

Perception of Clinical Students on the Care of HIV Positive Patients: A Study of Federal Medical Centre, Yenagoa, Bayelsa State

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ABSTRACT

Background: Perception of (Nursing, Medicine and Medical Laboratory) Students on the care of HIV positive patient is a concern for nurse educators and staffs in facilities where students are posted to and it has the potential to greatly influence the quality of patient care and thus the overall image of the profession and even health workers, thus this is a study on the perception of students on the care of HIV positive patients in Federal Medical Centre, Yenagoa, Bayelsa State.

Objectives: The purpose of this study is to show the importance of student's perception and care for HIV positive patients which will either lead to facilitating the healing of the HIV positive patient. As promulgated by the American Journal of health promotion since 1986. Therefore, it is essential that health workers, including students in training who are agents of health promotion to patients including HIV positive patients have a role to play in facilitating the healing process of HIV positive patients and at such should be well informed about the disease and measures of caring for patients with the disease. Hence the need for this study.

Methodology: the study utilized questionnaire of 21 questions which is sectioned into four (i.e. A-D) with section A consisting of 6 questions, section B, 9 question, section C, 3 questions and section D, 5 questions. These questions were distributed to 120 respondents comprising of nursing, medicine and medical Laboratory students doing their posting at Federal Medical Centre, Yenagoa, Bayelsa State. Data were collected and analysed using tables with a

simple calculation of frequencies and percentages.

Results: The results from the study revealed that student nurses, medicine students and medical laboratory students have a variety of perception about HIV and AIDS problem. Majority of the students stigmatize AIDS patients as they felt uncomfortable and afraid when caring for patients with HIV/AIDS. They fear infection through accidental pricks.

Conclusion: Hospitals should also provide adequate protection for students and staff so that students do not fear handling HIV and AIDS patients. There is need for continuous and particularly HIV and AIDS awareness programs to inculcate in them the importance of taking precautionary measures to avoid been infected with the virus.

Keywords: Clinical students, HIV/AIDS, FMC, Questionnaire, perception.

INTRODUCTION

HIV/AIDS remains one of the most difficult health challenges for health care professionals and governments around the world since its first appearance in 1980 in San Francisco, USA^{1,2}. This has been declared the worst disaster in history as recorded by humans, and it continues to be an issue of public importance, particularly in developing countries where the health, economic, and psycho-social implications are profound^{3,4}. According to the⁵. HIV/AIDS is a global Pandemic and as of 2010, approximately 34 million people have

HIV worldwide. Approximately 16.8 million are women and 3.4 million are less than 15 years old. Also, it accounted for about 1.8 million deaths in 2010, down from a peak of 2.2 million in 2005^{5, 6}. Sub-Saharan Africa is the region most affected and in 2010, an estimated 68% (22.9 million) of all HIV cases and 66% of all deaths (1.2 million) occurred in this region⁵. In Nigeria, the HIV prevalence rate among adults aged 15–49 is 0.9 percent. Nigeria has the second-largest number of people living with HIV^{7, 8}. The HIV epidemic in Nigeria is complex and varies widely by region. In some states, the epidemic is more concentrated and driven by high-risk behaviours, while other states have more generalized epidemics that are sustained primarily by multiple sexual partnerships in the general population. Youth and young adults in Nigeria are particularly vulnerable to HIV, with young women at higher risk than young men.

Regardless of the widespread incidence of HIV/AIDS in Sub-Saharan Africa, including Nigeria, poor care and attention to HIV/AIDS patients has been a source of concern, as people living with HIV/AIDS are frequently stigmatized and receive inadequate care, particularly in the late stages of the disease^{9; 10}.

Several factors have been reported to contribute to poor perception of care towards HIV/AIDS patients. Among these are: fear of contacting the disease, lack of a definitive cure for the disease, poor hospital environment, poor knowledge on HIV/AIDS and communication barriers^{11; 12}. Among clinical students doing their postings in medical wards where HIV/AIDS patients are attended to, the perception of care towards these people is important as they will eventually get into the work force and practice what they have been used to as students. It is therefore important to determine the perception of care towards HIV/AIDS among students in their clinical postings in Federal Medical Centre, Ovom Yenagoa, Bayelsa State.

