

A study on Knowledge, attitude and practice of sexually transmitted diseases among youths in Ghaila, Lucknow

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Abstract

Youth are the individuals belonging to age group of 15-24 years. Youth carries a great responsibility of shaping the future. Sexually transmitted disease creates a lifelong burden in the society; it cripples those who it infects. Especially the youth who are most sexually active and fertile are affected by the devastating course of these diseases. Our study aims to assess the knowledge, attitude and practice of Sexually Transmitted Disease in youths of Ghaila, Lucknow. Our study included 262 individuals attending the outpatient department of our Health Centre attached to CIMSH, Lucknow. Our study found out that 75.19% of participants had required knowledge regarding STD's only 39.3% knew what syphilis was. 42.3% of our study individuals believed that it is fine having multiple sexual partners and only 60% believed that condoms are needed for safe sexual

intercourse. Most results improved during the post-test after informative session. Social stigmas/beliefs and misconceptions are the main barriers in attaining appropriate knowledge regarding sexually transmitted diseases.

Contributions like conducting informative sessions on sexually transmitted diseases by Government/ Non-government organizations or by medical colleges/district hospitals can change the perspective among the youth of our country.

Keywords: HIV/AIDS. Youths, STD's, KAP, Syphilis,

Introduction

WHO defines 'youth' as individual in 15-24 years age group.^[1] India has a large chunk of its population belonging to youth age group. As of 2021 27.3% of India's population is youth.^[2] On the shoulders of youth lies a great responsibility- responsibility of future. This

is the generation which will formulate policies, strengthen the judiciary, power the medical field, conduct researches and will innovate the future. Young people are the greatest agents of change in a society. But what if these youth lie in a vicious trap of misconceptions, wrongful beliefs, bad practices and lack the attitude in terms of sexual health and its components?

Sexually transmitted disease creates a lifelong burden in the society; it cripples those who it infects. Especially the youth who are most sexually active and fertile are affected by the devastating course of these diseases. National AIDS control agency (NACO) in 2021 estimated that 1.70 lakh population of youth are living with HIV and 15 thousand new cases of HIV amongst the youth were registered in the same year.^[3] The problem lies not only with the disease or its course itself but the real problem lies with the mis concepts, beliefs, attitude and practice associated with it. One such study was conducted in Delhi by Anita, P Lal where they surveyed students from secondary school. Their study found mostly all students had heard about HIV/AIDS sometime, somewhere in their lifetime but only 51.4% knew the full form of HIV/AIDS, 51.8% of students could not recall the sexual route as mode of transmission and only 44.4% of students knew that HIV/AIDS can be transmitted by sharing of contaminated syringes and needles. About 15% of students answered that condoms are a mode to prevent STDs.

Due to old customs of child weddings the girl in the youth (most fertile period) are exposed to early sexual practice, pregnancy and sexually transmitted disease. Also the lack of practice and attitude amongst the youth

is to be blamed for out of wedlock pregnancies and acquiring STD's.

Such problems need urgent attention and proper addressal. This enables one to study the knowledge, attitude and practices regarding Sexually Transmitted Diseases amongst the youth and come to a conclusion which could help in formulating the future plans or programmes, thus filling the gaps and spending less time and energy on things which the youth already knows.

This study is meant to recognize health problems and intend to explore obstacles to access health related services among youth in Lucknow. The level of knowledge assessed in our study would reflect the level of risk the youth are exposed to. This study shall prove to be a prototype to assess the practice, attitude and knowledge the youth of today possess regarding the sexually transmitted disease. All such shall aim to arrange counselling for this population. This would develop and strengthen the pre-existing services in a more fashioned way.

Methods

Study Design

Our study is cross sectional study

Sample Size

We included 262 youths (15-24 years) attending our Medicine and Paediatrics OPDs of Urban Training Health Centre.

Data Collection

After an ethical clearance from the review board of our college Career Institute of Medical sciences and Hospital, Lucknow we began our study. We had a self-designed, self-tested MCQ's which we provided to the patients in our OPD. The same questionnaire acted as a pre-tested and post-test between which we had a session about the STD'S based on KAP model. For all the

participants a proper informed consent was taken explaining the objectives of our study. For those in the age group on 15-17 years an informed consent was taken from their parents and if parents were not accompanying, they were free to carry back the consent home and participate in the study on their next visit. All participants were explained about the purpose of the study and the confidentiality of their particulars and answers were taken well care off. The participation was entirely voluntary and the participants were free to leave the questions unanswered which were making them uncomfortable.

