



INVESTIGATIVE STUDY OF THE KNOWLEDGE, ATTITUDE AND OPINION OF UNIVERSITY UNDERGRADUATES TO HIV/AIDS AND ITS SCREENING

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ABSTRACT

The study examined the knowledge attitude and opinion of the university undergraduates to HIV/AIDS and its screening in Edo State Nigeria. The sample comprised 600 undergraduates randomly selected from three universities in Edo State. A researcher constructed questionnaire was used to test the five hypotheses formulated for the study. One-way Analysis of Variance (ANOVA) and independent t-test statistical techniques were used for data analysis. The findings showed that the students had very good level of knowledge regarding the mode of transmission of the disease and HIV screening centres. However, the good knowledge did not translate itself into positive attitude towards those living with HIV/AIDS in the hostel. There was also a significant difference in their opinion of how one gets infected with the virus. The study therefore recommended that counselling and public enlightenment should be intensified.

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1. INTRODUCTION

Acquired Immune Deficiency Syndrome (AIDS) results from a combination of factors triggered off by infection with the Human Immune Deficiency Virus (HIV). HIV is a retrovirus with the affinity for the CD4+ cells of the immune system. It is transmissible in the body fluids which include blood and blood products, semen, vaginal secretions, breast milk and saliva. Any activity which results in the entry of infected fluid into the body of a healthy individual leads to infection. Such activities include sexual intercourse (be it heterosexual, homosexual, bisexual activities or oral sex), transfusion of unscreened blood and vertical transmission from an infected mother to her infant at delivery and also during breast-feeding. Others are sharing/use of infected skin piercing instruments, tattooing and the incision of tribal marks (a common practice in Nigeria especially amongst the Yorubas & Hausas), circumcision, all forms of female genital mutilation, manicure and pedicure, shaving of hair in barbing saloons, sharing of toothbrushes, kissing with bruised gums, breast feeding, accidental needle sticking injuries in hospitals and laboratories are

amongst the various modes through which HIV may be transmitted. The principal modes of transmission in Nigeria are sexual (80%) and unsafe blood transfusion (10%), mother to child transmission and drug injecting population are on the increase (Akinsete, 2001).

HIV screening is the testing of particular groups of people for epidemiological public health reasons. HIV testing was initially developed for screening donated blood but the testing is now carried out for variety of reasons and can be categorized into anonymous screening, voluntary and compulsory testing.

HIV screening is done on blood, tissue and organ donors to prevent infection being transmitted through donated blood, blood products, semen, breast-milk etc. It is done among specific population groups to find out the number of new cases of infection in those groups in a given period of time (incidence studies). It is also done among random samples of a population to learn trends and estimate the long-term burden of the disease, prevalence studies, (UNAIDS, 2007).

The greatest fear about AIDS is the fear of being subjected to HIV screening test. Students would prefer settling for several months of agony and trauma rather than being told they have AIDS, bidding time for demise, which is sure to come (Ogbuagua, 1993). To many individuals, HIV/AIDS is still like a marriage, and preventing the spread of HIV starts with a first step which is the need for information about the virus, how it can be contracted and its deadly consequences. This can be achieved through HIV counselling and testing, which is voluntary in nature. HIV counselling and testing helps in behaviour change and as noted by Papalia *et al.* (2001), good health is not just a matter of luck. People can seek healthy and positive living by pursuing some activities and refraining from others WHARC (1999). However, the realities on ground have tended to engender a reversal of this position as have been manifested in the current effort aimed at addressing the problem of HIV/AIDS in Nigeria (Adegoke, 2004; Adekeye, 2005).

Recently, the Sunday Observer carried out an investigation and the report revealed that many persons in Nigeria are yet to come to terms with the reality as far as the HIV/AIDS scourge is concerned. Some of the persons interviewed do not believe there is anything like HIV/AIDS while others hold the view that there is natural immunization against it through the use of herbs or concoctions which points to the fact that the country is still at a deplorable level of understanding the danger as far as the issue of public enlightenment on HIV/AIDS scourge is concerned (Sunday, 2003).

To ascertain the opinion of students regarding the reality of the AIDS pandemic, Anugwom (2004) in his research on students' perception of HIV/AIDS observed that students saw HIV/AIDS as not really in existence, that the respondents mostly see AIDS as part of politics of developed nations using the pandemic to put Africa in place. He said this is worrisome when one puts this sort of revelation against the fact that the respondents are university students who are supposed to be very informed.

This type of perception puts a big question mark on the effectiveness of AIDS enlightenment and prevention campaigns in Nigeria. Cochran and Peplau (1989) rightly observed that the perception of being at risk is a factor in the change of attitude and behavior, which is germane to any sustainable AIDS prevention efforts.

