**Awareness And Attitude Of Youth Toward HIV/AIDS In Tribal Areas Of Vizianagaram, Andhra Pradesh**

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**Title**: Awareness and Attitude of Youth Toward HIV/AIDS In Tribal Areas Of Vizianagaram, Andhra Pradesh, India

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Title :Awareness and demeanor of youth toward HIV/AIDS in ancestral areas of vizianagaram

Statement of the issue :Level of education of men and ladies was altogether connected with their insight into HIV/AIDS , showing that literates would be advised to information than ignorant people.

There were a few confusions and deceptions about cause and spread of the contamination which were viewed as more pervasive among ignorant people. Just around 12% of the respondents were ready to go through the HIV test. The respondents with not exactly optional school instruction had a biased disposition toward HIV positive individuals, which was seen as measurably critical. Just 46% of the adolescent answered that it very well may be forestalled and 20% realize that HIV could be available in obviously solid looking people.

This study recommends a requirement for creative, far reaching logical data especially focusing on the provincial youth to bestow better information and figuring out on HIV/AIDS

Objectives : Community-based cross sectional review done to evaluate the mindfulness and demeanor of country young fellows and ladies toward HIV/AIDS.The concentrate on populace remembered 850 young fellows and individuals for the age gathering of 18-30 years, having a place with Kurupam Mandal vizianagaram,Andhra Pradesh, utilizing a two phase examining plan. Universe of study: ancestral populace of kurupam mandal of vizianagaram region

Sample :A people group - based, cross - sectional review was directed in Kurupam Mandal including 850 rustic youth over a time of 90 days (june 2017 - aug. 2017). The assessed test size of 850 young fellows and ladies in the age bunch of 18-30years was haphazardly chosen utilizing a two - stage examining plan.

Research devices :Data assortment was finished utilizing a semi organized pre-tried poll. The poll comprised a sum of 60 inquiries, 40 in regards to mindfulness about the reason and methods of transmission of HIV/AIDS, and 20 to evaluate the demeanor toward individuals living with HIV/AIDS (PLHA).

Information examination :In all, 18% of the ladies and 7% of men had not known about AIDS by any means. The discoveries showed that the ancestral ladies' information was unfortunate when contrasted with men . Presentation Introduction India has the third biggest number of individuals living with HIV/AIDS. Among the states, Andhra Pradesh has the second largest number of HIV cases in the country, with a commonness of 0.90%; pervasiveness is high in the 15 - 49 age bunch (88.7% of all diseases) demonstrating that AIDS actually undermines the cream of society, those in the prime of their functioning life. Temporary appraisals place the quantity of individuals residing with HIV (PLHA) in India in 2008 at 22.7 lakhs. HIV-related shame and separation stays a significant hindrance in really battling the HIV and AIDS pestilence. Shame and separation can bring about individuals living with HIV/AIDS (PLHA) being disregarded by family and the local area, unfortunate treatment in medical care and instructive settings, a disintegration of freedoms, and mental harm. Demonization would make individuals reluctant to finish the test, consequently, more PLHA are uninformed that they are experiencing HIV/AIDS, and are in this manner putting his/her sexual accomplices and/or needle sharers in danger of getting tainted, because of absence of careful steps There are a few purposes behind the disgrace toward PLHA among everyone especially youth in ancestral regions, one of them could be deficient and mistaken data about the methods of transmission of HIV because of social or strict convictions or absence of schooling . There is a tremendous need to survey the mindfulness levels of young fellows and ladies in ancestral regions, towards HIV/AIDS and furthermore occasional assessment of government's actions. Despite the fact that the territory of Andhra Pradesh has the second biggest number of revealed HIV cases, there is absence of data on mindfulness and disposition levels among young fellows and ladies in provincial regions.

Consequently this study was completed to evaluate the degree of mindfulness among the rural youth about HIV/AIDS alongside their mentality toward PLHA. The review was completed in 10 towns of Kurupam mandal in vizianagaram District, Andhra Pradesh. In light of the discoveries, we can concoct appropriate systems to address the misguided judgments by data, schooling and correspondence (IEC)activities. Materials and Methods A people group - based, cross - sectional review was led in Kurupam Mandal including 850 provincial youth over a time of 90 days (june 2017 - aug. 2017). The assessed test size of 850 young fellows and ladies in the age bunch of18-30years was haphazardly chosen utilizing a two - stage examining plan. In the main stage an irregular example of 10 towns of Kurupam Mandal was chosen basedon the 2011 registration. In the subsequent stage, a straightforward irregular example of 75 families was chosen from every one of the chose towns. The data was gathered utilizing a semi-organized, pretested poll approved by National AIDS Control Organization (NACO) and obtained from Andhra Pradesh state AIDS control society (APSACS). The poll comprised of 60 inquiries out of which 40 inquiries to survey the mindfulness levels of respondents about cause ,modes of transmission and avoidance of HIV/AIDS and 20 inquiries to evaluate the disposition toward individuals living with HIV/AIDS (PLHA). During house visits the reason and nature of the study was cleared up for individuals and informed assent was acquired. On getting their assent, I directed an eye to eye interview to fill thequestionnaire.

