RESEARCH ARTICLE

AWARENESS PATTERN REGARDING HIV/AIDS AMONG STUDENTS OF GHAZIABAD DISTRICT OF UTTAR PRADESH.

Vimal Arya¹ and Vinod Sharma².
1. Assistant professor, Department of Community Medicine, MLBMC, JHANSI.
2. Post Graduate, Department of Community Medicine, MLBMC, JHANSI.

Introduction:

Human Immunodeficiency Virus (HIV) is today prevalent in all parts of the world and India with no cure or vaccine as of now in sight for HIV/AIDS, knowledge about prevention of the disease still remains the mainstay of containing this dreaded disease.

Objective: To assess the actual status of knowledge and awareness towards HIV/AIDS.

Materials and Methods: A community based cross sectional study was conducted in Santosh Medical College, Ghaziabad Medical, Para-Medical & Other technical institutes in Ghaziabad (U.P.) for a period from February 2016 to August 2016. A total of 300 students were studied. Data were collected through self administered, well designed pre-tested and close ended questionnaire. Appropriate statistical analysis was done using Epi-info software.

Results: Colleges maximum no. of the students was between less than 20 years’ age (59.16%) followed by students between 20-25 years’ age group (34.16%). About mode of transmission multiple sex partner 78.83% about blood transfusion, 81.91% about homsexuality knowledge about correct mode of transmission is slightly lower 55.16%.

Conclusion: The preventive effort must focus on increasing awareness of the risks of heterosexual transmission of HIV for people in dating relationship and on strengthening sexual communicating skills with no patterns.

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Introduction:

According to estimates from UNAIDS, 33.3 million people were living with HIV at the end of 2009 and 2.6 million people are newly infected worldwide. UNAIDS reported the changes in incidence rate from 2001 to 2009 among selected countries. It is estimated that 15 million people living with HIV are mostly from lower and middle income countries. The annual number of AIDS-related deaths globally has been decreasing due to the significant scaling up of ART over the past few years. The estimated number of people who died from HIV-related illness in 2009 was 1.8 million [1]. Providing young people with basic AIDS education enable them to protect themselves from becoming infected. Young people are often particularly vulnerable to sexually transmitted HIV, and to HIV infection as a result of drug-use [2]. Acquiring knowledge and skills encourages young people to avoid or reduce
behaviors that carry a risk of HIV infection [3]. Even for young people who are not yet engaging in risky behaviors, AIDS education is important for ensuring that they are prepared for situations that will put them at risk as they grow older [4] The college going students of NCR are thought to be more enlightened towards HIV infection but they also are apparently more under the influence of western culture and don’t shy away from indulging or experimenting in risky sexual behavior. That is why we have planned the present study to assess the actual status of their knowledge, attitude and practice towards HIV/AIDS.

**Material And Methods:-**
A community based cross sectional study was conducted in department of Community Medicine Santosh Medical College, Ghaziabad Medical, Para-Medical& Other technical institutes in Ghaziabad(U.P.) for a period from February 2016 to August 2016. All the students enrolled in medical para-medical and other Technical institutes in district Ghaziabad(U.P.) Students of selected medical, paramedical & other technical institutes in Ghaziabad (U.P.)

**Sample Size:-**
According to NFHS (2005-2006) average age of comprehensive knowledge regarding HIV/AIDS among students of medical, para-medical and other technical institutes is 25% [5]. Taking confidence limit of 95% and required precision of 10%, we calculate the sample size by the formula-

\[ n = \frac{z^2 \times p \times q}{L^2} \]

\( n \) is the desired sample size  
\( p \) is prevalence of knowledge, attitude and practice regarding HIV/AIDS in youths.  
\( p = 25 \)  
\( q = 100 - p \)  
\( L = 5\% \)

Substituting all the values we get \( n = 300 \)  
4 institutes were included so sample size increased to **1200**. From each institute 300 students.

**Inclusion criteria:-**
1. Students of selected professional institutes in Ghaziabad district.  
2. Students who are ready to give consent.

**Exclusion criteria:**
1. Faculty of professional institutes.  
2. Students who are not ready to give consent.  
3. Students who gave incomplete responses.

