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A Descriptive Study to assess the knowledge regarding AIDS among Students in Govt. Sen. Sec. School in selected in Haryana

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Abstract:
HIV/AIDS has emerged as the single most formidable challenge to public health. The aim of the study was to evaluate the knowledge of students regarding HIV/AIDS in School. AIDS is the fourth biggest disease causes of death in world. There is currently no effective cure, once people get HIV, they have it for life. The aim of this study to assess the knowledge regarding AIDS among students of govt. Sen. Sec. School in Haryana. Non experimental, descriptive research design is used for this study to assess the knowledge of Sr. Sec. School Student regarding AIDS in Govt. Sr. Sec. School Haryana 80 sample sizes were collected by using non probability convenient sampling technique data analyzed by descriptive statistics (mean, median Mode, Standard Deviation) and inferential technique. The results show that the majority of the samples 76 (95.00%) had moderate level of knowledge, very few samples 3 (3.75%) had inadequate and 1(1.25%) sample had adequate of knowledge**.** It was conculded that there was no statistically significant association between the demographic variables and over all students having very less knowledge regarding AIDS.
Key words: Descriptive, Knowledge, HIV, Students, School

INRODUCTION:

Acquired Immune Deficiency Syndrome (AIDS) is caused by a human immunodeficiency virus (HIV) that weakens the immune system and makes the body susceptible to and unable to recover from diseases. HIV/AIDS is one of the most complex health problems of the 21st century and has become a pandemic disease that threatens the world population. Since there is no treatment or cure in sight, the disease continues to spread at an alarming rate. [1] Today since detection of HIV infection in school children is growing fast in our country as they are exposed to the risk of being victims of HIV/AIDS- which was quite unknown to their predecessors a few decades ago. And young ones form a significant segment of those attending sexually transmitted infection (STI) clinics and those infected by HIV. [2] Young people in many parts of the world have been denied sex and health education in schools because parents and other authorities fear it encourages early sexual activity. However, there is compelling evidence from studies conducted around the world and in many different cultures that, in fact, sex education encourages responsibility. Knowledgeable young people tend to postpone intercourse, or if they do have sex, they take precautionary steps such as use of condoms.[3] School children of today are exposed to the risk of HIV/AIDS, which was quite unknown to their predecessors a few decades ago. The epidemic of HIV/AIDS is now progressing at a rapid pace among young people. Studies have reported that young people form a significant segment of those attending sexually transmitted infection (STI) clinics and those infected by HIV.[4] HIV/AIDS has emerged as the single most formidable challenge to public health, human rights and development in the new millennium. UNAIDS estimates 38 million people across the world are living with HIV/AIDS. HIV (Human Immunodeficiency Virus) mainly affects sexually active young people. Young adults aged 15–29 years, account for 32% of AIDS) cases reported in India and the number of young women living with HIV/AIDS is twice that of young men. [5] The routes of HIV transmission in Karnataka have been established as: sexual – 78.56%, perinatal – 2.49%, blood transfusion – 3.23%, infected syringe and needles – 0.57%, and others not specified – 15.15%. [6] Acquired immune deficiency syndrome is a major emerging public health problem in India. According to an estimate made by the regional office of the WHO for south Asia, India accounts over two third of HIV infected in this region. The projections of the WHO indicate that by 2010, half of the AIDS patients in the world will be in India. The total amount of annual economic loss due to HIV/ AIDS IN India is estimated to be Rs 3447 Billion. These figures emphasize the societal burden posed by HIV infection in India. [7] Thus, India bears the significant global burden of HIV/AIDS with nearly 2.39 million people presently infected with the disease.[8] Despite the low prevalence of HIV in India, a high population with a low level of knowledge makes the

country more fertile ground for HIV to spread. These rising numbers were no doubt due to the impoverished state of the majority of India, but more importantly, lack of awareness about this disease.[9]

OBJECTIVE OF STUDY:

- To assess the knowledge of Sr. Sec. Students regarding HIV/AIDS.
- To associate the knowledge of Sr. Sec. Students regarding HIV/AIDS with selected socio- demographic variables.
- To assess the level of knowledge of different between Sr. Sec. Students and another student.

RESEARCH HYPOTHESES:

H1: There will be a significant difference in knowledge Sr. Sec. School regarding

HIV/AIDS.

H2: There will be significant association between knowledge and selected socio-

Demographic variables.

ASSUMPTIONS:

- There may be a significant widespread misconception about HIV/AIDS Sr. Sec. School.
- There may be more level of misconceptions about HIV/AIDS Sr. Sec. School.
- The study leads to the preparation of an information booklet, and it will help to improve the knowledge of Sr. Sec. School and there may be significant difference of attitude about HIV/AIDS.

DELIMITATIONS:

- Delimited period of 4 to 6 weeks.
- This study is limited to 80 samples.

REVIEW OF LITERATURE:

- Reviews related to prevalence of HIV AIDS
- Reviews related to knowledge of students

METHODOLOGY:

Research Approach: Quantitative evaluative research approach was adopted for this study.

Research Design: Non experimental, descriptive research design is used for this study.

Population: Students of Govt. Sr. Sec. School Haryana.

Settings of the study: Govt. Sr. Sec. School, Haryana

Sampling Techniques: Non-probability convenient sampling technique.

Sample: who fulfil the inclusion criteria will be consider as a sample.

Sample size: The sample size consists of 80 Students from Govt. Sr. Sec. School.

