). (N = 153)

2. Updating of knowledge about AIDS: join conference, seminar, and special training. (N = 100)

3. Salary supplementation as a fringe benefit: increased remuneration or extra wages for nurses who provide care, a guarantee to look after her and her family, or life insurance for HIV infection from occupational accidents.

(N = 134)

4. Clearly defined system of work about HIV-infected patients' care: provision of a special ward where patients can receive optimal care, and make it easier for health manpower management. (N = 32)

5. Good co-operation from other health personnel.

(N = 30)
