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Investigation of Awareness and Practices among the Youth about HIV/AIDS in Central Punjab (Pakistan)

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Abstract: HIV/AIDS is a viral malady which is causing havoc with the lives of the people in the Punjab Province of Pakistan. It has become notorious in taking away the lives of the people due to the lack of awareness on the part of the victims. The chief sources of the mass prevalence of this disease are: contaminated water, reuse of needles and syringes, carelessness about blood transfusion, lack of awareness about the use of contraceptives while having sex, and non-sterilized shaving and surgical instruments. District Faisalabad, from the central Punjab (Pakistan) was the place where this present research study was conducted. Throughout the course of this research study, multistage sampling technique was widely employed. At first stage, out of four tehsils of district Faisalabad, one tehsil (tehsil Faisalabad) was selected randomly. At second stage, out of eight towns of tehsil Faisalabad, two towns (Jinnah Town and Iqbal Town) were selected randomly. At third stage, two union councils were randomly selected from each town. At fourth stage, a sample of 25 young people was drawn from each selected union council to make an overall sample of 200 respondents. An interview schedule was developed for data collection which was divided into two parts. Individual characteristics i.e. gender, age, conjugal status was included in the preliminary part of the questionnaire. The questions related to the awareness regarding HIV/AIDS were the part and parcel of the remaining part of the questionnaire. The major findings of this study are: majority of the respondents 68.0 % were males, 56.0 % of the informants were intermediate, 48.5% were disclosed during interview that they had adequate knowledge about the preventive methods of HIV/AIDS after blood test or blood transfusion, 30% respondents had no knowledge about the preventive methods of HIV/AIDS after blood test or blood transfusion, 76.0 % were un-married, and 42.5 % were of the view that their source of sexual health information was their friends. HIV/AIDS, no doubt, is a fatal malady but can be controlled by launching awareness campaigns via mass media informing people about the preventive measures such as insisting on new syringe during inoculation, secure and safe blood transfusion, abstaining from extra-marital activities, avoiding contaminated water, and refraining from using the razor, tooth brush, and towel of an infected person.

Keywords: HIV/AIDS, Prevalence, Transmission, Awareness, Transfusion of contaminated blood.

INTRODUCTION

AIDS (Acquired Immunodeficiency Syndrome) and HIV (Human Immunodeficiency virus) are viral infections diseases, responsible for the death toll of many people around the globe. HIV/AIDS, the most fatal malady, was recognized in 1981 for the very first time in the history of mankind. It has been estimated that 25 million people have died due to HIV/AIDS till now and 6800 people have become the victim of HIV/AIDS every day around the globe owing to insufficient information of HIV/AIDS deterrence and treatment approaches [1]. In the developing countries of the continent of Africa particularly and the underdeveloped countries of south Asia, Latin America generally, HIV/AIDS is the foremost threat for the survival of human-kind. According to the minute estimates of UNAIDS in 2009, it has been pointed out that, 33.4 million people, in which under 15-year children ratio is 2.1 million, adult's ratio is 31.3 and women ratio is 15.7 are living with HIV. In the United States of America, 19 million new cases regarding HIV are registered every year [2].

In the developing countries, AIDS/HIV is prevailing tremendously deteriorating all efforts to control it. A study which was conducted in Thailand by

the Bureau of Epidemiology in 2010 indicates that there are 372,874 HIV patients in total. It is an alarming situation that 32 new HIV patients are added to the Thai population daily. According to the findings of the report published by National AIDS Prevention and Alleviation Committee [3] pointed out that 85% of Thai youth did not take HIV/AIDS as a significant issue in-spite of the fact that it is a fatal malady [4].

In 1987, the first case of HIV/AIDS was reported in the Islamic Republic of Pakistan. Within few years, the AIDS/HIV cases increased, 56 cases were reported in 1990, 240 cases were reported in 1993, and 1021 cases were reported in 1995 regarding HIV/AIDS respectively. According to the projection model of WHO/UNAIDS, 80,000 Pakistani people would have been disease-ridden with HIV/AIDS at the end of 1996 [5]. In Pakistan, several significant factors of HIV/AIDS are unsafe injection practices, poverty, professional donors, low literacy, low contraception and absence of blood transfusion screening. Lack of awareness and lower literacy regarding HIV/AIDS are major determinant [6].

AIDS mostly hit the young generation of the developing countries because they lack proper awareness of the prevention of AIDS/HIV due to illiteracy and low media exposure. UNAIDS has estimated that in Pakistan the spreading of HIV/AIDS is 0.1% in both men and women aged 15-24 [7].

