REVIEW OF RELATED STUDIES

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CHAPTER - III

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In this chapter the related studies have been reviewed so as to provide a philosophical background for the study. Moreover, the guidelines for the study have been derived from the review given hereunder.

No study could be traced out from the literature available which has close link with the conscientisation practices adopted on adult learners. Studies using folk art forms connected with any of the social issues also was not available. However a few studies having relationship with social issues were available. Fourteen studies each, on the five social issues such as uncontrolled population explosion, spread of AIDS, alcoholism, practice of dowry and social disharmony have been presented here. These studies are carried out in India as well as in abroad. The studies were listed below in the chronological order of the work.

1. Studies on Uncontrolled Population Explosion

The correspondence on population growth and contraception in Africa - Dr.A.R.P. Walker and others, February 27, p. 657 and Dr.P.V.P. Cosgrove (March 20, p. 900)--illustrates the historical and demographic trap into which most of the peoples of the so-called Third World, but especially in Africa, are falling. On the other hand social factors which motivate peasant peoples to try limiting their families and adopting contraceptive practices start to operate only in a climate of progressively rising standards of living. (In this connection it is
interesting that from Dr. Walker and others figures this appears to be happening in South Africa, where African peoples are relatively more prosperous than elsewhere). On the other hand, while it is undoubtedly possible by modern agricultural methods to feed adequately the burgeoning population of these countries the lack of suitable education, development of infrastructure, prevent the acceptance of these methods and the proper distribution of food supplies to where they are needed. Historically it is a tragedy that these newly emergent nations do not have the time which is required to bring about changes in their own societies to meet these problems, which normally might be expected to span several generations before the population bomb explodes in their faces, leaving a trail of untold human misery with great political instability and dangers to world peace. The cynical exploitations of the situation by certain outside countries who are simply running guns to dissident groups for political purposes serves only to compound the problems. Apart from the Brandt Commission and the Western summit meeting last year, there seems little international recognition of the magnitude and urgency of the problems. What is required is a massive program on an international scale rather on the lines of Marshall Aid after the war to provide food and the means of its production, and to exert moral pressure on those nations displaying a negative attitude towards the problems by the conclusion of an Helsinki-type agreement. At the same time a new economic order needs to be set up whereby 3rd World nations are enabled to sell their products at advantageous rates thus stimulating the growth
of their economies and creating expanding markets for world trade. Without attention to such matters all efforts of medical and allied personnel to improve the health and quality of life of these peoples, will be of no avail and, indeed, may serve to aggravate the problem—by disease control, etc. The medical profession in many countries is currently concerning itself with the medical consequences of nuclear warfare. I should like to suggest it addresses itself to the problems of population growth with equal vigour as it is not too fanciful to suggest they are related problems.¹

Interviews were conducted with 72 Philippine government staff aged 24-63 (55% females and 45% males) who participated in population and development (POPDEV) training sessions in Cagayan de Oro City, Gingoog City, Butuan City, and Ozamiz City so researchers could determine their knowledge about POPDEV concepts and parameters, their attitude towards the interrelationships between population and development, and whether the trainees have integrated or were thinking about integrating population and development relationships into their planning and programming of existing government programs and projects. All the interviewed trainees had at least some college education. 69% had a bachelor’s degree, 7% were physicians or dentists, 10% had a master’s degree. 76.4% currently had different positions/work assignments than they had when they first joined the agency.

The number of years in government service ranged from 1 to 39 years. Most trainees had been promoted to their current position within the last 4 years. The number of training days was 1-20 days. 35% attended a 3 day training session and another 35% attended a 5-day training session. The current projects of about 78% of trainees affect population characteristics. About 57% reported to have considered population factors in planning programs and projects for their agency. 73% of them said that population factors are a must in any planning. About 60% wanted further training in POPDEV. 81% believed that it was always important to consider effects of government programmes on some population characteristics. Reasons for not considering population factors were: planning done at higher levels; population not recognized as a problem; lack of knowledge about POPDEV parameters; implementation of only what has already been planned; lack of data; and issues revolving around peace and order. In conclusion, even though most trainees understood POPDEV concepts and parameters, they claimed to have inadequate skills as to how to apply the newly acquired knowledge.²

Birzea discusses Romanian population policies under Ceaucescu, which penalized single people and couples without children, rewarded large families, prohibited abortion, contrasts with new policies, implemented after his fall that reinstated individual liberties but sought to promote through education parental

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responsibility, safe sex, environmental protection, and other positive population outcomes.³

Cohen proposes a systematic and stepwise approach to the design of population information, education, and communication (IEC) strategies. He clarifies the role of IEC in population programmes, details methodological steps to follow in IEC strategy development, and identifies types of research and source of data needed.⁴

Crews traces the development of the field of U.S. population education from early efforts in the 1960s. Identifies key organizations and their contributions to the field in the 1970s and 1980s. Assesses the status of population education in 1992, summarizing the work of the Population Reference Bureau, Zero Population Growth, and other groups.⁵

El-Wardini discusses the objectives of population education in Arab countries, real and perceived barriers to its implementation, the decision to infuse population education into the curriculum rather than create separate


courses, and the current status and ongoing fragility of population education projects.\textsuperscript{6}

Georges discusses the cultural, political and institutional barriers to population education in Madagascar and the strategies and initiatives that have been adopted to overcome them, including emphasizing the national character of a project, accommodating the values and ideals of the people involved, and assuring teachers of their classroom autonomy.\textsuperscript{7}

Palacio reviews the history of population education programmes in Latin America and Caribbean from 1970 to 1992 and changes in fertility, mortality, and migration during that period. Considers issues such as government styles and motivations, staff shortages, co-operation among administrators, teacher training, distance education and new management systems.\textsuperscript{8}

The State Resource Centre in Jamia, Millia Islamia, New Delhi began to integrate adult literacy into population education programmes in 1987. These programmes provide education on family size, child spacing, responsible parenthood, marriage age, population beliefs and customs, and development


issues related to population growth in order to increase demand for family planning (FP). The education material on population is used as source material in the reading books at all levels. Education is supplemented with other visual training aids, theatre, and fairs. The literacy programme is monitored by professional staff. A survey was administered to assess the impact of the programme in terms of changes in knowledge, attitudes, and practices; appreciation of population problems; and demand for controlling growth. 21 projects and a sample of 85 centres were involved. The survey was administered to 10 students selected at random from each centre; the total sample was 934 students for the pretest and 568 students for the post-test. The sample included 71% illiterates and 88% women; the average age was 25 years. The mean family income was Rs.730. Most were married. Every measure showed some increase in knowledge. The highest increases were in knowledge about the recommended schedule for prenatal visits (72%), customs/beliefs on overpopulation (54%), and the effects on public facilities due to overpopulation, followed by the minimum age of marriage for boys (29%) and the adverse effects on early marriage for girls (27%). There was an increase in correct responses about adverse effects of early marriage on girls, adverse effects of closely-spaced children, parental duties, beliefs on overpopulation, adverse effects on public facilities, and adverse effects on the environment. There was a 40% increase in high knowledge scores. Favourable attitudes increased in the post-test from 67% to 92%. Knowledge about FP methods increased from 67% to
87%. There was a increase in use of public health services, a 7% increase in use of family welfare services, and a 137% increase in use of public FP counselling and services. The conclusion was that the programme was successful.9

Tagica assess population education activities in 10 Pacific Island countries in terms of the awareness of and commitment to such programmes; the development of curricula and instructional materials for formal education and non-formal education; training activities for policy makers, curriculum committees, teachers and others; evaluative research; and new areas of concern.10

