

HIV/AIDS Awareness Training Programmes and Risk Behaviour among Students

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ABSTRACT This study aims to investigate the effectiveness of HIV/AIDS awareness programmes in reducing risk sexual behaviour. A survey design was used to realise the research objectives. The sample population was 41 students studying at the University of Fort Hare. The Safe Sex Behaviour Questionnaire (SSBQ) was utilised as the measuring instrument. Snowball sampling was used to select respondents. Data was analysed with the SPSS. The results of the study confirmed that students who have attended HIV/AIDS awareness training engage in significantly lower sexual behaviour than those who have not attended such training. Understanding the value of HIV/AIDS awareness training programmes in reducing risk sexual behaviour have the potential to help practitioners design effective programmes with much emphasis on individual differences, more specifically on culture and religion. The study provides initial evidence on the impact of HIV/AIDS awareness training in reducing HIV/AIDS risk sexual behaviour which is also important in evaluating different risk sexual behaviours displayed by students which further assists in the curbing of the HIV/AIDS prevalence rate in tertiary institutions.

INTRODUCTION

Students at the University of Fort Hare constitute the most mobile group like track drivers and migrant workers. These can serve as Human Immunodeficiency Virus (HIV)/Acquired Immunodeficiency Syndrome (AIDS) carriers and dispersal agents (Vena 2011). There is confounding evidence that university students are involved in unsafe sexual activities within a concurrent relationship and with very low perception of their vulnerability to Sexually Transmitted Infections (STI) and HIV infections (Abubakar 2012). Students have unlimited access to one another. Most students are sexually active and engage in high-risk behaviour related to sex, alcohol and drugs. Students involve themselves in sexual experimentation, prostitution and unprotected casual sex. Furthermore students are involved with multiple partners of which some of them are 'sugar daddies' (Cullinan 2014). If students get infected whilst they

are at school, they act as carriers for the virus wherever they serve (Kolawole 2010).

The epicenter of the HIV/AIDS pandemic is set in the youths. Students are essential to manpower development and economic advancement of every nation. HIV/AIDS affects all categories of tertiary institutions as they cut across barriers of any kind (Abubakar 2012). Effects manifest themselves in a host of different ways which include illness, death, trauma, and reduced capacity to work and study. Any decimation of youths in tertiary institution by HIV infection results to a loss of investment in education and a disadvantage to the drive to develop future manpower base for the South African society (Mkhize 2013).

Problem Statement

Previous research (Kahn 2014) reported that South African youths are becoming less knowledgeable about HIV/AIDS despite all the efforts by the government to include HIV/AIDS policy in the learning curriculum. The HIV/AIDS infection rate has increase with 4% among youths who are mostly tertiary students.

Another study by Dell (2011) on HIV prevalence among students in tertiary institutions recorded a high rate of 6.4 % in institutions in Eastern Cape Province compared to a lower 1.1% of Western Cape Province. University of Fort Hare is amongst these institutions in the East-

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ern Cape Province of South Africa. Decades of attention on awareness training through condom use and counseling and testing has not produced a comparatively low prevalence rate amongst tertiary institutions in the Eastern Cape Province in South Africa (Dell 2011). Illness and absenteeism among students and staff affect productivity. The pool of skills and knowledge that sustains universities is depleted and the loss of staff and students ultimately calls into question the viability of the institution (Abubakar 2012).

Objectives of the Study

The objectives of the study were to identify whether there is an impact of HIV/AIDS awareness training on the risky sexual behaviour of students at the University of Fort Hare. The study also seeks to investigate whether there are changes in assertiveness skills among students who have attended HIV/AIDS awareness training in addition to a decrease in multiple sexual partnering and same sex practices and increase in condom use among students.

Significance of the Study

This study is important to management, government and students so that they would know the extent the unrestrained sexual activity in institutions could spread the HIV/AIDS pandemic in South Africa. It will also benefit stakeholders in coming up with strategies to reduce the infection rate through the establishment of the background factors contributing to risky behaviours of students and solutions to such factors. Recommendations made for future studies could be useful to influence HIV/AIDS policy in future HIV/AIDS reduction strategies most especially in tertiary institutions.

