



Awareness on HIV/AIDS Among College Students: An Empirical Study in Karimnagar District

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Abstract : *The HIV/AIDS pandemic is steadily increasing in severity throughout the developing world. Recently, India has become a rising concern for health care professionals in the field of infectious disease. Most of India states are experiencing surging prevalence and incidence rates of HIV infection. In order to decrease transmission rates among youth, quality HIV/AIDS education must be implemented in a culturally relevant manner. This paper examines knowledge and attitudes on HIV/AIDS among college going girls of Karimnagar town.*

Keywords: *Knowledge, attitudes and perceptions of HIV/AIDS among girls.*

Background: India has the third-highest number of people living with HIV in the world with 2.1 million Indians accounting for about four out of 10 people infected with the deadly virus in the Asia-Pacific region (UN Report-2016). In India 24 lakh people are living with Human Immunodeficiency Virus (HIV). 1.16 lakh positive cases newly reported in the last year. 1.47 lakh people have died with AIDS. At the end of 2015, more than 9.03 lakh people were on antiretroviral therapy, the second largest number of people on treatment in any single country. HIV high intensity states are 1.7 lakh in both in Telugu states, 1.43 lakh in Maharastra, 1 lakh in Karnataka, 80 thousand in Tamilnadu and 40 thousand in Gujarath state. Highest cases recorded countries in the world are 63 lakh in South Africa, 33 lakh in Nigeria, 24 lakh in India, 15 lakh in Kenya and 14 lakh in Mozambique, B. Suresh Lal(2016).

World Scenario: Worldwide, 2.1 million people became newly infected with HIV, 150 000 children became newly infected

with HIV, 1.1 million people died from AIDS-related causes worldwide in 2015. Tuberculosis remains the leading cause of death among people living with HIV, accounting for around one in three AIDS-related deaths. At the end of 2015, US\$ 19 billion was invested in the AIDS response in low- and middle-income countries. UNAIDS estimates indicate that US\$ 26.2 billion will be required for the AIDS response in 2020, with US\$ 23.9 billion required in 2030 B. Suresh Lal(2016).

What is HIV: Human Immunodeficiency Virus? **What is AIDS:** AIDS is caused by HIV over a period of 10 years becomes AIDS and it kills or damages the body's immune system cells. AIDS refers to the condition of **Acquired Immune Deficiency Syndrome**. The AIDS virus causes a breakdown of the body's immune system, making it vulnerable to infections and cancers which normally do not affect a healthy body. When the HIV virus enters the body, the condition is described as being HIV infected. At this



stage, the person may appear absolutely normal and may not be even aware that this virus is present. However, when he is afflicted with various opportunistic infections, as a result of the immune deficiency caused by HIV, he is diagnosed as suffering from AIDS. Thus, the AIDS virus is deadly since it kills the lymphocyte (the helper T-Cell), which is the most critical to the immune response B. Suresh Lal(2016).

History of AIDS: The first report in June 1981, from the Centre for Disease Control in Atlanta, Georgia, was of five young homosexuals in Los Angeles suffering from a rare lung infection due to a protozoan (single cell micro-organism) called *Pneumocystis Carinii* *Pneumonia* (PCP). In the same year, New York and California reported a rare skin cancer called Kaposi's sarcoma in 26 previously healthy homosexuals. These patients lost their resistance to infection which renders them vulnerable to relatively docile micro-organisms ultimately making the infection overwhelming and fatal and fatal. **In India**, the first HIV infection was detected among prostitutes in Madras (Chennai) in 1986 B. Suresh Lal(2016).

Review of Literature:

Suresh Lal, (2010), focused in his economic study about 45% of the respondents are having no land at all. These are called as landless agricultural labourers. Once this infection is identified their life is hanging and have to spend on medicines, treatment etc. Their landed property, house property, everything becomes useless for them. About 35% of the respondents are having two acres of land, which is neither sufficient for their needs nor able to produce anything. 12% respondents are

having 3 to 5 acres of land, about 8% respondents are having 6 to 10 acres of land. The landlords and the landless are equally important before the HIV/AIDS. Here also no discrimination between the rich and the poor is evident. Out of three hundred respondents, about 72% of the people are working in the agriculture and allied activities and about 28% of the people are working in the private and government sector, which shows the pitiable condition of the people who are affected by the HIV/AIDS.

V. Cooper, (2016), provides an overview of the 23 studies that met the inclusion criteria. Most explored valued aspects of care among a general sample of people living with HIV but some focused on the views of specific groups, such as those from Black African communities, men who have sex with men (MSM), asylum seekers and intravenous drug users.

