



Original Article

## The Influence of Parental Occupation and Parental Marital Status on Perception of HIV/AIDS Pandemic among Secondary School Students in Calabar Education Zone, Cross River State, Nigeria

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**Keywords:**

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Perception.*

The aim of this study was to determine the degree to which parental occupation and marital status of parents influence perception of HIV/AIDS pandemic among secondary school students in Calabar Education Zone. Ever since the advent of HIV/AIDS, several attempts and campaigns have been made by international bodies, agencies, the government, etc., to curtail and subdue the effect of the deadly disease. This attempt has made many to know the magnitude of danger the virus possesses to human life. However, in spite of these attempts, some students find it difficult to acknowledge and believe that HIV/AIDS exist. Perception of HIV/AIDS in this context, refers to the awareness students has about causes, mode of transmission, prevention, and treatment, especially intuitively on HIV/AIDS. The main purpose of this study was to determine the influence of parental occupation and marital status of parents on perception of HIV/AIDS pandemic among secondary school students in Calabar Education Zone. The population of this study was made up of all the SS1, 2, and 3 Students and 1,200 students selected randomly as the sample for this study. Data was collected using was a facts finding questionnaire titled family variables and students perception of HIV/AIDS' (FVSPA). Major findings after analysis were thus; parental occupation has significant influence on students' perception of HIV/AIDS. Parental marital status has significant influence on students' perception of HIV/AIDS. It was recommended that Parents should, against all odds carve out time daily or weekly to have an interactive session with their children in order to address the myths surrounding not just HIV/AIDS, but other relevant health issues. Parents should also create a conducive environment for their children to thrive and not

complicate issues by living in chaos which can predispose the children to a host of negative thinking and perceptions.

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## INTRODUCTION

Human Immunodeficiency Virus/Acquired Immune Deficiency Syndrome (HIV/AIDS) is a worldwide disease with its presence registered in the entire world. Acquired Immunodeficiency Syndrome (AIDS) is a multi-systemic illness caused by a retrovirus known as the Human Immunodeficiency Virus (HIV). The virus on entering the human body destroys the immune system, thereby leaving the victim susceptible life-threatening opportunistic infections and diverse diseases. Since its emergence in 1981, people in millions have been infected and millions of them have died. Since the outbreak of HIV/AIDS, combined efforts are being made by international bodies, the government, private bodies, and individuals to ameliorate the spread. But these efforts seem not to yield unsatisfactory results.

In the South-South region of Nigeria and precisely in Cross River State, some of the propellers of this epidemic include high and reckless sexual behaviour and low risk perception of HIV and its consequences (Ankomah, 2011). People form good and positive perception based on their awareness, education and cultural heritage; and form negative

perception due to insufficient awareness, and cultural belief system. Student's perception in this study, refers to the way they understand HIV/AIDS - the knowledge and understanding they have as touching the epidemic. Their perception can either be influenced by religion, exposure, mental set, attitude, family background, expectation, or desire at any given moment, hence they can also perceive wrongly.

The poor-risk perception and perhaps the involvement in reckless sexual activities among students depend partly on the type of family they live in. Students whose parents are medical doctors according Zhang and Uyau (2013) often have access to good information concerning sexually transmitted diseases and will always have a prior information on how to prevent and control the diseases. They always perceive diseases such as HIV as a time bomb that must be avoided if one is to fulfil his or her potential in life because such diseases have it way of cutting someone's life early enough (Zhang & Uyau, 2013).

Farid and Zaibun (2012) carried out a study on effect of parental occupational status on secondary school students' HIV/AIDS awareness and

vulnerability in Karak district, Pakistan. One thousand five hundred students were selected from 60 government boy's high school in Karak district as a sample of the study. They classified parents into four classes based on their occupation; class 1 (Bankers), class 2 (Engineers), class 3 (Medical doctors), and class 4 (farmers). The result indicated that those students whose parents belong to class 1 scores high grade in Sex education/sexually transmitted Diseases awareness than the other classes in comparison. Likewise, the students belonging to class 2 (Engineers), were more vulnerable to HIV infection than those from Class 3 (Medical Doctors), and then followed by class 1, and class 4 (Farmers) were the least on the line respectively. Therefore, it is important to note that parents' occupation plays a significant role on students' sexuality education and awareness.

