

# Project Completion Report

Project Title HIV/AIDS Prevention Education and Awareness Program among School Adolescents & Youth in Bihar (India)

Project period: 12 Months



*Sponsored by*

**The Mercury Phoenix Trust, UK**

*Organized by*

**Bureau of Obligate and Accompanier for Rural Development (BOARD)**

At/P.O: Shahjahanpur, Dist. Patna, Bihar (India), PIN -801305

Mobile: +91 9835252736, +91 9631369572

Email: boardorg@gmail.com Website: www.boardev.org

**Brief outline of the Project:**

|                       |   |
|-----------------------|---|
| Project title         | HIV/AIDS Prevention Education and Awareness Program Among School Adolescents & Youth in Bihar (India)   |
| Geographical coverage | Daniawan Block in Patna and Karai Parsurai in Nalanda district, Bihar (India)   |
| Funded by             | The Mercury Phoenix Trust, UK   |
| Grant Release         | £4,500.00 as on 21 <sup>st</sup> April'2022   |
| Project No.           | None (sanctioned as on 1 <sup>st</sup> February'2022)   |
| Reporting period      | March'22 to February'2023 = 12 months   |
| Target Beneficiaries  | <ul style="list-style-type: none"> <li>▪ School Students (age 12-19 years) and rural Youth ( age 15-24 years)</li> <li>▪ Secondary School Teachers</li> <li>▪ Health Service Providers (HSPs), Parents, Rural Young Women.</li> </ul>   |
| Highlight             | <p>HIV/AIDS is one of the world's most serious public health challenges. Therefore, there is a strong need to have a global commitment to stop the new HIV infections and ensuring that everyone with HIV has access to possible treatment.</p> <p>Knowledge and awareness on HIV/AIDS have been generated through training &amp; workshops, rally, pre &amp; post-assessment study, and distribution of IEC materials, etc under the project intervention. The project paid attention to increasing knowledge and awareness, and change of attitude on HIV/AIDS among school students, teachers, health service providers, village youths, and rural young women in the project area. The observations of the program &amp; feedback will serve as a basis for further tailored approaches to strategic programs to control HIV/AIDS in Bihar (India).</p> |
| Goal                  | To assessing and increasing HIV/AIDS Knowledge, Awareness and Attitude among School Adolescents and Rural Youth (12-24 age groups) in Bihar.  |
| Activities            | <ul style="list-style-type: none"> <li>▪ Sensitization meetings with teachers, students and stockholders.</li> <li>▪ Organize pre &amp; post test session among school adolescent &amp; youth.</li> <li>▪ Training of Teacher Peer Educators and Student Peer Educators</li> <li>▪ HIV/AIDS awareness workshop.</li> <li>▪ Counseling and Group educational sessions.</li> <li>▪ World AIDS Day celebration.</li> <li>▪ Debates &amp; quiz competitions.</li> </ul>   |
| Outcomes              | <ul style="list-style-type: none"> <li>❖ Improved knowledge and attitudes of HIV/AIDS amongst school adolescents &amp; youth in rural areas.</li> <li>❖ Enhanced knowledge of HIV/AIDS amongst school adolescents and youth with comprehensive and correct information.</li> <li>❖ Increased awareness about health &amp; hygiene services.</li> <li>❖ Increased use of condoms especially among high-risk sex.</li> <li>❖ Reduced needle-sharing among injection users; and</li> <li>❖ Reduction in gender-based norms that increase risk of HIV infections.</li> </ul>  |
| Report compiled by    | Mr. Rishi Prakash Gautam, Program Manager   |
| Date of submission    | 27 <sup>th</sup> March'2023   |

## BACKGROUND

India HIV Estimates 2021, Bihar ranks third in the country, after Maharashtra and Uttar Pradesh in new HIV infections every year, said Dr S Siddhartha Shankar Reddy, health specialist of UNICEF Bihar, on the sidelines of an HIV/AIDS awareness event as on 18<sup>th</sup> April, 2022. In Bihar records around 8,000 new cases of people living with HIV (PLHIV) annually. Dr Reddy also said the trend of reporting higher infection among female sex workers (FSW) has now changed to MSM. Truck drivers and migrant workers were the most vulnerable group for contracting HIV/AIDS. Youngsters accounted for higher incidence of people living with HIV in the state, according to the latest third edition 2021 of the National AIDS Control Organization (NACO). Among them, the intravenous drug user and men who have sex with men (MSM) accounted for most of the new HIV/AIDS cases.

According to the Bihar State AIDS Control Society, persons living with HIV/AIDS in Bihar State are estimated to be more than 1.43 lakh as of 31<sup>st</sup> December 2021. Dr. Anshul Agarwal, project director said 22 out of every 10000 people in India were infected with HIV while in Bihar it was 18 per 10000 people. HIV prevalence among adult males (15–49 years) was estimated at 0.24% (0.18–0.32%) and among adult females at 0.20% (0.15–0.26%). This is an alarming situation for all of us.

Patna, the capital of Bihar is the district headquarters. It is the most populous district of Bihar and the fifteenth-most populous district in India. Patna district is well known for its historical places, temples, and these tourist attractions, and age-old traditional practices. The modern city of Patna is mainly on the southern bank of the river Gangas.

