

HIV/AIDS Awareness among Students of Kwara State College of Education, Ilorin, Kwara State, Nigeria

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Abstract

HIV/AIDS has become one of the most devastating disease humanity has ever known. The Study investigated HIV/AIDs awareness among students of Kwara State College of Education Ilorin, Kwara State, Nigeria. The descriptive research design of survey type was adopted for the study. Two hundred (200) respondents were selected for the study with the use of purposive and simple random sampling techniques. A validated questionnaire developed by the researcher was used for data collection. Test-retest method was used to establish the reliability of the instrument and the result of 0.75r obtained. Inferential statistics of chi-square was used to test the hypotheses at 0.05 alpha level. The results revealed that unsafe sexual intercourse and blood transmission had a significant influence on the causes of HIV/AIDS disease ($151.340 > 16.92$, $221.40 > 16.92$) among College of Education Students in Kwara State. The researcher concluded that unsafe sexual intercourse and blood transmission causes HIV/AIDS among Kwara State College of Education students. The researcher recommended that the school authority should organize enlightenment campaign programme for the students to educate them on the danger inherent in premarital or unsafe casual sex so as to protect themselves against sexually transmitted infection (STI) including HIV which has no cure yet.

Keywords: Causes, disease, awareness, students, HIV/AIDS, college of education

Introduction

Adolescence is a transitional stage of physical and psychological development that generally occurs during the period from puberty to legal adulthood. Adolescence is usually associated with the teenage years, but its physical, psychological or cultural expressions may begin earlier and end later. Low HIV and sexual health knowledge is a key barrier to reducing HIV infection among young people.

Adolescents display sexual behaviours and developmental characteristics that place them at risk for HIV infection. A primary source of risk for the acquired immune deficiency syndrome (AIDS) is unprotected sexual activity. By the time they are 18 years old; most adolescents in many African countries are sexually active. Adolescents are less likely than adults to consistently use condoms or other methods of protection that could reduce their chances of infection (Afred, 2003).

Achalu (1993) and Ogundele (2004), explained that (AIDS) is a most serious sexually transmitted disease (STD). It is a deadly disease caused by a germ known as (virus) called human immuno-deficiency virus (HIV). The AIDS virus is spread through three medium; sexual intercourse with an infected person, mother to child transmission and contact with infected blood or blood products. The disease can kill but unfortunately, there is no cure or vaccine to prevent it yet. AIDS disease is a pandemic health problem that threatens human existence.. It is important to note that AIDS is actually a syndrome, which is a collection of various symptoms, infections and conditions.

HIV is the etiologic agent of (AIDS). It is a sub-microscopic, obligate intracellular parasite. It lacks the ability to grow and reproduce outside a living cell. Hence, its survival is absolutely dependent upon the continued survival of the host. HIV is composed of a positive sense, single-stranded RNA genome. HIV belongs to the virus family Retroviridae and genus Lentivirus (Latin lentus = slow). It was first isolated in lymphocytes of AIDS patients in 1983 (Frederick, 2014).

The Human Immune Virus can be transmitted from one person to another when:

- A person receives HIV contaminated blood in a blood transfusion,
- When a person is exposed to needles that are contaminated with HIV infected blood in the process of injecting drugs,
- When a person (eg a health care worker) is injured with blood-contaminated needles, syringes, razor blades or other sharp instruments,
- Unsterile or dirty razors, knives, needles or other instruments used during cultural practices such as circumcision, scarification, or bloodletting are used by another person (Sindisiwe, 2014).

Globally, 36.7 million people live with (HIV) as at the end of 2015. The burden of the epidemic continues to vary considerably between countries and regions. Sub-saharan Africa is most affected by the epidemic accounting for over 70% of the people living with HIV worldwide. In fact, for every 25 adults in sub-Saharan Africa, one is a person living with HIV/AIDs. The first case of HIV in Nigeria was reported in 1986. Despite over two decades of the fight against the HIV/AIDS epidemic, Nigeria still has a high burden of the disease, second only to South Africa with a national prevalence of 3.0%. Nigeria also contributes the highest number of vertically transmitted childhood HIV infections which accounts for 30% of the global burden. In 2015, about 3million Nigerians were reported to be infected with HIV, requiring some form of care and support (National Primary Health Care Development Agency, 2017).

