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SAILORS' FEAR OF THE STIGMA OF HIV/AIDS

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Introduction. Seafarers face many occupational, health and psychosocial problems on a daily basis. Maritime as a profession has a special combination of conditions that have a strong impact on the spread of sexually transmitted diseases (STIs) and make prevention programs difficult to succeed.

Objective. To study the attitudes towards sharing and attitudes towards HIV-positive people among seafarers in the workplace.

Material and methods. 100 persons practicing the maritime profession were surveyed using an anonymous questionnaire, approved by the Commission on Scientific Ethics at the Medical University — Varna. The results were statistically processed with SPSS v. 20.0, using variation, comparison and correlation analyzes.

Results and discussion. Most of the respondents have sufficient experience in their profession, have higher education and have an equal distribution in deck and machine command (41% each), 18% are from the executive staff. All respondents are adamant that they would share the result of the HIV test with their family or partner, with only 24.0% stating that they would share the positive result with colleagues and 26.0% with the employer. We found a significant difference (χ^2 39.47; $p < 0.001$) and a moderate dependence ($r = 0.34$; $p = 0.001$) on the behavior of respondents regarding the sharing of the positive result of the HIV test with members of their professional environment (colleagues and managers).

The sailors are afraid to work with HIV-seropositive colleagues because their knowledge about the prevalence, risk factors and perceptions about the transmission and prevention of HIV infection have a lot of gaps.

Conclusion. Despite training from unions, medical organizations and governments, the dreaded myths about HIV/AIDS persist. The degree of ignorance of the reality around HIV/AIDS is directly proportional to the stigmatization of the problem.

Key words: HIV stigma, seafarers, maritime company, maritime transport, HIV/STI prevention

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СТРАХ МОРЯКОВ ПЕРЕД СТИГМАТИЗАЦИЕЙ, СВЯЗАННОЙ С ВИЧ/СПИДОМ

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Введение. моряки ежедневно сталкиваются со множеством профессиональных, медицинских и психосоциальных проблем. Морское судоходство как профессия имеет особую комбинацию условий, которые оказывают сильное влияние на распространение болезней, передаваемых половым путем (ИППП), и затрудняют успешное осуществление программ профилактики.

Цель. Изучить отношение моряков к людям, живущим с ВИЧ (ЛЖВ), на рабочем месте.

Материал и методы. С помощью анонимной анкеты, одобренной Комиссией по научной этике Медицинского университета — Варна, было опрошено 100 человек, практикующих морскую профессию. Статистическую обработку результатов проводили с помощью SPSS v. 20.0, используя вариационный и сравнительный анализ.

Результаты и их обсуждение. Большинство респондентов имеют достаточный опыт работы в своей профессии, имеют высшее образование и в равной степени распределены по командованию палубой и машинами (по 41% каждый), 18% — из руководящего состава. Все респонденты непреклонны в том, что они поделятся результатом теста на ВИЧ со своей семьей или партнером, 24,0% заявили, что готовы сообщить положительный результат коллегами и 26,0% — работодателю. Мы обнаружили значительную разницу ($\chi^2 = 39,47$; $p < 0,001$) и умеренную зависимость ($r = 0,34$; $p = 0,001$) в поведении респондентов в отношении обмена положительным результатом теста на ВИЧ с членами их профессионального окружения (коллеги и менеджеры).

Моряки не хотят работать с ВИЧ-инфицированными коллегами, потому что в их знаниях о распространенности, факторах риска и понимании передачи и профилактики ВИЧ много пробелов.

Заключение. Несмотря на обучение со стороны профсоюзов, медицинских организаций и правительств, страшные мифы о ВИЧ /СПИДе сохраняются. Степень незнания реальности, связанной с ВИЧ /СПИДом, прямо пропорциональна стигматизации проблемы.

