

## ASSESSMENT OF KNOWLEDGE, ATTITUDE AND RISKY PRACTICES REGARDING HIV/AIDS INFECTION AMONG SECONDARY SCHOOL STUDENTS IN EKPOMA, EDO STATE, NIGERIA

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### ABSTRACT

This descriptive cross sectional study involving a total of 250 secondary school students of Ambrose Alli University was designed to assess the knowledge, attitude and risky practices regarding HIV infection among secondary school students in Ekpoma, Edo State, Nigeria; in comparison with findings from other locations in Nigeria. A pretested structured questionnaire with closed and open-ended questions focusing on socio-demographic characteristics; knowledge on HIV/AIDS; and attitude and risky practices was used for data collection, while descriptive statistical tools were used for data analysis. The results obtained showed indicators signifying clearly that HIV/AIDS awareness among the students, were comparatively high and there was an overwhelming support for early sex education. The results revealed also that the main risky behavior amongst the study population was unprotected sex; suggesting that active sexual relationships among young secondary school students is a phenomenon that can no longer be considered as 'mere speculation'. Thus, concerted efforts must be made towards checking the severe 'socio-cultural erosion' ravaging our value and thought systems; considering its negative impact on HIV/AIDS prevention.

Key Words: HIV/AIDS, Secondary students, Risky practices, Ekpoma,

Received: 5<sup>th</sup> June, 2015

Accepted: 20<sup>th</sup> July, 2015

Published: 31<sup>st</sup> July, 2015

### INTRODUCTION

Adolescent's tendency to engage in high risk sexual and drug-use behaviours including poor health-seeking behaviours, have been identified as the major factors accounting for the highest number of new cases of HIV infections in Africa (Diala *et al.*, 2011; Fernadez *et al.*, 2008; John *et al.*, 2014). Available literature show that such risky sexual behaviours includes sex with multiple partners; high sex-partner turnover, sex with high risk groups like commercial sex workers; unprotected casual sex; and early sex initiation among others (Meekers *et al.*, 2001; Rahnama *et al.*, 2010; Gitonga *et al.*, 2012). More so, the declining age of first sexual debut; the increasing number of sexually active adolescents and the consequent longer period of time during which they are sexually matured and sexually active before marriage also poses serious concerns (Djamba, 2004).

In Nigeria, youths are most vulnerable to HIV infection (UNAIDS, 2000; Okpani and Okpani, 2000; Demilson, 2008). Some of the determinants include communication gap between parents and children on sexuality; the high level of illicit sexual activities/youth prostitution; and poverty or harsh economic realities (Obinna, 2005, Uzokwe, 2008). Other socio-demographic indices particularly gender, location, and age, have also been correlated with sexual behaviours (Gebregiorgis, 2000).

Although adolescents are naturally open to the normal sex drive, this drive is currently being incensed by the impact of permissive Western culture transmitted through the sexual stimuli conveyed by the mass media (Deczrlo, 2009). Others have opined that the use of pornographic materials as well as knowledge and use of contraceptives, especially condom that has been excessively advertised, have

also contributed immensely to the involvement of adolescents in sexual practices (Omotsho, 2004).

To this effect, several studies have been conducted to assess the knowledge, attitude and risky practices/behaviours regarding HIV infection among secondary school students at several locations in Nigeria including Uvwie in Delta State, Nigeria (Tobin and Okojie, 2010); Cross River and Kogi States of Nigeria (Diala *et al.*, 2011); Ilorin in Kwara State; Nigeria (Fawole *et al.*, 2011); Abuja Capital Territory, Nigeria (Makwe and Ahmad, 2014); and Ibadan, Oyo State, Nigeria (Famutimi and Oyetunde, 2014) and Jos, Plateau State, Nigeria (John *et al.*, 2014).

This study therefore, assesses the knowledge, attitude and risky practices regarding HIV infection among secondary school students in Ekpoma, Edo State, Nigeria; in comparison with findings from other locations in Nigeria.

## MATERIALS AND METHODS

**Study area:** Ambrose Alli University Secondary School is the Secondary School managed by the Edo State owned higher institution –the Ambrose Alli University located in Ekpoma. Geographically, Ekpoma occupies a land mass of 483.29km<sup>2</sup> and located on latitude 6<sup>o</sup> 44N and longitude 6<sup>o</sup> 22E. It serves as the administrative headquarters of Esan West Local Government Area of Edo State, and bounded on the South by Orhionmwon Local Government Area and on the North by Owan West Local Government Area. Politically, Ekpoma is subdivided into 10 electoral wards with a population of 190,000 people.