Initially a person infected with the Human Immune virus will not know of the infection. However, after several years they may come down with AIDS or AIDS-related complex problems. When the symptoms appear, they may look like those of many common illnesses such as fatigue, coughing or fever. The symptoms may also vary from person to person. Minor signs of AIDS include the followings; constant cough for more than one month, swollen glands lasting for many months, skin rashes or cold sores all over the body. Major signs of AIDS include the followings; weight loss greater than 10% of the body

weight, persistent fever for more than one month, diarrhoea longer than one month or persistent severe fatigue. (Ogundele, 2004).

Despite efforts to control the epidemic, HIV prevalence rates within Nigeria continue to increase at an alarming rate. Nigeria ranks second within sub-Saharan Africa for the number of HIV infected adults. Nigeria's overall national HIV prevalence rate is 5.4 per cent but youth within the 20 – 24 range showed a much higher prevalence rate (4.2 – 9.7 per cent). While there are zonal variations, statistics show that HIV plagues every zone and state in Nigeria (Alfred, 2003).

Shehu, Baba, Oguntunji and Ajadi (2012), asserted that the acquired immune deficiency syndrome (AIDS) is a deadly and age long disease that contributes to a high rate of mortality worldwide. It is a viral infection caused by a group of virus known as the human immune deficiency virus. Those who willingly have unsafe sexual practices including sex before marriage run a greater risk of contracting the disease. Ogundele (2004), opined that the transmission of HIV is possible if a man and a woman (heterosexual) or a man and a man (homosexual) or woman and a woman (lesbianism) either of whom is infected engage unprotected intercourse. Such sexual intercourse could either be through the vaginal or anus. It is known that the chance of being infected by HIV is increased by promiscuity and indulgence in a causal unprotected sexual relationship.

Dean and James (2000); Shehu, et al. (2012), stated that no human communicable disease in the twentieth century has caused as much fear, uncertainty and emotional concern as Acquired Immune Deficiency Syndrome (AIDS). This disease is characterized by a breakdown of the immune mechanism, which combats infections.

Shehu and Kinta (2011), explained that people can get HIV if infected blood mixes with their blood. Infected blood might come from blood used for transmission or might come from an unsterilized needle or blade that has infected blood on it. Equipment used for piercing, tattooing, facial mark or circumcision can transmit HIV if it is not properly sterilized.

World View (2018), declared that, AIDS is the foremost sexually transmitted disease (STD) everyone is quite aware of, which

is spread by the HIV (virus). It is not a pleasant sight to watch someone die of AIDS. Most of the world's AIDS patients die alone. Besides the horrible physical symptoms of AIDS, it also causes much pain, degradation, anger, and depression.

Lewis and Widdus (1991); Shehu, et al. (2012), noted that human immunodeficiency virus (HIV) is carried in the fluids. It is transmitted by the blood and semen into the recipient's bloodstream. The World Health Organization (WHO) in a bid to prevent and control the spread of initiated different intervention programme of which voluntary HIV counseling and testing (HCT) is one.

Frederick et al. (2014), disclosed that population groups most at risks of HIV infection include female sex workers, migrant workers, long-distance drivers, in school youth, out of school youth, people in uniformed forces, displaced populations, people operating night market and men having sex with men.

HIV/AIDS is a major problem in Nigeria. The HIV epidemic continues to expand in all zones, states and communities. It has crippled a significant segment of the most productive portion of the population. They can no longer work and contribute to household income. When people are provided with accurate information on sexual and reproductive health, they become better able to make informed decisions about their sexual reproductive behaviours. For the sexually active, the best way to avoid HIV is to stay in a mutually faithful relationship with an uninfected partner. In polygamous marriages, the husband and wives should remain faithful to each other (Shehu & Kinta, 2011).

Frederick et al. (2014), opined that behavioural change has been identified as one of the most effective prevention measures in the fight against HIV and AIDS. Understanding and practice of behaviours that can prevent or reduce the risk of HIV infection is an integral part of HIV prevention and control. Widely recognized preventive practices or individual behavioural change interventions that reduce the risk of HIV infection include the ABCS (Abstinence, Being faithful, and condom use) of HIV prevention.