Similarly, parental marital status plays a significant role in regards to how students perceive HIV/AIDS. In the modern society, most families are faced with stress such as pressure and misunderstanding that tend to break homes. This according to Otalo and Baniner (2013) sometimes causes misconceptions and perception either from the parents (father or mother), children, relatives, or all of them. Karl (2005), maintained in his theory of family disintegration that there is a mountain of scientific evidence showing that when families disintegrate, children often end up with intellectual, physical, and emotional perception of life's processes or occurrence that persist for life. The child's home and his family offer the best education since his parents serve as a first teacher. The parents if present, together lay a solid foundation for the desired social, moral, emotional, spiritual, and intellectual well-being of the child. Thus, according to Etowa (2014), the training a child receives from home is of great importance in his total personality (self-concept, self-efficacy, self-esteem, self-perception, self-will, locus of control etc.) formation and his academic performance.

Derick et al. (2012) in their study on the impact of HIV pandemic on broken homes and the children perception in secondary schools in Oyo state Nigeria, showed that students whose parents are married perceive HIV/AIDS pandemic as an act of immorality and sexual perversion among families in Nigeria. Also, the mean value for married couples

was relatively high and relates positively with children perception of HIV knowledge with a value of 2.47 and 2.49 respectively. Comparatively, the scores fall below the average mean of 2.50. The result also indicated a high student perception of stigmatization of unmarried couples who are infected with HIV/AIDS pandemic in Oyo State, Nigeria. They summarized by stating that children from married couples have a higher perception of the pandemic effect HIV have on the family more than children from the unmarried couples and single.

Risk of HIV worsens if people have branded behaviour toward others living with AIDS as they will not want to go for HIV testing (Peltzer et al., 2004). Individuals living with this kind of mindsets are less informed about HIV; their perception is such that they believe HIV is transmitted via sources such as shaking of hands, hugging, toilet seats, air, and toilet paper, etc. However, it appears that the younger people are less likely to be getting themselves tested for HIV compared to older people with a perception that they are immune against HIV infection. The researcher has also observed that some students tend to believe that HIV is a disease sent from God, serving as punishment for those that live in immorality.

### **Purpose of the Study**

The main purpose of this study was to determine the influence of parental occupation and parental marital status on perception of HIV/AIDS pandemic among secondary school students in Calabar Education Zone. Specifically, the objectives of the study were:

- To find out if parental occupation influence students' perception of HIV/AIDS pandemic.
- To determine if parental marital status influence students' perception of HIV/AIDS pandemic.

### **Research Hypothesis**

The following null hypotheses were tested at .05 level of significance:

- Parental occupation has no significant influence on students' perception of HIV/AIDS pandemic.

- There is no significant influence of parental marital status on students’ perception of HIV/AIDS pandemic.

**METHOD**

The research design employed for this study was the ex-post-facto method. This design was employed since the research studied the phenomena after its occurrence. Furthermore, the variables under study were not inherently manipulated by the researchers. The population of the study was made up of all the secondary school students in Calabar Education Zone. The sampling technique used to select the sample was the stratified random sampling technique in other to determine a proportional representation of respondent’s from all the study zones. A total of one thousand two hundred students from all the zones made up the sample of the present study.

**Instrumentation**

The instrument for data collection was a facts finding questionnaire designed by the authors titled ‘Family Variables and Students Perception of HIV/AIDS’ (FVSPA). The instrument was given to 50 students for trial testing in a population outside the target population of this study. Item development was derived from the conceptual definition of variables. Cronbach Alpha was used to ascertain the reliability coefficients which ranged between .710 - .930. Thus, indicating that the instrument was highly reliable.