**Sampling Technique/Study population:** The multistage sampling technique was adopted and a total of 250 Secondary School boys and girls spread across the Junior and Senior secondary school levels (JSS and SSS respectively), participated in this study.

**Inclusion criteria:** Only willing students within the selected classes (JSS 1-3 and SSS 1 – 3) and were available at the time of data collection were sampled for this study.

**Exclusion criteria:** Uncooperative students as well as those who were not available during the time of data collection were excluded for this study.

**Study design/Ethical Consideration:** This descriptive cross sectional study was approved by the Department of Community Medicine, Ambrose Alli University, Ekpoma, Edo State, Nigeria. Informed consent was also sort for and obtained from the authorities at the Ambrose Alli University Secondary School, Ekpoma. The purpose of the research was clearly explained to them while reassuring them that all the information obtained in the course of the experiment would be strictly kept confidential and shall be used for academic purposes only.

**Data collection:** A researcher administered structured English language questionnaire was used for data collection. The pretested questionnaire comprised closed and open-ended questions focusing on socio-demographic characteristics; knowledge on HIV/AIDS; and attitude and risky practices.

**Data Analysis:** Descriptive statistical tools were employed for data analysis.

## RESULTS

On the knowledge of the respondents on HIV/AIDS disease (see table 1), the results showed that 212 (84.4%) of the respondents were aware that HIV/AIDS is not a disease peculiar to blacks as against those who believes otherwise (31; 12.4%). It was also observed that 241(96.4%) of respondents were quite knowledgeable about the vulnerability of young ones to the disease. Fortunately, 154(61.6%) respondents understood clearly that HIV negatively affects immune system with 209(83.6%) supporting the assertion that educating the young prior to onset of sexual activities is very important.

Table 2 below however, shows that most of the respondents believe that HIV/AIDS can be transmitted through sharing needles and syringes (229; 91.6%); sweat (184; 73.6%); mosquito bites (120; 48%); faeces and urine (142; 56.8%); and unprotected sexual intercourse 244(97.6%).

**TABLE 1: KNOWLEDGE OF RESPONDENT ON HIV/AIDS DISEASE (N=250)**

KNOWLEDGE VARIABLES	TURE n (%)	FALSE n (%)	DON'T KNOW n (%)
Hiv/aids,adisease of only black	31(12.4)	212(84.8)	7(0.8)
Young childrenare not prone to HIV	7(2.8)	241(96.4)	2(0.8)
HIV stands for human immunodeficiency virus	203 (81.2)	3(1.2)	44(17.6)
HIV streghtens the immune system	84(33.6)	154(61.6)	12(4.8)
Education the young indulging in sexual activity is necessary	209(83.6)	35(14.0)	6(2.4)

\*n = number; % = Percentage

**TABLE 2: KNOWLWEGE ON MODE OF TRANSMISSION. (N=250).**

TRANSMISSION	TRUE n (%)	FALSE n (%)	DON'T KNOW n (%)
Sharing infected needle and syringe	229(91.6)	19 (7.6)	2 (0.8)
Sweat	184 (73.6)	44 (17.6)	22 (8.8)
Mosquito	120 (48.0)	112 (44.8)	18 (7.2)
Feaces and urine	142 (56.8)	74 (29.6)	34 (13.6)
Unprotected sexual intercourse	244 (97.6)	5 (2.0)	1 (0.4)

\*n = number; % = Percentage

On the attitude of the respondents toward the disease (Table 3), 120(48%) respondents stated that they would be worried by the presence of a student with the disease in their class, while 112 (44.8%) confessed that they would not be comfortable talking to others on how to protect themselves against HIV/AIDS. Majority of the respondents 183(73.2%) respondents agreed strongly that parents should be informed about the presence of students with HIV

infection in the school, but 100 (40%) of them were strongly not in support of the need to test students for the disease before admission into the school. a 194(77.6%) confessed that they are afraid of contracting the disease as 200 (80%) of them hold the view that everyone must be careful in choosing their life partner. It was however suprising to observe that 218(87.2) of the respondents have not had a blood test for HIV/AIDS.