According to Shiva The International Conference on Population and Development (ICPD) is set for September 1994, arms control and control of military interests are as crucial as population control. The expenditure on the military and arms should go to social measures and true socio-economic development. Women are leading the movement against war and towards peace. Women make up 70% of current refugees of ethnic conflicts. The conquest of free trade with little or no restriction and globalization trends forces developing countries to accept nonessential luxury items which tend to be irrational, hazardous consumer articles and technologies from industrialized


countries. The privileged elite in developing countries and the industrialized
countries overconsume, while the basic needs of the poor majority are not being
met. The rich view the poor as a global threat and a threat for environmental
degradation. They believe that free trade will solve all problems, yet it only
marginalizes the poor and the vulnerable. The pattern of overconsumption is
the threat. The poor are characterized as demons responsible for the population
explosion. Women are angry that population control policies and attempts to
control women's fertility. Specifically, most contraceptive technologies and
most family planning programmes target women. Male responsibility is
ignored. Religious fundamentalists tell women not to become pregnant, not to
use contraception, and not to seek abortion, yet they allow male sex behaviour,
e.g. sexual violence. This attitude leaves women vulnerable to unwanted
pregnancies, sexually transmitted diseases, and AIDS. Developing countries
should be concerned about chapter III on Population, Environment, and
Development in the ICPD text. Most countries, including India, have formed a
consensus on this chapter. The Vatican and some Latin American countries have
objections, however. The meeting of Cairo will likely continue to promote the
view that the fertility of women in developing countries and of women of colour
must be controlled.\textsuperscript{11}

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Bhargavan describes the adult literacy programme and an evaluation of
the impact of integrating population information into the literacy programme
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curriculum in Uttar Pradesh. Population education in India was introduced in the 1980s for school-age children and nonformal education groups, illiterate adults aged 15-35 years, and children pursuing a higher education. In 1986, the curriculum included population education messages. The National Literacy Mission (NLM) in all of India, which was instituted in 1988, targeted 80 million illiterates in 1995 who were aged 15-35 years. Out of 90 districts selected, 32 districts were in Uttar Pradesh. The programme helps illiterates in reproductive ages in 32 districts in Uttar Pradesh. In all 32 districts, the crude birth rate was over 32. Infant mortality was also high and ranged from 93 in Nainital to 173 in Hardoi. The mean age at marriage was under 17.9 years. Female literacy was also low and ranged from 5.5% in Gonda district to 27.1% in Nainital district. The Total Literacy Campaign was in operation in 19 of the 32 districts. Education focuses on the small family norm, the appropriate age for marriage, responsible parenthood, population growth and the environment, population and health, population education and development, and population related beliefs and traditions. The programme evaluation was conducted in 15 NLM study centres among 225 respondents. Findings indicate that knowledge about the legal age of marriage was widespread. Many desired a higher age of marriage for their daughters than current levels, which were under the legal age. Learners compared to nonlearners had a more positive attitude toward the legal age of marriage. Learners were more aware of the adverse effects of early
marriage on maternal and child health. Learners were more aware of the need for pregnancy care and the importance of breast feeding and immunization.\textsuperscript{12}

A representative population sample of 862 men and 857 women aged > 15 years living in the Czech Republic were interviewed in 1994 to investigate the socio demographic factors affecting their attitudes toward induced abortion. The investigation was carried out by the Demographic Research Agency (DEMA) by means of an anonymous questionnaire containing 35 sets of pretested questions concerning sexual experience, knowledge, and attitudes. The effect of education was statistically significant both with regard to the attitudes of men (p < 0.0001) and women (p < 0.008) when different groups with high school or university education were compared to those with elementary or vocational education. The liberality of attitudes to abortion tended to increase with increasing size of the village or town, although not to a significant degree. Attitudes toward induced abortion ranged from a belief that (a) it was totally unacceptable, (b) it was acceptable only for health reasons, (c) it was acceptable for social indications, to (d) it was entirely the woman's choice. By contrast age exerted a significant influence on liberality of attitude in both men (p < 0.001) and women (p < 0.00001) regarding induced abortion. Conservative views were expressed by respondents of the oldest age group (6.1% of women and 6.8% of men over 60 deemed abortion totally unacceptable) and by the youngest

respondents (5.4% of girls and 5.2% of boys deemed abortion totally unacceptable in the 15-17 age group). The comparison of Catholic believers (216 men and 300 women) to atheists (457 men and 351 women) showed that religious beliefs had a marked effect on the degree of conservatism in attitude to abortion. Among Catholic subjects only 7.0% of male and 7.2% of female respondents rejected abortion unequivocally, but 35.5% of the men and 31.4% of the women thought that abortion should be performed only for health reasons. By contrast, only 13.3% of the men and 13.6% of the women among atheists maintained this view.\(^\text{13}\)

Links between education and population include the facts that women with increased literacy decrease their fertility and that countries with higher population growth rates produce more illiterate people. Possible reasons for the fertility-reducing effect of female education include the older marriage age of educated women, the increased income-generating potential of educated girls and women that increases their status, the increased self-esteem of educated girls, and the awareness among educated females of the health implications of large families and of family planning options. In 1994, the International Conference on Population and Development highlighted the importance of education as it emphasized reproductive rights and women’s empowerment through education. Recognition of the right to learn provides a framework for

the rights approach to population education. The concept of the right to learn also has implications for adult learners because it acknowledges the right to be recognized and to have experiences and competencies validated. Gender analysis plays an important role in population education, and the notion of lifelong learning has implications for changing gender relations as stereotypes are challenged. Recently, the importance of involving men in population education and reconsideration of gender roles has been recognized. In the 21st century, education and training will be less important than lifelong learning to know, to do, to live together, and to be. Population education will be an integral part of this process and will be changed by it.\textsuperscript{14}

2. Studies on the Spread of AIDS

This study examined the effects of race/ethnicity and degree of acculturation on knowledge and attitudes about human immunodeficiency virus/acquired immune deficiency syndrome (HIV/AIDS). Subjects were 274 college students from 5 racial-ethnic groups (Whites, Blacks, Hispanics, Asian, Americans, U.S. born, having an Asian origin with families that had resided in the country for more than two generations, and Asians—non-U.S. born and living in the United States for 1 to 9 years). Subjects completed the Attitude Toward AIDS Scale. Multivariate analysis of variance indicated significant differences on the Knowledge and Attitudes scales as well as the attitudes issues.

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and persons subscale. Whites, Blacks, and Hispanics were more likely than Asian Americans and non-American born Asians to identify themselves as knowledgeable or very knowledgeable about HIV/AIDS and as having frequent access to HIV/AIDS information. Newspapers, television, and books were the most frequently mentioned sources of HIV/AIDS information for all five ethnic groups. Subjects answered correctly about 72% of the items on the Knowledge Scale, reflecting a moderately high level of knowledge about HIV/AIDS. Asians demonstrated a significantly lower level of knowledge than did the other four groups. On the Attitudes scale, respondents were seen to show a moderately positive overall attitude, with a greater acceptance and support given to AIDS-related issues than to individuals infected by HIV or with AIDS.¹⁵

Pre-and post-courses questionnaire assessments by Strauss, Ronald, P. and Others of a university course on Acquired Immune Deficiency Syndrome (AIDS) taken by 429 colleges students demonstrate substantial cognitive and attitudinal changes over the period. University courses can be an efficient way to educate future community leaders and professionals about AIDS.¹⁶

