

Knowledge regarding HIV/AIDS among secondary school students in Khammam town, Andhra Pradesh

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ABSTRACT:

Background: "AIDS" is the acronym of "Acquired Immune-Deficiency Syndrome" which is a fatal disease described variously as modern plague, modern scourge, devastating disease, insidious microbiological bomb, biological disaster and so-on. It is a world health problem of extraordinary scale and extreme urgency. AIDS emerged as one of the most important public health issues of the late twentieth and early twenty-first centuries and is now one of the leading causes of global morbidity and mortality. Adolescents and youth need information in order to make such responsible choices in terms of sexual behavior/relationship. They also need to integrate and personalize this information or knowledge so that they can make healthy choices. Young people learn a great deal from each other and by sharing ideas and experiences amongst themselves. Peer influence is a great motivating factor in the adoption of specific behaviour patterns. Therefore, correct information and values imparted to one group of young people will be passed on to the other young people.

Study Design: Cross sectional study

Study period: The study was carried out from June 2011 to December 2011.

Results: Around 92.60% of participants had heard of HIV/AIDS, had written correct abbreviation of HIV and AIDS. Nearly 78.90% knew that causative agent of HIV/AIDS as virus, 76.85% of participants gave correct response for HIV/AIDS awareness symbol as red ribbon. 42.83% of participants knew how to prevent HIV/AIDS. 31.34% participants knew that mosquito bite from HIV/AIDS infected person will not transmit HIV virus. 33.39% of participants knew that intravenous drug abuse will spread HIV virus. 75.43% of participants knew that HIV/AIDS status can be confirmed by blood test. 46.14% of participants who knew that sharing a meal with HIV/AIDS infected person will not transmit HIV virus.

Conclusion: Education is currently the only means of preventing the spread of HIV/AIDS. The education which is needed to protect adolescents from the virus and subsequent disease involves changes at many levels. Individuals and systems have to make changes in their thinking, behaviour, attitudes, beliefs and policies.

Key words: HIV/AIDS, Khammam, Knowledge

Introduction

"AIDS" is the acronym of "Acquired Immune-Deficiency Syndrome" which is a fatal disease described variously as modern plague, modern scourge, devastating disease, insidious microbiological bomb, biological disaster and so-on. It has emerged as an unprecedented pandemic cutting across all boundaries - International, Socio-economic, Age, Sex and Race. AIDS is already established in several countries of the world. Its exponential progression and tremendous impact on mankind is still frightening. HIV (Human Immuno

Deficiency Virus) catches persons usually in their prime youth (20-39 years), chistles out immune system, opening avenues for opportunistic diseases- both infectious and cancerous leading on to exceedingly complex clinical signs and symptoms with high fatality. It is a world health problem of extraordinary scale and extreme urgency. AIDS emerged as one of the most important public health issues of the late twentieth and early twenty-first centuries and is now one of the leading causes of global morbidity and mortality [1]. Educating individuals about actions they can take to protect themselves from being

infected is vital. Reaching youngsters at an impressionable age before they become sexually active can lay the foundation for a responsible lifestyle, including healthy relationships and safe sex habits. Until a vaccine or cure for AIDS is found, the only means at present available is health education to enable people to make life saving choices [2]. Adolescents and youth need information in order to make such responsible choices in terms of sexual behaviour/relationship. They also need to integrate and personalize this information or knowledge so that they can make healthy choices. Young people learn a great deal from each other and by sharing ideas and experiences amongst themselves. Peer influence is a great motivating factor in the adoption of specific behaviour patterns. Therefore, correct information and values imparted to one group of young people will be passed on to the other young people. Young people who have developed greater self-esteem and mutually supportive relationships are less vulnerable to peer and other pressures.

Objective

To assess the knowledge of secondary school students regarding HIV/AIDS in Khammam town.

