

# Awareness of HIV/AIDS among Selected Secondary School Students in Kaduna Metropolis, Kaduna State

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## Abstract

This study assesses the awareness of HIV/AIDS among selected Secondary School Students in Kaduna Metropolis, Kaduna State. The study used survey research design with a sample of 400 students selected from four secondary schools in Kaduna Metropolis using multi-stage sampling procedure. A questionnaire was used as an instrument for data collection. The instrument was validated by experts and subjected to reliability check. The data was analyze using mean scores and standard deviations in answering the research questions whereby a cut-off point of 3.00 and above was taken as positive response and accepted while less than 3.00 was considered a negative response and rejected. The study concluded that secondary school students were aware and has knowledge on HIV/AIDS in Kaduna Metropolis. However, chances of knowing more are affected by language used, terminologies, no feedback channel of communication and inadequate sex education. The study recommends among others that secondary schools in Kaduna Metropolis in particular and Kaduna State in general should increase the level of awareness of HIV/AIDS and other sexual education among secondary school students to aid them makes inform decision about their sexuality.

Key Word: HIV/AIDS and Sex Education

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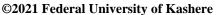
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## Introduction

The acquired immune deficiency syndrome (AIDS) caused by human immunodeficiency virus (HIV) has been a significant public health problem and remains the most serious infectious disease challenge. HIV continues to be a major global public health issue, having claimed more than 39 million lives so far. It has become the serious problem amongst the people in India with utmost spread rate and of them adolescents are at the highest risk group contracting HIV/AIDS (Dehne & Riedner, 2009). HIV/AIDS has become the leading cause of death in Africa and it is responsible for one in every five deaths in sub-Saharan Africa (Nigerian Institute of Medical Research [NIMR], 2003). It is also the leading cause of death and disease burden among women of reproductive age (15 – 49 years) in Nigeria (National Agency for the Control of AIDS [NACA], 2013). Some section of the world's according to Who population Organization (WHO, 2011) have little or no

control over their sexual lives and childbearing, others engage in behaviour that puts them and their partners at risk, while others simply do not have access to the right kind of information and services. The magnitude of HIV epidemic and current evidence of relative lack of sexual health interventions targeting young people in sub-Saharan Africa calls for wider awareness and strategic approach-based advocacy. Attia et al (2009) noted that an estimated forty million people are living with HIV and about two million of these die of AIDS. About 2.7 million are newly infected with the virus each year. According to United Nations Programme on HIV and AIDS [UNAIDS] (2013), most vulnerable age group prone to HIV and AIDS is 15-25 years. However, many young people do not receive adequate HIV and sex education (UNESCO, 2013) For example, in populationbased surveys conducted across East and Southern Africa between 2011 to 2016, just 36% of young women had comprehensive and correct knowledge about HIV and 30% of

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young men. In West and Central Africa, this figures stands at just 24% (United Nations Programme on HIV/AIDS [UNAIDS], 2016). Since no effective treatment or vaccine against HIV and AIDS is yet available, awareness is the best strategy to prevent the spread of the disease. At noted by United Nations International Children's Emergency Fund (UNICEF's, 2017) report that it is estimated that the number of 10 to 24-year-old Africans is set to rise to more than 750 million by 2060. This means that, even if current progress is maintained, new HIV infections among young people are expected to increase. If progress stalls, the results could be devastating. Estimates suggest that as many as 740,000 additional adolescents could become infected between 2016 and 2030.

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Adolescents constitute about 30% of the entire population of Nigeria; they are very important in the society as the most valuable assets (Ibrahim et al, 2015). During the period of their growing up into adult, a lot of changes occur in their lives which make them vulnerable such that they can engage in risky sexual behaviours which can lead to contracting the HIV/AIDS Virus, if not properly guided. Secondary school students are in the adolescent age which is the time they begin to be interested in sexual relationships. The youths are at a stage when they may want to experiment with sex without giving much consideration to the implication of their present behaviour. What is more disturbing being that the most infected and affected victims of HIV/AIDS are then vouths? For instance, in 1998 about 60% of all reported cases of HIV/AIDS came from the age group 15-25 years who constitute more than 50% of Nigeria population (UNAIDS, 2013). In similar vein, young adults, particularly those aged 15-24 years, are the group most vulnerable to HIV infection in Ghana and Democratic Republic of Congo (Agyemang et al, 2013). This may be attributable to their engagement in risky life practices owing to lack of adequate information particularly among secondary school students. A study conducted in South-South, Nigeria to identify knowledge of HIV infection among secondary school students in Port Harcourt found that only 7.1% of participants listed the four modes of transmission, namely sexual