RESULTS & INTERPRETATION:

Table – 1: Level of knowledge of sr. sec. students regarding HIV / AIDS. (n = 80)

S. No	Level of Knowledge	Frequency (f)	Percentage (%)
1.	Inadequate (0 -11)	3	3.75
2.	Moderate (12 -24)	76	95.00
3.	Adequate (25 – 26)	1	1.25

The above table shows the level of knowledge of Sr. Sec. Students regarding HIV / AIDS.

Among 80 samples in the study an overwhelming majority of the samples 76 (95.00%) had moderate level of knowledge. Very few samples 3 (3.75%) had inadequate knowledge and only one sample was having adequate level of knowledge 1 (1.25%).

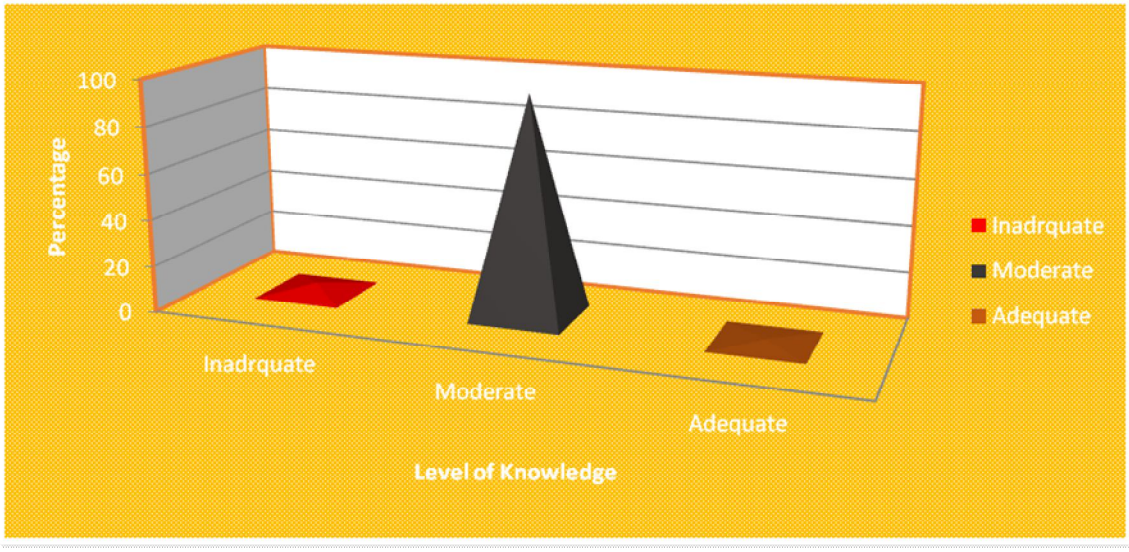

Figure-1: Showing above figure level of knowledge

Table – 2: Level of Association between Knowledge regarding HIV /AIDS & Selected Socio Demographic Variables.

(n = 80)

S. No	Demographic Variables	Level of Knowledge			χ^2 Value	P-Value
		Inadequate	Moderate	Adequate		
1.	Age (Years) a) 16 b) 17 c) 18 d) 19	2 1 0 0	41 32 1 2	1 0 0 0	1.087^{NS}	0.982

2.	**Gender** **a) Male** **b) Female**	**0** **3**	**1** **75**	**0** **1**	**0.53^{NS}**	**0.974**
3.	**Religion** **a) Hindu** **b) Muslim**	**3** **0**	**75** **1**	**1** **0**	**0.53^{NS}**	**0.974**
4.	**Occupation of Parents** **a) Unemployed** **b) Self – Employed** **c) Private Employee** **d) Govt Employee**	**2** **0** **1** **0**	**38** **26** **5** **7**	**1** **0** **0** **0**	**5.193^{NS}**	**0.519**
5.	**Education of Parents** **a) Illiterate** **b) Literate**	**1** **2**	**23** **53**	**0** **1**	**0.447^{NS}**	**0.800**
6.	**Type of Family** **a) Joint Family** **b) Nuclear Family**	**1** **2**	**41** **35**	**0** **1**	**1.611^{NS}**	**0.447**
7.	**Previous Information Regarding HIV** **a) Yes** **b) No**	**1** **2**	**41** **35**	**0** **1**	**1.611^{NS}**	**0.477**

The Table above shows the level of association between Knowledge regarding HIV /AIDS & Selected Socio – Demographic Variables.

NURSING IMPLICATIONS:

Nursing practice:

All the student AIDS problem can be taught the self preparation techniques and they can be made efficient to manage the AIDS problem at their home set up itself. Nurses by getting knowledge and impact into their clinical practice. Many nurses can conduct evidence base nursing practice by referring to these results.

Nursing education:

Nurse educator should emphasize the concept of senior secondary school students and self-care and encourages students. Nurse to appreciate the role of the nurse as educator of the senior secondary school students. Nurse educator should take initiative in organizing continuing education program for nurses on effectiveness of good practice in the management of AIDS problem. The nursing curriculum needs to update the nursing students to make them be aware of all the recent researchers present in the field and implement them.

Nursing administration:

The nursing administrator coordinator her work along with the staffs, to encourage them to do selected alternative nursing measures like right practice of brushing in the management of AIDS problems. Nursing administrator should organize in service educational program to the staffs regarding the management of AIDS problems.

Nursing research:

This study can be used as a baseline for future studies to build upon and nursing research need to be done to find our various other innovative measures in the management of AIDS problems. Research can be conducted on conducted on various population at various settings.

Recommendations:

- A similar study can be done using large samples.
- A similar study can be undertaken by allotting more time on date collection.
- An experiment study can do to determine the effectiveness of good practice of brushing.
- A similar study can be done in rural schools.
- A similar study can be done with various age groups.

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