Results

The segment profile of the review populace is as displayed in table 1. Around 34% of review populace had instruction level of optional everyday schedule and about52% had training level of higher auxiliary school or more.

Around 7% of guys and 18% of females conceded that they had never known about HIV/AIDS, though for about80% of respondents, the principal wellspring of data was TV

The familiarity with the review populace about the methods of transmission of HIV/AIDS is shown in Table 3.

Around 69% of members announced dangerous sex as the method of transmission, and blood bonding (53%),sharing of needles (51%) are the other potential methods of getting contaminated.

Just 32% of study populace knew about breastfeeding as one of the methods of transmission. It is

essential to take note of that around 17% of respondents mistakenly expressed that the sickness spreads through mosquito nibbles, public latrines (11%), sharing utensils(20%), kissing on the cheeks (20%).

At the point when enquired whether HIV contamination could be forestalled, around 46% of youth answered that it very well may be forestalled (Table4). The individuals who referenced that HIVcould be forestalled, were additionally gotten some information about different ways by which HIV could be forestalled. Having single accomplice, utilizing condoms, keeping away from business sexworkers and blood exams were the commonest strategies referenced by all kinds of people

(Table 5).

Just 20% of respondents realize that HIV could be available in obviously sound looking people (Table 6).

Table 7 shows the demeanor of rustic young fellows and ladies about HIV/AIDS and people living with HIV/AIDS (PLHA). Among the respondents around 93% were of theopinion that AIDS patients ought not be confined fromthe society, 26% felt thoughtful toward PLHA; 70% ofparticipants answered that they wouldn't hold back to sit close to a PLHA in the transport. Around 23% expressed that theywould be uncomfortable and anxious assuming their kid's cohort had HIV/AIDS, though 13% thought that tainted youngsters ought to go to customary schools. Just around 12% of the review bunch was ready to go through the test for HIV/AIDS. The respondents with an instructive level not exactly optional school had a prejudicial mentality toward HIV - positive individuals, with the assessment that HIV individuals have the right to endure, wondering whether or not to sit close to a HIV-Positive individual in the transport, and eagerness to get tried for HIV which was viewed as genuinely

Table 1. Segment profile of study populace

Segment variable (n - 850) %

Segment variable %

Age bunch (years)

<20 124 14.5

20 - 25 467 54.9

26 - 30 259 30.4

Orientation

Males 456 53.6

Females 394 46.3

Material Status

Single 467 54.9

Married 352 41.4

Occupation

Student 323 38.0

Farming laborer 367 43.1

Business 26 3.0

Govt. Service 31 3.6

House wife 45 5.2

Others (including 58 6.8

Jobless)

Schooling

Illiterate 105 12.3

Higher secondary 346 40.7

Graduates 68 8.0

Post graduates 34 4.0

Table 2. Wellspring of information about conceptive wellbeing related data

Source Males Females Total

(n - 456) (n - 394) (n - 850)

No. % No. % No. %

Not heard about 31 7 70 18 101 11.8

HIV/AIDS (noinformation)

Media (TV, Filmsetc) 383 83.9 297 75.3 680 80.0

School Books 216 47.3 169 42.8 385 80.0

Family 184 40.3 204 51.7 388 45.6

Peer Group 125 27.4 142 36.0 267 31.4

Medical care

professionals 68 14.9 57 14.4 125 14.7

Others 6 1.3 0 0 0 0.7

Table-3. Consciousness of provincial youth about method of spread of HIV/AIDS

<optional school >Secondary school Total

Method of Spread (n - 402) (n - 448) ( n - 850)

No. % No. % No. %

Dangerous sex 156 38.8 433 96.6 589 69.2

Mosquito bite 39 9.7 106 23.6 145 17.0

Blood transfusion 43 10.6 412 91.9 455 53.5

Sharing of

needles/blades 28 6.9 410 91.5 438 51.5

kissing on cheek 27 6.7 143 31.9 170 20.0

bosom feeding 13 3.2 267 59.5 280 32.9

public toilets 07 1.7 94 20.9 101 11.8

sharing utensils 16 3.9 155 34.5 171 20.1

Table 4. Assessment of provincial youth about HIV counteraction

Can HIV be Males Females Total

Prevented (n - 456) (n - 394) ( n - 850)