Alfred (2003), explained that AIDS education and prevention must entail an exploration of cultural values that may help to explain individual, family and community predispositions to engage in HIV risk activities for it to be effective. The point must be made loud and clear that only HIV/AIDS intervention strategies that respect and reflect the Africa culture will be effective in halting the AIDS epidemic in Africa. School-based programmes on HIV/AIDS can include peer education or child – to the child component. Peer educators are typically the same age as or slightly older than the group with whom they are working. They may work alongside the teacher, run educational activities on their own or actually take the lead in organizing and implementing school-based activities. The task of the peer educator consists of informal discussions. These activities are not confined to the classroom when the teacher is present, but can also happen during informal times spend eating together in cafeterias or playing in relaxation centres.

Statement of the Problem

The acquired immune deficiency syndrome (AIDS) disproportionately affects young people. Worldwide, about half of all the new HIV infection occurs in young people between the ages of 15 and 24. AIDS disease affects people mainly at their prime and most productive years. The illness and impending death of up to 25% of all adults in Nigeria have an enormous impact on national productivity and earnings. The benefits of education lost and resources that would have been used for investment will be used for health care, orphan care and funerals ceremonies. The researcher observed that some students of the Kwara State College of Education do not know the causes of HIV/AIDS and its consequences on their health. Adequate attention was yet to be given on the need to educate the society at large on problems that emanate from the virus. The study investigated the causes of HIV/AIDS disease as expressed by Kwara State College of Education Students, Ilorin, Kwara State, Nigeria.

Research Questions

The research questions used for the study were as follows:

1. Will unsafe sexual practices cause HIV/AIDS disease among Kwara State College of Education Students, Ilorin, Kwara State, Nigeria?
2. Will blood transmission cause HIV/AIDS disease among Kwara State College of Education Students, Ilorin, Kwara State, Nigeria?

Hypotheses

The research hypotheses developed for the study were as follows:

1. Unsafe sexual practices will not significantly cause HIV/AIDS disease among Kwara State College of Education Students, Ilorin, Kwara State, Nigeria
2. Blood transmission will not significantly cause HIV/AIDS among Kwara State College of Education Students, Ilorin, Kwara State, Nigeria

Methodology

The descriptive research design of survey type was adopted for the study. The population of this study comprised of all students of Kwara State College of Education. The students that participated in this study were selected from halls of residence because of easy accessibility as well as to obtain honest responses from the respondents. Purposive sampling technique was used to select two halls of residence out of five hostels operating in the college based on gender. One from male hostels and one from female hostels. Simple random sampling technique was adopted to select two hundred (200) respondents by sampling the first one hundred students registered in each of the selected hostels for the 2018/2019 academic session. The researcher developed a questionnaire that had been validated by three experts in the Department of Health Promotion and Environmental Health Education, Faculty of Education, University of Ilorin, Ilorin, Nigeria to collect data from the selected respondents. The reliability of the instrument used for the study was established through test-retest method and result of 0.75r obtained through the use of Pearson

Product Moment Correlation (PPMC). The researcher with the help of the three trained research assistant administered the questionnaire on the respondents. The data collected from this study were collated, coded and analysed using inferential statistics of chi-square to test the hypotheses at 0.05 level of significance.

Results

HO₁: Unsafe sexual practices will not significantly cause HIV/AIDS disease among Kwara State College of Education Students, Ilorin, Kwara State, Nigeria

Table 1: Chi-square analysis showing the influence of unsafe sexual practices on the causes of HIV/AIDS

S/N	ITEMS	SA	A	D	SD	df	Cal. Value	Table Value	Remarks
1	Having sex with multiple sex partner cause HIV/AIDS disease	56 (28.0%)	84 (42.0%)	45 (22.5%)	15 (7.5%)				
2	Having oral sex with an infected person cause HIV/AIDS disease	99 (49.5%)	84 (42.0%)	9 (4.5%)	8 (4.0%)				
3	Having unprotected sexual intercourse with casual friends cause HIV/AIDS disease	38 (19.0%)	123 (61.5%)	26 (13.0%)	13 (6.5%)	9	151.340	16.92	Ho ₁ rejected
4	Having sexual intercourse outside matrimonial home cause HIV/AIDS disease	70 (35.0%)	93 (46.5%)	28 (14.0%)	9 (4.5%)				
	Column Total	263	384	108	45				