MATERIALS AND METHODS

Research Design

A descriptive survey design was used to determine clinical student's perception of care towards HIV/AIDS patients in Federal Medical Centre Ovom, Yenagoa, Bayelsa State, Nigeria.

Research Setting

This study was carried out at Federal Medical Centre, Ovom, Yenagoa Bayelsa State. It is a 300-bed space and 50cots modern facility for health care with different specialties including obstetrics and gynaecology, paediatrics and child health, orthopedic, medical, surgical, dental, physiotherapy units and a radiological and pharmacy complex which attends to the health needs of the people. The workforce consists of 1000 personnel made up of doctors, nurses, medical laboratory scientists, pharmacist, physiotherapist, hospital administration staffs and accounts. The hospital is located in Ovom, Yenagoa, Bayelsa State capital and subserves people from Yenagoa and its environs as well as a center of referral for difficult cases including complicated labour and therefore was chosen for this study. It also serves as an institution for training nursing, medical laboratory and medical as well as other health professions in Bayelsa State.

Target Population

The target population of study consists of all students in nursing, medicine and medical laboratory science doing their clinical posting in Federal Medical Centre Ovom, Yenagoa, Bayelsa State.

Sample/Sampling Technique

A simple random sampling technique was used for this study to obtain a total of one hundred and twenty students who gave consent for the study. This involved the administration of questionnaire to forty in nursing, medicine and medical laboratory each.

Instrument for Data Collection

The instrument used for this study was a self-structured questionnaire titled Perception of Clinical students on the care of HIV/AIDs patients in Federal Medical Centre Ovom, Yenagoa Bayelsa State. It consists of three sections (Section A, B and C) with a total of twenty-two items. Section A was designed to elicit demographic data of respondents, Section B – to elicit information on perception of clinical students in the care of HIV/AIDs patients in Federal Medical Centre, Ovom, Yenagoa Bayelsa State while Section C was designed to elicit information on factors influencing perception of care among clinical students in Federal Medical Centre, Ovom Yenagoa.

Validity and Reliability of Instrument

To ensure content validity of the instrument used, a thorough review of literatures was made. Thereafter, the researcher presented the questionnaires to the project supervisor and other experts for assessment, verification, correction, suggestions and advice. The corrections and modifications were affected to ensure that the items in the questionnaires are valid for the study.

Reliability of the instrument used by the researcher was ensured by, a test-retest of method which involves the administration of twenty questionnaires in another health care facility (Niger Delta University Teaching Hospital, okolobiri) prior to the main study. The tested questionnaire was re – evaluated by the researcher’s supervisor and two other experts in the field. Advices and suggestions made were incorporated into the final questionnaire. The tested and newly developed questionnaire that was administered for the study showed no significant different from the first, thus making the questionnaire reliable for the study.

Method of Data Collection

The researcher was directly involved in the collection of data from respondents using questionnaires specifically design to elicit information on perception of clinical students in the care of HIV/AIDs patients in Federal Medical Centre Ovom, Yenagoa, Bayelsa State. The participants are approached by the researcher during break session. Self-structured questionnaires were administered to those who gave consent for the study and were expected to complete the item within a period of sixty minutes and this was done over a period of one month.

Method of Data Analysis

To ensure standard analysis of studied parameters, The Scientific Package of Scientific Solutions (SPSS) version 17.0 for windows statistical software was used to analyze data from the study. Frequency and Percentage was obtained for descriptive statistics and test of significant relationship for studied variables was done using the Pearson’s Chi-square (X^2) with level of significance set at 5% (0.05).

Ethical Considerations

A letter of identification was obtained from the Bayelsa State School of Nursing, Tombia. The purpose of the study was explained to the women and a verbal consent was obtained.

This was done to all participants who joined the study on a voluntary basis and were asked to opt out of the study at any moment if they deem it necessary.

RESULTS

This shows the statistical operations on the data in tables from which percentages were calculated to show the mathematical results of the study. A total of 120 questionnaires were administered to respondents.

