HIV/AIDS Awareness of People Who Work at Barbershops and Beauty Salons at Al-Nasiriya City in Iraq

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Abstract

Context: Barbers and beauty salons are cosmetic staff undertaking skin piercing practices involving reusable sharp instruments, which present risks for transmission of HIV and alternative blood-borne pathogens.

Aim: Assess the level of awareness on HIV/AIDS and its risk factors, attitude towards HIV/AIDS and to spot high risk behaviors related to HIV/AIDS among a person who uses Barbershops and beauty salons at Nasiriya City in Iraq.

Methodology: A cross sectional study was conducted to assess knowledge attitude and practice with respect to the transmission and prevention of HIV/AIDS among barbers and beauty salons in Nasiriya city in Iraq.

Results: A total of 107 Barbers and Beauty salons participated in the age groups were 16% below 20 years, 42% 21-30 years, 27% 31-40 years, 13% 41-50 years and 2% above 50 years (Barbershops) and followed by Beauty salons were in the age group of 5% below 20 years, 58% 21-30 years, 32% 31-40 years and 5% 41 to 50 years. Among the participants, 82% were male and 18% were female.

Conclusions: Participants have a good knowledge regarding HIV/AIDS. Health strategies such as support supervision and training are needed to facilitate effective preventive measures against HIV disease among beauty salon and barbers workers.

Keywords: *HIV/AIDS; Awareness; Barbers and Beauty Salons; Nasiriya City.*

Introduction

HIV/AIDS could be a major medical, public health still as a grave socioeconomic challenge to the world. HIV disease continues to be a serious global public health issue. Inadequate Knowledge, negative Attitudes and risky practices are major obstacles to prevent the spread of HIV.[1] Skin is one of the natural, barriers for pathogens to enter and used as protecting the organ. Its integrity is responsible for prevention of infection like HIV/AIDS.[2] Barber's shop could be a source of infections agents each blood-borne and different infestation and the sure way to prevent this can be through instrument sterilization after every customer.[3] The zone of the Middle East is foremost among the regions within the world with the rapidly growing epidemic of HIV. During this situation, serious and powerlessness are rise because the epidemic is on the increase with proof showing significantly elevating HIV prevalence, new HIV infections, and AIDS-related deaths (Dalia).[4]

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A study from Nasiriyaon the knowledge and practice of sterilization of instruments by barbers showed that 93.9% weren't aware of the necessity and method of sterilization.[5] This means that almost all the consumers were in danger of contracting these deadly however preventable diseases. Certainly, infection acquired from barbing saloon sometimes results in serious complication because individuals infected with these diseases are not aware until laboratory investigation reveals it. Report from previous research finding revealed that the infectious diseases have high prevalence rate and are being rapidly transmitted to people in non sexual routes such as barbering as well as sexual routes in both developed developing countries with prevalence rates are as follows: HIV 2.2% to 28%, HBV 6.826%, and HCV 2.2 to 4.8%.[6] The objective of this study were to evaluate the extent of awareness on HIV/AIDS and its risk factors, angle towards HIV/AIDS and to spot high risk behaviors related to HIV/AIDS among someone World Health Organization uses Barbershops and wonder salons at Nasiriya city in Iraq.

Materials and Method

A cross-sectional study,approach been carried out to find the awareness of HIV/AIDS and its risk factors. Approach concerning HIV/AIDS and to classify high-risk activities related to HIV/AIDS between a person who uses Barbershops and Beauty salons at Nasiriya city in Iraq. The data will be collected from 107 Barbers and Beauty salons participated in the age group 20-60 years. It was carried out over 4 months a time period starting from first March till June 2019 after verbal approval was taken from each person participated in the study. It includes research approach, research design, and population. Study settings, sample size and sampling technique, development, and description of tools, data collection method, and plan for data analysis. The collected information is organized, tabulated,analyzed and interpreted using descriptive and inferential statistics. The data were analyzed by using Statistical Package for Social Science (SPSS) version 20 with both descriptive and inferential statistics. The results were expressed as mean and standard deviation. The data were analyzed by analysis of variance (ANOVA). A probability level (p-value) of less than 0.05 was considered statistically significant.