Data were collected through self administered, well designed pre-tested and close ended questionnaire.

**Results:-**
**Table No-1:-** General Distribution Of Students According To Age And sex.
Table No.1 reveals that among all students from professional colleges maximum no. of the students were between less than 20 years’ age (59.16%) followed by students between 20-25 years age group (34.16%) students between 25-30 years age were (6.41%). Among 1200 students male students were 868 (72.33%) and female students were 332 (27.66%).

<table>
<thead>
<tr>
<th>AGE GROUP</th>
<th>MALE</th>
<th>FEMALE</th>
<th>GRANDTOTAL</th>
</tr>
</thead>
<tbody>
<tr>
<td>Less than20</td>
<td>550</td>
<td>160</td>
<td>710(59.16%)</td>
</tr>
<tr>
<td>20-25</td>
<td>270</td>
<td>140</td>
<td>410(34.16%)</td>
</tr>
<tr>
<td>25-30</td>
<td>45</td>
<td>32</td>
<td>77(6.41%)</td>
</tr>
<tr>
<td>30-35</td>
<td>03</td>
<td>00</td>
<td>03(0.25%)</td>
</tr>
<tr>
<td>TOTAL</td>
<td>868(72.33%)</td>
<td>332(27.66%)</td>
<td>1200</td>
</tr>
</tbody>
</table>

**Table 2:-** Knowledge About Mode Of Transmission.

<table>
<thead>
<tr>
<th>MODE OF TRANSMISSION</th>
<th>TOTAL</th>
<th>PERCENTAGE (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Multiple sex partner</td>
<td>946</td>
<td>78.83</td>
</tr>
</tbody>
</table>
Table No. 2 shows that responses of correspondents were correct in majority about multiple sex partner 78.83% about blood transfusion, 81.91% about homo sexuality knowledge about correct mode of transmission is slightly lower 55.16%. 31.16% & 42.66% students wrongly attributed hugging and kissing as a mode of transmission and 32.16% wrongly attributed mosquito bite as a mode of transmission. 74.83% students reported I/V needles and syringes as a mode of transmission.

Figure 1: Knowledge About Causative Agent.

![Knowledge about causative agent](image)

Figure 1 reveals that viral etiology was opined by 77.33% students. Bacterial etiology was reported by 16.16% students.

Table 3: Knowledge About High Risk Group.

<table>
<thead>
<tr>
<th>HIGH RISK GROUP</th>
<th>NUMBER (n=1200)</th>
<th>PERCENT (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>PROSTITUTE</td>
<td>929</td>
<td>77.41</td>
</tr>
<tr>
<td>HAVING SEX WITH MULTIPLE PARTNER</td>
<td>980</td>
<td>81.66</td>
</tr>
<tr>
<td>HOMO SEXUAL</td>
<td>676</td>
<td>56.33</td>
</tr>
<tr>
<td>I/V DRUG USER</td>
<td>502</td>
<td>41.83</td>
</tr>
<tr>
<td>PRESENCE OF STD</td>
<td>536</td>
<td>44.66</td>
</tr>
<tr>
<td>DON’T KNOW</td>
<td>00</td>
<td>00</td>
</tr>
</tbody>
</table>

Table No 3 reveals that comparatively higher no. of students were able to identify high risk group among prostitute 77.41%, multiple sex partners 81.66%, STD patients 44.66%, homo sexual 56.33 and I/V drug users 41.83.
Table 4: Knowledge About Symptoms And Outcome Of The Disease.

