

Challenges Impede AIDS Patients in Jordan to Integrate them into Society

*Hussein Omar AlKhozahe **

ABSTRACT

This study seeks to identifying the Challenges impede AIDS patients in Jordan to integrate them into society, and to know the status of AIDS patients in Jordan and their social and economic characteristics through monitoring the number of infection cases as well as the ways of contracting such disease. The researcher applied the comprehensive social survey method which included (41) Jordanian patients infected in (2018). The patients were classified according to their age, gender, marital status, education level, place of contracting the disease and nationality. The results of this study include the following:

1. The moment when the disease is discovered, the AIDS patient becomes shocked denying he/she is infected and feels regretful, but later the patient starts to accept the disease.
2. The difficulty of winning the patients confidence , the difficulty of changing dangerous habits, the lack of privacy and confidentiality in both private and public hospitals, the patient feeling ashamed of himself ,hyper - sensitivity , the dangerous nature of the disease , and the financial problems which many HIV patients suffer from.. These challenges impede their integration into society.
3. In 2018, 41 new cases from Jordanians people were discovered, bringing the number among Jordanian to (430) cases from 1986 to 2018, the total number of cases among Jordanian and other is 1,531 cases in Jordan since the establishment of the National AIDS Control Program (NACP) in 1986, of which 430 are Jordanians and 1101 are non-Jordanians, while the total number of AIDS deaths was 135.
4. Illegitimate sexual intercourse is considered the primary cause of AIDS infections among Jordanians with (53%), while (85.4%) of such infections were contracted inside Jordan. The age groups (30-39) and (40-49) came first among AIDS patients with (55%).Additionally, (19.8%) of AIDS patients were females and (28.1%) of the total number of AIDS patients were Jordanians.
5. The highest proportion was among married, the highest percentage was among those who had university education, and the highest rate of detection was through voluntary testing.

Keywords: Challenges, Integrate, AIDS, victims of AIDS.

Introduction

Health Care is considered one of the areas of social welfare which is given the greatest attention by communities, social service has invaded many areas including the field of medicine.

AIDS disease is considered one of the most sexually transmitted diseases and it is a source of threat to human beings. It is a global epidemic which has no cure 100%(Ashford, 2000). Furthermore, this disease is one of the most horrible health crises for its effects on human as social and psychological shock, loss of control over emotions and feelings, denial, fear of disease, loss of self-esteem...etc.(The Jordan Red Crescent ,2007). AIDS disease has a direct social impact on society; it causes health and social problems as the relations of family and relatives get weak which makes the patients feel isolated (Sied, 1990). Even the infected children may be exposed to negative reactions from society as rejecting and refusing to accept them in schools to continue their learning. At the moment of discovering the disease, AIDS Patients become shocked denying they are infected and feel regretful, but later they start to accept the disease and coexist with the society.

Social work in the medical field has been regarded as a service to mankind, and a pillar underlying this humanitarian work where the prevalent notion of medical social work was the intervention of social work for providing financial support for patients. Thanks to scientific breakthrough, social service has intervened in changing the social

* College of Princess Alia University, Al-Balqa' Applied University, Jordan.

Received on 26/6/2019 and Accepted for Publication 22/8/2019.

and psychological effects, it also was instrumental in improving the standard and the way of treatment provided by civil services to the patient in the medical institution. (Anas,1984).Nowadays, social media affects young people and leads them to practice risky behaviors that expose them to diseases, especially AIDS.(Murqash,2016)

Problem of the Study

In 2018, new(41) cases were discovered, bringing the number to 1,531 cases in Jordan since the establishment of the National AIDS Control Program (NACP) in 1986, of which 430 are Jordanians and 1101 are non-Jordanians, while the total number of AIDS deaths was 135. This Increase of number of Victims of Aids is the problem of this study .

Objectives

- 1- **To Identifying the total number of AIDS patients in Jordan according to the nationality .**
2. To identify the social and economic characteristics of AIDS patients in Jordan focus in new cases (41) discovered in 2018 according to the place of infection, age, gender and the way of contracting such infection, mode of detection ,Marital status, Education level.
3. To determine the difficulties impede AIDS patients in Jordan to integrate them into society.

