

99%

of respondents have negative attitudes
towards people living with HIV

2%

of respondents got information on
HIV/AIDS through public spaces



HIV/AIDS

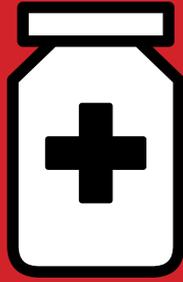
Females

18%

of 15-29 year olds aware
that condom use can
reduce HIV infection

Males

37%



6

COMBAT HIV/AIDS, MALARIA AND OTHER DISEASES

MDG Indicators

- Population 15-24 year-olds who have comprehensive correct knowledge of HIV/AIDS:
Females 4.8%, Males 18.3%

The power of knowledge

Acquired Immune Deficiency Syndrome (AIDS) is one of the most serious health and development challenges facing the world today. Over time, infection with the Human Immunodeficiency Virus (HIV) weakens the immune system to the point that it has difficulty in fighting off certain infections. AIDS is considered to be the most advanced stages of HIV infection, when people have difficulty in fighting off even minor infections. However, depending on the person's health status and given proper medical care, people with HIV can live relatively normal and healthy lives, on average, for over 20 years. Although the number of known HIV cases remains low in Egypt, estimated between 7,200 and 13,000 in 2009 by UNAIDS, there is a strong need to educate Egyptians about AIDS in order to prevent future transmission of the virus.

To track the progress of HIV/AIDS related initiatives and policies, UNICEF and UNFPA have put together a series of brochures that draw on EDHS findings regarding various health and social issues. This brochure focuses on HIV/AIDS in Egypt in order to highlight the levels of awareness and attitudes of Egyptians towards the disease, gaps in current programming, and ways in which the UN Millennium

Development Goals (MDGs) can help achieve progressive and sustainable results. This information is designed to assist decision makers, health providers and NGOs working on HIV to advocate for enhanced policies and strategies for the promotion of HIV/AIDS prevention and treatment programmes.

Comparison between the 2005 and 2008 EDHS

Tremendous cause for concern has been raised following a comparison of the 2005 and 2008 EDHS data, reflecting the decrease in knowledge and increase in stigmatising attitudes of women regarding HIV/AIDS. The percentage of young women (aged 15-24) who are knowledgeable about AIDS, and received recent information on the disease decreased from 62% in 2005 to 30% in 2008. In addition, only 11% of respondents in the same age group (15-24) know of a place where they can be tested for HIV. Furthermore, the number of youth who are aware that using condoms every time they have sexual intercourse can diminish the chance of HIV infection decreased from 22% to a mere 13%.

The significant decline in the number of knowledgeable youth, as shown through comparisons

to previous EDHS data, is also a strong cause for concern. Globally, youth aged 15 to 24 have never known a world without AIDS, and it is this group that now bears the greatest burden of the disease. To ensure that Egypt maintains its low level of HIV infection, concentrated efforts must be made to educate the general population, and specifically youth, on HIV prevention.

The following data from the 2008 DHS presents the current levels of knowledge and attitudes on HIV/AIDS among Egyptians. The data identifies target groups for receiving HIV information and ideal routes of communicating valuable knowledge on HIV/AIDS.

Results from the 2008 report

Basic knowledge about HIV/AIDS

The 2008 EDHS collected data from 12,008 Egyptians (6,290 women and 5,718 men) aged 15-59 on their knowledge of HIV/AIDS and prevention practices. The findings showed that 73% of women

and 87% of men have heard of AIDS and retain basic knowledge about the virus. However, the number of people with basic knowledge on methods of HIV prevention remains low. The percentage of women and men who have a comprehensive understanding of HIV/AIDS (e.g. know that the use of condoms and/or having an uninfected faithful partner can reduce the chance of getting AIDS; understanding that a healthy looking person can have the AIDS virus) is limited. Only 7% of women and 18% of men have basic knowledge about HIV/AIDS, even though a large number of people said they received information about the virus in the six months prior to survey.

