Students' Healthy Security in Urban Universities in Uganda

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Abstract: The study was on Students' healthy security in urban universities in Uganda. It was conducted in urban public and private universities in Uganda. Students, of 21st century, were the unit of analysis. Informants were studied for some good period of time. Occurrences - culture, characteristics and health behaviors were noted. The study was of Qualitative in nature and used a Positivism philosophy backed with Health Belief Model (HBM) by Rosen stock, supported by the Theory of Reasoned Action (TRA) which was proposed in 1975 by Martin Fishbein. Students perform a health behavior having reasoned about the positive and negative consequences. Terms like Susceptibility, Perceived benefits, Perceived barriers, Self-efficacy and Clue to barriers were borrowed from HBM. Preventive, Illness and Sick-role behaviors that were pathways to the substance use behavior were borrowed from HBM. These pathways were used in studying related literature, designing research instruments, collecting data, analyzing and interpreting it. The study found out that: Students, of 21st century, have created their own health ways and health cultures. When in groups, in their privacy, students do all sorts of manner not minding the negative health consequences. Students are perceiving STDs are part of normal life. Most of them practice self-medication, HIV is being transmitted at a very high rate among university students. The ideology of "live-sex" has greatly increased the risk of STDs/STIs and HIV among students. Peers are the pathways of educating, guiding and controlling students' health security. The study recommended that: There should be enough programs of STDs/STIs and HIV awareness (Expected barriers) in all urban universities. The government should identify, empower and equip peers (students of 21st century) among urban universities. Health service providers should target communities (ghettoes) around the university premises, where students are, always. HIV awareness, testing, prevention and treatment in urban universities should be put in more effort by both private and government institutions. Students of 21st century, as they identify themselves, should develop a habit of health seeking behavior especially for medical checkup or where never they suspect any sort of health disorder.

Keyword: Health, students, university, 21st Century

Definition of Students' health security: Health security relates to 'the activities required, both proactive and reactive, to minimize vulnerability to acute public health events that endanger the collective health of populations living across geographical regions and international boundaries (Brown, 2022).

Background: In 2001, the World Health Assembly's Resolution 54.14 'Global health security: epidemic alert and response' linked the health security concept to a global strategy for prevention of movement of communicable diseases across national borders. This resolution supported the revision of the IHRs, and was the first step in associating 'global health security' with IHR compliance. This was taken forward in 2007, when health security was selected as the theme of the World Health Day and of the annual World Health Report (WHR), titled A Safer Future: Global Public Health Security in the 21st Century (WHO 2007a). The current situation of students in the 21st Century, especially in urban universities, needs a strong hand especially as far as health security funding is concerned. According to Boyce, 2021, Health security funding is intended to improve capacities for preventing, detecting, and responding to public health emergencies. Recent years have witnessed substantial increases in the amounts of donor financial assistance to health security from countries, philanthropies, and other development partners. To date, no work has examined the effects of assistance on health security capacity development over time. If the situation is not handled quickly, the near future won't have educated population. That's why the researcher came out to make the public become aware of what is on the ground as far as health security in urban universities is concerned.

Methodology: The study was conducted in urban public and private universities. Students were the unit of analysis. Informants were studied for some good period of time. Occurrences - culture, characteristics and substance use behaviors were noted. The study was of Qualitative in nature and used a Positivism philosophy backed with Health Belief Model (HBM) by Rosen stock, supported by the Theory of Reasoned Action (TRA) which was proposed in 1975 by Martin Fishbein. The Theory of Reasoned Action (TRA) suggests that a person's behavior is determined by their intention to perform the behavior and that this intention is, in turn, a function of their attitude toward the behavior and subjective norms (Fishbein & Ajzen, 1975). Students perform a health behavior having reasoned about the positive and negative consequences. Terms like Susceptibility, Perceived benefits, Perceived barriers, Self-efficacy and Clue to barriers were borrowed from HBM. Preventive, Illness and Sick-role behaviors that were pathways to the substance use behavior were borrowed from HBM. These pathways were used in studying related literature, designing research instruments, collecting data, analyzing and interpreting it.

Findings: The study found out that: Students have created their own health ways and health cultures. When in groups, in their privacy, students do all sorts of manner not minding the negative health consequences. Students are perceiving STDs are part of normal life. Most of them practice self-medication. HIV is being transmitted at a very high rate among university students. The

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ideology of "live-sex" has greatly increased the risk of STDs/STIs and HIV among students. Peers are the pathways of educating, guiding and controlling students' health security.

Recommendations: There should be enough programs of STDs/STIs and HIV awareness (Expected barriers) in all urban universities. The government should identify, empower and equip peers among urban universities. Health service providers should target communities (ghettoes) around the university premises, where students are, always. HIV awareness, testing, prevention and treatment in urban universities should be put in more effort by both private and government institutions. Students should develop a habit of health seeking behavior especially for medical checkup or where never they suspect any sort of health disorder.

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