Significance of the Study

The social demographic and economic effects of AIDS are dangerous. In certain societies, AIDS disease contributed to a large number of deaths among young people which would lead one day to a generation lacks the adult category (20-30). As AIDS disease infects the adult, its effect is seen clearly in of army, education, agriculture, industry, transport and economy sectors in general (World Bank,2003). Additionally, experts and specialists in economic depression pointed to the horrible and disastrous results of this fatal disease and unless drastic measures were taken, there would be an overall economic depression within three generations in countries that suffer greatly because of such disease (Al-Khozah,2004).

The spread of the culture of silence in Islamic and Arab countries obliged the woman to be obedient and no to ask her husband about his sexual relations, which makes her more exposed to be infected. The woman has to ignore the multi sexual relations of the man with more than a woman. It should be stated here that 90% of AIDS cases in Saudi Arabia were caused by illegitimate sexual intercourse (Al Ra'i newspaper,2003).Moreover, the Sudan has the highest proportion of AIDS cases in the Middle East and North Africa (MENA).These AIDS cases were also caused by illegitimate sexual intercourse with 97% (Al-Dostour,2006), while in Lebanon the proportion of AIDS cases for the same reason was (79%) including homosexual relations with (23%). In Egypt, the official records showed that the main reason for AIDS infection was either insecure sex between men and women with (50%) or homosexuality among men with (20%).

Definition of Terms

- **AIDS:** It is one of the sexually transmitted diseases in the world which has no cures far. It transmits from men to women and vice versa, or from a man to another by contaminated injection needles, multi sexual and illegal relations and having some other venereal disease.
- **AIDS Victims:** The patient who was proved to have this disease and visited the medical center for help.
- **Challenges:** It is the problems facing AIDS patients which could not be solved.
- **Integrate:** It means integrating into the society and living with respect and without discrimination.

Theoretical Framework

For many years, Doctors have been dominating the process of curing illnesses and diseases, where patients are sent to medical institutions in order to treat their health problems, the reason that team work takes a vertical form headed by the doctor who gives orders from the top down therefore the social workers; position was more complicated because of the delayed entrance to the field of medicine besides the way that doctors look at social workers as people with kind hearts who just want to do some good for the community.

The treating physician may have the Vital say in decision making which he thinks is appropriate for the patient, it is known that a doctor-virtue of his specialized character is the scientific authority that is capable of diagnosing, and giving the necessary instructions commensurate with the case of each patient. (Almileegy, 2004)

There is a close and critical connection between social workers and the Nursing Staff in a medical institution with nursing being in contact and in a direct relationship with patients, where the social worker guides the nursing staff to the social needs of the patients and to the patient's personality and to provide comfort while giving them medicine. There's also a close relation between the social worker and the administrative staff of the medical institution where he requires from the administration to provide him with the needs and facilities to complete his work, the social worker also provides services to the administration related o the best interest of the patients, and to follow up their treatment, their hospital stay and arranging patients' visits. (Basheer,1980).

The present study has proceeded with the basics of systems theory (a theory by the Austrian scientist(Von Betalanffy)which suggests that all organisms are systems consisting of subsystems (individuals, families, groups, communities, and organizations) are the main systems within the framework of general practice of social service where they interact with each other to form greater social units and organizations; In this regard any deficiency facing any of these systems will reflect negatively on other systems interacting with this system.(Suleiman, Abed Almajeed, Albaher,2005) and we take in consideration that poverty, school, bad company, free time, migration, and industrialization are factors overlapping to identify the problem of social relationships between these systems.

AIDS Disease all over the World

This disease was first discovered in USA and UK among those of bisexuality or those who had homosexual relations where about 71% of AIDS patients were infected sexually. The World Health Organization (WHO)assured that women's vulnerability to infection is higher than that of men and there are 250 million cases infected sexually per year (Mahmoud,2001). After 36 years of recording the first AIDS case in USA in1981(Refa`t,1992) up to 2015, the number of AIDS patients is estimated by 35 million, most of them (25 million) are from developed countries and it is expected that there will be about 116000 new cases per year (WHO,2015). The latest report concerning AIDS showed that 168 countries had informed WHO of having AIDS cases in their countries (Stewart, 2005) while in 1986 there were 29000 cases in71 countries (Sahawna,1988).

