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Research Article

HIV and AIDS in the Academe: Teachers' Awareness and Attitude

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Abstract: This research determined teachers' awareness on HIV and AIDS and its relationship to their attitude towards working with a colleague living with the said virus and disease. Utilizing descriptive-correlational research design through the survey method, the study was participated by 150 faculty members from selected basic and higher education institutions in the province of Cavite, Philippines. Results reveal that higher HIV and AIDS awareness among the participants results to a more positive attitude towards working with a colleague with HIV and AIDS. The major scope of this study is the teachers' level of awareness on HIV and AIDS and their attitude towards working with a colleague with HIV and AIDS. Their awareness on other sexually transmitted infections (STIs) were not included in the study. It solely focused on determining how profound the participants' knowledge on HIV and AIDS is so that an appropriate health promotion program would be developed for them. The results of this study could serve as a basis in planning for a health promotion program essential in instilling among the the teachers the importance of HIV and AIDS awareness in reducing stigma and discrimination in the workplace.

Keywords: Sexually Transmitted Infection, HIV and AIDS, Health, Health Promotion, Academe.

INTRODUCTION

Health problems related to the spread of acquired immune deficiency syndrome (AIDS) caused by human immunodeficiency virus (HIV) remain a major concern because of its unceased increase in cases around the globe. In the Philippines, in particular, around 65,463 cumulative cases have been recorded from 1984 to 2019 (Montemayor, 2019). The predominant mode of transmission is sexual contact. The region with the most number of HIV and AIDS cases remains to be the National Capital Region (NCR). Region IV-A is the second having the province of Cavite with the most number of reported cases. According to the Department of Health (2018), there have been a total of 3,295 cases of HIV in the province since 1984; 695 of which were detected in 2018 alone. Among the cities and municipalities in Cavite, Bacoor has the highest reported cases followed by Dasmariñas and Imus. Such result can be due to the fact that the province, especially the three mentioned cities, is just beside NCR where the highest rate of HIV has been reported (Geronimo, 2015).

The increasing prevalence of HIV and AIDS has been known to retard the economic growth by destroying human capital since it is mainly affecting young adults in the age group of 15-24 years, who are in their most productive ages of life (Singh and Jain, 2009). Apparently, workers of the said age group coming from various professions in the Philippines get infected by HIV, as well. As reported by Farr and Wilson, overseas Filipino workers (OFWs) account for 30 to 35 percent of all cases in the country. In the province of Cavite, however, Cavite HIV Coordinator H. Maderazo (personal interview, 04 September 2019), confirmed that call center agents comprise the most number of HIV cases. She likewise mentioned that even professionals in the healthcare field also acquire HIV infection due to varying reasons.

In the study of Lucero (2019), it has been reported that some teachers in the province of Cavite are currently living with HIV. Being infected with the said virus, significant changes have transpired in their lives because of the virus's effect to their physiological and mental state. Having acquired HIV, these teachers have likewise experienced stigma and discrimination from others, including their colleagues. Because of that, their level of functioning has been negatively affected including their work performance.

Stigma and discrimination indeed is a factor that contributes to the swelling cases of HIV and AIDS.

Because of stigma and discrimination, people tend to decline access and utilization of facilities and services gearing towards HIV-related prevention and care (Lau and Tsui, 2003). Stigma and discrimination usually arises because of people's low knowledge and misconceptions about the disease. Hence, to eliminate stigma and discrimination on people living with HIV (PLWH), which would later aid in decreasing HIV and AIDS cases, Lucero (2017) strongly recommends that health education and promotion programs on HIV and AIDS be conducted in various agencies especially the academe.

The academe is an ideal place for young people to be aware about HIV and AIDS since it is where they learn new information through their teachers. Also, aside from being sources of knowledge, teachers serve as advocates of a healthy school environment and role models for their learners. Nevertheless, the school can be a source of stigma and discrimination if the teachers facilitating knowledge among learners share false information because of misconceptions and/or lack of awareness about a certain issue. Sadly, because of insufficient knowledge, teachers themselves stigmatize and discriminate vulnerables groups, which could have included PLWH.

