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AWARENESS OF MODES OF HIV/AIDS TRANSMISSION AND PREVENTION AS CORRELATES OF SEXUAL BEHAVIOUR BY PHYSICALLY HANDICAPPED FEMALE STUDENTS IN SPECIAL SCHOOLS IN AKWA IBOM STATE, NIGERIA

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ABSTRACT

The study was to determine the awareness of modes of HIV/AIDS transmission and prevention as correlates of sexual behaviour by physically handicapped female students in special schools in Akwa Ibom State. One hundred respondents were drawn for the study using a purposive sampling technique. Forty two item researchers' made questionnaire titled AHTPMACSSB was used to collect data after being validated by experts. The data were analysed using percentages and Pearson Product Moment Correlation Coefficient Statistical Technique. The results showed that the respondents were aware of the various modes of HIV/AIDS transmission. The findings also revealed that the respondents' level of awareness of preventive measures did not correlate with their sexual behaviour. Based on these, it was recommended that high quality HIV/AIDS education be intensified in schools in Akwa Ibom State, Nigeria.

Keywords: HIV/AIDS, Awareness, Transmission, Behaviour

INTRODUCTION

The principle of understanding basic facts concerning health and disease, attitude and practice within a locality are applicable to all types of diseases including the Acquired Immune Deficiency Syndrome (AIDS). This understanding may enable one to utilize the knowledge to develop positive health behaviours and practices within the community. Though awareness alone does not imply safe behaviours, but there exist a correlation. It is therefore expected that people who are aware of the basic facts about HIV/AIDS transmission and prevention should be responsive to the tenets of prevention.

United Nations Programme on HIV/AIDS, UNAIDS (2001) submitted that since the first incidence of AIDS pandemic, a total of 21.8 million people have died from the disease. AIDS pandemic is distinct in that it mainly strikes the young adult between the ages of 25 and 45 years irrespective of disability.

Furthermore, UNAIDS (2001) stated that in Nigeria, around 3.9% of adults between 15 – 49 years are living with HIV/AIDS. Approximately, 220,000 people died from AIDS in 2006 alone *UNAIDS, 2007). With AIDS claiming so many lives, Nigeria's life expectancy has declined. In 1991, the average life expectancy was 53.8 years for women and 52.6 years for men. But in 2007 these figures had fallen to 46 years for women and 47 years for men (World Health Organisation – WHO, 2008).

According to Naglier (1993), handicap is a social and physiological result of impairment. It refers to the problem associated to disabilities. Pagliarulo (1996) submitted that most physical disabilities are

either orthopaedic or neurological disorders. Furthermore, the orthopaedic disorders may be as a result of genetic, chromosomal of environmental related problems while the neurological disorders are problems which can be inherited or acquired. Counterparts in the age group display sexual behaviours that put them at risk for HIV/AIDS.

Sexual behaviour denotes a way by which a person responds or acts towards sexual matters (Hornby, 1998). It is the acting out of sexual expressions, feelings and beliefs. The Kaiser Family Foundation (2002) saw risky sexual behaviour as unprotected vaginal, anal or oral intercourse. This can take several forms ranging from a large number of sexual partners, intercourse under the influence of substances such as alcohol or cocaine. However, the high prevalence and high vulnerability of HIV/AIDS may be attributed to lack of awarness of the dreaded disease. Awareness of HIV/AIDS transmission and prevention may be seen as the knowledge or perception one has on the ways the disease can be transmitted from one person to another and also the modalities to adopt so as to prevent or control the spread of the disease.

Recently, since 2002, there have been aggressive campaign in the media (i.e. posters on HIV/AIDS, warning on billboards in the cities, etc) to make the citizenry aware of the disease by both government and non-governmental orgnisaitons. Despite the efforts, the prevalence of the disease is still high. In Akwa Ibom State, prevalence trend have been fluctuating between 12.5% in 1999, 7.2% in 2003 and 8.0% in 207 (Markson, 2008).

With this background, the study sorts to determine the awareness of modes of HIV/AIDS transmission and prevention as correlate of sexual behaviour by physically handicapped female students in special schools in Akwa Ibom State.

PURPOSE OF THE STUDY

The purpose of this study was to find out the awareness of modes of HIV/AIDS.

RESEARCH QUESTIONS

1. What is the level of awareness of sexual intercourse as a mode of HIV/AIDS transmission among the physically handicapped female students in special schools?
2. What is the level of awareness of invasive procedure as a mode of HIV/AIDS transmission among physically handicapped female students in special schools?
3. What is the level of awareness of mother-to-child HIV/AIDS transmission mode among physically handicapped female students in special schools?
4. What is the level of awareness of preventive measures of HIV/AIDS transmission among physically handicapped female students in special schools?
5. What is the level of awareness of sexual behaviour of the physically handicapped female students in special schools?

HYPOTHESES

1. There is no statistically significant relationship between awareness of sexual intercourse as a mode of HIV/AIDS transmission and sexual behaviour of the physically handicapped female students in special schools in Akwa Ibom State.
2. There is no statistically significant relationship between awareness of preventive measures of HIV/AIDS transmission and sexual behaviour of the physically handicapped female students in special schools in Akwa Ibom State.