**Data Analysis**

One-way ANOVA was used to determine the influence on perception of HIV/AIDS among secondary school students in Calabar Education Zone, Cross River State, Nigeria for the two hypotheses.

*H<sub>01</sub>: Parental occupation does not significantly influence students’ perception of HIV/AIDS pandemic.*

*H<sub>02</sub>: There is no significant influence of parental marital status on students’ perception of HIV/AIDS pandemic.*

**RESULTS**

**Hypothesis One**

*Parental occupation does not significantly influence students’ perception of HIV/AIDS pandemic.*

To test hypothesis one, one-way analysis of variance (ANOVA) was used with parental occupation (father and mother separately) as factor and each of the sub-variables of HIV/AIDS perception as the dependent variable. The F-ratio was used to test for the significance of the main influence and fisher’s Least Significant Difference (LSD) test as post hoc test. The results are given in *Table 1*.

**Table 1: Students’ perception of HIV/AIDSs by their fathers’ occupation**

Name of variable	Father’s Occupation	N	Mean	Std Dev	Std Err	Min	Max
Perception of HIV/AIDSs Causes	Public servant	538	13.944	2.233	0.096	7	16
	Self employed	265	13.143	2.079	0.128	9	16
	Business	284	13.405	1.764	0.105	9	16
	Farming	105	12.629	2.049	0.2	10	16
	Total	1192	13.522	2.121	0.061	7	16
Perception of HIV/AIDSs Prevention	Public servant	538	11.558	1.932	0.083	7	16
	Self employed	265	11.143	2.277	0.14	7	16
	Business	284	10.359	2.634	0.156	5	15
	Farming	105	11.438	2.538	0.248	6	15
	Total	1192	11.17	2.297	0.067	5	16
Perception of HIV/AIDSs transmission	Public servant	538	11.545	1.731	0.075	7	16
	Self employed	265	11.321	1.649	0.101	8	15
	Business	284	11.437	1.714	0.102	7	15

Name of variable	Father's Occupation	N	Mean	Std Dev	Std Err	Min	Max
	Farming	105	11.048	1.821	0.177	7	13
	Total	1192	11.425	1.721	0.05	7	16
Perception of HIV/AIDs treatment	Public servant	538	12.364	2.354	0.101	7	16
	Self employed	265	11.562	2.108	0.13	9	16
	Business	284	11.042	2.19	0.13	7	16
	Farming	105	11.2	1.41	0.138	10	15
	Total	1192	11.769	2.263	0.066	7	16

**Table 2: One-way ANOVA of students' perception of HIV/AIDs by their fathers' occupation**

Research Variable	Source of Variation	Sum of squares	Df	Mean square	F- value	P-value
Perception of causes	Between groups	221.607	3	73.869	17.087*	.000
	Within groups	5135.825	1188	4.323		
	Total	5357.433	1191			
Perception of Prevention	Between groups	275.290	3	91.763	18.150*	.000
	Within groups	6006.479	1188	5.056		
	Total	6281.768	1191			
Perception of transmission	Between groups	25.569	3	8.523	2.890*	.034
	Within groups	3503.786	1188	2.949		
	Total	3529.355	1191			
Perception of treatment	Between groups	385.984	3	128.661	26.759*	.000
	Within groups	5712.110	1188	4.808		
	Total	6098.094	1191			

\* Significant at .05 level  $P < .05$

From *Table 1* and for perception HIV/AIDs causes, those whose parents were public servants had the highest mean score ( $\bar{x} = 13.944$ ) followed by those whose fathers were businessmen ( $\bar{x} = 13.405$ ) and the least were those whose father were farmers. This pattern was observed for perception of HIV/AIDs transmission. With respect to perception of HIV/AIDs prevention the “public servant” group was highest ( $\bar{x} = 11.558$ ) seconded by the “farming” group ( $\bar{x} = 11.438$ ) and the least was the “business” group ( $\bar{x} = 10.359$ ). In terms of perception of HIV/AIDs treatment, the “public servant” group was highest ( $\bar{x} = 12.364$ ) seconded by the “self-employed” group ( $\bar{x} =$

11.562) and the least group was the “business” group ( $\bar{x} = 11.042$ ).