The youth of the project area frequently go to nearby towns and big cities in search of work and return to their native villages after the completion of their work. During their stay in towns/cities, they are often exposed to unprotected sex with strangers. These are youths, especially adolescents and young women who never get an opportunity to either discuss/learn issues related to STDs in their communities because it is considered taboo.

In Bihar, secondary/higher secondary school students are becoming sexually active at an increasing age. Sexual activity puts students at risk of exposure to STDs, including HIV infection. As a result, health education initiatives are being needed in schools to increase knowledge levels, influence attitudes, and encourage safe sex practices, but the effectiveness of its have not comprehensively assessed as yet by line departments. Whereas, School education has been described as a ‘social vaccine for HIV,’ and it can served as a powerful preventive tool.

Reduction in HIV transmission needs continuous, comprehensive and effective communication channels to disseminate messages that will sustain efforts to motivate adolescents and youth to engage in a range of options to reduce the risk of HIV infection. An integral part of school-based AIDS programs that include sexual and reproductive health information, should a regularly effort to educate on it in schools. This can prove to be an effective method in delaying the onset of sexual intercourse, and among sexually experienced youth, in increasing the use of condoms and decreasing the number of sexual partners.

Hence, there is need for developing programmes to spread awareness and to induce behavioural changes among the adolescents especially among girls in rural areas.

## Executive Summary

The human immunodeficiency virus (HIV) has emerged as the single most formidable challenge to public health, human rights, and development worldwide. Inadequate knowledge and risky practices are major hindrances in the prevention of HIV/AIDS. The project evaluation studies have shown that the younger age group (**12-19 years**) are more prone to unsafe sex practices and have poor access to contraceptives as well. We also measured the ability and knowledge level of the school adolescents and youth about HIV/AIDS and their perception about reproductive health and reproductive organs. Only 35% of participants were aware of the expanded form of the abbreviation HIV/AIDS. Very few (22%) of the respondents were aware that women are more vulnerable to getting infected with HIV/AIDS than men. Most of them had no knowledge regarding the mode of transmission. About menstruation, 47% of adolescents viewed menstruation as a bad thing and said that does not enter the kitchen during menstruation. It proves their low level of knowledge about puberty and menstruation.

BOARD also evaluated test the knowledge, attitudes and sexual risk behaviors of 483 students & 69 other stakeholders and improving their knowledge and perspectives on HIV/AIDS transmission and prevention. Students were less aware that AIDS is an individual disease and that there is a more needed to be tolerant of those living with the disease. Poor knowledge was observed among participants in the area of prevention (59.8%), actions for not transmit HIV infection (68.2%), availability of blood tests (63.2%) and drugs (73.4%). Males of stakeholder had some better knowledge in various areas when compared to females' stakeholder. Knowledge and awareness are enhancing through training & counseling session to participants about HIV/AIDS like use of condom at the time of intercourse, never share needles and syringes, never use alcohol and other drugs before or during sex etc. Now, we conclude that students are receiving and also disseminating important information to prevent risky behavior.

BOARD has successfully implemented HIV/AIDS Prevention Education and Awareness Program among School Adolescents (age 12-19 years) of Standard IX to XII and non-school-going rural youth (age 15-24 years) with support of the Mercury Phoenix Trust, UK from March'22 in Patna district in Bihar (India). We are also trying to sensitize adolescent's mother, Aganwari Sevika, ASHA and Rural Health Service Providers to the prevention of the spread of HIV/ AIDS in the target areas. This program helped in increasing knowledge on the prevention, use of the condom, safe sexual methods, and reproductive health. Target groups are also enabled to access the correct information and services for the prevention and spreading of HIV/AIDS.

Adolescents (12-19 years age group) in Daniawan block represents, 26% out 96,110 the total population as of December 2022 and sex ratio is 905 females per 1000 of males. Here is a conservative Hindu society. It is still taboo to talk openly about sex-related topics. Hence, it becomes even more important to understand the knowledge and attitude of the youths towards HIV/ AIDS. School teachers, Parents and local Health Service Providers (HSP) need to be trained to enhance the knowledge of Adolescent & Youth. Studies data could serve as a basis for a tailored approach for HIV/AIDS control programs in the future.

During this implementation phase, the target groups, as well as the project team of BOARD were oriented about the goal & objectives of the project and preventive measures regarding HIV/AIDS. In February 2022, the Mercury Phoenix Trust granted BOARD £4,500 for this project.



## PROJECT ACTIVITIES UNDERTAKEN

|                  |  |
|------------------|--|
| <b>ACTIVITY</b>  | Sensitization/initial meetings with teachers, school staffs, students and stakeholders   |
| <b>OBJECTIVE</b> | <ul style="list-style-type: none"> <li>To sensitize stakeholders and school students on HIV/AIDS and project objectives.</li> <li>To motivate them for their true and sincere participation in the project.</li> </ul> |

**PROGRESS:** According to the schedule, BOARD organized a one-day sensitization meeting for the target groups and community members. We have conducted 08 meetings with teachers & school students; 17 meetings with rural youth & other stakeholders at community spaces in the project villages.

Total **518** higher secondary school **students & 52 teachers, 143 rural youth** and **241 stakeholders** (69 village frontline health workers, 108 rural women and 64 parents), from different villages of Daniawan block in Patna district were participated and successfully gain knowledge about HIV/AIDS like cause of HIV infections & its spread, signs and symptoms, and preventive method of sex & sexuality, etc.

