

# Awareness of Students and Teachers towards AIDS and AIDS Education

Anjan Saikia

**Abstract**—600 schools going adolescents and 100 teachers from 16 schools of Dhemaji and Lakhimpur district of Assam, India were surveyed to assess and compare their awareness regarding AIDS and AIDS Education. An awareness test was administered containing 38 items for adolescents and 40 items for teachers in the test. Observations revealed that the majority of school-going adolescents are poor in their HIV/AIDS and AIDS education awareness. It shows that the school going adolescents of Dhemaji district are better in HIV/AIDS and AIDS education awareness than the school going adolescents of Lakhimpur district while comparing the gender, settlement, steam and district wise variables.

**Keywords**—Awareness, HIV, AIDS, AIDS education.

## I. INTRODUCTION

HIV has rapidly established itself throughout the world over the past three decades. The adolescent cohort is one of the most vulnerable groups as far as risk of HIV/AIDS is concerned. The first case of AIDS was reported in the early 1980s. In 2009, an estimated 33.3 million people (adult and children) are living with HIV/AIDS and 1.8 million people have already lost their lives due to HIV/AIDS across the world. In India, more than 2.4 million people are living with HIV/AIDS. The adult (15–49 years) HIV prevalence is estimated at 0.27% (0.22%–0.33%) in 2011. Adult HIV prevalence among males and females is estimated at 0.32% and 0.22% in 2011 respectively [1].

In 2011, among the states, Manipur has shown the highest estimated adult HIV prevalence of 1.22%, followed by Andhra Pradesh (0.75%), Mizoram (0.74%), Nagaland (0.73%), Karnataka (0.52%), Goa (0.43%) and Maharashtra (0.42%). Besides these states, Odisha, Gujarat, Tamil Nadu and Chandigarh have shown estimated adult HIV prevalence greater than the national prevalence (0.27%), while Chhattisgarh, Jharkhand, Tripura, West Bengal, Uttarakhand, Delhi and Bihar have shown estimated adult HIV prevalence in the range of 0.20 – 0.27%. All other states/UTs have levels of Adult HIV prevalence below 0.20%.

Of the 1.16 lakhs total estimated annual new HIV infections among adults (15+ years) in India in 2011, Andhra Pradesh accounted for the highest number (16,603) of infections, followed by Odisha (12,703), Jharkhand (9,085), Karnataka (9,024), Bihar (7,797), Uttar Pradesh (7,745) and West Bengal (7,289). However, rising trends of new infections are noted in the states of Assam, Arunachal Pradesh, Chandigarh,

Chhattisgarh, Delhi, Jharkhand, Meghalaya, Odisha, Punjab, Tripura and Uttarakhand. This underscores the need for the programme to focus more on these states with low prevalence, but high vulnerability.

Assam too has witnessed a sharp increase in the number of AIDS and HIV positive people in the past few years. Primarily Assam is the gateway to the North-East and more and more people from high prevalence for various reasons. So, it has more vulnerability. As on September, 2013 Assam has detected 8,580 HIV positive cases with a positivity rate of 6.28 per thousand, out of these, 5,916 are full-blown AIDS cases which include 5,229 male, 2,948 female, 396 children and seven transgender patients. Assam has shown a quantum jump in the number HIV/AIDS cases. As per latest figures released by the Assam State AIDS Control Society, the number of HIV positive persons in Assam in 2013 (till September) was 8580, 2011 (till October) was 1,092 while in 2010 it was 1,027 and in 2009 it was 958 [2]. The ASACS data show that 98.13 per cent cases of HIV and AIDS in the state have occurred from unprotected sex, 2.85 per cent from injecting drug users, 1.49 per cent through blood transfusion and three per cent from unspecified sources. The data further added that three per cent of HIV and AIDS cases have been reported in pregnant women. Maximum cases have been detected in Kamrup, Cachar, Golaghat, Nagaon, and Dibrugarh districts. The youngsters' propensity to ignore AIDS awareness programmes indulge in unprotected sex and drug abuse are the major factors responsible for rise in HIV cases in the state. On the HIV scenario in the State, the ASACS official informed that although Assam is categorized as a low HIV prevalence State with an estimated adult HIV prevalence of 0.07 per cent (which is lower than the National Prevalence of 0.27 per cent), the prevalence rate (adult) has increased from 0.04 per cent in 2007 to 0.07 per cent in 2011 [3].

Although the number of HIV infected person in Assam is low compared to Manipur and Nagaland but this increasing trend if unstopped, would create problems similar to other worst affected state of the country. This is why it is necessary to stop the spread of HIV/AIDS before it becomes a generalized epidemic.

