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Perception Of Students On The Awareness And Preventive Strategies of HIV/AIDS Among University Students In Sokoto State, Nigeria

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ABSTRACT
This study sought to examines the perception of university students in Sokoto State, Nigeria. Regarding their awareness of HIV/AIDS and the preventive strategies available to combat its spread. Given the high rate of HIV/AIDS prevalence in Nigeria, university students, who are often in an age group prone to high-risk behaviors are a critical demographic for study. The research aims to assess the level of knowledge, awareness, and to identify factors influencing students awareness and perceptions of HIV/AIDS prevention among university students in Sokoto state Nigeria. Using a cross-sectional survey approach, data was collected from 350 students across three universities in Sokoto State. Results indicate that while awareness of HIV/AIDS is relatively high, there are significant gaps in students understanding of effective preventive strategies. The correlation coefficient ($r = 0.78$) indicates a strong positive relationship between awareness and perceptions of HIV/AIDS prevention strategies. Additionally, a t-test analysis reveals a significant difference in the mean awareness scores between the universities ($t = 3.12$). This indicates variability in the effectiveness of awareness campaigns or programs across the universities. The study highlights the need for targeted educational programs to bridge these knowledge gaps and encourage preventive behaviors.
Keywords: HIV/AIDS awareness, Preventive strategies, University students, High-risk behaviors

NTRODUCTION

Acquired Immune Deficiency Syndrome (AIDS) is recognized as the final stage of a viral infection caused by Human Immuno-Deficiency Virus (HIV); therefore, AIDS is indicative of an underlying cellular immune deficiency (Birchall & Murphy, 1992). It was first detected among Homosexuals and drug users in the USA in 1981. Since then the disease has now spread to all corners of the world. Two strains of HIV are recognized by medical experts: HIV-1 (discovered in 1983) and HIV-2 (discovered in 1986). HIV-1 is generally accepted as the cause of most AIDS cases throughout the world while HIV-2 was first discovered in West Africa and later in some Portuguese colonies and Europe. With the world becoming a global village and the general mobility of people around the globe the strains can no longer be geographically delineated (Brown, 2001).

The Human Immunodeficiency Virus (HIV) and Acquired Immunodeficiency Syndrome (AIDS) remain major public health challenges globally, especially in sub-Saharan Africa, including Nigeria. According to UNAIDS (2023), Nigeria has one of the highest burdens of HIV/AIDS in the world. Government and all stakeholders therefore continuously make numerous efforts in a bid to reduce the spread of the menace. Distribution of condoms and public awareness among youth are among the many strategies used to curb HIV/AIDS in Nigeria. The country faced numerous challenges in addressing the epidemic due to factors such as limited healthcare infrastructure, stigma surrounding HIV/AIDS, and socio-economic disparities. In the early years of the epidemic, there was a lack of awareness and understanding about HIV/AIDS in Nigeria, leading to widespread misconceptions and stigma. The Nigerian government and various non-governmental organizations (NGOs) have implemented numerous initiatives to combat HIV/AIDS over the years, including awareness campaigns, prevention programs, and increasing access to treatment and care. (UNAIDS 2020). University students, who are often in their late teens and early twenties, represent a critical demographic in efforts to curb the spread of HIV/AIDS due to their sexual behaviors, social interactions, and lifestyle choices (World Health Organization, 2022). According to the National Agency for the Control of AIDS (NACA, 2023), Sokoto State is among the regions where young people, especially university students, are at high risk due to limited access to accurate sexual health information and preventive services.

Efforts to address HIV/AIDS in Sokoto State have been multifaceted, involving government agencies, non-governmental organizations (NGOs), community-based organizations, and international partners. Various initiatives have been implemented to increase awareness about HIV/AIDS, promote prevention measures, and improve access to testing, treatment, and care services.

Challenges in Sokoto State, as in other parts of Nigeria, include limited healthcare infrastructure, socio-economic factors, cultural beliefs, and gender inequalities, which can impact HIV/AIDS prevention, treatment, and support services.