The meeting was started with a keynote address by Managing Director and project team of BOARD giving an overview of HIV/AIDS prevention program and its objectives. He emphasized the important roles of teachers and village frontline health workers (ANM, ASHA, AWW, and MAMTA) in reducing the risk and vulnerability of the people who are affected by HIV/AIDS. They also told that you discuss with your colleagues and local youth on HIV. If HIV is very prevalent in your community, you might consider discussing in your group for additional training, BOARD can help.





The meeting session was conducted by Rishi Prakash Gautam and Anupam Niti, Chandrabati with the support of Nirmala Kumari and Rekha Kumari with the following topics;

**(a) HIV/AIDS: The Basics**

As explained by the BOARD team; HIV can weak your immune system by destroying important cells that fight disease and infection. Over time, HIV can destroy your T-cells that your body can't fight infections and disease. When this happens, HIV infection can lead to AIDS.

AIDS is a complex illness with a wide range of complications and symptoms. AIDS is the final stage of HIV. In this stage, people are at high risk and last stage of life by various organ failures.

**(b) HIV Transmission:** HIV is found in specific human body fluids. You can be infected with HIV if any of the fluids like Blood, Semen, Breast milk, vaginal fluids, rectal (anal), etc. enter your body.

**(c) Signs and Symptoms:** Many people who are HIV positive do not have symptoms of HIV infection. The virus can sometimes cause people to feel sick, but most of the severe symptoms and illnesses of HIV are similar to common illnesses, such as the flu or respiratory infections. Signs and symptoms commonly seen in the early stages of HIV included Fever, Chills, Muscle aches, Sore throat, Fatigue, etc. Infected individuals can have the virus for up to 10 years.

**(d) HIV/AIDS Prevention:** sex is most important for sexual health and healthy relationships. To reduce your risk of contracting HIV, you should use male/female condom every time. Anal, oral, or vaginal sex, which is the main ways that HIV is transmitted, you can prevent it by abstinence. Condoms are very effective against HIV.

The following topics were also addressed:

- *Importance of talking openly on sex, sexuality, HIV, and the use of condoms.*
- *Promotion of reproductive health and prevention of mother-to-child transmission of HIV.*

An interaction session was also organized to clear several misconceptions like 'mosquito bite cannot spread HIV', 'close kiss cannot spread HIV, and sharing clothes cannot spread HIV' etc.

**Feedback of the participants:** the participants were happy with the knowledge shared by the BOARD. They said that rural youth, women & girls are not able to look after their sexual and reproductive health and are also not able to reduce their risk of HIV infection because of the lack of knowledge and confidence. We have openly learnt in details first time about Sex, Reproductive health, MSM and their risk practices. Now, we understand fully that HIV is a serious disease and health problem caused by a virus. Having initially incorrect knowledge about it, we could faced problem but now improved knowledge of HIV and reproductive health. BOARD should efforts to sensitize regularly at large to adolescent, youth, village health service providers and rural women for better knowledge on HIV/AIDS in the rural society.



|                    |   |
|--------------------|---|
| <b>ACTIVITY</b>    | Pre & Post assessment of the knowledge, improved attitude, and perceptions on HIV/AIDS among school adolescents & youth in Daniawan and Karai Parsurai block.   |
| <b>OBJECTIVE</b>   | To improve knowledge, attitude, and perceptions regarding HIV/AIDS among school adolescents & village youth.  |
| <b>Methodology</b> | A cross-sectional survey was conducted among school adolescents & village youth. They were interviewed through questionnaires to judge their knowledge, attitude, and perceptions of HIV/AIDS. The study was conducted anonymously for class IX to XII students and non-going school youth; the students were assured of the confidentiality of their responses. The purpose of the study was explained and informed consent was obtained verbally from the participating students and their parents. |

**PROGRESS:** A pre & post-study was conducted among school students in 04 Government high schools adolescent and youth of 07 villages of Shahjahanpur and Singriawan Panchayats to assess HIV/AIDS-related knowledge, attitudes and sexual behavior. These adolescent and youth students are the poor & vulnerable who are living with minimum requirements and more at risk as a result of ignorance, poverty and high prevalence of diseases. The self-administered questionnaire consisted of 30 questions in Hindi (local language) & English with a tick-box response that can be easily understandable and quick to complete (set of questions with response are enclosed herewith). The questions were divided into two categories: Questions concerning the routes of transmission and general knowledge about HIV/AIDS (including preventative measures and attitudes of infected). After the initial draft, the content was validated by the expert reviewers, and consistency was statically tested by the BOARD which proved that questionnaire is feasible to obtain accurate responses.

A total of **483** (312 girls and 171 boys) school students (14-19 age groups) and **114** village youth (45 Boys & 69 girls) were surveyed.





### PRE- STUDY REPORT

Of the **483 school students**, 64.6% were girls and 35.4% were boys. Around 29.4% of the participants were in the 10th grade, 36.9% of the 11th grade, and 33.7% of the 12th grade. Of the **114 village youth** (age 15-24 years), 60.5% girls and 39.5% boys were participated. **Total 597** adolescents & youths were participated.

The initial studies revealed that adolescents & youth had some knowledge about HIV/AIDS; but they lacked in-depth knowledge about the disease. As only **31%** did not consider that shaking hands, touching or hugging with an affected individual could transmit the disease, whereas the majority **65%** thought that it could. About **55%** of the participants believed that kissing could transmit the disease; whereas **37%** assumed that it was not transmitted by kiss and **8%** did not give their opinion.

