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AWARENESS REGARDING HIV/AIDS AMONG ADOLESCENTS OF AGRA CITY

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Abstract

Background: India estimates third highest number of HIV infections in the world, with about 2.4 million people currently living with HIV/AIDS. Adolescents often face a significant barrier to get the information, education and services required. Discussing reproductive and sexual matter freely is still a taboo in our society. The study was conducted to find out the awareness about HIV/AIDS among adolescents of Agra city.

Methods: The study was performed among adolescents of 13-19 years age group residing in randomly selected urban slums of Agra city. Personal in depth interview of adolescent's boys and girls was conducted. The information was collected using a structured questionnaire confirming the information disclosed by the subjects. Data was analysed using Microsoft Excel and SPSS windows and relevant statistical tests were applied.

Results: Nearly 12% adolescents were not aware about HIV/AIDS. Nearly 17.67% of adolescents had not known any mode of transmission and 41.33% had not known any mode of prevention. About one fifth had a misconception that the disease can spread by mosquito bite and sharing utensils.

Conclusion: Awareness regarding transmission and prevention of HIV/AIDS is poor among adolescents of Agra. The reproductive health education should be a part of curriculum in all schools. Public awareness programme should be directed to society.

Key words: Awareness, adolescents, HIV/AIDS, knowledge, transmission, misconception

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Introduction:

Young people are among the most vulnerable to HIV infection, and they also account for a large proportion of infected persons. UNAIDS considers youth and young people a high priority area and so as the young people have been identified as a current priority area in the UNAIDS secretariat. Although this focus is mainly directed at youth, not adolescents alone, adolescents comprise a large section of the target group. Young people are especially vulnerable to infection as sexual activity begins in adolescence. Majority of studies from across the globe have established that the vast

majority of young people have no idea how HIV/AIDS is transmitted or how to protect themselves from the disease. When equipped with knowledge and skills, young people can however play a strong role in the response to the epidemic. The spread of HIV/AIDS relies primarily on private human behaviour, even if individuals everywhere had the full benefit of measures to reduce vulnerability and full access to the tools and skill to prevent transmission, it is illusory to think that all the spread would stop. However two decades of experience show that behavioural prevention can make a serious dent in the rate of new infection and

change the course of the epidemic.² The HIV programme's major goal is to reach young people through the world campaign. The young people are open to behaviour change that stays for life. They are vulnerable to HIV/AIDS as they are at the experimentation stage of life. Adolescents are potential resources for changing attitudes and behaviour towards AIDS, i.e. they are not just targets but actors in the campaign against HIV/AIDS. ³ With this background this study was conducted to find the awareness about HIV/AIDS among adolescents of Agra city.

Material and methods:

The study was conducted from June 2004 to July 2005. It was approved by ethical committee S. N. Medical College Agra. The informed consent in written was taken from all study participants. The study was performed on adolescent boys and girls of 13-19 years age group residing in randomly selected urban slums of Agra city, attached to Department of Social and Preventive Medicine, S. N. Medical College Agra in 2005. The slums attached to urban health centre (Jattu bazaar, Anand Nagar, and Shiv Nagar) were taken up for the study purpose. Random sampling technique was adopted for selecting the areas. Systemic Random sampling technique was adopted for selection of adolescents for achieving the desired sample size. The information was collected by personal in depth interview of Adolescents boys and girls in questionnaire predesigned, pretested appropriate statistical test was applied. The sample size for study was calculated by applying the formula $n=4PQ/L^2$. Where n = no. Of sample, P is the prevalence, Q=100 - P and L is permissible error. P = Prior prevalence of awareness recorded among rural woman of U.P. i.e. 27.6%. as reported by NACO was taken.⁴ On this basis sample size came out to be 263.5. It was thus decided to include 300 adolescents.

Results:

Out of 300 adolescents, 88% had heard about 'HIV/AIDS'. Awareness was significantly more among males (92%) than females (84%), (p<0.05). Nearly 82.33% of respondents had knowledge of at least one mode of transmission while 58.67% were aware of at least one mode of prevention. Majority (72.67%), had heard about condoms, the difference between males (92.0%) and females (53.33%) being statistically significant (p<.001). (Table 1) About 21.6% of adolescents had a misconception of disease transmission by water, nearly 21% thought that mosquito bite could transmit it. (Table 2)