$P < 0.05$

Table 1 showed that the calculated value of 151.340 is greater than the critical value of 16.92 with a degree of freedom of 9 at 0.05 alpha level. Therefore, the null hypothesis one was rejected and alternative hypotheses upheld that unsafe sexual practices cause HIV/AIDS among students of Kwara State College of Education Students, Ilorin, Kwara State, Nigeria. The result of this finding agrees

with the position of Ogundele (2004), that the transmission of HIV is possible if a man and a woman (heterosexual) or a man and a man (homosexual) or woman and a woman (lesbianism) either of whom is infected engage in unprotected intercourse. Such sexual intercourse could either be through the vaginal or anus. It is known that the chance of being infected by HIV is increased by promiscuity and indulgence in a casual unprotected sexual relationship. The World View (2018), asserted that AIDS is the foremost sexually transmitted disease (STD) everyone is quite aware of, which is spread by the HIV (virus). It is not a pleasant sight to watch someone die of AIDS. Most of the world's AIDS patients die alone. Those who willingly have unsafe sexual practices including sex before marriage run a greater risk of contracting the disease. Besides the horrible physical symptoms of AIDS, it also causes pain, degradation, anger, and depression.

HO₂: Blood transmission will not significantly cause HIV/AIDS disease among Kwara State College of Education Students, Ilorin, Kwara State, Nigeria.

Table 2: Chi-square analysis showing the influence of blood transmission on causes of HIV/AIDS

S/N	ITEMS	SA	A	D	SD	Df	Cal. Value	Table Value	Remarks
5	Use of dirty or unsterile needles or syringes for medical injection cause HIV/AIDS disease	22 (11.0%)	73 (36.5%)	66 (33.0%)	39 (19.5%)				
6	Use of dirty or unsterile razor blade or knives for cutting finger nails or circumcision cause HIV/AIDS disease	33 (16.5%)	94 (47.0%)	60 (30.0%)	13 (6.5%)				
7	Use of unscreen blood for blood transfusion cause HIV/AIDS disease	28 (14.0%)	69 (34.5%)	70 (35.0%)	33 (16.5%)	9	221.440	16.92	Ho ₂ rejected
8	Use of dirty or unsterile clipper for barbing hair in the saloon cause HIV/AIDS	36 (18.0%)	106 (53.0%)	45 (22.5%)	13 (6.5%)				
	Column Total	119	342	241	98				

$P < 0.05$

Table 2 shows that the calculated chi-square value of 221.440 is greater than the critical value of 16.92 with a degree of freedom of 9 at 0.05 alpha level. Therefore, the null hypothesis two was rejected and alternative hypotheses upheld that blood transmission causes HIV/AIDS among students of Kwara State College of Education Student, Ilorin, Kwara State, Nigeria. The result of this finding is in line with the finding of Shehu and Kinta (2011), that people can get HIV if infected blood mixes with their blood.. Infected blood might come from blood used for transmission or might come from an unsterilized needle or blade that has infected blood on it. Equipment used for piercing, tattooing, facial mark or circumcision can transmit HIV if it is not properly sterilized.

Conclusion

Based on the findings of this study, it was concluded that unsafe sexual practices cause HIV/AIDS disease among Kwara State College of Education Students, Ilorin, Kwara State, Nigeria. Also, it was concluded that blood transmission causes HIV/AIDS disease among

Recommendations

Based on the findings and conclusion of the study, the following recommendations were drawn:

1. The school authority should organize enlightenment campaign programme for the students to educate them on the danger involved in premarital or unsafe casual sex so as to protect people against sexually transmitted infection (STI) including HIV which has no known cure yet.
2. The Federal Government of Nigeria should develop a law that will place a severe penalty on any hospital that transfuses patients with unscreened blood.
3. The Federal Ministry of Health should carry out enlightenment campaign through mass media such as radio, television and newspaper that will educate people on the danger of using dirty, unclean or unsterile sharp instrument or objects such as knives, razor blade or needle which may use for cutting of fingernails, circumcision or barbing of hair in saloon.

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