

A GENDER BASED STUDY OF HIV/AIDS RELATED KNOWLEDGE AND SEXUAL ATTITUDES IN STUDENTS FROM LADDAKH

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ABSTRACT

Introduction: A review of studies conducted on sexuality in India has revealed that premarital sex in youth is prevalent in 0-10 percent of women and 15-30 percent men and it is on rise. The young people indulge in risky behavior pattern such as infrequent or irregular contraceptive use. Youth is facing a significant risk of sexual health and lack in making informed sexual choice. The objective of this study is to explore the HIV/AIDS related knowledge and sexual attitudes held by young students from Laddakh

Methodology: Systematic sampling was used to collect data from 100 Laddakhi students living in Jammu in the age range 18-29 years. The mean age of the sample was 22.28. Sexual Attitude Scale and HIV Related Knowledge Questionnaire were applied in this study.

Results: The results of test indicate significant gender differences in sexual attitudes. The male Laddakhi students held more favourable attitude towards pre marital sex, polygamy and pornography than their female counterparts. In comparison to male participants, the young female participants reflected favorable attitude towards establishing same sex relationships. The participants in the study also hold misconceptions about HIV/AIDS.

Conclusions: In addition to low level of awareness on HIV/AIDS, holding favorable sexual attitudes might result in involvement in risky sexual behavior. Organizing awareness campaigns at school level to focus the youth might be useful in curbing the potential involvement of young students in risky sexual behavior.

Key words: Gender difference, HIV/AIDS, Risky behavior, Sexual attitudes, Youth

INTRODUCTION

Sexual behavior is innate and based on drive, though modified by social factors. Cultural conditioning accounts for sexual expression.¹ Indian culture based on rigid norms governing sexuality assumes that premarital sex is rare. However, increase in sexually transmitted infections, unintended teenage pregnancies and threat of HIV/AIDS draws our attention to explore the current trends in sexuality in India. A review of studies conducted on

sexuality in India has revealed that premarital sex in youth is prevalent in 0-10 percent of women and 15-30 percent men^{2,3} and it is on rise.^{4,5} The young people indulge in risky behavior pattern such as infrequent or irregular contraceptive use.² Youth is facing a significant risk of sexual health and lack in making informed sexual choice.⁶ A study conducted on youth in Mumbai revealed that young people had limited awareness of most of the sexual matters such as HIV/AIDS and safe sex practices.⁷ In depth awareness of HIV/AIDS is limited in youth though 91 percent of young men and 73 percent of young women had heard about it.⁷

Knowledge of HIV/AIDS and sexual attitudes among youth are of particular interest as the period between menarche and marriage is for many young people a time of sexual experimentation that may involve high-risk behaviours.⁸ The majority of people with HIV/AIDS can be associated with

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certain lifestyle risks. Gender differences are reflected in previous studies conducted to assess sexual attitudes and risky behavior. More than 60 percent college students from China approved of premarital sex showing favorable attitude of the youth.⁹ In a study on young female migrant workers in China, low level of sex-related knowledge has been demonstrated along with nearly 13% of participants holding favorable attitude towards premarital sexual intercourse.¹⁰ Gender differences were reported in sexual attitudes and behavior reflecting more liberal attitudes and more frequent behaviors among male participants than females.¹¹ In a study conducted in China too, the males reflected more favorable attitude towards premarital sex.¹² Similarly, in a literature review conducted on sexual attitudes, it was found that permissive sexual attitudes in men was higher than in women¹³ whereas conservative attitudes toward sexuality were reported to be more in women.^{14,15} In a survey on 265 college students, high HIV related knowledge was reported but gender differences became evident with larger number of males holding unfavorable sexual attitudes.¹⁶ Gender differences are evident in young people in North India with respect to more permissive attitudes for involvement of males in premarital sex, homosexual acts and extramarital sex.¹⁷ In a study on university students in Malawi no differences were evident.¹⁸ Mixed results were reported in a study conducted in Nigeria on the University students having knowledge about transmission and symptomatology but some misconceptions about transmission were also reported.¹⁹ Similar findings were reported showing sound knowledge of HIV but with some misperceptions about transmission.²⁰ Gender differences in knowledge about HIV/AIDS in young college going population in India were reported with boys having better knowledge than girls.²¹

In the light of findings from previous research, this study was designed to explore gender differences in HIV related knowledge and sexual attitudes of young students hailing from Laddakh region of the state of Jammu and Kashmir (India). The population in the age-group 15-29 years, referred to as 'Youth', as per National Youth Policy-2014^[22] is regarded as being the most vulnerable to HIV/AIDS. Additionally the people who stay away from their home or have migrated are likely to be at greater risk since the experiences of isolation and loneliness might elevate the risky behavior which

in turn might account for vulnerability to HIV/AIDS.^[23] Therefore, the current study also aims to assess HIV/AIDS awareness in the young students who have moved away from their home and are staying elsewhere.

