

Awareness and Attitudes on HIV/AIDS Among Married Madhesi Women in Siddharthanagar.

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Abstract

This study investigates public perceptions and awareness of HIV/AIDS in Ward No. 9 of Siddharthanagar Municipality, Nepal. Using purposive and systematic sampling, data were collected from 110 respondents via interview schedules and attitude scales. Most participants were semi-literate and held misconceptions about HIV transmission, including beliefs that it spreads through mosquito bites, kissing, or shared food. Married women in particular lacked adequate knowledge about causes, symptoms, and prevention. Cultural norms, poverty, and gender inequality were identified as major barriers to women's sexual health awareness. Few respondents had sought medical consultation. The study calls for targeted education programs to improve awareness and promote reproductive health.

Key words: AIDS, attitude, gynecologist, knowledge, misconception

Introduction

This is the world of advancement of science and technology . Along with the Advancement of science and technology various kinds of diseases have challenged to the mankind . AIDS become a global challenge of unprecedented proportion. It varies crucial health , economical, social , humanitarian, legal and ethical issues. AIDS over the world and way attempts have been made to control the infection and the transmission of the life threatening problem. Recognized as an emerging disease only in the early 1980's. AIDS has been rapidly established itself throughout the world. AIDS has evolved from a mysterious illness to a global pandemic which has infected tens of millions within 20 years . HIV/AIDS spread fastest where there is poverty, powerlessness , and social instability It is estimated that 34-36 million people are living with HIV/ AIDS. Already more than 20 million people have been infected since the virus first appeared (Park, 2005) .

Nepal also significantly affected by HIV/AIDS epidemics .The first positive case was identified in July 1988 in Nepal. By the end of 2015, National Center of ADS and STD control, Teku Kathmandu was published that the total number of HIV positive case reached to 64000 which is taken very higher comparatively with other countries.

Significance of the study.

HIV and AIDS is burning problem in the world. It is a great challenge for Nepal also. Still there is no cure for HIV and AIDS. Health education awareness program and mass media are the key factors to avoid the problems. So micro level researches are important for every individual and organization which are working at grass root level. Hopefully following are the significance of the study.

- The result of the study will serve as a guideline for developing policies and program related with promoting awareness.

- The study result will be useful for concerned person and agencies for planning and implementing.
- Will be helpful for evaluating related to awareness program and policies
- The finding of the study will be guideline for further study in target community.

Review of Related Literature

Literature review is the foundation of the study and it helps to gather information and helps to develop new knowledge, investigate idea and result of previous related study. The researchers' study will be strong, supportive and justified with the help of literature review.

The first national AIDS prevention and control program was launched by the government of Nepal in 1988. This program is known as the short term plan for AIDS prevention and control from the basic level. First medium term plan 1990-92, the second medium term plan for AIDS prevention and control in Nepal was formulated to cover the year 1993-97.

HIV and AIDS is not only a health problem but also the socio- economic repercussion of AIDS and also it is enormous because it does not only effect individual and families but also society and the country as a whole. AIDS was first recognized in the gay community in San Francisco in 1981, in the first person in the first officially recorded death of USSR citizen due to AIDS in 1988 (UNAIDS, 1999).

Chapagain (2004) had conducted research entitled "Impact of Mass Media on Enhancing Knowledge of HIV/AIDS and other STIS among Industrial workers" to find the major sources of information on HIV/ AIDS .

Bartaul (2004) had conducted research entitled " Impact of mass media on knowledge of HIV / AIDS and STDS among migrant female carpet worker. (A study of Kathmandu valley) To examine their knowledge towards condom against HIV / AIDS and to examine the sexual risk behavior of migrant female carpet worker -83 women were selected by using purposive sampling method and interview schedule were used and found that the knowledge of condom was almost universal and knowledge of condom against HIV/AIDS also universal but few of them had never heard of the majority of female carpet-workers were aware that HIV/ AIDS are transmitted through heterosexual intercourse.

Gharti, Chhetri (2006) had conducted a research entitled "theoretical knowledge on sexual health among the college girl students " exposed the sexual perception of human result out the unsafe sexual intercourse.

Adhikari, (2007) had conducted research entitled " knowledge and perception of HIV \ AIDS among married Dalit women of sundarbazar VDC Lamjung District" . To identify the knowledge and perception on HIV /AIDS of Dalit people. One hundred ten household were selected by using purposive sampling method. The study conducted that respondents of this study areas had little knowledge about different topic of HIV/AIDS .Most of the respondents were found illiterate about causes mode of transmission, and sign and symptoms.

Methodology

This study was based on cross –sectional survey .

Sources of data

The primary sources of data were the married women of Madhesi community in ward-9 of Siddharthamunicipality.

