



ISSN (E): 2277- 7695
ISSN (P): 2349-8242
NAAS Rating: 5.03
TPI 2019; 8(5): 562-565
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www.thepharmajournal.com
Received: 14-03-2019
Accepted: 18-04-2019

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A study of HIV/AIDS awareness and its association with possession and use of various media among rural women of Uttar Pradesh

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Abstract

HIV/AIDS, now at the beginning of its fourth decade, is pandemic and one of the most devastating diseases. It deprives families, communities and entire nations of people at their most productive ages. According to NACO, 36.7 million people were living with HIV and AIDS across the world at the end of 2015. India alone, with 2.1 million cases of HIV, has the third highest number of HIV affected persons in the world.

HIV continues to profoundly affect women and girls across all regions. A rise in the infection of women with ignorance means an increase in the infection of infants born to them. This means greater impact of the disease on women and children in particular, and society as a whole. It is felt by the health workers and experts that only factual knowledge is the most powerful weapons to fight this problem and media based approach is very effective for imparting knowledge regarding HIV/AIDS.

In this context, the author made a scientific attempt to judge the possession and use of various media, level of HIV/AIDS awareness and association between the level of HIV/AIDS awareness and possession & use of various media among rural women of Uttar Pradesh.

It is concluded from the study that majority of the respondents had low level of possession and use of media. Data related to the level of awareness regarding HIV/AIDS reported that majority of the respondents had medium level of awareness and very low numbers of the respondent's level of awareness regarding HIV/AIDS were high.

There were significant association between the level of awareness and possession & use of various media.

Keywords: HIV/AIDS, awareness, possession of media

Introduction

HIV/AIDS, now at the beginning of its fourth decade, is pandemic and one of the most devastating diseases. It deprives families, communities and entire nations of people at their most productive ages. AIDS is a disease caused by a virus named HIV (Human Immuno deficiency Virus). HIV weakens the immune system or the body's own defense system but this process is slow. It takes years after being infected for a person to notice that he/she has been infected. HIV+ve mean that the person has the virus and is harboring HIV infection.

Globally, 36.9 million people were living with HIV at the end of 2015. Sub-Saharan Africa remains most severely affected, with nearly 1 in every 20 adults (4.9%) living with HIV and accounting for 69% of the people living with HIV worldwide. After sub-Saharan Africa, the region's most heavily affected are the Caribbean and Eastern Europe and Central Asia, where 1.0% of adults were living with HIV in 2011(UNAIDS 2012) [5].

India's socio-economic status, traditional social ill, cultural myths on sex and sexuality and a huge population of marginalized people make it extremely vulnerable to the HIV epidemic. Thus the epidemic has become the most serious public health problem faced by the India since independence.

The first AIDS case in India was detected in 1986 and since then HIV infection has been reported in all states and union territories. Now India has the third largest number of people living with HIV/AIDS. As per the 2012-13 HIV estimates, there are an estimated 2.1 million people currently living with HIV/AIDS in India (UNAIDS 2012-13) [5].

HIV continues to profoundly affect women across all regions. India was the second largest population infected with HIV/AIDS and over 29.23 percent of all reported AIDS cases were women (NACO 2012) [3]. The figures in India as well as all over the world show that HIV/AIDS victims amongst women will increase faster than the man.

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It is felt by the health workers and experts that only factual knowledge and accurate attitude is the most powerful weapons to fight this problem and media based approach is very effective for imparting knowledge regarding HIV/AIDS. Agarwal, S. and Araujo PD. (2014) [1] reported in their study that media exposure is positively associated with better knowledge, but the effect is quantitatively small. Also, there are some gender differentials in HIV knowledge with respect to media exposure. Moreover, these differentials are larger once media is interacted with work status.

Jung *et al.* (2013) [2] pointed in their study that opportunity for mass media to promote HIV/AIDS knowledge and condom use to reduce the invidious impact of socioeconomic status on health. The caveat, however, is that inequalities in communication, specifically unequal use and exposure to different communication channels between higher and lower SES groups, has the potential to obstruct the promise of mass media.

Study conducted by the Yadav *et al.* (2011) reported that out of a total of 1,237 subjects who participated in survey, 60% knew something about HIV. Of those who had heard of HIV, more than 90% subjects knew the modes of transmission and more than 80% were aware of modes of prevention of HIV/AIDS. One fifth of the subjects had misconceptions in relation to HIV/AIDS. On applying multiple logistic regression, age, education, occupation, and mass media exposure were found to be the major determinants of their knowledge with regard to HIV/AIDS.