HIV/AIDS Awareness Programmes at the University of Fort Hare

At the University of Fort Hare awareness programmes are mainly provided by the Student Counseling Unit, Health Support Group and some are infused in the learning curriculum as semester courses. These awareness programmes particularly from the Support Group and Student Counseling Unit are sponsored by Johns Hopkins Health and Education in South Africa

(JHHESA), Levi's Red For Life, The Higher Education HIV/AIDS Programme (HEAIDS), Drum Aide and United States Agency for International Development (USAID) among others.

Objectives of awareness training programmes are, preventing new infections, improving quality of life of the infected and affected and lastly reducing stigma and discrimination (Rowlings 2014).

The awareness training programmes comprise of information on how HIV invades the body and matures to AIDS and sexual risk behaviour. Abstinence is encouraged on students. In addition correct and consistent use of a male, female and dantum latex condoms are demonstrated which all reduces the risk of sexually transmitted infections, HIV infection and unplanned pregnancies. Deliberate unprotected anal sex, especially among gay men is also discouraged. Faithfulness to one partner is encouraged and seen as one of the safer ways of HIV/AIDS prevention (HEAIDS 2010).

Students are encouraged to refrain from having sex from older men and women for money or for other material gain. Lastly students are advised on how to live positively with HIV/AIDS and to delay the onset of AIDS. This includes information on diets and body building activities such as eating healthy, exercising, avoiding tobacco and alcohol and taking vitamins to boost the immune system.

Students are alerted on different ways they can get infected, how HIV matures to AIDS and the treatment available and more specifically sex education. This involves imparting information and forming attitudes and beliefs about sex, sexual identity, relationships and intimacy.

Effective sex education develops young people's skills so that they can make informed choices about their behaviour, and feel confident and competent about acting on these choices in addition to negotiation, decision-making, assertion and listening skills. Providing information through sex education is also about finding out what young people already know about HIV/AIDS and adding to their existing knowledge and correcting any misinformation they may have (Soudien 2012).

Different methods and strategies used in awareness training include peer education, active learning, targeted education, blanket education, presentations and workshops and lastly campus roadshows.

For example the 'One man can' programme is donor funded. The programme is aimed at male students. It uses the rights-based approach to address HIV/AIDS risks and decrease violence by focusing on gender equality, HIV/AIDS and violence through workshops (van Zyl 2012). Other programmes include Love life, Soul city and Khomanani which are all national HIV prevention campaigns funded by the government and non-governmental organisations. Campaigns use media messaging such as TV, radio, billboards, print for social marketing and branding aimed at the youth, thus focusing on consumerism and edutainment (Bateman 2012).

Literature Review

Empirical evidence (van der Linde 2013) shows that HIV/AIDS awareness training has led to a reduction of sexual risky behaviours and the transmission of the virus. In South Africa the rate of transmission among the youths decreased from 10.3% in 2005 to 8.7 % in 2008 and 7.3 % in 2012 owing to the effectiveness of HIV/AIDS awareness training in tertiary institutions, schools and other youth awareness programs.

In another study at the University of Cape Town, Soudien (2012) showed that high levels of HIV/AIDS awareness training resulted in lower sexual risk behaviour. HIV prevalence among university students in South Africa reported a low 3.4 % which is far less than the national average (11%), suggesting that prevention strategies which include awareness training are effective in these institutions (Gugushe 2013).

These results were further supported by research in Zimbabwe (Kyker 2014) which found that HIV incidence in tertiary institutions reduced by 22% between 2008 and 2012 when HIV/AIDS awareness where rigorously promoted in campuses. It is expected to decline further in 2015 owing to the success of sex education in Zimbabwean tertiary institutions. The Zimbabwean Ministry of Higher education in partnership with non-governmental organisations has been involved in urgent interventions designed to help vulnerable young students from contacting HIV/AIDS.

In contrast to these results, empirical review by Ajiboye (2014) using a sample of Nigerian students in four tertiary institutions showed a significant negative relationship between HIV/

AIDS awareness training and sexual risk behaviour. Students were reported to be engaging in high sexual risk behaviours despite their high levels of awareness. Fawole et al. (2011) also examined the level of awareness of HIV/AIDS and sexual behavior of tertiary institution students. The results showed that students continue to engage in risky sexual behaviour although there are high levels of awareness among the students. These conflicting research findings prompts for further research on the relationship between HIV/AIDS awareness training programmes and HIV/AIDS risky behaviour.