The Ministry of Health, in 1987, reported 4000 cases of HIV patients, and according to the findings of the report almost half of the populace in Pakistan which is infected with this viral disease, is below 18. In infants, children, and youth, more than 55 HIV cases have been recognized. The major reasons of the sprawl of HIV virus in the Pakistani population are; infected blood transfusion, unsafe sexual intercourse, and drug abuse etc [8]. According to the census of 2008, approximately 145 million population of Pakistan was affected by AIDS virus. A cross sectional research was conducted in the two major cities of Pakistan, Abbottabad, and Rawalpindi, and it was found that in the transgendered men, the prevalence of HIV was 2.4%. An alternative study which was conducted in 2005 in Karachi showed that the prevalence of AIDS in the male sex slaves was 7% and in the transgendered men was 2% [9]. The Joint United Nation Program on HIV/AIDS evaluated that approximately seventy thousand to one lakh fifty thousand adults and children in Pakistan are infected with HIV/AIDS virus [10]. At the University of Washington in Seattle, the meta-analysis coordinated by the Institute for Health Metrics and Evaluation (IHME) stated that in Pakistan, the demises from HIV/AIDS has augmented from 350 in 2005 to 1,480 in 2015 resulting an average of 14.42 % per year. Furthermore, nearly 100,000 people in Pakistan are living with HIV/AIDS but 15,370 people are registered only [11].

In a village, Kot Imrana, nearby district Sargodha of Punjab Province, 869 people have been diagnosed as the victim of HIV/AIDS. There are approximately 5,000 quacks who are the chief source of the prevalence of this disease. The number of victims is increasing day by day alarming the authorities to take suitable steps to control the prevalence of disease. According to the findings of a report published by UN in July 20, 2017, one million people kicked the bucket due to this infectious disease [12].

Significance of the Study

This study was carried out to investigate the level of awareness, attitude as well as the knowledge of the prevention measures of HIV/AIDS in the youth and to suggest the suitable measures to the youth of Pakistan how they can save themselves and other people about its hazardous effects? Every fourth Pakistani is the victim of HIV. Approximately, there are 132,000 HIV/AIDS patients are living in Pakistan with a tremendous increase of 39,000 patients in comparison with the last year figure. It is a high time to launch awareness campaigns, publish awareness generating materials, to conduct seminars, to broadcast programs etc. to enable the people of Pakistan to know the causes and consequences of this disease and to enjoy a healthy life span. Keeping this purpose in mind, this research study was designed to carry out the above-mentioned objectives.

MATERIALS AND METHODS

District Faisalabad, from Central Punjab, was the place where this present research study was conducted. Multistage sampling technique was employed during this research study. At first stage, out of four tehsils of district Faisalabad, one tehsil (tehsil Faisalabad) was selected randomly. At second stage, out of eight towns of tehsil Faisalabad, two towns (Jinnah Town and Iqbal Town) were selected randomly. At third stage, two union councils were randomly selected from each town. At fourth stage, a sample of 25 young people was drawn from each selected union council to make an overall sample of 200 respondents. An interview schedule was developed for data collection which was divided into two parts. Individual characteristics i.e. gender, age, conjugal status was included in the preliminary part of the questionnaire. The questions related to the awareness regarding HIV/AIDS were the part and parcel of the remaining part of the questionnaire. The questionnaire was designed in such a manner that each question was pre-coded for the convenience of the interviewer so that he may tick the response according to his perception. Fifteen respondents were interviewed prior to actual data collection to analyzing the instrument's reliability.

The Cronbach's alpha coefficient ranged from 0.71 to 0.85.

The interviews were conducted either in Urdu or Punjabi language keeping in view the native language of the respondents and each respondent was interviewed approximately for 20 minutes. The respondents were informed about the objectives of the research prior taking interviews and their consent was also taken. The respondents were not forced in matter of answering a question or not during the entire process of interview. SPSS version 22. (Statistical Package for Social Sciences) was utilized for the entire process of data entry and data analysis.

In the study population, in order to explore the level of awareness regarding HIV/AIDS, percentage was calculated. To explore the factors which determine the level of information exposure about HIV/ AIDS among the rural youth, Logistic regression analysis was applied. For regression analysis, explanatory variables were media exposure of participants, socio-demographic factors, and the outcome variable was the presence or absence of awareness of HIV/AIDS. All the predictor variables were entered in the equation as dummy variables and the "enter" method.