## II. REVIEW OF LITERATURE

There are some recent studies have been conducted in India and abroad on knowledge, awareness and attitude towards HIV/AIDS and AIDS Education. These studies were found to be having some relationship with the present study. Ravi & Athimulam [4], Pundhir et al. [5], Barua et al. [6] studied on

Dr. Anjan Saikia is with the Department of Education, Doomsdooma College - 786153, NH 37, Assam, India (Mob. No: 09435739873; e-mail: dranjan.saikia@yahoo.co.in).

awareness, knowledge, attitude, beliefs and misconceptions regarding AIDS and AIDS Education explored that the majority of school-going adolescents are poor in their AIDS and AIDS education awareness. Most of the students are not aware about all modes of transmission and prevention techniques. Soumita et al. [7], Sunil & Arigela[8], Kaur, Singh & Soni [9], Chinte et al. [10], Gupta et al. [11], Hiremath [12] found that majority of the respondents opined that, HIV/AIDS is not curable and the disease cannot be prevented as it is life-threatening. Acquired nature of the disease and causative factors were not known to most of them. However knowledge regarding correct mode of transmission of infection was well known to all. The study exhibited that mass media has succeeded in raising HIV/ AIDS awareness among students. Most of the respondents had an apathetic feeling towards the HIV<sup>+</sup>/AIDS people.

### III. OBJECTIVES OF THE STUDY

1. To study the HIV/AIDS and AIDS education awareness of students and teachers in Dhemaji and Lakhimpur districts of Assam, India

*Hypotheses of the Study:* In the light of the objective the researcher formulated the following hypotheses:

1. There is no significant difference between the AIDS and AIDS education awareness mean scores of students and teachers in Dhemaji and Lakhimpur districts of Assam, India

The above hypothesis has also considered in the light of:

- i) gender (male & female)
- ii) settlement (rural & urban)
- iii) stream (Arts, Science & Commerce)
- iv) district (Dhemaji & Lakhimpur)

### IV. RESEARCH METHODOLOGY

The universe of the study was 600 +2 level students i.e., 300 from Dhemaji district and 300 from Lakhimpur district of Assam and 100 teachers i.e., 50 from Dhemaji district and 50 from Lakhimpur district of Assam by using random sampling technique. In the study, descriptive-cum-normative survey method was adopted for collecting pertinent data for the purpose of the study.

*Statistical Technique Used:* The data were analysed and interpreted by using statistical software SPSS 13.0 version [13].

*Tool Used:* In the present study the investigator used Awareness Test (AT) which was developed by investigator himself.

*Procedure of Data Collection:* The investigator visited the higher secondary schools of Dhemaji and Lakhimpur districts of Assam for collection of the relevant data. Firstly, the investigator imparted all the instruction to the students relating to AIDS and AIDS education awareness test. The procedure of attempting each section of test was explained by the investigator with some example and the students were asked to attempt this test within a period of one hour as is found sufficient for the students to complete this test within the

stipulated duration. In this way, the investigator visited 16 numbers of higher secondary schools for collecting the required data from a sample of 600 school students of higher secondary schools of Assam. Same procedure was applied for the teachers also.

*Scoring Procedures:* The investigator developed the scoring keys for AIDS and AIDS Education Awareness test of teachers and students. By making use of those scoring keys, the scoring work was done with the weightage of 1, 1, 1 and 2 points to multiple choice, true/false, completion and short answer type items respectively.

### V. RESULTS AND DISCUSSION

The present study emphasized on the AIDS and AIDS education awareness of students and secondary school teachers towards AIDS education in two districts of Assam, India. Therefore, the investigator thought to analyze the AIDS education awareness scores in view of students and secondary school teachers in Dhemaji and Lakhimpur districts by making use of *t* – test and ANOVA test.

#### *Awareness of Students towards HIV/AIDS and AIDS Education*

TABLE I  
SUMMARY OF AIDS AND AIDS EDUCATION AWARENESS MEAN SCORES, SD AND *T* – VALUE OF MALE AND FEMALE STUDENTS

Groups	N	Mean	SD	<i>t</i> – value	Sig.
Males	300	15.69	6.39	.066	.948
Females	300	15.65	5.20		

Table I reveals that the computed *t* – value (.066) is not significant which is lesser than the criterion *t* – value (1.96) at 0.05 level of confidence for 598 *df*. Therefore, the formulated null hypothesis, there is no significant difference between the AIDS and AIDS education awareness mean scores of school going male and female students of Dhemaji and Lakhimpur districts of Assam gets retained. From this, it is interpreted that the male and female school going students do not differ in their AIDS and AIDS education awareness.