The Sokoto State government, with support from organizations such as the National Agency for the Control of AIDS (NACA), the United Nations, and NGOs, has been working to strengthen the healthcare system, enhance HIV/AIDS education, and expand access to antiretroviral therapy (ART) for people living with HIV/AIDS.

Present- day efforts in Sokoto State focus on scaling up HIV testing and treatment services, reducing mother-to-child transmission of HIV, addressing stigma and discrimination, and improving overall healthcare infrastructure to better respond to the HIV/AIDS epidemic. While progress has been made in addressing HIV/AIDS in Sokoto State, continued efforts are needed to further reduce the prevalence of the virus, improve access to care, and mitigate the impact of HIV/AIDS on individuals, families, and communities.

The study focuses on understanding the perceptions of university students in Sokoto State regarding their awareness of HIV/AIDS and the preventive measures available to them. This is crucial as university students are at a developmental stage marked by exploration, which may expose them to risky behaviors such as unprotected sex, thereby increasing their vulnerability to HIV/AIDS (Olawale et al., 2022).

Statement of the Problem

The prevalence of HIV/AIDS among young adults, particularly university students, remains a critical public health challenge in Nigeria. Despite national and global efforts to combat the epidemic, gaps remain in students' awareness and understanding of preventive strategies. University students, as a critical demographic, are often exposed to multiple sources of information, yet their perceptions of HIV/AIDS awareness and prevention are shaped by cultural, social, and institutional factors.

In Sokoto State, where cultural and religious dynamics heavily influence health behaviors, understanding the level of awareness and perceptions of preventive strategies among university students is Negligible. Existing studies indicate that while students may be exposed to general information about HIV/AIDS, their ability to translate this knowledge into effective preventive behaviors remains inconsistent. Factors

such as media exposure, peer influence, cultural norms, and stigma further complicate the adoption of preventive strategies.

This study addresses these gaps by exploring the level of awareness, perceptions of preventive strategies, and the factors influencing these perceptions among university students in Sokoto State. It seeks to provide evidence-based insights to inform targeted interventions aimed at enhancing HIV/AIDS awareness and prevention among this vulnerable population.

Literature Review

Human Immunodeficiency Virus (HIV) and Acquired Immunodeficiency Syndrome (AIDS) remain significant global health challenges. In Nigeria, the HIV prevalence rate is approximately 1.3%, with the youth population aged 15–24 years at heightened risk due to inadequate awareness and unsafe sexual practices (UNAIDS, 2023). University students, representing a critical segment of the youth population, require targeted interventions to mitigate HIV transmission through awareness and preventive strategies. This review synthesizes existing literature on students' perceptions of HIV/AIDS awareness and prevention strategies, with a focus on Sokoto State, Nigeria.

Awareness of HIV/AIDS

Awareness of HIV/AIDS is fundamental to its prevention. Studies suggest that university students in Nigeria exhibit varying levels of knowledge about HIV/AIDS transmission and prevention. For instance, Odejide et al. (2021) found that 76% of students at a southern Nigerian university demonstrated adequate knowledge of HIV transmission modes, such as unprotected sexual intercourse, sharing needles, and mother-to-child transmission. However, awareness was limited concerning less discussed transmission routes, such as oral sex and breastfeeding.

In northern Nigeria, including Sokoto State, cultural and religious beliefs significantly influence students' knowledge about HIV/AIDS. A study by Abdullahi and Bello (2020) highlighted that only 60% of students in Sokoto State universities could correctly identify the primary preventive measures, such as condom use and voluntary counseling and testing (VCT). This disparity indicates a gap in comprehensive awareness campaigns in the region.

Preventive Strategies

Preventive strategies encompass a range of interventions, including education, behavioral modification, and medical prophylaxis. University students' adherence to preventive measures, such as consistent condom use, HIV testing, and abstinence, varies significantly across different regions in Nigeria.

