

Assess The Knowledge And Attitude Regarding Transmission And Prevention Of Sexually Transmitted Diseases (STDs) Among Adolescents In Selected Higher Secondary Schools Of Moradabad, U.P

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Abstract:

INTRODUCTION:

Sexually Transmitted Infections are a major public health concern. Young adults have risk-taking behaviour and casual attitude, engaging themselves in risky sexual activities thus contracting STIs. This study **aimed** at assessing knowledge, attitude, regarding transmission and prevention of sexually transmitted disease among adolescent higher secondary school of Moradabad.

Method of The descriptive survey conducted at selected higher secondary schools of Moradabad. On 100 adolescents' students who meet the inclusion criteria. A quantitative research approach research design is one group pre-test design is chosen for conducting the study. In this design all the subjects were selected by Non probability purposive sampling. Pre-test level of transmission and prevention of STDs was estimated by using knowledge questionnaire & attitude scale. The data were analysed using descriptive and inferential statistics.

Result of The study identified 6% had poor knowledge, 93% had average knowledge and 1% had good and attitude 67% had agree, 9% had strong disagree, 11% had strong disagree, 7% had neutral and 6% had disagree level of attitude regarding STDs. The study result adolescents knowledge mean 14.5, median 11, Standard Deviation 3.91 And attitude mean 48.3 median 60 Standard deviation 11. Hence there is average knowledge and attitude among adolescents regarding STD.

conclusion Findings revealed that the adolescent students had an average knowledge about STDs. Analysis of the attitude of the adolescent students revealed that they had an unfavourable attitude towards STDs.

Keywords: The Knowledge, Attitude, Transmission And Prevention Sexually Transmitted Disease Relationship Among Adolescents

INTRODUCTION

"Sexually transmitted (venereal) diseases are infections that are typically, but not exclusively, passed from person to person through sexual contact". The older terminology of "venereal diseases" (VDs) largely has been superseded in the past 50 years by "sexually transmitted diseases" (STDs), and more recently by "sexually transmitted infections" (STIs). "In women, some organisms that enter the vagina can move up the vagina to the cervix (the lower part of the uterus), enter the uterus, and reach the fallopian tubes and sometimes the ovaries. Damage to the uterus and fallopian tubes can result in infertility or a mislocated (ectopic) pregnancy. In men, organisms that enter through the penis may infect the tube that carries urine from the bladder through the penis (urethra). Complications that can result from chronic infection of the urethra include the following-Tightening of the foreskin, so that it cannot be pulled over the head of the penis narrowing of the urethra, blocking the flow of urine Development of an abnormal channel between the urethra and the skin of the penis Occasionally in men. In India, the prevalence of four curable STD among general populations is in between 0 to 3.9 percent. Approximately, 6% of the adult Indian population are affected with sexually transmitted infections.

BACKGROUND OF THE STUDY

"Self control is self prevention".

Sexually transmitted infections (STIs) are one of the leading causes of health, and economic burdens in the developing world, leading to considerable morbidity, mortality, and stigma. The incidence and prevalence of the four curable STIs viz. syphilis, gonorrhoea, chlamydia, and trichomoniasis vary remarkably across different geographical locations. In India, the prevalence of four curable STD among general populations is in between 0 to 3.9 percent. However, it is

assumed that STD prevalence is much higher among subpopulations practicing high-risk behaviour. Like men who have sex with men (MSM), transgender (TG), injecting drug users (IDU), and female sex workers (FSW). So we need to assess the knowledge The Knowledge and Attitude Regarding Transmission and Prevention of Sexually Transmitted Diseases (STDs) Among Adolescents.