intercourse, blood transfusion, mother to child (vertical) transmission and intravenous drug use. The above four modes of transmission were identified by only 31%, 14.4%, 9.1% and 8%, respectively. Only 0.7% identified all the preventive measures (Aomreore, Alikor, & Nkanginieme, 2004). Another survey in western Nigeria assessing the level of awareness, knowledge and attitude towards HIV/AIDS among secondary school students in Atisbo Local Government Area, Nigeria, showed that participants possess relatively good knowledge of HIV/AIDS, reasonable knowledge of safe sexual practices and positive attitude towards sexuality, HIV/AIDS and people living with PLHIV (Adeleke et al, 2015). Also, a study conducted in Northern Nigeria by Murtala (2009) observed that the general level of knowledge and awareness of adolescent/ secondary school students in Katsina on HIV/AIDS was high. According to Murtala (2009) it is also becoming clear that the student's reliable means of obtaining correct information on the subject of HIV/AIDS are through television, posters and radio, but they preferred roadside show or public lectures as the source of knowledge on HIV/AIDS.

Information on AIDS is more frequently reported to be obtained from the mass media (Anochie et al, 2003). In the study conducted in Calabar Nigeria by Oyo-Ita et al. (2005) television and radio were also the two main sources of information on HIV/AIDS. It is apparent that the mass media has succeeded in creating awareness on HIV/AIDS but is inefficient to impact sufficient knowledge that will aid in controlling the disease. As noted by Adeleke et al (2015) in their study concluded that most of the secondary school South-Western states in Nigeria heard about HIV/AIDS from sex education at school. friends and radio while few heard about HIV from family members. Less prominent sources were the internet, newspapers and TV. In similar vein, Othman (2015) state that the overall rate of knowledge (acceptable and good) about HIV/AIDS among high school students in Iran was high. The main source of information about HIV/AIDS was mass media. Typical school, male students, older students, students of high socio-economic status, have

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significantly highest degree of knowledge about HIV/AIDS. To effectively educate school students, UNAIDS (2017) observed that the influence, power and control that many adults have on the lives of young people means that engaging various stakeholders such as parents, health providers and community leaders is key to HIV prevention for young people.

The basic knowledge of HIV/AIDS over various issues like prevention and mode of transmission is deficient among many students. Adolescents are more vulnerable and are less aware of the knowledge to protect themselves from HIV/AIDS (Ibrahim et al, 2018). In a study conducted among secondary school students in Qatar by Al Khenji et al (2012), showed to be highly aware of the transmission of HIV through blood transfusion and infected tools. There were also some other studies with similar findings (Appiah-Agyekum e al 2008). Similarly, studies conducted in Nigeria especially the southern part of Nigeria revealed that students demonstrated some knowledge on the correct modes of transmission of HIV/AIDS (Osowole & Oladepo, 2000; Oladepo & Brieger; 2000; Anochie & Ikpeme, 2001; Ayankogbe et al, 2003; Adamu, 2010 and Adeleke et al, 2015). However, misconceptions are still present such as getting HIV from public toilets, mosquito bites, or touching an HIV infected person among students from Calabar, Nigeria (Oyo-Ita et al 2005).

With the mixed findings from the above studies in different parts of Nigeria, it becomes necessary to re-assess level of awareness of HIV/AIDS, students' knowledge of the causes and prevention of HIV/AIDS, sources of HIV/AIDS information and possible challenges associated with assimilation of HIV/AIDS secondary students in Kaduna among metropolis. This is necessary because secondary school students who are mostly teenagers/youths are the future of the country, it is imperative that they be equipped with ample amount of information so as to protect themselves and their counterparts from falling a prey to this still-an-incurable killer disease. HIV/AIDS information is the most effective weapon accessible in the management and prevention of HIV/AIDS in the society. In the

light of the above, this study therefore assesses the awareness of HIV/AIDS among selected Secondary School Students in Kaduna Metropolis, Kaduna State.