Table 1: Awareness about HIV/AIDS amongst adolescents

Table 1: Awareness about HIV/AIDS amongst adolescents											
Variables	Male		Female		Total						
Ever heard of	n=150	%	n=150	%	N=300	%					
HIV/AIDS											
Yes	138	92.0	126	84.0	264	88.0					
No	12	8.0	24	16.0	36	12.0					
Chi-Square=4.545, df=1, P-value <0.01											
Knowledge of											
transmission			1								
Yes	129	86.0	118	78.6	247	82.3					
No	21	14.0	32	21.2	53	17.6					
Chi-Square=2.77, df=1, P-value >0.05											
Knowledge of											
prevention											
Yes	96	64.0	80	53.3	176	58.6					
No	54	36.0	70	46.6	124	41.3					
Chi-Square=3.52, df=1, P-value >0.05											
Knowledge											
about cure											
Yes	37	24.6	30	20.0	67	22.3					
No	85	56.6	54	36.0	139	46.3					
Do not know	28	18.6	66	57.3	94	31.3					
Knowledge											
of vaccine											
Yes	36	24.0	18	12.0	54	18.0					
No	79	52.6	75	75.0	154	51.3					
Do not know	35	23.3	57	38.0	92	9.6					
Knowledge											
of condom		1	1	1							
Yes	138	92.0	80	53.3	218	72.6					
No	12	8.0	70	46.6	82	27.3					
Chi-Square = 56.4, df = 1, P-value <0.001											

Table 2: Misconceptions about transmission of HIV/AIDS

Modes of transmission	Males (n=150)		Females (n=150)		Total (n=300)	
	Yes	%	Yes	%	Yes	%
Air	33	22.0	14	9.33	47	15.6
Water	36	24.0	29	19.3	65	21.6
Hand shake	28	18.6	21	14.0	49	16.3
Hugging	37	24.6	35	23.3	72	24.0
Sharing food /utensil	22	14.6	19	12.6	41	13.6
Cough/sneeze	12	8.0	17	11.3	29	9.6
Sharing cloth/bed	23	15.3	14	9.3	37	12.3
Sharing toilet	24	16.0	30	20.0	54	18.0
Mosquito bite	47	31.3	16	10.6	63	21.0

Discussion:

In the present study 88 percent adolescents had heard about HIV/AIDS (92% males and 84% of females). Goyal et al (2003) ⁵ also reported almost similar findings in their study among students as 92 percent had heard about HIV/AIDS while Malleshappa et al (2008)⁶ in their study among rural youth also reported that 93% of males and females both had heard of HIV/AIDS. Lal et al (2008) 7 also reported that 100% of students had heard about HIV/AIDS. Lower awareness about HIV/AIDS (61%) was found by Yadav et al (2011) 8 among the young people in a rural study. Out of 300 adolescents, 82.33% had the knowledge of at least one mode of transmission. Sunder et al (1997)⁹ reported similar finding to the present study, as 81 percent of the respondents were aware about sexual contact as a route of transmission of disease. In this study 73.33% of adolescent males and 64.67% of females correctly knew that AIDS does not spread by shaking hands. About 4.89% male and 6.48% female students felt that it can be transmitted by casual contact and handshake in a study by Kore et al. 10 The high level of misconception in the present study may be due to the fact that it was conducted in urban slums. About 17% of respondents had a misconception that the disease could spread through mosquito bites, while 18% believed that it could spread by sharing public toilets and 13.6% thought that it could spread by sharing food or utensils in our study. Almost similar findings were reported by

Malleshappa et al (2008) ⁶ that the disease spreads through mosquito bites (17%), sharing public toilets (11%) and sharing utensils (20%). Goyal et al (2003)⁵ also reported that 20 percent students opined that disease could be transmitted by sharing utensils. Srivastava A et al (2011)¹¹ also reported similar findings where 20.5% of the students believed that mosquito bite could spread the disease, while 18.2% thought that it could spread by sharing meals. Singh et al (2009)¹² also reported misbelieve about HIV/AIDS transmission through mosquito bite (19.5%), and sharing utensils 7.3%. Yadav et al (2011) ⁸ also reported almost similar finding where 18.56% of study subjects believed that HIV could be transmitted by mosquito bite, while 17.25% thought that HIV could be acquired through eating food with HIV positive individuals. In the present study 31.33% males and 10.67% females had a misconception that disease could spread by mosquito bite. This is comparable to the results reported by Sunder et al (1997)⁹ as more than 19 percent and 30 percent of females and males respectively believed transmission by mosquito bite. In the present study 58.67% respondents said that the HIV/AIDS is preventable, similarly Lal et al reported in his study that 72% students were aware of HIV/AIDS being preventable.⁷

Conclusion:

Nearly 12% adolescents were not aware about HIV/AIDS. Nearly 17.67% of adolescents did not know any mode of transmission and 41.33% did not know any mode of prevention. About one fifth had a misconception that the disease can spread by mosquito bite and sharing utensils. reproductive health education should be a part of curriculum in all schools. There should be classroom based education programme HIV/AIDS and STDs and the class teacher should be properly trained for educating the students effectively. Public awareness programme should be directed to society. Apart from government sectors, the AIDS education should be programme activity of the local health agencies, NGO's, both mass & folk media agencies, the educational institutions, as well as the community at large with an interpersonal communication strategy.

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