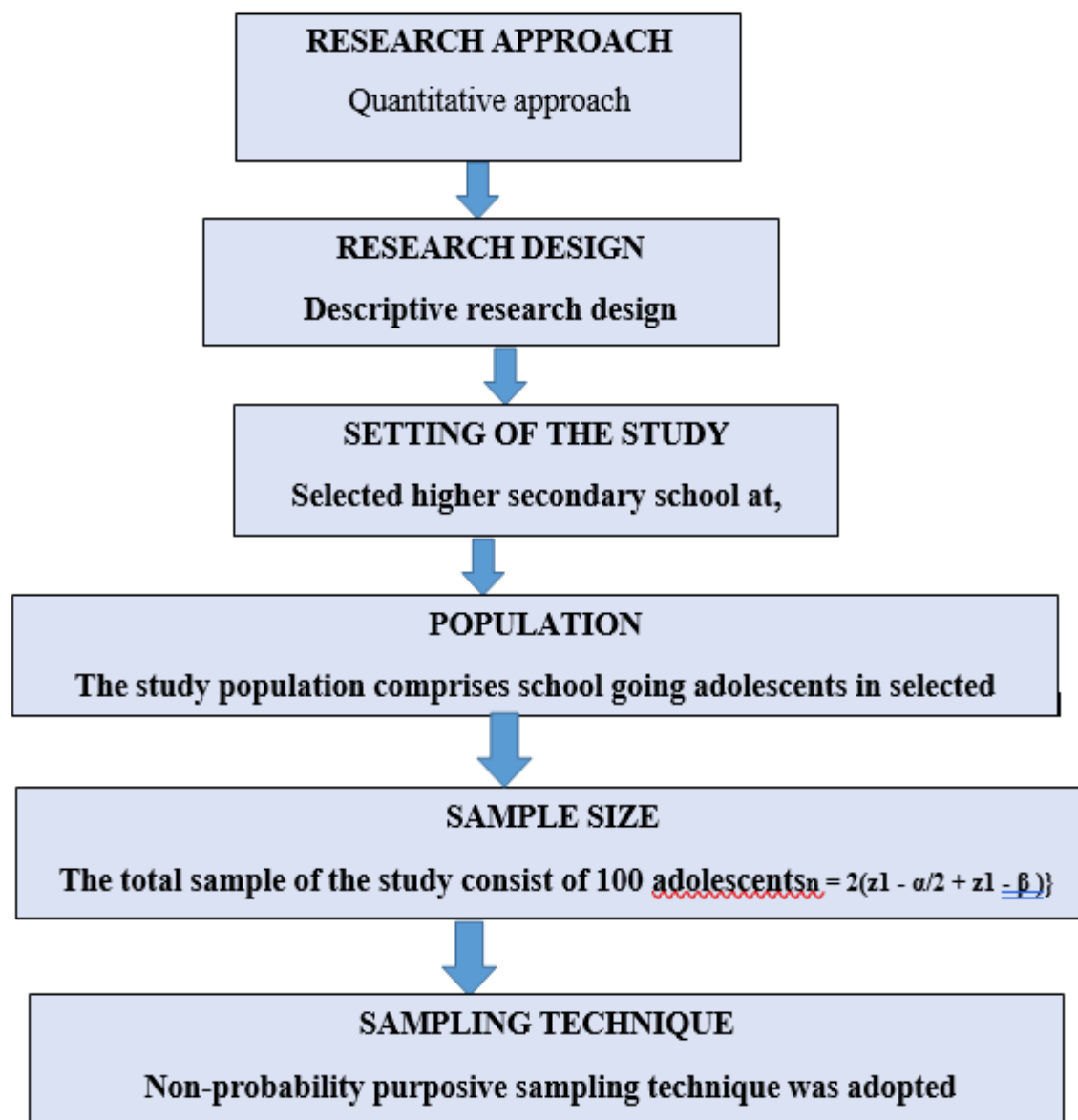
STATEMENT OF THE PROBLEM

ASSESS THE KNOWLEDGE AND ATTITUDE REGARDING TRANSMISSION AND PREVENTION OF SEXUALLY TRANSMITTED DISEASES (STDs) AMONG ADOLESCENTS IN SELECTED HIGHER SECONDARY SCHOOLS OF MORADABAD, U.P

OBJECTIVES OF THE STUDY:

1. To assess the knowledge regarding transmission and prevention sexually transmitted disease among adolescents selected higher secondary school
2. To assess the attitude regarding transmission and prevention sexually transmitted disease among adolescents selected higher secondary school
3. To find out the association between knowledge and attitude regarding transmission and prevention of sexually transmitted disease among adolescents selected higher secondary school.

MATERIALS AND METHOD:



Tool for data collection:

The tool was designed into 3 parts-

Section A: - Demographic variables: Age, Sex, Religion, Educational status, Types of family, Types of residence, Number of siblings, and Sources of information regarding STDs.

Section B: - structured knowledge questionnaire was developed. Knowledge items have four options, and the scoring pattern adopted was zero and one.

