



KNOWLEDGE, ATTITUDE AND OPINIONS OF SCHOOL TEACHERS REGARDING HIV/AIDS AND SCHOOL BASED HIV/AIDS EDUCATION

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ABSTRACT

In the absence of vaccine against HIV/AIDS, prevention depends only on health education and behavioural changes. Teachers can play an important role in educating and informing young people about HIV/AIDS. Training of teachers is thus vital and for this it is important to assess the needs of teacher. Hence this study was carried out to assess knowledge, attitudes and opinions of school teachers regarding HIV/AIDS. Study design: Cross-sectional study. Study subjects & Setting: Teachers of three randomly selected schools of Nagpur City.

Results: The awareness of teachers about HIV/AIDS was relatively good, but there were certain areas of misconceptions. Majority (85.5%) opined that they could play an important role in educating the students regarding HIV/AIDS, and were willing to undergo a training for the same. The results suggest that after a proper in-service training teachers can be effectively utilized for educating the students.

KEYWORDS : HIV/AIDS, school teachers, awareness, opinions

Introduction: The relentless spread of HIV/AIDS in the past few years has dramatically underscored its multidimensional socioeconomic and health impact. In the absence of a vaccine against HIV/AIDS, prevention depends only on health education and behavioural changes, particularly among young people who are prone to risky behaviour. Information, values and skills inculcated in schools can have a considerable impact on the lives of such people. Schools thus have an important role in informing and educating young people about HIV/AIDS. However for this, it is necessary that the teachers have sufficient knowledge about HIV/AIDS as only well trained and well equipped teachers can make significant impact on the knowledge, skills and attitude of students.^{2,3} Teachers can play a key role by acting as role models, sources of accurate information, mentors, and effective instructors.^{4,5} The training of teachers on various aspects of HIV/AIDS is thus vital. For this needs of the teachers should be assessed and appropriate training programmes designed accordingly.

Hence the present study was carried out to assess the knowledge, attitudes and opinions of school teachers regarding HIV/AIDS and school based HIV/AIDS education.

Material and methods: This cross sectional study was carried out to assess the knowledge, attitudes and opinions of school teachers regarding HIV/AIDS and school based HIV/AIDS education. A list of all secondary schools in Nagpur City was obtained from Education Department, Zilla Parishad, Nagpur. 228 school teachers from three randomly selected schools from this list constituted the study subjects. Permission was obtained from management and heads of the school after apprising them of the purpose of study. The teachers were given a self-administered predesigned and pretested questionnaire which consisted of mostly close ended questions on knowledge, attitudes and beliefs about HIV/AIDS (e.g. routes of transmission, high risk groups, preventive measures etc.) and opinions regarding school based HIV/AIDS education.

All the 228 subjects returned the questionnaire resulting in hundred percent response.

Results: All the 228 study subjects, 152(66.7%) females and 76(33.3%) males were in the age group of 25-44 years, the mean age being 33.5±5.2. Television (67.1%), radio(50.4%), newspaper (47.8%)

and magazines(24.6%) were the common sources of information. Although 207(90.7%) were aware that HIV/AIDS is a life threatening disease and anyone can get HIV/AIDS 150(65.8%), the knowledge of teachers regarding the aetiology was relatively poor. Only 56.1% of subjects were aware about the viral etiology. Around 30% were unaware of the aetiology and the rest implicated bacteria, arthropods and other factors in the etiology.

Awareness of teachers regarding modes of transmission, high risk groups and preventive measures of HIV/AIDS is seen in Table I. Majority of teachers were aware of established modes of transmission - sexual contact(81.1%), infected mother to baby(78.1%) and infected blood and blood products(75.9%). However, myths and misconceptions persisted. Although many of them correctly accepted that commercial sex workers, sexually promiscuous people, men having sex with men and IV drug users are high risk groups, about 18% teachers wrongly believed that HIV/AIDS can be caused by donating blood. HIV/AIDS can be prevented was known to 86% of subjects. A large majority (78.1%) knew that HIV/AIDS can be prevented by using condoms, however 24.6% had a misconception that vaccine can prevent HIV/AIDS.

Table I: Awareness regarding modes of transmission, high risk groups and preventive measures

Statement	Affirmative response (n=228)	
	No.	%
Modes of transmission		
Sexual route	185	81.1
Pregnant mother to baby	178	78.1
Infected blood and blood products	173	75.9
Kissing/hugging someone with HIV/AIDS	173	75.9
Shaking hand with HIV positive person	142	62.3
Sharing injection needles	108	45.2
Snorting drugs	102	44.7
Contaminated foods and drinks	71	31.1
Sharing, eating and drinking utensils	65	28.5

Sharing toothbrushes/razor	63	27.6
Mosquito bites	57	25.0
Sharing toilet seats	54	23.7
High risk groups		
Commercial sex workers	192	85.1
Sexually promiscuous	166	72.8
People who receive blood	154	67.5
IV drug abusers	139	61.0
Men having sex with men	99	43.4
People who donate blood	42	18.4
Preventive Measures		
Using condoms	178	78.1
Having one faithful partner	124	54.4
Using disposable needles/Syringes	97	42.5
Abstinence	83	36.4
Using contraceptive pills	61	26.8
Vaccine against HIV/AIDS	56	24.6

In response to an item on self-perception of HIV/AIDS risk 158(69.3%) indicated that they believed themselves to be at no risk. Others indicated that their perceived risk for contracting HIV/AIDS was very high 5(2.2%), moderate 8(3.5%) or low 44(19.3%). However 13(5.7%) did not respond.