With the fact that some teachers have been found to be living with HIV and that the majority oh HIV cases are found among young adults, including students, this study will endeavor to assess teachers' awareness on HIV and AIDs and their attitude towards working with a colleague with HIV. The results of this study is hoped to be significant and contibutory in stigma reduction and elimination towards PLWH thus; contributing to the shrinking of HIV and AIDS cases.

RESEARCH QUESTIONS

This Study Sought To Answer The Following Questions:

1. What is the demographic profile of the teacher participants in terms of:

a) age;
b) sex;
c) sexual orientation;
d) highest educational attainment; and
e) Attendance in HIV-related trainings?

2. What is their level of awareness on HIV and AIDS in terms of

a) mode of transmission;
b) disease process; and
c) prevention and treatment?

3. What is their attitude towards working with a colleague with HIV and AIDS?
4. Is there a significant relationship between the participants' demographic profile and their awareness on HIV and AIDS?
5. Is there a significant relationship between the participants' level of awareness on HIV and AIDS and their perception towards working with a colleague with HIV and AIDS?

SCOPE AND DELIMITATION

The major scope of this study is the teachers' level of awareness on HIV and AIDS and their attitude towards working with a colleague with HIV and AIDS. Their demographic profile was likewise explored to serve as one of the bases for their responses.

On the other hand, the participants' awareness on other sexually transmitted infections (STIs) were not included in the study. It solely focused on determining how profound the participants' knowledge on HIV and AIDS is so that an appropriate health promotion program would be developed for them.

RESEARCH METHODOLOGY

Research Design

This study employed quantitative correlational research design utilizing the survey method. Correlational research is done to determine the significant relationship that exists between the variables under study in a research work. The variables of the study were the participants' demographic profile, awareness on HIV and AIDS, and attitude towards working with a colleague with HIV. In here, the data for each variable were gathered from the identified participants through the use of a prepared set of data sheet and questionnaires that measure the parameters of each variable included in the study.

Participants of the Study

The participants of the study were faculty members of selected basic and higher education institutions in the province of Cavite. Basic education institutions include the elementary and secondary schools while higher education instituions refer to the colleges and universities in the province.

Research Instrument

A questionnaire adopted from the study of Lucero (2017) was used in generating the data for the study. Modifications on the said instrument, however, was done to suit the research questions of the study. It was composed of various questions that were categorized into three sections: profile of the participants, their awareness on HIV and AIDS, and their attitude towards working with a colleague with HIV and AIDS.

In the first part of the questionnaire, the participants' profile was asked specifically, their age, sex, sexual orientation, highest educational attainment, and attendance to HIV-related trainings.

The second part of the questionnaire determined the participants' prior knowledge on HIV

and AIDS. They were asked some alternate response questions about the nature and disease process, mode of transmission, and prevention and treatment of HIV and AIDS.

The participants' attitude on working with a colleague with HIV and AIDS was the focus of the third part of the questionnaire. In here, the participants were asked to rate their level of agreement on the given statements.

The modified research instrument was subjected to checking and pilot testing to ensure its validity and reliability in answering the research problems. Obtaining a Cronbach's α value of 89 percent, the research instrument was then administered to the target participants for the actual gathering of data.

Sampling Design

Quota sampling was used in the study. Applying this technique, 30 participants were selected to be part of the survey from each participating school. Two secondary schools, one elementary school, and two higher education institutions partcipated in the study, yielding a total of 150 faculty members who served as the study participants.

Data Gathering Procedure

Before the actual conduct of the study, permission from the administrator of each participating school was sought. As soon as the permission for the conduct of the study had been granted, an informed consent was secured from the target participants.

Upon securing the participants' informed consent, an arrangement with regard to their schedule was done so that the data gathering procedure would not interrupt any classes or any school activities. When everything had been set, the questionnaires were given to an identified focal person who would administer it to the participants. These questionnaires were then retrieved after two weeks.

After the retrieval of the questionnaires from the participants, their responses were properly encoded in a prepared database ready for analysis. The analysis and interpretation of data was done through the aid of an appropriate statistical tool. The related literatures collected were also used as bases to describe and validate the participants' responses in the study.

