

Full Length Research Paper

Awareness on HIV/AIDS and prevention of mother to child transmission of HIV/AIDS among stake holders and people living with HIV/AIDS in Dharan municipality, Sunsari, Nepal

Nirmala Pokharel*, Mangala Shrestha and Sami Lama

Department of Maternal Health and psychiatric Health Nursing of BPKIHS, Dharan, Nepal.

Accepted 17 August, 2020

PMTCT (prevention of mother to child transmission) is a commonly used term for an intervention programme designed to reduce the risk of mother to child transmission of HIV. In 2008, there were more than 40 million people living with HIV/AIDS worldwide out of which, 2.5 million were children under 15 years old. Mother to child transmission is the largest source of HIV infections in Nepal. Out of the estimated 900,000 annual pregnancies, 1,800 pregnancies are estimated to occur in HIV positive woman (0.2% HIV prevalence) leading to an annual cohort of about 450 to 810 infected new born. Creating awareness about PMTCT services among stake holders and people living with HIV/AIDS is helpful in initiating and communicating the information about PMTCT services to the pregnant women. The objective of this study is to assess the awareness of stake holders and PLWHA regarding prevention of mother to child transmission of HIV/AIDS. Cross sectional study was done including 100 stake holders and 50 people living with HIV/AIDS of attending Dharan municipality and Dharan positive centre respectively. Semi structure questionnaire was used to assess the awareness. The study findings show that 61% of the stake holders and PLWHA had inadequate knowledge on HIV/AIDS and PMTCT, only few pregnant women referring by stakeholder and people living with HIV/AIDS for utilization of PMTCT services. Age and religion are associated with overall knowledge of HIV/AIDS and PMTCT, where p value is 0.024, 0.012, respectively. Education, family size and training are not associated with overall knowledge of HIV/AIDS and PMTCT. In General, inadequate knowledge was found 61% of the respondents. Thus it is important that need to conduct more awareness programme among different stake holders will be worthwhile, as they directly and indirectly contact with pregnant women and can inform and motivate them to utilize these services.

Key words: Awareness, HIV/AIDS, prevention of mother to child transmission (PMTCT), stakeholders/PLWHA.

INTRODUCTION

HIV/AIDS has become a serious global health and psychosocial crisis, with at least 40 million infected individuals worldwide, it not only affects adults but also children and adolescents. In some third world countries, more than 40% of all live births are HIV infected. A

woman's elevated risk of HIV infection results from their greater physiological vulnerability to viral infection, arising from the social exploitation of woman, and violence against women. This risk is exacerbated in situation of social upheaval and economic hardship (National association of school psychologists, 2002).

Globally, the HIV/AIDS pandemic has had a major impact on health of the mother and child and their survival. About 17 million women and 2.1 million children have been infected with HIV. Each year 500,000 infants become infected at the rate of 1,600 new infections every

*Corresponding author. E-mail: nirmalapokharel123@yahoo.com. Tel: 00977-9842054475. Fax: 00977-25520251.

Table 1. Knowledge of stakeholders and PLWHA regarding HIV/AIDS and PMTCT.

Overall knowledge of HIV/AIDSs; and PMTCT	Health personnel n = 50(%)	Female health volunteer n = 50 (%)	PLWHA n = 50 (%)	Total n = 150 (%)
Inadequate	24	36	32	92 (61%)
Adequate	26	14	18	58 (39%)

day. HIV infected pregnant women give birth each year and about 25% of those infants are infected (Buchan and Somesh, 2005).

The root of HIV transmission to women is overwhelmingly through heterosexual intercourse. AIDS is essentially a sexually transmitted disease, which like some other STDs can also be spread through blood and blood products, and from an infected woman to her fetus or newborn. Studies show that male –to-female transmission of HIV appears to be 24 times from efficient than female-to-male transmission. STD that causes ulcerative lesions greatly increases the acquisition of HIV. However, in women, STDs often have no symptoms and are therefore unrecognized (UNICEF HIV/AIDS, 2004).

Particularly PLWHA may believe that, they should do something to prevent occurrence of HIV particularly to the innocent unborn child. The audience may be more receptive, when the information is provided by an HIV affected person living close to their residence. It is also easy for the audience to feel free to get information and clear their doubts without any hesitation. Creating awareness among different stake holders is beneficial, as they have direct and indirect contact with 5 pregnant women and can motivate them to utilize these services.

Objectives

1. To assess the awareness of stake holders and PLWHA regarding prevention of mother to child transmission of HIV/AIDS;
2. To find out the association between selected demographic (age, resident, family size, religion, education and training) variables and their knowledge about HIV/AIDS and PMTCT.

RESEARCH DESIGN AND METHODOLOGY

Research design

Cross sectional design was used for this study.

Setting

Study was conducted in Dharan municipality and Dharan positive centre.

Study population

Stakeholders (health personnel and female health volunteers) and PLWHA attending in municipality and Dharan positive centre during the study period was enrolled in the study.

Sample size

Total numbers of sample was 150 (100 stake holders and 50 PLWHA).