Significant differences were observed between boys & girls regarding shaving (use of common razors) as a route of transmission; a total of **60% (N=360, 60% boys & 61% girls)** were aware of this route, while some differences regarding sharing of needle/syringe as a transmission route, **65% (139 boys) and 62% (236 girls)** were aware about it. Only **68%** of boys (**N=147**) and **61%** of girls (**N=232**) respondents considered that sexual contact is a route of transmission of HIV. Regarding transmission by breast



feeding, **43% (N=93)** of the boy's group considered it a route of transmission, whereas this figure was **47% (N=179)** among the girls' group. The students in this study demonstrated considerable inconsistency between knowledge and attitude.

### **POST- STUDY REPORT**

BOARD focused on HIV/AIDS prevention awareness program after an assessment study established because adolescent and youth were lack of knowledge on issues of sex and sexuality and access to health care. Under this project, BOARD was conducted advocacy and awareness related activities on prevention of HIV among them included behavior change communication, health care, training of peer educators, debate & quiz and raising community awareness through the use of creative media systems.

#### **RESULT:**

**Knowledge about Mode of Transmission:** Now increased knowledge of school students & rural youth about modes of transmission of HIV, **86%** respondents [Boys (N=187) and girls (N=328)] did not consider that shaking hands, touching or hugging someone with an affected individual could transmit the disease, whereas only **9%** [boys (N=29) and girls (N=44)] thought that it could while **2%** did not give their opinion.

Regarding barber tools, **86% (N=511)** of the respondents felt that sharing barber tools (use of common razors) might transmit the disease; **13% (N=77)** assumed that it would be not transmitted by such a practice and **1% (N=8)** did not give their opinion. Thus, no significant differences were observed between boys & girls.

The majority of the respondents **88% (N=525)** knew that sharing a needle/syringe is a mode of transmission. Adolescent & youth were also questioned about the course of the disease. About **82% (N=487)** knew that an HIV-infected person can remain symptomatic for many years. **87%** assumed that it was not transmitted by kissing and **10%** of the respondents believed that kissing could transmit the disease.

Regarding sexual transmission, **89%** respondents {boys=194} & {girls=339} considered that sexual contact is a route of transmission of HIV. Transmission by breast feeding, **21% (N=127)** of the respondents considered it a route of transmission, whereas this figure was **78% (N=297)** among the girls' group.

The overall knowledge about HIV among beneficiaries was higher in girls than in boys. The participants were asked to suggest three methods that would give protection from HIV/AIDS. These suggestions were an indicator to judge their knowledge about the disease. The answers included the use of a condom, avoidance of the use of I.V drugs, not sharing barber tools, regular premarital testing, etc.

**General knowledge of HIV/AIDS:** General knowledge of HIV/AIDS among the school students and rural youth were surveyed and data were analyzed. A large number of respondents (**91%**); (**N=545 out of 597**) answered that HIV is a viral infection.

This particular study also highlighted some misconceptions about HIV/AIDS diagnosis and prevention, which needed to be concerned about it and will provide a benchmark for future interventions in Bihar.

**Conclusion:** This study is providing preliminary data from the project area where current information on the knowledge of youth about HIV and their attitude. This is also highlighted the lack of basic knowledge of HIV/AIDS among young students, modes of transmission, and its management. The basic approach for control of HIV/AIDS remains prevention since an effective cure or vaccine is not yet available.

**Assessment study reports (Pre & Post study) are attached separately.**

|                  |  |
|------------------|--|
| <b>ACTIVITY</b>  | Peer Educators and Refresher training  |
| <b>OBJECTIVE</b> | To empower a group of adolescents & youth to provide health-related information focused on HIV/AIDS, demonstrate communication skills, and facilitate discussions on high-risk sexual behavior among their peers and other stakeholders. |

**PROGRESS:**



Total 143 (86 girls & 57 boys) students peer educators attended a three-day peer educators training and one day refresher training in four batches session. They were trained as per the designed curriculum for better delivery of their services. The training sessions covered the concept of peer education with methods of HIV transmission and its prevention, substance abuse, rape, and RH issues along with confidence building, improved communication skills, values promotion with enhanced self-awareness of the target groups. As a result of the training session, skill up-gradation of peer educators was promoted as sources of information, and competencies to support the system. One-day refresher training has upgraded their knowledge on adolescence and puberty, values, substance abuse, and HIV/AIDS.



In addition, **39** teachers and **26** Rural Health Service Providers (HSPs) from 07 villages near schools in Daniawan block, Patna have also attended the training that helped to review peer education and observe their growth.

The overall aim of the teacher's and Health Service Providers refresher training is to help peer educators develop insight into issues of HIV/AIDS management in schools and assist in the creation of a good educational environment in the area that is free from discrimination and stigma.

**As a result**, peer educators are now sincerely engaged in their work and enhanced knowledge & awareness about HIV/AIDS to rural youths and communities through personal contact and distribution of leaflets/literature/ posters.

**Feedback of school students:** Out of 597 school students, on average 29% (N=174) students reported that they had talk openly towards preventive method of HIV with peer educators, where it was a norm not to talk about Menstrual Hygiene and sex matters. Opinions of adolescent & youth about the peer support system were also analyzed in terms of positive and negative responses:

- 72% were positive – the peer support program has given good support and help in their school for change attitude of students.
- 21% were negative – nothing in their school has changed; the program was not promoted well. Teachers did not support it effectively.
- 7% were not any reply.