METHODOLOGY

Research Design

This is mainly a two cell quantitative study in which risky sexual behavior score of students who have attended HIV/AIDS awareness training will be compared with that of those who have not attended such training.

Population

The area of research is University of Fort Hare, Alice main campus. The population consisted of students from all the university faculties.

Sample

A sample of 40 students was used in this research of which half was exposed to HIV/AIDS awareness training at the University of Fort Hare. The respondent's aged ranged from 18 to 33 years.

Sampling Procedure

Owing to the difficulty of selecting a random and truly representative sample, non-probability sampling was used in form of snowball sampling. In choosing the respondents six students employed on part time basis as assistants in the Student Counseling Unit were approached. These assisted in identifying fellow students who had undergone HIV/AIDS awareness training. The researcher also approached six junior students who assisted in identifying people who have not yet undergone HIV/AIDS awareness training. These were their classmates and friends.

Data Collection Method

Data was obtained through the Safe Sex Behaviour Questionnaire (SSBQ) (Diiorio et al. 1993) which the respondents completed.

The Safe Sex Behaviour Questionnaire (SSBQ) is a 27-item, 4-point Likert-type scale designed to measure frequency of practices that reduce one's risk of exposure to HIV. Responses range from 1, never to 4, always. The five sub-scales are condom use, same sex practices, assertiveness skills, avoidance of body fluids and risky behaviours

Seventeen items are worded positively and the other 10 negatively. Another researcher (Hope 2012) found it to be highly reliable when used to measure risky sexual behaviour among students in a tertiary institution in Europe. Cronbach alpha reliabilities for both genders on the SSBQ factors ranged from .52 to .85 for females and .52 to .84 for males.

An analysis of safe/risky sexual behaviour was conducted by means of factor analysis. Results from factor analysis were treated as aspects of safe/risky sexual behaviour, and the items of the questionnaire corresponding to these aspects are accordingly regarded as different sub-scales of the SSBQ.

Administration of Questionnaire

The questionnaires were personally handed by the researcher to students, together with a letter of consent and were collected in the same manner after approximately one week. A total of 50 questionnaires were handed out registering a response rate of 80%.

Ethical Considerations

Participation was done voluntarily.
Confidentiality was maintained.

Data Analysis

Data analysis was done with the Statistical Package for the Social Sciences.

RESULTS

Age and Gender Distribution

Table 1 shows that 51% (21) of the respondents were male and the remaining 49% (20) were female. There were no respondents below the

age of 18. There were 35 respondents in the age group 18-25 years (18 males and 17 females), five were between 26-30 (two males and three females) and only one respondent above the age of 30 and is a male respondent. Average age was 23 years. Median age is 26 years. Standard deviation is 2.512.

Table 1: The age and gender distribution on HIV/AIDS awareness training programmes

| Age | Female | Male | Frequency |
|-------|--------|------|-----------|
| <18 | 0 | 0 | 0 |
| 18-25 | 17 | 18 | 35 |
| 26-30 | 3 | 2 | 40 |
| >30 | 0 | 1 | 41 |

Gender vs Attendance

A total number of 20 students attended HIV/AIDS awareness training programmes. Table 2 shows that overall female students attended more courses than male students as most of them attended more than three courses. There were a total of eight (six males and 2 females). This was followed by three, two and four and lastly five. A total of five students attended three courses, three students, two and four courses. Only one student (female) attended five courses. There were 10 female students in total who attended the HIV/AIDS awareness training and also 10 male students.

Table 2: The gender and attendance distribution on HIV/AIDS awareness training programmes

| Number of courses | Male | Female | Frequency |
|-------------------|------|--------|-----------|
| 1 | 6 | 2 | 8 |
| 2 | 2 | 1 | 12 |
| 3 | 2 | 3 | 17 |
| 4 | 0 | 3 | 20 |
| 5 | 0 | 1 | 21 |

Hypothesis Testing

Comparison of the Major Variables

The chi-square measure enabled the researcher to reach conclusions about the hypothesis. If the p-value measure obtained is below 5% or 0.05, it means that there was significant relationship of the variables. With fixed level of

testing, a null hypothesis is proposed along with a level of test, usually and in this case 0.05 or 5%.