Ethical Issues

The selected participants of the study were allowed to be part of the data gathering procedure upon giving their informed consent. The informed consent should ensure that the participants have clear and explicit information on all the aspects of the study – the procedure to be followed and the reasons, the exact nature of the participants' role; the risks and benefits involved; psychological stress and embarrassment; and the way in which the data will be handled and reported. They were likewise informed that they can withdraw their participation in the study anytime should they feel to do so.

Plan for Data Analysis

For the demographic profile of the participants, categorization or clustering was done for their age, sex, civil status, monthly income, and place of residence. This was done as follows:

Age: Gen Z if 24 years old and below; Millenial if 25-39 years old; Gen X if 40-54 years old; and Baby Boomer if 55-75 years old

Sex: male and female;

Sexual orientation: heterosexual, homosexual, bisexual, not sure;

Highest educational attainment: bachelor's, master's, doctoral, post-doctoral; and

Attendance to HIV-related trainings: With Attendance and Without Attendance.

The participants' level of awareness on HIV and AIDS will be determined by asking them to answer 20 alternative response questions about its mode of transmission, disease process, and prevention and treatment. The findings herein were obtained by getting the percentage of the participants who answered each question correctly. The percentage obtained will be further categorized into 'high awareness' if the percentage range is 76 percent and above; 'average awareness' if the percentage range is 51-75 percent; and 'low awareness' if the percentage range is 50 percent and below.

The participants' attitude towards working with a colleague with HIV and AIDS was determined by asking them to rate their feeling towards the 10 statements presented in the questionnaire. The findings herein were obtained by computing for the mean score in reference to their answers in the prepared 10 statements. Then, the result was further categorized into 'very positive' if the mean range is 3.25-4.00; 'positive' if the mean range is 2.50-3.24; 'slightly positive' if the mean range is 1.75-2.49; and 'not positive' if the mean range is 1.00-1.74.

Descriptive statistics such as frequency, mean, and percentage were used to describe the distribution of the respondents according to their profile and responses. Furthermore, suitable kinds of tables and figures were utilized to ensure clarity and intelligibility in the presentation of the findings.

In determining the relationship of the participants' demographic profile to their awareness on

HIV, computation for the chi-square value was done. Person R was used to determine the significant relationship between the participants' awareness on HIV and their attitude towards working with a person with HIV.

RESULTS AND DISCUSSION

Participants' Profile

The participants' demographic profile was obtained in the first part of the data gathering. This was done to aid in answering the other research questions and, at the same time, provide some information to describe the sample used in the study. Such profile includes the participants' age, sex, sexual orientation, highest educational attainment, and attendance to HIV-related trainings. The findings herein were summarized in Table 1.

Table 1. Profile of the participants

CHARACTERISTIC	FREQUENCY n = 150	PERCENT
Age		
Baby Boomer (55-75 years old)	18	12
Generation X (40-54 years old)	38	25
Millenial (25-39 years old)	87	58
Generation Z (24 years old and below)	7	5
Sex		
Male	74	49
Female	76	51
Sexual Orientation		
Heterosexual	109	73
Homosexual	29	19
Bisexual	12	8
Highest Educational Attainment		
Bachelor's	129	86
Masters'	13	9
Doctorate	8	5
Attendance to HIV-related Trainings		
With Attendance	49	28
Without Attendance	101	72

Age.

As shown in Table 1 the participants' ages are categorized according to their generational labels for easy reference: Baby Boomers, Generation X, Millenials, and Generation Z. According to Kierz (2015), people in their respective years of birth were grouped into genrational labels to differentiate them in terms of their interest, characteristics, and attitude.

In this study, results show that more than half of the participants are dominated by millenial teachers (58%) while the least are Generation Z teachers (5%). It can be generalized that majority of the participants have been shaped by the boom of the Internet. As such, they are both adept in extracting information both from printed and online sources (Kasasa, 2019). As teachers, millenials are known for being empathetic and flexible (Mayur, 2018). They tend to understand the basic needs that determine the student's ability to focus in the classroom. Also, one characteristic that has been observed within the millennial generation is that they value their individuality. Millennial teachers know every student is unique and have their own learning style.

