

Attitude of College Students on HIV/AIDS

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Received: February 01, 2018; **Published:** March 01, 2018

Abstract

The Human Immuno Deficiency Virus (HIV), mainly targets the CD4 cells of the immune system and depress the humans defense system against infection and certain type of cancer, thus making them Immuno deficient and susceptible to a wide range of infections and diseases. HIV infection, in its advanced stage, is called Acquired Immunodeficiency Syndrome (AIDS).

Objectives: To assess the attitude on HIV/AIDS among the college students.

Methodology: The research approach is quantitative and design selected for this study is descriptive study design. It is also a survey study where the researcher has selected large no. of sample to assess their level of attitude towards HIV/AIDS. sample size was 1000 no. of college student selected by convenient sampling technique as per the inclusion criteria. All the college students were included in the study except from medical, Nursing and paramedical courses. The tool for data collection was divided into two sections. section 1 includes proforma about their demographic variables and section 2 related to attitude on HIV/AIDS.

Result: Shows that the distribution of socio-demographic variables of the college students. Regarding age, majority (54.9%) of the college students were in the age group of 19 to 20 years. In relation to attitude of the students it shows that the overall level of attitude highlights majority (55.7%) of the students had a neutral attitude towards HIV/AIDS. The female students had more positive attitude towards HIV/AIDS than the male students. Likewise, the students from the urban area had positive attitude towards HIV/AIDS than the rural students. Further, the students from nuclear family had more positive attitude towards HIV/AIDS than the joint family students.

Keywords: HIV/AIDS; College Students

Introduction

HIV/AIDS is a disease which considers no territorial boundaries, caste, creed, religion or ages. The Human Immuno Deficiency Virus (HIV), mainly targets the CD4 cells of the immune system and depress the humans defense system against infection and certain type of cancer, thus making them Immuno deficient and susceptible to a wide range of infections and diseases. HIV infection, in its advanced stage, is called Acquired Immunodeficiency Syndrome (AIDS), which takes from 2 to 15 years to develop depending on the host susceptibility. The behaviors and conditions which put one at risk of contracting HIV are: Having unprotected anal or vaginal sex, Sharing contaminated needles, syringes and other injecting equipments, Receiving unsafe injections, blood transfusions, medical procedures that may involve unsafe cutting or piercing, Accidental needle stick injuries, Having other sexually transmitted Infections (STI's) and Tattooing [1].

HIV/AIDS is not only a threat to one's own immune system, but it is a threat to the social and economical development of the family, community and the country. The very nature of the disease - its prolonged duration and severity gives rise to a number of issues and challenges to the individual, his family, friends, community and the country. The problems the individuals face may refer to the loss of job, decreased family income and increased expenditure towards care and treatment which may culminate in the economic crisis of selling the assets. Further, when the sero-status is either disclosed or the family members come to know about the HIV/AIDS status, the HIV positive patients experience rejection by their own family members [2]. Stigma and discrimination is yet another challenge for the PLWHA's. Thus, effective environments can only help these patients to overcome the devastating outcomes of the disease.

Globally, 15 countries account for nearly 75% of all people living with HIV, where India holds 6% of them. It is also reported that India has the third largest number of people living with HIV in the world totaling 2.1 million and accounts for about 4 out of 10 persons living with HIV in the region [3]. It is also estimated that India accounts for 38% of all new HIV infections in the Asia and the Pacific region [4].

The Indian epidemic is highly heterogeneous and is concentrated among vulnerable population with high risk of HIV [5]. Over 35% of all reported cases of AIDs, in India, occur among young people aged between 15 and 24 years [6]. The risky behaviors include early sexual debut, sexual coercion, substance abuse, and trafficking, sexual abuse and so on. The other general factors of Indian society which make them vulnerable are illiteracy, cultural taboos, occurrence of early marriage and gender inequalities.

The Indian societal set up restrains the discussions about sex in the form of taboos and the adolescents shrouded with myths and misconceptions regarding sexual health and sexuality, get fuelled by the influence of infotainment media. The absence of any organized institution for imparting sex education, the young people incline to learn about sexual and reproductive health from unreliable and unauthenticated sources, which force them to have misconceptions about puberty, masturbation, sexual intercourse and the other forms like (anal, oral), reproductive health, STIs, etc. which further push them to be more susceptible to HIV/AIDS [7-9].

Young people, encompassing a major part of reproductive group, play a vital role in determining the future growth patterns of India's population and economy. Thus, it is very crucial that their well-being is best addressed with caution, particularly, in reversing the epidemic of HIV/AIDS among the young people. Good health of this section of young people will help raise the health status of the community by changing their behavior, attitude and lifestyle [4].

Knowing the fact that HIV/AIDS has no cure and prevention is the only cure, the World Health Organization and other Independent Organizations like UNAIDS, in partnership with the National Governments, worked out national strategic plans to fight against this global menace [10].

Objectives

1. To assess the attitude on HIV/AIDS among the college students.
2. To associate the level of attitude among the college students with selected demographic variables.