Materials and Methods

It was a cross sectional study carried out from June 2011 to December 2011. The study population includes all full time course (on campus study course) students of the secondary school which were in the field practice area of Urban Health Centre of Mamata Medical College, Khammam. All the students of secondary schools who gave consent for research study were included in the study. Secondary schools which were outside the field practice of Urban Health Centre of Mamata Medical College, Khammam, were excluded. Students who were not willing to participate or refused to give consent for the study were excluded. Written permission was obtained from the District Educational Officer (DEO) of Khammam district and Institution Heads to carry out the study. They were consulted for information regarding number and type of schools and location; DEO issued letters to all the schools for the cooperation. Verbal Consent from students was obtained before the study. The students were administered questionnaire. Survey questionnaire was initially designed and developed in English and translated to Telugu and then back to English to check for consistency and clarity taking in to account similar surveys that have been carried out previously and some questions were modified to suit the context of the study.

Results

Of the total 635 participants, 312 (49.13%) were males and 323 (50.87%) were female students. Among male participants, 21.57% were of 14 years age and 18.11 % of female participants were of 14 years age. The mean age of participants is 13.5 years with SD of 1.29. Nearly half of the respondents were females (50.87%). About 92.60% of participants had heard of HIV/AIDS and had written correct abbreviation of HIV and AIDS. Around 78.90% knew that causative agent of HIV/AIDS as virus, 76.85% of participants gave correct response for HIV/AIDS awareness symbol as red ribbon. 42.83% of participants knew how to prevent HIV/AIDS. 31.34% participants knew that mosquito bite from HIV/AIDS infected person will not transmit HIV virus. Among the study subjects, 33.39% of participants knew that IV drug abuse will spread HIV virus, 75.43% of participants knew that HIV/AIDS status can be confirmed by blood test, 46.14% of participants who knew that sharing a meal with HIV/AIDS infected person will not transmit HIV virus.

Discussion

About 92.60% of participants had heard of HIV/AIDS and written correct abbreviation of HIV and AIDS, and 78.90% knew that causative agent of HIV/AIDS as virus. In a study done by Bhalla S et al in Gujarat reported that all participants heard of HIV/AIDS and of them only 60.6% participants had written correct abbreviation of HIV and 87.7% had written correct abbreviation of AIDS [3]. In a study done by Abdul Basir Mansoor in Afganisthan reported that 90.8% of participants aware of HIV/AIDS [4]. In a study done by Lal P et al in Delhi among senior secondary school children reported that all participants heard of HIV/AIDS and of them only 19.9% participants had written correct abbreviation of HIV and 51.4% had written correct abbreviation of AIDS [5]. In a study done by Basir Gaash in Srinagar reported that 76% of participants were aware of HIV/AIDS [6].

In this study 78.90% of participants had mentioned virus as the causative agent of HIV/AIDS. In a study done by Singh et al [7] in Kanpur reported 62.5%, Bhalla et al [3] in Gujarat reported 90.5% participants had mentioned virus as the causative agent of HIV/AIDS. In a study done by Lal et al in Delhi among senior secondary school children reported that 72% of participants knew how to prevent HIV/AIDS [5]. 61.89% of participants had wrong perception regarding the availability of vaccine for HIV/AIDS; Benera et al in their study on under graduates at Delhi University reported that 59% knew that vaccination cannot prevent HIV/AIDS infection [8].

Table 1: Distribution of study participants according to their age and gender

Age of study participants (in Years)		12	13	14	15	Total
Gender	Male	35 (5.51)	51 (8.03)	137 (21.57)	89 (14.02)	312 (49.13)
	Female	41 (6.46)	63 (9.92)	115 (18.11)	104 (16.38)	323 (50.87)
	Total	76 (11.97)	114 (17.95)	252 (39.69)	193 (30.39)	635 (100)

Note: Figures in parenthesis denotes percentages.

Table 2: Distribution of study participants according to their education status and Sex

Education status of study participants		VIII class	IX class	X class	Total
Gender	Male	91 (14.33)	97 (15.27)	124 (19.53)	312 (49.13)
	Female	99 (15.59)	107 (16.85)	117 (18.43)	323 (50.87)
	Total	190 (29.92)	204 (32.13)	241 (37.95)	635 (100)

Note: Figures in parenthesis denotes percentages.