## **Statement of the Problem**

School children of today are exposed to the risk of being victims of HIV/AIDS - which was quite unknown to their predecessors of few decades ago. Suleiman (2018) states that the epidemic of HIV/AIDS is now progressing at a rapid rate among young people. Programme managers and policy makers have often recommended that schools can act as the centre point for disseminating information and education on HIV/AIDS. Hence, school education has been described as a 'social vaccine', and it can serve as a powerful preventive tool. A number of studies were conducted in various parts of Nigeria on Knowledge, attitude, behaviour and awareness of HIV/AIDS, such as Marcus and Mashi, (2008); Wagbatsoma and Okojie, (2006); Sa'ad and Bello, (2006) and Suleiman, (2018) among others. More people are infected or affected by HIV/AIDS daily which has severe economic, social and political consequences in the nation achieving sustainable development. However, opinions are divided in Nigeria about secondary school students' level of awareness of HIV/AIDS and the sources of students' knowledge of the epidemic. While some scholars hold that the level of awareness of HIV/AIDS is high other scholars hold that the level of awareness of the epidemic is low among secondary school students (Aomreore, Alikor, & Nkanginieme, 2004; Wagbatsoma and Okojie, 2006; Sa'ad & Bello, 2006; Murtala, 2009; Adeleke et al, 2015; and Suleiman, 2018). Another set of scholars outside the academic environment of Nigeria argue that the students aged 15-19 years, single, belonging to the Muslim religion and studying at secondary schools were associated with poor knowledge on HIV/AIDS (Dzah, Tarkang & Lutala, 2019). In Congo, the DRC Demographic Health Survey has shown a relationship between ages 15 and 24 years and being unable to know that healthy people can be HIV-positive. This may be because the opportunities to obtain knowledge about HIV,

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AIDS and sexual health are extremely limited for young people not in school. Youth clubs have the potential to provide HIV knowledge, but their small, localised reach means their impact is limited on a large scale (AIDSTAR-One, 2013). Knowledge, attitudes and practices regarding HIV/ AIDS serve as the cornerstones in the fight against HIV. Adequate knowledge regarding HIV/AIDS is a powerful way of promoting positive attitudes as well as engaging in safe practices. Hence, it is imperative to provide senior secondary school students in Kaduna Metropolis, Kaduna State in particular and that of Nigeria in general with sufficient amount of information which will help them protect themselves from the spread

The aim of this study intends to assess the awareness of HIV/AIDS among selected Secondary School Students in Kaduna Metropolis, Kaduna State. While the specific objectives of the study examined if the senior school students in Kaduna secondary metropolis, Kaduna State level of awareness HIV/AIDS. ascertain students' knowledge of the causes, transmission and prevention of HIV/AIDS, find out the sources of HIV/AIDS information that are available to the students, determine the possible challenges associated with assimilation of HIV/AIDS and make recommendations to obtain useful information regarding HIV/AIDS epidemic.

of HIV/AIDS pandemic in the society.

## **Research Questions**

- i.What is the level of awareness of HIV/AIDS among selected Secondary School Students in Kaduna Metropolis, Kaduna State?
- ii.What is the students' knowledge of the causes and prevention of HIV/AIDS among selected Secondary School in Kaduna Metropolis, Kaduna State?
- iii. What are the sources of HIV/AIDS information among selected Secondary School Students in Kaduna Metropolis, Kaduna State?
- iv. What are the possible challenges associated with assimilation of HIV/AIDS among selected Secondary School Students in Kaduna Metropolis, Kaduna State?

## Methodology

Research Design: The study used survey research design with questionnaire as instrument for data collection. This is because survey research is widely accepted and used in social science studies due to its varied advantages. Justifying the use of survey, Babbie and Roberts (2018) state that survey research is a research method involving the use of standardised questionnaires or interviews to collect data about people and their preferences, thoughts, and behaviours in a systematic manner.

