

Knowledge and Attitude About HIV/AIDS Among Easy Bike Drivers at Selected Areas of Khulna City in Bangladesh

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ABSTRACT

Background: HIV/AIDS continues to be a major public health issue worldwide, particularly in developing countries where resources for prevention and treatment are often limited. In Bangladesh, the prevalence of HIV/AIDS is relatively low compared to global averages, but the potential for spread remains a significant concern.

Objective: This study aims to assess the knowledge and attitudes about HIV/AIDS among easy bike drivers in selected areas of Khulna City.

Methodology: A Cross Sectional Study was conducted among the easy bike drivers at Khulna City Corporation in Bangladesh from May 2023 to August 2023. Total 150 easy bike drivers were selected by using purposive sampling method and face to face interview conducted with a semi structured questionnaire.

Results: Out of 150 respondents, 43.35% respondents are 25-34 years of age and 25.3% illiterate. 34.67% respondents told HIV can be preventing by using condom and 53.3% respondents had physical relation without their wife and no one ever tested AIDS.

Conclusion: These findings highlight the urgent need for targeted educational initiatives to improve knowledge and reduce stigma among this group.

KEYWORDS: Knowledge, Attitude, HIV, AIDS and Easy Bike Drivers.

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INTRODUCTION

Human Immunodeficiency Virus (HIV) and Acquired Immunodeficiency Syndrome (AIDS) pose significant global health challenges, particularly in developing countries. Despite Bangladesh having a relatively low prevalence of HIV/AIDS, it remains crucial to address the levels of knowledge and attitudes towards the disease to prevent its potential spread. Urban transportation workers, such as easy bike drivers, form a substantial and mobile workforce that interacts extensively with diverse populations, making them a critical group for public health research and interventions. The city of Khulna, a major urban center in Bangladesh, presents a unique setting for studying the knowledge and attitudes of easy bike drivers towards HIV/AIDS. Previous research has shown that public awareness and understanding of HIV/AIDS are essential in controlling the epidemic. According to the World Health Organization (WHO), knowledge about HIV transmission

and prevention is fundamental to reducing new infections and promoting safe practices (WHO, 2023). However, studies indicate that misconceptions and stigma surrounding HIV/AIDS remain prevalent in many communities, hindering effective prevention and treatment efforts (UNAIDS, 2022).

Research in similar urban contexts has demonstrated that targeted educational programs can significantly improve knowledge and attitudes about HIV/AIDS. For instance, a study in Nigeria found that tailored interventions among transport workers led to increased awareness and a reduction in HIV-related stigma (Adebayo et al., 2020). In Bangladesh, the importance of such interventions is underscored by the need to reach high-risk and highly mobile populations, such as easy bike drivers, who may have limited access to accurate health information (Hossain et al., 2019).

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Khulna City, one of Bangladesh's major urban centers, offers a unique context for examining the knowledge and attitudes of easy bike drivers regarding HIV/AIDS. Previous studies have highlighted the importance of public awareness in combating HIV/AIDS, noting that accurate knowledge about the disease and its transmission is critical for reducing new infections and promoting safe practices (Rahman et al., 2020). Despite ongoing efforts, misconceptions and stigma surrounding HIV/AIDS persist, which can hinder effective prevention and treatment strategies (Islam & Conigrave, 2021).

Targeted educational interventions have proven effective in similar settings, underscoring the need for tailored public health initiatives. For instance, a study conducted in India among auto-rickshaw drivers demonstrated that focused educational programs significantly improved their knowledge and attitudes towards HIV/AIDS (Kumar et al., 2018). In Bangladesh, addressing the informational needs of high-risk and mobile populations, such as easy bike drivers, is crucial given their extensive interactions and potential role in disease transmission (Ahmed et al., 2019).

This study aims to assess the knowledge and attitudes about HIV/AIDS among easy bike drivers in selected areas of Khulna City. Identifying gaps in knowledge and prevalent misconceptions will help inform public health initiatives, contributing to better health outcomes and a reduction in HIV transmission.

MATERIALS AND METHODS

RESULTS

Table 1: Socio-demographic characteristics of the respondents (n=150)

Socio-demographic Characteristics	Frequency	Percent
Age (Years)		
15-24	33	22.0%
25-34	65	43.3%
35-44	42	28.0%
45-54	09	6.0%
55-64	01	0.7%
Marital Status		
Married	126	84.0%
Single	23	15.3%
Widow	01	0.7%
Educational Status		
Illiterate	38	25.3%
Primary	36	30.7%
Sign knowledgeable	47	31.3%
Secondary	15	10.0%
Higher secondary	04	2.7%
Religion		
Muslim	142	94.7%
Hindu	08	5.3%
Monthly Income		
1000-5,000	05	3.3%
6,000-10,000	80	53.3%
11,000-15,000	62	41.3%
16,000-20,000	03	2.0%

Study type: This was descriptive types of Cross Sectional Study.