No. % No. % No. %

Don't know 31 7.0 70 18.0 101 11.8

Yes 246 53.9 145 36.7 391 46.1

No 179 39.1 179 45.3 358 42.1

Table 5. Information on HIV avoidance among provincial youth

Security Transmision of Males Females Total

AIDS (n - 456) (n - 394)

No. % No. % No. %

Single partner 312 68.4 294 74.6 606 71.2

Use condom 243 53.2 186 47.2 429 50.4

Blood check ups 283 62.0 191 48.4 474 55.7

Needle/needle sterilization 157 34.4 105 26.6 262 30.8

Keep away from business sex workers 208 45.6 249 63.1 457 53.7

Keep away from pregnancy 116 25.4 85 21.5 201 23.6

Abstinence 168 36.8 107 27.1 275 32.3

Don't know 31 7.0 70 18.0 101 11.8

Table-6.. Information about HIV among evidently solid looking people

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Is it possible for Healthy looking | | | | | | | | | |  |  |  | Males |  |  |  |  |  |  |  | Females | | | | |  |  |  |  | Total | | |
| People to have HIV? | | | | |  |  |  |  |  |  |  |  | (n-456) |  |  |  |  |  |  |  | (n-394) | | | | |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  | No. | % | | |  |  |  |  | No. | | | | | % |  |  |  | No. | |
|  | | | | |  |  |  |  |  |  |  |  |  |  | | |  |  |  |  |  |  |  |  |  |  | |  | |  | |
| Yes | | | | |  |  |  |  |  |  | 96 | | | 21.0 | | |  |  |  |  | 75 |  |  |  |  | 19.0 | | 171 | | | |
| No | | | | |  |  |  |  |  |  | 329 | | | 72.1 | | |  |  |  |  | 249 |  |  |  |  | 63.1 | | 578 | | | |
| Do not know | | | | |  |  |  |  |  |  | 31 | | | 7.0 | | |  |  |  |  | 70 |  |  |  |  | 18.0 | | 101 | | | |

Table 7. Disposition of rustic youth towards HIV/AIDS and PLHA

< secondary >secondary Total

Situation School school (n-850)

(n-402) (n - 448)

No. % No. % N0. %

People who have AIDSShould be disconnected from 46 11.4 21 4.6 67 7.8

the family and society

Individuals from the city just will get infected; 57 14.1 19 4.2 76 8.9

not from the towns

Helps is a genetic Disease 95 23.6 46 10.2 141 16.5

Feel thoughtful to PLHA 42 10.4 183 40.8 225 26.4

Would you wonder whether or not to sit close to a HIV 64 15.9 196 43.7 260 30.5

positive individual?

Would you feel awkward if your child's 106 26.3 95 21.2 201 23.6

colleague is HIV positive

Are you ready to get tried for HIV? 14 3.4 88 19.6 102 12.0

Should names of HIV patients made public? 93 23.1 14 32.8 240 28.2

Should tainted youngsters be allowed 34 8.4 81 18.0 115 13.5

in standard schools

Should HIV positive individuals be allowed 23 5.7 74 16.5 97 11.4

to go to social capabilities

Conversation

This study showed that around 18% of females and 7% of guys had not known about AIDS by any means. True to form, level of proficiency was viewed as firmly connected with their insight into HIV/AIDS, as youth with training level of optional school and above were found having preferable mindfulness over those with schooling level not exactly auxiliary school and furthermore uneducated people, especially in the areas like reason, spread and nature of the illness. Misguided judgments and wrong convictions related with HIV/AIDS were viewed as more common among young fellows and ladies who were unskilled people. It was likewise observed that the significant wellspring of their mindfulness was TV.

However 69% of respondents realize that HIV could spread through hazardous sex, blood bonding (53%), a little gathering of respondents (20%) expressed that HIV spreads by basically contacting a contaminated person. This demonstrates that information in regards to how HIV/AIDS isn't spread, is not exactly the information about how it spreads. Likewise, there was a uniqueness in the mindfulness in regards to spread by bosom taking care of between the two training gatherings. It means quite a bit to take note of that around 17% of respondents inaccurately expressed that the infection spreads through mosquito nibbles, public latrines (11%),

It is seen that % of members thought that AIDS patients ought to be disconnected from the general public, while around 26% of the respondents felt thoughtful towards PLHA. Just around 12% of respondents were able to go through a test for HIV; when it was contrasted and the instruction levels, it was viewed as measurably huge. This could be credited to the apprehension about being pariah from society whenever found as HIV positive.

