

ATTITUDE OF ADULTS (18-59) YEARS TOWARDS BLOOD DONATION IN OKOBOI CELL, NGORA TOWN COUNCIL, NGORA DISTRICT. A CROSS SECTIONAL STUDY.

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Abstract Background

Blood donation is a vital component of healthcare systems. However, blood shortages persist due to various factors, including negative attitudes towards blood donation. Understanding the attitudes of the general population toward blood donation is essential for implementing effective blood donation programs. It is a life-saving scheme in both routine and emergencies to replace blood cells or blood products lost. This study aimed to determine the attitude of adults (18-59) years towards blood donation in Okoboi cell, Ngora Town Council, Ngora District.

Methodology

The study employed a descriptive cross-sectional study for quantitative data targeting a sample of 96 adults (18-59) years using convenient sampling as a sampling tool and semi-structured questionnaires as data collection tools. Data was analyzed manually and presented in tables and figures as shown in chapter four.

Results

67% agreed to voluntarily give blood whereas the minority (33%) disagreed. (81%) thought blood donation was important whereas the minority (3%) had no idea. Also, 28% had a fear of needles, 34% were not fit to donate, 30% became weak after blood donation, majority of the respondents (73%) donate to people who pay them. (43%) strongly agreed that blood donation is safe whereas the least (10%) strongly disagreed. (47%) of the respondents were between 18-29 years with 52% being females and the remaining 48% males.

Conclusion

The overall attitude towards blood donation was also good as most of the respondents agreed to voluntarily donate blood.

Recommendation

The MOH through VHTs should inform people in advance about the venue, time, and date for blood donation to ensure that they come in time and in large numbers.

Keywords: Attitudes of Adults, Blood Donation, Okoboi Cell, Ngora Town Council, Ngora District.

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Background of the study

Blood transfusion is the donation of blood or blood products from the donor into the bloodstream of the recipient (Melku, 2018). It is a life-saving scheme in both routine and emergencies to replace blood cells or blood products lost. Millions of blood units are collected from donors every year, but demands are increasing day by day which is increasing the demand for sufficient and timely provision of blood (Ahmed, 2014).

Attitudes towards blood donation in educated and illiterate blood donors attending a tertiary care hospital in Lahore showed that the total population of this study comprised 246 blood donors, there were 97.2% males and 2.8% females in this study. The results obtained for positive attitudes toward the blood donation of educated and illiterate blood donors were 97.1% and 76.7% respectively (Muhammad Atif, 2019). Positive attitudes

towards blood donation in Pakistan stemmed from altruism/the desire to help others in 56% of the cases, other positive reinforcement included family and friend motivation (28%) and religious organizations (16%). The negative attitude towards the practice of blood donation was due to fear of the procedure and the concept that blood banks misuse/sell the blood products for monetary benefits misconception regarding blood donation was rampant with 62% of respondents believing that blood donation can result in transfusion-transmitted infections (Usman Waheed, 2015).

According to the study by (Yemataw Gelaw, 2023) to determine KAP towards blood donation and transfusion and associated factors among the adult population of Gondar town showed that out of the total, 93.2% of study participants think that blood donation is an important act. Most, 79.8% of the participants voluntarily donated

blood, and more than half, 51.2% argued that blood banks do not sell blood. In general, 79% of study participants expressed a good attitude toward blood donation. Regarding blood transfusion, 86.0% of participants thought that blood transfusion is important and 80.1% agreed to be transfused if required for medical intervention. The majority, 68.4% of participants believed that blood transfusion was accepted by their religion. Overall, 83.5% of the study participants expressed a favorable attitude toward blood transfusion. Another study was done to determine the willingness and Its Associated Factors for blood donation in Gondar Town, Northwest Ethiopia among the 547 study participants, nearly two-thirds (59.0%) had a favorable attitude toward blood donation, while 41% of the study participants had an unfavorable attitude. Furthermore, 60.9% of the study participants agreed that all eligible people should donate blood (Agerie Mengistie Zeleke and Zelalem Nigussie Azene, 2022).