WHO, (2004), globally, it is known that there is a lack of HIV knowledge among youth between the ages of 15-24. Youths are at the epicenter of preventing the progression of the HIV/AIDS pandemic. The WHO estimates that youths ages 15 to 24 comprise 50% of all new HIV infections and consequently must be targeted for education in decreasing transmission and reducing the stigmatization of an HIV diagnosis.

The Human Rights Watch (HRW-2004) and the United Nations Educational, Scientific and Cultural Organization (UNESCO-2004) estimate that in India, only 47-59% of students enrolled in state-run primary (grades 1-7) schools make it to grade 5, in addition, fewer girls attend school than boys, and those that do, drop out at significantly higher rates than boys.



Pre- and extramarital relations, including multi-partnered sex is prevalent in this tribal community, and safe sexual practices are not reported, while the risk perception is very low.

At a national level, 83.8% of the youth were aware of condom use for protection against HIV/AIDS. Only 4 in 10 students from Delhi University used a condom sometimes during sexual intercourse. An awareness level as low as 11% regarding the preventive action of condoms has been recorded among married female youth in the state of Tamil Nadu. More alarming is the reported condom usage rate of 7% by sexually active youth in a town in Assam state Anita Nath (2009).

Methods and Materials:

A student-based study was conducted between August and September 2016 in residential college of Karimnagar district of Telangana State, India. The study population was comprised of young people aged 15 to 20 years living in the study area. A random sampling design was used to select of subjects from the study population. A total of 100 samples were included in the survey.

A total of 100 young girls from government residential degree college in Karimnagar town was included in the survey. A structured questionnaire was given them, they read and filled as per their having knowledge on hiv.

Results and Discussion:

More than one third of reported cases of HIV/AIDS in India are among youth and 60 percent of these reside in semi urban and rural areas.

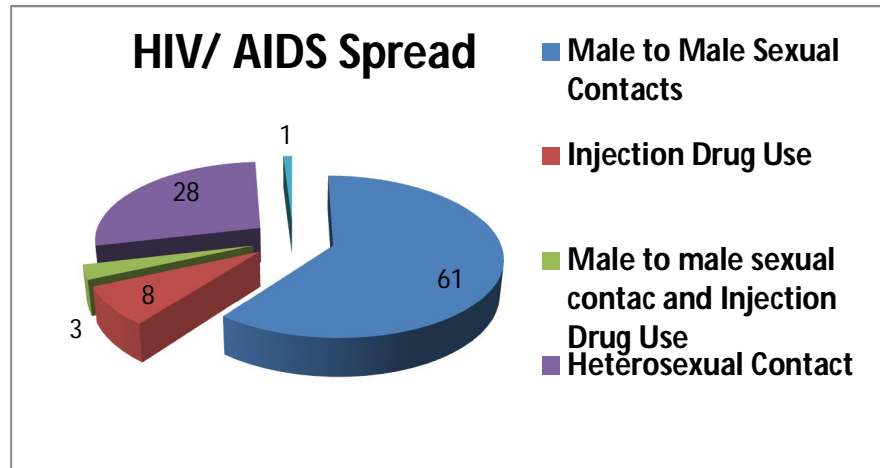
Symptoms of AIDS: There are two basic symptoms: Acute and Severe.

Acute symptoms: The majority of people infected by HIV develop Influenza (flu) like illness within a month or two after the virus enters the body. This illness, known as primary or acute HIV infection, may last for a few weeks. Possible symptoms include: *Headache *Fever Sore *Throat *Muscle soreness *Rash *Mouth or genital ulcers *Swollen lymph glands, mainly on the neck *Joint pain *Diarrhea *Night sweats.

Severe Symptoms: *Headaches *Blurred and distorted vision *Cough and shortness of breath *Persistent white spots or unusual lesions on your tongue or in your mouth *Soaking night sweats *Shaking chills or fever higher than 100 F (38 C) for several weeks *Chronic diarrhea *Persistent, unexplained fatigue *Weight loss *Skin rashes.

Causes of AIDS: A person becomes infected with HIV/AIDS by several ways:

- **Blood transfusions:** In some cases, the virus may be transmitted through blood transfusions.
- **Sharing infected needles:** HIV can be transmitted through needles and syringes contaminated with infected blood.
- **Sexual Contact:** The most frequent mode of transmission of HIV is through sexual contact with an infected person.
- **From mother to child:** A pregnant woman infected with HIV virus can transmit the virus to her fetus through their shared blood circulation, or an infected nursing mother can transmit it to her baby through her breast milk.



Figure, provides that HIV is spreading among male to male sexual contacts(MMS) than heterosexuals cares, followed by injection drug users.

