
Student Nurses' Attitudes and Anticipated Challenges Toward the Care of People Living with HIV/AIDS: Proposed Bachelor of Science in Nursing Curriculum Enhancement

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ABSTRACT

This study examined student nurses' attitudes and anticipated barriers in caring for people living with HIV/AIDS, with the aim of informing evidence-based enhancements to the Bachelor of Science in Nursing (BSN) curriculum. It described respondent demographics, measured attitudes toward PLWHA, assessed perceived challenges across physical, psychosocial, economic, and health-system domains, and analyzed differences by profile variables. A descriptive-comparative quantitative design was utilized, involving 88 Level 3 and Level 4 nursing students from a selected academic institution in Laguna. Data were collected through a structured questionnaire comprising a profile form, an adapted AIDS Attitude Scale, and a researcher-developed tool for anticipated challenges. Statistical analyses included frequencies, percentages, means, standard deviations, t-tests, ANOVAs, and Pearson correlations. Findings revealed generally positive attitudes toward PLWHA (mean = 4.09), reflecting willingness to provide care and adherence to professional ethics. However, respondents identified physical health-related challenges as moderately difficult (mean = 3.49), particularly in managing opportunistic infections, patient deterioration, and occupational exposure risks. These results suggest that while attitudes are favorable, gaps remain in clinical preparedness and confidence. The study recommends integrating simulation-based learning, enhanced clinical exposure, stigma-reduction initiatives, and infection-prevention training into the Bachelor of Science in Nursing curriculum.

Keywords: People Living with HIV/AIDS, Aids Attitudinal scale, Student Nurses, Anticipated Challenges, Attitudes.

INTRODUCTION

The global burden of Human Immunodeficiency Virus remains high despite significant expansions in antiretroviral therapy coverage. By December 2022, UNAIDS and the World Health Organization (WHO) estimated that approximately 39 million to 40.8 million individuals globally were living with HIV, with 1.3 million new annual cases. While global infections have dropped by 40% since 2010, massive regional disparities persist, marked by sharp spikes in infections across Eastern Europe, Latin America, the Middle East, and the Asia-Pacific region.

The pandemic in the Philippines has undergone an alarming macro expansion over the past decade. Annual new infections surged from roughly 4,400 in 2010 to more than 29,600 by 2024, culminating in over 252,000 People Living with HIV/AIDS nationwide. By 2025, the Department of Health recorded an average of 57 new HIV diagnoses per day. Crucially, almost half of these new infections occur among youth aged 15 to 24. Due to structural limits on sexual health education, young Filipinos increasingly rely on social media and peers, breeding deep-seated transmission misconceptions and public stigma that delay screening and preventive behavior.

Formal school-based instruction on sexual health and infectious diseases in the Philippines is frequently fragmented, poorly timed, and restricted to basic cognitive dimensions. Existing nursing education literature primarily assesses general knowledge levels rather than examining the emotional, structural, and contextual dynamics that shape clinical readiness. There is a critical shortage of localized empirical research evaluating student nurses' specific attitudes and anticipated challenges through an experiential, structured lens, or linking these parameters directly to academic and demographic characteristics.

Statement of the Problem

The study sought to answer the following questions:

1. What is the profile of student nurses in terms of age, sex, civil status, and year level?
2. What is the level of attitude of the student nurses toward people living with HIV/AIDS?
3. What are the anticipated challenges to the care of people living with HIV/AIDS when classified as physical, psychosocial, economic, and health system and policy challenges?
4. Is there a significant relationship between the student nurses' level of attitude toward people living with HIV/AIDS and the anticipated challenges they perceive in providing care?
5. Is there a significant difference in the level of attitude of the student nurses toward people living with HIV/AIDS when grouped according to profile variables?
6. Based on the findings of the research, what curriculum enhancement can be proposed in the BSN program to prepare student nurses for the care of people living with HIV?

Scope and Delimitations

The study focused on Level 3 and Level 4 nursing students in Laguna. While providing valuable insights, findings are limited to selected institutions and self-reported data, which may

be influenced by social desirability bias. Nonetheless, the study offers a foundation for curriculum development in HIV/AIDS care.

Review of Related Literature

While international studies generally report favorable attitudes toward people living with HIV/AIDS (PLWHA) among nursing students, underlying issues like benevolent stigma and cultural variations persist, though direct clinical exposure consistently reduces fear and builds empathy. This clinical readiness is actively shaped by multifactorial influences—including a student's age, values, knowledge, and cultural background—which directly collide with a wide array of anticipated care challenges. Physically and psychosocially, student nurses often feel unprepared to manage complex opportunistic infections, navigate therapeutic communication, or handle the deep emotional distress and societal stigma affecting patients. Furthermore, these anxieties are compounded by broader economic and systemic hurdles, such as severe resource limitations in healthcare facilities, patients' financial hardships that lead to treatment discontinuation, weak administrative infrastructure, and fragmented nursing curricula lacking adequate clinical mentorship. Turn highlights a critical, systemic need for future nurses to receive integrated training that seamlessly bridges hands-on clinical skills with holistic psychosocial care.

Theoretical Framework

The study integrated three major nursing theories to assess preparedness:

Roy's Adaptation Model views students' attitudes and challenges as adaptive responses to environmental stimuli.

Neuman's Systems Model treats student nurses as a "client system," in which anticipated challenges serve as stressors that must be mitigated through structured education.