<table>
<thead>
<tr>
<th>SYMPTOMS</th>
<th>NUMBER n=1200</th>
<th>PERCENT (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>PERSISTENT FEVER</td>
<td>940</td>
<td>78.33</td>
</tr>
<tr>
<td>WEIGHT LOSS</td>
<td>880</td>
<td>73.33</td>
</tr>
<tr>
<td>PERSISTENT DIARRHOEA</td>
<td>501</td>
<td>41.75</td>
</tr>
<tr>
<td>ENLARGEMENT OF GLANDS</td>
<td>380</td>
<td>31.66</td>
</tr>
<tr>
<td>DON’T KNOW</td>
<td>00</td>
<td>00</td>
</tr>
<tr>
<td>OUTCOME OF THE DISEASE</td>
<td></td>
<td></td>
</tr>
<tr>
<td>CURABLE</td>
<td>276</td>
<td>23</td>
</tr>
<tr>
<td>IN-CURABLE</td>
<td>924</td>
<td>77</td>
</tr>
<tr>
<td>DON’T KNOW</td>
<td>00</td>
<td>00</td>
</tr>
</tbody>
</table>

Table 4 shows that answers about symptomatology of AIDS reveals that persistent fever is a symptom quoted by majority of students (78.33%) followed by weight loss (73.33%) than persistent diarrhoea and enlargement of glands respectively (41.75%, 31.66%), also reveals that regarding curability of AIDS correct answer was given by 23%.

Discussion:-
In present study regarding general information of students most of the students were of age group less than 20 yrs (59.16%) followed by 20-25yrs (34.16%) and among whole 1200 respondents 72.33%(868) were male and 27.66%(332) were female. In this study respondents stated Blood Transfusion (81.91%) mother's to new born (70%), multiple sex partners (78.83%), homosexuality (55.16%), unsterilized needles (74.83%), indicate average level of knowledge about correct mode of transmission of AIDS. In a study by Srivastava et al found that 96% agreed to transmission via blood transfusion, and from infected mother to new born [6]. In his study LalPanna et al found that majority of students (87.9%) quoted sexual contact, and (81%) sharing of unsterilized syringes and needles, (70.8%)infected mother to her baby as a mode of disease transmission. Regarding incorrect modes of transmission in present study students stated mosquito bite (32.16%), shaking hand (20.16%), sharing utensils (26.08%), hugging (31.16%), sharing toilets (19.66%) and kissing (42.66%), as a possible mode of transmission. This indicates a higher degree of misconception about disease transmission is still among population [8]. In another study Das et al, found that 20% medical students and 70% of general college students opined, shaking hand and mosquito bite as a possible mode of transmission [9]. In a study on adolescents, Bahuleker et al, observed that 40.6% of respondents stated physical contact in school or house could transmit AIDS and 25.5% replied that AIDS is an insect bite [10]. Saini et al, observed that 70% of population of 15-45 years of age quoted kissing and 20% as sharing of food and clothes of AIDS patient as a possible mode of spread [11]. In present study having sex with multiple partners was the most common high risk group as quoted by 81.66% students. Homosexuals (56.33%) students stated as a high risk group. Prostitute or other sex workers is opined by about 77.41%. Odujinrin et al, found that only 54.6% and 51.5% identified homosexuals and I/V drug users being at higher risk [12].

Conclusions:-
Among all respondent’s predominance of age group of 15-20 years (59.16%) was observed. The most common vulnerable age group was youth as stated by 71.66 %. Regarding correct mode of transmission of HIV/AIDS multiple sex partners was stated as common mode by 81.66%. Blood transfusion was quoted by 81.91% and mothers to new born 70%. The most common incorrect mode of transmission was hugging 31.16%; kissing 42.66% and mosquito bite 32.16% as reported by students. The most common narrated mode of getting the disease was acquired 73% hereditary 21.5%and both 5.5% as stated by students. The most common causative agent is virus as stated by 77.33% students. Majority of student78.33% stated persistent fever,73.33% stated weight loss as a symptom of AIDS. The least common symptom was enlargement of gland 31.66%. The preventive effort must focus on increasing awareness of the risks of heterosexual transmission of HIV for people in dating relationship and on strengthening sexual communicating skills with no patterns.
1. Aggressive approach to make the public thoroughly aware by:
2. Seminars, talks and debates.
3. Dramas, contests, street and theatre plays.
4. Exhibition of cartoons, photos and painting.
Conflict Of Interest:- none declared.

Acknowledgement:- authors presents their gratitude towards all the participants as well as head of the department of community medicine and internal medicine.

References:-
4. UNESCO,Director-General(2008),”Why are we still failing our young people?”.