## Area of the Study

Kaduna Metropolis is located between latitude 10028' and 10037' North and longitude 07019' and 07031' East occupies an area of about 260km2; the distance between the eastern and western limits of the city is approximately 13.7km (Fingesi, 2001). It is made up of two main local government areas, the Kaduna North and the Kaduna South, other adjoining local government areas that makes up the entire metropolis are Igabi and Chikun. Air Force Comprehensive Secondary School was selected from Mando, Igabi Local Government and Secondary School. Command International Schools and Our Lady of Fatima Girls' Secondary School from Chikun Local Government Area.

# **Population and Sampling Techniques**

The population of the study was all senior secondary school students of four selected secondary schools in Kaduna State: Air Force Comprehensive Secondary School, Command Secondary School, Danbo International Schools and Our Lady of Fatima Girls' Secondary School. Available data obtained from the schools' managements (personal communication, February, 2020) show that Air Force Comprehensive Secondary School has a total population of 1314 students in SSS classes, Command Secondary School has 1046, Danbo International Schools has 814 and Our Lady of Fatima Girls' Secondary School has 375. The four schools have a total of 3, 549 in SSS classes. A sample size of 400 was chosen for this study. It was statistically determined using the Taro-Yamane's formula. A multi-

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stage sampling process which employed both the probability and non-probability sampling was adopted for this study. In the non-probability sampling, purposive sampling was used. Therefore, the researcher purposively selected only Senior Secondary School Students as they are considered appropriate for the study. Furthermore, the probability sampling technique of simple random was utilized to select respondents aimed at giving everyone equal chance of being selected.

## Validity and Reliability of Research Instrument

Validity of Instruments: The validity of the research instruments was achieved by the content validity approach which was determined by the expert judgment of a lecturer who is a Professor and specialist in the Department of Mass Communication, Benue State University, Makurdi. The instrument was restructured based on the indicated corrections and suggestions made by the expert.

**Reliability of Instrument**: Reliability of the questionnaire instrument was achieved through a pilot study. A test – retest approach of forty

(40) students representing 10% of the sample was purposively selected from Redemption Academy Shool Mando, Kaduna were used to ascertain the reliability of the instrument. To prove the reliability of this work, Pearson's correlation Coefficient was used. The information from the calculation was considered reliable.

## **Data Collection and Analysis**

The data collected for the study were presented in tables of which results were analyzed and findings arrived at. These statistical tools were used because they were suitable means of breaking down and analyzing the generated data. Furthermore, mean scores and standard deviations was used in answering the research questions whereby a cut-off point of 3.00 and above will be taken as positive response and accepted while less than 3.00 will be seen as negative response and rejected.

#### Results

The presentation and analysis of data was done based on the 380 copies of the questionnaire that were retrieved from the respondents. This is presented below:

Table 1: Level of students' awareness of HIV/AIDS information in Secondary Schools in Kaduna Metropolis

Responses	Command	Air Force	Danbo	Fatima	Total
		Awareness	S		
Aware	95	95	95	95	380(100)
Not Aware	00	00	00	00	00
		Level of aware	eness		
High	25	15	33	18	91(24%)
Minimum	42	46	39	51	178(46.8)
Low	18	22	14	19	73(19.2)
Very low	10	12	9	7	38(10%)

Source: Field Survey, 2021

Data on Table 1 revealed respondents' knowledge of HIV/AIDS. All the 380 respondents representing 100% were aware of HIV/AIDs. Also, data in Table 2 is about respondents' level of knowledge and awareness of HIV/AIDs. Out of the total population sampled, 91 (24%) respondents indicated high, 178 (46.8%) respondents indicated minimum,

73 (19.2%) respondents indicated low and 38 (10.7%) respondents indicated very low. Most respondents indicated minimum as their level of knowledge and awareness of HIV/AIDs. This implies that respondents had minimal level of knowledge and awareness of HIV/AIDs.