The P-values (.000 & .034) associated with the computed F-values) 17.087, 18.150, 26.759 & 2.890) for perception of HIV/AIDs causes, prevention, treatment, and transmission respectively, are less than .05 (see *Table 2*). Hence the null hypothesis was entirely rejected. This means that father's occupation has significant influence on students' perception of HIV/AIDs.

The results of the analysis for the influence of mother's occupation on students' perception of HIV/AIDs are presented in *Table 3*.

**Table 3: Students' perception of HIV/AIDS by their mothers' occupation**

Name of variable	Mother's occupation	N	Mean	Std Dev	Std Er	Min	Max
Perception of HIV/AIDS Causes	Public servant	309	13.77	2.171	0.12	8	16
	Self employed	387	13.38	2.045	0.1	10	16
	Business	388	13.76	2.03	0.1	9	16
	Farming	108	12.47	2.219	0.21	7	16
	Total	1192	13.52	2.121	0.06	7	16
Perception of HIV/AIDS Prevention	Public servant	309	11.22	1.965	0.11	7	16
	Self employed	387	10.99	2.528	0.13	5	16
	Business	388	11.25	2.309	0.12	6	16
	Farming	108	11.4	2.25	0.22	7	15
	Total	1192	11.17	2.297	0.07	5	16
Perception of HIV/AIDS transmission	Public servant	309	12.08	1.399	0.08	9	15
	Self employed	387	11.39	1.776	0.09	7	16
	Business	388	11.11	1.682	0.09	7	15
	Farming	108	10.83	1.941	0.19	7	14
	Total	1192	11.43	1.721	0.05	7	16
Perception of HIV/AIDS treatment	Public servant	309	11.61	2.296	0.13	7	16
	Self employed	387	11.73	2.195	0.11	9	16
	Business	388	11.74	2.333	0.12	8	16
	Farming	108	12.47	2.044	0.2	10	16
	Total	1192	11.77	2.263	0.07	7	16

**Table 4: One-way ANOVA of students' perception of HIV/AIDS by their mothers' occupation**

Research Variable	Source of Variation	Sum of squares	Df	Mean square	F- value	P-value
Perception of causes	Between groups	168.993	3	56.331	12.898*	.000
	Within groups	5188.440	1188	4.367		
	Total	5357.433	1191			
Perception of prevention	Between groups	22.196	3	7.399	1.404	.000
	Within groups	6259.572	1188	5.269		
	Total	6281.768	1191			
Perception of transmission	Between groups	210.291	3	70.097	25.090*	.000
	Within groups	3319.064	1188	2.794		
	Total	3529.355	1191			
Perception of treatment	Between groups	62.070	3	20.690	4.072*	.007
	Within groups	6036.024	1188	5.081		
	Total	6098.094	1191			

\* Significant at .05 level  $P < .0$

The results in *Table 3* and for perception of HIV/AIDS causes, the “public servant” group was highest ( $\bar{x} = 13.774$ ) seconded by the “business” group ( $\bar{x} = 13.760$ ) and the least was the “farming” group ( $\bar{x} = 12.472$ ). With respect to perception HIV/AIDS prevention, the “farming” group was highest ( $\bar{x} = 11.398$ ) seconded by the “business” group ( $\bar{x} = 11.250$ ) while the least was

the “self-employed” group ( $\bar{x} = 10.985$ ). In terms of perception of HIV/AIDS transmission, the “public servant” group was highest ( $\bar{x} = 12.081$ ) seconded by the “self-employed” group ( $\bar{x} = 11.385$ ) and the least was the “farming” group ( $\bar{x} = 10.833$ ). In the case of perception of HIV/AIDS treatment, the “farming” group was highest ( $\bar{x} = 12.472$ ) followed by the “business”

group ( $\bar{x} = 11.735$ ) while the least was “public servant” group ( $\bar{x} = 11.612$ ).