SAMPLE AND SAMPLING TECHNIQUES

A purposive sampling technique was used to draw one hundred female students for the study. The sampling technique was to ensure that only those elements that are relevant to the research were selected. The researcher made instrument title "Awareness of HIV/AIDS Transmission and Prevention modes as a correlates of Students' Sexual Behaviour" (AHTPMACSSB) questionnaire was used for the study. It was organized into two sections – A and B. Section A was to generate data on personal information on the respondents and Section B gathered data on awareness of modes of HIV/AIDS transmission and prevention and students' sexual behaviour.

They were expected to respond to the items with a true or false response. The instrument was validated and tested for reliability using *Kuder Richardson Formula 21 (K-R-21).* This yielded 76 reliability coefficients.

DATA COLLECTION AND ANALYSIS

With the support of research assistants, copies of the questionnaire were administered on the respondents in each school. Data collected were analysed using percentages to answer the research questions. Pearson Product Moment Correlation Coefficient Statistical Technique was used to test null hypotheses at 0.5 level of significance.

RESULTS

Research Question 1: What is the level of awareness of sexual intercourse as a mode of HIV/AIDS transmission among physically handicapped female students in special schools?

Table 1. Showing level of Awareness of Sexual Intercourse as a mode of HIV/AIDS

Items	Aware %	Unaware %
HIV/AIDS is found in Akwa Ibom State	82	18
I know someone that have died of HIV/AIDS	71	29
Sex with infected person can transmit HIV/AIDS	80	20
Sex without condom can transmit HIV/AIDS	73	27
Practicing anal sex can transmit HIV/AIDS	92	8
Oral genital intercourse transmit HIV/AIDS	95	5

The result in Table 1 above shows that 82% knew that HIV/AIDS is found in Akwa Ibom State while 71% of the respondents knew people that have died of HIV/AIDS. Also, 80% of the respondents were aware that sex with an infected person can transmit HIV/AIDS while 73% were ware that sex without condom can transmit HIV/AIDS. On whether anal sex can transmit HIV/AIDS, 92% of the respondents were aware while 95% were aware that oral genitals intercourse can transmit HIV/AIDS.

Research Question II: What is the level of awareness of invasive procedures as a mode of HIV/AIDS transmission among physically handicapped female students in special schools?

Table 2. Showing level of Awareness of Invasive Procedures as a mode of HIV/AIDS

Items	Aware %	Unaware %
Transfusion of infected blood	92	8
Sharing of sharp piecing devices	63	37
Contaminated health care instrument	81	19
Sharing of needles/syringes by IV drug users	72	28
Sharing of toothbrush	62	38
During tattooing	87	13

The result in Table 2 above shows that 92% of the respondents were aware that transfusion of infected blood can transmit HIV/AIDS. On sharing of sharp piecing device, 63% were aware that this route can transmit HIV/AIDS. Eighty One percent (81%) of the respondents were aware that contaminated health care instrument can transmit HIV/AIDS. On sharing of toothbrush, 62% were ware that HIV/AIDS can be transmitted through this route, and 87% were also aware that during tattooing, HIV/AIDS can be transmitted from an infected person to the other.

Research Question III: What is the level of awareness of mother-to-child transmission of HIV/AIDS among physically handicapped female students in special schools?

Table 3. Showing level of awareness of mother-to-child HIV/AIDS mode of transmission

Items	Aware %	Unaware %
HIV/AIDS is a hereditary disease	68	32
HIV/AIDS can be transmitted from an infected mother during pregnancy	55	45
From infected mother during caesarean section	65	35
From infected mother during breastfeeding	40	60

The data in Table 3 shows that 68% of the respondents were aware that HIV/AIDS is a hereditary disease while 55% were also aware that an infected mother can transmit HIV/AIDS to her baby during pregnancy, also 65% of the respondents aware that HIV/AIDS can be transmitted during caesarean section operation. Forty percent (40%) of the respondents were aware that HIV/AIDS can be transmitted through breastfeeding.

Research Question IV: What is the level of awareness of preventive measures of HIV/AIDS transmission among physically handicapped female students in special schools?

Table 4. Showing level of awareness of preventive measures of HIV/AIDS

Items	Aware %	Unaware %
Abstinence	75	25
Faithfulness to one uninfected partner	73	27
Consistence use of condom	70	30
Avoidance of homosexuality	14	86
Blood screening before transfusion	60	40
Non sharing of sharp instruments	72	28
Seek medical advice when pregnant	70	30
Infected mother should not breastfeed	76	24

The data in Table 4 revealed that 75% of the respondents were aware that abstinence is the best preventive measures against HIV/AIDS. On faithfulness to one uninfected partner, 73% were aware while 70% of the respondents were aware that consistence use of condom can prevent HIV/AIDS transmission. On avoidance of homosexuality, 14% were aware while 60% knew that screening of blood before transfusion will prevent the transmission of HIV/AIDS. Also, 72% of the respondents were aware that sharp piercing instruments should not be shared. Seventy six percent (76%) of the respondents were aware that infected mothers should not breastfeed their babies.