Table 4.1 FREQUENCY DISTRIBUTION OF SEX OF RESPONDENTS

SEX	FREQUENCY (F)	PERCENTAGE (%)
Male	67	56
Female	53	44

Fig: 4.1 show that out of 120 respondents, 67 (56%) have males and 53 (44%) were females

Table 4.2 FREQUENCY DISTRIBUTION OF AGE

AGE	FREQUENCY (F)	PERCENTAGE (%)
Below 20	5	4
20 – 30	106	88
Above 30 years	9	8

Fig: 4.2 shows that out of 120 respondents, 5 (4%) were below 20, 106 (88%) were 20 – 30 years of age and 9 (8%) were above 30 years of the total respondents.

Table 4.3 FREQUENCY DISTRIBUTION OF MARITAL STATUS

AGE	FREQUENCY (F)	PERCENTAGE (%)
Single	104	8
Married	15	12
Divorced	1	2
Widowed	0	0

Fig: 4.3 above show that if the total respondents 104 (8%) were singles 15 (12%) married, 1 (2%) divorced.

Table 4.4 FREQUENCY DISTRIBUTION OF COURSE OF STUDY

COURSE	FREQUENCY (F)	PERCENTAGE (%)
Nursing	40	33
Medical Laboratory	40	33
Medicine	40	33

Fig:4.4 above shows that of the total respondents 40 (33%) were nursing students, 40 (33%) Medical Laboratory students and 40 (33%) were Medicine Students.

Table 4.5 FREQUENCY DISTRIBUTION OF RELIGION

RELIGION	FREQUENCY (F)	PERCENTAGE (%)
Christian	119	98
Traditional Religion	1	2
Muslim	0	

Fig: 4.5 above show that of the total respondents 119 (98%) were Christians, 1 (2%) Traditional Religion.

Table 4.6 FREQUENCY DISTRIBUTION OF LEVEL

LEVEL	FREQUENCY (F)	PERCENTAGE (%)
100 – 300 L	69	57
400 – 600 L	51	43

Fig:4.6 above shows that of the total respondents 69 (57%) were students from level 100-300 and 51 (43%) were from level 400-600.

OBJECTIVE 1: TO IDENTIFY CLINICAL STUDENTS PERCEPTION OF HIV/AIDS PATENT CARE

Table 4.7.1 Are you willing to take care of an HIV/AIDS patient?

OPTIONS	FREQUENCY (F)	PERCENTAGE (%)
Yes	106	88
No	14	12

Fig:4.7.1 shows that 106 (88%) of the total respondents are willing to care for HIV/AIDS patients and 14 (12%) are not willing to care for HIV/AIDS patients.

Table 4.7.2 Have you ever take care of an HIV/AIDS patient?

OPTIONS	FREQUENCY (F)	PERCENTAGE (%)
Yes	53	44
No	67	56

Fig: 4.7.2 shows that 53 (44%) of the total respondents have cared for HIV/AIDS patients and 67 (56%) of the respondents have not taken care of HIV/AIDS patients.

Table 4.7.3 Should HIV/AIDS patients be kept in isolation without any form of care

OPTIONS	FREQUENCY (F)	PERCENTAGE (%)
Yes	3	2
No	117	98

Fig: 4.7.2 shows that 3 (2%) of the total respondents wants HIV/AIDS patients to kept in isolation without any form of care and 117 (98%) respondents wants HIV/AIDS patients kept in isolation and rendered care.

Table 4.7.4 Will you refuse to take care of HIV/AIDS patients if you are the one on call?

OPTIONS	FREQUENCY (F)	PERCENTAGE (%)
Yes	5	4
No	115	96

Fig: 4.7.4 shows that 5 (4%) of the total respondents will not care for HIV/AIDS patients if they are on call and 115 (96%) respondents will take care of HIV/AIDS patients if they are on call.

Table 4.7.5 Are you comfortable taking care of an HIV/AIDS patient

OPTIONS	FREQUENCY (F)	PERCENTAGE (%)
Yes	67	56
No	53	44

Fig:4.7.5 shows that 67 (56%) of the total respondents are comfortable taking care of HIV/AIDS patients and 53 (44%) care not comfortable taking care of HIV/AIDS patients.

Table 4.7.6 would you encourage a colleague to care for an HIV/AIDS patient?

OPTIONS	FREQUENCY (F)	PERCENTAGE (%)
Yes	72	60
No	48	40

Fig: Table 4.7.6 shows that 72 (60%) of the total respondents would encourage their colleague to care for an HIV/AIDS patient and 40 (40%) respondents would not encourage their colleague to care for an HIV/AIDS patient.