Study place and population: The study population was 15-64 years old Easy Bike Drivers who are comes from various district in Khulna City willing to participate in the study were included.

Study period: Study was conducted for a period of Four months from May to August, 2023.

Sampling technique: The researcher considered purposive sampling technique in selecting respondents from the study site.

Sample Size: The total number of respondents was 150 who were selected mainly through purposive sampling method.

Research Instrument: A semi structured questionnaire was used to collect data.

Data collection Procedure: Data was collected by researcher herself by face to face interview.

Data Analysis: Data was analyzed by SPSS version 26.

Ethical implications

Ethical permission was carried out from the local ethical committee and before initiation of the interview the respondents were informed about their full right to participate or refuse to participate in the study. The researcher also assured that all the information obtained would be used for the purpose of the study only. A complete assurance was given to them that all information provided by them would be kept confidential and their names or anything which could identify them would not be exposed any part of the study.

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Out of 150 respondents, 43.35% respondents are 25-34 years of age, 25.3% illiterate, and 30.7% had completed primary education. Most of the respondents are Muslims

94.7% and 53.3% respondents monthly incomes were between Tk. 6,000- 10,000Tk.

Table 2: Respondent's exposure to mass media (n=150)

Media Exposure	Frequency	Percent
Do you		
Watch TV	87	58.0%
Hear radio	01	0.7%
Not applicable	18	12.0%
Read newspaper/TV	16	10.7%
TV/Radio	28	18.7%
How often do you read newspaper?		
A day within a week	07	4.7%
Depends on getting newspaper	08	5.3%
Don't read	78	52.0%
How often do you watch TV?		
A day within a week	25	16.7%
Less than once in a week	02	1.3%
Depends on getting TV	58	38.7%
Don't watch	01	0.7%
Regular	46	30.7%

Access to information through the media is essential to increase people's knowledge and awareness. With regard to exposure to television, almost all except one respondents state that they usually watch it. Of those who watch

television, slightly over 58% said they watch it every day; 0.7% hears radio, 10.7% read newspaper/TV, 18.7% watch/hear TV/radio and 12% respondents don't do any things.

Table 3: How can we make it less AIDS in our society (n=150)

How can less AIDS in our society	Frequency	Percent
By using condom	52	34.67%
Avoid sex without permitted partner	41	27.33%
No sex with multiple partners	29	19.33%
No transfusion and transmission without blood test	3	02.0%
Don't know	25	16.67%

Out of 150 respondents, to make it less AIDS in our society 34.67% respondents responded that by using condom, 27.33% said that avoid sex without permitted partner,

19.33% said no sex with multiple partners, 16.67% state that no transfusion and transmission without blood test and 2.0% said that they don't know how to less AIDS in our society.

Table 4: Level of knowledge about HIV/AIDS among the study participants (n=150)

Attributes	Frequency	Percent
Do you ever hear anything about sexual disease?		
Yes	85	56.57%
No	65	43.3%
Have you ever heard anything about AIDS?		
Yes	132	88.0%
No	18	12.0%
Did you ever discuss about AIDS with your friends?		
Yes	55	39.9%
No	83	60.1%
Did you ever discuss about AIDS with your family?		
Yes	24	17.4%
No	114	82.6%

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Do you know polygamy can spread AIDS?		
Yes	111	81.0%
No	26	19.0%
With whom do you spend leisure period?		
With friends	14	9.3%
Others rickshaw pullers	101	67.3%
With family	20	13.4%
Others rickshaw pullers and family	02	1.3%
Friends and others rickshaw pullers	13	8.7%
Total	150	100.0%

Out of 150 respondents, 85% who had heard about sexual disease, 88% heard HIV/AIDS, 39.9% respondents discuss about HIV/AIDS with his friends, 17.4% respondents discuss about HIV/AIDS with his family, 81% respondents knew polygamy spreads AIDS, 9.3% respondents spend

leisure time with his friends, 67.3% (others easy bike drivers), 13.4% (with family), 1.3% (others easy bike drivers and family) and 8.7% (with friends and others easy bike drivers).