Sampling procedure

Female of Madhesi community were the respondents of the study . Two hundred seventy five female aged (25-49) was the study population. Whole population was not possible to include to the study with in the limit time resources . Among 275 madhesi women (age 25-49) of ward no -9 with the presupposition of HIV insertion 110 (40 %) were selected on the basis of systematic sampling .

Tools of Data Collection

To meet the objective, it is necessary to use suitable research tools for data collection. The researcher used structural schedule for this purpose.

Data Collection Procedure

The researcher had visit the Chairman of ward no. 9, Siddharthnagar municipality with authorized letter from health , physical and population education department and then the researcher had visited selection respondents door to door and explained the purpose of the study. Then the researcher created a favorable situation for interview women, who had not shown interest in supplying answer were not forced for interview.

Result & Discussion

This Chapter deals with analysis & interpretation of the data that were collected from the field survey. The data were tabulated and kept in sequential order according to the purpose of the study. Then the data were analyzed on the basic of percentage and table.

Table No. 1

Knowledge of HIV/AIDS by level of education.

Response	Literate		Illiteralsaz	
	No. of respondents	Percentage (%)	No. of respondent	Percentage (%)
Yes	55	91.67	28	56
No	5	8.3	22	44
Total	60	100	50	100

From the above table 91.67% of literate women were about HIV/AIDS and remaining 8.3% respondents werenot heard about HIV/AIDS. Similarly 56% of illiterate women were known about HIV/AIDS.

Thus, it can be shown from the table that there is slight different in knowledge of HIV/AIDS between literate and illiterate women. However, knowledge about HIV/AIDS among literals is slightly higher than that of illiterate women.

Table No. 2

View on HIV and AIDS

The table 6 present that 56.27% respondent know about non-communicable disease, 8.18% knew about non-communicable disease, 13.63% about fatal disease and remaining 20.90% knew about dangerous disease.

View on HIV and AIDS

Typing of disease	No. of respondent	Percentage (%)
Communicable	63	57.27
Non – Communicable	9	8.18
Fatal	15	13.63
Dangerous	23	20.90
Total	100	100

Respondent did not confidently answer on HIV/AIDS. They were feeling uneasy to answer. Some of the respondent replied that it is a fatal disease created by unhealthy human behavior some of other said it is a sexually transmitted problem . According to them, it is a dangerous disease.

Table No. 3

Method of preventing HIV and AIDS

Way of prevention	No. of respondent	Percentage (%)
Medicines	7	6.36
Awareness	23	20.90
Avoid unprotected sexual intercourse	27	24.54
Traditional healer	4	3.63
Health education	49	44.54
Total	110	100

In this study respondent were about the measure of prevention of HIV and AIDS transmission. Only 6.36% knew to prevent HIV/AIDS from medicine, 20.90% from awareness 24.54% from avoid of unprotected sexual intercourse, 3.63% from traditional healer and remaining 44.54% were known to prevent HIV/AIDS from health education.

Table No. 4

Awareness about infected person:

Have you seen any people living with HIV/AIDS in your society?	No. of respondent	Percentage (%)
Yes	11	10

No	99	90
Total	110	100
Traditional healer	4	3.63
Health education	49	44.54
Total	110	100

The table represents that 90% of the respondents ignore the presence and absence of the HIV/AIDS infected people in the society, only two of the respondents i.e. 10% had replied that they had seen people living with HIV/AIDS in their society. Thus most of the respondents were found less aware about infected people at their locality.

Table no -5

Distribution of perception towards HIV infected person

Respondent opinion	No. of respondent	Percentage %
Love & care them	15	13.63%
Hate them	77	70%
Rehabilitation	13	11.81%
Others	5	4.56%
Total	110	100%
Total	110	100

Regarding the perception towards HIV infected people 15 i.e. 13.63% respondents wanted to love and care to them. 77, i.e. 70% wanted to hate them ,13 i.e. 11.81% demanded their rehabilitation and 5 i.e. 4.56% had other perception . Thus , Most of the respondents had negative attitude towards HIV infected people.

Conclusion:

The study reveals that females in Nepal, including married women, have very limited access to accurate information regarding sex and sex-related matters. This lack of information significantly affects their awareness of HIV/AIDS, including its causes, symptoms, modes of transmission, and preventive measures. As a result, many women remain uninformed and vulnerable to various sexual health issues. A major finding of the study is the widespread prevalence of misconceptions about sex among respondents, indicating a serious gap in knowledge and awareness. Key barriers to improving women's sexual health in the region include poverty, deeply rooted cultural norms, and persistent gender inequality. These structural challenges are complex and unlikely to be resolved in the near future. Although cultural discrimination may play a role in limiting knowledge about HIV/AIDS, the present study, being small in scale, does not provide sufficient evidence to confirm it as the primary obstacle. Overall, the lack of knowledge and awareness remains a critical issue, leading to continued sexual health problems among women in the studied community.

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