METHODOLOGY

Cross sectional design was followed for the collection of data. Using the systematic random sampling technique, the data was collected from the young students belonging to Laddakh region. The first participant in each area where the Laddakhi students stayed was selected randomly and thereafter, every tenth young Laddakhi student was selected. Only the students who were residing in Jammu city, away from their home, either in hostel or on rent (paid accommodation) were considered for the study. The consent of the participants was sought and the purpose of research was explained to them prior to administration of the tools. Confidentiality of the responses and personal information was assured. The young students unwilling to participate were not compelled. The collection of data was completed in ten days.

The tools used in the study were sexual Attitudes Scale²⁴ measures attitudes in five areas of human sexuality namely premarital sex, polygamy, pornography, lesbianism (for women) and homosexuality (for men). Responses are marked on five point scale ranging from strongly agree to strongly disagree. The lower scores indicate unfavorable attitudes towards particular scale. HIV Related Knowledge Questionnaire²⁵ adopted from Health Initiatives for Youth and the Measurement Group was employed. It comprises of eighteen statements with two options true and false. The participants were required to check out the appropriate option. The hypotheses were; there will be significant differences in sexual attitudes of young male and female Laddakhi students, there will be significant differences in HIV related knowledge of young male and female Laddakhi students and the young Laddakhi students will be having correct HIV related knowledge.

Regarding the sample; due to harsh weather conditions and inadequate facilities in Laddakh region, the young people move out of their home and approach the institutions about other regions to get proper education in the state Jammu and Kashmir. The sample chosen for the current study

comprised of 100 Laddakhi students staying in Jammu of which 50 were male and 50 were female. These students had solely moved from their native place for seeking higher education. These students were from Leh or Kargil districts in Laddakh region of the state of Jammu and Kashmir (India). All the participants were either staying in rented or paying guest accommodation or hostel away from their own family. The age range of the sample was 18 to 29 years with the mean age 22.28.

RESULTS

The data collected using the tools were coded and analyzed using SPSS version 20. Mean and S. D. were calculated and Independent Samples *t* test was employed to obtain any significant gender differences. The frequencies and percentages were also obtained to assess the HIV/AIDS related knowledge held by the youth. The demographic details of the sample are presented in table 1.

Variable	Category	N (100)
Gender	Male	50
	Female	50
Age Range	18-23	66
	24-29	34
Religion	Buddhist	94
	Muslim	6
Education	Senior Secondary	67
	Graduate	12
	Post Graduate	21
Place of Residence	Hostel	50
	Rented Accommodation	50

Variable	Sex	N	Mean	S.D.	t	P Value
Pre-marital Sex	Male	50	28.72	10.764	3.883**	0.000
	Female	50	20.48	10.453		
Polygamy	Male	50	20.68	6.234	3.161**	0.002
	Female	50	16.32	7.498		
Pornography	Male	50	29.96	5.491	4.035**	0.000
	Female	50	25.48	5.610		
Lesbianism / Homosexuality	Male	50	19.40	4.707	2.446*	0.016
	Female	50	22.94	9.087		
Overall Sexual Attitudes	Male	50	99.20	19.430	3.244**	0.002
	Female	50	84.98	24.144		
HIV Related Knowledge	Male	50	10.62	2.069	0.438	0.662
	Female	50	10.80	2.040		

Gender differences in sexual attitudes and HIV related knowledge were analyzed through applying independent samples *t* test. Results presented in Table 2 clearly reveal that there are no gender differences in HIV related knowledge. However, gender differences are apparent in sexual attitudes. On the three dimensions of sexual attitude scale namely, pre-marital sex, polygamy, and pornography, the male participants have shown favorable attitude. The overall score on sexual attitudes also is higher among males. This reflects that the study population is more likely to involve in risky behaviors as they might be sexually active prior to matrimony. They might establish several sexual relationships or involve in sexual activities with more than one partner simultaneously. The viewing of erotic material is also likely to be higher in males. An opposite trend was noticed in case of attitude toward lesbianism and homosexuality. As compared to males, the female participants have shown favorable attitude only in establishing same sex relationships. These findings are in line with previous studies.^{12,13,14, 15,16, 21} see table 3.