Sampling technique

Purposeful sampling is the selects information rich cases for in-depth study. Size and specific cases depend on the study purpose. Purposive sampling method was used for the selection of samples. Stake holder and PLWHA were identified based on the criteria included for the study.

Instrumentation for data collection

Data was collected by self administered questionnaire using semi structured questionnaire.

Data analysis

Descriptive statistics (mean, frequencies and percentage) and inferential statistics (chi-square) test were used.

RESULTS

Results are shown in Tables 1 and 2

DISCUSSION

This study was aimed to assess the awareness of stake holders and PLWHA regarding prevention of mother to child transmission of HIV/AIDS. PMTCT programme was started in 2005 A.D at B. P. Koirala institute of health sciences dharan to provide service for pregnant women. At present there is no treatment and vaccine for AIDS. The only way to prevent HIV/AIDS is health education. For this purpose, health care workers should have enough knowledge to be able to teach the community. They should also adhere rigorously to the necessary infection control precautions in order to minimize the risk of infection (HIV/AIDS news, 2007).

Table 2. Association between independent variables and knowledge of HIV and PMTCT.

Characteristics	Categories	P value
		Over all knowledge on HIV/AIDS and PMTCT
Age		
Up to 30 years	72	0.024
>30 years	78	
Types of family		
Nuclear	73	663
Joint	77	
Religion		
Hindu	106	0.012
Islamic	10	
Christian	8	
Buddhist	14	
Kirat	12	
Education		
Up to the higher secondary	58	0.289
Higher secondary and above	92	
Received HIV related training		
Yes	92	0.138
No	58	

Majority of the respondents (74, 54 and 92%, respectively) had knowledge about meaning of HIV/AIDS. More than 70% of the respondents were aware the route of HIV transmission, that is, unprotected sex with HIV infected person, from infected mother to her baby, blood is not thoroughly screened before transfusion. The finding is consistent with study conducted by medical college of Nagpur with medical students regarding HIV/AIDS revealed that 92.7, 89.7, 85.8 and 72.4% respondents, respectively were aware that unprotected sex, blood and blood products, vertical transmission, and infected syringes and needles can transmit AIDS (Jahanbin et al., 2004).

The result is also consistent with the result in the study conducted by Sadob et al. (2006) on health care workers, which showed good knowledge of the route of transmission of HIV (Sadob et al., 2006). Similarly majority of the respondents had knowledge on preventive measures such as abstinence from sex, consistent use of condoms and consistently, having sexual relation only with faithful partner, not using same syringe and needles used by others which was statistically significant (P value 0.038, 0.000, 0.000, 0.000, respectively).

Regarding the PMTCT most of the respondents in each group had knowledge about identifying HIV infection during pregnancy is the way to reduce the chance of HIV

transmission from infected mother to her baby. Similarly respondent were aware about administration anti retro viral drugs to infected mother during pregnancy and delivery. Very few (8, 2, 4%) of the respondents in each group were aware that ante retro viral medicine to new born after delivery will also reduce the transmission from infected mother to her baby. Among them only few respondents (38, 6 and 48%, respectively) referred the pregnant women for utilization of PMTCT services. Respondents were more aware regarding HIV/AIDS than PMTCT. Therefore regular training and interaction are needed for stake holders and PLWHA to update their knowledge and motivate the pregnant for utilization of PMTCT services.

Result showed that most (61%) of the respondents had inadequate knowledge and 39% had adequate knowledge regarding HIV/AIDS and PMTCT. Age and religion are associated with overall knowledge of HIV/AIDS and PMTCT, ($p = 0.024, 0.012$, respectively). Education, family size and training are not associated with overall knowledge of HIV/AIDS and PMTCT.

Conclusion

In General, inadequate knowledge was found 61% of the

respondents. But in practice of referring the pregnant women for utilizing PMTCT service is very low .Thus it is important to conduct regular awarenessprogramme among different stake holders and PLWHA will be worthwhile, as they directly and indirectly contact with pregnant women and can inform and motivate them to utilize these services.

REFERENCES

- HIV/AIDS news (2007). HIV/AIDS awareness among hospital employees in medical college Nagpur available in www.health.am/aids/.../hiv-aids-awareness-among-hospital-employee.
- Jahanbin I, Pesaran P, Zakernia M, Shojaee B (2004). A survey of the knowledge of health care workers about HIV/AIDS at Shiraz health clinics Islamic Republic of Iran available in www.iasociety.org/Default.aspx?pageId=12&abstractId=2169962.
- National association of school psychologists (2002). Position statement on HIV/AIDS, available in www.nasponline.org/about_nasp/pospaper_aids.aspx.
- National centre for AIDS and STD control (2008). National guidelines, prevention of mother to child transmission of HIV in Nepal, third edition, pp. 8-9.
- Sadob AE, Fawole AO, Sadob WE, Oladimeji AO, Sotiloye OS (2006). Attitude of health care workers to HIV/AIDS. *Afr. J. Reprod. Health*, 10(1): 39-46
- WHO, CDC (2008). Prevention of mother to child transmission of HIV generic training package trainer manual, available in www.cdc.gov/globalaids/resources/pmtct-care/pmtct-who-hhs.html.
- Women and HIV (2004). Available in www.fwhc.org/health/hiv.htm