TABLE II  
SUMMARY OF AIDS AND AIDS EDUCATION AWARENESS MEAN SCORES, SD AND *T* – VALUE OF RURAL AND URBAN STUDENTS

Groups	N	Mean	SD	<i>t</i> – value	Sig.
Rural	300	15.89	6.28	.857	.392
Urban	300	15.47	5.24		

Table II indicates the computed *t* – value was found 0.857 which is lesser than the criterion *t* – value (1.96) at .05 level of confidence for 598 *df*. and it is not significant. Therefore, the null hypothesis – there is no significant difference between the mean scores of AIDS and AIDS education awareness of school going rural and urban students gets accepted. The computed results show that the schools going rural and urban students of Dhemaji and Lakhimpur districts do not differ in their AIDS education awareness.

TABLE III  
SUMMARY OF HIV/AIDS AND AIDS EDUCATION AWARENESS MEAN AND STANDARD DEVIATION SCORES AMONG ARTS, SCIENCE AND COMMERCE STUDENTS

Groups	N	Mean	SD
Arts	333	15.08	5.33
Commerce	135	16.34	6.41
Science	132	16.50	6.10

Table III presents the Mean and Standard Deviation. It is observed from Table III that the Mean scores of arts, commerce and science students were 15.08 (SD 5.33), 16.34 (6.41) and 16.50 (6.10). The awareness levels of science students were highest which was followed by commerce and arts students.

TABLE IV  
SUMMARY OF ANOVA OF THE MEAN SCORES AMONG ARTS, SCIENCE AND COMMERCE STUDENTS

Source	Sum of Square	df	Mean Square	F	Sig.
Between groups	265.820	2	132.910	4.0	.019
Within groups	19749.699	596	33.137	11	
Total	20015.519	598			

From Table IV it is noticed that the mean awareness of science students are higher than other two groups i.e. Arts and Commerce. The Arts and Commerce students had low awareness level towards AIDS Education. This could be due to the different course curriculum introducing in the school for different faculties. The significant difference among the Means was also tested by formulating the above hypothesis. Table IV reveals that F – value 4.011 is significant at 0.05 level the hypothesis is rejected. The rejection of the hypothesis prompts the researcher to conclude that there is significant difference among groups, i.e. the three groups vary in respect of awareness Mean scores. The higher mean value of science students indicates that they possess more aware towards HIV/AIDS and AIDS education.

TABLE V  
SUMMARY OF AIDS AND AIDS EDUCATION AWARENESS MEAN SCORES, SD AND T – VALUE OF SCHOOL GOING STUDENTS OF DHEMAJI AND LAKHIMPUR DISTRICTS OF ASSAM, INDIA

Groups	N	Mean	SD	t – value	Sig.
Dhemaji	300	16.15	6.25	2.03	.043
Lakhimpur	300	15.19	5.25		

Table V reveals that the computed *t – value* was found 2.03 which was greater than the criterion *t – value* (1.96) at 0.05 level of confidence for 598 *df.*, and it is significant. Therefore, the null hypothesis 'there is no significant difference between the mean scores of AIDS and AIDS education awareness of secondary school students of Dhemaji and Lakhimpur districts' gets rejected. The computed results show that the secondary school students of Dhemaji and Lakhimpur districts differ significantly in their AIDS education awareness. Further, it has been noticed that the secondary school students of Dhemaji district of Assam are

better in their AIDS and AIDS education awareness than secondary school students of Lakhimpur district.

#### Awareness of Teachers towards HIV/AIDS and AIDS Education:

TABLE VI  
SUMMARY OF AIDS AND AIDS EDUCATION AWARENESS MEAN SCORES, SD AND T – VALUE OF TEACHERS OF DHEMAJI AND LAKHIMPUR DISTRICTS

Groups	N	Mean	SD	t – value	Sig.
Male	50	23.60	11.00	3.58	.001
Female	50	16.98	7.00		

The computed *t – value* came out to be 3.58 which is greater than the criterion *t – value* (2.01) so, the computed *t – value* (3.58) is significant at 0.05 level of confidence for 98 *df.* It means there is significant difference in AIDS and AIDS education awareness mean score between male and female secondary school teachers of Dhemaji and Lakhimpur districts of Assam. Further, it has been observed that the AIDS and AIDS education awareness mean score of male teachers is greater than the female school teachers of both the districts. It shows that the male secondary school teachers are better in AIDS and AIDS education awareness than the female secondary school teachers.

TABLE VII  
SUMMARY OF AIDS AND AIDS EDUCATION AWARENESS MEAN SCORES, SD AND T – VALUE OF SCHOOL TEACHERS OF DHEMAJI AND LAKHIMPUR DISTRICTS

Groups	N	Mean	SD	t – value	Sig.
Rural	50	17.56	8.84	2.89	.005
Urban	50	23.02	9.95		

Table VII shows that the computed *t – value* (2.89) is significant as the computed *t – value* (2.89) is greater than the criterion *t – value* (2.01) at 0.05 level of confidence for 98 *df.* it means the formulated hypothesis – there is no significant difference between the AIDS and AIDS education awareness mean score of rural and urban teachers gets rejected. From this, it is interpreted that the urban and rural teachers do differ in their AIDS and AIDS education awareness. Further, it has been noticed that the urban teachers are better than the rural teachers in view of their AIDS and AIDS education awareness as the AIDS and AIDS education awareness mean score (23.02) is greater than the mean score (17.56) of rural teachers.