RESULTS AND DISCUSSION

Table-1: Socio-economic characteristics of the respondents

Variables	Frequency	Percent
Gender		
Male	136	68
Female	64	32
Age		
15-20	32	16
21-25	58	29
>25	110	55
Education		
Illiterate	6	3
Primary	26	13
Secondary	56	28
Higher secondary and above	112	56
Marital status		
Married	48	24
Unmarried	152	76
Family size		
2-4	57	28.5
5-7	59	29.5
8-10	59	29.5
>10	25	12.5
Family Income		
15000	15	7.5
30000	21	10.5
50000	90	45
80000 and above	74	37
Source of sexual health information		
Friends	85	42.5
Social media	58	29
Television, radio newspaper	39	19.5
Parents and family members	18	9

Above table reveals that 29% respondents age were21-25 years old while 55% respondents' age was more than 25. Less than one third i.e. 28% respondents had secondary education, 56% respondents had higher secondary and above level of education. 24% respondents were married, and 76% respondents were unmarried. Less than one third i.e. 28.5% respondents had 2-4 family members, while, 29.5% respondents had 5-7, 29.5% respondents had 8-10 while 12.5% respondents had 10 and above family members. Table also reveals that 45% respondents had household income of 50000 from all sources. While, 37% respondents had household income of 80000 and above from all sources.

Table-2: Respondents' knowledge, attitude, self-awareness and HIV/AIDS prevention knowledge

Acquaintance about the source of transmission of HIV/AIDS	Frequency	Percent
Transmission of HIV/AIDS via sexual contact	182	91
Transmission through blood transfusion	179	89.5
Transmission through sharing needles/syringes	167	83.5
Transmission through mamma to kid	154	77
Knowledge about protective measures		
Prevention by having sexual association with single partner	170	85
Prevention by blood safety	164	82
Prevention by careful injection practices	156	78
Prevention by the utilization of condoms	147	73.5
Fallacies about means of transmission		
Transmission through spending time along-with HIV-infected person	46	23
Transmission through eating food with HIV-infected individual	57	28.5
Transmission through mosquito bite	37	18.5
Transmission through healthy-looking person (can't transmit)	56	28
Chief cause of information about HIV/AIDS		
Television	143	71.5
Newspaper	72	36
Social media (Facebook, Twitter, YouTube, etc.)	97	48.5
Knowledge about accessibility of health care services		
Laboratory services	47	23.5
Medications against HIV/AIDS	30	15

Table-2 shows that 91.0 % of the respondents knew that the major cause of the prevalence of this fatal disease is the unsafe sexual intercourse, 89.5% of the participants were well acquainted that HIV/ AIDS spread through blood transfusion, 83.5% of the respondents were well informed and possessed adequate knowledge that reused needles and syringes were the major cause of HIV/ AIDS, and about 77% of the respondents identified that they knew about transmission of HIV from mother to child. More than 80 % of the respondents were familiar with the different preventive measures against it as follows: (1) 73.5 % were aware about the role of condoms in preventing HIV, (2) 82.0 % of the respondents were familiar about the role of blood safety, (3) 78.0 % knew the importance of safe injection practices, (4) and 85.0 % of the respondents knew the importance of having a monogamous sexual relationship with a non-infected partner in preventing HIV. In the study population, regarding the transmission of HIV, several misconceptions were also noted down during the interviews with the participants and it was due to the ignorance of the people about the real causes of the prevalence, symptoms, precautionary measures, and consequences of HIV/AIDS. 23.0 % believed in that they could be the victim of HIV by living with the person who had already been suffering from this fatal malady; 18.5 % were nourishing a false opinion that the mosquito bite could transmit in them the virus of HIV; 28.5 % were of the view that HIV spreads by eating with the HIV positive individuals; and 28.0 % the people who looked healthy could not be able to spread or transmit HIV. The respondents revealed during the research that they obtained information regarding HIV/AIDS from newspapers (36 %), social media (48.5 %), and television (71.5 %) respectively. 23.5 % of the respondents (out of 200 people) were aware of the existence of laboratory services for HIV testing in their areas and 15% knew about the availability of drugs against HIV.

It was found, on applying multivariate logistic regression on determinants of knowledge that the knowledge of HIV/AIDS was higher among the respondents in higher age group i.e. for age group 21-25 ($OR = 1.63$, $p < 0.05$) and >25 ($OR = 1.98$, $p < 0.05$). According to sex point of view, it was found that males were more aware than females regarding HIV/AIDS, the difference in knowledge was not significant ($OR = 1.12$, $p > 0.05$). Married people had been found more aware regarding HIV/AIDS than unmarried but the difference in knowledge was not significant. Furthermore, literate young people were more aware of HIV/AIDS than illiterate, at all the levels of literacy ($p < 0.05$). The impact of distinct types of media on knowledge level was also explored. It was found during investigation that the odds ratio was higher for those who were watching television ($OR = 5.01$, $p < 0.01$), read newspapers ($OR = 3.58$, $p < 0.01$), and those who use social media ($OR = 5.62$, $p < 0.01$).