Conclusive evidence from the p-values provides a reasonable and concrete ground to accept that the questionnaire was a reliable measure of the objectives and test of hypotheses of the study. The decision on acceptance or rejections of hypothesis is substantiated by the outcomes of tests of the questionnaire validity. Much of variables tested by the questionnaire had significant relationships. These p-values are related with the stated objectives and hypotheses. The risky sexual behaviour score of students who have attended HIV/AIDS awareness training was compared with that of those who have not attended such training and the outcomes are computed in Tables 3 and 4.

Attendance VS Non attendance

The H_0 hypothesis of this study stated that students who have attended HIV/AIDS awareness training do not engage in significantly lower risk sexual behaviour than those who do not attend such training. The H_1 hypothesis cited that, students who have attended HIV/AIDS awareness training engage in significantly lower sexual behaviour than those who have not attended such training. The rationality on accepting these views was centred on Question 4 of the questionnaire. This variable was tested

against several variables and results are shown on the Tables 3 and 4.

Comparisons from Tables 3 and 4 indicate that there is a significant relationship between training and risky sexual behaviour. The p values from Table 3 (0.0350; 0.0201; 0.0305; 0.0144; 0.0386) were all less than 0.05 (5%) indicating a positive significant relationship between HIV/AIDS awareness training programmes and risky behaviour. Most p values from Table 4 (0.0652; 0.5004; 0.6742) indicate a negative relationship between non-attendance to HIV/AIDS awareness training programmes and risky behaviour. This therefore means that we reject the null hypothesis and accept H_1 . It can therefore be concluded that students who have attended HIV/AIDS awareness training engage in significantly lower sexual behaviour than those who have not attended such training.

DISCUSSION

The positive relationship between training and condom use indicate that those who use condoms are less likely to engage in homosexual practices, multi partnering and one night stands and come in conduct with body fluids. In addition students are however less likely to engage in homosexual practices because of religious beliefs and backgrounds apart from the awareness training itself.

Table 3: The scores of students who attended HIV/AIDS awareness training programmes

| <i>Variable</i> | <i>Chi square</i> | <i>Degrees of freedom</i> | <i>Standard deviation</i> | <i>P-value</i> |
|----------------------|-------------------|---------------------------|---------------------------|----------------|
| Condom use | 7.8694 | 3 | 0.6140 | 0.0350 |
| Assertiveness skills | 14.9482 | 6 | 1.3010 | 0.0201 |
| Body fluids | 6.2361 | 2 | 0.3889 | 0.0305 |
| Same sex practices | 15.5296 | 6 | 0.3630 | 0.0144 |
| Risk behaviour | 10.8423 | 4 | 0.5880 | 0.0386 |

Table 4: The scores of students who did not attend HIV/AIDS awareness training programmes

| <i>Variable</i> | <i>Chi square</i> | <i>Degrees of freedom</i> | <i>Standard deviation</i> | <i>P-value</i> |
|----------------------|-------------------|---------------------------|---------------------------|----------------|
| Condom use | 5.2657 | 3 | 0.0378 | 0.0662 |
| Assertiveness skills | 2.5780 | 3 | 0.0866 | 0.5004 |
| Body fluids | 2.3890 | 2 | 0.0980 | 0.6742 |
| Same sex practices | 14.6788 | 6 | 0.3504 | 0.0231 |
| Risk behaviour | 8.9963 | 6 | 0.3440 | 0.0130 |

The use of assertiveness skills and risky behaviours suggests that those who use assertiveness skills avoid contact with bodily fluids and tend not to engage in risky behaviours such as avoiding sexual intercourse when one has sores or irritation on the genital area. Increase in knowledge through HIV/AIDS reinforces positive values and beliefs of people and thereby leading to students in practicing safe sex behaviours. Use of role models and celebrities in training programmes enables the students to aspire for safe sex practices as in the teachings (Soudien 2012).