AIDS Disease in Jordan

The Jordanian society- with its special characteristics where values, habits, traditions are greatly respected- imposes behaviors to be followed by each member in society(AIKhozah,2003). Furthermore, the Jordanian society is committed to the religious teachings of holy books that forbid adultery and consider it one of the greatest ethical crimes(Mowad,1986),or illegitimate sexual intercourse with others for their horrible effects such as diseases, social problems and loss of family (Ateia,2003). Young people make up a quarter of Jordanian society.(Khamash, Alsarhan, AIKhozah ,2017)

Article (282) of the Jordanian Punishment Law stipulates that the adulterous woman and her partner are punished by imprison mint for a term of six months to two years (Najm,1994). According to the Punishment Law, adultery is defined by a sexual intercourse between a married woman or man with other than his wife or her husband(Hosni,1978). Although such regulations, laws, habits, traditions and religious teachings forbid adultery, Jordanian statistics in this field revealed that 48.8 % of the Jordanians patients cases were caused by illegitimate Heterosexual intercourse , and (26.8%) caused by MSM (men have sex with men) .(Ministry of Health,2018).

The Jordanian Ministry of Health pays more attention to AIDS disease through an effective effort in the field of prevention and health care. The ministry considers the voluntary testing and counseling services an important point to other activities on prevention of this disease and to support patients; such services would thus be helpful for individuals and couples.

The first AIDS case was recorded for a Jordanian woman in 1986 which was caused by a blood transfusion (Al-

Belad Newspaper,2002). Since then, the Jordanian program to control AIDS was adopted and the Ministry of Health adopted the main goals of the International AIDS Program which undertakes the necessary measures to fight against the disease, reduce its spread and mitigate its impact on the patient and his family and the society in general. The total number of the detected cases since 1986 (the date of establishing the National AIDS Control schedule- NACP) up to 2018 was 1531 cases, of which 431 are Jordanians and 1101 are non-Jordanians, while the total number of AIDS deaths was 135.(Ministry of Health,2018)

In 1999, the Ministry of Health established the Voluntary Counseling and Testing (VCT) Centre to provide advice and assistance to the youth in order to enable them to make their own decisions towards their wrongful behaviors and conduct that might cause a health problem such as AIDS. Moreover, the center provides social and psychological counseling and health care to AIDS patients and their families in addition to supply them with bulletins, regulations and guidance concerning the ways and means of combating this disease(Ministry of Health,1999). The hotline of this center is being supervised by three employees (health supervisor, doctor and social expert).

Previous Relevant Studies

The HIV (AIDS) Issue has caught the attention of many researches and specialists in variant fields of medical science, and after the undertake of a comprehensive survey of previous studies it is noted that the amount of surveys, sources, and references concerning the issue is huge and are specialized in the fields of medical laboratories and experiments.

In respect of the studies that had dealt with the issue from the social and cultural point of view, the studies are so rare, and if they existed they have not dealt with the social or psychological aspect or the social service for patients.

A study by Balbesi (1999) which focused on “The social and psychological state of AIDS patients and covered (25) male and female aids patients” who are registered in the national AIDS program me in Jordan, revealed that (52%) of the patients have lost their jobs and have no source of livelihood, (72%) of them have lost their friends, and (68%) of them feel that they have lost people’s trust, and (80%) of them are deprived of routine human happiness, and that (86%) of them feel depressed, scared, sad, nervous, and worried, and (44%) of them feel pessimism and want to end their own lives.

In respect of psychological reactions, the study found that (96%) of the patients were shocked to know that they were infected with AIDS, and (88%) of them suffer from irritability after getting infected, and (64 %) of them feel their failure in life and loneliness, an (96 %) of the patients feel that they are indirectly responsible for the infection , and (32 %) of them have an impaired memory and concentration. And relating to the satisfaction with the health services provided to AIDS patients the study found that (64%) of the patients are not satisfied with the health services provided to them, (76 %) of them feel embarrassed when they attend health centers, and (68 %) of them complain of difficulties accessing health services. (Balbesi, 1999)

Ismail (2001) had conducted a study in Palestine on the subject “provisions of AIDS in Islamic jurisprudence”. The study aimed at knowing the provisions of the Islamic Shari’a for the breast feeding of AIDS infected mothers, and the provision of patients infecting others with AID knowing that they are infected. This study deduced that Doctors and health workers must provide AIDS patients with the necessary care like any other patients, and should not deny them the right to work and live a normal life, only sparingly; if the patient had repulsive blisters or injuries.