The P-values (.000 & .007) associated with the computed F-values (12.898, 25.090 & 4.072) for perception of HIV/AIDs causes, transmission, and treatment respectively, are less than .05, while the P-value (.240) associated with the computed F-value (1.404) for perception of HIV/AIDs prevention was greater than .05 (see *Table 4*). As a result, the null hypothesis was rejected for

perception of HIV/AIDs causes, transmission, and treatment but retained for perception of HIV/AIDs prevention. This findings imply that mother’s occupation significantly influences students’ perception of HIV/AIDs causes, transmission, and treatment but not significantly on their perception of HIV/AIDs prevention.

To locate the pair of means responsible for the significant results, LSD test was carried out and the results are presented in *Table 5*.

**Table 5: LSD multiple (pairwise) comparison of students’ perception of HIV/AIDs by parents’ occupation**

Parent variable	Parents’ Occupation	Public	Self employed	Business	Farming
<b>Father’s</b>					
Perception of HIV/AIDs causes	Public servant	13.947**	.801	.539*	1.316*
	Self employed	.000	13.143	.262	.515*
	Business	.000	.141	13.405	.776*
	Farming	.000	.032	.001	12.629
Perception of HIV/AIDs prevention	Public servant	11.558**	.414*	1.198*	.120
	Self employed	.014	11.143	.784*	.295
	Business	.000	.000	10.359	1.079*
	Farming	.618	.256	.000	11.438
Perception of HIV/AIDs transmission	Public servant	11.545**	.224	.108	.497*
	Self employed	.083	11.321	.116	.273
	Business	.391	.430	11.437	.389*
	Farming	.007	.168	.048	11.200
Perception of HIV/AIDs treatment	Public servant	12.364**	.802*	1.322*	1.164*
	Self employed	.000	11.562	.520*	.362
	Business	.000	.006	11.042	.158
	Farming	.000	.152	.529	11.048
<b>Mother’s</b>					
Perception of HIV/AIDs causes	Public servant	13.774**	.399*	.013	1.301*
	Self employed	.013	13.375	.386*	.902*
	Business	.934	.010	13.760	1.288*
	Farming	.000	.000	.000	12.472
Perception of HIV/AIDs transmission	Public servant	12.081**	.696*	.973*	1.248*
	Self employed	.000	11.385	.277*	.552*
	Business	.000	.021	11.108	.275
	Farming	.000	.002	.131	10.833
Perception of HIV/AIDs treatment	Public servant	11.612**	.120	.123	.861*
	Self employed	.487	11.731	.003	.741*
	Business	.475	.984	11.734	.738*
	Farming	.001	.003	.003	12.472

\* Significant at .05 level.  $P < .05$   
 \*\* Values along main diagonal are group means, above it is mean differences (MD) and below it is corresponding P-values.

From *Table 5*, for father occupation and with respect to perception of HIV/AIDS causes, only the difference between “self-employed” and “business” groups was not significant. In terms of perception of HIV/AIDS prevention, the difference between “farming” group and “public servant” group (MD = .120, P = .618) and self-employed group (MD = .273, P = .256) were not significant. With respect to perception of HIV/AIDS transmissions the “farming” group was significantly different from the “public servant” group (MD = .497, P = .007) and “business” group (MD = .389, P = .048). All the remaining comparisons were not significant. With regards to perception of HIV/AIDS treatment, the difference between “farming” group and “self-employed (MD = .362, P = .152) and “business” group (MD = .158, P = .529) were not significant. All other paired comparisons were significant.

