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Need of HIV/AIDS Preventive Education for Students: A Research Study

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Abstract

Students of classes IX and X were included in the study. Samples of 297 students were selected through random sampling technique. HIV/AIDS Awareness Questionnaire was developed, standardized separately for students and was conducted on selected sample to assess the level of awareness towards HIV/AIDS epidemic. Results and Conclusions: Lack of basic information regarding epidemiology, misconceptions about routes of transmission, symptoms and ignorance towards prevention and treatment of HIV/AIDS among students came across as a major issue needing attention. Students had same awareness as they got the information through textbooks; contrarily the study reveals that teachers were not able to handle the curiosity and issues related to HIV/AIDS confidently in the classrooms. As their knowledge level about HIV/AIDS was quite low. Therefore, preventive education for teachers needs priority attention. In this regard, I.A.S.Es and DIETs must take a proactive role to train the in-service teachers and ensure safe sexual behaviour among students/youths, so that they in turn would orient the students with care and caution and bring about basic attitudinal change among adolescents confronting numerous problems related to healthy life and HIV/AIDS. It is suggested that schools have to device ways to open up more effective communication with students in relation to education on sex and HIV/AIDS. In-service as well as pre-service teacher training courses on HIV/AIDS should be emphasized, only then they can transmit the correct and meaningful information regarding HIV/AIDS to the students.

Key words: HIV/AIDS, Preventive Education,

Background

HIV/AIDS is a most serious public health challenge faced by the world today. As there is no vaccine or drug, education is the only solution. Generating awareness among various sections of people is considered to be one of the best approaches to counter this pandemic. Preventive education have been identified as one of the major source to aware the students. Globally, 34.0 million [31.4 million–35.9 million] people were living with HIV at the end of 2011. An estimated 0.8% of adults aged 15-49 years worldwide are living with HIV (UNAIDS, 2012). The Government of India estimates that about 2.40 million Indians are living with HIV (1.93 -3.04 million) with an adult prevalence of 0.31% (2009). Children (<15 yrs) account for 3.5% of all infections, while 83% are the in age group 15-49 years (NACO, 2011). Uttar Pradesh is estimated to have more than 100,000 PLHA (World Bank, 2012).

The epidemic has become a major developmental challenge that goes beyond the realm of public health. The emerging complexity of the epidemic has made it an issue that touches all aspects of human life. And, its perspectives are diverse: medical, human rights, ethical, legal, religious, cultural and political. The need to prevent the epidemic and provide care and support to those infected and affected from HIV/AIDS calls for an unprecedented response from all sections of society. Knowledge level on HIV prevention is low across all the age groups. Myths and misconceptions about HIV/AIDS among adolescents are widespread. There is still a resistance on the part of teachers, parents and officials to openly talk about sexuality, HIV/AIDS and its effective preventive measures.

The facts about AIDS clearly spells that this disease requires newer ways of prevention and control. The epidemic needs immediate and effective responses in new programming areas mainly related to awareness, attitudinal and behavioural changes, community based care & support initiatives besides, the maintenance of human development in the face of increasing rates of AIDS new cases and death due to AIDS. The AIDS cure and prevention work being done around the world covers diverse methods such as search for a vaccine, distribution of condoms, research into microbicides, lobbying governmental organizations and testing the people to monitor the trends of the epidemic. As prevention is better than cure, therefore, education is a crucial factor in preventing the spread of HIV and controls the deaths due to AIDS.

The importance of HIV/AIDS education as an effective tool can be used to generate awareness, remove misconceptions, improve lack of knowledge, fear and denial that have

engendered serious and often tragic consequences, access to denying people living with HIV/AIDS, treatments, services and support to HIV/AIDS infected people as well for prevention work. The experts of the field do agree that prevention through education is the best approach to fight the transmission of HIV, which causes AIDS, and that education must begin before the age of 13 years, initiate sexual activity and certainly not later than seventh grade (White & Ballard, 1993). Similarly, Shah & Sushil (2005) suggested that as till time there is no preventive vaccine available to cure the AIDS, leaves the only option to prevent it through generating social and behavioral awareness among people- adolescents, youths and adults. The UP Board and CBSE Board has taken lead in this direction and already introduced some contents related to HIV/AIDS in the text books of their curriculum. Considering this, the present study was conducted on students of Bareilly district belonged to the schools of UP and CBSE Boards. The study revealed a wide range of queries, misconceptions among students and teachers regarding various aspects of HIV/AIDS.