**TABLE 3: ATTITUDE OF RESPONDENTS TOWARD THE DISEASE OCCURRENCE.**

Item	STRONGLY DISAGREE n (%)	DISAGREE n (%)	UNDECIDED n (%)	AGREE n (%)	STRONGLY AGREE n (%)
No need to worried about a student having HIV in my class	120(408.0)	58(23.2)	8(8.2)	27(10.8)	37(13.8)
I will be comfortable talking to others about how to protect against HIV/AIDS.	5(2.0)	112(44.8)	6(2.4)	55(22.0)	72(28.8)
All parents of the students in the class should be notified of the presence of any student with HIV/AIDS in the class	14(5.6)	9(3.6)	5(2.0)	39(15.6)	183(73.2)
There is no need of testing student for HIV/AIDS before entering the school.	79(31.6)	45(18.0)	5(2.0)	21(8.4)	100(40.0)
Am affraid of getting AIDS	30(12.0)	19(7.6)	1(0.4)	6(2.4)	194(77.6)
Due to aware of HIV/AIDS, I will be careful in choosing my partner	5(2.0)	12(4.8)	4(1.6)	29(11.6)	200(80.0)
Had a blood test for HIV/AIDS	218(87.2)	25(10.0)	1(0.4)	5(2.0)	1(0.4)

\*n = number; % = Percentage

On the risky practices that influence the incidence of HIV/AIDS disease (table 5), 222 (8.88%) of the respondents haven't had unprotected sex before, 243 (97.2%) do not have more than one sex partner. 217

(86.8%) did not share needles and sharp objects and 232 (92.8%) did not receive blood transfusion. Comparatively, most of the respondents practiced abstinence (188; 75.2%)

**Table 4: RISKY PRACTICES THAT INFLUENCE THE OCCURRENCE OF HIV/AIDS DISEASE (N=250)**

VARIABLES	NO n (%)	SOMETIME n (%)	ALWAYS n (%)
Had unprotected sex before	222(88.8)	20(8.0)	8(3.2)
Have more than one sex partner	243(97.2)	4(1.6)	3(1.2)
Practice abstinence	20(8.0)	22(16.8)	188(75.2)
Share needle and sharps	217(86.8)	27(10.8)	6(2.4)
Received blood transfusion	232(92.8)	15(6.0)	3(1.2)

\*n = number; % = Percentage

## DISCUSSION

The findings of this study on several indicators signified clearly that HIV/AIDS awareness among the students, were comparatively high (241; 96.4%). Similar observations have been documented in Botswana (Lindsey *et al.*, 2012); Cross River and Kogi States of Nigeria (Diala *et al.*, 2011); and in Abuja, Nigeria (Makwe and Ahmad, 2014).

On the other hand, the overwhelming support for early sex education (209; 83.6%), is one of the high points of this study. In fact, Mushoriwa (2014) had recently opined that there was a need for rigorous campaigns against sexually transmitted infections through the use of drama, peer group discussions and outreach programmes, as it could go a long way in bringing about behavior change among young people.

However, the believe by most of respondents that HIV/AIDS can also be transmitted though mosquito bites suggested that there was a need for definitive and adequate enlightenment programmes on HIV/AIDS as there are on-going debates on mosquitoes being agents for HIV transmission.

Similarly, the professed potential attitude of a good number of the respondents towards a possible HIV infected classmate, suggests also that there was a need to counsel young ones adequately against the stigmatization of HIV patients. This observation was similar to that contained in the report by Tobin and Okojie (2010), whereby the students investigated, unequivocally demanded that infected persons should

not be allowed to stay in their community.

Furthermore, the obvious conflicting opinions about routine HIV tests among the respondents, highlights one of the human challenges militating against effective management and prevention of HIV transmission in populations; that is, 'phobia about knowing ones HIV status.

On risky behaviours, the findings unprotected sexual activity, suggests that the level of involvement amongst the students under study was lower than those recorded at Uvwie (66%) (Tobin and Okojie (2010); Cross River (41%) (Diala *et al.*, 2011); Abuja (48%) (Makwe and Ahmad, 2014); and Jos (63.9%) (John *et al.*, 2014).

Conclusively, the findings of this study are consistent with those reported in similar studies; indicating that sexual activity among young secondary school students is a phenomenon that can no longer be considered as 'mere speculation'. Thus, concerted efforts must be made towards checking the severe 'socio-cultural erosion' ravaging our value and thought systems; considering its negative impact on HIV/AIDS prevention.

## ACKNOWLEDGEMENT

We sincerely acknowledge all those that contributed towards the success of this study.



## REFERENCES

Deczrlo J.E. (2009). Changing Emphases in Sexuality Education In U.S. Public Secondary Schools, 1988-1999. Family Planning Perspectives. September/October 2000; 32(5).

Demison, J. A. (2008). “The HIV testing experience of Adolescents in Ndda Zambia: Do families and friends matter? AIDS case, Vol. 20(1)101 105.