Methodology

The research approach is quantitative and design selected for this study is descriptive study design. It is also a survey study where the researcher has selected large no. of sample to assess their level of attitude towards HIV/AIDS. sample size was 1000 no. of college student selected by convenient sampling technique as per the inclusion criteria. All the college students were included in the study except from medical, Nursing and paramedical courses.

Ethical Consideration

Ethical clearance was obtained from the Institutional Human Ethical Committee of Rajah Muthiah Institute of Health Sciences for conducting the study.

Permission from the individual college authorities and an informed consent from each of the participants was obtained for the study.

Sampling Technique

Five – stage cluster sampling technique was used for this study.

Out of all the colleges affiliated to Pondicherry University, the colleges were clustered region wise (Puducherry, Karaikal, MAHE and Yanam) at the first stage. Out of the 4 regions, Puducherry was selected by convenience sampling technique. In the second stage, the colleges in Puducherry, were clustered discipline wise (Arts and Science, Engineering, B. Ed, Law, Agriculture, Poly technique etc.) and Arts and Science, Engineering, B. Ed colleges were selected. At the third stage, from the clusters (68) of Arts and Science, Engineering, B.Ed. colleges, 10 colleges were randomly selected using lottery method. In the fourth stage, 2 disciplines were selected randomly from each college. In the fifth stage, from each of the selected discipline 50 students were selected using systematic sampling method.

The tool for data collection was divided into two sections. section 1 includes proforma about their demographic variables and section 2 related to attitude on HIV/AIDS. It was a 5-point Likert scale to measure the attitude towards HIV/AIDS. There were 18 statements with 9 positive and 9 negative statements.

Scoring

The positive statements were rated on 5 points – Strongly Agree-5, Agree-4, Neutral-3, Disagree-2, and strongly disagree-1. The maximum score for positive statements were 5 and the negative statements were scored reversely. Thus, the total score was 90. The obtained scores were classified into 3 levels of attitude as below:

Level of Attitude	Score	Percentage (%)
Negative	0 - 36	Below 40%
Neutral	36 - 54	40% - 60%
Positive	54 - 90	Above 60%

(Table)

Prior to the data collection, written permission was obtained from the college authorities. Informed consent from each of the participants was taken prior to data collection. All the students assembled one place i.e. in the examination hall. The researcher administered the self-administered questionnaire to all the students. After filling the questionnaire she has collected back from them. it took around 20 minutes. The collected data was planned to analyze with the help of descriptive and inferential statistics method.

Result and Findings

Result of the study shows that the distribution of socio-demographic variables of the college students. Regarding age, majority (54.9%) of the college students were in the age group of 19 to 20 years. Regarding gender, most (56.2%) of the college students were females. In relation to marital status, most (96.3%) of the college students were single. Regarding place of residence, half (50.2%) of the college students came from the rural area. Regarding religion, most (83.4%) of them were Hindus. In relation to family status, majority (66.5%) of the college students were from nuclear family. Regarding educational status, most (84.3%) of the college students were undergraduates.

In relation to attitude of the students it shows that the overall level of attitude highlights majority (55.7%) of the students had a neutral attitude towards HIV/AIDS, while 42% of the students had positive attitude and only 2.3% of the college students had negative attitude towards HIV/AIDS (Table 1 and Figure 1).

Level of Attitude	No.	%
Positive (Above 60%)	420	42.0
Neutral (40 - 60%)	557	55.7
Negative (Below 40%)	23	2.3

Table 1: Overall Attitude Towards HIV/AIDS Among College Students
(N = 1000).