Driving Forces of Spreading HIV:

Poverty: Poverty makes whole communities vulnerable to AIDS by forcing men to leave their families in search of work, by leaving people hopeless enough to turn to the solace of drugs, or by making prostitution as survival strategy for women and children. AIDS then completes the vicious circle by making the community even poorer.

Migration: People migrate for searching employment in urban areas is also a cause of HIV.

Table-1 provides the Demo graphical information of age group, educational status, community particulars and parent education level, all the sample

respondents comes under age group of 15-20 years. Their percentage is 100. Education level of sample girls respondents are under graduation. The community particulars of sample respondents out of 100 68 percent are schedule caste, 16 percent are schedule tribes, while 12 percent is backward class and four percent OC and their mean value is 1.52. further we asked respondents parents educational levels out of 100 , 59 percent are illiterates, 52 percent studied up to primary educational levels, 10 percent are completed secondary level and while six percent are intermediate level and remaining three percent are under graduation.



Table-1: Demographic Information.

SI. No	Parameters	Frequency	Mean	Std. Deviation	Percentage
1	Age 15-20 yrs	100	2.0000	0.0000	100
2	Class Under graduation(UG)	100	2.0000	0.0000	100
3	Community SC	68	1.5200	0.8585	100
4	ST	16			
	BC	12			
	OC	04			
	parents education Illiterates	59	1.7200	1.0644	100
	Primary	22			
	Secondary	10			
	Intermediate	06			
	UG	03			

Table - 2: Awareness on HIV/AIDS

SI .No	Parameters	Frequency	Mean	Std. Deviation	Percentage
1	Awareness on HIV/AIDS Yes	98	1.0400	.2814	100
	No	2			
2	Do you first hear about AIDS Television	40	2.4800	1.2830	100
	Radio	01			
	Friends	30			
3	News paper	29			
	HIV full form Human Immunodeficiency Virus	97	1.0300	.1714	100
	Health Immunodeficiency Virus	03			
4	AIDS full form Accidental Immune Deficiency Syndrome	05	1.9500	.2190	100
	Acquired Immune Deficiency Syndrome	95			
5	AIDS is caused Virus	90	1.2800	.8655	100
	Bacteria	01			
	Any other	09			



Table-2 indicates that having awareness on HIV AIDS 98 percent sample girls respondents was replied they are aware of HIV AIDS., and remaining two percent sample girls respondents replied they don't know about HIV AIDS, and there mean value is 1.04. Further we asked a question how you first hear about HIV AIDS 40 percent sample girls respondents replied they have got information through television, 30 percent replied they got information through friends and peers, and remaining 29 percent got information through news paper. There mean value is 2.48.

We have tried to get the information about the abbreviation of HIV 97 percent

sample girls respondents replied they are aware of abbreviation of HIV and only three percent replied wrongly. the similarly we have to further try to get the knowledge of the students by getting the question abbreviation of AIDS.95 percent replied correctly the full form of AIDS, and remaining five percent girls replied wrongly. table-2 provides the information of AIDS we have asked the knowledge of sample under graduation students 90 percent replied AIDS is caused by virus, nine percent replied AIDS caused any other diseases, and one percent replied AIDS is caused bacteria they mean value is 1.28.

Table - 3: Mode of Transmission HIV/AIDS

Sl. No	Parameters	Frequency	Mean	Std. Deviation	Percentage
1	Do you know difference between HIV and AIDS Yes No	87 13	1.1300	.3380	100
2	Do you discussed sex or AIDS with whom Classmates Friends Teachers Counselor	29 52 12 07	1.9700	.8343	100
3	Have you ever been told about sex or AIDS Teachers Parents Counselors Doctors	89 04 05 02	1.2000	.6195	100
4	Mode of transmission	33 21 14			



	Blood transfusions	11	2.8700	1.8998	100
	Un protected sex	03			
	Sharing injections	15			
	Injecting illegal drugs	03			
	Sex with prostitutes				
	Multiple partners				
	Kissing				
5	Can you tell a positive person HIV by the way looks	91	1.9100	.2876	100
	Yes	09			
	No				
6	High risk groups for HIV/AIDS	47	2.2400	1.2482	100
	Adolescents	21			
	Truck drivers	29			
	Drug addicts	03			
	Don't know				