Table 4.7.7 Do you feel upset when caring for HIV/AIDS patient?

OPTIONS	FREQUENCY (F)	PERCENTAGE (%)
Yes	7	6
No	113	94

Fig: 4.7.7 shows that 7 (6%) feel upset when caring for HIV/AIDS patient

Table 4.7.8 Do you show sympathy in caring for HIV/AIDS patient?

OPTIONS	FREQUENCY (F)	PERCENTAGE (%)
Yes	62	52
No	58	48

Fig: 4.7.8 shows that 62 (52%) of the total respondents shows sympathy in caring for HIV/AIDS patient and 58 (48%) do not show sympathy in caring for HIV/AIDS patient.

Table 4.7.9 should collection of blood and other samples from HIV/AIDS patient be avoided during care?

OPTIONS	FREQUENCY (F)	PERCENTAGE (%)
Yes	5	4
No	115	96

Fig: 4.7.9 shows that 5 (4%) of the total respondents, do not accept blood and other samples should be collected from HIV/AIDS patient and 115 (96%) respondents accepts that blood and other samples should be collected from HIV/AIDS patient.

OBJECTIVE 2: STUDENTS RESPONSE ON CARE OF HIV/AIDS PATIENT.

Table: 4.8.1

QUESTION/STATEMENT	A	SA	D	SD	UNDECIDED
I will never care for an HIV/AIDS patient	2%	11%	39%	43%	5%

Table: 4.8.2

QUESTION/STATEMENT	A	SA	D	SD	UNDECIDED
Care of HIV/AIDS patient should be by experienced personnel alone and not students	19%	20%	34%	20%	7%

Table: 4.8.3

QUESTION/STATEMENT	A	SA	D	SD	UNDECIDED
I prefer to care for patients with other ailment apart from HIV/AIDS	17%	8%	38%	25%	12%

OBJECTIVE 3: FACTORS INFLUENCING CARE TOWARDS HIV/AIDS PATIENTS

Table 4.9.1. Do fear of contracting HIV infection affect your care for patients with the disease?

OPTIONS	FREQUENCY (F)	PERCENTAGE (%)
Yes	63	53
No	57	47

Fig: 4.9.1 shows that 63 (53%) of the total respondents accepts the researcher's statement and 57 (47%) do not accept the researcher's statement.

Table 4.9.2 Do absence of a definitive care for the disease influence your care for patients with HIV/AIDS.

OPTIONS	FREQUENCY (F)	PERCENTAGE (%)
Yes	59	49
No	61	51

Fig: 4.8.2 shows that 59 (49%) respondents said yes to the researcher's statement and 61 (51%) says No to their researcher's statement.

Table 4.8.3 Do stigma against the disease influence your care for HIV/AIDS patients?

OPTIONS	FREQUENCY (F)	PERCENTAGE (%)
Yes	20	17
No	100	83

Fig: 4.8.3 shows that 20 (17%) respondents accept the researcher's statement and 100 (83%) respondents said No to the researcher's statement.

Table 4.8.4. Do lack of facilities for special care affect your care for HIV/AIDS patients?

OPTIONS	FREQUENCY (F)	PERCENTAGE (%)
Yes	74	62
No	46	38

Fig: 4.8.4 shows that 74 (62%) said Yes to the researcher's statement and 46 (38%) said No to the researcher's statement.

Table 4.8.5 Do lack of sympathy affect your care for HIV/AIDS patient?

OPTIONS	FREQUENCY (F)	PERCENTAGE (%)
Yes	22	18
No	98	82

Fig: 4.8.5 shows that 22 (18%) respondents said Yes to the researcher's statement and 98 (82%) respondents said No to the researcher's statement.

DISCUSSION

Nurses play an important role in the health care delivery. Nurses are the fore f front of patient care this puts them at risk of contracting the disease [HIV]. This is particularly for student nurses who do most of the work when they are on clinical

experience, in the process of taking care of HIV and AIDS patients most persons might be afraid and careless, in the process they might get infected with the diseases mostly when they don't observe precautionary measures in preventing infection. Therefore, as many as there are students willing to care

for HIV/AIDS patients there are still some few who are not willing to care for these patients due to lack of information and fear of contacting the diseases. It is therefore mandatory for these students to be well informed on basics of the diseases so as to allay their fear in rendering a quality nursing care to HIV/AIDS positive patients.