Results

The study involved samples (n=107) who fulfilled the inclusion criteria. The source of previous knowledge of HIV/AIDS is shown in Fig. 1.

Table 1: Knowledge concerning HIV/AIDS in the study population

Knowledge	Study Population N=107		Barbershops (N=88)	Beauty Salons (N=19)	Mean ± SD	'p' value
Blood related transmission						
HIV can be transmitted from mother to child	Yes	104	86	18	52±48.08	0.000 (S)
	No	3	2	1	1.5±0.71	
HIV can be transmitted by sharing a needle or a syringe	Yes	105	87	18	52.5±48.79	
	No	2	1	1	-	
HIV can be transmitted by blood transfusion	Yes	105	88	18	53±49.5	
	No	2	1	1	-	
Sex related transmission						
HIV can be transmitted by intercourse	Yes	101	86	15	50.5±50.2	0.000 (S)
	No	6	2	4	3±1.41	
HIV can be prevented by properly using condoms during sexual intercourse	Yes	106	87	19	53±48.08	
	No	1	1	0	0.5±0.71	
HIV transmission can be prevented by pre-marital blood testing	Yes	107	88	19	53.5±48.79	
	No	-	0	0	0	
Other modes of transmission						

Knowledge	Study Population N=107		Barbershops (N=88)	Beauty Salons (N=19)	Mean ± SD	'p' value
Definition of AIDS	Yes	91	76	15	45.5±43.13	
	No	16	12	4	8±5.66	
Is AIDS a serious disease?	Yes	90	74	16	45±41.01	
	No	17	14	3	8.5±7.88	
Is AIDS a contagious disease?	Yes	99	81	18	49.5±44.55	
	No	8	7	1	4±4.24	
HIV cannot be transmitted by shaking hands	Yes	93	78	15	46.5±44.55	
	No	14	10	4	7±4.24	
HIV cannot be transmitted by eating and drinking from the same plate or cup of an infected person	Yes	102	87	15	51±50.91	0.000 (S)
	No	5	1	4	2.5±2.12	
HIV cannot be transmitted by wearing the same clothing as a person infected with HIV	Yes	105	87	18	52.5±48.79	
	No	2	1	1	-	
HIV cannot be transmitted by sharing the toilet with a person infected with HIV	Yes	107	88	19	53.5±48.79	
	No	-	0	0	-	
HIV transmission cannot be transmitted by bite	Yes	103	86	17	51.5±48.79	
	No	4	2	2	-	
A person with AIDS may not show any symptoms for several years	Yes	107	88	19	53.5±48.79	
	No	-	0	0	-	

*p>0.05 level of non-significant; p<0.05 level of significant.

Table 2: Attitude concerning HIV/AIDS in the study population

Attitude	Study population N=107		Barbershops (N=88)	Beauty salons (N=19)	Mean ± SD	'p' value
If you know that one of your clients infected with the disease did shaving to him?	Yes	103	85	18	51.5±47.38	
	No	4	3	1	2±1.14	
Do you think that the disease is transmitted to you as soon as you shake hands with him?	Yes	106	87	19	53±43.08	
	No	1	1	0	-	
Would you like to help HIV-positive customer if he need them?	Yes	106	88	18	53±49.5	
	No	1	0	1	-	
Do you think there is a need to isolate person infected with the disease?	Yes	107	88	19	53.5±48.79	
	No	-	0	0	-	
Do you think that the media has an impact on the definition of the disease and ways of prevention?	Yes	107	88	19	53.5±48.79	
	No	-	0	0	-	0.000 (S)
Do you think the person with AIDS is a pariah in society?	Yes	105	87	18	52.5±48.79	
	No	2	1	1	-	
Do you think that someone with AIDS can infect others for the rest of their lives?	Yes	106	87	19	53±48.08	
	No	1	1	0	-	
Do you think it is possible to know if a person is infected with AIDS by its appearance?	Yes	107	88	19	53.5±48.79	
	No	-	0	0	-	
Do you think that HIV can be prevented by not sharing the needle?	Yes	107	88	19	53.5±48.79	
	No	-	0	0	-	
Do you think HIV transmission can be avoided through a single partner?	Yes	103	86	17	51.5±48.79	
	No	4	2	2	-	

*p>0.05 level of non-significant; p<0.05 level of significant.