According to Randolph, W. and Viswanath, K. (2004) [4] The importance of mass media in health promotion and disease prevention is well documented, since both routine exposure to and strategic use of mass media play a significant role in promoting awareness, increasing knowledge and changing health behaviors.

It is known that the level of HIV/AIDS-related knowledge varies by the possession and use of various media. However, there is limited research on the effect of mass media use on HIV/AIDS-related awareness. In this context the researcher investigated in this study the effect of possession and use of

various media in relationship with HIV/AIDS awareness.

Research Methodology

A multistage random sampling technique was used to select the ultimate unit of the sample with a view to get a representative sample of the area. Selection of sample were done on the following stage:

Stage 1: Five district namely Ghaziabad, Agra, Jhansi, Mainpuri, Varanasi were selected randomly.

Stage 2: From each selected district three rural areas were selected through random method.

Stage 3: From each selected rural areas 40 families were selected randomly

Stage 4: From each selected families one women head of the family was selected. Thus total 40 women from each selected rural areas were taken as a sample for the study.

Thus the study was conducted among total 600 women (120 women from each selected district) belonged to the age group of 18 to 45 years.

The data was collected from primary as well as secondary sources. Secondary data was collected from different libraries, organization, agencies and Internet etc. Primary data was collected with the help of self-made Schedule.

After the collection of data, it was tabulated and was subjected to statistical analysis i.e. percentage.

Result and Discussion

The results obtained were thoroughly examined, interpreted and discussed with all care. After statistical analysis the results have been presented under the following heads:-

- Possession and use of various media
- Level of awareness regarding HIV/AIDS
- Association between the level of awareness and possession & use of various media

Possession and use of various media

Table 1: Possession and use of various media

S. No.	Variables		Ghaziabad District		Agra District		Jhansi District		Mainpuri District		Varanasi District	
			Rural Area [N=120]		Rural Area [N=120]		Rural Area [N=120]		Rural Area [N=120]		Rural Area [N=120]	
	Variable	Categories	NO.	%	NO.	%	NO.	%	NO.	%	NO.	%
1	*Media Possession (Multiple Response)	Newspaper	56	46.7	66	55	61	50.8	64	53.3	69	57.5
		Book/Magazine	14	11.7	28	23.3	22	18.3	22	18.3	21	17.5
		Radio	29	24.2	2	1.7	26	30.0	20	16.7	32	26.7
		Audio/Video Player	0	0	0	0	28	23.3	34	28.3	39	32.5
		Television	106	88.3	118	98.3	120	100	120	100	120	100
		Internet	0	0	0	0	0	0	0	0	3	2.5
2	Level of Media Possession	High	0	0	0	0	10	8.3	5	4.2	6	5.0
		Medium	17	14.2	28	23.3	29	24.2	31	25.8	43	35.8
		Low	103	85.8	92	76.7	81	67.5	84	70.0	71	59.2
		Total	120	100	120	100	120	100	120	100	120	100
3	Level of Use of Media	High	0	0	0	0	0	0	0	0	0	0
		Medium	9	7.5	15	12.5	34	28.3	22	18.3	37	30.8
		Low	111	92.5	105	87.5	86	71.7	98	81.7	83	69.2
		Total	120	100	120	100	120	100	120	100	120	100

*Multiple response (in each category percentage are calculated on the bases of total number of respondents, N=120)

Table 1. Reveals the possession and use of various media. The data shows that from Jhansi, Mainpuri and Varanasi district 100 percent of the respondents possessed television, while

from Ghaziabad district 88.3 percent and from Agra district 98.3 percent respondents possessed television. The data further shows that from the entire district approximately 50

percent respondents possessed newspaper while very short number of respondents possessed radio.

Regarding the level of media possession the data shows that majority of the respondents (85.8 percent respondents from Ghaziabad, 76.7 percent respondents from Agra, 70 percent respondents from Mainpuri, 67.5 percent respondents from Jhansi and 59.2 percent respondents from Varanasi) had low level of media possession.

Regarding to the level of use of media Individuals reported how often they used above six mass media sources with possible answers being “almost every day” (2), “at least once a week” (1), and “never” (1).