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Table 2: Students' Knowledge of the causes and prevention of HIV/AIDS

Responses	Command	Air Force	Danbo	Fatima	Total		
	Ca	uses of HIV/AII	OS				
Unscreened	blood transmissi	on					
Yes	45	56	46	45	192(50.5)		
No	50	39	49	50	188(49.5)		
Through ser	nen or vagina (fl	uid via sex)					
Yes	56	95	58	68	277(72.9)		
No	39	00	37	27	103(27.1)		
Drug injecti	on via needle						
Yes	56	58	59	67	240(63.2)		
No	39	37	36	28	140(36.8)		
<b>Breast Feed</b>	ing						
Yes	63	60	62	61	246(64.7)		
No	32	35	33	34	134(35.3)		
	Prev	ention of HIV/A	IDS				
Avoiding un	protected sexual	intercourse					
True	0	00	00	00	00		
False	95	95	95	95	380(100)		
Avoiding tra	ansfusing unscree	ened blood			, ,		
True	90	91	56	64	301(79.2)		
False	5	4	39	31	79(20.8)		
Avoiding sh	aring unsterilized	l sharp objects (	razor, need	lle)			
True	55	51	76	74	256(67.4)		
False	40	44	19	21	124(32.6)		
Others							
True	66	77	76	74	293(77.1)		
False	29	18	19	21	57(22.9)		

Source: Field Survey, 2021

Table 2 revealed information on respondents' knowledge of the causes of how HIV/AIDs. Out of the total sampled population, 192(50.5%) said yes to unscreened blood transmission while 188 (49.5%) respondents said no. Also, 277(72.9%) respondents agreed that HIV/AIDs can be transmitted through semen or vagina (fluid via sex) while 103(27.1%) respondents said no. Further, 240 (63.2%) respondents indicated drug injection via needle as means HIV/AIDS can be transmitted while 140 (36.8%) respondents disagreed. Concerning breast feeding which is from mother to child, 246 (64.7%) respondents said yes while 134 (6.4%) respondents opted for no.

Information contained in Table 2 revealed that respondents all agreed that HIV/AIDs can be transmitted through all the options provided which are: unscreened blood transmission; semen or vaginal fluid via sex; drug injection

via needle; breast feeding (mother to child); and blood, semen/vaginal fluid. This implies that respondents had a fair knowledge of the means HIV/AIDs can be transmitted.

Also, data in Table 2 revealed information about HIV/AIDs prevention. All the 380 respondents agreed that HIV/AIDs can be prevented by avoiding unprotected sexual intercourse. Also, 301 (79.2%) respondents agreed that HIV/AIDs can be prevented by avoiding transfusing unscreened blood while 79 (20.8%) respondents disagreed. The table further revealed that 256 (67.4%) respondents agreed that HIV/AIDs can be prevented by avoiding sharing unsterilized sharp objects such as razor and needles while 124 (32.6%) respondents disagreed. Concerning other options of HIV/AIDs prevention 293 (77.1%) respondents agreed while 87 (22.9%) respondents disagreed.

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From the Table, data revealed that apart from other options that were mentioned, respondents all agreed that HIV/AID prevention can be done through avoiding unprotected sexual

intercourse; avoiding transfusing unscreened blood and avoiding sharing unsterilized sharp objects such as razor and needles.

Table 3: Sources of HIV/AIDS information in Secondary Schools in Kaduna Metropolis

Responses	Command	ommand Air Force Danbo Fatima		<b>Fatima</b>	Total			
		Sources						
Teachers/ So	chool							
Yes	34	43	41	36	154(40.5)			
No	61	52	54	59	226(59.5)			
Health cente	ers/workers							
Yes	62	61	57	59	239(62.9)			
No	33	34	38	36	141(37.1)			
Books								
Yes	62	54	53	59	228(60%)			
No	33	42	42	36	152(40%)			
Parents and	family member	ers						
Yes	22	31	36	41	130(34.2)			
No	73	64	59	54	250(68.2)			
	sques/social or	ganizations			, ,			
Yes	39	36	32	41	135(35.5)			
No	56	59	63	54	245(64.5)			
Television					` ,			
Yes	54	62	59	66	241(63.4)			
No	41	33	36	28	139(36.6)			
Radio					` ,			
Yes	57	61	64	66	249(65.5)			
No	38	34	36	28	131(34.5)			
Newspaper					` ,			
Yes	39	49	52	59	199(52.4)			
No	56	46	43	36	181(47.6)			
<b>Medical Pos</b>	ters				` ,			
Yes	71	69	59	64	263(69.2)			
No	24	26	36	31	117(30.8)			
Internet					` '			
Yes	47	54	64	71	236(62.1)			
No	48	41	31	24	144(37.9)			