Ключевые слова: стигма в связи с ВИЧ, моряки, морская компания, морской транспорт, профилактика ВИЧ/ИППП

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Introduction. The epidemiological features of HIV/AIDS have focused the efforts of prevention programs on the most at-risk behavioral groups — injecting drug users (IDUs); men having sex with men (MSM); young people of Roma origin at increased risk of infection (15–25 years); imprisoned people; prostituted men and women; people living with HIV/AIDS. Prevention activities among refugees and migrants have also been developed. However, the epidemiological analysis of the HIV/AIDS problem points us to the existence of other vulnerable social groups for HIV/AIDS, such as practicing a maritime profession. Seafarers face many occupations daily (harmful agents, toxic or dangerous goods, climate change), health (substance abuse, depression, infections, trauma) and psychosocial (separation and alienation from family and home, life-related stress) on board problems [1–4].

Transport workers typically face a higher than average risk of HIV, as well as other health challenges. Maritime as a profession has a special combination of conditions that have a strong impact on the spread of HIV and make prevention programs difficult to succeed [5].

Information on HIV/AIDS and sexual behavior of this vulnerable group is still incomplete [6].

Objective. To study the attitudes towards sharing and attitudes towards HIV-positive people among seafarers in the workplace.

Material and methods. 100 persons practicing the maritime profession were surveyed using an anonymous questionnaire, approved by the Commission on Scientific Ethics at the Medical University — Varna. The results were statistically processed with SPSS v. 20.0, using variation, comparison and correlation analyzes.

Results and discussion. The results of our study show that the majority of respondents are in the age group over 50 years (41.0%), which is an indicator that they have enough experience in the profession (Fig. 1).

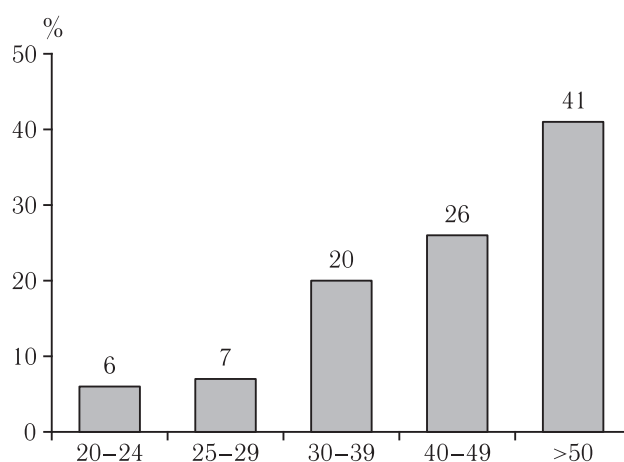


Fig. 1. Distribution of respondents according to age group

The analysis of the educational level held by the respondents shows that seafarers with higher education predominate (53.0%), followed by those with secondary education (47.0%).

Regarding the position held, the results show equal distribution in the deck and engine crew (41 % each), and 18% indicated that they have positions in the executive staff.

Only half of the surveyed seafarers admit to having been tested for HIV (58.0%), regardless of the age group they belong to, their level of education and the position they hold on the ship.

All respondents are adamant that they would share the result of the HIV test with their family or partner, with only 24.0% stating that they would share the positive result with colleagues and 26.0% with their employer (Fig. 2).

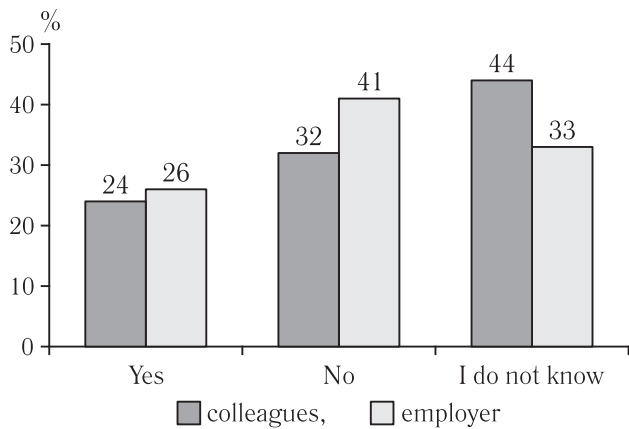


Fig. 2. Sharing a positive HIV test result

In the analysis of the results regarding the sharing of the positive result of the HIV test with the members of the professional environment (colleagues and managers) we found a significant difference ($\chi^2=39.47$; $p<0.001$) and moderate dependence ($r=0.34$; $p=0.001$) in relation to the behavior of the respondents (Table 1).