As for the seclusion f AIDS patients, only the doctor has the decision whether to seclude or not to seclude them.

In case of the patients infecting others with AIDS knowing that they have the disease, they are considered guilty of murder, and if they did not know they had the disease they are punished for manslaughter, and it is forbidden for mothers infected with AIDS to breast-feed their babies, and the married couples have the right of the annulment of their contract of marriage if any of them was infected with AIDS.(Ismail, 2001)

Another study conducted by Al-raqqad (2003) entitled “Characteristics of AIDS patients and their psychological

needs". This study aimed at knowing the characteristics of aids patients and their psychological and social needs, and their families; the sample of the study included (15) AIDS patients of those who contact the center and hotline of The Ministry of Health in Jordan during the time of the study. The result of the study was that all the patients were educated males, and the common way of infection was by the promiscuity with females, and most of the infections contracted outside Jordan.

The result also found that the patients' reactions started with shock, disbelief, denial, anger, fear, death wish and suicide attempts.

The majority of the patients knew about methods of transmission of the disease, and aware and ultimately informed of /health care for themselves and for others, besides being ready to participate in awareness-raising and education concerning the disease.(Alraqqad, 2003)

However, Shokur (2005) had conducted a study through which she had tried to design an indicative schedule for secondary students for the prevention of HIV (AIDS) and to take advantage of the indicative schedule in creating the awareness necessary for dealing with others (friends, individuals, and groups of society).

The study also indicates that (96 %) of males and females do not know the real cause for AIDS. The study was applied to a sample of (460) male and female students from schools in Cairo, Gizah.

In foreign literature, we find that studies on AIDS focus on the cognitive, disease prevention, and social stigma. (Shokur, 2005)

A study by Stucker (1997) and others which examined the health awareness and risky behaviors adulterous women was conducted in Germany in 1997. The study population was a group of (80) adulterous women in Bosham and results indicated that the average age of adulterous women is 31.4 years and that 95 %) of them considered having periodic examinations as a necessity, and as a part of health prevention, and that (95 5) of them use condoms constantly as it can avert sexual disease infections especially AIDS.(Stucker,1997)

Another study conducted by (Cina and Krosen) included 9 female AIDS patients from Asia has found that fear of shame and rejection and the fear of discrimination had caused these women not to disclose their disease to others, and not to seek for health care. (UNAIDS, 2002).

A further study by Harvard University in the US conducted in (2006) called on American women to emulate Muslim women in Modesty and Morality as a mean if eradicating moral decay and prevalent serious diseases like AIDS.

The study also showed that within the Muslim community everyone lives in peace and safe from these serious diseases because it is stable and away from moral decay, as every Muslim woman is adherence to Islamic teachings, thus there is no way for sexual intercourse out of wedlock.(Al Jazeera Magazine, 2006).

Methodology of the study

Population of the study

The study used the comprehensive social survey for all Jordanian (41) infected Aids during (2018) who visited the counseling centers in different Jordanian districts (Amman, Zarqa, Jerash, Madaba, Aqaba and Al-Balqa).

The instrument of the study and its reliability and validity

For collecting data, the researcher used a questionnaire consisted of 30 items distributed into two dimensions: the first dimension relates to the patients' general information while the other one addresses the difficulties facing AIDS patients in Jordan as well as the suggestions they have made to face such difficulties.

To check the instrument's validity, the study was presented to five arbitrators who are specialized in medicine, sociology, social service, psychology and religion to ensure that the instrument is consistent with the objectives of the study in which their notes and remarks were taken into account. The instrument's reliability was checked by applying the study on a sample consisted of 10 patients where the value of Alpha coefficient was (0.89%) which indicated that the instrument has a high degree of reliability.

Statistical Treatment

The descriptive method was used in analyzing data as well as using standard deviation and arithmetic means. The results were as follows:

Conclusion

Results concerning the first objective: Identifying the total number of AIDS patients in Jordan according to the nationality .

Table (1) showed the total number of cases among Jordanian and other is 1,531 cases in Jordan since the establishment of the National AIDS Control Program (NACP) in 1986, of which 430 are Jordanians and 1101 are non-Jordanians, while the total number of AIDS deaths was 135.