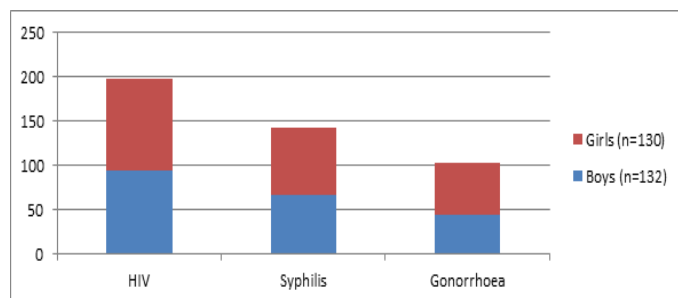
Main focus of the questionnaire was on Knowledge, attitudes and practices about sexually transmitted diseases. It also included the socio-demographic characteristics such as age, sex, education, occupation/ parents' occupation.

Data analysis

The data was collected and analysed using IBM SPSS version 28.

Results

Knowledge about STDs amongst boys and girls

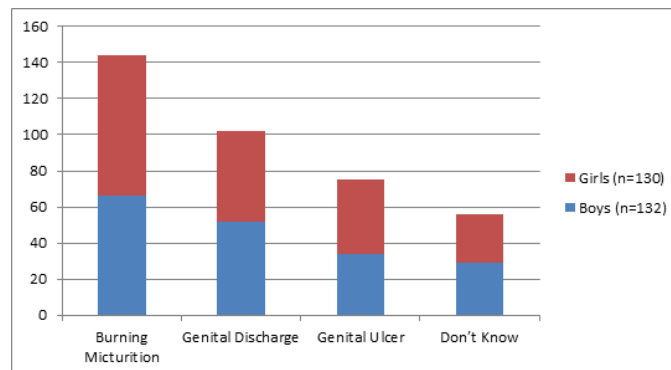


Graph 1: Comparison of Knowledge about STD'S amongst boys and girls

Out of the total there were 132 male and 130 females. 71.9% (95) of males and 78.4% (102) girls had heard about HIV sometime in their life-time. Around 50.7% (67) males and 57.6% (75) females knew about syphilis.

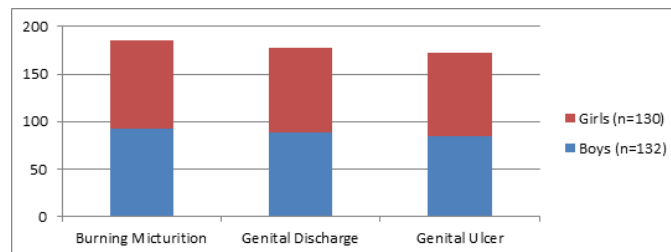
But only 33.3% (44) males and 45.3% (59) had knowledge about Gonorrhoea being an STD.

Knowledge about STD symptoms amongst both sexes



Graph 2: Comparison of Knowledge amongst both sexes during pre-test

At the time of pre-test assessment, we found that 60% (78) girls had knowledge that burning micturition is a symptom of STD compared to 50% (66) who knew the same. 39.4% (132) boys and 38.4% (50) girls knew that Genital discharge is a symptom of STD. Genital ulcer being the symptom of STD only 25.7% (34) males and 31.5% (41) knew about this information. 21.9% (29) boys and 20.7% (27) girls had no idea regarding the symptoms of STD's.

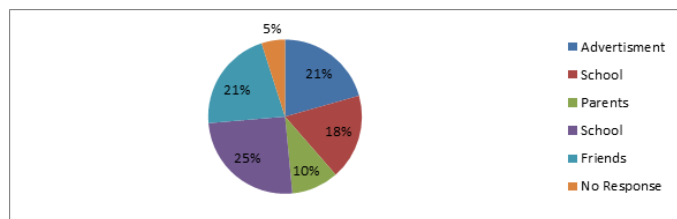


Graph 3: Comparison of Knowledge amongst both sexes during post-test

The results during the post-test assessment were significantly different to what it were during the pre-test. Now around 70% (92) of boys had idea about burning micturition and 71.5% (93) compared to 60% and 50% when answered during pre-test. Similarly, during the post-test 67.4% (89) boys and 68.4% (89) girls knew

that genital discharge is a symptom of STD. Whereas 63.6% (84) boys and 67.6% (88) had knowledge that genital ulcer is a symptom of STD.

Information regarding STD



Graph 4: Various mode of acquiring knowledge regarding STD'S

When enquired about the means of gaining knowledge regarding STD's 27% gathered knowledge from Advertisement (News/Radio/Pamphlets/TV) and 27% got information from friends. 18% got to know about STDs from School and teachers whereas 25% got taught by their parents. 5% of the participants opted not to respond to this question.