In the case of the influence of mother’s occupation and for perception of HIV/AIDS causes, only the difference between the “public servant” and “business” was not significant comparisons (.386 ≤

MD ≤ 1.301, .000 ≤ P ≤ .013). Similarly, in terms of perception of HIV/AIDS transmission, only the difference between business and farming groups was not significant (MD = .275, P = .131). All other paired comparisons were significant (.696 ≤ MD ≤ 1.248, .000 ≤ P ≤ .021). For perception of HIV/AIDS treatment, the “farming” group was significantly different from “public servant” group (MD = .861, P = .001), self-employed group (MD = .741, P = .0030 and business group (MD = .738, P = .003). All other paired comparisons were not significant.

**Hypothesis two**

*There is no significant influence of parental marital status on students’ perception of HIV/AIDS pandemic.*

To test hypothesis two, the same method applied in testing hypothesis one was used with parents’ marital status as factor. *Table 4* is a summary of the results obtained.

**Table 6: Students’ perception of HIV/AIDS of their parent’s marital status**

Name of variable	Parents marital status	N	Mean	Std Dev	Std Er	Min	Max
Perception of HIV/AIDS Causes	Single	84	13.369	2.492	0.272	8	16
	Married	883	13.504	2.123	0.071	7	16
	Divorced	164	13.171	1.798	0.14	10	16
	Widowed	61	13.492	2.278	0.291	9	16
	Total	1192	13.522	2.121	0.061	7	26
Perception of HIV/AIDS Prevention	Single	84	11.667	2.02	0.22	8	16
	Married	883	11.195	2.224	0.075	6	16
	Divorced	164	10.86	2.595	0.203	5	15
	Widowed	61	10.951	2.717	0.348	7	15
	Total	1192	11.17	2.297	0.067	5	16
Perception of HIV/AIDS transmission	Single	84	11.25	1.969	0.215	7	14
	Married	883	11.427	1.682	0.057	7	16
	Divorced	164	11.976	1.41	0.11	10	15
	Widowed	61	10.163	2.002	0.256	7	13
	Total	1192	11.425	1.721	0.05	7	16
Perception of HIV/AIDS treatment	Single	84	11.405	1.784	0.195	9	15
	Married	883	11.777	2.3	0.077	7	16
	Divorced	164	11.605	2.186	0.171	7	16
	Widowed	61	12.344	2.442	0.313	8	16
	Total	1192	11.769	2.263	0.066	7	16



**Table 7: One-way ANOVA of students' perception of HIV/AIDs of their parent's marital status**

Research Variable	Source of Variation	Sum of squares	of Df	Mean square	F- value	P-value
Perception of causes	Between groups	23.140	3	9.380	2.091	.100
	Within groups	5329.293	1188	4.486		
	Total	5357.433	1191			
Perception of Prevention	Between groups	39.979	3	13.326	2.536	0.50
	Within groups	6241.790	1188	5.254		
	Total	6281.768	1191			
Perception of transmission	Between groups	149.303	3	49.768	17.492*	.000
	Within groups	3380.052	1188	2.845		
	Total	3529.355	1191			
Perception of treatment	Between groups	32.281	3	10.760	2.107	.98
	Within groups	6065.813	1188	5.106		
	Total	6098.094	1191			

\* Significant at .05 level  $P < .05$

From Table 6 and for perception of HIV/AIDs causes, students whose parents were married (married group) had the highest mean score ( $\bar{x} = 13.$ ), next was the widowed group ( $\bar{x} = 13.492$ ) and the least was the divorced group ( $\bar{x} = 13.131$ ). For perception of HIV/AIDs prevention the single group had the highest mean score ( $\bar{x} = 11.667$ ) next was the married group ( $\bar{x} = 11.195$ ) and the least was the divorced group ( $\bar{x} = 10.860$ ). For perception HIV/AIDs transmission, the divorced group was highest ( $\bar{x} = 11.976$ ) next was the married group ( $\bar{x} = 11.427$ ) while the least was the widowed group ( $\bar{x} = 10.163$ ). In terms of perception of HIV/AIDs treatment, the widowed group was highest ( $\bar{x} = 12.344$ ) followed by the married group ( $\bar{x} = 11.777$ ) and the least was the single group ( $\bar{x} = 11.405$ ).