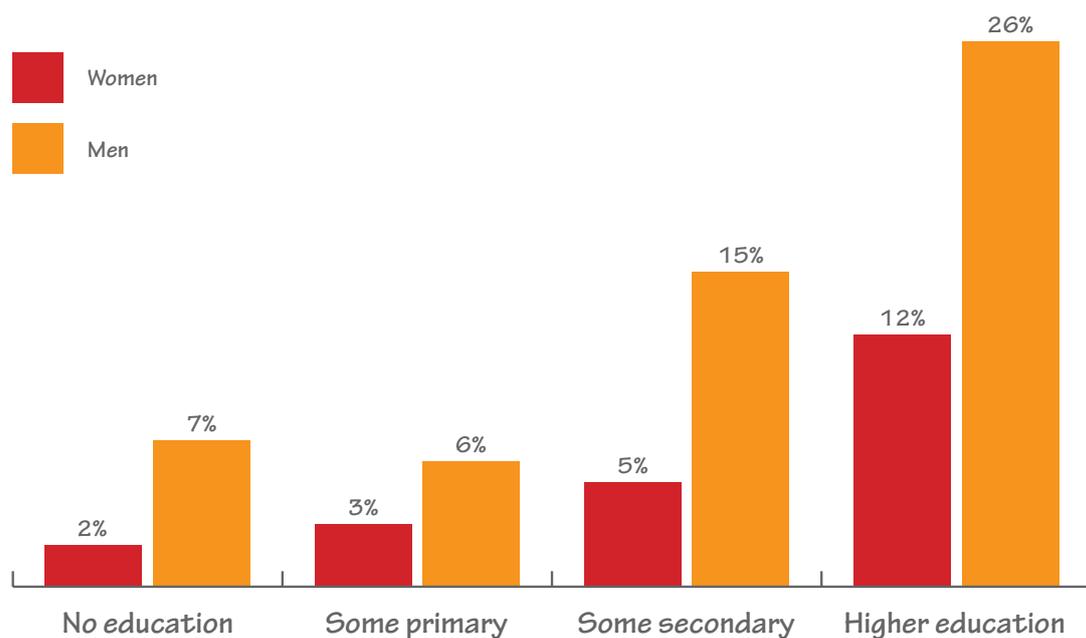
The importance of education

The number of people with comprehensive knowledge on HIV/AIDS differs according to education level and gender. Individuals who completed higher levels of education report an increased understanding of HIV/AIDS; women remain less knowledgeable about the virus than men, highlighting the need to enhance HIV education among people with less education and among women in particular.

Table 1: Knowledge of HIV/AIDS

	Percentage with comprehensive knowledge about HIV/AIDS (%)	Percentage of those saying they had received recent information about HIV/AIDS (%)
Women		
Women 15-19	3	34
Women 20-24	6	28
Total women 15-24	5	31
Total women 15-59	7	31
Men		
Men 15-19	16	21
Men 20-24	21	24
Total men 15-24	18	23
Total men 15-59	18	24

Figure 1: Percentage of women and men with comprehensive knowledge about HIV/AIDS according to education level