This study examined the applicability of a multicomponent model to understanding the bases of attitudes toward people with disabilities. The 108


students (65 females, 43 males) reported their attitudes towards three groups—amputees, people with AIDS (Acquired Immune Deficiency Syndrome), and the chronically depressed. They also completed measures of four potential components of attitudes toward the groups (1) stereotypes, (2) symbolic beliefs, (3) emotions, and (4) attributions of control. Results demonstrated that, although the components accounted for a significant proportion of the variance in attitudes toward all groups, the pattern of prediction of attitudes differed considerably among groups. Findings indicate that man had less favourable attitudes towards people who are chronically depressed than did women, with perceived control being the sole predictor of men’s attitudes towards this group. Results suggest that the elimination of prejudicial attitudes will require a heterogeneous approach since components of attitudes appear to be strongly dependent on the type of disability in question. Discussion focuses on the nature of attitudes toward people with disabilities and on potential means of eliminating prejudicial attitudes.17

Thomas and Guinn conducted pretests and posttests examined how race (white or African American) and social class (health professional or recovered drug user) of Human Immunodeficiency Virus (HIV) educators affected level of Acquired Immune Deficiency Syndrome (AIDS) knowledge among low-income

African Americans. Those who viewed a customized AIDS slide show significantly improved in AIDS knowledge.\textsuperscript{18}

Richie and Getty conducted a survey on college students who did and did not attend an AIDS peer education programme completed preprogram and post-programme surveys to determine their AIDS-related attitudes and behaviour. Data analysis indicated students who attended the programme were more likely to engage in preventive behaviours including condom use and HIV-antibody testing.\textsuperscript{19}

According to Williams the former Soviet Union largely ignored sex, sexuality and AIDS. In the 1950s through the 1970s, sex education was harshly moralistic and emphasized health rather than sex. Promiscuity was considered a decadent Western condition which paralleled the moral decay in the US and Europe. Soviet citizens were awkward and embarrassed to discuss sex and had a prudish attitude towards sex. Even though most people did not approve of premarital or extramarital sex, sexual behaviour went through significant changes during the 1970s, and the prevalence of sexually transmitted diseases (STDs) increased. Further, the birth rate fell and abortions increased. These changes motivated Brezhnev's government to undertake a sex education


campaign around 1980, targeting mainly teenagers. Sex was less of a taboo when Gorbachev rose to top Soviet leadership. People were more open to sex education, but few people were qualified to teach it, and those that could do so tended to have traditional attitudes. Inadequate resources, poor training, lack of realism, and a failure to completely reject puritanical values continued to contribute to the failure of Soviet officials, from the time of Stalin to Gorbachev, to deliver proper sex education. Gorbachev’s anti-drugs, alcohol, and prostitution policies, sex education, and AIDS policies failed considerably. Soviet officials asked citizens to return to marital fidelity and abstain from promiscuity. People tended to blame the main victims (i.e. gay males and prostitutes) for acquiring AIDS. Since the collapse of the Soviet Union in December, 1991, the Ministry of Public Health and other ministries may eventually be effective in preventing and controlling HIV/AIDS. Obstacles to overcome are urgent shortages of condoms and disposable syringes and the traditional view of gays and prostitutes as deviants. These obstacles will likely persist through the 1990s, resulting in continued increases in HIV/AIDS. The overall ignorance about sex and traditional patterns of sex behaviour make effective sex education unlikely in the near future.\(^{20}\)

This paper presents findings of a study that examined Mississippi public school superintendents’ attitudes toward persons with Acquired Immune

Deficiency Syndrome (AIDS) or Human Immunodeficiency Virus (HIV). A survey mailed to 153 Mississippi superintendents yielded 107 returns, a 70 per cent rate. The instrument was called the “Superintendents’ Attitudes toward Persons with AIDS in Mississippi Public School Districts.” The sample was predominantly comprised of white males. Overall, the superintendents showed a moderate attitude, neither negative or positive, toward persons with AIDS. Most (66 percent) had not participated in AIDS-education workshops, had not established AIDS-awareness programmes in their school districts (over 80 per cent), and had not encountered persons with AIDS or HIV in their school districts (98 per cent). Gender, age, ethnicity, educational level, geographic location, and years of experience had no significant effect on the administrators’ attitudes. It is recommended that school districts adopt an AIDS policy; develop initiatives that will motivate students to change risky behaviours; research and implement. AIDS-education programme on a continuing basis; and require inservice training for school administrators. Fourteen tables are included. A copy of the questionnaire and study correspondence are included in the appendices.21 The resource guide is a collection of stories, articles, and worksheets on issues surrounding HIV/AIDS. It is intended to be informative and useful for adult language, literacy, and numeracy students. An HIV/AIDS introduction for teacher is followed by a section on further resources, which lists

organizations which may provide quest speakers, support, and further information. It also lists several training packages and videotapes students may find useful, particularly if they are young adults. An HIV/AIDS introduction for students is designed to allay some concerns about this topic that students may have. A student questionnaire follows. It is identical to one that is found at the end of the materials so that changes in students' ideas and understanding of HIV/AIDS issues can be determined. An answer key is provided. Notes for teachers preceding the nine sections of worksheets provide language, literacy, and numeracy objectives as well as suggestions for extension activities. Section titles are as follows: 1) HIV/AIDS True Stories; (2) HIV/AIDS—what are the letters for? What do the words mean? (3) HIV/AIDS—How do you get it? Fact or myth?; (4) HIV/AIDS—Australian statistics; (5) HIV/AIDS—world statistics; (6) HIV/AIDS—different opinions; (7) HIV/AIDS—community awareness; (8) HIV/AIDS newspaper coverage; and (9) HIV/AIDS—terms to avoid using.22

A survey was conducted Bester and Arendse by means of a questionnaire to obtain information on the knowledge and attitudes of 297 nursing students in the Western Cape regarding HIV-infected and AIDS patients. The inquiry focused on the factual knowledge of the students, whether they were afraid of attending to HIV-positive and AIDS patients, and whether they were adequately prepared to care for HIV-positive and AIDS patients. The

particulars of the questionnaire inquired about the cause, spreading, and symptoms of AIDS, risks for nurses, contact with AIDS patients, and the ethical ramifications of caring for them. 96% of them were unmarried females, and 61.3% were junior (1st and 2nd year) and 39.7% were senior (3rd and 4th year) students. The average score of correct knowledge about AIDS amounted to 72.5% (71.0% for juniors and 74.0% for seniors). 81% of the junior and 54% of the senior students deemed that their training in this respect was inadequate; and 91.5% of the respondents (95% of juniors and 88% of seniors) thought that the hospital practice should provide more training. 9.76% of the students stated that they knew a friend who had AIDS. 2.8% of the juniors and 0.8% of the seniors intimated that they would refuse to care for an AIDS patient, if they were ordered to attend to one. 21.9% of the respondents said that their family should be consulted if they were to work with AIDS patients. Those whose level of knowledge exceeded 75% were more negatively inclined towards AIDS patients than those whose level of knowledge was below 75%. It is recommended that the curricula of training institutions provide more AIDS-related information. Fantum and Chala randomly selected a total of 1115 out-of-school youth from Bihar Dar Town in northwest Ethiopia were interviewed in 1994 to provide baseline data for an intervention aimed at controlling the spread of HIV/AIDS in this population. 95.4% of respondents

had heard of AIDS; the primary information sources were radio (80.1%), friends and relatives (58.5%), and health institutions (36.7%). 71.4% of respondents were able to identify more than 1 more of HIV transmission. 86.1% indicated a preference for monogamous sexual relations, 10.1% preferred multiple sex partners, and 2.8% advocated sexual abstinence. 59.3% of interviewed youth were already sexually active; mean age at first intercourse was 15.9 years. The average number of sexual partners among sexually active youth was 3.9, 15.7% indicated an interest in condom use, 51.3% did not like condoms, and 33.0% were undecided about condoms. 30.5% of sexually active youth had ever used condoms; only 22.6% of condom users used them regularly. Out of a maximum possible score of 35, the mean HIV/AIDS knowledge score was 20.6 points. The mean attitude score was 13.5 out of a possible 22, while the mean practice score was 4.8 out of a maximum of 12 points. Age, sex, marital status, education, and employment status were significantly associated with knowledge, attitude, and practice scores. These scores were highest among youth 18-20 years, females, unmarried youth, those with some high school, and civil servants. The association between knowledge score and attitude and practice scores was not significant, however.24