The P-values (.100, .050 & .098) associated with the computed F-values (2.091, 2.536 & 2.107) for perceived causes, prevention, and treatment respectively, are greater than .05. However, the P-value (.000) associated with the computed F-value (17.492) was less than .05 (see Table 6). Consequently, the null hypothesis was rejected for perception of HIV/AIDs transmission but retained for perception of causes, prevention, and treatment. This revelation imply that parents' marital status significantly influences students' perception of HIV/AIDs transmission but not significantly on the perception of causes, prevention, and treatment.

To determine the pair of means that accounts for the significant results, LSD test was carried out and Table 8 is a summary of the results.

**Table 8: LSD multiple (pairwise) comparison of students' perception of HIV/AIDs transmission by parents' marital status**

Marital status	Single	Married	Divorced	Widowed
Single	10.823**	.177	.726*	1.086*
Married	.358	11.316	.549*	1.263*
Divorced	.001	.000	11.758	1.812*
Widowed	.000	.000	.000	.9651

\* Significant at .05 level.  $P < .05$

\*\* Values along main diagonal are group means, above it is mean differences (MD) and below it is corresponding P-values.

From Table 8, only the difference between single and married groups (MD = .177,  $P = .358$ ) was not

significant. All other paired comparisons were significant ( $.549 \leq MD \leq 1.812$ ,  $.000 \leq P \leq .001$ ).

## DISCUSSION

The statistical analysis and test of hypothesis one of this study has revealed the facts that father's occupation significantly influences student's perception of HIV/AIDS causes, prevention, transmission, and treatment, but mother's occupation significantly influences student's perception of HIV/AIDS causes, transmission, and treatment but not on HIV/AIDS prevention.

Furthermore, with regards to perception of HIV/AIDS causes, students whose fathers were public servants were highly informed, next were students whose fathers were businessmen, and the least were those whose fathers were into farming. This pattern was observed equally for perception of HIV/AIDS transmission. With respect to HIV/AIDS perception of prevention, the "Public servant" group were seen to be highly informed, next were students whose parents were under the "Farming" group, and the "Business" group was the least. In terms of perception of HIV/AIDS treatment, the "public servant" group were seen to be highly informed, next were students whose parents were "self-employed", and the least were those under the "business" group.

For the mothers and with respect to perception of HIV/AIDS causes, the "public servant" group were highly informed, next were the "business" group, and the least were those under the "farming" group. With respect to perception of HIV/AIDS prevention, the "farming" group were highly informed, next were the "business" group, and the least were the "self-employed" group. In terms of perception of HIV/AIDS transmission, the "public servants" group were highly informed, next were the "self-employed" group, and the least were the "farming" group. In the case of HIV/AIDS perception of treatment, the farming group were the highest, next were the "business" group, and the least were the "public servants" group.

The above results are in tandem with Farid and Zaibun (2012) study findings on the effect of parental occupational status on secondary school students HIV/AIDS awareness and vulnerability in Pakistan. Their study revealed that parent's occupation plays a significant role in student's awareness of HIV/AIDS. The study also revealed

that parents with highly esteemed occupation provide necessary facilities needed for the enhancement of their children's health safely and insurance. No wonder in the present study, students whose parents are under the public servant group, were seen to be more aware and knowledgeable than any other group in relation to what HIV/AIDS is. In the light of these revelations, one can maintain that prestigious occupation of parents will result in students who are supported and encouraged towards the attainment of lives goals and achievement and will never be derailed by any health pandemic including HIV/AIDS, since they are very aware of the scourge of HIV/AIDS pandemic. Whereas, less prestigious occupation of parents will result in students who are faced with a lot of issues both at home and school which is capable of hindering them from taking part fully in social activities which in turn have the chances of giving them awareness in relation to deadly diseases such as HIV/AIDS.

In a separate study however, the American Centre for HIV/AIDS Control and Eradication (ACHCE) (2015) revealed that parental occupation does not significantly influence students' perception of HIV/AIDS infection. The study also showed that students whose parents' occupation were less professionals like farmers were less likely to contact sexually transmitted disease such as HIV/AIDS because of their in-sociable attitudes.