It is interesting that most of them are of the opinion that they would carry out treatment if necessary in Bulgaria (45.0%), half of them cannot make a decision (52.0%) and only 3.0% are categorical that they would be treated outside the country.

Information on the prevalence and risk factors for HIV infection among seafarers is scarce.

Seafarers are concerned about HIV/AIDS and their knowledge and understanding of transmission and prevention have many gaps. An example of this is the fear of a large number of seafarers to work with HIV-positive colleagues, as no significant difference was found between the age of the respondents and the position held ($p>0.05$) (Fig. 3).

The results of our study do not differ significantly from those in other studies. According to a study by the International Federation of Transport Workers (ITF) between 615 people with 35 unions in 30 countries, such as India, Indonesia, Myanmar, the Philippines, Turkey, Ukraine — and large beneficiary

Table 1

| Sharing a positive HIV test result with management and colleagues | | | | |
|---|-----------------|----|---------------|-------|
| With colleagues | With management | | | |
| | YES | NO | I DO NOT KNOW | TOTAL |
| YES | 14 | 5 | 5 | 24 |
| NO | 2 | 25 | 5 | 32 |
| I DO NOT KNOW | 10 | 11 | 23 | 44 |
| TOTAL | 26 | 41 | 33 | 100 |

The results are presented in table. 1 show that the main part of the respondents, who would share their positive result in their colleagues, would do the same with the employer (14 persons). Only 5 people indicated that they would share the result with colleagues, but would not do so with their employer.

On the other hand, for the most part, who would not share this information with colleagues, would not do so with the employer (25 respondents), but two others are of the opinion that they would not share the result with colleagues, but would do so with the employer. Nearly half of the respondents do not know whether they will share the result of the HIV test if it is positive with both colleagues and their employer. But 10 respondents who do not know whether to share this information with their colleagues are adamant that they would do so with their employers, and another 11 are adamant that they would not share anything with the employer.

Only 15.0% indicated that they knew where treatment was provided in Bulgaria (Varna), of which 22.4% said they had been tested for HIV.

countries such as Germany, Italy, Norway and the South Korea, on various health issues and issues about HIV and other sexually transmitted infections, it is found that HIV remains one of the most pressing

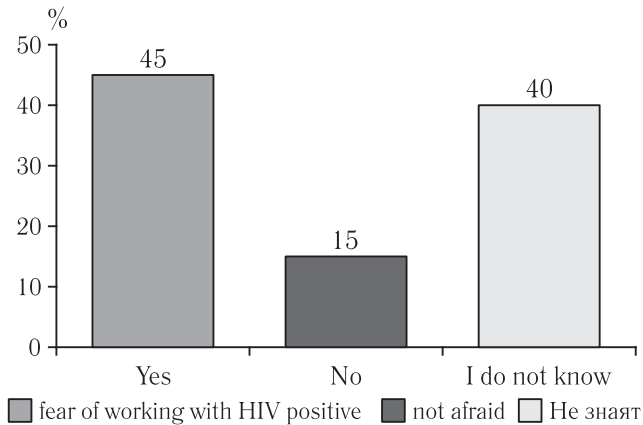


Fig. 3. Fear of working with HIV-positive colleagues

problems in shipping. There are serious knowledge gaps in a number of areas, especially HIV transmission and prevention, as well as high levels of stigma-

tization of people living with HIV. Seafarers have a high level of fear and suspicion about workers living with HIV. Even when there is a high level of knowledge about the disease, myths and misconceptions persist. The figure from India is very worrying. In Madagascar alone, the figure is below 40%, which means that HIV-positive seafarers are likely to face stigmatization and exclusion worldwide [7, 8].

