

## **UNIVERSITY STUDENTS' PERCEPTION OF VOLUNTARY COUNSELLING AND TESTING OF HIV/AIDS IN RIVERS STATE, NIGERIA**

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### **Abstract**

The study investigated university students' Perception of Voluntary Counselling and Testing of HIV/AIDS in Rivers State, Nigeria. The study utilized a survey design with a sample population of 200 male and female students in one of the universities in Port Harcourt, Rivers State, Nigeria. Age distribution of the respondents were as follows: Below 17 (20), 17-2 (70), 22-26 (50), 27-31 (30), and 32-36 (30). The data was collected through "Students' Perception of Voluntary Counselling and Testing" (SPVCT) instrument. The reliability of the instrument was ascertained by the Alpha reliability Coefficient Procedure. Internal consistency reliability of .85 was reached. Three research questions and three null hypotheses were formulated for the study. The findings of the study revealed that: 1) Female students' knowledge on VCT was significantly higher than men. 2) Female students' attitudes towards VCT were significantly higher than men. 3) Female students' utilization of VCT was higher than men. Based on the findings of this investigation, three recommendations are presented for implementation.

### **INTRODUCTION**

HIV/AIDS was first mentioned to the entire world in the 1980s in United States of America. HIV stands for Human Immune Deficiency Virus, while AIDS is Acquired Immune Deficiency Syndrome. Presently, HIV/AIDS has no known cure. Approximately, 35 million human beings are currently infected with HIV in the world (UNAIDS, 2013). Only in Sub-Saharan Africa, about 25 million people were reported to have HIV in 2012 as reported on selected countries in Sub-Saharan Africa (Sub-Saharan Africa-2012 statistics).

Several research studies have been conducted among college and university students on HIV/AIDS knowledge, awareness, attitude, and sexual activities (Khan, S. et.al 2011; Aluede, et.al 2005; Asante, 2013; Ojo, 2011; Egbezor & Echendu 2012). These studies reported that

students have adequate knowledge about HIV/AIDS. Despite the fact that students are aware of the dreaded virus, new infections are being reported in various parts of the world. Several studies have revealed that Voluntary Counselling and Testing (VCT) has been recognized as a useful tool in limiting unprotective sexual behaviours that are capable of spreading HIV/AIDS (Olusola, et.al 2015; Chimoyi, et.al 2015; Iliyasu, et.al 2006; Asante & Oti-Boadi 2013; Donkor 2012).

Voluntary Counselling and Testing (VCT) is all about knowing your HIV status. Voluntarily taking HIV test does not necessarily test for AIDS. The test is confidential and is capable of telling whether one is HIV positive or negative. VCT is in three processes: 1) Pre-test counselling, the actual test and Post-test counselling activities. The Pre-test counselling will prepare the person for the test and awaiting results. 2) The HIV test itself is in three common types. They are as follows: The Elisa test, the Western blot test and the Rapid test. The entire three test required blood sample. 3) The Post-test counselling, the counselor in charge of the testing will give you the result. A positive test result means you have been infected with HIV. Trained counselor will assist you with all your feelings of possible shock, fear and anger. Let us understand that being HIV positive does not mean the end of one's life. There are wide range of counselling and treatment regimen. In reverse, if you are negative, counselors will counsel you on how to remain safe (Stellenbosch University's Annual HIV testing 2015).

### **Problem Statement**

Voluntary Counselling and Testing (VCT) for HIV/AIDS has been recognized as an effective means of reducing prevalent rate of the diseases. VCT enable people to know their sero-status. Little or no study has been carried out measuring university students' perception of Voluntary Counselling and Testing of HIV/AIDS among male and female undergraduates in Rivers State, Nigeria. AIDS is rated as one of the leading causes of death among 15-24 year old worldwide. Most of the undergraduate students fall within 15-24 age category (Donenberg, et.al 2006). Therefore, there is a great need to investigate students' perception of knowledge, attitude and utilization of VCT on HIV/AIDS.

### **The Purpose of the Study**

- 1) To investigate knowledge of Voluntary Counselling and Testing (VCT) among male and female university students in Rivers State, Nigeria.
- 2) To investigate attitude of male and female university students towards Voluntary Counselling and Testing (VCT) in Rivers State, Nigeria.
- 3) To investigate Voluntary Counselling and Testing (VCT) utilization among male and female university students in Rivers State, Nigeria.

### **Research Questions**

- 1) Do male and female university students have knowledge of voluntary counselling and Testing (VCT) of HIV/AIDS?
- 2) What attitude do male and female university students have towards Voluntary Counselling and Testing (VCT) on HIV/AIDS?
- 3) Do male and female university students utilize Voluntary Counselling and Testing (VCT) on HIV/AIDS?

### **Hypotheses**

The following null hypotheses were formulated and tested in the study.