According to Miksche (2018), millenials are the ones who are currently at the most risk of acquiring HIV bacause of being more engaged to riskier sexual behaviors. This is in addition to a host of social, cultural, and financial factors that keep this generation at high risk of contracting HIV.

Sex.

In this study, results show that female teachers slightly dominate male teachers in terms of their number, 51 and 49 percent, respectively. While the results signifiy an almost fair representation between sexes in the teaching profession, it still agrees with the notion of Hansen and Quintero (2019) claiming that the academe has slowly become more female over several decades. They, however, claim that gender balance in the school workforce diversity is necessary to foster learning improvement among students.Sexual Orientation.

According to Robinson (2016), sexual orientation refers to a person's emotional, romantic, and sexual attraction to individuals of a particular sex (male

or female). In the context of this research, sexual orientation was categorized into straight or heterosexual (people attracted to opposite sex), homosexual (people attracted to the same sex as his or hers), and bisexual (people attracted to both sexes). Results show that majority (73%) of the research participants are heterosexual while the least (8%) are bisexual. Interestingly, 19 percent said that they are homosexual. The findings presented agree with Bracamonte-dizon and Palma (2014) who cited that the prevalence of homosexuality can be found in almost all sectors, including the academe. While majority of the faculty members identify themselves to be heterosexual, a significant portion of them still admitted to be attracted with either the same sex or both sexes.

There are various theories that try to explain why people have varying sexual orientation despite the existence of only two sexes. Most scientists today agree that sexual orientation is the result of a combination of environmental, emotional, hormonal, and biological factors. In other words, there are many factors that contribute to a person's sexual orientation, and the factors may be different for different people (Robinson, 2016).

Highest Educational Attainment.

In terms of highest educational attainment, it can be seen from Table 1 that majority of the participants are holders of a bachelor's degree (86%) while the least have obtained their doctorate (5%). Some nine percent of the total number of participants are master's degree holders. The above findings can be attributed to the fact that majority of the participants came from basic education institutions where a graduate degree level is not required for permanent employment. Unlike in the higher education setting, a college faculty should at least obtain a master's degree before he or she could obtain a permanent teaching position (Aning, 2013).

Attendance to HIV-related Trainings.

Promoting HIV and AIDS awareness is deemed important for it instrumentally helps in decreasing the number of HIV cases by making the public aware about the disease and enjoining them to get tested for the presence of the virus in their system(Skills Portal, 2017). Also, conducting awareness activities through campaigns, trainings, forums, and seminars are a means to reduce and eliminate stigma and discrimination related to HIV and AIDS.

In this study, results show that majority (72%) of the teacher participants have not yet attended any HIV-related training. Notwithstanding the possibility that HIV and AIDS was not taught to them during their formal education, such result indicates that the participants may not yet be fully aware about HIV and AIDS. This can make them prone to pervading misconceptions and false information about HIV and stigmatize people they suspect to be HIV-positive.

Participants' Level of Awareness on HIV and AIDS

In order to determine the level of awareness of the participants on HIV and AIDS, they were asked to answer a set of questions focusing on the mode of transmission, disease process, and prevention and treatment of the virus and disease, respectively. Table 2 summarizes the findings on this part of the study.

Table 2. Participants' level of awareness on HIV and AIDS

PARAMETER	MPS	INTERPRETATION
Disease Process	65.8	Average Awareness
Mode of Transmission	47.4	Low Awareness
Prevention and Treatment	70.8	Average Awareness
Overall Awareness	61.3	Average Awareness

Scale: 76% and above - 'high awareness'
51-75% - 'average awareness'
50% and below - 'low awareness'

Looking at Table 2, it can be seen that the participants generally have average awareness on HIV and AIDS as shown by the mean percentage score of 61.3 percent. Such result is primarily due to the participants' average awareness on the disease process (65.8%) and prevention and treatment (70.8%) of HIV and AIDS. Nevertheless, it has to be emphasized that while they generally have average awareness about the virus and the disease, their awareness on its mode of transmission is found to be low (47.4%). This coincides with the findings of Lucero (2017), Mazloomy and Baghianimoghadam (2008), and Bankole and Mabekoje (2008), reporting their participants' low awareness on the mode of transmission of HIV and AIDS.