The attitude of Saudi Adults towards Blood Donation in Riyadh City showed that most of the participants (72.6%) enjoyed a positive attitude towards blood donation which could have encouraged others to participate in blood donation. Also, 62.6% of subjects had a good attitude towards free donation of blood for everyone not only for relatives. All the participants possessed a good attitude towards blood donation as a duty to save lives. Only, 14.4% of subjects donated blood against receiving money and the others could not donate blood for earning money. (Sultan Hamad Almutairi, 2018). Therefore, the objective of this study is to determine the attitudes of adults (18-59) years toward blood donation in Okoboi cell, Ngora Town Council, Ngora District.

Methodology

Study design

This study employed a descriptive cross-sectional study design on adults (18-59) years. This is because it captured all necessary information to describe the research problem and it was convenient for both the subjects and the researcher.

Study setting

The study was conducted in Okoboi cell, Ngora Town Council, Ngora District.

Study population

The study population comprised of adults (18-59) years.

Sample size determination

The sample was determined using the (Keish Leslie, 1965) formula, which states that;

$$Z^2PQ$$

$$N = \frac{Z^2PQ}{e^2}$$

Where, N=desired sample size

Z= standard normal deviation usually set at 1.96 which corresponds to a 95% confidence level

P= proportion of survey population with particulars under investigation and where it is unknown 50% is used

Q proportion of the survey population without particulars under investigation where 50% is considered to cater for that.

e= amount of error that a researcher expects to get from the research which ranges from 0.01-0.1 N =96.04 Which was approximately 96 respondents

Sampling Techniques

The respondents were obtained using a simple random sampling technique for the study. It was preferred to other techniques because it ensured that each member of the target population had an equal and independent chance of being included.

Selection Criteria

Inclusion Criteria

Those who had voluntarily consented to be part of the study.

Those who were available at the time of the study.

Those who had a sound mind.

Exclusion Criteria

Those who had not voluntarily consented to be part of the study.

Those who were not available at the time of the study.

Those without a sound mind.

Study Variables

Dependent variable

Blood donation.

Independent variables

Knowledge, attitude, and practices of adults (18-59) years.

Data collection tool

A structured type of questionnaire was designed and used as a data collection tool to allow the respondents to write the responses they wanted and complete them in time. It further enabled the researcher to collect data from a large population in a short period of time.

Data collection procedure

An introduction letter was received from the Kampala School of Health Sciences seeking permission to carry out research in Okoboi cells. The acceptance letter was then obtained from the LC1 of Okoboi cell granting a researcher to carry out the study. The study was thoroughly explained to the respondents and consent was obtained from them by voluntarily signing the consent form. A random sampling method was finally employed to get respondents.

Data management

After collecting data, it was checked for completeness and accuracy. Those that were inaccurately or incompletely filled were removed and disposed of. Accurate and filled ones were locked in a cupboard to provide no access to other people. This maximized confidentiality.

Data analysis

Data was counted by tallying using a pen and A4 sheets of paper. The results were entered into a computer and

analyzed using the Microsoft Excel program to generate tables and figures.

Ethical considerations

A letter meant to introduce the researcher to Okoboi cell, Ngora Town Council, Ngora district was got from Kampala School of Health Sciences and taken to Okoboi cell. He then asked for permission to conduct the study

and when granted permission, he made sure respondents consented first using a sign or thumbprint. The identities of the respondents were kept confidential. Each individual was interviewed alone and the information was not disclosed to colleagues.

Results

Demographic data

Table 1: Shows the distribution of respondents according to their demographic characteristics. (N=96)

Bio-Data		Frequency (f)	Percentage (%)
Sex	Female	50	52
	Male	46	48
	Total	96	100
Age	18-29	45	47
	30-39	29	30
	40-49	12	13
	50-59	10	10
	Total	96	100
Religion	Catholic	67	70
	Protestant	19	20
	Moslem	8	8
	Seventh day	2	2
	Total	96	100
Level of Education	Primary	15	16
	High School	23	24
	Tertiary Institution	53	55
	Illiterate	5	5
	Total	96	100
Occupation	Peasant	15	16
	Teacher	26	27
	Business	23	24
	Student	32	33
	Total	96	100
Marital Status	Single	37	39
	Married	28	29
	Divorced	21	22
	Widowed	10	10
	Total	96	100

