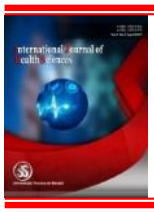


International Journal of Health Sciences
Available online at www.sciencescholar.us
Vol. 9 No. 1, April 2025, pages: 174-188
E-ISSN: 2550-696X
https://doi.org/10.53730/ijhs.v9n1.15552

Knowledge, Attitude and Practice about Sexually Transmitted Disease among Young Adults: A Cross-Sectional Observational Study

Shah Margiben Shaileshbhai [a], Khunt Vishwash Hareshbhai [b], Patel Shiv Kiranbha [c], Chauhan Meet Chaganji [d], Mohit Buddhadev [e]

Manuscript submitted: 09 October 2024, Manuscript revised: 18 December 2024, Accepted for publication: 27 January 2025

Corresponding Author [e]

Keywords

cross-sectional study;
prevention;
sexual health;
sexually transmitted diseases;
young adults

Abstract

Background: Sexually transmitted diseases (STDs) are a significant public health issue, particularly among young adults. Despite efforts to promote awareness, knowledge gaps persist, leading to risky behaviors. Aims: To assess the knowledge, attitude, and practices regarding STDs among young adults and to identify areas for targeted interventions. Methods: A cross-sectional observational study conducted at Parul University, involving 300 participants aged 18-30 from medical and non-medical backgrounds. Data were collected through a structured questionnaire assessing knowledge of STDs, attitudes toward sexual health, and preventive practices. Descriptive statistics, chi-square tests, and correlation analysis assessed the relationships between variables. Results: The study revealed that 84.7% of participants were aware of common STDs like HIV/AIDS, but only 59.3% could identify specific symptoms. A significant portion (24.7%) expressed discomfort in discussing STDs, indicating persisting stigma. Conclusion: There are clear knowledge gaps and stigma-related barriers among young adults regarding STDs. Enhanced sexual health education is necessary to address these issues and promote safer sexual practices.

[a] Pharm D student, Parul Institute of Pharmacy and Research, Parul University, Vadodara, Gujarat
[b] Pharm D student, Parul Institute of Pharmacy and Research, Parul University, Vadodara, Gujarat
[c] Pharm D student, Parul Institute of Pharmacy and Research, Parul University, Vadodara, Gujarat
[d] Pharm D student, Parul Institute of Pharmacy and Research, Parul University, Vadodara, Gujarat
[e] Assistant Professor, Department of Pharmacy Practice, Parul Institute of Pharmacy and Research, Parul University, Vadodara, Gujarat

Contents

1 Introduction

Sexually transmitted diseases (STDs) remain a major public health concern, globally. Young Adults are often considered as the building blocks of the nation. They play a significant role in the future and the present health status of a country, mainly because their behaviors, attitudes, beliefs, and knowledge shape the future of the society, hence their health and well-being are important aspects of a nation's productivity and growth. This generation group often makes decisions on an impulse that may lead to risky sexual behaviors. With rapid changes in social cultures and globalization, young adults are engaging more and more in risky sexual behaviors leading to sexually transmitted diseases (Haffner, 1998). The World Health Organization (WHO) reports that millions of new STD cases occur annually, with infections like chlamydia, gonorrhea, syphilis, and HIV being particularly prevalent among this age group (WHO, 2023a; WHO, 2023b; Centers for Disease Control and Prevention, 2019). Sexually transmitted diseases (STDs) remain a major public health concern, globally. Young Adults are often considered as the building blocks of the nation. They play a significant role in the future and the present health status of a country, mainly because their behaviors, attitudes, beliefs, and knowledge shape the future of the society, hence their health and well-being are important aspects of a nation's productivity and growth. This generation group often makes decisions on an impulse that may lead to risky sexual behaviors. With rapid changes in social cultures and globalization, young adults are engaging more and more in risky sexual behaviors leading to sexually transmitted diseases.[1] The World Health Organization (WHO) reports that millions of new STD cases occur annually, with infections like chlamydia, gonorrhea, syphilis, and HIV being particularly prevalent among this age group (WHO, 2023a; WHO, 2023b; Centers for Disease Control and Prevention, 2019). The stigma surrounding STDs often prevents open discussions and timely treatment, exacerbating the issue. This study was conducted to assess the knowledge, attitudes, and practices (KAP) related to STDs among young adults at Parul University, to identify gaps in awareness and areas where educational interventions could improve STD prevention and control. A 2003 study report by WHO on adults showed that young people's sexual activities are unplanned, unsafe random, and infrequent. As a result, young adults are not able to protect themselves from the risk of sexually transmitted diseases (WHO, 2003). Over and above 30 different bacteria, viruses, and parasites are likely to cause sexually transmitted diseases through sexual contact, which includes Vaginal, oral, and anal sex. Some of the STDs can also be transmitted by blood, or from mother to child during pregnancy, breastfeeding, or childbirth. The sexually transmitted disease is a matter of global concern, infecting nearly 1 million people on an everyday basis.[3] Sexually transmitted diseases (STDs) remain a major public health concern, globally. Young Adults are often considered as the building blocks of the nation. They play a significant role in the future and the present health status of a country, mainly because their behaviors, attitudes, beliefs, and knowledge shape the future of the society, hence their health and well-being are important aspects of a nation's productivity and growth. This generation group often makes decisions on an impulse that may lead to risky sexual behaviors (Farley et al., 2003; Tsevat et al., 2017). With rapid changes in social cultures and globalization, young adults are engaging more and more in risky sexual behaviors leading to sexually transmitted diseases (Haffner, 1998). The World Health Organization (WHO) reports that millions of new STD cases occur annually, with infections like chlamydia, gonorrhea, syphilis, and HIV being particularly prevalent