A survey conducted by the Centre for Study and Research on African and Asian Populations in 2 villages in Senegal’s Kaolack region, 5 villages in

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Cameroon's Eastern Province, and 2 hill areas in Burundi investigated the hypothesis that AIDS-related knowledge and attitudes are influenced both by HIV prevalence in the area and gender relations. In all, the data set was comprised of 2526 individual questionnaires, 796 family questionnaires, and 267 qualitative individual interviews. As expected, both men and women from Burundi—a country with high HIV seroprevalence—were more knowledgeable about AIDS than those in Cameroon and Senegal—countries with low HIV prevalence. However, even when economic activity, educational level, and migration were controlled, men in Cameroon and Senegal were significantly more likely than women to be knowledgeable about AIDS. Although stigmatization of persons with AIDS was strong in all 3 countries (because of a perceived association with prostitution), this attitude was more widespread in the 2 low-prevalence countries. The main sources of information about AIDS were, for men, the mass media, and, for women, interpersonal relations. In all 3 countries, personal exposure to someone with AIDS was significantly associated with male gender, higher educational status, employment outside the primary sector, and emigration experience. In Senegal and Cameroon, where personal confrontation with people with AIDS is less common than in Burundi because of lower HIV prevalence, people tended to rely on indirect sources of information about AIDS. The tendency for men to have a broader range of interpersonal contacts than women presumably accounts for men's greater knowledge levels in these countries. In Burundi, in contrast, where the epidemic has a high
prevalence, both men and women are likely to have personal encounters with those with AIDS and thus have equally high knowledge levels.25

The aim of this study was to assess HIV/AIDS related attitudes and practices of hospital-based health workers in Kampala, Uganda. A cross-sectional study was conducted in Mulago Hospital, the main national referral hospital in Uganda. A total of 155 physicians and nurses completed a brief questionnaire on HIV risk perception, attitudes and practices regarding AIDS prevention education, HIV counselling and testing and care of patients with HIV disease. 29% of health workers reported never having discussed AIDS prevention with patients, 26% had never referred patients for HIV counselling and 31% had never advised patients suspected of HIV infection to be tested. Frequent explanations for not providing AIDS prevention education included time constraints and/or lack of related knowledge or skills. While 29% perceived recapping needless as involving no risk, activities involving casual contact with patients and condom use for protection against HIV infection were associated with a high perceived risk of HIV transmission, particularly among nurses. Physicians and nurses differed in their HIV/AIDS-related attitudes and practices. The physicians had a more positive attitude towards the care of patients with HIV disease. In addition, 80% of physicians compared to 59% of nurses referred patients for HIV counselling. A similar trend was found for

advising patients to obtain HIV testing. Hospital-based health workers are missing important opportunities for AIDS prevention education with their patients. There are gaps in their knowledge about HIV and related infection control practices. Interventions should address their concerns and barriers to HIV prevention practices.  

Raza and others randomly selected 733 men and 355 women aged 20-35 years in Lahore, Pakistan, from nonmedical educational institutions and workplaces were anonymously surveyed in a study to assess AIDS-related knowledge, attitude, and behaviour among educated youths. 95.2% of the men and 76.9% of women knew that AIDS exists in Pakistan. Of the entire sample of participants, 25.7% of the men and 21.4% of the women knew what causes AIDS. 59%, 48%, 68% and 43% of the men, and 28%, 45%, 59% and 35% of the women believed that HIV/AIDS could be transmitted through the sharing of utensils, mouth kissing, casual contact, and mosquito bites, respectively. 91% of the men and 86% of the women believed that people with AIDS should be isolated. Among those who responded to a question on pre-extra-material sexual experience, 63 (14.7%) of the men and 2(3.4%) of the women reported having such experience. 51 men and 2 females reported using condoms. The women surveyed had gaps in their knowledge on AIDS and its transmission.

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As part of a phase II clinical trial of a short course of zidovudine by Cartoux and others to prevent vertical HIV transmission in West Africa, HIV counselling and free, anonymous testing was offered to 9724 women attending antenatal clinics in Abidjan, Ivory Coast, and Bobo-Dioulasso, Burkina Faso, in 1995-96. 78.0% of pregnant women in Abidjan and 92.4% of those in Bobo-Dioulasso consented to HIV testing, and 58.4% and 81.8% respectively, returned for the disclosure of their test results. In the multivariate analysis, test refusal was associated with the counselor, high maternal educational level, and ignorance of the main modes of HIV transmission. The only factor significantly associated with failure to return for one's HIV result in both cities was a gestational age of 29 weeks or more. In Abidjan, women testing HIV-positive were three times more likely to fail to return for their test result than HIV-negative women. The greater acceptability of HIV testing in Bobo-Dioulasso than in Abidjan may reflect the lower educational levels, higher HIV/AIDS prevalence, and greater time allocated to the counselling process in the former city. The acceptability of HIV testing by pregnant women requires further attention if interventions to reduce vertical HIV transmission are to reach their intended targets.  

3. Studies on Alcoholism

Barrett illustrate the use and abuse of dangerous and illicit drugs, particularly among young people, continues to rise despite recent efforts to

develop and implement drug education programmes in schools. This study investigated substance use by rural Kansas fifth and sixth graders. Independent variables were gender, family structure, perceived relationship with parents, family substance use, attitude towards family, peer substance use, and self-concept. Dependent variables were number of cigarettes smoked, frequency of cigarette use, amount of alcohol use, frequency of alcohol use, frequency of smokeless tobacco use, and frequency of marijuana use. The sample consisted of 160 students, comprised of 71 fifth graders, 89 sixth graders, with 78 male and 82 females. A status survey design was employed using a three-way analysis of variance. Results showed peer substance use was a significant main effect for all dependent variables, and was more influential when attitude towards family was average to poor. Higher family substance use resulted in significantly higher mean use by subjects in 11 out of 15 interactions. Subjects with poor self-concept who were users nearly always reported greater mean use than those with positive self-concepts. Although peer influence is a significant factor, this study supports the importance of low substance use by family, and of maintaining a working relationship with the child in reducing substance use among rural elementary students.29

According to Strecker alcohol has been and continues to be the drug of choice of youth. More than 75% of adolescents have used alcohol by the age of

16 and over 60% of high school seniors nationwide have used some form of alcohol on the average of once a month. This study investigated factors affecting attitudes toward use of alcohol of 6th grade students (N=68) and 8th-grade students (N=60). Students were from areas in central Kansas in which agriculture was the main source of income, and from a more urbanized area. The students were surveyed, and these variables were investigated: grade placement, gender, community, perceived peer attitude, perceived parental attitude, and knowledge of alcohol. The dependent variable was the individual’s attitude toward use of alcohol score from the Alcohol Attitude Questionnaire. The results of the study appeared to support these generalizations: (1) perceived peer attitude was positively associated with the individual’s attitude toward alcohol use; (2) perceived parental attitude was positively associated with the individual’s attitude toward alcohol use; (3) gender and grade in school were not associated with the individual’s attitude toward alcohol use; (4) no association was found between community and the individual’s attitude toward alcohol use; and (5) knowledge about alcohol was not associated with the individual’s attitude toward alcohol use.\(^{30}\)

