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The views of university students regarding HIV/AIDS

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Abstract

Students studying at Hacı Bektaşî Veli University Faculty of Economics and Administrative Sciences, Muğla Sıtkı Koçman University Faculty of Economics and Administrative Sciences, Faculty of Engineering, Dokuz Eylül University Faculty of Economics and Administrative Sciences, Faculty of Engineering, Inonu University Faculty of Fine Arts in Spring 2014-2015 academic year. There were 114 female students and 143 male students who participated in the study. In this study, University Students' Views Regarding HIV/AIDS. HIV/AIDS Form were developed by the researcher in order to determine the views of university students. The study is a descriptive type of study. These forms consisted of 12 open ended questions related to the students' views about HIV/AIDS. The answers given to the 12 open ended questions in the form were combined and gathered under common headers. The frequencies and percentages will be calculated later on.

Keywords: University students, HIV/AIDS, student views.

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1. Introduction

First defined in 1981, acquired immune deficiency syndrome (AIDS), is currently one of the most important infections in the world. The most effective method to control the rate of infection of this virus is to control its transmission (Ozkaya-Sahin, Calik-Basaran & Unal, 2005). HIV/AIDS threatens not only adults but all age groups including infants, children, adolescents and the elderly, without regard for race, gender, country or age. There is currently no cure or vaccine for HIV/AIDS. Medications used in its treatment have many side effects, are complex to use and expensive, but also very effective in preventing deaths due to this disease. As a result, HIV/AIDS has become a chronic illness requiring lifelong medication (Tumer, 2005). According to data published in December 2010 by the World Health Organization (WHO) and UNAIDS, 97% of all HIV/AIDS cases are seen in low and middle income countries, about 51% of the infected are women, and 41% are young (15 to 24 years old) (Tumer, 2006). Over two million children younger than 15 are infected with HIV (Altiparmak, 2008). On another note, prejudices and labels concerning HIV/AIDS lead people to risky behavior, prevent the reporting of the disease, and thus social phobia increases the rate of infection (Oran & Senuzun, 2008). People with HIV/AIDS also face labeling and discrimination in the workplace. Gainful employment is a major source of the income required for biological and social reproduction, and when people are effectively barred from accessing gainful employment through labeling and discrimination, it creates additional health problems for people who are already living with a chronic condition - HIV/AIDS (Zorlu & Calim, 2012).

In a study on levels of knowledge about HIV/AIDS among women aged 15 to 49, conducted by Alparslan, Doganer, and Kizkapan (2005), 51.1% of respondents chose monogamy as a method of protection against HIV/AIDS. Of the participants, 44.9% knew there was no vaccine, and 56.8% knew there was no cure. In the study 95.2% of the participants said HIV/AIDS could be transmitted via sexual intercourse, and 73% said that HIV could not be transmitted via hand shaking, hugging, or kissing on the cheek. The study reported that 56.3% of the participants said they would work with HIV positive individuals in the same workplace, 75% said HIV positive individuals should not face social exclusion, and 55.4% said they would touch and hug their HIV positive friends. With regard to women, 75.8% of those who participated in the study said they would attend a course on HIV/AIDS, 74.7% learned about HIV/AIDS via radio and television, and 60.2% described it as a bad, terminal illness with no cure. HIV/AIDS is a disease with repercussions for the larger society, particularly social structures, social psychology and the economy. In this light, this study aims to identify the opinions of university students regarding HIV/AIDS.

2. Method

The studies aiming to define a situation, which already exists or existed in the past, are studies designed according to scanning model (Karasar, 2003). In this study, an existing situation was analysed since the study aims to determine the views of university students on HIV/AIDS. Therefore, this study is a patterned research designed according to scanning model.