Although most of the infection cases occurred among Jordanians with (71.9%) as shown in table (1), about (28.1%) of infection cases occurred among non -Jordanians which indicates a local infection that caused the disease. Therefore, there is an urgent need to intensify education and awareness programs to reduce the spread of this disease locally.

Table(1): Cumulative number Hive/Aids in Jordan according nationality selected year during period (1986-2018)

Year	Jordanians	Others	total
1986	2	2	4
1990	6	5	11
1994	11	10	21
2000	4	34	38
2005	17	33	50
2010	19	53	72
2015	20	81	101
2018	41	72	113
Total all cases (1986 – 2018)	1101 71.9%	430 28.1%	1531

Results concerning the second objective: To identify the social and economic characteristics of AIDS patients in Jordan focus in new cases (41) discovered in 2018 according to the place of infection, age, gender and the way of contracting such infection, mode of detection ,Marital status, Education level.

However, the cases contracted the disease outside Jordan is (52.1%),as shown in table(2); about (188) cases (43.7%) contracted the disease inside Jordan which indicates a local infection that caused the disease. Therefore there is a need to intensify health awareness, guidance and prevention programs in order to reduce the spread of this disease.

Table (2) showed that the age groups (20-29) and (30-39) are the highest groups in being infected by this disease with (59.8%) for each, followed by the age group (40-49) with (17.2%). It is noted that (66%) of those patients were less than 40 years old which is the period of being active economically and sexually. Additionally, the data showed that (79.2%) of the patients were males while (19.8%) of them were females.

The previous table also showed that (53%) of the patients were infected through illegitimate Hetrosexual intercourse while blood transfusion caused(16 %) of AIDS infections, **MSM(men have sex with men)** caused (16.7%),drugs and intravenous injection caused (4%) of such infections whereas the infection that has been transmitted from the mother to her child was (2.3%). Consequently, greater attention must be paid to awareness programs, education sessions focusing on the religious aspect of this issue. In the same context, Sheikh Mohammad Sayed Tantawi, the Sheikh of Al-Azhar, called on all religious leaders in their societies to fight against AIDS in order to protect young people who would be the leaders of tomorrow (Tantawi, 2006).

Table (2): Distribution of AIDS patients among Jordanians according to the place of infection , age group.
The way of infection (1986-2018)

Place	Male	Female	Total	Proportion
Inside Jordan	135	53	188	43.7
Outside Jordan	195	29	224	52.1
Unknown	15	3	18	4.2
Total	345	85	430	100
	79.2%	19.8%	100	100
Age group	Male	Female	Total	Proportion
Less than 5	6	4	10	2.3
14 - 5	8	2	10	2.3
19 - 15	8	3	11	2.6
29- 20	102	24	126	29.3
39- 30	107	24	131	30.5
49- 40	59	15	74	17.2
More than 50	45	11	56	13.0
Unknown	10	2	12	2.8
Total	345	85	430	100
The way of infection	Male	Female	Total	Proportion
Hetrosexual	176	52	228	53.0
Blood / Blood Products	51	18	69	16.0
MSM(men have sex with men)	72	0	72	16.7
Drugs addiction (IVDUs)	12	5	17	4.0
Mother to her child	7	3	10	2.3
Unknown	27	7	34	7.9
Total	345	85	430	100

Table (3) discussed the results of the field study after meeting all cases infected in (2018) . table showed the total number If infected is (41) , only (8) cases occurred among female and (31) are male.

Table (3) showed about (25) cases (85.4%) contracted the disease inside Jordan which indicates a local infection that caused the disease among Jordanians people. Therefore there is a need to intensify health awareness, guidance and prevention programs in order to reduce the spread of this disease.

From the same table (3) the data showed that the age groups(20-29) and (30-39) are the highest groups in being infected by this disease with (57%) for each, followed by the age group (40-49) with (19.5%). Followed by the age group More than 50 with (17.1%). It is noted that (57%) of those patients were less than 40 years old which is the period of being active economically and sexually. From this table we note that no cases infected less age group (20) in 2018. Additionally, the data showed that (79.5%) of the patients were males while (19.5%) of them were females.