Stevens M. and others assessed alcohol use by 1,190 fourth, fifth, and sixth graders in 4 rural school districts. Found that 596 students drank, but not regularly. Reported drinking increased with grade and age; males drank more

than females. Child's attitude toward drinking, family attitudes towards drinking, number of drinking friends, and self-perceived wrong doing by child were related to alcohol use.\textsuperscript{31}

The Minnesota Student Survey was first administered in 1989 to students in grades 6, 9 and 12, when approximately 90,000 students completed the survey. The survey was administered to approximately 131,000 students in 1992. A comparison of the two administrations revealed that the adolescent student population had changed little between 1989 and 1992 as reflected by the demographics and family structure reported by students. Alcohol use appeared to have declined between 1989 and 1992 for all students regardless of age. The greatest change was seen in the increase in students who reported that they had never used alcohol. Marijuana and cocaine use also appeared to decline during the 3-year interval. Tobacco use, in contrast, showed little change between 1989 and 1992. Decreases in alcohol and drug use appeared to hold for both infrequent and frequent use. Fewer adolescents reported initiating alcohol or drug use at young ages, fewer students reported drinking to intoxication, and fewer students reported drinking and driving or riding with drinking friends. Acceptance of drinking and drug use seemed to be waning among adolescents. Antisocial behaviours (vandalism, physical fighting, shoplifting) were unchanged over the 3 year period, as were rates of family violence. Serious

emotional distress and low self-esteem showed slight increases, as did sexual abuse. Suicide attempts showed slight decline among younger students between 1989 and 1992.32

In 1977, a longitudinal study was undertaken to determine the effects of health curricula on children's knowledge level; their attitudes toward good health practices; and their smoking, drinking, and drug-use behavior. Knowledge and attitude tests and a student survey were administered to students who entered kindergarten in 1977. These children were followed longitudinally and retested from first through third grade. Starting in 5th grade, another group of children was added and all children were followed through 12th grade. One group of children received the "Growing Healthy" curriculum from kindergarten through sixth grade. A second group received the standard textbook approach through third grade, then Growing Healthy for fourth through sixth grades. A third group received the standard textbook approach from kindergarten through sixth grade. The findings provide much positive evidence that the elementary school curriculum that children receive has an impact upon their levels of knowledge about health and their attitudes toward health; in addition these curricula appear to have an impact upon present and future health practices of students. Early intervention (using the growing healthy curriculum) with children as they entered the school system, when

compared with intervention only during the early onset years or compared with standard elementary school health curricula, had a positive impact on the level of children's health knowledge, attitudes, and reported behaviour in the reported use of tobacco, alcohol, and other drugs.33

Lord and John examined alcohol use among 7,799 adolescents. Found alcohol use highly correlated with composite effects of variables (behavioural intention; attitude toward school; school misconduct; time spent on sports, extracurricular activities, religion and academics; grade average; gender; and grade level). Alcohol use was positively correlated with time spent on religious activities.34

Study of Duryea and Semark in a cohort of 29 students in a small rural New Mexico school completed a self-report measure of behavioural intention towards alcohol and drug use in 7th and 11th grades. During the four years between measures, students received significantly better behavioural intention toward high-risk situations at post-test.35


35. Duryea, Elias L. and Semark, Larry (1994). Four years of Preventive Health Behaviour Education into an Isolated Hispanic School, Reports-Research (143); Journal Articles (80), New-Mexico.
The DARE (Drug Abuse Resistance Education) programme teaches students decision-making skills, shows them how to resist peer pressure to experiment with drugs and alcohol, and provides positive alternatives to drug use. This report looks at one state's DARE programmes. Included are an overview of the implementation process, a programme appraisal with indicators of programme success, and an outlook for the future. Each DARE project is listed by country or city, along with a brief programme profile. Survey results are presented, beginning with programme appraisals furnished by administrators, teachers, and parents. Student opinions are examined next, and include assessments on self concept, peer influence, attitudes toward police, and other factors. The surveys indicate that the DARE projects were successful; teachers, parents, and administrators all recorded positive opinions of DARE programme. The programmes also fostered community involvement, multi-agency cooperation and pooling of resources, and enhanced citizens' positive attitude toward local police. A number of recommendations are made for future programmes and a list of youth prevention programmes appears. Four appendices offer examples of DARE lessons, a list of substance abuse coordinators, the evaluation instruments used, and figures on juvenile arrests by local agencies.  

The paper of Mack finds, the centres for disease control estimate that each year more than 8,000 Fetal Alcohol Syndrome (FAS) babies are born, and that

many more babies go undiagnosed with Fetal Alcohol Effects (FAE), a less severe condition. FAS and FAE have been identified as major contributors to poor memory, shorter attention spans, lower IQs, diminished achievement levels, and other learning disabilities and behaviour problems in young children. A survey was conducted to ascertain teachers' knowledge of the syndrome, characteristics that typify alcohol-related birth defects, and prevention measures that may be shared with parents in a counselling session. Subjects were 385 Michigan teachers in preschool regular education, preschool special education, kindergarten, and Head Start. Results of the survey indicated that: 1) the teachers had a moderate awareness of FAS and FAE; (2) the syndrome was a problem of growing significance in their classroom; (3) teachers felt they lacked the ability to identify a student with FAS in their classroom, and (4) only a little over half the teachers' schools obtained a child's developmental history. Recommendations based on the results include the following: (1) schools should include questions concerning prenatal alcohol and drug exposure in health screening questions concerning prenatal alcohol and drug exposure in health screening surveys; (2) teacher education programmes should offer training to familiarise teacher candidates with the characteristics, strategies, and methods concerning the education of children with FAS/FAE; and (3) updated resources and information packages should be made available for parent education efforts and community dissemination.37

Robin and Johnson uses the concept of cross-pressures to predict frequency of adolescent alcohol, cigarette, and drug use. Eighth, 10th and 12th grade respondents reported frequency of alcohol, cigarette, and drug use for 30 days prior to the survey. They also reported perception of friends approval or disapproval of substance use, peer pressure to use, and their assessment of use risk.38

Scott notices that alcohol and drug use may be a significant part of the adolescent, high school experience. Programme should be based on an understanding of attitudes and patterns of use, and how change occurs. Elaboration Model of Persuasion is a framework with which to examine attitude change and provides a base for building sound drug prevention programme.39

Redeske views the adolescents continue to use alcohol and other drugs despite the profound risks to their health. This thesis examines the attitudes of students in grades 7-9 toward alcohol and other nonprescriptive mind-altering substances. Eight independent variables were investigated: (1) gender; (2) grade placement; (3) DARE (Drug Abuse Resistance Education) participation status; (4) family structure; (5) alcohol use; (6) nonprescriptive mind altering substance


use; (7) knowledge of alcohol; and (8) nonprescriptive mind altering substances. The sample consisted of 233 students. Results appeared to support the following generalisations; students who use alcohol have a positive attitude toward drinking; gender, grade placement, and DARE participation status should be interpreted concurrently for attitude toward drinking; the independent variables gender and grade placement should be interpreted concurrently for the dependent variable Attitude Toward Nonprescriptive Mind Altering Substance Use; and the independent variables family structure, alcohol use, and knowledge of alcohol should be interpreted concurrently for the dependent variable Attitude toward Nonprescriptive Mind Altering Substance Use. Implications of the study suggest that school officials should develop programmes to reduce alcohol and substance abuse of middle and high school students and communities, in general, should focus greater attention on the use and abuse of alcohol and other substances. Appended are various pieces of correspondence, survey instruments, summary tables of alcohol use and substance use, and instructions for students.40