In the light of the above argument so far opinions remain mixed while most adults tend to believe absolutely that AIDS is real, most youths tend to cast doubts on the existence of AIDS.

2. STATEMENT OF THE PROBLEM

HIV/AIDS is currently sapping both life and the future of the countries which are already underdeveloped and poverty ridden. The continuous spread of HIV/AIDS in the country no doubt should be seen as deadly as it poses a threat to human health. Therefore there is every need for all to always keep ourselves from any act capable of exposing them to the disease since the commonest way to become an AIDS patient is through casual sex (Okoye, 2004).

According to NARHS (2003) report, quite a number of students in tertiary institutions have the knowledge of the preventive measure of HIV/AIDS, like the use of condoms and not sharing needles etc. However, students would rather not know their HIV status, if they can help it. So they shun the HIV test while others describe it as unnecessary. The most disturbing is the fact that many people have expressed their minds by saying that if by chance they suffer from any of the AIDS related symptoms, they would rather remain silent and keep it to themselves than subjecting themselves to HIV screening test.

Disturbed by the reckless sexual habit among university undergraduates which, has resulted in high infection rate of Human Immune Deficiency Virus (HIV) and the resultant Acquired Immune Deficiency Syndrome (AIDS) in the country the identified problem above has necessitated this research.

The researcher therefore investigated the knowledge, attitude and opinion of university undergraduate to HIV/AIDS and its screening.

2.1. Significance of the Study

According to WHO (2007) the community control of any disease that can be prevented entails among others, assessing the current level of knowledge about the disease and informing people when a significant problem exists. With no specific cure for AIDS and no developed vaccines, prevention measures based on information and education programmes remain the mainstay for tackling HIV/AIDS and its associated problem. This study created awareness among the students in curtailing the spread of the disease.

2.2. Hypotheses

- 1) There is no significant difference between the knowledge of the male and female students over HIV/AIDS;
- 2) There is no significant difference between the attitude of male and female students towards those infected with HIV/AIDS;
- 3) There is no significant difference between the opinion of male and female students towards HIV;
- 4) There is no significant difference between attitude of transmission;
- 5) There is no significant difference between the knowledge, attitude and opinion of university undergraduates to HIV/AIDS.

3. METHODOLOGY

The research design adopted for this study is the descriptive survey method; it is based on obtaining information from the opinion of the respondents. The population consists of all the

undergraduate students for 2006/2007 academic session. Three out of the four Universities (Federal, State and private institutions) were selected based on random sampling techniques. Participants were randomly selected from three universities consisting of 300 males and females using stratified random sampling. Data collected was done through the aid of a questionnaire which contained two sections. Section A contained the demographic data and section B contained four subsets: knowledge of AIDS, knowledge of HIV/AIDS screening centre; opinion of how one can get infected and attitudes towards HIV/AIDS with a reliability coefficient of 0.84. The instrument of strongly agree to strongly disagree. Data collected were scored and analyzed using independent t-test and one way analysis of variance (ANOVA). Level of significance was set at 0.05.

4. RESULTS

4.1. Hypothesis One

There is no significant difference between the knowledge of the male and female university undergraduate to HIV/AIDS.

Table-1. T-test analysis for independent measures of knowledge of male and female to HIV/AIDS

Sex	N	Mean	Standard Deviation	t	Significance
Male	254	55.62	6.386	1.50	1.96
Female	257	54.82	5.631		

Significance at 0.05

Result in table 1.0 reveals a calculated t value (1.50) which was less than the critical t value of 1.96 at 0.05 level of significance, DF = 509. The null hypothesis was accepted. The result revealed that there was no significant difference between the knowledge of the male to that of the female university undergraduates to HIV/AIDS.

4.2. Hypothesis Two

States that there is no significant difference in the attitude of male and female university undergraduate towards those infected with HIV/AIDS

Table-2. t-test analysis for independent measure of male and female attitude towards those infected with HIV/AIDS.

Sex	N	Mean	Standard Deviation	t	Significant tail
Attitude of male	249	48.11	7.31	2.91	0.004
Attitude of female	252	46.12	8.02		

P < .05

Result in table 2.0 showed that the alpha level of probability 0.05 ≠ t calculated. The t-value of 2.91 was higher than the table t value of 1.96. Consequently the null hypothesis stated above was rejected. It was concluded that there was a significant difference between the attitudes of male and female students towards those infected with HIV/AIDS virus.

4.3. Hypothesis Three

States that there is no significant difference between the opinion of male and female students toward HIV/AIDS transmission.

Table-3. T-test analysis for independent variable of male and female opinion of HIV/AIDS transmission.

Sex	N	Mean	Standard Deviation	t	Significance
Opinion of HIV/AIDS transmission of male	250	51.79	6.56	3.197	.001
Opinion of HIV/AIDS transmission of female	256	49.79	7.82		

t = 3.197, P < .05

Table 3.0 shows that there is a significant difference between male and female undergraduate opinion to HIV/AIDS transmission then null hypothesis was rejected.