**Feedback of Health Service Providers:** they told significantly increased HIV knowledge among rural people especially young women because increased condom use and also reduced use of sharing barber equipment and injection.

|                  |   |
|------------------|---|
| <b>ACTIVITY</b>  | HIV/AIDS awareness workshop   |
| <b>OBJECTIVE</b> | <ul style="list-style-type: none"> <li>• To provide correct information to youth &amp; stakeholders about HIV infection &amp; AIDS.</li> <li>• To raise awareness for the necessity and the ways of protection from HIV virus.</li> </ul> |
| <b>Status</b>    | <b>Completed</b> – 04 units for school students and 05 units for rural youth  |

**PROGRESS:** BOARD successfully conducted a one-day HIV/AIDS awareness workshop with the support of project staff and experienced health experts. Total 13 awareness workshops (08 workshops in 04 schools, 05 among youth and stakeholders) were organized that focused on HIV transmission and prevention aspects. Before undertaking this intervention, meetings with school administrators and the project staff were conducted for observing the needs and scope of the awareness programs.





Total **303 Students and more than 200 People** including stakeholders (42 village frontline health workers, 59 ASHA, 21 AWW & MAMTA, and 87 rural women and member of women SHGs) were participated and trained on the topics of HIV/AIDS infections, sex, & sexuality.

The program was started with a keynote address by Mr. Naresh Chandra Verma, Managing Director of BOARD giving an overview of HIV transmission. He threw light on the important roles of adolescent & youth and village frontline health workers (HSP, ANM, ASHA, AWW, and MAMTA) in reducing the risks and vulnerability of the people affected by HIV/AIDS. The following topics were addressed:

- HIV/AIDS Infection, Transmission, Signs and Symptoms.
- Importance of talking openly on sex, sexuality, HIV/AIDS, and the use of condoms.
- How to prevent HIV/AIDS and create a positive environment for the Person Living with HIV/AIDS.
- Correct students' misconceptions regarding their peers' HIV/AIDS risk behaviors.

These workshops provided a platform to learn innovative skills, which are critical for ensuring an effective response to the HIV epidemic. Participants have enhanced ability to assess and measure commitments and actions in their own communities. Participants also discussed the impact of the HIV response on health and society, including the potential for effective HIV programs to transform the response for today and generations to come.

#### Result / Outcome:

- 83% of participants (school students, stakeholders, rural women, and youth etc.) gained adequate knowledge of HIV/AIDS and its prevention.
- Participants also gained knowledge of HIV/AIDS with facts and correct information to basic & communication skills for improved health practices. Now, they are ready for it.
- Ensured safer sex by the use of a condom.
- Strengthened of health practices in the project area.

**Feedback of field staff:** BOARD had a field study regarding interest of this topic by field staff. Field staffs perceived that women and girls turned out in greater numbers to know. They believed that men were engaged in livelihood work during the day and women were more interested in HIV/AIDS issues. Occasionally, certain individuals were prevented from attending; women by their husbands and children by their parents. Overall, the workshop and program liked to almost all community members in the project area.



|                  |  |
|------------------|--|
| <b>ACTIVITY</b>  | Counseling sessions and group educational activities on HIV/AIDS among adolescents & peer youth at school & village level and distribution of IEC materials.                 |
| <b>OBJECTIVE</b> | <ul style="list-style-type: none"> <li>• Understanding the difference between HIV infection and AIDS.</li> <li>• Identify the ways by which HIV infection spread.</li> </ul> |

**PROGRESS:**



**Counseling and Group education session among school students:** A total of **209** adolescent (**143** girls & **66** boys) successfully participated in **8** units of this program sessions at School. Some important issues had included as follows:

- *Causes and impacts of HIV/AIDS- the reasons for family & community vulnerability.*
- *Possible actions and responses to mitigate the negative impacts of HIV/AIDS.*
- *Talk openly on sex, sexuality, HIV/AIDS with friends.*

At the beginning of the education session, all adolescent and youth expressed their expectations. Most participants wanted to have an update on HIV/AIDS issues in general such as vaginal se, anal sex, Oral sex, transgender sex, etc and to know more about HIV/AIDS prevention and care methods. The special expectations were also as follows:

- *How vulnerable people can handle this situation when they migrate.*
- *How to live with a peer if they are not ready for it but I need sex.*
- *How can prevent HIV, when I know after test.*

The counselors (Ashmita and Niraj Kumar) told participants about the ways of HIV prevention that may spread through infected semen or vaginal fluids. HIV in vaginal fluids can penetrate the thin, delicate skin of the penis and urinary opening at the tip of the penis. During anal sex, small cuts may allow HIV in semen and small cuts or sores in the mouth allow HIV vaginal fluid by oral sex to pass directly into the bloodstream. The breast milk of an infected mother can also expose her infant to HIV.



Participants were also taken issues of mainstreaming of HIV/AIDS internally and externally. They were guided on practical steps of HIV awareness and prevention in the workplace and positive environment.