Source: Field Survey, 2021

Data in Table 3 revealed sources of awareness and knowledge of HIV/AIDs. A total of 154 (40.5%) respondents agreed to teachers and schools as their sources of awareness and knowledge of HIV/AIDs while 226 (59.5%) respondents said no, 239 (62.9%) respondents said yes to health centers/workers as their sources of knowledge and awareness of HIV/AIDs while 141 (37.1%) respondents said no; concerning books 228 (60%) respondents said yes while 152 (40%) said no; 130 (34.2%)

respondents said yes to parents and family members while 250 (68.8%) respondents said no; on church, mosque and social organization, 135 (35.5%) respondents said yes while 245 (64.5.9%) respondents said no; 241 (63.4%) respondents said yes to television as their sources of knowledge of HIV/AIDs while 139 (36.6%) respondents said no; 249 (65.5%) respondents said yes to radio as sources of awareness and knowledge of HIV/AIDs while 131 (34.5%) respondents said no; 199(52.4%)

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respondents said yes to newspaper as sources of awareness and knowledge of HIV/AIDs while 181 (47.6%) respondents said no; 263 (69.2%) respondents said yes to medical posters as sources of awareness and knowledge of HIV/AIDs while 117 (30.8%) respondents said no; 236 (62.1%) respondents said yes to Internet while 144 (37.9%) respondents said no to Internet as their sources of awareness and knowledge of HIV/AIDs.

Information on Table 3 shows that respondent had health workers, radio, newspaper, medical posters and Internet as their sources of awareness and knowledge of HIV/AIDs. However, responses show that respondents were not aware or have the knowledge of HIV/AIDs through; parents and family, Church, Mosque and social organizations well as teachers and schools.

Table 4: Mean Rating of the challenges associated with assimilation of HIV/AIDS

Challenges associated with assimilation of	SA	A	N	DS	SD	X	SD	Remarks		
HIV/AIDS information	<b>(5)</b>	<b>(4)</b>	(3)	<b>(2)</b>	<b>(1)</b>					
Command										
Language used	32	55	2	4	2	4.17	.834	Agree		
Terminologies	24	62	2	5	2	4.06	.823	Agree		
No feedback channel of communication	36	59	00	00	00	4.38	.488	Agree		
Inadequate sex education	25	68	00	2	00	4.22	.549	Agree		
Air Force	Comp	orehen	sive S	ec Sch	1					
Language used	34	61	00	00	00	4.36	.482	Agree		
Terminologies	29	60	0	4	2	4.16	.803	Agree		
No feedback channel of communication	34	55	0	4	2	4.21	.824	Agree		
Inadequate sex education	39	48	0	5	3	4.26	.761	Agree		
Da	anbo Ii	nterna	tional							
Language used	39	56	00	00	00	4.41	.495	Agree		
Terminologies	22	73	00	00	00	4.23	.424	Agree		
No feedback channel of communication	37	54	00	4	00	4.31	.685	Agree		
Inadequate sex education	41	52	00	2	00	4.39	.607	Agree		
Our Lady of Fatima Girls' Sec Sch										
Language used	47	48	00	00	00	4.49	.503	Agree		
Terminologies	31	62	00	2	00	4.28	.577	Agree		
No feedback channel of communication	51	39	00	3	2	4.41	.831	Agree		
Inadequate sex education	33	50	3	7	2	4.12	.861	Agree		
Cluster Mean							0.66	Agree		

Source: Field Survey, 2021.