The score of the frequency of each mass media used was summed up to arrive at the total mass media use score. This total score has been divided into three categories by taking range as high, medium and low. Thus the data related to the level of use of media shows that majority of the respondents (92.5 percent respondents from Ghaziabad, 87.5 percent respondents from Agra, 81.7 percent respondents from Mainpuri, 71.7 percent respondents from Jhansi and 69.2 percent respondents from Varanasi) had low level of media use.

Thus the overall result indicated that majority of the

respondents had low level of possession and use of media and this may be the poor reach of media among rural population.

Level of awareness regarding HIV/AIDS

For accessing the level of awareness regarding HIV/AIDS the first question asked with the selected respondents was ‘Have you ever heard about HIV/AIDS’. The obtained result regarding to the above question shows that out of the total 600 respondents 49 (8.17 percent) respondents said that they never heard the term or anything about HIV/AIDS. Thus further the rest of the questions were not asked with those 49 (8.17 percent) respondents. Therefore the level of awareness regarding HIV/AIDS was assessed on total 551 respondents.

For assessing the level of awareness regarding HIV/AIDS total 85 objectives questions related to the various aspects of HIV/AIDS were asked with the respondents. 1 score was given for each correct answer and 0 was given for each incorrect/don’t know response. Then the score was summed up to arrive at the total awareness score. This total score has been divided into three categories by taking range as high, medium and low. Level of awareness regarding HIV/AIDS has been presented in Table no.2.

Table 2: Level of awareness regarding HIV/AIDS N=551

Level of awareness Regarding HIV/Aids	Ghaziabad District		Agra District		Jhansi District		Mainpuri District		Varanasi District	
	Rural Area [N=110]		Rural Area [N=114]		Rural Area [N=107]		Rural Area [N=104]		Rural Area [N=116]	
Categories	No.	%	No.	%	No.	%	No.	%	No.	%
HIGH(57 -85)	1	0.9	11	26.3	3	2.8	6	5.8	5	4.3
MEDIUM (29- 56)	80	72.7	73	64.0	72	67.3	67	64.4	82	70.7
LOW (0-28)	29	26.4	30	9.6	32	29.9	31	29.8	29	25.0
	110	100	114	100	107	100	104	100	114	100

The analysis carried out with the data obtained by respondents on total level of awareness regarding HIV/AIDS presented in Table 2. Appears to be quite interesting.

Results reveal that majority of the respondents (72.7 percent respondents from Ghaziabad, 70.7 percent respondents from Varanasi, 67.3 percent respondents from Jhansi, 64.4 percent respondents from Mainpuri and 64 percent respondents from Agra) had medium level of awareness regarding HIV/AIDS.

The data further shows that very low number of the respondents level of awareness regarding HIV/AIDS were high.

Association between the level of awareness and possession & use of various media

Association between the level of awareness and possession & use of various media has been presented in Table no.3.

Table 3: Association between the level of awareness and possession & use of various media N=551

S. No.	Variables		Level of awareness regarding HIV/AIDS					
			Rural Area [N=551]					
	Variable	Categories	High	Medium	Low	Total	df	χ^2
24.	Level of Media Possession	High	3	15	3	21	4	67.519**
		Medium	23	82	35	140		
		Low	0	277	113	390		
		Total	26	374	151	551		
25.	Level of Use of Media	High	0	0	0	0	2	53.330**
		Medium	20	62	36	118		
		Low	6	312	115	433		
		Total	26	374	151	551		

** Significant at 1 percent level of significance

For assessing the association between the level of awareness and possession & use of various media χ^2 test was used. The result indicated that there were significant association between the level of awareness and possession & use of various media. Thus the possession and use of various media strongly affected the level of HIV/AIDS awareness of the respondents.

Summary and Conclusion

After analyzing the data regarding to all the above aspects it has been clearly indicated that majority of the respondents had low level of possession and use of media and this may be the poor reach of media among rural population.

Data related to the level of awareness regarding HIV/AIDS reported that majority of the respondents had medium level of

awareness regarding HIV/AIDS and very low numbers of the respondent's level of awareness regarding HIV/AIDS were high.

There were significant association between the level of awareness and possession & use of various media.

Thus, on the bases of the above result we can say that we need to apply media-based approaches to improve HIV/AIDS-related knowledge. At the same time, we should pay attention to reducing communication inequalities among social groups and countries so as to achieve health equity on HIV/AIDS.

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