Taylor et al. assessed the risk, protective, alcohol and other drug (AOD) knowledge and attitudes, and AOD behaviour of 1,797 high-risk youth ages 12 to 19. Results from the survey suggest that the more protective the behaviour,

the greater the AOD knowledge and positive attitude and the lower the risk of AOD behaviour.\footnote{41}

Coleman and others surveyed, at entry 185 nursing, 152 medieval, 140 pharmacy, and 111 allied health students. All but the medical students were re-surveysed two years later following educational intervention. Nursing students displayed more drug use than did pharmacy students, whose curriculum placed more emphasis on drug and alcohol education.\footnote{42}

4. Studies on Practice of Dowry

Dowry, though legally proscribed, is still a culturally sanctioned and socially structured practice in India. In dowry-related violence, not only the husband but his family members take part in the victimization of the woman. This study is based on a content analysis of newspapers to discover the perceptions of the mass media regarding dowry-related crimes against women. The paper explores the content of the news items, with reference to the characteristics of the victims and their spouses, the duration of marriage at the time of the violence, the nature of dowry demands, violence towards the victims, reporting of the incident, and the outcomes. The paper concludes that


in more than 80% of the cases, the outcome is the wife’s death, preceded by physical and mental torture. In almost all the cases, the victimized woman is young, not highly educated, and dependent. The incidents are mostly confined to the early years of marriage and the victim’s husband tends to be the main tormentor. At the time of death, in almost all the cases, the woman was residing at her in-laws’ residence.  

India is a land of diverse populace and geography. The Indian family is meant to fulfil religious obligations from birth to death. Religion is an all-encompassing way of life. The guiding religious texts are the Purusharthas and Varnasrama Dharmas. Inequality of gender, occupation and life-cycle is inherent in Hinduism. There is a negative correlation between population growth and literacy rate. The Indian family is patriarchal. The family follows a joint nuclear-joint cycle. Marriage is a union of two families arranged by elders. A modern scourge of India is the dowry system and dowry deaths. Elders are respected even today divorce though having legal sanction has yet to get social sanction. Religion is an every day part of a Hindu family and the family exists to fulfil religious obligation.

In India, girls are considered a burden because they need a large dowry when they get married and because parents have to bear the cost of rearing


them, even though for most of their working life they belong to their husbands; families. The result of this attitude is that parents spend less on their daughters’ education and health than on those of their sons. Some girls work in child labour to ‘earn’ their dowries, and female infanticide is a frequent occurrence in many states. The state of Haryana, which has only 874 women per 1,000 men, established a scheme in 1994 to attempt to combat sex bias. When a girl is born, the government invests 2,500 rupees in the child’s name in a savings scheme that will yield 25,000 rupees when the girl is 18. Only families with annual incomes of less than 11,000 rupees and no more than two children qualify for the scheme. As the two main political parties in India believe that this scheme will win them votes, it may become national policy.\footnote{The Economist, (1995). India’s Rich Little Poor Girls, v. 334, 40.}

Despite long-standing legal prohibitions, the practice of giving a dowry upon marriage remain strong in India. In Bihar, a Dowry Restrain Act was passed in 1950, but the dowry system prevails and the number of dowry deaths in the state has increased from 9 in 1981 to 153 in 1986. This study uses data on 5949 married women aged 13-49 from the 1992-93 National Family Health Survey in Bihar to examine the attitude that women in Bihar have toward the dowry system and the relationship between the attitudes of these women towards the dowry system and the education of daughters. Attitude towards the dowry system was determined for age, religion, caste, education of the respondent, place of residence, exposure to the mass media, identity of the
person who paid the marriage expenses, total number of living daughters, type of relationship before Marriage and standard of living. Multivariate analysis indicates that urban residents, those with two surviving daughters, Muslims, and members of scheduled tribes exhibited more disapproval towards the dowry system than rural residents, women with one or no surviving daughters, Christians, Sikhs and members of nonscheduled castes. If the families of brides bear the marriage expenses, they exhibit more disapproval of the dowry system. Women with higher educational levels express more disapproval as did women who married relatives. These findings indicate that improving female education could be an important means of inducing the necessary social change to eliminate dowries. Analysis of the data also supports the hypothesis that parents with a favourable attitude towards the dowry system have a correspondingly negative attitude towards educating their daughters. Perpetration of the dowry system means perpetration of female infanticide and domestic violence. As long as the system of arranged marriages continues, dowries will be important. Thus, vital legal amendments must be accompanied by a vigorous campaign for social change.46

Gender-based violence, only recently emerging as a pervasive global issue, contributes significantly to preventable morbidity and mortality for women across diverse cultures. Existing documentation suggests that profound

physical and psychological sequelae are endemic following intimate partner violence. The presentation of domestic violence is often culture specific. A new lexicon, prompted by the expansion of human rights analysis, describes particular threats to local women including dowry deaths honour murder, sati, and disproportional exposure to HIV/AIDS as well as globally generic perils including abuse, battering, marital rape, and murder. While still fragmentary, accruing data reveal strengthening associations between domestic violence and mental health. Depression, stress-related syndromes, chemical dependency and substance (ab)use, and suicide are consequences observed in the context of violence in women’s lives. Emerging social, legal, medical, and educational strategies, often culture specific, offer novel local models to promote social change beginning with raising the status of women. The ubiquity, gravity, and variability of domestic violence across cultures compel additional research to promote the recognition, intervention, and prevention of domestic violence that are both locally specific and internationally instructive.47

The writer explores the phenomenon of dowries in the U.K. as an element adding to patriarchal oppression for South Asian women in households. Her analysis is grounded in research examining the intersection of gender and ethnicity with specific reference to South Asian women in Britain. Her results reveal that dowries are employed to sell women as property in the arranged

47. Fischbach, Ruth, L. Herbert, Barbara (1997). Domestic Violence and Mental Health: Correlates and Conundrums within and across cultures. Social Science and Medicine, v. 45, 1161-76.
marriage relationship. In addition, she argues that education and religion make a significant difference to women’s responses on dowries. She asserts that highly educated women were either living with their partners or single and considered that dowries degraded women. On the other hand, she notes that women with lower levels of education regarded dowries as part of the tradition, custom, and identity of South Asian people and had an arranged marriage and were given a dowry. She concludes that as South Asian women become highly educated, they reject arranged marriages and dowries and enter the labour market.48

This paper uses ethnographic and econometric methods to study the determinants of wife abuse in a community of potters in Southern India. The qualitative work demonstrates that wife abuse is more likely when dowries are perceived as inadequate, when husbands are alcoholic, and when the cause of the abuse is perceived as “legitimate” by the community. Hypotheses generated from the qualitative work are tested with survey data, which confirm that the risk of wife abuse significantly increases with smaller dowry payments and alcohol consumption. Furthermore, the statistical analysis reveals that women who are sterilized or have fewer male children are more likely to be abused.49

A commentary on J. Ensminger and J. Knightys “Changing Social Norms
Common Property, Bride-wealth, and Clan Exogamy,” which appears in this


issue. The breakdown of clan exogamy is not, as Ensminger and Knight maintain, due to the growing power of the young, but to the Galole Orma’s conversion to the Islamic religion, which permits and encourages intralineage marriage. Similarly, the transition from Bride-wealth to indirect dowry developed not from the ability of young men to escape from dependence on their fathers in their need for Bride-wealth cattle but from the Islamic conversion and the Koran-advocated mahr. In conclusion, it can be said that changes in both intraclan relations and marriage transactions are responses to substantial changes in the means and relations of production that are aided by a previous normative change with the acceptance of Islam.  