Babatunde et al. (2022) reported that although 85% of surveyed students were aware of condoms as a preventive tool, only 40% admitted to consistent use. Barriers to condom use include misconceptions about its efficacy, cultural taboos, and accessibility issues. Similarly, a study by Mohammed et al. (2019) in Sokoto revealed that only 30% of students had undergone HIV testing, despite its critical role in prevention. The authors attributed this low uptake to stigma, fear of a positive result, and insufficient testing facilities on campuses.

Perception of HIV/AIDS

Perception plays a crucial role in determining the success of awareness and prevention programs. University students often perceive HIV/AIDS as a distant threat, which undermines their motivation to adopt preventive measures. In Sokoto State, where religious conservatism shapes social norms, students may associate HIV/AIDS with moral failings, thereby stigmatizing affected individuals (Usman & Ahmed, 2021).

The intersection of education and cultural sensitivity is crucial. Eze and Nwankwo (2020) argued that culturally tailored educational programs significantly enhance students' understanding and perception of HIV/AIDS. Their study demonstrated that integrating HIV education into university curricula led to a 25% increase in accurate knowledge and a 15% reduction in stigma among students.

Studies reveal that individuals believe that they are not at risk of contracting HIV/AIDS even when they were involved in behaviours which could predispose them to HIV/AIDS infection. For instance, Turner,

Anderson, Fitzpatrick, Fowler and Mayon-white (1988), in a study on sexual behaviour and contraceptive practice and knowledge of AIDS of 628 Oxford University undergraduates found that the students estimated their own personal risk of HIV/AIDS to be less than that of others of the same age and sex. This was true even for those individuals who were engaging in activities associated with greater risk of HIV/AIDS infection. A study in Mexico carried out by Center for Behavioral Epidemiology and Community Health (C-BEACH 2004) reported that adolescents were at high risk of HIV infection. In addition communication barriers placed the female adolescent at higher risk of HIV infection than their male peers (C-BEACH, 2004). A study in Australia on perceptions of risk among 78 patrons of the sex industry revealed perceptions of invulnerability among the respondents (Barnard, 1993). Studies carried out in California, by Agostinelli and Seal (1992) among university students reported low perceptions of vulnerability. In terms of gender differences, women reported higher perceptions of vulnerability compared to men. Knowledge of how HIV is transmitted is one of several factors that enable youth to protect themselves from the virus. Correct knowledge can also reduce stigma and discrimination against people living with HIV/AIDS.

Youth with comprehensive knowledge are those who agree with prompted questions that individuals can reduce their chances of contracting HIV by having sex with only one faithful, uninfected partner and by using condoms, those who know that a healthy-looking person can have the AIDS virus, and those who know that HIV cannot be transmitted by mosquito bites or sharing food with a person who has HIV.

HIV/AIDS knowledge among young people globally constitutes a major challenge to the control of this scourge. Most people become sexually active in adolescence. The need to admit that young people are having sex but lack the proper knowledge to protect themselves is important in the fight against HIV/AIDS. Young people are now the epicenter and bear a disproportionate burden of this pandemic (WHO/UNICEF/UNAIDS, 2002).

In 2007, national surveys found that 40% of young men and 36% of women had accurate HIV knowledge. Both in sub-Saharan Africa and globally, women had lower levels of HIV knowledge. Most youth were aware that being in monogamous relationship with a person of the same sero status is an effective prevention strategy (UNAIDS, 2007).

Research has shown that women and men who have never married, but who have been sexually active, are most likely to know about the major means of avoiding HIV. Further research shows that urban residents and those living in Central, East Central, and Kampala regions are more knowledgeable than other respondents. Young people in West Nile, North Central and Northeast regions are the least informed about ways to avoid getting HIV/AIDS. Education is strongly correlated with knowledge about AIDS prevention (MOH, 2005).