Table 3: Practices concerning HIV/AIDS in the study population

Practices	Study population N=107		Barbershops (N=88)	Beauty salons (N=19)	Mean ± SD	'p' value
Handle with pruning tools (needles and other sharp cutting tools) and dispose of them as soon as they are used	Yes	98	82	16	49±46.67	0.000 (S)
	No	9	6	3	4.5±2.12	
Wash hands before and after any operation	Yes	106	87	19	53±48.08	
	No	1	1	0	-	
Washing tools and sterilization between customer and another	Yes	107	88	19	53.5±48.79	
	No	-	0	0	-	
Use protective barriers such as gloves when dealing directly with blood	Yes	105	87	18	52.5±48.79	
	No	2	1	1	-	
Safe disposal of contaminated waste	Yes	107	88	19	53.5±48.79	
	No	-	0	0	-	
Disinfection and sterilization of contaminated instruments and equipment?	Yes	106	87	19	53±48.08	
	No	1	1	0	-	
Do you ask your client before dealing with him whether he has a contagious disease?	Yes	89	78	11	44.5±47.38	
	No	18	10	8	-	
Do you have readings, follow-up and readings about AIDS?	Yes	107	88	19	53.5±48.79	
	No	-	0	0	-	
Do you raise awareness of costumer about AIDS?	Yes	100	83	17	50±46.67	
	No	7	5	2	-	
Have you ever done tests to make sure you are safe from a transitional disease?	Yes	95	84	11	47.5±51.62	
	No	12	4	8	-	

*p>0.05 level of non-significant; p<0.05 level of significant.

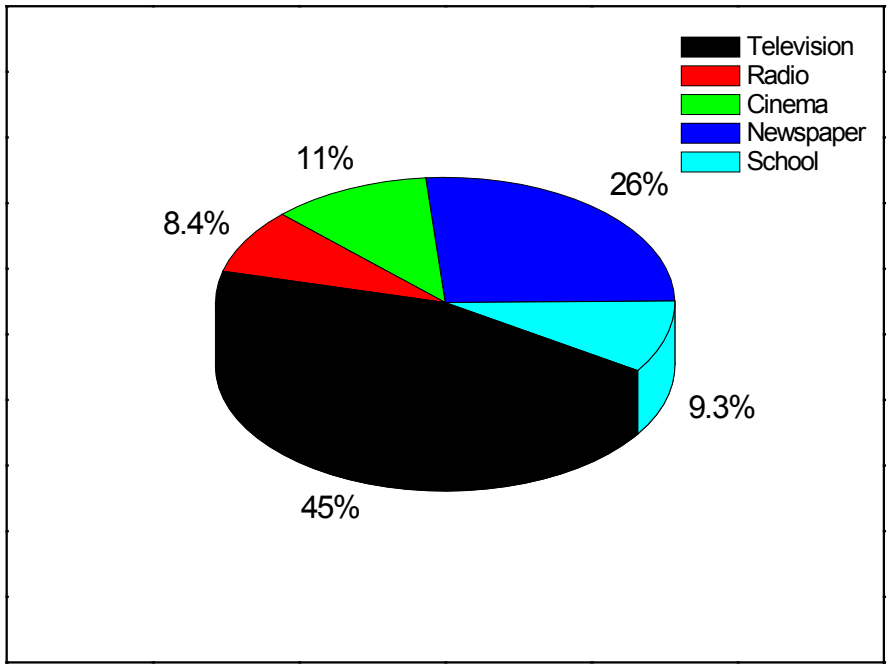

Fig. 1: Source of HIV information.