### **Counseling and Group education session at village level:**



228 village adolescents & youth participated in 12 units of counseling sessions. Participants ask questions that when someone immune system becomes severely damaged and when one can experience serious illnesses which define AIDS, what precautions should be adopted etc.? What are the other options when I don't use condom during sex?

The counselors- Mr. Ranjit Kumar and Rishi Prakash Gautam, Ms. Anupam Niti and Rekha Kumari were sensitive to cater to different types of questions by the participants. In the beginning, he introduced about HIV/AIDS virus and said that first reported in India in 1981. Since then, we've all learned a lot about this strange and scary disease. These sessions were focused on providing basic information about HIV/AIDS, known routes of transmission, and describing the progression of HIV disease and infections. It was very important for people who think they may have been exposed to HIV/AIDS and should go to have an HIV test and if affected, should begin the treatment as soon as possible to prolong their lives.

One such picture when young people talk about condoms. They only state that condoms protect you from AIDS, but do not give any further details. They provide information about condom use for safety purpose but it gives problems also. I think health educators should come to talk regularly to students & rural youth about AIDS and sex education. This will let them know what sex is and they can make the right decisions. He must have the right thoughts. They must always have condoms.

### **Results:**

- 72.9% of village adolescents & youth's knowledge increased on HIV/AIDS with reduced risk reduction.



- 76.3 % of participants have improved knowledge of sexual intercourse and the different factors associated with it.
- 83.3% of young people agree to using condoms as a way of preventing AIDS
- 89 % of participants aware to avoiding sharp things (razor blades, tooth brush etc.)/spread through cuts etc.
- Preventive decisions for infants with/without HIV infection breastfeeding.

|                  |   |
|------------------|---|
| <b>ACTIVITY</b>  | World AIDS Day – December 1, 2022   |
| <b>OBJECTIVE</b> | <ul style="list-style-type: none"> <li>• To create awareness on what is AIDS.</li> <li>• To raise awareness on HIV/AIDS among communities.</li> </ul> |



Rural young people still face gaps due to lack of knowledge & awareness towards HIV/AIDS prevention, testing and treatment services. These gaps are underpinned by stigma, discrimination, violence and entrenched societal and gender inequalities which hinder engagement of care for young people.

The World AIDS Day observed every year on 1st December to aware people about the HIV/AIDS causes, symptoms, prevention etc. With the same objectives on the occasion of World AIDS Day 2022, BOARD celebrated an awareness campaign through high school students about HIV/AIDS in Daniawan and Nagarnousa block at 11.30 after noon on 1st & 2nd December, 2022. Apart from that a mass rally also started from Village Shahjahanpur, Noorichak, Navichak, Hassanpur & Singriawan and traveled through target villages and important streets of the locality. The following slogans, quotes, images, and posters were displayed to realize the importance of celebrating the day.



Mr. Naresh Chandra Verma, MD of BOARD briefed about the importance of observing World AIDS Day every year. He explained worldwide statistics of HIV/AIDS, the mode of transmission, treatment, and availability of medical facilities to people living with HIV/AIDS. He flagged off the rallies at School and villages. 83 peer Educators, 04 volunteers, and 259 adolescent and youth took part in the rally.

Peer Educators were given T-shirts with the MPT logo. All participants chanted slogans and holding placards. The youth volunteers addressed the street corner meetings and distributed IEC materials at the locations. The rally demonstrated that proper awareness of HIV/AIDS can help in its eradication one day.

**Outcome:** HIV, the virus that causes AIDS, is one of the world’s most serious public health challenges. Therefore, there is a strong need to have a global commitment to stop the new HIV infections and ensuring that everyone with HIV has access to possible treatment. HIV/AIDS Awareness is a campaign designed to help prevent HIV infections and eliminate stigma by educating students on this disease. This activity enhanced awareness about HIV/AIDS cause, symptoms, prevention, misconception etc. among them and developed a sense of commitment to spread the knowledge gained throughout the society.

|                  |   |
|------------------|---|
| <b>ACTIVITY</b>  | Debates & quiz competitions – 4 units   |
| <b>OBJECTIVE</b> | <ul style="list-style-type: none"> <li>To provide a unique platform to school students to put their knowledge and quizzing instincts to the test.</li> <li>To generate effective critical thinking into primary issues in the given topic.</li> </ul> |

**PROGRESS:** Mr. Rajiv Nayan, Principle and Mr. Sriman Narayan Pathak, Teacher, higher secondary school, Karaiparsurai, Mr. Navin Kumar, BDO, Govt. of Bihar, and Mr. Naresh Chandra Verma, MD, BOARD delivered a speech on HIV/AIDS prevention on the occasion. Debates & quiz competitions organized on 16/01/2023 among students with focus on their view for able to discover new information and knowledge for prevention of HIV/AIDS.