Section C:-: Attitude (Likert scale)

Scoring –

- 1 – STRONGLY DISAGREE
- 2 - DISAGREE
- 3 - NEURAL
- 4 -AGREE
- 5 – STRONGLY AGREE

Method of data collection:

Data collection is the gathering of information from the sampling units. The 100 samples was adopted from adolescents in the age group of 13-18 years old in selected higher secondary schools of Moradabad”. “The tool has 3 parts for the collection of data. Socio demographic variables, Knowledge questionnaire, attitude likert scale, 3 tools are used for data collection in which the researcher obtain responses from the subject in a face to face encounter”. Hence, the researcher developed a Socio- demographic variables, Knowledge questionnaire, attitude likert scale, to c to assess the knowledge and attitude regarding transmission and prevention of sexually transmitted diseases (STDs) among adolescents in proper manner respond to the research study .

DATA ANALYSIS AND INTERPRITATION

The data analysis strategies were as follows .Frequency and percentage distribution, mean, median and standard deviation of the demographic characteristics. Chi square of the demographic characteristics.

PRESENTATION OF DATA

The analysis of the data was organized and presented under the following section:

Section A: Frequency & percentage and distribution of socio-demographic variables such as age, gender, religion, education, types of family, place of residence, no. of siblings and source of information.

Section B: To assess the knowledge regarding transmission and prevention sexually transmitted disease among adolescents selected higher secondary school

Section C: To assess the attitude regarding transmission and prevention sexually transmitted disease among adolescents selected higher secondary school

Section D: To find out the association between knowledge and attitude regarding transmission and prevention ofsexually transmitted disease among adolescents with their selected demographic variables.

SECTION-A Table -1 Demographic variables.

SI. No.	Demographic variables	Frequency	Percentage
1.	Age in years-		
	a) 13-14	51	51%
	b) 15-16	44	44%
	c) 17-18	5	5%
2.	Sex-		
	a) Male	57	57%
	b) Female	43	43%
3.	Religion-		
	a) Hindu	55	55%
	b) Muslim	45	45%
	c) Christian	0	0%
	d) Other	0	0%

4.	Education-		
	a) High school	53	53%
	b) Higher secondary school	47	47%
5.	Types of family-		
	a) Joint family	53	53%
	b) Nuclear family	47	47%
6.	Place of residence-		
	a) Rural	41	41%
	b) Urban	59	59%
7.	Number of siblings-		
	a) 1	58	58%
	b) 2	41	41%
	c) 3	1	1%
	d) more then 3	0	0%
8.	Source of information-		
	a) Mass media	32	32%
	b) Family member	26	26%
	c) Teacher	1	1%
	d) friend	32	32%
	e) Other	9	9%

Section B. Table-2 level of Knowledge among adolescents

Sl. no.	Level of knowledge	Frequency	Percentage
1	Poor	6	6 %
2	Average	93	93%
3	Good	1	1%

Table-3 level of attitude among adolescents

Tables. no.	Level of attitude	Frequency	Percentage
1	Strong disagree	11	11%
2	Disagree	6	6 %
3	Neutral	7	7%
4	Agree	67	67%
4	Strong agree	9	9%

Section C. Table 4. Mean median and standard deviation of knowledge score.

Maximum score	Mean	Median	Standard deviation	Level of knowledge
30	14.57	11	3.91	Average

Table.5 Mean, median and standard deviation of attitude score.

Maximum score	Mean	Median	Standard deviation	Level of attitude
80	48.23	60	11	Average

Section D. Table-6 Association between knowledge and Attitude their selected demographic variables.

Sl. No.	Demographic variables	Poor		Average		Good		Df	Chi - square	Inferential
		F	%	F	%	F	%			
1.	Age							4	2.59	NS
a)	13-14	2	2	48	48	1	1			
b)	15-16	3	3	41	41	0	0			
c)	17-18	1	1	4	4	0	0			
2.	Sex									NS
a)	Male	2	2	55	55	0	0	2	2.32	