Need of HIV/AIDS Preventive Education

Most experts believe that an effective and widely available preventive vaccine for HIV may be our best long-term hope to control the global pandemic. Presently, as there is no cure or vaccine for the control of AIDS is available (although the search is being pursued vigorously); education seems as the only way to prevent its further spread.

The attack of the disease AIDS to a person is purely, the consequence of the deeds or behavior of that individual. AIDS can be used as a mirror to look at ourselves, to examine our attitudes, our behaviour, our relationships and to turn this danger into an opportunity. Thus, both students and teachers share the responsibility for avoiding particularly sexual behaviour that might lead to HIV infection. Equally, they also share the right to refuse sex and assume responsibility for ensuring safe sex. Therefore, getting up-to-date information is the first step towards protecting from AIDS. Messages, warning about sexual matters and HIV come to the students and teachers from a number of different sources e.g. school, textbooks, peers, media, religion, legal system and government. But messages are not always adequate and well spelled. HIV/AIDS is a disease, which at present neither curable nor till time any vaccine is invented to protect the person infected from this disease. Hence, knowledge/information regarding preventive strategies/measures, is the only alternative remedy and to develop awareness about AIDS, its causes and consequences in the provision of HIV/AIDS education in schools. This is

the only best way to transmit the correct and proper information to the students and consequently to the society. Thus, education can play a significant role and can be immensely helpful in HIV/AIDS prevention.

Objectives of the study

To assess the level of awareness of UP and CBSE Board students regarding HIV/AIDS epidemic.

Hypotheses

There is no significant difference on awareness of UP and CBSE Board students regarding HIV/AIDS epidemic.

Methodology

The design of the study was descriptive, adopting the survey method to collect the data from sample subjects (students), to assess their level of awareness regarding HIV/AIDS epidemic.

Sample

The study was carried out on the students aged between 13+ to 15 years (classes IX & X) of secondary schools of Bareilly district belonged to UP and CBSE Boards. A multi-stage random sampling technique was used. At the first stage schools were selected randomly and then from these schools students were selected through further randomization. A sample comprised of 297 students (170 from UP Board & 127 from CBSE Board) was selected randomly for this study.

Tool

HIV/AIDS Awareness Questionnaires for students were separately developed and standardized in Hindi as well as in English by the authors to meet the objectives of the study. This questionnaire comprises five dimensions namely: General Awareness about HIV/AIDS, Causes of Spreading HIV/AIDS, Preventive Measures for HIV/AIDS, Treatment of HIV/AIDS Patients and NGO's Contribution in the field of HIV/AIDS.

Analysis and Interpretation of Data

The data has been analyzed using percentage followed by 't' test. The level of awareness for AIDS was ascertained by the degree of familiarity of students on different dimensions of Awareness Questionnaire. The dimension wise analysis is discussed below-

Table-1
General Awareness among students about HIV/AIDS

S.No.	Items	UP (N=170) CBSE (N=127)		
		%	%	
1.	World AIDS Day	62.94	70.87	
2.	Virus that causes AIDS	61.76	71.65	
3.	Full form of HIV	59.41	70.08	
4.	HIV damages immune system was first found	33.53	44.49	
5.	HIV positive means a person has AIDS	44.71	50.39	
6.	Person suffering with HIV/AIDS assess by			
	observation	32.25	37.01	
7.	AIDS an incurable acquired disease not contagious	38.82	45.28	
8.	Tamilnadu has highest number of HIV infected	21.18	28.35	
Ove	erall general awareness about HIV/AIDS	<mark>42.71</mark>	50.79	