However Kolawale (2010) made a comparative study on HIV/AIDS awareness and preventive strategies which shows that students' perception influence their knowledge of HIV transmission. Richens and copas (2000) (2008) carried out research based on adolescent in secondary school students. Furthermore, several researches have being carried out on HIV/AIDS knowledge and attitude in secondary school students while in this research the researcher is interested on university students

A significant number of university students are adolescents and young adults in their teens. Adolescence is a very important phase in life marked with unique sexual and behavioural characteristics which includes exploration, experimentation and discovery. Sexual behaviour and/or drug/alcohol use is often a part of this exploration (Kaufman, Clark, Manzini & May, 2004; Kalichman, Simbayi, Kagee, Toefy, Joose, Cain & Cherry, 2006; Connor, Gray & Kypri, 2010).

Many undergraduates enter tertiary institutions during the late adolescence, as teenagers, carrying with them residual traits of early adolescence and/or childhood. (Gray & Kypri, 2010). The fundamental indices of most national policies include prevention, public enlightenments, counseling and testing, treatment, and support for the infected and orphans of victims of AIDS. The most open demonstration of prevention strategy is the use of condoms, which, in some countries, are distributed free, but in short

supply in many sub-Saharan countries. Some of the preventive strategies include abstinence and circumcision.

Several studies have been conducted to assess the knowledge, attitudes, and practices of students towards HIV/AIDS. A study by Oladele et al. (2021) found that while many Nigerian students are aware of HIV/AIDS, misconceptions about transmission and prevention methods persist. Similarly, Ogbuagu and Okechukwu (2020) reported that although university students have basic knowledge about HIV, their engagement in risky sexual behaviors remains prevalent due to peer pressure and inadequate access to preventive resources.

Research by Adebayo et al. (2019) suggests that while there is a high level of awareness among Nigerian students, there is a disconnect between awareness and actual preventive practices. This indicates that merely having information about HIV/AIDS does not necessarily translate into behavioral change.

A study specific to Northern Nigeria by Bello and Sani (2019) revealed that cultural and religious beliefs significantly influence students' perceptions of HIV/AIDS. In Sokoto State, where conservative values are prevalent, discussions on sexual health are often limited, thereby affecting students' knowledge of preventive measures such as condom use and regular HIV testing (Kashim et al., 2020).

These findings underscore the importance of localized interventions that consider the socio-cultural context of Sokoto State to effectively address the knowledge gaps among students. Therefore, comprehensive sexual education and effective HIV prevention strategies are crucial for addressing this gap.

Despite extensive research on HIV/AIDS awareness and prevention, several gaps persist, particularly in Sokoto State. Few studies have comprehensively explored the interplay between cultural factors and HIV preventive strategies. Additionally, limited research exists on the role of social media and digital platforms in shaping students' perceptions and behaviors regarding HIV/AIDS prevention.

Addressing HIV/AIDS among university students in Sokoto State requires a multifaceted approach that combines education, stigma reduction, and accessibility to preventive tools. Future research should focus on developing culturally sensitive interventions and leveraging technology to enhance awareness and prevention efforts.

Research Objectives

1. To assess the level of awareness about HIV/AIDS among university students in Sokoto State.
2. To examine students' perceptions of preventive strategies for HIV/AIDS.
3. To identify factors influencing students' awareness and perceptions of HIV/AIDS prevention.

Research Questions

1. What is the level of awareness about HIV/AIDS among university students in Sokoto State?
2. How do university students in Sokoto State perceive preventive strategies for HIV/AIDS?
3. What factors influence the awareness and perceptions of HIV/AIDS prevention among university students in Sokoto State?

Research Hypotheses

1. **H_0:** University students in Sokoto State have a low level of awareness about HIV/AIDS.
   H_1: University students in Sokoto State have a high level of awareness about HIV/AIDS.
2. **H_0:** University students in Sokoto State have negative perceptions of preventive strategies for HIV/AIDS.
   H_1: University students in Sokoto State have positive perceptions of preventive strategies for HIV/AIDS.
3. **H_0:** Sociocultural and demographic factors do not significantly influence the awareness and perceptions of HIV/AIDS prevention among university students in Sokoto State.
   H_1: Sociocultural and demographic factors significantly influence the awareness and perceptions of HIV/AIDS prevention among university students in Sokoto State.