Regarding to The way of infection table (3) also showed that (68.3%)of the patients were infected through illegitimate Hetrosexual intercourse, while no cases regarding blood transfusion caused of AIDS infections, MSM(men have sex with men)caused (24.4%), Contaminated Tools caused (2.4%) of such infections whereas the infection that has been transmitted from the Transplant was (2.4%). Consequently, greater attention must be paid to awareness programs, education sessions focusing on the religious aspect of this issue. In the same context, we need to focus in religious leaders in their societies to fight against AIDS in order to protect young people who would be the leaders of tomorrow.

Table (3): Distribution of AIDS patients among Jordanians infected in 2018 according to the place of infection, age group, The way of infection

Place	Male	Female	Total	Proportion
Inside Jordan	27	8	35	85.4
Outside Jordan	5	0	5	12.2
Unknown	1	0	1	2.4
Total	33	8	41	100
Age group	Male	Female	Total	Proportion
Less than 5	-	-	-	-
14 - 5	-	-	-	-
19 – 15	-	-	-	-
29- 20	8	3	11	24.4
39- 30	11	3	14	36.6
49- 40	9	-	9	19.5
More than 50	5	2	7	17.1
Total	33	8	41	100
The way of infection	Male	Female	Total	Proportion
Hetrosexual	21	7	28	68.3
Homsexual	10	0	10	24.4
Blood / Blood Products	0	0	0	0
Contaminated Tools	0	1	1	2.4
Mother to her child	0	0	0	0
Transplant	1	0	1	2.4
Unknown	1	0	1	2.4
Total	33	8	41	

Distribution of AIDS patients among Jordanians infected in 2018 according to Marital status , Education level.

Table (4) showed about (14) cases (34.1%) contracted the disease is single. (61.0%) married. While 2.4 divorced. this data need to focus in married group in awareness to the danger of aids .

From the same table (4) we see the University level is the highest level of patient (41.4%) , followed by the Secondary education level (34.4%) , while Elementary (9.7) and diploma is (9.7%) . this data need to focus in students in the university during study in awareness to the danger of aids .

Table (4): Distribution of AIDS patients among Jordanians infected in 2018 according to Marital status , Education level .

Marital Status	Male	Female	Total	Proportion
Single	13	1	14	34.1
Married	18	7	25	61.0
Divorced	1	0	1	2.4
Unknown	1	0	1	2.4
Total	33	8	41	100
Education Level	Male	Female	Total	Proportion
Elementary	3	1	4	9.7
Secondary	12	2	14	34.1

Marital Status	Male	Female	Total	Proportion
Diploma	4	0	4	9.7
University	13	4	17	41.4
Others	1	1	2	4.8
Total	33	8	41	100

Distribution of AIDS patients among Jordanians infected in 2018 according mode of detection.

Table (5) showed the Distribution of AIDS patients among Jordanians infected in 2018 according mode of detection, the data indicated that Voluntary Testing is the highest results which is (46.3%), the second way is hospital review (14.6%), third way is travel (4.8%). Transplant is fourth way (2.4%). This table showed that (31.7%) is others way. This data needs to focus on the awareness of the community to Voluntary Testing to be sure they are free from this dangerous disease and to encourage them to avoid themselves from being infected in the future.

Table (5): Distribution of AIDS patients among Jordanians infected in 2018 according mode of detection

Mode of Detection	Male	Female	Total	Proportion
Voluntary Testing	13	6	19	46.3
Hospital	6	0	6	14.6
Travel	2	0	2	4.8
Transplant	1	0	1	2.4
Other	11	2	13	31.7
Total	33	8	41	100

Results related to the Third objective: identifying the difficulties impeding Jordanian AIDS patients from integrating them into society.

Table (6): Difficulties impeding AIDS patients arranged in ascending order according to the means of difficulties

Difficulty	M	Std	Rank	Degree
Shame, discrimination and sensitivity to the risk of the disease.	3.78	0.45	1	High
Lack of privacy in hospitals (public and private).	3.75	0.43	2	High
Adjusting wrongful behaviors	3.69	0.41	3	High
Financial problems (low income)	3.61	0.35	5	Moderate
Transport	3.57	0.41	6	Moderate

Table (6) showed the difficulties impeding AIDS patients arranged in ascending order according to their means. The difficulty of shame and discrimination due to the disease sensitivity came first with a high degree, followed respectively by the difficulty of lack of privacy especially in public and private hospitals with a high degree, the difficulty of adjusting wrong behaviors came third with a high degree, while the difficulty related to patients' financial problems came fourth with a moderate degree and finally, the difficulty of transport came last with a moderate degree.