Table 2

Fear of working with HIV-positive colleagues — a comparative analysis

| Country | Number of respondents | Respondents who are afraid to work with HIV-positive colleagues | |
|---------------|-----------------------|---|-------|
| | | Frequencies | % |
| India | 100 | 95 | 95 |
| Madagascar | 100 | 39 | 39 |
| Philippines | 124 | 70 | 56,45 |
| Ukraine | 100 | 64 | 64 |
| Mixed regions | 191 | 40 | 20,94 |
| Bulgaria | 100 | 45 | 45 |

In table 2. A comparative analysis of the results obtained in the study of seafarers of different nationalities is presented.

Even when there is a high level of knowledge about the disease, myths and misconceptions persist. The HIV stigma is rooted in the fear of HIV. Many of the ideas for HIV come from the first notions of HIV in the early 1980^s. There are still misconceptions about how HIV is transmitted and what it means to live with HIV today. Many people think of HIV as a disease that only affects certain groups. People still believe that the virus is transmitted through the air and a handshake and hug can be deadly, many naval workers are still convinced that the virus can be transmitted by sharing bed linen, plates, toilets. For example, 46% of respondents from India and 40% of the Philippines say that HIV can be transmitted through food and drink and 41% of the Philippines think AIDS can be cured. In India, only 17% of men, 53% of Ukraine and almost 40% of Madagascar believe in the effectiveness of condoms [9].

Due to the high prevalence of (sexually transmitted diseases) STIs in the general population, as well as the asymptomatic nature of some infections (eg HIV, Chlamydia trachomatis), screening of sexually active caregivers is recommended as a practical method to prevent the spread of STIs and their consequences. Seafarers shall undergo regular medical examinations and be issued health certificates in accordance with

national regulations. In addition to state bans, HIV-positive seafarers regularly face stigma, discrimination and fear from colleagues. Meanwhile, HIV-infected sailors who have been left without the right to work in their specialty are beginning to look for alternative solutions. Often not the most legitimate. There are reports from users in Russia and the CIS that describe in detail the methods of smuggling drugs and undergoing a medical examination using another person for a blood sample.

The recommendations of the International Labor Organization (ILO) and the International Maritime Organization (IMO) for the medical examination of seafarers allow the inclusion of seafarers with HIV-positive status in the crews. According to the text of the documents, they can work on ships around the world if their health is found to be satisfactory and without foreseeable deterioration [10].

Workers with HIV can continue to work for several years, especially if they have access to medication, good nutrition and rest. Gradually, changes and work schedules need to be changed, and tasks and work environments need to be adapted if the worker's immune system becomes weak.

Keeping an employee with HIV at work is the best support an employer can give. Adequate knowledge will ensure the safety of passengers in the conditions of maritime transport and prevent the possibility of transmission of infections. Lack of knowledge related to HIV/AIDS and perceptions of the life-threatening nature of the disease are considered to be the most important determinants of AIDS-related stigma. The main obstacle to sharing is the “fear of being stigmatized”. The fear of being stigmatized in a positive HIV/AIDS test is an important issue and has negative consequences for the prevention and treatment of AIDS. Interventions are needed to reduce HIV-related stigma to promote voluntary and free treatment of infection. Lack of knowledge related to HIV/AIDS and perceptions of the life-threatening nature of the disease are considered to be the most important determinants of HIV/AIDS-related stigma. Adequate knowledge will ensure the safety of passengers in the conditions of maritime transport and prevent the possibility of transmission of infections.

Conclusion. Despite training from unions, medical organizations and governments, the dreaded myths about HIV/AIDS persist. The degree of ignorance of the reality around HIV/AIDS is directly proportional to the stigmatization of the problem.

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