b)	Female	4	4	38	38	1	1			
3.	Religion									NS
a)	Hindu	5	5	49	49	1	1	6	2.95	
b)	Muslim	1	1	44	44	0	0			
c)	Christian	0	0	0	0	0	0			
d)	Other	0	0	0	0	0	0			
4.	Education									NS
a)	High school	1	1	52	52	0	0	4	5.44	
b)	Higher sec. school	5	5	41	41	1	1			
5.	Types of family									NS
a)	Joint family	3	3	50	50	0	0	2	1.16	
b)	Nuclear family	3	3	43	43	1	1			
6.	Place of residence									
a)	Rural	2	2	39	39	0	0	2	0.84	NS
b)	Urban	4	4	54	54	1	1			
7.	Number of siblings									
a)	1	3	3	54	54	1	1	2	7.63	NS
b)	2	3	3	38	38	0	0			
c)	3	0	0	1	1	0	0			
d)	More than 3	0	0	0	0	0	0			
8.	Source of information regarding STDs									NS
a)	Mass media	2	2	30	30	0	0	8	4.64	
b)	Family member	2	2	23	23	1	1			
c)	Teacher	0	0	1	1	0	0			
d)	Friends	2	2	30	30	0	0			
e)	Others	0	0	9	9	0	0			

Section D. Table-6.1 Association between Attitude their selected demographic variable

Sl. No.	Demographic variables	Strong disagree	disagree	Neutral	Agree	Strong agree	Df	χ^2	Inferential
		f	f	f	f	f			
1.	Age								
a)	13-14	3	0	2	38	5	8	2.59	NS
b)	15-16	7	4	5	14	4			
c)	17-18	1	2	0	15	0			
2.	Sex								
a)	Male	6	4	2	29	4	4	2.32	NS
b)	Female	5	2	5	38	5			
3.	Religion								
a)	Hindu	2	3	5	24	5	12	2.95	NS
b)	Muslim	5	3	2	38	4			
c)	Christian	4	0	0	5	0			
d)	Other	0	0	0	0	0			
4.	Education								
a)	High school	6	4	4	52	5	4	5.44	NS
b)	Higher sec. school	5	2	3	15	4			

5.	Types of family								
a)	Joint family	4	2	3	50	4	4	6.10	NS
b)	Nuclear family	7	4	4	17	5			
6.	Place of residence								
a)	Rural	4	4	3	47	5	4	6.28	NS
b)	Urban	7	2	4	20	4			
7.	Number of siblings								
a)	1	3	2	3	54	0	12	7.63	NS
b)	2	5	0	4	13	5			
c)	3	3	4	0	0	4			
d)	More than 3	0	0	0	0	0			
8.	Source of information regarding STDs								
a)	Mass media	6	2	0	50	0	8	6.12	NS
b)	Teacher	5	4	4	17	5			
c)	Friends	0	0	3	0	4			
d)	Others	0	0	0	0	0			

RESULT

Majority (51%) of adolescents were within the age group of 13-14 years and least (5%) the age group of 17-18 years. Majority (57%) of the participants was male and rest (43%) was females. Majority (55%) of the subjects belonged to the Hindu religion and least 0% were related to other religion. Majority (53%) of participants was in high schools and least (47%) were in higher secondary school. Majority (53%) adolescents were from joint family and least (47%) were from nuclear family. Majorities (59%) were having residence in urban area and least (41%) were living in rural area. Majority (58%) adolescents were single child and least (1%) were having siblings. Majority (32%) participants got information from mass media and least (1%) got information from teachers. The research findings coincided with those of the following study conducted by Urmila Sunuwar 2022 Knowledge and attitude towards sexual transmitted disease is significantly varied with student's background characteristics. Around 95% of study population had heard about sexually transmitted disease and almost 99% heard about HIV/AIDS. Majority 85.6% of students reported that they "agreed" that HIV/AIDS is a major problem in Nepal however 14.4% students were not agreed on it. 73% respondents reported that teachers are the main source of knowledge regarding sexual transmitted disease and HIV/AIDS

COMPRESSION PRESENT OF STUDY WITH OLD STUDY

The research findings conducted by Nagesh Tumkur Subbarao ¹, A Akhilesh 2017 Two hundred and fifty six (73%) males and 94 (27%) females participated in the study. 313 (90%) students had heard about sexually transmitted infections (STIs) and 223 (64%) students had heard about STIs other than HIV. 99% of students knew about HIV whereas less than 50% of students knew about other STIs. Teachers, internet and media were the source of information for most of the participants. Almost 75% of the students knew about the modes of transmission of STIs. Less than 50% of the participants knew about the symptoms of STIs and complications. Also attitude of the students towards sexual health and prevention of STIs was variable.

CONCLUSION

Findings revealed that the adolescent students had an average knowledge about STDs. Analysis of the attitude of the adolescent students revealed that they had an unfavourable attitude towards STDs.

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