Misconceptions regarding HIV/AIDS transmission

Misconceptions	Pre-Test	Post-Test
Transmission by mosquito bite	46.1% (121)	0.2% (5)
Transmission by Touching/ Hugging	28.4% (66)	0.2% (3)
Transmission by sharing food	37.7% (99)	0.26% (7)
Transmission through air	8.7% (23)	0.07% (2)

Table 1: Comparison of misconception regarding HIV/AIDS transmission pre-test vs post-test

There was a significant alteration in results post KAP session on HIV/AIDS, earlier 46.1% of the participants were in the belief that HIV/AIDS is transmitted through mosquito bite which than turned to near about 2%. Similarly, when asked earlier about transmission of HIV/AIDS via touching or hugging 28.4% replied

affirmative which reduced to 0.2% post the session. Also, when we compared the response of participants against the transmission of HIV/AIDS via sharing of food, 37.7% marked the option correct which later reduced to 0.26%. When asked about the transmission through air 8.7% were in the belief that HIV is transmitted through air.

Comparison in knowledge about routes of HIV/AIDS transmission amongst both genders

Route	Pre-Test		Post-Test	
	Male (n=132)	Female (n=130)	Male (n=132)	Female (n=130)
Blood Transfusion	46.9% (62)	54.6% (71)	84.8% (112)	92.3% (120)
MCT	37.8% (50)	50.7% (66)	75.7% (100)	90% (117)
Sharing Needles	44.6% (59)	52.3% (68)	82.5% (109)	91.5% (119)
Sexual Intercourse	48.4% (64)	46.9% (61)	96.2% (127)	96.9% (126)
Sexual Intercourse	48.4% (64)	46.9% (61)	96.2% (127)	96.9% (126)

Table 2: Pre-Test vs Post-Test comparison of knowledge about routes of HIV/AIDS transmission amongst males and females

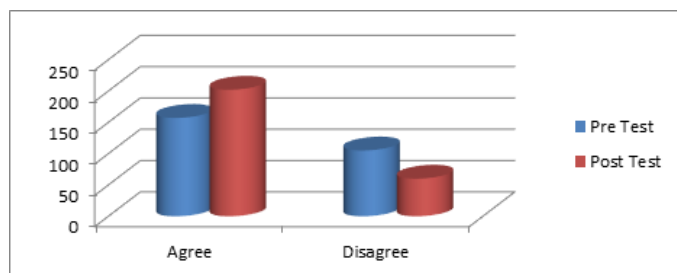
While assessing the knowledge about routes of HIV/AIDS transmission and comparing the results of pre-test as well as post-test it was found that girls had higher level of knowledge while compared to boys. Level of knowledge significantly increased during the posttest and superior results were found in all domains (routes)- Blood transfusion 46.9% vs 84.8%. Mother to child transmission 37.8% vs 75.7%, Sharing of needles 44.6% vs 96.2% amongst boys.

Attitude of youth towards various sexual believes and practices.

Believes/Practices	Affirmative	Disagree
It is perfectly fine to have multiple sexual partners	111 (42.36%)	151 (57.64%)
Boys are sexually attracted towards girls	124 (47.32%)	138 (52.68%)
Parents/Teachers can be consulted regarding sexual doubts	88 (33.58%)	174 (66.42%)
Having sexual relationship makes one famous	90 (34.35%)	172 (65.65%)
Having sexual relationship makes one famous	90 (34.35%)	172 (65.65%)

Table 3: Attitude regarding sexual behaviour

While assessing the attitude towards sexual behaviour among youths it was found that 42.36% of the youths are in the belief that it is ok to have sexual intercourse with multiple partners. Also it was found that 47.23% youths think that boys are sexually attracted towards girls for sexual favours. Just 33.58% of youth were in the belief that parents/teachers can be consulted for regarding sexual doubts. 34.35% of the participants were in the opinion that having sexual relationship can make one famous. Practice



Graph 5: Pre-test vs post-test comparison of belief amongst the youth- whether or not condom should be used during sexual intercourse

Regarding the attitude towards use of condom during the pre-test 59.92% (157) were in the favour of using condom during sexual intercourse. The assessment during post session significantly improved to 77% (262) participants believing that condom is must for safe sexual intercourse.