According to the Center for Disease Prevention and Control (2011), knowing how communicable diseases spread is quite important for it will prevent a person from acquiring the disease. Understanding the mode of disease transmission, however, has been a neglected topic that is why several misconceptions arise in the perception of the public (Antonovics, 2017). Regarding HIV transmission, Avert.Org (2019) cited that people usually mistakenly thought that HIV can be

transmitted through insect bites, sneezing, and being in close contact with a person with HIV.

The participants' minimal awareness on HIV transmission could be revolving on the misconceptions pertaining to it. Such suggests that their misconceptions be corrected and the four major modes of HIV transmission, which are through sexual contact, through the sharing of contaminated needles among HIV drug users, through the transfusion of contaminated blood products, and from an infected mother to her baby during pregnancy, be subsequently reiterated to them.

Participants' Attitude towards Working with a Colleague with HIV and AIDS

The participants' attitude towards working with a colleague with HIV and AIDS was also determined in the study. According to Squire (2007), while we are entitled to our opinions, it is our moral responsibility to formulate non prejudicial or non-discriminatory opinions for our fellows; hence, we need to understand the facts relating to a particular issue in order to make fair judgements and decisions. He added that it is easier to judge and condemn a person who is HIV positive or who has AIDS than it is to reach out with understanding and acceptance. This may well be true but he enjoined people not to fall into the trap of becoming self-opinionated and self-righteous but, instead, try to understand the other person from their perspective and their point of view. Only then can people decide on how they would like others to react and how they would like them to treat them.

In this part of the study, the participants were asked to state their level of agreement on the 10 statements presented to them. Their level of agreement on each statement determines how positive their attitude is towards working with a colleague with HIV and AIDS. Based from the findings (Table 3), the participants signified either slightly positive or not positive attitude on the majority of the statements presented to them; thus, yielding an overall mean response of 2.3, interpreted as slightly positive. This indicates that the teacher participants generally have a slightly positive attitude towards working with a colleague with HIV and AIDS. Results show that they are not willing to share things and engage in an intimate relationship with a colleague with HIV and AIDS. They, however, are somewhat favorable with sharing the same room, working, and mingling with colleague with HIV and AIDS. In the midst of this attitude that they have, they still believe that people living with HIV and AIDS still deserve to receive the best medical treatment.

Table 3. Participants' attitude towards working with a colleague with HIV and AIDS

STATEMENT	MEAN RESPONSE	INTERPRETATION
It is OK for me to work with a person with HIV and AIDS in the same workplace.	2.6	Positive
It is OK for me to share things with a person with HIV and AIDS.	1.2	Not Positive
It is OK for me to share the same room with a person with HIV and AIDS.	1.7	Slightly Positive
It is OK for me to have an intimate relationship with a person with HIV and AIDS.	1.0	Not Positive
It is OK for me to befriend a person with HIV and AIDS.	2.8	Positive
People with HIV and AIDS should be allowed to work in a workplace where they are qualified to work.	1.9	Slightly Positive
People with HIV and AIDS still have a vital role to play in the society.	3.1	Positive
People with HIV and AIDS should enjoy the same right enjoyed by everyone.	2.9	Positive
People with HIV and AIDS should not be limited from mingling with anyone.	1.8	Slightly Positive
People with HIV and AIDS deserve to receive the best medical treatment.	3.5	Strongly Positive
OVERALL MEAN	**2.3**	**Slightly Positive**

Scale: 4 – 3.25 - 'vey positive'
3.24 – 2.5 - 'positive'
2.49 – 1.75 - 'slightly positive'
1.74 – 1 - 'not positive'

Negative attitude towards PLWHA consequently leads to stigma and discrimination, which eventually leads to the increment of HIV cases. The WHO (2011) cited fear of stigma and discrimination as the main reason why people are reluctant to get tested, disclose their HIV status, and take antiretroviral drugs. Stayles *et al.*, (2009) found that participants who reported high levels of stigma were over four times more likely to report poor access to care. This contributes to the expansion of the global HIV epidemic

and a higher number of AIDS-related deaths. Unwillingness to take an HIV test means that more people are diagnosed late, when the virus may have already progressed to AIDS. This makes treatment less effective, increasing the likelihood of transmitting HIV to others, and causing early death.

