

Socio-Demographic Factors, Knowledge and Attitudes about HIV/AIDS among Pregnant Women in Mysore, India

Sandy Saint-Hilaire*, Sandra Kiplagat, Makella Coudray, Kavitha Ravi, Vijaya Srinivas, Poornima Jaykrishna, Dionne Stephens & Purnima Madhivanan

Background: Lack of education of HIV still impact rural Indian populations. According to the AIDS virus education research fund, India accounts for the third highest burden of HIV/AIDS population in the world. The purpose of this study is to determine the relationship between income, education and knowledge, and perceptions of HIV/AIDS among pregnant rural women in Mysore, India.

Methods: A prospective cohort study was conducted between 2011 and 2014 among 664 pregnant women. The women were provided an informed consent and answered an interviewer-administered questionnaire on HIV knowledge and perceptions in the Kannada language. The participants underwent routine antenatal care services and were followed up after delivery, at 6 months and 12 months. Descriptive and chi-square analyses were computed using SPSS 23.

Results: The mean age was 21 ± 3.0 years old. 98.9% were Hindu, 1.1% were Muslim. 5.6% had no education, 33.7% had a primary school education, and 60.7% had more than a primary school education. 66.9% of the low income and 33.1% were middle to high income. 88% of women with more than primary school education correctly identified syringe and needles sharing as a risk factor for HIV/AIDS transmission, In the 12-knowledge questionnaire, those who score 0-5 were considered to have low knowledge, 6-8 is medium knowledge, and 9-12 is high knowledge. 76.2% ($p < 0.005$) of women with more than a primary school education scored highly on the knowledge questions as opposed to 1% from those with no education. 65.8% ($p < 0.005$) of women with more than a primary school education held positive attitudes about HIV as opposed to 34.2% from middle to no education.

Conclusion: Women with more than a primary school education had better knowledge of the modes of transmission of HIV/AIDS. We should therefore focus on relaying information to rural areas.