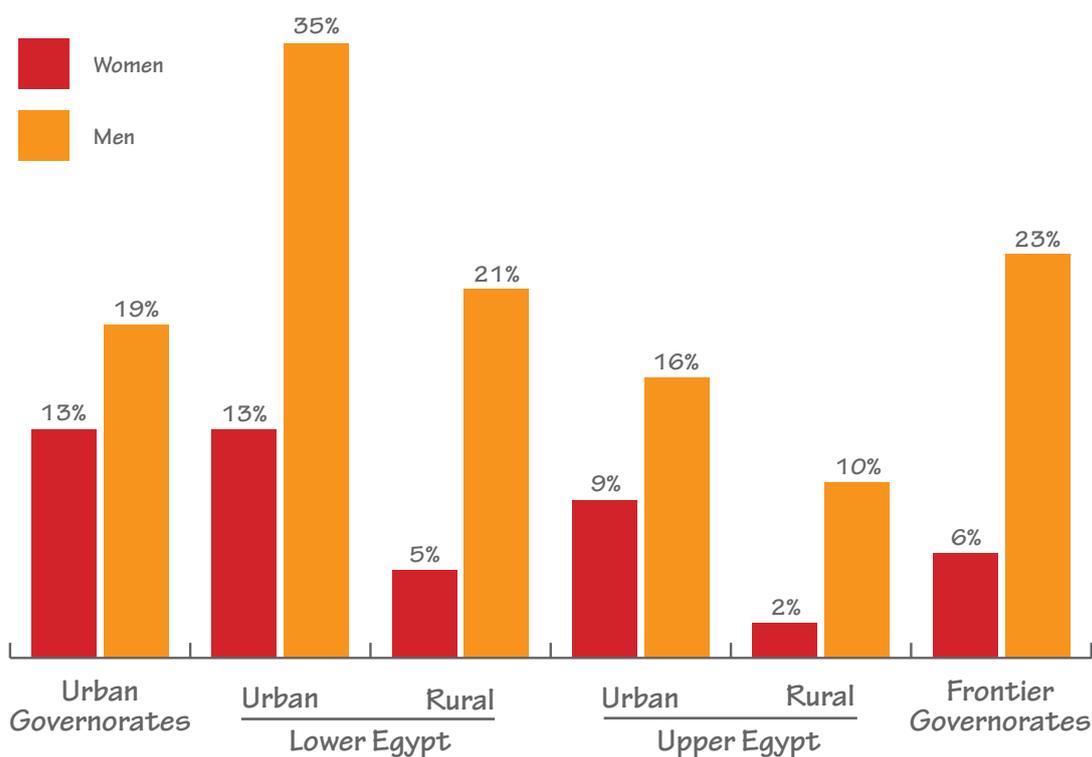


Urban vs. rural disparity

The number of women and men with a strong understanding of HIV/AIDS also varies according to region, with respondents in rural areas in Upper and Lower Egypt having the lowest percentages of comprehensive

HIV/AIDS knowledge. Even though rural areas typically have lower rates of HIV infections, this lack of knowledge and common patterns of rural migration to urban centres for the purpose of employment, create many bridges between urban and rural populations, thereby increasing opportunities for further transmission of HIV.

Figure 2: Percentage of women and men with comprehensive HIV/AIDS knowledge according to region



Access to HIV/AIDS related information

Amongst survey respondents who reported they received information about HIV/AIDS in the six months prior to the survey, the overwhelming majority accessed this information through television programming (94% of women and 92% of men). Other sources of information included the media (newspaper, radio, pamphlets), and family and friends (7% for women and 10% for men).

Some of the most surprising data to come out of the 2008 EDHS is the lack of community involvement in raising awareness about HIV/AIDS. Only 2% of women and men received information about the disease through community meetings, forums or other public spaces (hospitals, clinics, libraries, etc.), highlighting the silence that contributes to further stigmatisation of HIV/AIDS.

General attitudes towards people living with HIV/AIDS

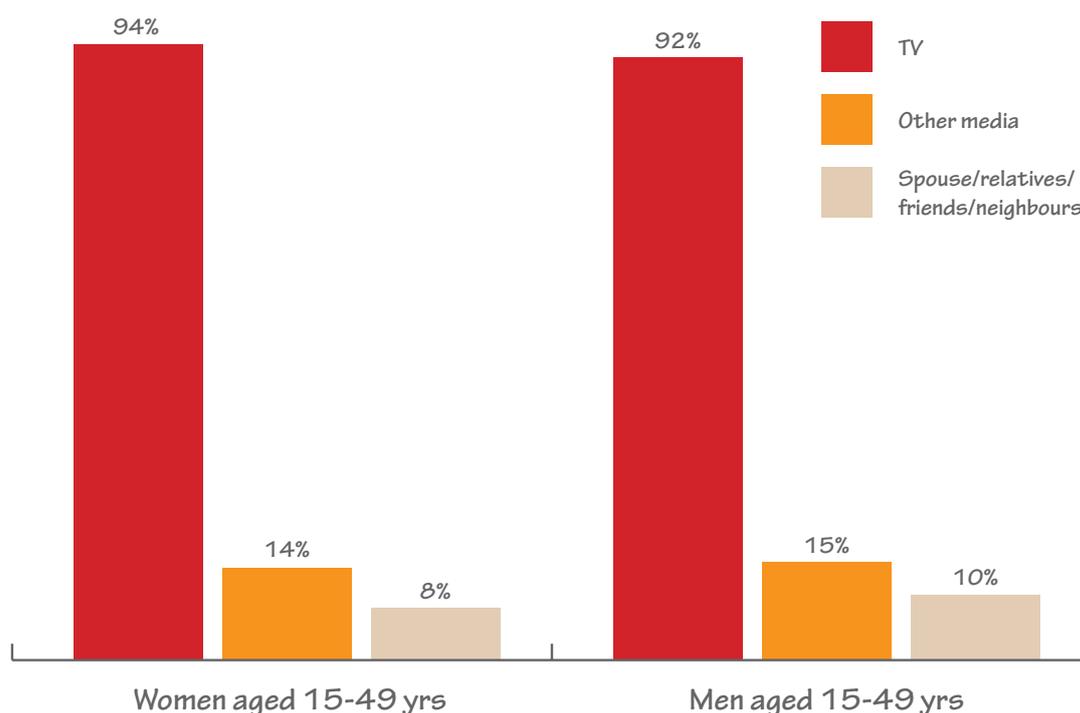
In contrast to Egyptian norms on hospitality and care, less than 25% of women and 20% of men

reported they would be willing to care for a family member with HIV/AIDS. Much of the aversion in providing care is attributed to the lack of knowledge on the disease, particularly regarding modes of transmission. High levels of discrimination continue to result from the misconception that one can be infected with the virus through daily contact with someone who has HIV or sharing their utensils, flatware and drinking containers. For this reason, enhanced programming must be pursued to educate the general public about HIV/AIDS, and to reduce the high levels of discrimination facing people living with HIV.



