Table 1 Summary of the studies included in the review							
Study date & citation	Design	Sampling method	Study setting, sample size and characteristics	Instrument	Data collection procedures	Findings	Implications
2002 [17]	Cross-sectional/ observational	Convenience	Fourth-year female nursing students from Jordan (n = 63) and the USA (n = 63), selected from the University of Jordan in Amman and Oakland University in Michigan, USA	Questionnaire adapted from the Knowledge, Attitudes, and Beliefs (KAB) instrument developed by Kulwicki and Cass (1994), based on the Centers for Disease Control and Prevention models for KAB surveys	Self- administered questionnaire	More American students scored correctly on knowledge of HIV/AIDS (73%) than Jordanian students' (52%). American students had more positive attitudes to AIDS than Jordanian students. More American students (82.5%) approved of condoms for preventing the spread of HIV than Jordanian students (30.2%).	A call for action to organize education and prevention programmes directed at Jordanian students over and above what is contained in the curriculum
2000 [19]	Cross-sectional	Convenience	1013 undergraduate university students at the science, medical and humanities departments of the University of Jordan	Questionnaire adapted from the KAB instrument developed by Kulwicki and Cass (1994), based on the Centers for Disease Control models for KAB surveys	Self- administered questionnaire	Knowledge-deficit and misconceptions exist among the Jordanian university students with regard to HIV/AIDS transmission. 54% knew very little about AIDS and 14% had never heard of it.	Need to introduce a tailor-made course on HIV/AIDS for students as part of their curriculum
2005 [20]	Ethnographic qualitative	-	3 rural and 3 urban PHC settings. 27 interviews with 15 general informants (registered nurses and aid nurses) and 12 outside informants	45 min-1 h semi-structured interviews with key informants	Participant observation, key informant interviews	Nurses' HIV knowledge and skill base are inadequate. Health care facilities have minimal human and physical resources	Need to develop a comprehensive system of PHC centres and improve infrastructure of health facilities and to address the shortage of nurses and improve their skills.
2005 [21]	Ethnographic qualitative	Purposive	3 rural and 3 urban PHC settings. 27 interviews with 15 general informants (registered nurses, aid nurses) and 12 outside informants.	Body language, facial expression, communication techniques and human interactions were observed and recorded, allowing for elucidation of the culture of nursing practice within these settings. To confirm and further explore conceptual understandings, internal key informants (nurse participants), took part in in-depth interviews	Participant observation, key informant interviews	Discrepancy between health policies and health care practice in HIV care. HIV/AIDS response weakened by: poor resources, limited nurses' skills, lack of access to professional development, lack of nursing leadership and role models, cultural beliefs and geographic isolation. These reduce the capacity of PHC nurses to raise awareness and engage actively in HIV/AIDS prevention.	MOH and senior nursing administration should support nursing through practice development and recruitment initiatives to maintain a low HIV/AIDS incidence.

tolerance among dentists, or the local HIV prevalence. the "patient" explained his HIV+ve individuals will have willingness to pay privately difficulty obtaining dental care for the treatment. in Jordan. 1996 [15] 134 Jordanian & 90 Self-Jordanian nursing students had Cross-sectional Unknown A questionnaire exploring attitudes and levels of Canadian nursing administered limited HN/AIDS content in students knowledge about AIDS questionnaire their curriculum, with just 4% reporting to have cared for someone with AIDS. Knowledge and attitudes of both groups were unsatisfactory. Jordanian

1124 healthy rural

and urban Jordanian

with hepatitis & their

contacts, and patients

hospitals of the Royal

Medical Services and

the Ministry of Health

with other diseases

267 nurses and 73

physicians from 6

residents, residents

Study setting, sample

size and characteristics

242 general dental

practitioners

Instrument

One author pretending to

be HIV+ve called dentists

across Jordan requesting

Biological testing for HIV

AIDS Attitudes Scale

translated into Arabic

dental care. To assess

Data

collection procedures

Phone

interview

Screening

antibodies

by enzyme

immunoassay

administered

questionnaire

forHIV

Self-

Ne ed for educational strategies to address cognitive and affective domains of learning. The lecture format alone seems to be ineffective in modifying attitude.

Repeated testing is

Knowledge of HIV

HIV/AIDS patients

among health care

nurses.

contributes to more

positive attitudes toward

providers compared to

recommended.

Implications

Need to address

stereotypes about

HIV+ve people and

resolve the unwillingness

of dentists to treat them.

prejudices and

Findings

Only 15% of the dental practices

were willing to provide dental

influenced by financial factors

care. Willingness was not

nurses' lack of exposure to persons with AIDS and information about AIDS may account for their bw scores.

2 hepatitis patients were

AIDS-like illness and both

abroad.

positive for HIV. Neither had

76% had knowledge of AIDS,

between nurses and physicians:

attitude compared with doctors.

There were significant gender

with a significant difference

nurses had less knowledge

of HIV and a more negative

differences with regard to proximity to people with AIDS, view of AIDS as a moral issue, and social welfare regarding AIDS, but no significant difference in attitudes based on

years of experience.

probably acquired HIV infection

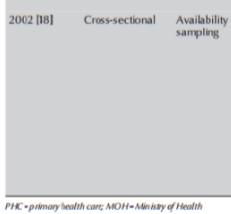


Table 1 Summary of the studies included in the review (concluded)

Sampling

method

Random

selection

Unknown

Design

Cross-sectional

Cross-sectional

epidemiological

study

Study date &

citation

2005 [16]

1987 [14]