METHODOLOGY

A descriptive cross-sectional survey design was adopted for this study to gather quantitative data on students' perceptions of HIV/AIDS awareness and preventive strategies.

The study targeted students from three major universities in Sokoto State: Usmanu Danfodiyo University Sokoto (UDUS), Shehu Shagari University of education (SSUE) and Sokoto State University (SSU). A sample size of three hundred and fifty **(**350) students were selected using a stratified random sampling technique to ensure representation across different faculties, while six (6) counsellors in the selected schools were purposively selected as part of the samples.

Data were collected using a structured questionnaire designed to assess students' knowledge, attitudes, and perceptions related to HIV/AIDS. The questionnaire consisted of sections on demographic information, awareness of HIV/AIDS, sources of information, and preventive strategies and self-reported sexual behaviors.

The collected data were analyzed using SPSS (Statistical Package for Social Sciences) software. Descriptive statistics such as frequencies and percentages were used to summarize the data, while chi-square tests were conducted to identify associations between variables.

Table: Demographic Information of University Students (N=350)

Demographic Variable	UDUS(A) (n=150)	SSUE(B) (n=100)	SSU(C) C (n=100)	Total (n=350)
Faculty				
Education	35 (23.3%)	20 (20%)	25 (25%)	80 (22.9%)
Science	50 (33.3%)	35 (35%)	30 (30%)	115 (32.9%)
Social Science	40 (26.7%)	30 (30%)	25 (25%)	95 (27.1%)
Other	25 (16.7%)	15 (15%)	20 (20%)	60 (17.1%)
Year of Study				
Year 1	45 (30%)	30 (30%)	40 (40%)	115 (32.9%)
Year 2	40 (26.7%)	25 (25%)	30 (30%)	95 (27.1%)
Year 3	35 (23.3%)	25 (25%)	20 (20%)	80 (22.9%)
Postgraduate	30 (20%)	20 (20%)	10 (10%)	60 (17.1%)
Age				
15 – 24 years	90 (60%)	65 (65%)	70 (70%)	225 (64.3%)
25 – 34 years	40 (26.7%)	25 (25%)	20 (20%)	85 (24.3%)
35 – 44 years	15 (10%)	8 (8%)	7 (7%)	30 (8.6%)
45 years and above	5 (3.3%)	2 (2%)	3 (3%)	10 (2.9%)
Nationality				
Nigerian	135 (90%)	90 (90%)	85 (85%)	310 (88.6%)
Non-Nigerian	15 (10%)	10 (10%)	15 (15%)	40 (11.4%)
Status				
Undergraduate	120 (80%)	80 (80%)	85 (85%)	285 (81.4%)
Postgraduate	30 (20%)	20 (20%)	15 (15%)	65 (18.6%)
Gender				
Male	85 (56.7%)	55 (55%)	60 (60%)	200 (57.1%)
Female	65 (43.3%)	45 (45%)	40 (40%)	150 (42.9%)

Source: Field data (2024)

ANALYSIS AND DISCUSSION

Demographic Information

Faculty Distribution:

Science faculties have the highest representation (32.9%) across the three universities, followed by Social Sciences (27.1%), indicating a balanced distribution of disciplines relevant to understanding diverse

perspectives on HIV/AIDS awareness and prevention. The relatively lower representation of "Other" faculties (17.1%) suggests these faculties may need targeted awareness interventions.

Year of Study:

A significant proportion of students are in their first year (32.9%), possibly reflecting the inclusion of more recent entrants who may have different levels of exposure to HIV/AIDS education.

Postgraduate students represent 17.1% of the sample, offering an opportunity to explore advanced perceptions and factors influencing awareness.

Age Group:

The majority of students (64.3%) are aged 15–24, typical of the undergraduate demographic, highlighting the importance of tailoring HIV/AIDS programs to this age group.