Recommendations

- 1- Follow all medical and administrative procedures to provide privacy and confidentiality for patients (public and private hospitals).
- 2- Prepare education programs and strategies for that category in society which is mainly exposed to being infected by this disease (youth, drivers, prisoners and refugees, married, education) in order to warn them about the dangerous

effects of such disease, ways of infection and prevention methods.

3- Work on establishing a Fund supported by private and public sectors to help those patients who are financially incapable of securing life necessities.

REFERENCES

- Albilad newspaper. (2002) A Report About AIDS Disease In Jordan, V441.
- AL-Dastour newspaper. (2006) A Report About AIDS disease, V14133.
- Al Jazeera Journal.(2016) Ethics Is prevention for Aids , Volume (20)Number (2), Accessed online at : (www. Gateway.ovid.com) . June 13 2016.p54.
- AlKhozahe, H. (2003) AIDS in Jordan, article published in Al-Rai news paper 11949,p55.
- AlKhozahe, H .(2004)Sexual Education, silence &shame, published report in Al-Arab Al-yum,V2,p8.
- Al-Ra`i newspaper.(2003) A Report on AIDS, Riyadh, Volume 12223.
- Alraqqad, F.(2003) Psychological Need for Aids patient In Jordan, Master Thesis , Jordan University, Amman, Jordan,p33.
- Almileegy, I.(2004) Medical Social Work, Almahrefah Library , Alexandria, Egypt, p114.
- Anas, A.(1984) Social Service Development – Empirical Study In Hospital ,Ph,D Thesis , Helwan University, Cairo, Egypt,P19.
- Ashford, L . (2000) New perspectives on population , lessons from Cairo population Bulletin 50 , no 1, P 10 . Accessed online at : (www. Gateway.ovid.com) .
- Ateia, A.(2003) Women e Ethic Crimes In The Jordanian Society: field study, Unpublished thesis,Jordan,Amman,p55.
- Balbesi, A .(1999) Psychological Situation For Aids Victims In Jordan, Ministry of Health, Un Published, Amman, Jordan, p 52.
- Basheer ,I.(1980) Social Work in the Field of Medical and Rehabilitation, Modern University Library , Alexandria, Egypt, p11.
- Hosni,M.(1978) Punishment Law(section15),Dar al-nahda al-arabia, Cairo, 456.
- Ismail, H.(2001) Aids In Islamic Religion, Master thesis ,An- Najah National University, Nablus, Palestine.
- Khamash,M .Alsarhan,M.AIKhozahe, H. (2017) Micro projects and Confronting Unemployment And Poverty Among Youths In Jordan: Afield Study. *Dirasat: Human and Social Sciences*, Volume 44.No 1.p 144.
- Ministry of Health in Jordan .(1999)Evaluating Health Services, Unpublished, Third Report, Amman, Jordan, p 144.
- Ministry of Health in Jordan.(2018) Special report of counseling & awareness center, Ministry of Health, Amman, Jordan.
- Mohammad,J.(2001) Muslim woman in the era of globalization, DarAKitab, Cairo, Egypt, p44.
- Mowad,A .(1986) Comprehensive Cyclopedia In The Indecent Assault Crimes, Dar Matboat Jameia, Cairo, Egypt, p104.
- Murqash.M.(2016) Attitude of Saudi University Students Towards The use Of Electronic Educational Means On Study : A Sociological Study .*Dirasat: Human and Social Sciences*, Volume 43.Supplement 6.p 2763.
- Najm,M.(1994)CrimesAgainstPerson.Darthagafa,Amman,Jordan,pp274-280.
- Refa`t, K.(1992) The whole of AIDS, Dar Akhbar Alyuim, Cairo, Egypt, p15.
- Sahawnah, F.(1988) Aids Is A crisis In public Health, AL-resala Institution , Beirut , Lebanon, p15.
- Seid, A. (1990) An Introduction In The public Health &Society Medicine, Cairo, Egypt, p19.
- Shokur, F.(2004) prevention program For Secondary School Student Against Aids, ph,D Thesis, Ain Shamies University , Cairo,Egypt.p124.
- Suleiman, H. Abed Almajeed, H, Albaher.M(2005) Generalist Social Work Mezzo & Macro Practice Group, Organization & Community , Majed Association for Study and Distribution, Lebanon, Beirut, P 182.
- Stewart, G.(2003) Man Aging HIV , first published , Australasian medical publishing company limited (ACN 00005854) 2003 .p 73.
- Stucker, M .(1997) Health Consciousness And Risk Behavior Of Prostitutes . *journal of Epidemiology* . 48(3):166-70,1997 Mar. Accessed online at: (www. Gateway.ovid.com) .
- Tantawi,M,S. (2006) A Speech To Al-Azhar Sheikh In The Second Regional Forum For Religious leaders To Fight AIDS In The Arab Countries, Cairo, Egypt.