4.4. Hypothesis Four

There is no significant difference between the attitude of male and female undergraduate towards HIV/AIDS screening

Table-4. T- test analysis for independent measures of attitude for male and female students towards HIV/AIDS screening

Sex	N	Mean	Standard Deviation	t	Significance
Male HIV/AIDS screening	250	30.48	5.07	1.342	.180
Female HIV/AIDS screening	253	25.87	5.37		

The result on table 4.0 shows the calculated t value of 1.342 to be lower than the critical t value of 1.96. Therefore the null hypothesis which states that there is no significant difference between the male and female undergraduate attitude to HIV screening was accepted.

4.5. Hypothesis Five

There is no significant difference between the knowledge, attitude and opinion over HIV/AIDS transmission

Table-5.(a). Distribution of mean scores among knowledge, attitude and opinion of HIV/AIDS transmission

	N	Mean	Standard Deviation
Knowledge	513	55.26	6.07
Attitude	503	47.15	7.74
Opinion	508	50.09	7.37
Total	1524	51.09	7.82

Table 5(a) shows the difference in the mean score of knowledge, attitude and opinion of the university undergraduate to HIV/AIDS transmission to be significant at $P < 0.05$. The data was further analyzed using one-way ANOVA. The results are displayed on table 5(b).

ANOVA table to test hypothesis four

Source of variable	Sum of square	df	Mean Square	F	Significance
Between Groups	16805.7	2	8402.85	166.97	.000
Within Groups	76544.21	1521	50.32		
Total	93349.9	1523			

df (2, 1521), $P < 0.05$, $F = 2.78$

Based on df (2, 1521) the null hypothesis is rejected. The differences are significant as shown on the Scheffe multiple comparison tables below.

Table-5.(b).

Dependent Variable	Mean Difference	Standard Error	Significance
Knowledge Attitude	8.1140	.4451	.000
Knowledge Opinion	4.5171	.4440	.000
Opinion Attitude	3.5967	.4462	.000

The mean difference is significant at the 0.05 level. The results of the multiple comparisons of the mean score on the knowledge, attitude and opinion of HIV/AIDS transmission revealed that the difference of 8.1140 between knowledge and attitude and the difference of 4.5171 between knowledge and opinion were found to be significant at $P < .05$

5. DISCUSSION OF RESULTS

The findings of this study showed that HIV/AIDS education messages have been effective in increasing awareness of the disease among the university undergraduate. This is evident by the high level of HIV/AIDS related knowledge reported in this study. Another factor responsible for this is that undergraduates participate in the peer educator programmes and they attend workshops and seminar on campus.

In spite of the reported high level of HIV/AIDS related knowledge, there were no appreciable changes in their attitudes. This finding agrees with the study of Wodi (2005), (Lucky, 2000) and (Yahaya, 2010).

Table 2.0 shows a significant difference in the attitude of the university undergraduate to those infected with HIV/AIDS. This finding is in agreement with (Thanavanh *et al.*, 2011), they found out that despite the massive campaign designed to reduce discrimination and stigmatization, there was still forms of discrimination in the school. Only 50% think they can live with them in the same room.

In the case of routes of transmission of HIV/AIDS there was a significant difference between the male and female. A large proportion of respondents rated their chances of being infected with HIV low or no chance at all. Many still believe that they are not at risk of contracting HIV disease (Jemmott and Jemmott, 2000) (CDC, 1999).

Finally, in table 5.0 the result shows that the knowledge of transmission of males was higher than that of females which agrees with the study of NARHS (2003).

The result on table 4 revealed that there is no significant difference between the male and female over the attitude towards HIV/AIDS screening. This also agrees with (NARHS, 2003) report.

Table 5(b) shows the comparison of the result of knowledge attitude and opinion of HIV/AIDS and its screening. The result reveals that there is a significant difference between their knowledge of HIV/AIDS and their attitude to those infected with the virus. This report agrees with previous studies of Roberts, Roberts *et al.* (2001). The study shows that despite the high level of knowledge possessed by the students about the nature and mode of transmission they still have negative attitude towards people living with the virus.

6. CONCLUSION

Based on the findings it was concluded that gender does not determine the knowledge of HIV/AIDS and its screening among the university undergraduate but the male had a better attitude toward those living with HIV/AIDS than the female and also the male had a better opinion than the female about HIV/AIDS transmission. It was therefore recommended that an urgent need for school based on the educational programmes to improve knowledge, inculcate the right attitude and promote behavior that prevent the transmission of HIV. The electronic and news media should intensify on public enlightenment programmes on HIV/AIDS.

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