A pilot study on the effect of HIV information

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Introduction

The role of containing HIV during travel may be the most important travel related health risk. E.g., between 15 and 25 Norwegian travelers contract HIV every year. Nobody has done an experimental study to see what sort of information is most effective to prevent risk behavior. After an Australian campaign where images of the Dead were prominent, they compared risk behavior in Australia and New Zealand (where this campaign was not shown) and found more risk behavior in Australia (1). Some authors have claimed that fear without any directions of what to do to avoid the risk would lead to a cognitive neglect of the fear, and thereby increased risk behavior. On the other hand, a combination of raising fear and clear advice on how to avoid the risk, is a strong motivating factor (2, 3). While some campaigns seem to have a high degree decide if he or she will take risks or not. Therefore fear would be expected to be an appropriate mean of inducing risk modification. A study from 2010 (4) points out “anticipated regret” as a producer for the use of condoms when having casual sex (5)

Results

In this pilot study, 12% had sex with the local population. This indicates that our assumption of 4% is too conservative, and that a lower number of respondents could be sufficient. Of the ones who had sex with the local population three had got the scary sheet (P<0.05). The mean rating of usefulness was 0.56, between January and March 2010 (4) points out “anticipated regret” as a predictor for the case that could improve the response rate. On the other hand, the anonymity would not be conceived as being useful in this study. This could possible scare away some participants, Furthermore, the validity of the results would be doubtful, with a response rate of only 57%

Discussion

The choice of pictures gives a significantly different perception of the seriousness of the information, although the text is exactly the same. Apparently, scary pictures do not affect or the perceiving of the information as useful or the willingness to read the information. Furthermore, the validity of the results would be doubtful, with a response rate of only 57%

After tests from the travel, the travelers got an anonymous reply form, with a postage-paid envelope. The intention was to assess if the travelers had had sex with the local population, how many partners and if they had used condoms. Also, we made a visual analogue scale (VAS) registration (values 0-10) to see if the information sheets were perceived as scary or not, useless or helpful, if they thought the information had any impact on risk behavior and the pleasure of traveling. Those who did not send in the form were reminded two times, by e-mail or telephone.

The recruiting was more difficult than expected, as only 160 persons were found eligible for the study and 100 persons accepted to participate between January 16 and March 5, while more than 2000 persons visited the clinic during this period. Of these, eight withdrew from the study, and 57 did not answer, resulting in only 57 completed forms. Of those who responded there were 41 women and 16 men. Of these, 25 got the scary and 25 the non-scary sheet (six unknown, one had read both). Seven of the 27 responders (five men and two women) had had sex with the local population, two of them without a condom. Of the ones who had sex with the local population three had got the scary, three the non-scary and one had read both sheets. The two who had not used condoms got different sheets. From Robert C. Baines, Charles Abraham, Gary Koc: Scary warnings and rational precautions: A review of the psychology of fear appeals. Psychology & Health, Volume 14, Issue 6 November 2001, pages 613 - 630.

The mean rating of scariness was 0.86 and 0.49 for the scary and non-scary sheet (P<0.05). The mean rating of usefulness was 0.59, for degree of careful reading 0.73, and for degree of destroying the vacation 0.10. For the three latter issues there were no differences for the two information sheets. There were no significant gender differences.

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