From Table 1, more than half of the respondents (52%) were females and the least (48%) were males, most of the respondents (47%) were aged between 18-29 years whereas the least (10%) were aged between 50-59 years, majority of the respondents (70%) were Catholics and only 2% were seventh day, more than a half of the respondents (55%) had reached tertiary institution whereas only 5% were illiterate, most of the respondents

(33%) were students whereas the least (16%) were peasants, most of the respondents (39%) were single whereas the least (10%) were widowed.

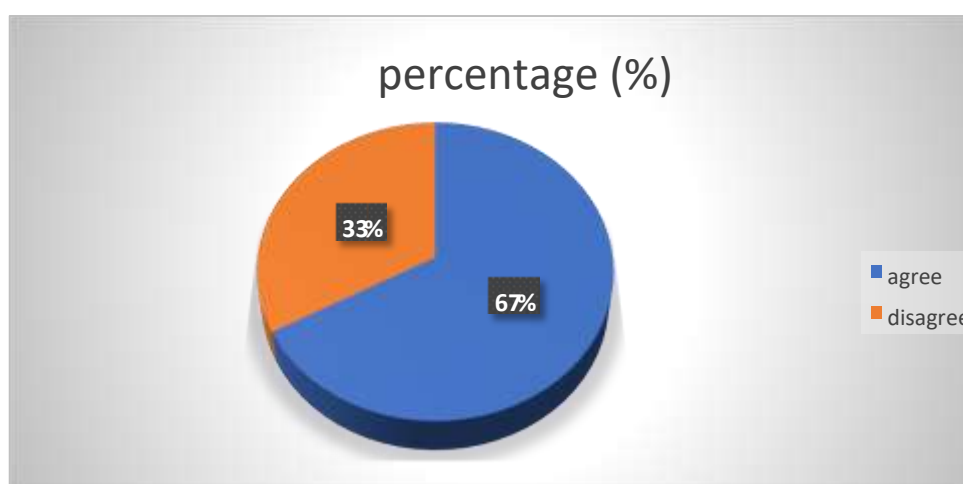
Attitude of adults (18-59) years towards blood donation in Okoboi cell, Ngora Town Council, Ngora District.

Table 2: Shows the distribution of respondents according to what they think about blood donation. (N=96)

Response	Frequency(f)	Percentage (%)
Important	78	81
Not important	15	16
No idea	3	3
Total	96	100

From Table 2, the majority of the respondents (81%) thought blood donation as being important whereas the minority (3%) had no idea.

Figure 1: Shows the distribution of respondents on whether they would give blood voluntarily if asked. (N=96)



From Figure 1, the majority of the respondents (67%) agreed to voluntarily give blood whereas the minority (33%) disagreed.

Table 3: Shows the distribution of respondents according to what prevents them from donating blood. (N=96)

Response	Frequency(f)	Percentage (%)
Fear of needles	27	28
Not fit to donate	33	34
Religion	8	8
Becoming weak after blood donation	28	30
Total	96	100