Diala, C., Olujimi, S., Folami, H. and Kale, F. (2011). HIV-Related Knowledge, Attitudes, Behaviors, and Practices of Young People in Cross River State and Kogi State, Nigeria. Washington DC: C-Change

Djamba, Y.K. (2004) Determinants of risky sexual behavior. Sexual behaviour of adolescents in contemporary Sub-Saharan Africa. [Http://www.Mellenpress.com/mellenpress.cfm](http://www.Mellenpress.com/mellenpress.cfm).

Famutimi, E.O. and Oyetunde, M. O. (2014). Risky Sexual Behaviour among Secondary School Adolescents in Ibadan North Local Government Area, Nigeria. *IOSR Journal of Nursing and Health Science*; 3(3): 34-44.

Fawole A. O., Ogunkan D.V. and Adegoke, G.S. (2011). *Global Journal of Human Social Science*; 11(1): 65 – 72.

Fernandez, D.M., Figueroa ,W.I., Gomez, M., Maysonet, J., Olivares, E.R. and Hunter, R.F. (2008). Changes in HIV/AIDS knowledge among early adolescents in Puerto Rico. *Ethnicity and Disease*; 18(2): 146 -150.

Gebregiorgis, Y. *et al.* 2000. Achieving Behaviour Change: An Impact Evaluation of a Community Based Adolescent Reproductive Health Program in Ethiopia. Society of Paediatric Psychology.

Gitonga, M., Sinyard, M. and Gachuri, G. (2012). Alcohol and substance use viz a viz HIV sexual risk behaviours among freshmen students at a kenyan university college; Focus for Interventions. *Journal of Biology, Agriculture and Healthcare*; 2(8): 8-12.

John, C., Okolo, S.N. and Isichei, C. (2014). Sexual risk behavior and HIV infection among adolescents

in secondary schools in Jos, Nigeria. *Niger J. Paed*; 41(2): 86-89.

Lindsey, L. S., Marcus A. B., Seloilwe, E., Nontombi, G., Mpho, M., Hermann, B., Richard, G. M. and Wester, C. W. (2012). HIV-Related knowledge, attitudes, and practice among educated young adults in Botswana. *Journal of AIDS and HIV Research*; 4(6): 159-164.

Makwe, E. and Ahmad, H. A. (2014). Attitude, Sexual Behaviour and Risk Perception to Sexually Transmitted Infections Including HIV/AIDS among Students of University of Abuja, Nigeria. *British Journal of Education, Society & Behavioural Science*; 4(3): 350-361.

Meekers, D., Klein, M. and Foyet, L. (2001). Patterns of HIV risk behaviour and condom use among youth in Yaoundé and Douala, Cameroon. Working Paper, Washington D.C: Population services International. P.46.

Mushoriwa, T. (2014). An Assessment of Sexual Practices among Urban High School Students in Swaziland. *Mediterranean Journal of Social Sciences*; 5(8): 402 – 405.

Obinna, C. (2005) ‘Story that Touches the Heart: Why Prostitution rate is rising’ vanguard (Saturday, December 31, 2005).

Okpani, A.O.U. and Okpani, J.U. (2000). “Sexual activity and contraceptive use among female adolescents- a report from Port-Harcourt, Nigeria”. *African Journal of Reproductive Health*; 7 (2): 40-47.

Omosho B.A (2004) Perception and prevention of HIV/AIDS among undergraduate in IA Nwanzuoka of Bamgbose O.A Moronkola (Eds) contemporary issued and researches on adolescents network for health, Education and welfare of special people U.I Ibadan.

Rahnama, R., Rampal, L., Lye, M. and Rahman, H. (2010). Factors Influencing Students Attitude Toward HIV/AIDS In An Public University, Malaysia. *Global Journal of Health Science*; 3(1).

Tobin, E.A. and Okojie, H.O. (2010). Knowledge, attitude and practices of adolescent secondary School

students in uvwie local government area of Delta State to HIV/AIDS. *Knowledge, Attitude and Practices of Adolescents to HIV/AIDS*; 12(1): 43 -52.

UNAIDS (2000), “World AIDS campaign with children and young people; Facts and Figures”. UNAID Epidemiological fact sheet. Geneva.

Uzokwe, A.O. (2008) “Prostitution in Nigerian University Campuses (part1)” *Nigerian World* (Monday, July, 21, 2008) <http://www.nigeriaworld.com>

#### **AUTHORS CONTRIBUTIONS**

This study was conceptualized by Enahoro, F.O. and with Abah, S.O, supervised it. Okoedion, E. played significant roles in data collection and analysis, while Orjiakor, I.C. joined in the drafting and review of the manuscript.