The writers review four books that discuss the historic evolution of patriarchalism and family structure in Brazil. The books reviewed are the Disappearance of the Dowry: Women, Families, and Social Change in Sao Paulo, 1600-1900, by Muriel Nazzari; Family and Frontiers in Colonial Brazil: Santana de Parnaiba, 1580-1822, by Alide C. Metcalf; The Family in Bahia, Brazil, 1870-1945, by Dain-Borges; and Gesto do pecado: Casamento e sexualidade non manuais de confessores dos seculos XVI e XVII, by Angela Mendes de Almeida.  

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Part of special issue presenting a multicultural perspective on marriage systems in transition. The writer discusses changes in the marriage system in India. She notes that women are marrying at later ages and that there has been a near universal adoption of dowry as a condition of marriage. She points out that these changes have been attributed to changes in the demographic conditions of the marriage market and particularly the deficit of marriageable men. She suggests an alternative view of marriage change, however, contending that gender-stratified marriage rules operating in the context of hierarchical society have shaped Indian women’s marriage opportunities, both historically and contemporaneously. Based on marriage indices from the 1921 and 1981 Indian censuses, she argues that demographic conditions do not fully explain historical or contemporary features of India’s marriage system. She links women’s marriage age and the institution of dowry to female disadvantage in the marriage market and to gender-stratified marriage rules.\(^{52}\)

Becker attributes the existence of marital transfers to inflexibility in the division of joint product within the marriage. If that were the only reason, we would not have observed the coexistence of dowries and bride-prices. This paper offers an alternative analysis. While Becker’s interpretation is retained for bride-prices, a dowry is now represented as a premortem bequest by altruistic parents for a daughter. It not only increases the wealth of the new conjugal

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household but also enhances the bargaining power of the bride in the allocation of output within that household, thereby safeguarding her welfare. Using micro data from Taiwan, we found that a dowry the bride's welfare whereas a bride-price has no effect. These empirical results support the theoretical predictions of the model.\(^{53}\)

This article examines the role of dowries and highlights the variables that affected the size of dowries in fifteenth century Tuscany. The estimation, which matches the households found in the marriage contracts with the corresponding households in the Florentine Catasto of 1427, offers support for the present net value hypothesis and for the altruism model. Results indicate that positive correlation between a bride’s dowry size and her age when used as proxy for her contribution to the marital household. Parents also provided their daughters with larger dowries when they married ‘down’ into relatively less wealthy or socially prominent households.\(^{54}\)

The writer examines the different types of violence against women in Bangladesh and explores their common links and shared roots in the sociopolitical and ideological relations between men and women in Bangladesh society. She draws upon case studies that demonstrate the various types of violence that occur, including murder, domestic violence, acid-throwing, dowry

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deaths, and rape. She discusses the issues involved in considering the complexity of violence, and she describes cases of resistance against violence. She concludes by highlighting the important role of various women’s groups and other nongovernment organizations in trying to establish rights for women in Bangladesh.55

5. Literature on ‘Peace’

Mayton says, an indirect/nonreactive technique of assessing spontaneous concern should be used to examine the salience of the threat of nuclear war. Direct/reactive techniques may produce inconsistent results and inadvertently enhance a false consensus. The procedures for the administration, scoring, and interpretation of a spontaneous concern measure along with acceptable reliability and validity estimates are reported. The salience of the threat of nuclear war is associated with worrying about nuclear war more often, higher levels of other nuclear worries, anxiety, depression, anger, and a greater fear of the future in general. Nuclear threat salience does not appear to be associated with several indicators of general anxiety or mental health, but it is moderately associated with the placing of a higher priority on the value of a world at peace.56


The study was designed to identify developmental differences in the value priorities for individuals who spontaneously expressed a concern about nuclear war and those who did not. The Rokeach Value Survey and the Spontaneous Concern About the Nuclear Threat Scale were administered to a sample of over 5,000 adolescents and over 900 adult community members in the rural inland northwest. About one in four of the adolescents and older adults expressed concern about nuclear war. A significantly smaller proportion of the younger adults expressed concern about a nuclear war than the adolescents and older adults. Value priorities were found to differentiate significantly the two concern groups across the age span. Adolescents and adults who expressed concern about a nuclear war placed higher priorities on the social values of a world at peace. Respondents who did not express a concern about nuclear war placed higher priorities on the individual values of an exciting life and pleasure.57

The findings of a study that examined the impact of peace studies courses at the college and university level upon students is reported. The study involved 260 undergraduate students at 3 Midwestern universities. At the beginning of each course, students filled out a questionnaire; at the end of the course, students were given identical questionnaires to see how their attitudes, beliefs, and levels of activity had changed during the semester. One year later

students were mailed a third identical questionnaire to see what further changes had taken place. A control group also was used so that a comparison of responses between the groups would indicate whether or not the change could be attributed to the influence of a peace studies course. Analyses of the results of the study do not support a major hypothesis of the study, that students taking a peace studies course would have significant changes in attitude in a more peaceful direction than students in a control group. However, the study does show that as a result of taking a peace studies course, one in five students do something to promote peace.58

Since 'enemy images' are important ingredients in preparedness for war, they merit study by researchers interested in peace education and in the psychology of peace and war. This study postulates that images of enemy groups, whether they be foreign countries or various subgroups within one's own country, are an important psychological construct to the willingness of persons to support the use of military force or warfare. The study examines the phenomenon of enemy images among university students in four countries—Denmark, Finland, Sweden, and the USSR. The study employed the use of an associative technique in which students were given a verbal stimulus (such as 'The United States' or 'The Soviet Union) and asked to write all the words that occurred to them during a two minute period. Seven stimuli were used: the

future, avoiding war, enemies of our country, peace, the United States, the Soviet Union, and Human rights. The study was conducted during 1988 and 1989. Results included the finding that the attitudes of the University students from the four countries cannot be said to be greatly characterized by negative and stereotyped images of foreign countries or other foreign groups as enemies, or by militaristic attitudes in general. A 32-item list of references is included.59

This report presents the results and activity ideas created by a peace and international education project. The project implemented and evaluated activities suitable for primary school pupils over a three-year period. The goals, contents, and methods presented are those of peace and environmental education. The teaching suggestions, methods, and activity ideas are based on knowledge and research results in developmental and sociopsychological studies and on moral education. The report discusses the meaning, functions, and impact of peace and international education. Peace and environmental education are discussed from the following perspectives: integration, general pedagogical principles, implementation possibilities, and new learning theories and practices. The report tries to answer the question of how to create the values, attitudes, and skills that make people act for peace and global survival. The document discusses structural violence and education for positive peace, human rights, experiential learning, cooperative learning, promoting moral

growth, growth for tolerance, promoting empathy and altruism, and learning for cooperation and non-violence in the areas of peace and environmental education. Environmental responsibility is broken down into sensitivity to nature and environmental education, and environmental education as a part of formal education. The project found that teachers needed to have a positive attitude towards new ideas in order to create a new model of teaching. Problems of implementation can be alleviated somewhat by keeping all the staff and parents informed of all the new activities. Cooperative learning and learning games helped increase pupils' self-esteem, moral development, and critical thinking.60

Sears explains the experiences of a college teacher teaching a course on the Vietnam War during the Persian Gulf Crisis illustrate the impact that teaching history can have on the consciousness of students. Respect for other cultures and other races are essential before students can stop glorifying war.61