Data displayed in table-1, shows that the general awareness among students studying in the schools, governed by UP and CBSE Boards about HIV/AIDS revealed a consistent trend in their responses. However, there was remarkable variation in view of their correct responses on some of the items (e.g. item no.- 1,2,3 & 4). The students studying in UP/CBSE Board knows 60% about world AIDS day, virus that causes AIDS and full form of HIV. Contrary to it, on the questions related to circulatory system, the year in which this virus was first found and HIV positive means a person has AIDS, their awareness was quite poor 32% to 50%. Again, when it was tried to find out the name of the state that was highest number of HIV infected in India, near 75% were unaware about it. On the overall general awareness about HIV/AIDS a highly significant variation (t=3.47, p=0.01) was found between the students of UP (42.71%) and CBSE (50.79%) Boards. On the basis of the present responses given by the students (shown in table-1), the study concludes that the level of general awareness about HIV/AIDS among the sample students can not be considered as satisfactory, even though some contents related to HIV/AIDS education has already been included in their syllabus.

Table- 2
Awareness among students about Causes of Spreading HIV/AIDS

S.No.	Items	UP (N=170)	CBSE (N=127)
		%	%
1.	Modes of HIV transmission	32.94	35.63
2.	Unsafe sexual relationship spreads HIV/AIDS	31.76	37.01
3.	Transfusion of HIV blood & its products cause AIDS	24.51	27.56
4.	HIV can infected cracked skin	20.00	21.26
5.	HIV +ve mother can transmit HIV during breast		
	feeding AL FOR	22.35	24.41
6.	STIs increases the risk of HIV/AIDS	37.06	38.58
Over	rall awareness about causes of spreading HIV/AIDS	29.02	31.96

The perusal of data presented in table-2 makes it clear that 69% to 64% students do not know the causes of spreading HIV transmission. Similarly only 32% to 37% reported sexual contact as major mode of HIV transmission (item no.- 1 & 2). On item no.- 3,4 & 5 the correct respondents were lying between 20% to 27%. This clearly shows that below 27% students know that sexual relationships with AIDS patient, increases the chance of getting HIV and they also reported that the blood of an HIV infected person if used for infusion to normal person can transmit HIV. Sexually Transmitted infections increases the risk of HIV/AIDS was known to 38.58% CBSE and 37.06% UP Board students. The 't' value on the dimension causes of spreading HIV/AIDS were found insignificant (t=1.37,n.s.).

This inferred that the school going adolescent might indulge in various forms of sexual activities including high-risk behaviour while knowledge about safe sex and HIV is extremely low. This warranted urgent intervention related to AIDS education in schools with an adequate and appropriate content in the syllabus and trained teachers on HIV/AIDS. Further, the above table clearly shows that the students know very little about the causes that were responsible to spread HIV/AIDS in India. This finding was consistent to the finding of Wadhva et al. (1999), who also reported that student's knowledge about AIDS was not adequate and more information about AIDS should be imparted in secondary schools.

Table-3
Awareness among students about Preventive Measures for HIV/AIDS

S.No	Items	UP (N=170)	CBSE (N=127)
		%	%
1.	Strategies for AIDS prevention	32.35	32.68
2.	Safer sexual activities to prevent HIV infection	33.92	36.22
3.	Always checked blood for HIV negative	29.41	31.50
4.	Use sterilized or disposable needles/syringes	32.35	32.28
Ove	erall awareness about Precautions for HIV/AIDS	32.61	33.97

The study of the data presented in table-3 shows that the knowledge about preventive measures for HIV/AIDS among students studying in UP and CBSE Board schools is very-very low. It was found that an equal percentage of students (32%) were aware about the strategies used for AIDS prevention (item no.-1). The sexual activities like embracing, massaging, close physical contact, masturbation and sexual intercourse only with one faithful uninfected partner can minimize the risk of HIV infection was known to 33% to 36% students whether studying in the schools governed by UP and CBSE Boards. While only 29.41% UP Board students followed by 31.50% CBSE Board students reported that all blood bottles should be checked for HIV negative label, even while taking blood from any government/licensed blood bank (item no.-3). Similarly, only to 32% UP and CBSE Board students were aware HIV/AIDS might be prevented, by using sterilized needles and disposable syringes. Thus, among 66% students ignorance about various preventive measures, might lead them to indulge in risky behaviours that could cause HIV/AIDS. On comparing these two pairs on the dimension preventive measures for HIV/AIDS (t=0.62,n.s.), they were found more or less similar.