Relationship between the Participants' Demographic Profile and their Level of Awareness on HIV and AIDS

The significant relationship of the participants' demographic profile and their level of awareness on HIV and AIDS was determined in this study. This was done to find out if each participant's characteristic serves as a determinant of their awareness on the said virus and disease.

Table 4. Relationship between the participants' demographic profile and their level of awareness on HIV and AIDS

CHARACTERISTIC	p-VALUE*	INTERPRETATION
Age	0.057	Accept H_0
Sex	0.12	Accept H_0
Sexual Orientation	0.07	Accept H_0
Educational Attainment	0.27	Accept H_0
Attendance to HIV-related training	0.004	Reject H_0

*****$\alpha = 0.05$

As shown in Table 4, the p-values corresponding to the participants' age, sex, sexual orientation, and educational attainment when related to their level of awareness on HIV and AIDS are all more than five percent. This indicates that these parameters do not have significant relationship with HIV and AIDS awareness. Their' age, sex, sexual orientation, and educational attainment all do not have anything to do with their level of awareness on HIV and AIDS.

Nevertheless, attendance to HIV-related training is found to be significantly related to the participants' level of HIV and AIDS awareness. This implies that attendance to this kind of trainings can significantly affect how well the participants understand the concepts pertaining to HIV and AIDS awareness.

The above findings apparently highlight the importance of conducting HIV-related activities to increase one's lelvel of awareness on HIV and AIDS. An individual's personal characteristic will not readily determine how knowledgeable he or she is on the virus. Being exposed to the issue and providing accurate information about it are what are acutally ideal to make an individual be aware about HIV and AIDS. The findings herein, however, oppose that of Mazloomy and Baghianimoghadam (2008). They claimed in their study that age and sex were related to the level of HIV and AIDS awareness.

Relationship between the Participants' Level of Awareness on HIV and AIDS and Their Attitude towards Working with a Colleague with HIV and AIDS

This part of the study attempted to determine the sginificant relationship of the teacher participants' level of awareness on HIV and AIDS and their attitude towards working with a colleague with HIV and AIDS. As shown in Table 5, a positive Pearson R value and a p-value less than five percent are computed. This indicates a significant direct correlation between the aforementioned variables. Interpreting these, the data confirmed that the participants' attitude towards working with a colleague with HIV and AIDS would be more favorable if they will become more aware of the concepts and ideas pertaining to HIV and AIDS. This claim indeed agrees to Skill Portal (2017) citing that promoting HIV and AIDS awareness is necessary because this helps co-workers understand how to work together with HIV infected people, as a unit and not to stereotype or discriminate against those. HIV and AIDS awareness activities can help everyone to understand the disease, to boost staff morale, and create better employer/employee relationships.

Table 5. Relationship between the participants' level of awareness on HIV and AIDS and their attitude towards working with a colleague with HIV and AIDS

PEARSON R VALUE	p-VALUE*
0.15667	4.76×10^{-26}

CONCLUSIONS

In view of the findings gathered in the study, the following conclusions were formulated:

The majority of the teacher participants are heterosexual female millenials with a bachelor's degree who have not yet attended any HIV-related training or seminar.

The participants generally have average awareness on HIV and AIDS. They, however, specifically have low knowledge on its mode of transmission.

The participants have a slightly positive attitude towards working with a colleague with HIV and AIDS.

Attendance to an HIV-related seminar is found to be significantly related to the participants' level of awareness on HIV and AIDS.

Higher HIV and AIDS awareness among the participants results to a more positive attitude towards working with a colleague with HIV and AIDS.

Recommendations

In light of the delimitations and findings of the study, the following are hereby recommended:

Schools should include in its faculty development program the conduct of HIV and AIDS related trainings and seminars to increase awareness on the said virus and disease.

The participants should also be made aware of the other sexually transmitted infections, aside from HIV and AIDS.

The study may be replicated including a bigger sample size to further clarify the findings gathered herein.

The findings of this study may serve as reference for other researchers who are conducting studies pertinent to HIV and AIDS.

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