- H<sub>01</sub>: There is no significant difference between male and female university students' knowledge on Voluntary Counselling and Testing (VCT) on HIV/AIDS in Rivers State, Nigeria.
- H<sub>02</sub>: There is no significant difference between male and female university students' attitudes towards Voluntary Counselling and Testing (VCT) on HIV/AIDS in Rivers State, Nigeria.
- H<sub>03</sub>: There is no significant difference between male and female university students' utilization of Voluntary Counselling and Testing (VCT) on HIV/AIDS in Rivers State, Nigeria.

## **METHODOLOGY**

### **Research Design**

The research method utilized for this study was the descriptive survey. The population of the study covered 2,600 students in one of the Rivers State universities located in Port Harcourt. The population consisted level 200-400 students. The sample population for this study consisted of two hundred (200) students. One hundred (100) for male students and one hundred for female students.

The instrument used for this investigation was on likert scale, which is an interval scale. It was a 4-point interval scale; strongly Agree, Agree, Disagree, and strongly disagree. The questionnaire for the study is entitled "Students' Perception of Voluntary Counselling and Testing" (SPVCT). The scale has personal data, response guide, and fifteen items/measuring knowledge, attitude, and utilization of VCT.

The instrument (SPVCT) was subjected to content and face validity by Measurement and Evaluation Experts in Education. The reliability of the instrument was ascertained by the Alpha Reliability Coefficient Procedures. An internal consistency reliability of .85 was reached.

The questionnaire was distributed to all participants in their various classrooms. Participants were encouraged to complete the questionnaire in privacy and honesty. Questionnaires were collected after completion in class setting, the same day. The researcher estimated that the participants would be able to complete the (SPVCT) in twenty minutes. The t-test statistics was used to test the three null hypotheses at 0.05 level of confidence. While percentages was used for descriptive purposes.

## **Results**

The finding of the study was based on 200 respondents (students) from levels 200, 300, and 400 respectively. Looking at the demographic characteristics data table (1), it was shown that age range 17-21 (35%) and 22-26 (25%) had the majority of the respondent. While, ages range 27-31 and 32-36, both had 15% respectively. Nevertheless, age bracket below 17 years had 10%.

**Table 1: Demographic characteristics of Students (respondents)**

<b>Respondents Characteristics</b>	<b>Frequency</b>	<b>Percent</b>
<b>Levels in university</b>		
200 (yr. 2)	100	50%
300 (yr. 3)	70	35%
400 (yr. 4)	30	15%
Total	200	100%
<b>Gender</b>		
Male	100	50%
Female	100	50%
Total	200	100%
<b>Age bracket</b>		
Below 17	20	10%
17-21	70	35%
22-26	50	25%
27-31	30	15%
32-36	30	15%
Total	200	100%

**Note:** Respondents' total population distributions on Gender were equally distributed in numerical strength among male and female students.

### **Knowledge of VCT among Respondents**

About 96% of the female population sample of 100 indicated that they have heard of VCT through media, friends, and university health centre.

While 4% indicated that they were uninterested about VCT, but have heard of HIV/AIDS. In the male category, 65% claimed to have heard of VCT through media, friends, and university health centre, but the remaining 35% indicated that they have heard of HIV/AIDS, but have no knowledge about VCT.

### **Attitudes towards VCT among Respondents**

When respondents were asked to give their views of undergoing VCT: 60% of the female respondents claimed to have actually participated in VCT twice in the stay in the university. The remaining 45% were willing to partake in VCT.

While, about 40% had concern in case they were seen by others at the testing centre, the people would consider them HIV positive. About 42% of the male respondents claimed to have actually participated in VCT once in their life time. 35% reported that they will visit VCT centre when they will get married as required by State Marriage Division. While, 22% of male respondents had concerns about the possible outcome of the test results if they visited the VCT centre.

### **Utilization of VCT among Respondents**

When respondents were asked if they will access VCT services, if readily available. About 80% female indicated strongly Agree. While, about 65% male responded Agree. But, most of the respondents indicated that VCT utilization is necessary for reducing spread of HIV/AIDS.

**Hypothesis 1:** Was tested using the t-test statistics and the result was shown in table 2.

**Table 2: The t-test analysis of the mean and standard deviation of male and female university students' perception of knowledge of VCT on HIV/AIDS.**

Variables	Respondents	N	Mean	Std	DF	P	t-cal	t-crit	Dec
Students	Male	100	25.40	4.15					
Perception of					198	0.05	10.74	1.96	sig
Knowledge of									H0 <sub>1</sub>
VCT	Female	100	35.90	6.47					Rejected

\* = Significant

P < 0.05: df 198

The data in table 2 revealed that the calculated t-value of female/male students' perception of knowledge of VCT on HIV/AIDS was 10.74, while the critical t-value was 1.96 at a degree of freedom of 198 at 0.05 level of significance. Therefore, the null hypothesis was rejected, meaning that there was significant difference in the perception of male and female university students' knowledge of VCT on HIV/AIDS. Therefore, female students' perception of knowledge of VCT is higher than that of male, means 35.90 and 24.40 respectively.