Debates & quiz were used in all disciplines on a wide range of HIV/AIDS. The students were contributed differing remarks and suggestions for a more active and well-prepared class discussion. Total **144 students** were participated in the competitions. The program was organized in following steps-

**Round one** - written Knowledge Test (total 25 questions and total marks -25)

1. Team One for girls - 25 Minutes/unit – Participated 20 girls/unit in 04 batches; **total 80 girls**
2. Team Two for boys - 25 Minutes/unit – Participated 16 boys/unit in 04 batches; **total 64 boys**

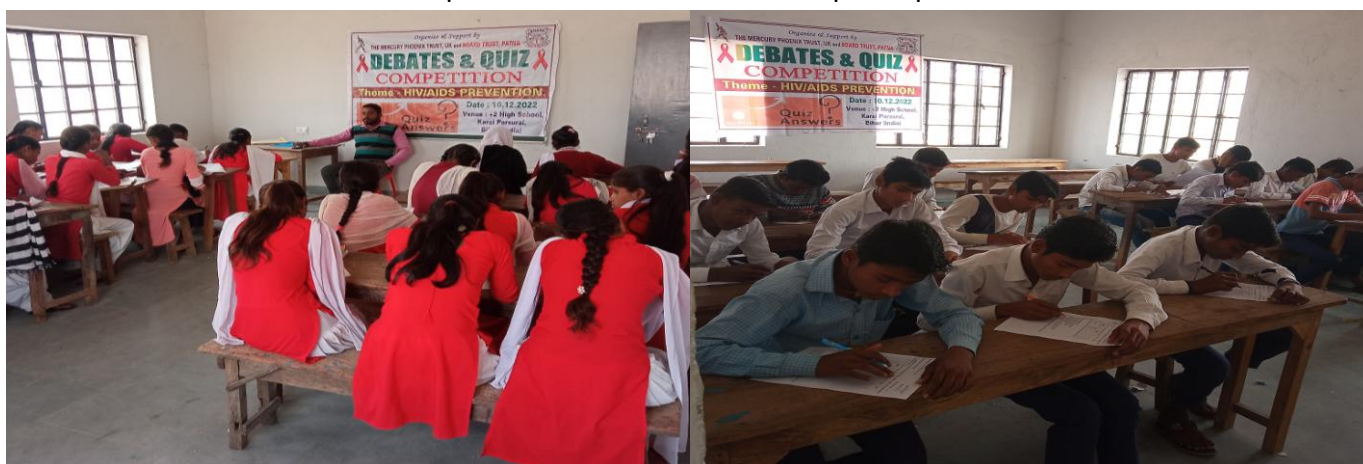
**Oral Question & Answer test** - 4 questions and 2 Minutes each participants; this session was used for enhancing communication skills.

According to results, 25% students were selected through marks of written & oral for **second round**

**Round Two** - written Knowledge Test (total 15 questions and total marks -15)

1. Team One for girls - 15 Minutes/unit – Participated 10 girls/unit in 02 batches; **total 20 girls**
2. Team Two for boys - 15 Minutes/unit – Participated 8 boys/unit in 02 batches; **total 16 boys**

**Oral Question & Answer test** - 4 questions and 2 Minutes each participants.



According to result, 18 students (50%) were selected through marks of written & oral test for **Third round**

**Round Third** - written Knowledge Test (total 10 questions, 10 Minutes, and 10 marks)

Total 18 students (08 girls & 10 boys) were participated in this round.

**Oral Question & Answer test** - 4 questions and 2 Minutes each participants.





According to both results, 06 students (05 boys & 01 girl) were selected for Final round. They were the following-

1. Md. Belal Hasmi, 2. Sakshi Kumari, 3. Abhishek Ranjan, 4. Prince Raj, 5. Rohit Kumar, and Abhay Kumar



The students of the final round excelled in the debate and quiz competition on HIV transmission and general knowledge of HIV/AIDS with full enthusiasm under the supervision of Mr. Sriman Narayan Pathak, school Teacher. Ms. Sakshi Kumari got 1st prize, Rohit Kumar got 2nd prize and Abhay Kumar got 3rd prize in this competition. Md. Belal Hasmi, Abhishek Ranjan and Prince Raj have been got consolation prize.



1<sup>st</sup> Prize – Sakshi Kumari



2<sup>nd</sup> Prize – Rohit Kumar



3<sup>rd</sup> Prize – Abhay Kumar

**CONSOLATION PRIZE**





**OTHER CONSOLATION PRIZE (MEDAL OF HONOR) TO ALL THIRD ROUND SELECTED STUDENTS**



**Conclusion:** Using debates in the classroom provides students the opportunity to explore real-life topics and issues. Debates encourage them through self-reflection to learn from their peers.

During the question-answer session, all participated interacted with everyone and answered all the questions raised in a very elaborative and informative way. We feel that the program on HIV/AIDS Prevention Education among the School Adolescents & rural Youths conducted in the project areas are reaching the information and preventive message in a successful manner. These findings are based on a Qualitative Study that is comprised of Key Informant Interviews, Written Test, Group Discussions, and Direct Observations conducted among different age groups of school students from both sex groups.

The concluding remark with vote of thanks was given by Rajiv Nayan, School Principal, Karai Parsurai. He also appraised BOARD staffs and volunteer’s efforts and suggested them to spread the awareness message among the society.

**Thank You,**

Thank you once again. We are very proud of our relationship with the Mercury Phoenix Trust, UK and truly grateful for your support.



**MEDIA COVERAGE IN HINDI**

Prabhat Khabar 12.09.2022

**दनियावां में एचआइवी पर दो दिवसीय प्रशिक्षण संपन्न**

दनियावां. शाहजहांपुर गांव में एचआइवी व एड्स को लेकर दो दिवसीय प्रशिक्षण कार्यक्रम का आयोजन बोर्ड संस्था के कार्यालय के प्रांगण में किया गया. दो दिवसीय प्रशिक्षण में स्कूली लड़कियों में जागरूकता पैदा करने के लिए एमपीटी यूके के सहयोग से एचआइवी/एड्स के बारे में नरेश चंद्र वर्मा, अनुराधा कुमारी और संगीता कुमारी ने विस्तृत जानकारी देते हुए प्रकाश डाला. उन्होंने बताया कि एचआइवी व्यक्ति में असुरक्षित यौन संबंध दूषित खून के संपर्क में आने व मां के दूध से बच्चों में फैलता है.