Dimension	Authors/ Researchers	Year	Findings
Pre-marital Sex	• Wang B, Li X, Stanton B, et al.	2007	Favorable and permissive attitude for males
	• Bhugra D, Mehra R, deSilva, P et al.	2007	
Polygamy	• Bhugra D, Mehra R, deSilva, P et al.	2007	Permissive attitude for males
Lesbianism/ homosexuality	• Bhugra D, Mehra R, deSilva, P et al.	2007	Permissive attitude for males
Overall Sexual Attitudes	• Fugere M A, Escoto C, Cousins A J et al.	2008	Unfavorable attitudes held by males; Permissive attitudes for males and conservative attitudes for females
	• Askun D, Ataca B.	2007	
	• Jaya J, Hindin M J.	2007	
HIV Related Knowledge	• Lal, SS, Vasan, RS, Sarma, PS et al.	2000	Better knowledge in males

The data were further subjected to assess the correct HIV related knowledge held by the participants. Percentage of the responses of the participants to each statement (item wise) was obtained. Table 4 shows HIV related knowledge in young Laddakhi students. On scrutinizing the data, it is revealed that the participants of the study hold certain misconceptions. The correct response rate on most of the statements is not very high. It is important to assess HIV related knowledge as its understanding and promoting safe behavior. The item stating "Condoms reduce the risk of getting the AIDS virus" and "having sex without a condom increase a person's risk of getting HIV" reflects that majority of the participants know the importance of contraceptive use in HIV prevention.

The low level of awareness on certain statements (Table 4) along with holding favorable sexual attitudes might result in indulgence of the young students in risky sexual behavior. In particular, the males participating in current study seem to be at greater risk as they have more favorable sexual attitudes. The incorrect knowledge about the statement "A person must have lots of sexual partners to be at risk for HIV" shows propensity of

indulging in risky behavior as it is well supported by favorable attitude or polygamous relationships.

DISCUSSION

The HIV/AIDS awareness campaigns at the state level need to be geared up for such population that falls in age range 18-29 years and are in such phase. The clear and relevant information may be even disseminated at the school level specially when they are at the verge of entering the adulthood and become sexually active. This would also be helpful as it will equip the young students with adequate knowledge before they actually move out of the home, away from their parents, into the setup where they might be on their own taking decisions by themselves.

The findings of this study may be replicated for future research with the larger sample. Moreover, the studies with different ethnic groups will help in establishing if there are similar trends in the young students from distinctive cultural backgrounds and if such issues need to be dealt in culturally specific manner.

Table 4. HIV Related Knowledge in the Study Population			
No.	HIV related knowledge	Correct response	Incorrect response
1	Blood, Semen, Vaginal fluids, and breast milk are the only fluids that can transmit HIV.	84%	16%
2	Semen has higher concentration of HIV than blood.	33%	67%
3	A hangnail is a potential route of HIV infection.	68%	32%
4	HIV antibodies can take up to 10 years to show up.	66%	34%
5	In confidential testing, name is associated with results.	61%	39%
6	Most babies born to HIV positive mothers are not HIV positive.	13%	87%
7	Mucous membranes in anus are more delicate than the membranes in mouth.	61%	39%
8	Keeping in good physical condition is the best way to prevent getting the AIDS virus.	48%	52%
9	A person can get AIDS by kissing and hugging someone.	88%	12%
10	Condoms reduce the risk of getting the AIDS virus.	97%	3%
11	Most people with the AIDS virus quickly show signs of being sick.	44%	56%
12	Having sex without a condom increase a person's risk of getting HIV.	97%	3%
13	A person must have lots of sexual partners to be at risk for HIV.	7%	93%
14	People who get the AIDS virus through needle sharing cannot spread the virus during sex.	78%	22%
15	There is a cure for HIV.	62%	38%
16	Cleaning injection equipment with water is good way to kill HIV.	70%	30%
17	You can get HIV from oral sex.	22%	78%
18	Keeping in good physical condition can prevent the development of AIDS virus.	58%	42%

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