While the afore revelation by ACHCE (2015) does not agree in totality with the present study where fathers' occupation with perception sub-variables (i.e., HIV/AIDS perception of; causes, prevention, transmission and treatment) all showed significant influence on students perception of HIV/AIDS, the mothers occupation however, did not show significant influence on students perception of HIV/AIDS prevention but showed significance for perception of causes, transmission and treatment. The present study however maintains that parental occupation significantly influences students' perception of HIV/AIDS as the present study reveals.

For hypothesis two, the statistical analysis and test of this hypothesis has exposed the facts that parent's marital status has no significant influence on students' perception of HIV/AIDS causes,

prevention, and treatment but it does significantly on their perception of HIV/AIDS transmission.

With regards to perception of HIV/AIDS causes, students whose parents were married were more informed, next were those under the widowed parents, and the least were those under the divorced parents. Then for perception of HIV/AIDS prevention, those under single parents were the highly informed, next were those under the married parents, and those under the divorced parents were the least. With respect to perception of HIV/AIDS transmission, those under the divorced parents were highly informed, followed by those under the married parents, and the least were those under the widowed parents. In terms of perception of treatment, those under the widowed parents were highly informed, followed by the married group, and the least were those under the single parents.

Although from the statistical analysis, parents' marital status has no significant influence on student's perception of HIV/AIDS causes, prevention, and treatment, students raised from each of the marital status category were still seen to be informed on the possible causes, prevention, and treatment of HIV/AIDS by single parents. Worthy of note is the fact that, students raised by single parents (in this case, widowed, single parent and divorced) were seen to be more informed with emphasis to the perception of HIV/AIDS, than their counterparts under the married group. The reason here is that, students from married couples may not have been exposed to much information about HIV/AIDS as compared to students under single parenting. Suffice to add that, single parents seem to be extra careful with their children perhaps due to the (horrible) experiences they have had.

This finding is supported by Agokei et al. (2014) in their study to examine parents-students perception of family HIV/AIDS disease and family integration in Kenya. They found that one significant issue that normally spring up among married couples when it comes to HIV/AIDS infection is disclosure by the parents to the children knowing very well that it can change the children's view and opinion about their parents. The result further showed that there was a negative correlation existing between married couples' disclosure of their HIV/AIDS status and their family integration. The authors concluded that

there exists variance in students' perception of HIV/AIDS disease in their parents' home, with married couples having a high rate of undisclosed status to their children, while the divorced had a high rate of HIV/AIDS disclosure rate to their children. This according to the authors makes children from such homes to perceive HIV/AIDS pandemic as relatively destructive and instigate hatred against any parent infected with the disease.

The findings of this study disagree with a study carried out by Derick et al. (2012) on the impact of HIV pandemic on broken homes and the children perception by stating that children from married couples have a higher perception of the pandemic effect HIV have on the family more than children from the unmarried couples and single.

Nevertheless, the researchers maintain that, marital status has a significant influence on student's perception of HIV/AIDS pandemic with the students under the single parenting group being more informed about HIV/AIDS than those under the married group. This is further supported by a study carried out by Eugene *et al.* (2014) whose study revealed that students who come from unmarried women are more likely than students from married women to perceive the importance of using condoms or abstinence as a preventive strategy against HIV/AIDS.

## CONCLUSION

On the basis of the findings of this study, it was generally concluded that, parental occupation and parental marital status has significant influence on perception of HIV/AIDS pandemic among secondary school students' in Calabar Education Zone, Cross River State, Nigeria.

## Recommendations

- Parents should, against all odds carve out time daily or weekly to have an interactive session with their children in order to address the myths surrounding not just HIV/AIDS, but other relevant health issues.
- Parents should create a conducive environment for their children to thrive and not complicate issues by living in chaos which can predispose

the children to a host of negative thinking and perceptions.

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