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Figure 3: Sources of HIV/AIDS information



Interestingly enough, uneducated women, and those with some primary education, were more willing to care for a family member with HIV/AIDS than women with higher levels of education (27% of uneducated vs. 22% of educated women). This is in contrast to men, where there is no significant difference based on the level of education reached. Respondents from the lowest economic level were more willing to care for a family member living with HIV than those from the highest percentile. These results confirm that stigma and discrimination towards people living with HIV is relatively high and should be prioritised when programming for HIV interventions. Unless this issue is clearly addressed, individuals at risk of HIV are less-likely to seek testing for HIV, further perpetuating the spread of the virus.

Furthermore, people already infected with HIV are becoming further marginalised by society, leading to lower quality of life and an inability to ensure that their basic human rights are met. In order to comprehensively address these issues, HIV/AIDS information and interventions need to be adapted to target different educational and social realities in Egyptian society.

Ways forward

HIV/AIDS may not be Egypt's primary health concern, but it is one that still affects citizens across the country. Continued action is needed from dedicated health care workers, government and legislative actors, NGO workers, UN agencies and civil society in supporting HIV/AIDS campaigns and initiatives to educate people on the reality of AIDS, prevention practices and how to care for a loved one who may have been diagnosed with the disease.

To prompt increased action across all levels of civil society, future HIV/AIDS programming will need to take into account the following:

Policy action

Because of the downward trend on HIV/AIDS knowledge and increased levels of stigma, there is a need for comprehensive HIV/AIDS awareness raising campaigns, along with concerted efforts amongst all stakeholders involved in HIV programming. Updated national strategies are required to support a multi-sectoral approach that includes both multiple government entities and non-governmental actors. Furthermore, support for policies and strategies are

Table 2: Gender specific breakdown of attitudes towards people living with HIV

Accepting attitudes towards people living with HIV				
	Are willing to care for a family member with HIV at home (%)	Would buy fresh vegetables from a shopkeeper who has HIV (%)	Believe HIV+ female teachers should be allowed to continue teaching (%)	Would not want HIV+ status of a family member to remain secret (%)
Women				
Women 15-19	25	15	12	35
Women 20-24	24	12	12	36
Total women 15-24	24	13	12	36
Total women 15-59	23	14	12	38
Men				
Men 15-19	20	18	8	32
Men 20-24	20	18	8	38
Total men 15-24	20	18	8	35
Total men 15-59	20	19	9	34

needed to increase awareness, especially amongst youth, on the transmission of HIV and modes of prevention. Targeted advocacy efforts are needed at a national level to ensure the rights of people living with HIV are recognised and respected.

Access to information

Given that the majority of respondents receive information about HIV from television, there is a need to enhance the quality of HIV/AIDS related messages broadcast through the media and to ensure a code of conduct is respected regarding reporting on the virus and that people living with HIV are not further stigmatised. Additionally, HIV promotion and education by health care workers and medical facilities is of the utmost importance, given that only 4% of women and 3% men reported accessing HIV/AIDS information in this manner.

Community outreach and education

As in other facets of civil society, educating people – adults and youth alike – on the reality of HIV/AIDS

is vital in abolishing myths surrounding the disease, preventing future transmission of the disease and enabling individuals to care for those who have been diagnosed with HIV/AIDS without fearing repercussions to their own health.

At the heart of any HIV/AIDS intervention, are the people who suffer on a daily basis from the disease. Campaigns, training and programming implemented at social and political levels should be designed with the aim of reducing stigma and discrimination towards people living with HIV/AIDS, and efforts must ensure that their rights to health care, employment, housing and education are safeguarded. Activities should also highlight the important roles the community can play in helping educate members of civil society on the disease, and collaborative efforts should be encouraged between NGOs, community workers and health-care facilities in order to share accurate information on HIV/AIDS and facilitate safe spaces for further learning.



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