**Hypothesis 2:** Was tested using the t-test statistics and the result was shown in table 3.

**Table 3: The t-test analysis of the mean and standard deviation of perception of male and female university students in respect of their attitudes towards VCT on HIV/AIDS.**

Variables	Respondents	N	Mean	Std	DF	P	t-cal	t-crit	Dec
Attitudes towards VCT	Male	100	25.10	4.15	198	0.05	10.43	1.96	sig
	Female	100	35.91	6.27					

\* = Significant

P < 0.05: df 198

The data in table 3 revealed that the calculated t-value of male and female university students' perception of their attitudes towards VCT on HIV/AIDS was 10.43, while the critical value was 1.96 at a degree of freedom of 198 at 0.05 confidence level. Mean scores of male = 25.10; female = 35.91, respectively. Female students' scores were higher than male. Therefore, the null hypothesis was significant, meaning that there was a significant difference between the male and female students' perception of their attitudes towards VCT on HIV/AIDS.

**Hypothesis 4:** Was tested using the t-test statistics and the result was shown in table 4.

**Table 3: The t-test analysis of the mean and standard deviation of perception of male and female university students of their utilization of VCT on HIV/AIDS.**

Variables	Respondents	N	Mean	Std Dev	DF	P	t-cal	t-crit	Dec
Utilization of VCT	Male	100	24.45	4.17	198	0.05	10.41	1.96	sig
	Female	100	36.20	6.10					

\* = Significant

P < 0.05: df 198

The data in table 4 revealed that the calculated t-value of male and female university student's perception of their utilization of VCT on HIV/AIDS was 10.41, while the critical value was 1.96 at a degree of freedom of 198 at 0.05 confidence level. Mean scores of male = 24.45; female = 36.20 respectively. Therefore, significant difference exist between the male and female students' perception of their utilization of VCT on HIV/AIDS.

## **Discussion**

One hundred and forty (140) 70% of the respondents were within the age brackets of below 17, and 17 to 26; while sixty (60) 30% of the respondents fell within the age range of 17 to 36. These are mostly adolescents and young adults who are considered most vulnerable to HIV/AIDS in age classification Kopaez, et.al (1999); Earl (1995), and population Bureau (2006).

The findings revealed that majority of the respondents female (96%), male 65% knew about VCT through media, friends, and university health centre. This finding is in line with Donkor (2012) and Charles, et.al (2009). In table 2, null hypothesis 1 was significant, which revealed that there was significant difference in the perception of male and female university students' knowledge of VCT on HIV/AIDS.

When respondents were asked to give their views of undergoing VCT: about 60% of the female respondents claimed to have actually participated in VCT at least twice in their life time, while 40 female respondents were willing to participate in VCT, but were worried that others who might see them at the testing site would consider them HIV positive. This finding was in support of Kalichman and Simbay (2003) who indicated that people who were not tested for HIV expressed greater AIDS related stigmas, such as guilt, shame and misconceptions about HIV/AIDS. In table 3, hypothesis 3 revealed that there was significant difference in the perception of male and female attitudes towards VCT. Female students had better positive attitude towards VCT. Mean scores of male = 25.10; female = 35.91.

When respondents were asked, if they will access VCT services in the near future, if readily available. About 80% (female) indicated "strongly agree". While, about 65% (male) indicated "Agree". But most of the respondents indicated that VCT utilization is necessary for reducing spread of HIV/AIDS. Mean scores of male = 24.45; female = 36.20 female scores was higher than that of male. Therefore, there was significant difference between male and female university students' perception utilization of Voluntary Counselling and Testing (VCT) on HIV/AIDS in Rivers State, Nigeria.

## **Conclusion**

Based on the findings of this investigation, the researcher has formulated several conclusions. They are as follows:

- 1 When the t-test analysis of the mean and standard deviation of male and female university students' perception of knowledge of VCT on HIV/AIDS. There was a significant difference between male and female.
- 2 When the t-test analysis of the mean and standard deviation of male and female university students' perception of attitudes towards VCT on HIV/AIDS. There was a significant difference between male and female.
- 3 When the t-test analysis of the mean and standard deviation of male and female university students' perception of utilization of VCT on HIV/AIDS. There was a significant difference between male and female.

### **Recommendations for Implementation**

Based on the findings of this investigation, the following recommendations are presented for implementation:

- 1 Voluntary Counselling and Testing (VCT) on HIV/AIDS campaign and education should be carried on at least twice yearly in all colleges and universities in Rivers State, Nigeria.
- 2 Universities and colleges health centres should collaborate with professionally trained counselors to work in hand in VCT campaign and education.
- 3 Counselling modalities should be more directed to attitudes and utilization of VCT among students.

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