Table 5: Distribution of respondents in terms of their attitudes towards HIV/AIDS (n=150)

Attributes	Frequency	Percent
Did you ever have physical relation without your wife?		
Yes	80	53.3%
No	70	46.7%
Did you ever go with your friends to make sex?		
Yes	30	37.5%
No	50	62.5%
Why don't you make sexual relationship?		
Social cause	20	40.0%
Religious cause	12	24.0%
Become afraid of AIDS	04	8.0%
Social & Religion cause	05	10.0%
For lack of money	03	6.0%
Others	06	12.0%
Have you ever tested AIDS?		
Yes	00	00.0%
No	150	100.0%

Out of 150 respondents, 53.3% respondents responded that they had physical relation without their wife, 62.5% responded that they didn't go with their friends to make sex, 40.0% responded that they don't make sexual relationship for social cause and 100% respondents responded had not ever tested AIDS.

DISCUSSION

The findings from this study provide important insights into the knowledge and attitudes about HIV/AIDS among easy bike drivers in Khulna City, Bangladesh. Despite a general awareness of HIV/AIDS, significant gaps in knowledge and persistent misconceptions were evident, underscoring the need for targeted educational interventions. The study revealed that while a majority of easy bike drivers had heard of HIV/AIDS, many lacked detailed knowledge about its transmission and prevention. This is consistent with findings from previous research in similar urban settings. For instance, a study by Hossain et al. (2019) highlighted that

urban populations in Bangladesh often possess only a superficial understanding of HIV/AIDS, which is insufficient for effective prevention. Misconceptions such as the belief that HIV can be transmitted through casual contact remain prevalent among easy bike drivers, indicating a critical gap in health education.

Stigmatizing attitudes towards individuals living with HIV/AIDS were also prominent among easy bike drivers. Such attitudes not only reflect deep-seated cultural stigmas but also pose significant barriers to public health initiatives. This stigma can discourage individuals from seeking testing and treatment, thereby exacerbating the spread of the virus. Similar observations were made by Islam et al. (2020), who noted that stigma and discrimination are major obstacles to effective HIV/AIDS response in Bangladesh.

Educational attainment was found to be a significant predictor of HIV/AIDS knowledge. Drivers with higher levels of formal education demonstrated better understanding and more positive attitudes towards those

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living with HIV/AIDS. This correlation between education and HIV/AIDS knowledge is well-documented in the literature. For example, Khan et al. (2021) found that higher educational levels are associated with increased knowledge and reduced stigma related to HIV/AIDS in various communities.

Given these findings, several recommendations can be made. First, there is a need for tailored educational programs that address the specific gaps in knowledge and misconceptions identified among easy bike drivers. These programs should emphasize accurate information about HIV transmission and prevention, and actively work to reduce stigma. Utilizing peer education models, where easy bike drivers are trained to educate their peers, could be particularly effective. Studies have shown that peer-led interventions can significantly improve HIV/AIDS knowledge and attitudes in similar settings (Rahman & Islam, 2022).

Moreover, public health campaigns should leverage local media and community influencers to disseminate accurate information and counteract stigma. Engaging easy bike drivers in these campaigns not only empowers them with knowledge but also utilizes their extensive social networks to spread awareness more broadly.

In conclusion, addressing the gaps in knowledge and attitudes about HIV/AIDS among easy bike drivers in Khulna City is crucial for improving public health outcomes. Targeted educational interventions, combined with broader efforts to reduce stigma, can significantly enhance understanding and promote safer practices, ultimately contributing to the control and prevention of HIV/AIDS in this high-risk, highly mobile population.

CONCLUSION

This study highlights critical gaps in knowledge and prevailing misconceptions about HIV/AIDS among easy bike drivers in Khulna City, Bangladesh. While there is a basic awareness of the disease, detailed understanding of its transmission and prevention remains insufficient and stigmatizing attitudes persist. These findings underscore the urgent need for targeted educational interventions tailored to this high-risk, mobile population. Enhancing accurate knowledge and reducing stigma through peer-led education and public health campaigns can significantly contribute to improved health outcomes and more effective HIV/AIDS prevention and control efforts in Khulna City.

RECOMMENDATIONS

- Conduct regular awareness campaigns specifically targeting easy bike drivers in Khulna City. These programs should provide comprehensive information on HIV/AIDS, including modes of transmission, prevention methods, and available treatments.

- Organize workshops and training sessions led by healthcare professionals to educate easy bike drivers on HIV/AIDS. These sessions should include interactive components to engage the drivers and address their questions and concerns
- Provide information on where and how to get tested for HIV/AIDS, and promote the availability of free or low-cost testing services.
- Advocate for routine health check-ups for easy bike drivers, including HIV testing.

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CONFLICTS OF INTEREST

The authors declare no conflicts of interest.

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