Research Question V: What is the level of awareness of sexual behaviour among physically handicapped female students in special schools?

Table 5. Showing level of awareness of sexual behaviour of physically handicapped female students

Items	Aware %	Unaware %
One sexual partner	56	44
Abstinence	67	33
Homosexuality	71	29
Oral sex	82	18
Anal sex	71	29
Use of condom	79	21
Having one's way in sexual matters	82	18
Cannot stay without sex	42	58
Many sex partners	56	44

The data in Table V shows that 56% of the respondents were aware of having one sexual partner. Only 67% abstained from sexual intercourse. On homosexuality, practice of oral sex and anal sex, 71%, 82% and 71% of the respondents respectively were aware of these behaviours. On the use of condom, 79% were aware while 42% knew that one can stay without having sex. Fifty six percent (56%) were aware of having many sexual partners.

HYPOTHESES TESTING

Hypotheses I: There is no statistically significant relationship between awareness of sexual intercourse as a mode of HIV/AIDS transmission and sexual behaviour of physically handicapped female students.

Table 6. Showing the relationship between awareness of sexual intercourse as a mode HIV/AIDS transmission and sexual behaviour of students.

N=100

Variables	Σy	Σx^2		
	Σy	Σy^2	**Σxy**	**rxy**
Awareness of Sexual Intercourse	454	3145	2110	.686
Sexual behaviour of students	405	1755		

* P<, .05; *df* = 98; critical *r* = .195

The results in Table 6 show that *r* cal.686 is greater than *r* critical .195 at .05 level of significance and *df* of 98. Thus the null hypothesis which stated that there is no statistically significant relationship between awareness f sexual intercourse as a mode of HIV/AIDS transmission and sexual behaivour of physically handicapped female students is rejected. This therefore means that there is a significant

relationship between awareness of sexual intercourse as a mode of HIV/AIDS transmission and sexual behaivour of students.

Hypotheses II: There is no statistically significant relationship between awareness of preventive measures of HIV/AIDS and sexual behaviour of students.

Table 7. Showing the relationship between awareness of preventive measures of HIV/AIDS and sexual behaivour of students.

N=100

Variables	Σy	Σx^2		
	Σy	Σy^2	**Σxy**	**rxy**
Preventive measure 580	3550			
			2350	.02710
Sexual behaviour	405	1755		

* P<, .05; *df* = 98; critical *r* = .195

The results in Table 7 show that *r* cal .027 is less than *r* critical .195 at .05 level of significance and *df* of 98. Based on these, the null hypothesis is upheld. This therefore means that, there is no relationship between awareness of preventive measures of HIV/AIDS and sexual behaivour of physically handicapped students in special school.

DISCUSSION OF FINDINGS

The study examined the relationship between the awareness of modes of HIV/AIDS transmission and prevention with the sexual behaivour of physically handicapped students in special schools. The findings in hypothesis I revealed a statistical significant relationship between awareness of sexual intercourse as a mode of HIV/AIDS transmission and sexual behaviour of students thus rejecting the hypothesis. This result may be due to the introduction of family life and sex education in the school curriculum. However, once the ways to transmit the infection are well known, people will more likely adopt safer behaviour and this will bring a reversal in the trend, with better educated people having lower rate of infection especially among younger people. UNAIDS (2000) reported that, the best educated people in the country hardest hit by AIDS epidemic may be shifted towards less risky behaviour. Therefore, HIV/AIDS education should be part of health education, which will impact accurate information as well as dispel misinformation about HIV/AIDS. The students need to be aware of the consequences of sexual experimentation because they may also become infected if they lack the means or ability to act on knowledge they have about HIV/AIDS. Therefore intensive exposure to health education must be encouraged in schools.

The findings also revealed that there is no relationship between awareness of preventive measures of HIV/AIDS and sexual behaviour of physically handicapped students. This finding is contrary to Mishra, Sharma and Bansal (2007) assertion that understanding the nature of the infection and how it is transmitted is the precondition for changing behaviours that facilitate transmission. The findings also contradicts what Ogundele (2004) opined that students are adequately aware of HIV/AIDS and have fairly accurate information about it, and a considerable number of students run higher risk of HIV infection.

In San Francisco, it was found that majority of students did not act on safe sex information (HIV Insight 2002). Students still involved in behavour which place them in the position of getting infected. Most of the students did not consider themselves to be at serious risk of contracting HIV/AIDS. This believes is largely due to the indulgence of students in "Othering" the disease to other people. Additionally, earlier studies reveled that females were less knowledgeable than their male counterparts about HIV matters (Singh, Garg, Bhatnagar & Chopa, 2004). This was reported

CONCLUSION AND RECOMMENDATION

Based on the result of the study, most respondents are aware of the modes of transmissions and prevention of the dreaded disease HIV/AIDS. It is concluded that the awareness level of the physically handicapped students in special schools is on the average. It is therefore recommended that quality HIV/AIDS education through health education should be vigorously pursued in all level of education.

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