It is intriguing to see that albeit 23% of the respondents expressed that they would be uncomfortable and anxious assuming their youngster's cohort had HIV/AIDS, around 13% of the members thought that tainted kids ought to go to normal schools. The conceivable clarification for this finding could be that despite the fact that they are thoughtful toward HIV contaminated youngsters, with regards to the real world and to their own kids, they wouldn't face the challenge. Notwithstanding, a sensible legitimization to such a demeanor could be that the parent is worried about the security of his/her kid, with respect to wounds or incidents that can happen during school hours. This makes sense of the distinction that exists between needing to redreduce disgrace and rehearsing an uplifting perspective to PLHA in one's regular routine. In another Indian review, 57% felt that individuals living with HIV/AIDS (PLHA) ought to be disconnected when contrasted with 7% in our review (5).

Notwithstanding the decently uplifting outlook of the provincial youth toward PLHA and sensibly great degrees of mindfulness with respect to the methods of transmission, they likewise conceded specific confusions about the methods of transmission of HIV/AIDS. In spite of the overwhelming effort programs did by government alongside NGOs, the misinterpretations and prejudicial mentalities toward PLHA are the significant obstacles in making better mindfulness about HIV/AIDS.

As a large portion of the Indian populace in country regions is ignorant and as it was seen from our review that mindfulness was more among the literates, there is a need to plan and execute new techniques of teaching young fellows and ladies especially in rustic regions who are at the lower training levels, about HIV/AIDS, methods of transmission. Simultaneously more center ought to be given for changing the discernments and mentalities toward PLHA. Alongside new activity procedures, consideration ought to likewise be given to better execution of the current projects to diminish shame, and instill a more uplifting perspective toward PLHA. These, alongside the endeavors of the medical care experts ought to give a tremendous advancement in the worldwide battle against AIDS. changing their perspectives toward PLHA on a pressing premise. Since HIV disease is a unique cycle and could change as a component of time, an ever increasing number of comparable examinations focused on at overall population especially in rustic regions are required at ordinary stretches to test the consequences of the preventive measures and viability of the current strategies.

End

The review has brought into light a portion of the significant issues about mindfulness levels among young fellows and ladies in rustic regions and the activity methodologies required for making them mindful .

References

HIV information National AIDS control association. Accessible

1. A. D. Meundi, A. Amma, A. Rao, S. Shetty, and A. K. Shetty, "Cross-sectional populace based investigation of information, mentalities, and works on in regards to HIV/AIDS in Dakshina Kannada locale of Karnataka, India," Journal of the International Association of Physicians in AIDS Care, vol. 7, no. 1, pp. 27-34, 2008.

2. Report on the worldwide HIV/AIDS plague. Accessible from: http://www.unaids.org/epidemic\_update/report/index.ht ml (got to on 2011 Jan. 15)

3. Government of India-Ministry of wellbeing and family government assistance: state wise HIV pervasiveness (1998 - 2004). Accessible from: http://www.nacoonline.org (got to on 2008 June fourth)

4. .Rural Indian ancestral networks : An arising high - risk bunch for HIV/AIDS. BMC Int wellbeing murmur freedoms 2005;21:1

5. from: http://www.nacoonline.org (got to on 2011 Jan. fifteenth)

6. 15. Peer Education and HIV/AIDS: Past Experience, Future headings. Populace Council. Accessible from: URL//www.popcouncil.org/pdfs/peer\_edu.pdf. [Last Accessed on 2007 November 14]

7. 16. Ganguli SK, Rekha PP, Gupte N, Charan UA. Helps mindfulness among college understudies, Maharashtra. Indian J Public Health. 2002;46:8-12. [PubMed] [Google Scholar]

8. 17. Sankaranarayan S, Naik E, Reddy PS, Gururani G, Ganesh K, Singh KP, et al. Effect of school-based HIV and AIDS training for young people in Bombay, India. Southeast Asian J Trop Med Public Health. 1996;27:692-5. [PubMed] [Google Scholar]

9. Bhalla S, Chandwani H, Singh D, Somasundaram C, Rasania SK, Singh S. Information about HIV/AIDS among senior auxiliary school understudies in Jamnagar, Gujarat. Wellbeing Popul Perspect Issues. 2005;28:178

"UNAIDS Report on the worldwide AIDS pandemic," 2013, http://www.unaids.org/en/media/unaids/contentassets/records/the study of disease transmission/2013/gr2013/UNAIDS\_Global\_Report\_2013\_en.pdf.

10.Report on the worldwide HIV/AIDS pandemic. Accessible from: http://www.unaids.org/epidemic\_update/report/index.ht ml (got to on 2011 Jan. 15)

11.Government of India-Ministry of wellbeing and family government assistance: state wise HIV commonness (1998 - 2004). Accessible from: http://www.nacoonline.org (got to on 2008 June fourth)

12..Rural Indian ancestral networks : An arising high - risk bunch for HIV/AIDS. BMC Int wellbeing murmur privileges 2005;21:1

13from: http://www.nacoonline.org (got to on 2011 Jan. fifteenth)