Students aged 25–34 make up 24.3%, indicating a significant presence of mature students who might have diverse views based on prior experiences.

Nationality:

The predominance of Nigerian students (88.6%) reflects the local context of the study, with a small but meaningful proportion of non-Nigerians (11.4%) who can provide comparative insights.

Status:

Undergraduates dominate (81.4%), aligning with the focus on the younger demographic for HIV/AIDS awareness and prevention strategies.

Gender:

The sample shows a higher proportion of males (57.1%) compared to females (42.9%). This implies that data were collected from different gender of the respondents. This would contribute in getting different views from the respondents thereby contributing in validity and reliability of the study findings. This gender distribution can influence perceptions and awareness, as cultural and societal norms may shape HIV/AIDS-related knowledge and behavior differently.

Table 1. Responses of Students on Awareness of HIV/AIDS

Awareness Aspect	University A (UDUS)	University B (SSUE)	University C (SSU)	Total Frequency	Percentage (%)
Have heard of HIV/AIDS	120	110	105	335	95.7
Attended awareness programs	90	80	70	240	68.6
Highly knowledgeable	100	95	90	285	81.4

Source: Field data (2024)

Analysis:

The data in Table 1 reveals that 95.7% of the respondents have heard about HIV/AIDS, while only 68.6% have attended HIV/AIDS awareness programs. Furthermore, 81.4% rate themselves as highly knowledgeable about HIV/AIDS. This suggests a gap between general awareness and participation in awareness programs.

Furthermore, while the majority of students (70%) had received some form of HIV education, primarily through social media (45%) and campus campaigns (35%), the depth of their understanding varied significantly. A significant number of students (55%) admitted to engaging in unprotected sexual activities, reflecting a gap between awareness and behavior.

These findings coincides with previous studies by Okafor and Anumba (2021), who noted that students' risky behaviors are often influenced by peer groups and inadequate access to sexual health services on campus. The study highlights the urgent need for universities to implement comprehensive, continuous HIV education programs that address misconceptions and promote safe sexual practices.

The findings also coincides with previous research by Okeke and Afolabi (2022), who highlighted the role of cultural barriers in limiting access to accurate information on HIV prevention in Northern Nigeria

Table 2. Correlation Analysis between Awareness and Preventive Perception Scores

	Awareness Scores	Preventive Perception Scores
Awareness Scores	1	.78
Preventive Perception Scores	.78	1

Source: Field data (2024)

Analysis:

The correlation coefficient (r = 0.78) indicates a strong positive relationship between awareness and perceptions of HIV/AIDS prevention strategies. This implies that students who are more aware of HIV/AIDS are more likely to perceive the preventive strategies as effective.

Table 3: Independent Samples T-Test of Equality of Means for Awareness between Universities

University	N	Mean	Standard Deviation	t	Sig	df
University A	120	38.5	2.5	3.12	0.02	348
University B	110	37.2	2.1			
University C	105	36.8	2.0			

Source: Field data (2024)

Analysis:

The t-test reveals a significant difference in the mean awareness scores between the universities (p = 0.02). This indicates variability in the effectiveness of awareness campaigns or programs across the universities, with University A showing higher awareness levels compared to Universities B and C.

DISCUSSION OF RESULTS

Objective 1: To assess the level of awareness about HIV/AIDS among university students in Sokoto State.

From Table 1, awareness of HIV/AIDS is high, with 95.7% of students having heard about HIV/AIDS. However, only 68.6% have attended awareness programs, highlighting the need to enhance program participation. High self-rated knowledge (81.4%) suggests an overall positive awareness trend.

Objective 2: To examine students' perceptions of preventive strategies for HIV/AIDS. Correlation analysis in Table 2 indicates a strong relationship (r = 0.78) between awareness and perception of preventive strategies. This suggests that improving awareness directly influences students' attitudes toward adopting preventive measures.

Objective 3: To identify factors influencing students' awareness and perceptions of HIV/AIDS prevention.