Clinical students (nursing, medicine and medical laboratory) play an important role in the health delivery service in federal medical centre Yenegoa, Bayelsa state. Students during their clinical experience do most of the work of caring for patients, HIV/AIDS patients inclusive. The students may do the work hurriedly and in the process fail to take precautionary measures of preventing an infection. In their bid to show commitment and a caring attitude about their work, the student may fail to take precautionary measures, which put them at risk of contracting the virus.

The researcher's findings of table 4.7.1-4.7.9 shows that most of the respondents (88%) are willing to care for HIV/AIDS patients and (44%) had cared for HIV/AIDS patients while (56%) have not taken care of HIV/AIDS patients and also 56% of the respondents are comfortable taking care of HIV/AIDS patients whereas 44% of the respondents are not comfortable in taking care of HIV/AIDS patients.

From the researcher's finds, it shows that most of the students are willing to care for HIV/AIDS patients and few are not willing to take care for HIV/AIDS patients. A female student nurse (100L) explained why student nurses may be afraid to take care of AIDS patients, "We might accidentally be pricked by a needle. This may be due to negligence, but still, it puts us in a stressful situation".

But those who were not afraid explained that they were still cautious by saying, "I don't mind caring for an AIDS patient because it is similar to caring for any other patient, but still we (do) need to be more careful when caring for AIDS patients.

Students' perception of the care of HIV/AIDS patients is influenced by the

following; patients with the disease present late to hospital with full blown disease^{13; 14}. This is hitherto brought about poor perception towards care as often little or nothing can be done when some manifestations like HIV encephalopathy and nephropathy has set in as features of state four diseases.

According to the researcher's findings in table 4.8.1 it shows that majority of the respondents (43%) strongly disagrees and (39%) disagree, that is they do not accept the researcher's statement which states that "I will never care for an HIV/AIDS patient whereas (2%) agrees, (11%) strongly agrees to the researcher's statement while 5% are undecided if they will take care of HIV/AIDS patients or not. Table 4.8.2 shows that majority of the respondents (34%) disagree, to the researcher's statement "Care of HIV/AIDS patients should be by experienced personnel alone and not to students." Whereas, (20%) strongly disagrees and (20%) strongly agrees, 19% agrees and 7% are undecided about the researcher's statement.

Table 4.8.3 shows that (38%) of the total respondents disagrees with the researcher's statement which states that "I prefer to care for patients with other ailments apart from HIV/AIDS". Whereas, 25% strongly disagree, and 17% agree, 8% strongly agree to the researcher's statement while 12% of the total respondents are undecided about the researcher's statement.

According to the results in table 4.9.1, it shows that 53% said yes to the researcher's statement and 47% of the respondents said No to the researcher's statement base on the factors influencing HIV/AIDS patients. Table 4.9.2 shows that 49% of the total respondents said Yes to the researcher's statement "Do absence of definitive cure for the disease influence your care for patients with HIV/AIDS whereas 51% said No to the researcher's statement.

Table 4.9.3 shows that 17% of the respondents said Yes to the researcher's statement "Do Stigma against the disease influence your care for HIV/AIDS patients"

while 33% of the total respondents said No to the researcher's statement. Table 4.9.4 shows that 62% of the total respondents said yes to the researcher's statement "Do lack of facilities for special care affect your care for HIV/AIDS patients" while 30% of the respondents said No to the researcher's statement. Table 4.9.5 shows that 18% of the total respondents accept the researcher's statement "Do lack of empathy affect your care for HIV/AIDS patient?" while 82% of the respondents said No to the researcher's statement.

Despite the high incidence of HIV/AIDS in sub-Saharan countries including Nigeria, poor care and attention towards HIV/AIDS patients has remained worrisome as people living with HIV/AIDS are often stigmatized and given poor attention especially in late stages of the disease^{15; 16; 17}. According to our findings, most students (53%) do not want to attend to HIV/AIDS patient because of fear of contacting this disease. This is due to lack of definitive care for the disease, poor hospital environment, poor knowledge on HIV/AIDS and communication barriers.