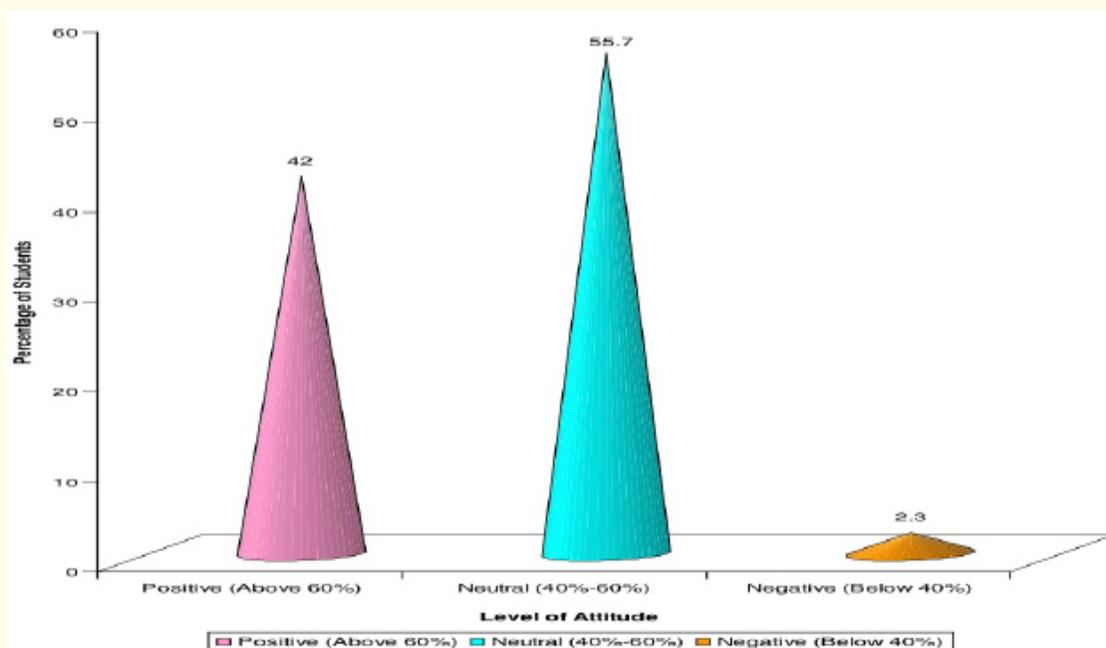


Figure 1: Overall Attitude Towards HIV/AIDS Among the College Students.

Table 2 shows the association between the attitude towards HIV/AIDS and the selected demographic variables of the college students.

Variable	Sub-variable	No.	Mean	S.D	ANOVA F value/ 't' test	p value
Age (in years)	17 - 18	227	55.74	6.78	0.637*	0.591 (NS)
	19 - 20	549	56.50	7.19		
	21 - 22	156	56.18	7.96		
	22 - 23	68	55.95	6.732		
Gender	Male	438	55.09	7.08	4.48**	0.000 (S)
	Female	562	57.13	7.16		
Marital status	Single	963	56.22	7.26	0.396	0.692 (NS)
	Married	37	56.70	5.03		
Place of residence	Rural	502	55.36	6.74	3.88	0.000 (S)
	Urban	498	57.12	7.52		
Family status	Joint	335	55.21	6.98	3.22	0.001 (S)
	Nuclear	665	56.76	7.25		
Educational status	Under graduate	843	56.23	7.13	2.81	0.944 (NS)
	Post graduate	157	56.28	7.53		
HIV/AIDS awareness session participation	Attended	302	56.66	7.60	1.23	0.219 (NS)
	Not attended	698	56.05	7.01		

Table 2: Association Between Attitude Towards HIV/AIDS with Selected Demographic Variables of the College Students.

(N = 1000)

*F ratio; *t' test

S: Significant at 0.05 level; NS: Non-Significant

The significant p value revealed that there was statistically significant association between the attitude of college students towards HIV/AIDS and the gender, place of residence, and family status.

The female students had more positive attitude towards HIV/AIDS than the male students. Likewise, the students from the urban area had positive attitude towards HIV/AIDS than the rural students. Further, the students from nuclear family had more positive attitude towards HIV/AIDS than the joint family students.

The non-significant p value revealed that there was no significant association between the attitude of college students towards HIV/AIDS with the age, marital status, educational status and the students participation in HIV awareness session.

The attitude of the college students towards HIV/AIDS was same among various age group of students, married vs single and among these students who participated in the HIV awareness programme and those who had not participated in the HIV awareness.

Discussion

The present study results revealed that out of 1000 college students, majority (55.7%) had a neutral attitude, while 42% of them had positive attitude and only 2.3% had negative attitude towards the HIV/AIDS. The above result is consistent with the findings of Jose., *et al.* (2011) who reported that, in general, the students depicted a positive attitude towards the HIV/AIDS. Thanavanh., *et al.* (2013) and Dubey, Sonker and Chaudhary (2014) had conducted a cross-sectional study on "knowledge, attitude and beliefs of young, blood donors among college students about HIV" in the department of transfusion medicine of a tertiary care teaching hospital of North India. The results showed that the response to the various aspects of HIV – related attitude varied and showed that there was still stigma associated with AIDS even among the educated groups. Madiba and Mokgatie (2014) conducted a survey to assess the high school learners' HIV knowledge and attitude towards learners infected with HIV in North West and Gauteng provinces, South Africa highlighted that Negative attitude existed among a Quarter of the respondents which was attributed to the knowledge gaps and misconceptions that existed despite substantial HIV knowledge [11-15].

The ANOVA 'F' value (4.48, $P < 0.000$) calculated for the association of gender of the college students with their attitude scores showed that there was a statistically significant association between the attitude score and gender. This clearly indicated that the females ($M = 57.1336$, $SD = 7.16$) maintained more positive attitude than the male students ($M = 55.09$, $SD = 7.08$). The above finding was consistent with the findings of the study by Shiferew., *et al.* (2011) which reported that females totaling 77.4% had positive attitude than males 55.2% [15].

Conclusion

India is home to the largest population of young people in the world and also the most vulnerable and affected region with a high density of HIV epidemic (UNAIDS 2014 Gap Report, World Bank, 2012). The main conclusion from the above study is majority of college students have neutral or positive attitude towards HIV/AIDS.

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Volume 7 Issue 4 April 2018

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