Table -3 depicts mode of transmission of HIV AIDS 87 percent of college going girls replied that they know difference between HIV and AIDS only 13 percent girls replied 'No' they don't know difference between HIV and AIDS their mean value is 1.130. Therefore, the girls who are studying under graduation levels required awareness on HIV AIDS. a question imposed on under graduation girls do you discussed sex related aspects and issues with whom 52 percent replied they discussed with friends, 29 percent discussed with classmates ,while 12 percent discussed with their teachers and seven percent discussed with counselor, their mean value is 1.970. another question asked to sample respondents have you ever been told about sex or AIDS 89 percent replied teachers five percent replied counselors and four percent parents only two percent by doctors hence teachers are playing important role to educate to students on various health

related issues including HIV AIDS 33 percent college going girls replied mode of transmission of HIV AIDS through blood transfusion 21 percent replied unprotected sex, 15 percent replied having sex with multiple partners 14 percent replied through sharing injections. Another 11 percent mention that injecting illegal drugs and three percent sex with prostitution and through kissing. a question asked to the college going girls can you tell a positive person HIV by the way looks 91 percent replied 'Yes' and 9 percent replied 'No' it shows that HIV positive people not identify as they looks positive another question asked to the under graduation girls higher risk groups for HIV. 47 percent replied adolescents, 29 percent replied drug addicts while 21 percent replied truck drivers three replied they don't know.



Table - 4: Prevention of AIDS

Sl. No	Parameters	Frequency	Mean	Std. Deviation	Percentage
1	Aids is				
	Curable	20			
	Non-curable	52	2.350	1.0860	100
	Preventable	01	0		
	Non-Preventable	07			
2	Do you aware of the concept of safer sex or AIDS	65			
	Yes	09		.8750	100
	No	26	2.390		
	Don't know		0		
3	Transmission of HIV from mother to child	44			
	During pregnancy	12		.9428	100
	During delivery	44	2.000		
4	During breast feeding		0		
		58		.4960	100
5	Knowledge of about treatment of AIDS	42			
	Yes		1.580		
	No	41	0		
		45		.6942	100
	Knowledge about method of prevention	14			
	Using condom				
	Safe transfusion		1.730		
	Use disposable syringes		0		

The information about prevention of HIV/AIDS provides table-4 a question asked to respondents, they replied AIDS is curable, non curable, preventable, non preventable. 52 percent replied AIDS is Not curable, 20 percent replied curable. While seven percent Non preventable, only one percent replied preventable one fourth of respondents have to get more awareness an HIV/AIDS their mean value is 2.350 because AIDS is not a curable disease. A question asked the concept of

safer sex or AIDS 65 percent under graduation girls replied they know the concept of safer sex, nine percent replied 'No' and 26 percent replied they don't know their mean value is 2,390. The table provides transmission of HIV from mother to child 44 percent sample respondents replied transmission of HIV from mother to child during pregnancy and equally replied during breast feeding and 12 percent replied with during delivery their mean value is 2.00. The



same table provides the knowledge of treatment of AIDS 58 percent respondents replied 'Yes' and 42 percent replied 'No' their mean value is 1.580. Table also provides knowledge of methods of prevention 45 percent replied HIV can prevent through safe transmission of blood or protected blood transfusions and 41 percent replied using condom while participatory in inter course and 14 percent replied disposable syringes usage can avoid HIV their mean value is 1.730.

Impact of HIV: Once HIV infection is identified their life is hanging and have to spend on medicines, treatment etc. loss of working hours per day and the working days per year, due to ill health. The number of working hours lost shows the physical productivity decline in the economy. People are affected with HIV/AIDS, who require expenses to cure their diseases. This shows a pitiable condition of the victims.

Stigma/ Discrimination: The people who are already suffering with HIV/AIDS and these diseases keep them at low profile in the society. As a result of these diseases people are suffering from reactive depression is their life.

HIV Prevention: Avoiding AIDS is as easy as ABC; **A=Abstain, B=Be faithful, C=Condoms.**

HIV can be prevented through sensitization and creating awareness among people and its adverse affects on family and society. Alliance Clubs International is trying to make awareness among people who are living in slums, industrial bets and among youth.

Conclusion:

Women in India are subjected to a lower status in society, this attitude manifests into low levels of educational attainment, socio-economic dependence and in general, limited access to resources. Priya (2005) states that cumulatively, such factors hamper an Indian woman's ability to protect herself from diseases such as HIV. As stated earlier in this paper, women are particularly vulnerable to HIV infections due to a variety of reasons, not only in India, but in the world, and data reflecting abysmally low levels of HIV/AIDS awareness among women are disturbing and call for greater educational programs targeted towards women.

In our study, youth displayed less awareness of prevention methods in comparison to awareness of transmission modes of the disease. Similar findings were observed in other studies conducted across the country without regional variation. Again, awareness of different preventive measures was variable. The study found that young people were less aware of condom use as a prevention strategy than another strategy. The observation highlights the high level of ignorance about this important preventive measure in the sexually active young population in town. It was observed in the study that a good number of youth girls were aware of modes of transmission of HIV/AIDS and its prevention but there were misconceptions among them as well.

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