- The Jordanian Red Crescent (2007) Immunity Deficiency Virus & AIDS, the Jordanian Red Crescent publications, Jordan, Amman.
- UNAIDS And World Health Organization(2002) Aids. Epidemic Update : Under Embargo , December 2002,p33 -35 .
- World Bank.(2003) AIDS leads to Economic Explosion, A report to World Bank experts in the annual meeting, Dubai, UAE, Al-Ra'I newspaper,12058,p 55.
- World Health Organization. (2015) International Program Of AIDS, Regional office of the eastern Mediterranean ,Alexandria. Egypt, p63.

التحديات التي تعرقل اندماج مرضى الإيدز في الأردن في المجتمع

حسين عمر الخزاعي*

ملخص

تهدف هذه الدراسة إلى معرفة التحديات التي تواجه مرضى الإيدز في الأردن للاندماج في المجتمع، ومتابعة أعدادهم منذ اكتشاف المرض في الأردن في عام 1986، وتوزيع المصابين حسب العمر، والجنس، ومكان الإصابة بالمرض وطريقة الإصابة، والحالة الزوجية، والمستوى التعليمي، وطريقة اكتشاف المرض، واستخدام الباحث منهج المسح الاجتماعي الشامل للمرضى الذين اكتشف إصابتهم في المرض في عام 2018 والبالغ عددهم (41) حالة، وخلصت الدراسة إلى النتائج الآتية:

1. يصاب المريض في الإيدز في بداية اكتشاف المرض بالصدمة والانكار واللوم وتانيب الضمير .
 2. صعوبة كسب ثقة المصاب، وتعديل السلوكيات الخطرة، عدم وجود الخصوصية والسرية ولاسيما في (المستشفيات الخاصة والعامة)، والشعور بوصمة العار والتمييز لحساسية المرض وخطورته، الصعوبات المادية للمرضى، هذه العوامل التي تعرقل اندماجهم في المجتمع.
 3. في عام 2018 اكتشف (41) حالة إصابة جديدة في مرض الإيدز، ليرتفع عدد الحالات بين الأردنيين إلى (430) حالة منذ تأسيس البرنامج الوطني لمكافحة الإيدز في عام 1986، ووصل عدد الحالات الإجمالي إلى (1531) حالة بين الأردنيين وغير الأردنيين في نهاية عام 2018، منها 1101 إصابة غير أردنيين. وبلغ إجمالي الوفيات بالمرض 135 حالة وفاة.
 4. تعتبر المخالطة الجنسية غير الشرعية السبب الأول في طرق الإصابة بمرض الإيدز بين الأردنيين إذ شكلت (53%)، وإن (85.4%) من حالات الإصابة تمت في الأردن، واحتلت الفئات العمرية (30 - 39)، (40-49) الترتيب الأول بين المصابين إذ شكلت (55%) من مجموع الإصابات، وبلغت النسبة بين الإناث المصابات بالمرض (19.8%)، وبلغت نسبة الأردنيين (28.1%) من المجموع الكلي للإصابات الموجودة في الأردن.
 5. أعلى نسبة بين المصابين كانت في فئة المتزوجين، وأعلى نسبة كانت بين الذين تعليمهم جامعي فأكثر، وأعلى نسبة اكتشاف كانت عن طريق الفحص الطوعي لاكتشاف المرض.
- الكلمات الدالة:** الإيدز، مريض الإيدز، التعايش مع المرض، التحديات.

*كلية الأميرة عالية الجامعية، جامعة البلقاء التطبيقية: الأردن.
تاريخ استلام البحث: 2019/6/26، وتاريخ قبوله: 2019/8/22.