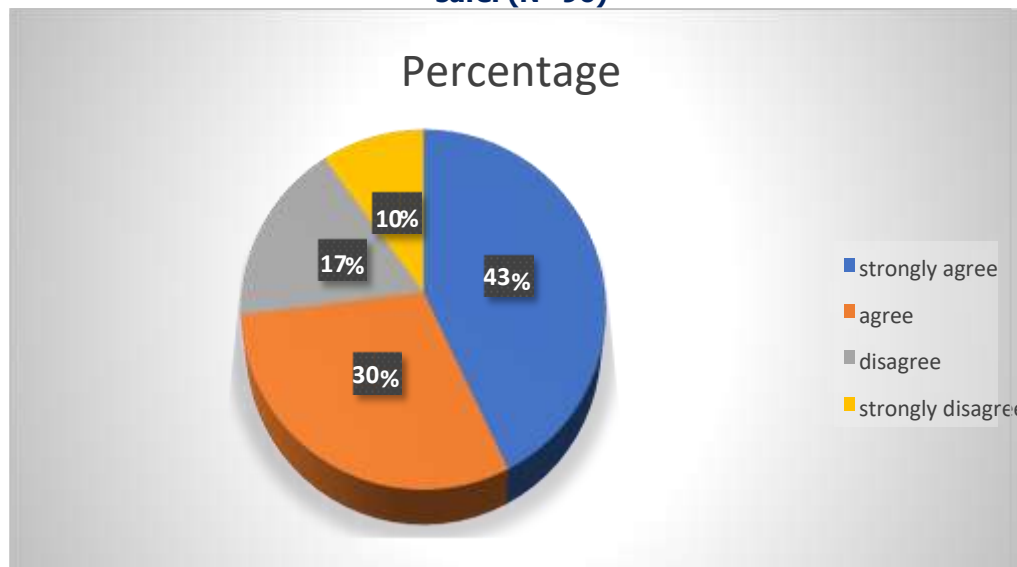
From Table 3, less than half of the respondents (34%) stated not fit to donate as the reason which prevents them from donating blood whereas only (8%) stated religion as the reason which prevents them from donating blood.

Table 4: Shows the distribution of respondents according to the people they would donate blood for. (N=96)

Response	Frequency(f)	Percentage (%)
Family/friends	18	19
Strangers	8	8
People who pay you	70	73
Total	96	100

From Table 4, the majority of the respondents (73%) reported people who pay them as the people they would donate blood for whereas a minority (8%) reported strangers as the people they would donate blood for.

Figure 2: Shows the distribution of respondents according to whether blood donation is safe. (N=96)



From Figure 2, most of the respondents (43%) strongly agreed that blood donation is safe whereas the least (10%) strongly disagreed.

Discussion

Findings from Figure 5 of my research showed that the majority of the respondents (67%) agreed to voluntarily donate blood. This could be due to increasing cases of sickle cell disease where blood is in high demand for transfusion. This is in line with the study by Bamlaku Enawgaw et al (2019) on blood donor's knowledge and attitude toward blood donation at the North Gondar district blood bank, in Northwest Ethiopia which showed that the majority (91.0%) of the participants had a plan to donate blood voluntarily in the future and 89.8% had plan to become a regular blood donor.

According to the findings in Table 8 of my research showed that 28% of the respondents had a fear of needles, 34% stated that they were not fit to donate, and 30% stated that they become weak after blood donation. This could probably be due to side effects associated with blood donation. This is in line with the study by Shailesh Kumar Mishra et al (2016) on knowledge and attitude among college-going students towards voluntary blood donation from north India which showed that 27.4% had fear of needle pain, 26.8% stated that they were not fit enough to donate blood and 19% stated that they would become weak after blood donation.

The findings in Table 9 of my research showed that the majority of the respondents (73%) stated that they would donate to people who pay them. This could be due to increasing rates of poverty in the country. This was in disagreement with a study by Sultan Hamad Almutairi et al (2018) on the assessment of KAP of Saudi adults

towards blood donation in Riyadh city which showed that only 14.4% of subjects donate blood against receiving money.

Conclusion

The overall attitude towards blood donation was also good as most of the respondents agreed to voluntarily donate blood.

The study faced limitations as follows;

Financial and time constraints dictated a small sample.

Some respondents did not give the right information

Some respondents were absent at the time of the interview.

Recommendation

The MOH through VHTs should inform people in advance about the venue, time, and date for blood donation to ensure that they come in time and in large numbers.

Acknowledgment

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List of Abbreviations

UAHEB: Uganda Allied Health Examination Board

VNRBD: Voluntary Non-remunerated Blood Donation

HIV: Human Immune Virus

AIDS: Acquired Immune Deficiency Syndrome

KAP: Knowledge, attitude, and practice

WHO: World Health Organization

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This study was not funded

Conflict of interest

No conflict of interest declared

Author Biography

David Opio is a student of the Diploma of Clinical Medicine and Community Health at Kampala School of Health Sciences.

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