Thus, the study showed that the awareness regarding prevention of HIV/AIDS (condom use, changing his/her high risk sexual behaviour, using disposable sterilized needles / syringes / blades) could be improved significantly through AIDS education. Rahi, Badhan, Lal & Sharma (2006) also found that there were many misconceptions, myths and biases, internalized by school-going students. Prevention is the most effective strategy for control of HIV/AIDS. Besides raising awareness, improving knowledge and understanding regarding HIV/AIDS among students, all types of schools must take a proactive role to ensure safe sexual behaviour among students.

Table-4
Awareness among students about Treatment of HIV/AIDS Patients

S.No.	Items	UP (N=170)	CBSE (N=127)
		%	%
1.	HIV antibody test detect HIV infection	25.88	27.56
2.	HIV-infected requires regular counseling	30.00	33.07
3.	ARD prolongs the life of HIV/AIDS patients	26.76	29.92
4.	Central Govt. started free distribution of ARDs	36.47	33.07
5.	Vaccine available for prevention of HIV/AIDS	24.12	29.13
Ove	erall awareness about Treatment of HIV/AIDS Patients	28.33	30.45

It is revealed by data presented in table-4 that the awareness on the dimension treatment of HIV/AIDS patients, among the students studying in the schools, governed by UP and CBSE Boards is unsatisfactory. It was observed that 25% to 28% students know that HIV antibody test detect HIV infection. 30% to 36% students are in opinion that HIV/AIDS patients require regular counseling and our government have started free distribution of ARDs to the patients. Non availability of vaccine for the prevention of HIV/AIDS was correctly stated by 24.12% UP Board students and 29.13% CBSE Board students. The overall awareness on this dimension is very low among students studying in UP and CBSE Board schools (28.33% UP Board, 30.45% CBSE Board students). The 't' values on the dimension treatment of HIV/AIDS patients were not found significant (t=0.76,n.s.).

Thus, it has been concluded that innovative strategies to disseminate knowledge regarding diagnosis and treatment of HIV/AIDS were very much needed among secondary school students. This has only be done if immediate teacher-training programmes preservice as well as in-service be started with adequate knowledge about HIV/AIDS as well the effective means and strategies to transmit the knowledge properly to the adolescents & youth aged 13th years onwards.

Table-5
Awareness among students about NGOs Contribution in the field of HIV/AIDS

		UP (N=170)	CBSE
S.No.	Items	%	(N=127)
			%
1.	NACO promote NGOs to work for HIV/AIDS	23.92	27.30
2.	NGOs making efforts to eradicate stigma & discrimination	20.59	23.62
3.	NGOs promote HIV/AIDS persons for their human rights	21.76	23.62
Ove	erall awareness about NGOs Contribution in the field of		
HIV	V/AIDS	22.82	25.83

Analysis of table-5, shows that on the dimension of NGOs contribution in the field of HIV/AIDS, the variation among UP and CBSE Board students is altogether similar. The students of CBSE & UP Board were found altogether similar on this aspect of awareness about HIV/AIDS (t=1.16,n.s.). It shows that they have very insignificant knowledge about NGOs contribution to eradicate prevailing stigma & discrimination attached to HIV/AIDS. Similarly, these students have not shown sufficient knowledge about the National AIDS Control Organization (a national level organization) and its functions and activities that are related to HIV/AIDS. Only 21% UP Board students reported that it is the responsibility of NGOs to promote HIV/AIDS infected persons to fight for their human rights followed by 23% CBSE Board students.