2.1. Participants

In this study, it is aimed to determine the views of university students regarding HIV/AIDS. The study group consisted of 257 1th-4th year students studying at Hacı Bektasi Veli University Faculty of Economics and Administrative Sciences, Mugla Sıtkı Koçman University Faculty of Economics and Administrative Sciences, Faculty of Engineering, Dokuz Eylul University Faculty of Economics and Administrative Sciences, Faculty of Engineering, Inonu University Faculty of Fine Arts in Spring 2014-2015 academic year. The number of female students participating in the study was 114 (44.36%) and the number of male students participating in the study was 143 (55.64%).

2.2. Research Instrument

“University Students’ Views Regarding HIV/AIDS” was developed in order to determine the views of university students HIV/AIDS. These forms consist of ten open ended questions to determine their views about guilty.

2.3. The Analysis of the Data

The answers given to the ten open ended questions in the form were combined and gathered under common headings. Frequencies and percentages calculated.

3. Results

3.1. Results Regarding University Students’ Perception of HIV/AIDS

In this section, you can see the frequency and percentage distributions according to the answers given to the items in the “University Students’ Views Regarding HIV/AIDS”.

Table 1. Distribution of Frequencies and Percentages of Student Opinions Regarding Causes of Loss of Life of HIV/AIDS Patients

Opinions	n	%
Stigma	101	39.30
Fear	72	28.02
Increase in medical care costs	34	13.23
Job loss	18	7.00
Self-accusation	17	6.61
The lack of coping skills of family	15	5.84

As seen in Table 1, 39% of the students mentioned “stigma” as the most important personal characteristics, whereas 6% of the students mentioned “the lack of coping skills of family” as the least important characteristics.

Table 2. Distribution of Frequencies and Percentages of Student Opinions Regarding The Spread of

Opinions	n	%
Sexually	151	58.75
Through blood	30	11.67
In the mother's womb	29	11.28
Saliva	25	9.73
Through breast milk	14	5.45
Tears	8	3.12

HIV/AIDS Infection

As seen in Table 2, 59% of the students mentioned “sexually” as the most important personal characteristics, whereas 3% of the students mentioned “tears” as the least important characteristics.

Table 3. Distribution of Frequencies and Percentages of Student Opinions Regarding HIV/AIDS’ Persons are the behaviors of people on Working Environment

Opinions	n	%
Stigma and discrimination of people exposed to workplace behavior	106	41.25
Behavior towards business cessation	72	28.02
Individuals forced to work in a different field from the fields where they received their education or specialized	54	21.01
Inhibition of the people the right to work	25	9.72

As seen in Table 3, 41% of the students mentioned “stigma and discrimination of people exposed to workplace behavior” as the most important personal characteristics, whereas 10% of the students mentioned “inhibition of the people the right to work” as the least important characteristics.

Table 4. Distribution of Frequencies and Percentages of Student Opinions Regarding Socioeconomic Status Impact on HIV / AIDS’ Persons

Opinions	n	%
Socioeconomic status is a short time, a deadly disease for people who are not good.	74	28.79
Socioeconomic status of people who are better able to maintain their normal life.	54	21.01
Socioeconomic status indicates faster healing well, people with the disease.	50	19.46
Socioeconomic status of people who are not good are struggling to meet the medical expenses.	48	18.68
Socioeconomic status is more informed about the course of the disease, people with good.	31	12.06

As seen in Table 4, 29% of the students mentioned “socioeconomic status is a short time, a deadly disease for people who are not good” as the most important personal characteristics, whereas 12% of the students mentioned “socioeconomic status is more informed about the course of the disease, people with good” as the least important characteristics.

Table 5. Distribution of Frequencies and Percentages of Student Opinions Regarding AIDS Symptoms

Opinions	n	%
Chronic fatigue	69	26.85
Weight loss	51	19.84
Fire	37	14.40
Serious skin problems consecutive	36	14.01
Amnesia	15	5.84
Diarrhea	14	5.45
Cold Sores	10	3.89
Oral infections	9	3.50
Continuous cough	9	3.50
Swelling of lymph nodes	7	2.72

As seen in Table 5, 27% of the students mentioned “chronic fatigue” as the most important personal characteristics, whereas 3% of the students mentioned “swelling of lymph nodes” as the least important characteristics.