Discussion

Knowledge about HIV/AIDS: Knowledge observed that all respondents represent by blood-related transmission, sex-related transmission and other modes of transmission in barbershops and beauty salons (Table 1).Most of the peoples in both (97.5%) have a good level of knowledge.[7] More than 97% of peoples know HIV might be spread via transmitted from mother to child [52±48.08][8], transmitted by sharing a needle or a syringe [52.5±48.79][9]and transmitted by blood transfusion [53±49.5; p=0000]. A similar result was reported by Kiran *et al*[10] study in whom, 94.12% were aware regarding contaminated needles and syringes, 95.09% on blood transfusion. 3% of peoples have a negative response to the knowledge of HIV/AIDS [1.5±0.71]. 94% of peoples have a positive response about HIV/AIDS knowledge could be transmitted by sexual intercourse [50.5±50.2]. 99% believed the use of a condom can stop HIV spread through sexual intercourse [53±48.08] and 100% of respondents by transmission can be prevented by pre-marital blood testing [53.5±48.79; p=0.000]. [11] In other modes of transmission, 87% [46.5±44.55] thought HIV through cannot be transmitted by shaking hands, 95% thought HIV through cannot be transmitted by eating and drinking from the same plate or cup of an infected person [51±50.91]. 96%assumed one can get HIV through mosquito bite [51.5±48.79; p=0.000].[12]

Attitude towards HIV/AIDS: The majority of 96% of respondents confirmeda positive attitude concerning HIV/AIDS[13] and 4% has a negative attitude know that one of your clients infected with the disease did shaving to him (Table 2). 99% of peoples have a positive attitude about the disease is transmitted to you as soon as you shake hands with him, HIV can be prevented by not sharing the needle and HIV transmission can be avoided through a single partner.[14] Most people have a positive attitude towards HIV know that they think there is a need to isolate a person infected with the disease. The media has an impact on the definition of the disease and ways of prevention. The minority 3% of peoples have negative attitudes towards HIV/AIDS.

Practices regarding HIV/AIDS: Table 3 shows that the majority 92% of all the peoples had practice towards HIV/AIDS and handle with pruning tools (needles and other sharp cutting tools) and dispose of them as soon as they are used [49±46.67].[15] 99% of peoples had wash hands before and after any operation with practice towards HIV/AIDS [53±48.08]. The testing practice positive response (100%) had washing tools and sterilization between the customer and another [53.5±48.79].98% of the peoples have used protective barriers such as gloves when dealing directly with blood [52.5±48.79]. 82% [44.5±47.38] of peoples had you ask your client before dealing with him whether he has a contagious disease with practices regarding HIV/AIDS. [16] 89% of peoples had tests to make sure you are safe from a transitional disease [47.5±51.62; p=0.000] and 11% [4.5±2.12] of peoples have negative test practice towards HIV/AIDS.[17] Most of the peoples (95%) have practice towards HIV/AIDS and 5% of peoples have not to practice. Practices regarding HIV/AIDS. The present study is conducted to find out the awareness, attitude, and practice of HIV/AIDS among the peoples who use Barbershops and Beauty salons at Nasiriya city in Iraq. Among the 107 people were studied in the age group of 20–60 years. 88 (82%) males were used in Barbershops and 19 (18%) females were used in Beauty salons.

Conclusion

The study revealed that the knowledge, attitude, and prevention of HIV/AIDS among, Barbers and Beauty salons. Participants have good knowledge about HIV/AIDS. There are significant gender and urban-rural differentials in Nasiriyain terms of knowledge, attitude, and practices in HIV/AIDS. Continuous such surveys at regular intervals would further help to assess the level of awareness and attitude towards HIV/AIDS for designing future educative programs also there should be rules and regulations from the ministry of health regarding the sterilization and disposal of sharp equipment in barbershops. It is suggested that focusing on interventions programs which helps them in understanding the disease.

Conflicts of Interest: There are no conflicts of interest

Source of Funding: Nil.

Declaration: We declared that this article is an original work and has not been sent to any other journal for publication.

Ethical Clearance: Have taken the consent of the patients

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