Attitude of teachers towards HIV/AIDS is seen in Table II and it was observed that the attitude was more or less positive. 69.7% were of the opinion that students with HIV/AIDS should be allowed to attend school and 71.4% felt that HIV positive teachers should be allowed to continue service. Teachers' opinion regarding HIV/AIDS education was enquired into and 149(65.4%) rightly accepted that responsibility of HIV/AIDS education lies with the teachers. However, sufficient numbers also felt that parents 123(54%), doctors 78(34.2%) and elder siblings 61(26.8%) too can play a key role in propagating HIV/AIDS education. Only 39(17.1%) had ever discussed HIV/AIDS with students. A total number of 195(85.5%) and 178(78.1%) respectively expressed their willingness to educate students about HIV/AIDS and to undergo a training for the same.

Table II: Attitude of teachers towards HIV/AIDS and patients with HIV/AIDS

Attitude towards HIV/AIDS	Affirmative response (n=228)	
	No.	%
HIV/AIDS is God's way of punishing people for their evil deeds.	27	11.8
HIV/AIDS education should be included in school curriculum.	197	86.4
Teachers should be trained for imparting HIV/AIDS education	183	80.3
Students with HIV/AIDS should be allowed to attend school.	159	69.7
HIV positive teacher should be allowed to continue services.	163	71.4
Little emphasis on HIV/AIDS education in school curriculum	190	83.3

Majority 138(60.5%) were in the favour of initiating HIV/AIDS education from IX onwards. Only few were in the favour of including younger students of classes V to VI 28(12.3%) and of classes VII – VIII 62(27.2%)

Discussion: In view of the fact that adolescents have been identified as potential risk group for HIV/AIDS, AIDS education for them should be considered a priority.⁴ A large number of young people throughout the world attend school or are in contact with those who do.⁶ However, the introduction of HIV/AIDS education in school has been a debatable issue because HIV/AIDS education being intimately related to sex education is a sensitive subject.^{7,8} Thus before introducing HIV/AIDS education in the schools, it is essential to explore and understand the perception of Indian society in general and teachers in particular. With this background and fortified by the fact that very few studies assessing awareness among Indian school teachers have been reported, we made an attempt to explore awareness regarding HIV/AIDS in school teachers and to assess their views regarding school based HIV/AIDS education.

School teachers in this study had a fairly good knowledge about HIV/AIDS as compared to other studies.^{9,10} Similar to the findings of others, the common sources of information were television, radio, newspaper and magazines.^{10,11} Only 56.1% of subjects were aware about the viral etiology in our study, however Choudhary SR et al reported this figure to be 16(13.3%).⁹ Fairly better knowledge about the viral aetiology(83.3%) was reported by Bankole et al.¹¹ In the present study 81.6% recognized that donating blood carries no risk of being infected with HIV, while in another study, it was noted to be 67.3%.¹¹ High risk groups were known to a substantial number and these findings are comparable with that of other study.¹¹

Most common preventive measure known was use of condom(78%) followed by having a single faithful partner(54%). Similar findings were noted by others.^{4,9}

Various misconceptions regarding etiology, modes of transmission and preventive measures prevailed. Earlier studies also reported similar kind of misconceptions.^{4,5} This makes additional education about scientifically validated facts imperative.

17.1% teachers had ever discussed HIV/AIDS with students which is similar to the finding of Bankole et al(16.5%).¹¹

The results of this study revealed that teachers had a fairly positive attitude towards HIV/AIDS however some bias against persons with HIV/AIDS persisted. Educational and training programmes are therefore recommended, that will help in inculcating more positive attitude and eliminating bias towards HIV/AIDS and persons with HIV/AIDS. Majority of teachers agreed that they can play an important role in educating the students and, therefore, they should be trained in various aspects of HIV/AIDS.

The decision on where to place HIV/AIDS education in the curriculum is an important one as the context chosen will provide the framework for further decisions. Majority of the teachers were in the favour of including students of IX standard or above for HIV/AIDS education.

In conclusion, it may be said that though the awareness status of school teachers about AIDS was relatively good, there were a number of misconceptions which might be causing unnecessary fear, apprehension, and biased opinion.

As majority of the teachers recognized the need and were also willing to perform their role, it is suggested that separate orientation programme for school teachers be developed, so that their potential role in school based HIV/AIDS education can be exploited to the maximum. Proper curriculum designing is likely to have more desirable impact on school children's knowledge and behavior.

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