Pender's Health Promotion Model: Tracks behavioral intention. When students develop strong self-efficacy, specialized knowledge, and clinical support, they are more motivated to provide empathetic, non-stigmatizing care.

Conceptual Framework

The Conceptual Framework follows an Input-Process-Output (IPO) model. The Input includes student profiles, attitude levels, and anticipated challenges. The Process involves data collection via the AIDS Attitudinal Scale and statistical analysis. The Output is a proposed enhancement to the BSN curriculum.

METHODOLOGY

A descriptive-comparative quantitative design was employed. Eighty-eight Level 3 and Level 4 nursing students completed questionnaires including demographic profiles, the AIDS Attitude Scale, and a researcher-developed tool for anticipated challenges. Statistical analyses included mean, frequency, standard deviation, t-tests, ANOVA, and Pearson correlation.

Research Design

This study utilizes a descriptive-comparative quantitative design to evaluate nursing students' baseline attitudes and anticipated challenges when caring for people living with HIV/AIDS (PLWHA) without manipulating variables. By assessing structured questionnaires, the research compares responses across demographic profiles—such as age, sex, civil status, and year level—to identify significant differences in clinical preparedness. Ultimately, the statistical findings aim to highlight key gaps in knowledge and attitudes, providing a strong empirical foundation for BSN curriculum enhancements that promote compassionate, stigma-free patient care.

Research Steps

Guided by the study's frameworks and objectives, this research employs a descriptive-comparative quantitative design and a three-part survey questionnaire to gather student data. Prior to full implementation, the instruments undergo expert validation and pilot testing to assess reliability using Cronbach's alpha, while ethical clearance and voluntary informed consent are obtained. Finally, the strictly confidential data collected from participants are systematically analyzed by a statistician using both descriptive and inferential statistics.

Data Collection and Sample Selection

Ethical approval will be secured before data collection, followed by permission from the school administration. Informed consent will be obtained from nursing students before participation. Validated questionnaires will be distributed in person or online. Collected data will be encoded and analyzed using statistical tools to assess profiles, attitudes, challenges, and group differences.

Data Analysis Methods

Descriptive statistics will describe nursing students' demographics, while mean and standard deviation will assess attitudes and anticipated challenges. Inferential tests such as the t-test, ANOVA, and Pearson correlation will determine relationships and differences among profile variables. A 10% significance level will be used for analysis.

Research Hypotheses and Validation

The following null hypotheses will be tested:

H01. There is no significant difference in the level of attitude of the nursing students toward people living with HIV/AIDS when grouped according to profile variables.

H02. There is no significant difference in the anticipated challenges in the care of people living with HIV/AIDS when grouped according to profile variables.

Study Limitations and Ethical Considerations

Ethical considerations include informed consent, voluntary participation, and the right to withdraw. Confidentiality and anonymity will be ensured through coding systems, with approval from the Ethics Review Committee. The study avoids coercion and stigmatizing language while upholding beneficence, non-maleficence, and justice to protect participants and support improved nursing education.

RESULTS AND DISCUSSION

This study analyzed the profile of 88 nursing students in Laguna to understand their readiness to care for people living with HIV/AIDS (PLWHA). The sample was predominantly female (70.45%), aged 20–22 (72.73%), and in their fourth year of study (71.59%), representing a cohort nearing professional registration and clinical practice.

The findings revealed that students maintain a generally positive and ethical attitude toward PLWHA (mean = 4.09), emphasizing patient dignity and confidentiality. However, significant "anticipated challenges" were identified, particularly regarding physical care (mean = 3.49). Students expressed high anxiety concerning occupational exposure, managing opportunistic infections, and witnessing patient deterioration. Psychosocial barriers, such as navigating social stigma and patient treatment refusal, were also rated as significant concerns.

Statistical analysis showed that while demographic factors like age and gender did not significantly alter attitudes, a strong correlation exists between positive attitudes and the recognition of psychosocial and economic barriers. The study concludes that while ethical foundations are strong, clinical confidence is lacking. Consequently, a BSN curriculum enhancement is proposed that focuses on high-fidelity simulations, stigma-reduction workshops, and structured clinical mentorship to better prepare students for the complexities of HIV/AIDS care.

CONCLUSIONS

Nursing students generally show positive attitudes toward caring for people living with HIV/AIDS, reflecting acceptance and ethical responsibility. However, they still anticipate multidimensional challenges, indicating limited full readiness for practice. Attitudes are not influenced by demographics, suggesting that curriculum has an impact. Findings highlight the need for holistic education integrating skills, values, and preparedness.

RECOMMENDATIONS

The study recommends strengthening HIV/AIDS content in nursing curricula by emphasizing stigma reduction, patient rights, confidentiality, and compassionate care through integrated and practical learning. It also suggests enhancing clinical exposure through simulations and case-based activities to build competence and confidence in managing HIV-related care. Psychosocial training, including communication, counseling, and emotional resilience, is essential to address anticipated student challenges. Exposure to the economic, legal, and health-system aspects of care is also needed for a holistic understanding. Lastly, future research should involve larger, diverse samples and explore additional variables using qualitative or mixed methods to improve nursing education and HIV care preparedness.

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AI DECLARATION STATEMENT

AI-supported tools helped with grammar and structure in creating this article. No AI tools were used to collect, analyze, or interpret data; all authors are credited for their academic contributions.

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