Table 6. Distribution of Frequencies and Percentages of Student Opinions Regarding Protection from AIDS

Opinions	n	%
Should not be used to indisinfect untreated medical supplies.	105	40.86
AIDS blood transfusion should not be the person with the virus.	79	30.74
AIDS is known to be the mother must not have children.	73	28.40

As seen in Table 6, 41% of the students mentioned “should not be used to indisinfect untreated medical supplies” as the most important personal characteristics, whereas 28% of the students mentioned “AIDS is known to be the mother must not have children” as the least important characteristics.

Table 7. Distribution of Frequencies and Percentages of Student Opinions Regarding HIV/AIDS Related Risk Groups

Opinions	n	%
Those with poor working and living conditions	109	42.41
Youth	100	38.91
Lonely people	48	18.68

As seen in Table 7, 42% of the students mentioned “those with poor working and living conditions” as the most important personal characteristics, whereas 19% of the students mentioned “lonely people” as the least important characteristics.

Table 8. Distribution of Frequencies and Percentages of Student Opinions Regarding HIV / AIDS’ Risk Persons Related Characteristics

Opinions	n	%
Rich, lonely people	126	49.03
Rich, business people who need to constantly travel	92	35.80
Rich, people with a permanent business	14	5.45
Middle class people	13	5.05
Rich, married people	12	4.67

As seen in Table 8, 49% of the students mentioned “rich, lonely people” as the most important personal characteristics, whereas 5% of the students mentioned “rich, married people” as the least important characteristics.

Table 9. Distribution of Frequencies and Percentages of Student Opinions Regarding HIV / AIDS' Treatment Practices

Opinions	n	%
Nutrition education	123	47.86
Vitamin and mineral support	53	20.62
Monitoring of nutrition status	37	14.40
Regular exercise	23	8.95
Alternative nutrition treatment	21	8.17

As seen in Table 9, 48% of the students mentioned “nutrition education” as the most important personal characteristics, whereas 8% of the students mentioned “alternative nutrition treatment” as the least important characteristics.

Table 10. Distribution of Frequencies and Percentages of Student Opinions Regarding Reasons for Increase in Number of Cases of HIV Infection

Opinions	n	%
HIV / AIDS is low level of knowledge about the disease in the society.	167	64.98
Population mobility	90	35.02

As seen in Table 10, 65% of the students mentioned “HIV / AIDS is low level of knowledge about the disease in the society” as the most important personal characteristics, whereas 35% of the students mentioned “population mobility” as the least important characteristics.

3. Discussion

The list of reasons for resorting to HIV/AIDS as listed according to the opinions of university students are as follows, according to priority: HIV / AIDS is low level of knowledge about the disease in the society (167), sexually (151), rich, lonely people (126), nutrition education (123), those with poor working and living conditions (109), stigma and discrimination of people exposed to workplace behavior (106), should not be used to indisinfect untreated medical supplies (105), stigma (101), socioeconomic status is a short time, a deadly disease for people who are not good (74), and chronic fatigue (69). The study by Alparslan, Doganer, and Kizkapan (2005) lends support to the finding of the present study regarding the transmission of HIV/AIDS via sexual intercourse. On the other hand, the findings of the present study concerning low levels of knowledge about HIV/AIDS, and facing labeling and discrimination in the workplace are not supported by Alparslan, Doganer and Kizkapan’s (2005) study.

4. Result and Suggestions

In conclusion, to minimize the risk of discrimination and social exclusion due to HIV/AIDS, which is transmitted via sexual intercourse, and to minimize negative effects on the living conditions of university students, awareness regarding HIV/AIDS should be raised. In light of these findings, the following recommendations are made: In order to raise awareness, guidance services in schools should provide HIV/AIDS education for teachers, students, parents and school personnel. In addition, longitudinal studies should be conducted to see whether they would support the findings of the present study that suggest HIV/AIDS positive individuals face negative living and working conditions and are exposed to discriminatory behavior in the workplace.

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