Data in Table 4 shows that mean rating of the challenges associated with assimilation of HIV/AIDS information were above the cut-off point of 3.00. This implies that respondents all agreed that language used; terminologies, no feedback channel of communication and inadequate sex education were factors that affect awareness and knowledge of HIV/AIDs. Also, the cluster means was above the cut-off point of 3.00 affirmed that all the four options posed as challenges for regarding HIV/AIDs awareness and knowledge in the selected schools used for the study.

## **Discussion of Findings**

The research assessed the awareness of HIV/AIDS among secondary school students in Kaduna town, Kaduna State. The study found that most of the respondents have minimal level of knowledge and awareness of HIV/AIDs. The implication of this finding means secondary schools students in Kaduna metropolis have not been adequately educated about the scourge of HIV/AIDs. It also implies that they are susceptible to catch the virus. This view resonate the position held by UNESCO's (2013) report which stated that many young people do not receive adequate HIV and sex

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education. For example, in population-based surveys conducted across East and Southern Africa between 2011 to 2016, just 36% of young women had comprehensive and correct knowledge about HIV and 30% of young men. In West and Central Africa, this figures stands at just 24% (UNAIDS, 2016). According to reports from UNESCO and UNAIDS in 2013 and UNAIDS, 2016 young people are poorly informed when it comes to sexual issues. This may be attributed to low level of school attendance, lack of sex education and attitudes that prohibit discussion of sexual issues especially in a cultural conservative country like Nigeria, where sexual issues are treated as taboos.

Also, the study found that respondent sources of HIV/AIDS knowledge include health centers/health workers, television, medical posters among other sources most of the respondents have little knowledge of HIV/AIDS from their parents, religious organization and Internet. This finding agrees with Adeleke et al study (2015) when they concluded that most of the secondary school South-Western states in Nigeria heard about HIV/AIDS from sex education at school, friends and radio while few heard about HIV from family members. Less prominent sources were the internet, newspapers and TV. The implication of the above finding echo the suggestion of UNAIDS's report of 2017. According to UNAIDS the influence, power and control that many adults have on the lives of young people means that engaging various stakeholders such as parents, health providers and community leaders is key to HIV prevention for young people.

Furthermore, the study found that respondents knew about causes of HIV/AIDs; methods of preventing HIV/AIDs; misconception regarding modes of transmission and means of transmuting HIV/AIDs. This finding is line with other studies conducted in Southern part of Nigeria which revealed that students demonstrated some knowledge on the correct modes of transmission of HIV/AIDS (Osowole & Oladepo, 2000; Oladepo & Brieger; 2000; Anochie & Ikpeme, 2001; Ayankogbe et al, 2003; Adamu, 2010 and Adeleke et al, 2015). However, this study is in contrast with the view

of Oyo-Ita et al (2005). According to them, misconceptions are still present such as getting HIV from public toilets, mosquito bites, or touching an HIV infected person among students from Calabar, Nigeria.

Finally, all the respondents agreed that language used, terminologies, lack of feedback channel of communication and inadequate sex education were all the challenges encountered regarding awareness and knowledge of HIV/AIDs.

## Conclusion

The study concludes that secondary school students were aware and have knowledge on HIV/AIDS in Kaduna Metropolis. However, chances of knowing more are affected by language used, terminologies, no feedback channel of communication and inadequate sex education.

#### Recommendations

Based on findings of the study and the conclusions, the study makes the following recommendations:

- i. It is recommended that in addition to existing structures and effort being made by government and non-governmental agencies to sensitize secondary school students about the HIV/AIDS scourge, there should be home/school visitations by Health workers, with a view to reaching every individual in the community irrespective of age. During such visits emphasis should be on educating the people on the causes, mode of transmission, prevention and effects of HIV/AIDS pandemic.
- ii. It is also recommended that parents and family should engage in sexual education especially HIV/AIDS towards preventing scourge of the virus. This is because HIV/AIDS awareness and sexuality education and communication between parents and their children can be seen as a protective factor for sexual and reproductive health among adolescents.
- iii. Secondary schools in Kaduna Metropolis in particular and Kaduna State in general should increase the level of awareness of HIV/AIDS and other sexual education

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- among secondary school students to aid them makes inform decision about their sexuality.
- iv. Also, education of school students about all aspects of HIV/AIDS should be seriously considered by the education policymakers.

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