Thus, it has been concluded that students has very little knowledge and accurate information regarding the efforts being made by NGOs and government organizations related to HIV/AIDS disease to eradicate the stigma and discrimination attached to AIDS as well as misconceptions are the prevailing to them do to which they had under fear about spreading of AIDS.

Results and Conclusions

Lack of basic information regarding epidemiology, misconceptions about routes of transmission, symptoms and ignorance towards prevention and treatment of HIV/AIDS among students and teachers came across as a major issue needs attention. Students had shown some awareness, it may be because they had received information about HIV/AIDS through textbooks,

and media sources e.g. T.V., radio, news paper, magazines etc. Contrarily the study reveals that perhaps teachers were not able to handle confidently the curiosity and issues raised by students related to HIV/AIDS in the classrooms and due to that their knowledge level about HIV/AIDS was not found adequate and satisfactory. Therefore, preventive education for teachers needs priority attention. IASE, Bareilly had come forward and to the first author UGC has awarded a major project to train in-service and pre-service teachers to develop the modules on HIV/AIDS preventive education. Besides this, IASEs, CTEs and DIETs must take a proactive role to train the in-service teachers and ensure safe sexual behaviour among students/youths, responsible for spreading over HIV/AIDS. As a result, they would orient the students to deal the causes with care and caution to change basic attitudinal behaviour among adolescents favourably who are confronting numerous problems related to healthy life and HIV/AIDS. It is suggested that schools and teachers have to devise ways to open up more effective communication skills with students in relation to sex education as well as to HIV/AIDS Education. In-service training capsule programmes as well as pre-service teacher training courses on HIV/AIDS must be launched immediately by the universities/teacher training departments/IASEs/DIETs, only then, teachers acquainted adequate information related to HIV/AIDS disease and consequently can transmit the correct and meaningful information to the students.

HIV/AIDS Preventive Education: Our only Hope

Education for HIV/AIDS prevention should begin as early as possible, and be continued throughout childhood and adolescence because HIV/AIDS preventive education in schools is, an important vehicle for reaching and enabling children and young people to protect themselves. Such efforts are likely to work best where schools are safe places for learning and playing, and where school-based efforts are reinforced by community-based support.

What is needed today is the greater appreciation by the public of the various problems afflicting the society and a determined effort to find satisfactory solutions. It is here that education sector can play a great and powerful role. By inculcating correct values of life and by imparting purposeful education and above all, discipline, we can turn out better citizens in times to come that will be able to strike harmony between law and society. Education is the only way to prevent infection. Preventive education also means preventing stigma, denial, and discrimination. In this regard the education can play a crucial role in the fight against AIDS.

To mitigate the impact of HIV/AIDS the preventive education should priorities:

- 1. Support for school health programmes that combine school health policies, a safe and secure school environment for both teachers and learners that explicitly address HIV/AIDS.
- 2. Promotion of policies and practices that favour access, gender equity, school attendance and effective learning.
- 3. Preparation and distribution of scientifically accurate, good-quality teaching and learning materials on HIV/AIDS and life skills.
- 4. Promotion of life skills and peer education with children and young people, and among parents and teachers themselves.
- 5. Efforts to ensure that teachers are well prepared and supported in their teaching on HIV/AIDS through pre-service and in-service education and training.
- 6. The workplace is also an important context within which education for HIV/AIDS prevention can occur. Adult education and apprenticeship training have important roles to play in reaching young people who cannot access formal schooling.
- 7. Coherent state response is required, for which there must be political will and commitment, inter-sectoral collaboration, participation, and engagement by a broad range of stakeholders that includes teachers, teacher educators, health workers, parents, community and religious leaders, young people and people living with HIV/AIDS.

India is perched on top of an AIDS volcano, ready to burst in the absence of an effective preventive education and control programme. Thus, if we all-media, schools, religious institutions, communities and the governments (state & central) act with commitment and take-up the responsibility, the spread of HIV/AIDS can not only minimized but can be controlled totally.

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