TABLE VIII  
SUMMARY OF HIV/AIDS AND AIDS EDUCATION AWARENESS MEAN AND STANDARD DEVIATION SCORES AMONG ARTS, COMMERCE AND SCIENCE TEACHERS

Groups	N	Mean	SD
Arts	35	19.74	10.26
Commerce	35	19.40	11.00
Science	30	21.97	7.47

Table VIII presents the Mean and Standard Deviation. It is observed from the Table VIII that the Mean scores of science, arts and commerce teachers were 21.97 (SD 7.47), 19.74 (10.26) and 19.40 (11.00). The awareness levels of Science

teachers were highest which was followed by arts and commerce teachers.

TABLE IX  
SUMMARY OF ANOVA OF THE MEAN SCORES AMONG ARTS, COMMERCE AND SCIENCE TEACHERS OF DHEMAJI AND LAKHIMPUR DISTRICTS

Source	Sum of Square	df	Mean Square	F	Sig.
Between groups	122.538	2	61.269	.638	.530
Within groups	9312.052	97	96.001		
Total	9434.590	99			

Table IX it is noticed that the mean awareness of Science teachers is higher than other two groups i.e. Arts and Commerce. The Arts and Commerce teachers had low awareness level towards AIDS Education. The significant difference among the Means was also tested by formulating the above hypothesis. Table IX reveals that F – value .638 is not significant at 0.05 level the hypothesis is accepted. The acceptance of the hypothesis prompts the researcher to conclude that there is no significant difference among groups, i.e. the three groups do not vary in respect of awareness Mean scores. They possess almost equal amount of awareness towards AIDS and AIDS education.

TABLE X  
SUMMARY OF AIDS AND AIDS EDUCATION AWARENESS MEAN SCORES, SD AND T – VALUE OF SCHOOL TEACHERS

Groups	N	Mean	SD	t – value	Sig.
Dhemaji	50	14.84	4.86	6.71	.000
Lakhimpur	50	25.74	10.41		

Table X indicates that the computed  $t$  – value was found 6.71 which is greater than the criterion  $t$  – value (1.98) at .05 level of confidence for 98  $df$ ., and it is significant. Therefore, the formulated null hypothesis, there is no significant difference between the AIDS and AIDS education awareness mean scores of school teachers of Dhemaji and Lakhimpur Districts of Assam gets rejected. It means that the teachers of those two districts of Assam do differ in their AIDS and AIDS education awareness.

## VI. CONCLUSION

In India, the first case of HIV infection was detected in Chennai in 1986; since then, the number of HIV-positive cases has been increasing by leaps and bounds. In today's fast changing world, traditional values and norms are breaking down; young people are experimenting with different lifestyles. The number of HIV-positive cases has been increasing alarmingly in spite of various awareness programmes, rehabilitation programmes and control measures through various means like media. Even though schools and colleges are asked to create awareness about HIV/AIDS the message has not reached the students in effective way. Schools and colleges need to play a significant role in imparting accurate knowledge to students, and also assist them in developing skills to act on their knowledge and communicate it to others [14].

## VII. EDUCATIONAL IMPLICATIONS

The present study is very significant in the context of Assam because such study has not been conducted by any of the researcher in Assam. Secondly, the study will make it clear that how much awareness and attitude towards HIV/AIDS and AIDS education, adolescents passes here in Assam [15]. The study provides feedback to take up the measures for helping the adolescents in avoiding such kind of fatal disease in the state. Further, the new approaches of generating more awareness and proper attitude among the adolescents may also be thought by including AIDS education in the secondary and senior secondary school curriculum of Assam [16].

## VIII. SCOPE FOR FUTURE RESEARCH

By completing this piece of research work, the investigator got enough new experience and ideas on account of which he feels like to put some suggestions for further studies and those are put as under:

The present study covered the +2 level students and teachers relating to their AIDS and AIDS education awareness in two districts i.e., Dhemaji and Lakhimpur of Assam. But, such study is possible to be conducted by selecting some other districts of Assam, India.

The study in hand involved only gender, locality and stream variables. Further, the other researcher may take up the study by involving other variables like intelligence, socio-economic status, management, category, education, race, personality traits, creativity, academic achievement etc.

This is study which was conducted on the school going students and secondary school teachers, but, further new study may be conducted on AIDS education awareness and attitude of community members.

HIV/AIDS awareness can be taken up as a project by teachers.

Further, the study is possible to be conducted on the curriculum development and curriculum transaction of AIDS education.

As the AIDS education needs to be introduced at different stages of educational institutions of Assam, India.

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