Table 3: Distribution of study participants according to their knowledge about HIV/AIDS- Correct Responses

Response of study participants	Respondents
Heard of HIV/AIDS	588 (92.60)
Full form of HIV	588 (92.60)
Full form AIDS	588 (92.60)
Causative agent of HIV/AIDS as virus	501(78.90)
Symbol of HIV/AIDS awareness is red-ribbon	488(76.85)
HIV/AIDS can be prevented	272(42.83)
No vaccine for HIV/AIDS	242(38.11)
HIV/AIDS status can be confirmed by blood test.	479(75.43)
Sharing a meal with HIV/AIDS infected person will not transmit the virus.	293(46.14)
Hugging and shaking with HIV/AIDS transmitted person will not transmit HIV virus	358(56.38)
Mosquito bite from HIV/AIDS infected person will not transmit HIV virus	199(31.34)
Sharing injection, needles and razors with a HIV infected person will transmit HIV virus	484(76.22)
Infected blood transfusion will spread HIV virus	458(72.13)
IV drug abuse will spread HIV virus	212(33.39)
Using public toilets will not spread HIV virus	341(53.70)
Sexual contact with HIV effected people will spread HIV virus	214(65.20)
Faithful and infected sexual partener will protect them from HIV/AIDS	432(68.03)

Note: Figures in parenthesis denotes percentages.

75.43% of participants knew that HIV/AIDS status can be confirmed by blood test; where as in the study of Selcuk Koksal et al in Turkey reported that 88% knew that HIV could be detected through blood test [9].

In this study 56.38% of participants who knew that hugging and shaking hands with HIV/AIDS infected person will not transmit HIV virus. In a study done by Singh Sk et al [7] reported 53.9% of participants, Selcuk Koksal et al [9] reported 73.1%, Basir Gaash et al [6] reported 82.22%, Bhalla et al [3] reported 90.8% knew that shaking hands with HIV/AIDS infected person will not transmit HIV virus. Singh et al [7] reported 52.33% and Bhalla et al (3) reported 90.8% knew that hugging with HIV/AIDS infected person will not transmit HIV virus. In a study done by Singh et al [7] reported 44.67% of participants, Lal et al [11] reported 70.04%, Selcuk Koksal et al [7] reported 58.3% of participants knew that mosquito bite from HIV/AIDS infected person will not transmit HIV virus. 78.51% of participants knew that sharing injections, needles and razors with a HIV/AIDS infected person will transmit HIV virus. In a study done by Basir Gaash et al [6] reported 23.11% of participants, Bhalla et al [3] reported 96.6%, Rekha Udgiri et al [12] reported 50.35% and Lal et al [5] reported 44.4% of participants knew that sharing injections with a needle from an HIV/AIDS infected person will transmit HIV virus.

This study reported 72.13% of participants knew that infected blood transfusion will spread HIV virus. In a study done by Basir Gaash et al [6] reported 73.3% of participants, Bhalla et al [3] reported 96.65%, Kamala et al [13] reported 75.5%, Rekha Udgiri et al [12] reported 58.15% and Lal et al [5] reported 31.1% of participants knew that infected blood transfusion will spread HIV virus. About 33.39% of participants knew that IV drug abuse will spread HIV virus in this study. Bhalla et al [3] reported 84% of participants knew that IV drug abuse will spread HIV virus. In this study 53.70% of participants knew that using public toilets will not spread HIV virus, Lal et al [11] in their study reported that 83.5% felt that by using public toilets will not spread HIV virus.

Conclusion

1. Education is currently the only means of preventing the spread of HIV/AIDS. The education which is needed to protect adolescents from the virus and subsequent

disease involves changes at many levels. Individuals and systems have to make changes in their thinking, behaviour, attitudes, beliefs and policies.

2. Government should regularly organize and sponsor teachers to attend in workshops, where clarifications could be sought from experts on areas of misunderstanding.
3. Development of an effective and proper HIV/AIDS unit in the science curriculum should be considered.

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