Discussion

With the introduction of various health programmes by the Government of India such as Reproductive/maternal/child health & adolescent (RMNCH+A), National AIDS control programme (NACP), Adolescent Reproductive and Sexual Health Strategy (ARSH) and Rashtriya Kishore Swaasthya Karyakram (RKSK) have made the youth empowered. Youth (15-24 years) considers the most important chunk of age group between adolescent and early adulthood. During this phase various changes occurs in the form of physiological, physical and psychological.

The present study was conducted among the youth in the Urban Health Training Centre affiliated to Career Medical College and hospital. A total of 262 youths were included in the study attending our daily out-patient department. In the age group distribution, 45% (118) were in the age group of 15-18 years, whereas 55% (144) were in the age group of 19-24 years. 50.3% were males and 49.7% were females. Most of the participants belonged to lower mid socio-economic status (Kuppuswamy scale). Parents of most of the individuals were illiterate. These factors attribute to low level of knowledge amongst the participants regarding Sexually Transmitted Diseases and reproductive health.

In our study the knowledge regarding HIV/AIDS was found to be 75.19% which is comparable to 73.9% in a study conducted by Manish Jain et al [4] and is superior (45.8%) to what was conducted by Jaiswal S et al in

Kathmandu^[5] but S. Bhalla, H. Chandwani et al in Gujarat noticed 96% awareness among the participant^[6] In term of knowledge regarding Gonorrhoea (54.19%) and Syphilis (39.3%) our study was quite superior to the study by Manish Jain et al^[4] and Ruikar H.^[7]

We found out that 55% of the youths were able to identify burning micturition as a symptom. Around 39% and 29.7% of participants recalled genital discharge and genital ulcer as a symptom of STD respectively. One such study was conducted among adolescent male in Tehran, Iran where Mohammadi MR et al^[8] found that 28% of males replied that genital discharge is a symptom of STD, our interpretation for the same among the males (39.3%) yet superior to the above mentioned yet was inferior to what was found by Manish Jain et al (48.9%) but our interpretation improved to 67.4% of youth boys able to recognize genital discharge as symptom after the post test. Such variations can be explained by different study settings. In our study the girls when compared to boys possessed a higher domain of knowledge regarding STD symptoms which is similar to most of the studies compared above.

About 25% of the youth gained information about STD from Advertisement viz TV, newspaper, radio, pamphlets. Rest 1/5th of the youth gathered information from school and family respectively. In one such study conducted in Kuwait 69% of participants gained information regarding STD from mass media.^[9] Similarly in a study conducted in 2012 by Pankaj Kumar et al it was found that TV was the commonest source of information regarding HIV/AIDS among the participants.^[10]

Near-about 50% of the study participants had knowledge regarding modes of HIV transmission, here also female did exceptionally better than the males. The

interpretation significantly improved following the KAP session on HIV/AIDS, such degree of variation can be explained by lack of knowledge, low literacy rate among parents and comparatively low socio-economic strata. Similar problem was encountered by Kaur S at al when she carried the study among the adolescent girls of Amritsar and was successful in addressing this situation.^[11]

Misconceptions regarding transmission of HIV were fairly high among the participants such as transmission via mosquito bite and hugging. Similar results were found in the study conducted in Delhi by Banera et al and in Pune among the adolescent girls by Majumdar R.^[12 13]

In the domain regarding the attitude 42.3% youth believed it is ok to have multiple sexual partners among which most were boys. Though questions regarding whether the candidate had any sexual intercourse were avoided but, in a study, conducted in China by Shenghui et al around 7% of adolescent had sexual intercourse and nearly 40% of these individuals had two or more sexual partners. 42.4% claimed to have had unprotected sexual intercourse such can be taken as reference for what we discovered in our study.^[14] Casual attitude among the participants in the above mention study was comparable to what we found when asked about whether sexual intercourse makes one famous.

Around 40% of the youths in our study were in the belief that condoms should not be used during sexual intercourse which is similar to what was found by Manish Jain in his study (41%).^[4] The usage of condom are fairly high among the western countries youth due to higher domain of knowledge in comparison to our country regarding sexually transmitted disease. We were

able to gain better results regarding condom use during the post test.

Conclusion

In the present study we were able to prove that though the youth are lacking somewhat in the domain of Knowledge, Attitude and Practice (KAP) regarding the sexually transmitted diseases but with interventions like proper counselling and education we can overcome such problems. Though sessions on sexually transmitted diseases are given to the individuals during their schooling yet they fail to apply such Knowledge, attitude and practice whenever and wherever needed. Social stigmas, bad beliefs and misconceptions are to be blamed. Poverty, low socio-economic status and low literacy levels have created a gap between the knowledge. Programmes by the government and initiatives by the organizations needed to be strengthened in due course of time.

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