**एचआइवी व एड्स पर जागरूकता कार्यक्रम**

करायपरसुराय. शनिवार को करायपरसुराय प्रखंड क्षेत्र में करायपरसुराय राजकीय प्लस टू उच्च विद्यालय में एचआईवी एवं एड्स जागरूकता कार्यक्रम का आयोजन किया गया. इस दौरान बोर्ड संस्था शाहजहांपुर एवं एमटी इंग्लैंड के सहयोग से स्कूली बच्चों के बीच में एचआईवी व कोविड-19 के बारे में जागरूक किया गया. प्रशिक्षण के रूप में संस्था के संस्थापक नरेश चंद्र वर्मा एवं नीरज ने भूमिका निभायी. उन्होंने कहा कि आज के समय में स्कूली बच्चे को कोविड-19 एवं एचआईवी के बारे में जागरूक करना आवश्यक है.

**एड्स पर लोगों को किया गया जागरूक**

दनियावां. प्रखंड के शाहजहांपुर गांव में एचआइवी व एड्स को लेकर एक दिवसीय प्रशिक्षण कार्यक्रम का आयोजन बोर्ड संस्था के कार्यालय के प्रांगण में किया गया. कार्यक्रम में आशा, आंगनबाड़ी सेविका और ग्रामीण चिकित्सकों को एचआइवी/एड्स के बारे में नरेश चंद्र वर्मा, नीरज कुमार और संगीता कुमारी ने विस्तृत जानकारी देते हुए प्रकाश डाला. मौके पर डॉ शिवकुमार, धर्मेंद्र कुमार, बिरेंद्र कुमार, आशा कार्यकर्ता आशा सिन्हा, मनोरमा आदि रहीं.

**दंपती को एड्स तो हजार में एक बच्चे को संक्रमण संभव**

मौ-वाप नियमित ले देवा तो बच्चा हो सकता है पूरी तरह स्वस्थ, दवा लेने में लापरवाही बरतने पर मर्ज बढ़ सकता है

**विश्व सद्दल दिवस**

विश्वभारत, मित्र संप्रदाय, विश्व में एड्स को विनाश करने का लक्ष्य, एचआइवी व एड्स को नियंत्रित करने के लिए, एचआइवी व एड्स को नियंत्रित करने के लिए, एचआइवी व एड्स को नियंत्रित करने के लिए...

**दवाया अज्ञानता अभियान**

मानवक में अज्ञान ही एड्स संक्रमण के मुख्य कारण है। एचआइवी व एड्स को नियंत्रित करने के लिए, एचआइवी व एड्स को नियंत्रित करने के लिए...

**बच्चों में निकाली रती**

अज्ञानता ही एड्स संक्रमण के मुख्य कारण है। एचआइवी व एड्स को नियंत्रित करने के लिए, एचआइवी व एड्स को नियंत्रित करने के लिए...

**रिक्तों के प्रति खीं बकसूर**

रिक्तों के प्रति खीं बकसूर, रिक्तों के प्रति खीं बकसूर, रिक्तों के प्रति खीं बकसूर...

| वर्ष | एचआइवी संक्रमित | एड्स संक्रमित |
|------|-----------------|---------------|
| 2018 | 12              | 12            |
| 2019 | 15              | 15            |
| 2020 | 18              | 18            |
| 2021 | 21              | 21            |
| 2022 | 24              | 24            |

**एचआईवी संक्रमितों से भेदभाव पर 24 घंटे में दंड**

पटना, हिन्दुस्तान ब्यूरो। एचआईवी संक्रमित व्यक्तियों व उनके स्वजनों के साथ किसी प्रकार का सामाजिक भेदभाव करने वाले लोग 24 घंटे के अंदर दंडित होंगे। ये दंड जिलों के अस्पताल में मौजूद शिकायत पदाधिकारी द्वारा तय किए जाएंगे। ऐसे लोगों पर न्यायिक प्रक्रिया के तहत आर्थिक जुर्माना और कारावास रूपी दंड का भी प्रावधान किया गया है। इसके अलावा एचआईवी संक्रमित व्यक्तियों के स्वास्थ्य संबंधी शिकायतों का निष्पादन अब सातों दिन 24 घंटे किया जा रहा है। सामाजिक भेदभाव संबंधित शिकायतों के निष्पादन के लिए राज्य के सभी

**कार्रवाई के लिए नामित किये गए शिकायत पदाधिकारी**

मेडिकल कॉलेजों, सदर व अनुमंडलीय अस्पतालों के अलावा सामुदायिक स्वास्थ्य केंद्र, रेफरल अस्पताल और प्राथमिक स्वास्थ्य केन्द्रों पर स्वास्थ्य विभाग के अधिकारियों व कर्मियों को नामित किया गया है। बिहार राज्य एड्स नियंत्रण समिति द्वारा नियम और कानून की जानकारी देने के लिए शिकायत पदाधिकारी को प्रशिक्षित किया गया है।