



A Study to assess the knowledge and attitude regarding adherence to Anti Retro Viral Therapy among people living with HIV/AIDS at ART centers of Pune city

Mrs.REKHA.R

Msc.NSG 2nd Year Symbiosis College Of Nursing Symbiosis International University

Mrs.KALPANA.SAWANE

Assist.Professor Community Health Nursing, Symbiosis College of Nursing Symbiosis International University

ABSTRACT

I assessed the knowledge and attitude regarding adherence to ART among people living with HIV/AIDS. Descriptive design was used. Structured questionnaires' was administered. PLHIV who had been receiving Anti Retro Viral Therapy for three months. The level of ART adherence was calculated for each respondent. Results in total 60 PLHIV completed the questionnaires. The present findings showed that majority of the HIV positive individuals 36 (60%) taking ART were in the age group ranging between 31 years. Eighteen of the subjects (30%) were males and forty two subjects (70%) were females in the present study. Thirty (50%) subjects were unemployed, nine subjects (15%) were self-employed, 16 (27%) subjects have taken farming, Five subjects (8%) were professionals. Majority of the subjects i.e. Fifty seven (95%) were married, one subjects (2%) were unmarried, Two subjects (3%) were divorced. Majority of the subjects i.e. forty three (72%) belonged to joint family, Fifteen subjects (25%) were from Nuclear family and Two subjects (3%) were living extended. In this study Five subjects (8%) were diagnosed to have HIV infection for less than a year. Twenty eight (47%) were diagnosed between 1-2 years. Fourteen subjects (23%) subjects were diagnosed for HIV within 3-4 years and Thirteen (22%) subjects were diagnosed for more than 5 years.

KEYWORDS :

INTRODUCTION:

HIV stands for **Human Immunodeficiency Virus**. The human immunodeficiency virus (HIV) is a retrovirus that destroys or impairs the function of the body's immune system making the person more susceptible to infections. Unless treated, it develops into full-blown acquired immunodeficiency syndrome AIDS the acquired immunodeficiency syndrome is a fatal illness caused by a retrovirus known as the human immune deficiency virus which breaks down the body's immune system, leaving the victim vulnerable to a host of life threatening opportunistic infections, neurological disorders, or unusual malignancies. Anti retro viral therapy is the main type of treatment for HIV or AIDS. It is not a cure, but it can stop people from becoming ill for many years. The treatment consists of drugs that have to be taken every day for the rest of a person's life. The aim of antiretroviral treatment is to keep the amount of HIV in the body at a low level. This stops any weakening of the immune system and allows it to recover from any damage that HIV might have caused already. The drugs are often referred to as: antiretroviral, ARVs, anti-HIV or anti-AIDS drugs.

Globally, an estimated 35.3 (32.2–38.8) million people were living with HIV in 2012. An increase from previous years as more people are receiving the life-saving antiretroviral therapy. There were 2.3 (1.9–2.7) million new HIV infections globally, showing a 33% decline in the number of new infections from 3.4 (3.1–3.7) million in 2001. At the same time the number of AIDS deaths is also declining with 1.6 (1.4–1.9) million AIDS deaths in 2012, down from 2.3 (2.1–2.6) million in 2005. The world is within reach of providing antiretroviral therapy to 15 million people by 2015.

National AIDS Control Organization of India, the prevalence of AIDS in India in 2013 was 0.27, which is down from 0.41 in 2002. While the National AIDS Control Organization estimated that 2.39 million people live with HIV/AIDS in India in 2008–09, a more recent investigation by the Million Death Study Collaborators in the British Medical Journal (2010) estimates the population to be between 1.4–1.6 million people. Mumbai nearly 3.15 lakh HIV cases were registered in Maharashtra in 2012.

STATEMENT OF THE STUDY

"A Study to assess the knowledge and attitude regarding adherence to Anti Retro Viral Therapy among people living with HIV/AIDS at ART

centers of Pune city."

OBJECTIVES OF THE STUDY

1. To assess the knowledge regarding adherence to Anti Retro Viral Therapy among people living with HIV.
2. To assess the attitude regarding adherence to Anti Retro Viral Therapy among people living with HIV.
3. To find the association between the level of knowledge with the selected demographic variables
4. To find the association between the level of attitude with the selected demographic variables.

METHODOLOGY

In a research study the researcher moves from the beginning of the study to the end in a logical sequence of pre-determined steps that is similar across studies. There is a general flow of activities that is typical of quantitative study. It includes research approach, research design, the research setting, the sample sampling technique used for the study, the development and description of tool which includes validity and reliability of the instrument, pilot study, data collection procedure and the plan for the data analysis.

SETTING AND SAMPLE

- The setting is where the population or the portion of it that is being studied is located and where the study is carried out. The study was conducted at ART centre of Non Governmental Organization.
- The sample consists of a subset of a population to participate in the research study. In this study sample consisted of 60 individuals with HIV and on Anti retroviral treatment for more than 3 months.

TOOL AND TECHNIQUE

In this study the tool which is used consisted of 3 sections. The description of the tools used is given as follows.

Section I: Demographic data

Section II: A Structured questionnaire to assess the basic knowledge on adherence to ART among the individuals with HIV and are on ART for more than 3 months.

Section III: Attitude scale to assess the attitude of adherence to ART among individuals living with HIV

VALIDITY AND RELIABILITY

The content validity and reliability of the tool was obtained by experts in the field and the Pilot study was done from 25th February 2015 to 28th February 2015. Reliability was found to

be 0.745.

DATA GATHERING PROCESS

The data collection was scheduled for the month of February 2015. Before the data collection the investigator obtained consent from the sample and the questionnaire was administered.

FINDING OF THE STUDY

The following are the major findings of the study

SECTION I

Description of samples People living with HIV/AIDS according to Demographic characteristics by frequency and percentage.

SECTION II

Knowledge level of 60 HIV positive individuals was collected by structured questionnaires, and the data is presented using descriptive statistics. The study revealed that majority of the subjects that majority of the subjects i.e. thirty nine (65%) of them had their knowledge score ranging from 18-27(good), nine (15%) subjects had the knowledge score above 28(very good) and four subjects (6.666%) had their knowledge score ranging between 8-17 (average).

SECTION III

Analysis of data related to the attitude towards adherence to ART among PLHIV It was found that, majority had positive attitude towards Anti Retro Viral Therapy.

SECTION IV

Findings of this study showed that there was a significant association between knowledge and selected variables .To find the association between knowledge score and selected demographic variables such as age, gender, education, occupation, marital status, type of family, monthly income of individual, time since HIV diagnosis/duration, distance from home to ART centre.

SECTION V

There is a significant association between attitude score towards ART with type of family, Age, Education, Time of HIV diagnosis.

CONCLUSION

Findings of the study showed that most of the subjects were in the age group between 31-40 years with primary educational background; Most of the clients are married, Most of the subjects had good knowledge towards ART and had a positive attitude towards the treatment. Majority of the subjects were diagnosed for HIV due to the symptoms presented during the time of illness and were referred for HIV testing. Presently Thirteen (22%) are on ART since more than 5 years. Study showed that there was a positive but no statistical significant relationship between knowledge score. Since majority belonged to joint family and most of the nuclear families they are more concentrated towards health related issues and are aware regarding the ART treatment as well.

REFERENCES

1.This study could be replicated on a larger sample for generalizing the findings. || 2.Replication of the same study can be done on the general population or other population segments like care giver || 3. Continuous and periodic awareness on HIV care and treatment may be provided to all people living with HIV and the general population ||