CONCLUSION

The results from the study revealed that student nurses, medicine students and medical laboratory students have a variety of perception about HIV and AIDS problem. As a worker, the majority of students stigmatized AIDS patients as they felt uncomfortable and afraid when caring for patients with HIV/AIDS. They fear infection through accidental pricks. Hospitals should also provide adequate protection for students and staff so that students do not fear handling HIV and AIDS patients. There is need for continuous and particularly HIV and AIDS awareness programs to inculcate in them the importance of taking precautionary measures to avoid been infected with the virus.

Declaration by Authors

Ethical Approval: Approved

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REFERENCE

1. Lliyasu, Z. Abubakar, I.S. Kabir, M. & Aliyu, M.H. (2006). Knowledge of HIV/AIDS and Attitude towards Voluntary Counseling and testing among adults. *Journal of the National medical Association*, 98, 1917-1922.
2. Kurzban, R. and Leary M.R. (2001). Evolutionary origins of Stigmatization: The Functions of Social Exclusion. *Psychological Bulletin* 127: 187-208
3. Ikechebelu, J.I. Udigwe, G.O. Joe-Ikechebelu, N.N. & Imoh, L.C. (2006). The Knowledge, Attitude and Practice of Voluntary counseling and testing for HIV/AIDS among undergraduates in a polytechnic in Southeast Nigeria. *Nigerian Journal of Medicine*, 15, 245-249.
4. Kalichman, S.C. & Simbayl, L.C. 2003 HIV testing attitude, AIDS stigma, and voluntary HIV counseling and testing in a black township in Cape Town, South Africa. *Sex Transm infect*, 79, 442-447.
5. UNAIDS, (2011). The impact of Voluntary counseling and Testing. A Global Review of the Benefits and Challenges. Geneva, Switzerland.
6. UNAIDS, (2004), UNAIDS/WHO policy statement on HIV testing, Geneva. Switzerland.
7. Family health initiative (2002). VCT Toolkit: A Guide to Establishing Voluntary Counseling and Testing Services for HIV. Arlington. USA.
8. United Nations general Assembly Final declaration of (A/S 26/22), New York Hunt P.D (2003; the concept of knowledge and how to measure it *Journal of Intellectual capital* 4(1); 100-112.
9. Ajobiwe, J. O., Ogbonna, M., Ajobiwe, H. F., Alau, K., Yashim, N., Vamparious, M., & Udefuna, P. (2023). HIV/AIDS Risk Behaviour among Secondary School Students in Bwari Area Council of FCT-Abuja, Nigeria. *Sch J App Med Sci*, 7, 1216-1234.

10. Wilson, D. Naido, S. Bekker.L. Cotton M. Maartens, G. & Cornick, R. eds. (2005). Handbook of HIV Medicine 1st ed. Cape Town: Oxford university Press.
11. Amosu. M. A, Degun, M.A, makinde M.C. Thomas M.A. and Babulola O.A. (2011), Preventive Health Behavior model, an assessment of specific knowledge and attitude of health care providers towards people living with HIV/AIDS in Ibadan, Research, 2(2); 255-264
12. Mhlongo, S. (2006). Disease prevention and health promotion. In handbook at Family, edited by B. Mah, 126-152. Cape Town: Oxford University Press.
13. Green, L.W. (2008). Health Belief Model, Encyclopedia of Public health. <http://www.enotes.com/health/group>. Accessed 20th October 2008.
14. Henry, J. Kaiser Family foundation (2006): HIV/AIDS policy fact sheet the global HIV/AIDS epidemic, Washington Dc. Henry J. Fanser faculty foundation.
15. Bakker, L. & Wood, R. (2006). Is it time to change our HIV testing policy in health care facilities? SAMJ, 96, 1235-1236.
16. Boshamer C.B. Bruce K.E. (1999). A scale to measure attitudes about HIV- AIDS Antibody testing: Development and psychometric validation. Education and Prevention, 11,400-413.
17. Martin, J.G. (2006): screening and prevention of disease in Harris vision principles of internal medicines 16th edition Pg. 26-26 Mc. Graw Hill Company.

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