This volume represents the outcome of a series of seven public forums held at the University of Hawaii on problems of ethnic peace. The papers included cover such topics as academic freedom and responsibility; affirmative action and grievances; legacies of colonialism and racism; dynamics of class,


ethnicity, culture, and education; and finally the search for ethnic peace in Hawaii. Panelist presentations are as follows: “Remarks on the Limits of Academic Freedom” (Kenneth Kipnis); “The Politics of Academic Freedom as the Politics of White Racism” (Haunani-Kay Trask); “Discursive Politics” (Kathy E. Ferguson); “The Responsibilities of the Academic” (Peter Manicas); “Native Hawaiian Students and the Role of the University” (Kaleimomi‘olani Decker); “Sexual Harassment and the University’s Responsibility” (Susan Hippensteele); “The University’s Attitude Toward Students” (Robert Wisotzkey); “The Legacy of Racism and the Role of the University” (Manfred Henningsen); “Which side Are You On?” (David E. Stannard); “The Politics of Survival” (Kathryn Waddell Takara); “The Invalidity of the Concept of ‘Race’” (Emanuel J. Drechsel); “The Legacy of Colonialism and the Role of the University - A Native Hawaiian Point of View” (Lilikala Kame‘eleihiwa); “A Journey into the Mind and Body of a Colonial Institution” (Farideh Farhi); “To Challenge Colonial Structures and Preserve the Integrity of Place: The Unique Potential Role of the University” (Noel Kent); “Colonialism at the University of Hawaii: The Experience of a Pacific Island Student” (David Welchman Gego); “Academic Freedom” (Majid Tehranian); “The University’s Responsibility toward Students” (Mary Tiles); “Racism and the University: The Search for Ethnic Peace” (Franklin S. Odo); “The Search for Ethnic Peace in Hawaii” (Donald M. Topping); “A Native Hawaiian Basis for University Restructuring” (Alohilani Kuala); “Perspectives on Racism” (Steven Ito); “Immigrants and Racism” (Sheila Forman); “Baha’i
Faith and Ethnic Peace" (Fariba Piroozmandi); and "Restructuring for Ethnic Peace at the University of Hawaii" (Luciano Minerbi). The report also includes roundtable reports from a forum on class, ethnic identity, culture, and education in Hawaii. Appendices include documents to assist in understanding references made in the papers to specific people and events on the University of Hawaii campus.62

War play is play with a toy that initiates violence or play that involves the imitation of war. War play can involve: (1) the use of toys based on television cartoon shows to imitate the action in the cartoons; (2) play with replicas of war paraphernalia or manipulative shaped into guns; and (3) dramatic play. The negative effects on children that result from the first two types of war play include a lack of creativity and dramatic play, limited ability to work through anxiety, use of negative verbalizations, and increase in undesirable play in the classroom. Positive effects include an enhancement of children’s ability to feel control. Negative effects of dramatic war play include increased aggressive behaviour and negative verbalizations. Positive effects include enhancement of creativity and imagination. In dealing with children’s war play, teachers and parents may ban war play entirely, adopt a laissez-faire attitude, allow war play within limits, or actively facilitate war play. Researchers have offered suggestions to parents for counteracting the negative influences of war play.

Governments in several Scandinavian countries have attempted to reduce the sale of war toys.  

The first part of this study examined children’s concepts of “preference of racial diversities” (PRD); nonviolent conflict-resolution (NCR); and “negative peace” (NP), defined as “peace in contrast to war.” The first part also assessed children’s understanding of PRD, NCR, and NP to their mental development, and the relation of children’s understanding of NP to their understanding of NCR and PRD. Interviews with 42 children of 5 and 6 years of age were conducted. The mental development of the children was assessed. Results from the first part of the study indicated that: (1) a majority of children had reached the concrete operations stage in Piaget’s scheme of cognitive development; (2) children demonstrated a more developed understanding of war than of NP, and a more developed understanding of NCR and PRD than of NP; and (3) a total of 60 per cent of children did not demonstrate any particular racial attitude or preference. Results from the second part of the study indicated no significant correlations between variables.


This book One World, One Earth: Educating Children for Social Responsibility is designed to help teachers, environmental educators, and parents teach children and adolescents about social responsibility. It focuses the environment, human rights, development, the international community, and social justice. It seeks to promote cooperation, solidarity, and security by combating ideas that promote war, violence, nuclear weapons, child abuse, sexism, racism, and environmental destruction. Included in five chapters is a selection of: (1) learning activities and discussion starters; (2) detailed lesson plans; (3) tips for using visual materials; (4) songs; (5) simulation games; and (6) suggestions for working in different settings.65

This publication reports on the results of 35,793 high school participants in the Foreign Policy Association's 1993 study and discussion programme focusing on opinions about U.S. foreign policy. The topics highlighted in the research include: (1) the U.S. in a New World; (2) the United Nations; (3) Germany's role; (4) China; (5) Trade; (6) Russian and Central Asian Republics; (7) India and Pakistan; and (8) Children at Risk. Demographic data are included about those returning the survey. The questions about each issue and the percentages of responses are included in the analysis, as well as some overall conclusions about responses on the topic of foreign policy.66


A 16-month evaluation sponsored by the National Institute of Justice compared the separate and combined impact of two New York City Middle School violence prevention programmes from February 1993 to June 1994. Project Schools Teaching Options for Peace (S.T.O.P.) a traditional conflict resolution programme with a curriculum and peer mediation was offered at all four middle schools studied. The Safe Harbour Programme, which includes a curriculum, a counselling component, and a school wide antiviolence campaign, was offered at three of the four schools. The programmes were separately housed at the schools, and students tended to be more involved in one or the other. For this reason, the targeted approach of the school with only project S.T.O.P. was not compared with the comprehensive approach of the others. Instead, the evaluation focussed on assessing the programmes individually. Inventories about student experience with violence completed by about 2,000 students, interviews with 72 students and 37 teachers, and school statistics on discipline and violence were used to evaluate the programme. Higher participation in the programmes was associated with higher victimization, probably because victimized students sought out these programmes. Students who participated in Safe Harbour became less likely to advocate retaliation in response to conflict than students with no exposure. Participation in both programmes altered the belief that respect was achieved through violence. Both
programmes had positive and strong effects on student attitudes and were well received by teachers.67

The curriculum developed by the Peace Education Foundation to help students deal with conflict is described. The curriculum is life-affirming and teaches that human connection is precious. Conflict-resolution strategies and nonviolent methods advocated by Martin Luther King Jr. are taught.68

This action research project evaluated the impact of a 16 week intervention to improve primary school children’s conflict resolution skills and to enhance their self-esteem. The targeted population consisted of one kindergarten class, one first-grade class, and one third-grade class at three different elementary schools in the same suburban Chicago school district. Teacher observation checklists, teacher and student surveys, individual and teacher interviews, and anecdotal records were used to document the problem. Three types of intervention were used: (1) providing lessons on self-esteem; (2) adapting a life skills unit; and (3) teaching conflict resolution strategies. The five themes for activities implemented twice weekly in 30-minute lessons and adapted to grade level were self-awareness, co-operation, individual responsibility, identification and expression of feelings, and conflict resolution. The impact of the intervention was assessed through observations of children’s


behaviour by participating teachers, other faculty, and the building principals. Findings indicated that there was a decrease in the negative classroom behaviour of physical and verbal aggression and negative social interactions. Student surveys revealed more positive self-esteem and more insight into the feelings of others. Students were able to use the peace table and called on the teacher for mediation in solving disputes.69

The listed literature on Uncontrolled population explosion mainly based on the population education and the necessity to control it. The literature on spread of AIDS deals mainly on the sex education and attitude of the people towards the HIV/AIDS. Studies on ‘Alcoholism’ dealt with, on the knowledge, and attitude of the abuses of drugs and alcohol. The studies on practice of dowry listed here are dealt with the education and the attitude of the people towards the dowry system and the literature on the fifth strategy social disharmony denotes on peace education and its concepts. These studies mentioned here give emphasis on the need for conducting empirical study for conscientising the adult learners of the social issues.