Positive correlations among training, condom use and risk behaviour suggests that students who use condoms are less likely to be engaged in risky behaviours such as using drugs prior to sexual intercourse and avoid contact with their partners semen and vaginal secretions. Students do not only use condoms to reduce the transmission of HIV/AIDS but also to avoid unwanted pregnancies through conduct of partner's semen. This also concurs with the results of Nixon et al. (2011) in their study on the meanings attached to the use of condoms, abstinence and HIV/AIDS prevention programmes.

The positive correlation on training and assertiveness skills indicates that the older and learned students are the more alert to HIV/AIDS awareness and they are not afraid to initiate certain sexual topics and can go as far as examining their partners for cuts, sores or abrasions in the genital area.

The results also shows that students who have not attended training refrain from same sex practices and are aware and avoid risky behaviours. This could be because of the training programmes they were exposed to in secondary schools and dramas or programmes on national television such as Ekasi and Intersexions on E tv channel in South Africa.

The negative relationship between body fluids and assertiveness skills suggested that some students do not ask potential partners about their sex history or sexual orientation. This may be because such questions may be two offending and most students would want to avoid the risk of their relationships being ended after initiating such topics. Also students especially girls have weak emotions and fall in love easily and they trust their partners that they seldom ask such kind of questions.

Negative correlations in general indicate that behaviour change and social change are a long term process and factors that predispose people to infection, such as poverty and inequality, patriarchy and illiteracy cannot be addressed in short term. Vulnerability to, and the impact of the epidemic are proving to be most catastrophic at community and house hold level as most of the students of University of Fort Hare come from disadvantaged backgrounds. Michielsen (2012) and Onyene et al. (2010) also added that negative correlations can be a result of attitudinal problem. Some students are simply indifferent to the risk of unsafe sex practices.

CONCLUSION

The conclusion was drawn from the findings of the study based on the previously mentioned objectives. There is a significant relationship between HIV/AIDS awareness training and risky sexual behaviour at the University of Fort Hare. There is a decrease in multiple sexual partnering and improved condom use among students as a result of awareness training. Lastly students who have attended HIV/AIDS awareness training have improved assertiveness skills.

RECOMMENDATIONS

The HIV/AIDS awareness programmes must continuously be offered to students to achieve their objectives. The awareness training programmes among tertiary students and young people in general, must emphasise the existence of individual differences, implying that some sexual partners could be unfaithful. It is also important to stress that it is impossible to be sure of someone's sex history and potential use of drugs as most people are not honest when it comes to these issues. It is absolutely important, therefore, to always protect.

The radio stations on the campus must serve a useful purpose in this regard by sending out HIV/AIDS-related messages regularly. It is important to involve people with all shades of beliefs at the planning stage to help evolve the right messages to be sent out to people. This will prevent the possibility of people raising issues with certain messages on religious grounds. Lastly it is necessary to include compulsory sex education among the first year general study

modules to enlighten new students on issues on HIV/AIDS and other sexually transmitted diseases and on the importance of HIV testing. HIV testing with pre and post- test counselling should be encouraged more to students. The greatest strategy for preventing the spread of HIV in tertiary institutions is to ensuring that students as youths are not infected.

LIMITATIONS OF THE STUDY

The study only centered at the HIV/AIDS awareness programmes at the University of Fort Hare. Results of the present study are not easily generalised because of different demographic distributions in tertiary institutions. Tertiary institutions are affected differently with the HIV/AIDS pandemic hence they may be having different approaches to management of HIV/AIDS. The study used questionnaires as data collection instruments only which was a limitation on clarity and in addition the Safe Sex Behaviour Questionnaire was viewed negatively by respondents. They felt threatened by the questions and hence most of them may have not been giving honest but correct answers.

DIRECTIONS FOR FUTURE RESEARCH

Negative correlations between some variables, suggests a need to investigate the establishment of effective communication strategies in order to facilitate sexual risk behaviour change in HIV/AIDS awareness programmes in tertiary institutions.

Since there are many infected people in South Africa who are also students, there might be a need to investigate the role of psychological support systems in helping infected students to live positively with HIV/AIDS.

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