Table-3: Determinants of Awareness of HIV/AIDS

Variables	OR	95% CI	β	SE	t-statistic	P-Value
Age group						
15-20	1					
21-25	1.63	1.22 - 2.27	0.51	0.16	2.58	0.01
>25	1.98	1.44 – 2.61	0.68	0.20	3.10	0.01
Sex						
Female	1					
Male	1.12	0.69 – 1.39	0.09	0.18	0.54	0.61
Education						
Illiterate	1					
Primary	2.96	2.14 – 3.94	1.19	0.21	4.78	<0.01
Secondary	5.11	3.54 – 7.58	1.61	0.25	6.81	<0.01
Higher secondary and above	6.82	4.32 – 9.19	1.90	0.35	6.92	<0.01
Marital status						
Unmarried	1					
Married	1.29	0.78 – 1.81	0.25	0.21	1.27	0.23
Watching TV						
No	1					
Yes	5.01	3.69 – 6.21	1.45	0.17	8.46	<0.01
Reading newspaper						
No	1					
Yes	3.58	1.75 – 6.77	1.27	0.42	3.46	<0.01
Using social media						
No	1					
Yes	5.62	3.54 – 6.98	1.62	0.37	4.62	<0.01

DISCUSSION

Awareness is the key prevention of HIV/AIDS. Our findings have uncovered that numerous young people in the rural zone are yet ignorant of the illness to which they are helpless. The investigation has pointed out that learning with respect to the transmission of the infection was good in general, however factor for various modes among youth. It was observed that youth were less aware of transmission of infection from mother to child in comparison to other modes of transmission. Similar findings were obtained in India by Government of India [13] in Gujarat State and National AIDS Control Organization [14] across the country. In another examination, youngsters were found less mindful of the part of improperly sterilized syringes and needles as a method of transmission of HIV in contrast with different methods of illness transmission [15]. In our examination, youth showed less familiarity with anticipation strategies in contrast with consciousness of transmission methods of the malady. The investigation found that youngsters were less mindful of condom use as an anticipation procedure than another methodology. The perception features the unmistakable level of numbness about this vital preventive measure in the sexually dynamic youthful populace. It was seen in the examination that a respectable number of young people knew about methods of transmission of HIV/AIDS and its counteractive action yet there were misguided judgments among them also. Concentrates finished by Banerji and Mattle [16] and Meundi *et al.*, [17] likewise demonstrated nearness of misguided judgments among youth. Consequences of multivariate calculated relapse examination uncovered age, education status and sorts of media introduction of youth as the indicators of HIV awareness. In the investigations performed by Husseini and Abu-Rmeileh [18] and Rehman [19], age, instruction, riches and media introduction rose as the real indicators of information of HIV among youth. Our research study has investigated one of the critical measures to anticipate HIV/AIDS, i.e., familiarity with the ailment. The examination was an overview at one point in time, so it has the restrictions of a cross-sectional investigation. In any case, the discoveries of the investigation are exceptionally applicable to youngsters. Youngsters are more defenseless and are less secured by HIV/AIDS avoidance programs in Pakistan. These examination results can be helpful in coordinating future endeavors at making mindfulness about HIV/AIDS.

CONCLUSION

This research study concludes that the level of awareness, practices and knowledge regarding HIV/AIDS' prevalence and prevention had been a major concern for the youth. This viral disease is causing havoc among the youth very swiftly. Awareness campaigns must be launched in collaboration with the health department, health related NGOS and mass media so that the wide spread prevalence of this disease should be checked. There is a

dire need that education related to infectious diseases such as HIV/AIDS, Influenza, Tuberculosis, Malaria, Measles, Dengue, Rabies, Salmonellosis, Chicken Pox, Ebola Virus, Poliomyelitis, Whooping Cough, Meningitis, cholera, Small Pox, and Lyme disease etc. should be the part of educational syllabus so that the youth should be get informed about the causes, consequences, and the preventive measures to live a sound and healthy life. The government of Pakistan should take strict action against the quacks who are spreading the virus among the youth along with the provision of safe drinking water which is the major source of the prevalence of HIV in the youth. Proper medication facilities related to HIV/AIDS should be provided in all the Tehsil Headquarter and District Headquarter hospitals for the convenience of the patients.

RECOMMENDATIONS

As we all are familiar that HIV/AIDS is an infectious disease and the common masses should be made aware about the causes and consequences of its prevalence by the impressive utilization of mass media. The present study recommends that the government should play its role in controlling this viral malady by hatching a strong propaganda against it by launching a powerful campaign involving print, electronic, and social media so that maximum number of people particularly living in the rural areas must be get awarded about this infectious disease because most of the population living in the remote rural areas did not consider it a disease after all. The major source of the prevalence of this disease is noted during the course of the research study is the utilization of contaminated water, so, it should be the prime responsibility of the government to provide clean drinking water to the people. The medical stores who provide drugs to the people without a medical prescription from a certified medical practitioner should be heavily fined and licenses should be cancelled. The prices of the medicines regarding should be in the reach of the victims and must be made available.

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