The t-test results in Table 3 show significant differences in awareness levels across the universities (p = 0.02), implying that institutional programs and resources might play a crucial role in shaping students' awareness.

Views and Contributions by Six Counselors on the Perception of Students on the Awareness and Preventive Strategies of HIV/AIDS Among University Students in Sokoto State, Nigeria.

Counselor 1: Awareness Levels and misconceptions

View: Students in Sokoto State exhibit a general awareness of HIV/AIDS, particularly its transmission routes and preventive measures. However, misconceptions persist, such as beliefs that HIV/AIDS can be contracted through casual contact or that it is a punishment for immoral behavior.
Contribution: I recommend tailored awareness campaigns that address these misconceptions directly. Workshops, interactive sessions, and peer-led discussions can provide students with accurate information and debunk harmful myths, ensuring their awareness is grounded in facts.

Counselor 2: Attitudes Toward Preventive Strategies

View: While most students recognize the importance of preventive strategies, such as condom use and regular testing, stigma and cultural norms deter many from utilizing these measures. The association of condoms with promiscuity remains a significant barrier.

Contribution: To address this, counselors can initiate culturally sensitive campaigns that frame prevention as an act of personal responsibility and health preservation. Partnering with community leaders to endorse these strategies can help reduce stigma and promote acceptance.

Counselor 3: Role of Gender in Perceptions

View: Gender plays a crucial role in shaping students' perceptions. Female students tend to be more cautious and aware of preventive measures but face greater barriers, including stigma and fear of judgment. Male students, however, often underestimate their risk and engage in riskier behaviors.

Contribution: Gender-specific interventions are needed. For female students, creating safe spaces and confidential access to health services can encourage proactive behavior. For male students, peer-led campaigns highlighting the importance of prevention can help address complacency.

Counselor 4: Peer Influence and Social Dynamics

View: Peer influence plays a significant role in shaping students' perceptions and behaviors regarding HIV/AIDS prevention. Positive peer groups encourage responsible practices, while negative influences can lead to risky behaviors.

Contribution: I propose implementing structured peer education programs where well-trained student ambassadors can spread awareness and model healthy behaviors. These programs can leverage peer networks to foster a supportive environment for adopting preventive measures.

Counselor 5: Role of Media and Technology

View: Social media and other digital platforms are primary sources of information for students about HIV/AIDS. However, the accuracy of information on these platforms varies, leading to confusion and misinformation.

Contribution: Universities and health organizations should collaborate to create engaging, evidence-based content for digital platforms. Campaigns led by influencers and health experts can help disseminate accurate information and counteract misinformation on social media.

Counselor 6: Accessibility of Health Services

View: Many students are aware of the importance of HIV testing and prevention but hesitate to access these services due to concerns about confidentiality, judgment, and limited availability of youth-friendly facilities.

Contribution: I recommend establishing campus-based health centers and mobile testing units to make services more accessible and confidential. Additionally, training healthcare providers on youth-sensitive communication can build trust and encourage students to seek help.

CONCLUSION

The study revealed that while awareness of HIV/AIDS among university students in Sokoto State is relatively high, there are significant gaps in their understanding of effective preventive strategies. The findings underscore the need for culturally sensitive interventions that address both the knowledge gaps and the socio-cultural factors that influence students' perceptions and behaviors. There is also a need for universities to enhance their sexual health education programs, focusing on practical preventive measures. Policymakers and educational stakeholders should prioritize comprehensive sexual education to empower students with the knowledge and skills needed to protect themselves from HIV/AIDS.

RECOMMENDATIONS

Based on the findings, the study recommends the following:

1. Universities in Sokoto should strengthen their HIV/AIDS awareness programs and ensure wider participation to improve students' knowledge of prevention strategies.
2. There should be an increase in campus-based HIV testing and counseling services to encourage regular health checks among students.
3. Peer education programs should be strengthened to utilize the influence of student networks in spreading accurate information about HIV/AIDS.

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