among this age group ((WHO, 2023a; WHO, 2023b; Centers for Disease Control and Prevention, 2019). The stigma surrounding STDs often prevents open discussions and timely treatment, exacerbating the issue. This study was conducted to assess the knowledge, attitudes, and practices (KAP) related to STDs among young adults at Parul University, to identify gaps in awareness and areas where educational interventions could improve STD prevention and control (Mulye et al., 2009; Castaneda et al., 2008). A 2003 study report by WHO on adults showed that young people's sexual activities are unplanned, unsafe random, and infrequent. As a result, young adults are not able to protect themselves from the risk of sexually transmitted diseases (WHO,2003). Over and above 30 different bacteria, viruses, and parasites are likely to cause sexually transmitted diseases through sexual contact, which includes Vaginal, oral, and anal sex. Some of the STDs can also be transmitted by blood, or from mother to child during pregnancy, breastfeeding, or childbirth. The sexually transmitted disease is a matter of global concern, infecting nearly 1 million people on an everyday basis (WHO,2003a). The stigma surrounding STDs often prevents open discussions and timely treatment, exacerbating the issue. This study was conducted to assess the knowledge, attitudes, and practices (KAP) related to STDs among young adults at Parul University, to identify gaps in awareness and areas where educational interventions could improve STD prevention and control (Lavanchy, 2005; Brotons et al., 2005).

2 Materials and Methods

Study Design
A cross-sectional observational study assessed KAP regarding STDs among young adults, capturing diverse perspectives within a defined population.

Ethical Considerations
Approved by the Institutional Ethics Committee, with informed consent and confidentiality maintained (Ethics approval no: PUIECHR/PIMSR/00/081734/6514).

Study Population
Targeted young adults (18–25 years) from a university in Gujarat, India. Participants were evenly split between medical (50%) and non-medical (50%) groups, all enrolled in academic programs and literate in English or Hindi.

Sampling Technique
Convenience sampling recruited 300 participants, equally divided between medical and non-medical disciplines.

Data Collection Tools
A validated semi-structured questionnaire assessed demographics, knowledge, attitudes, and practices on STD symptoms, prevention, and stigma.

Data Analysis
Data were analyzed using SPSS software. Descriptive statistics summarized demographics, and chi-square tests compared KAP between medical and non-medical students. A P-value ≤ 0.05 was considered statistically significant.

3 Results and Discussions

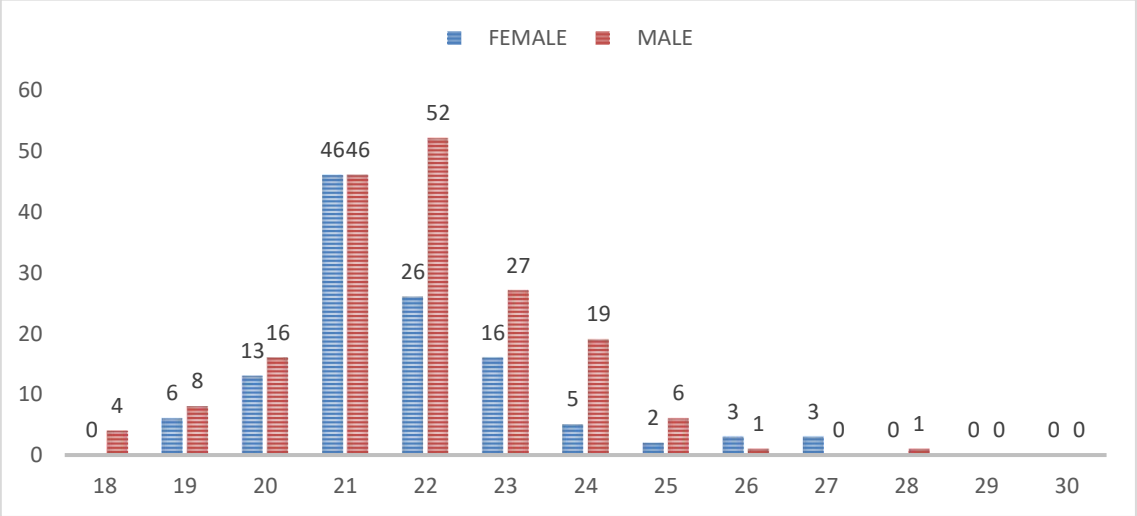
3.1 Results

This cross-sectional study surveyed 300 young adults from Parul University to assess their knowledge, attitudes, and practices regarding sexually transmitted diseases (STDs). The participants were between 18 and 30 years old and came from both medical and non-medical academic backgrounds. The findings reflect

varying levels of awareness, preventive practices, and barriers to seeking STD-related healthcare, influenced by demographic factors such as gender, age, and educational background (Knottnerus & Muris, 2003; Wang & Cheng, 2020).

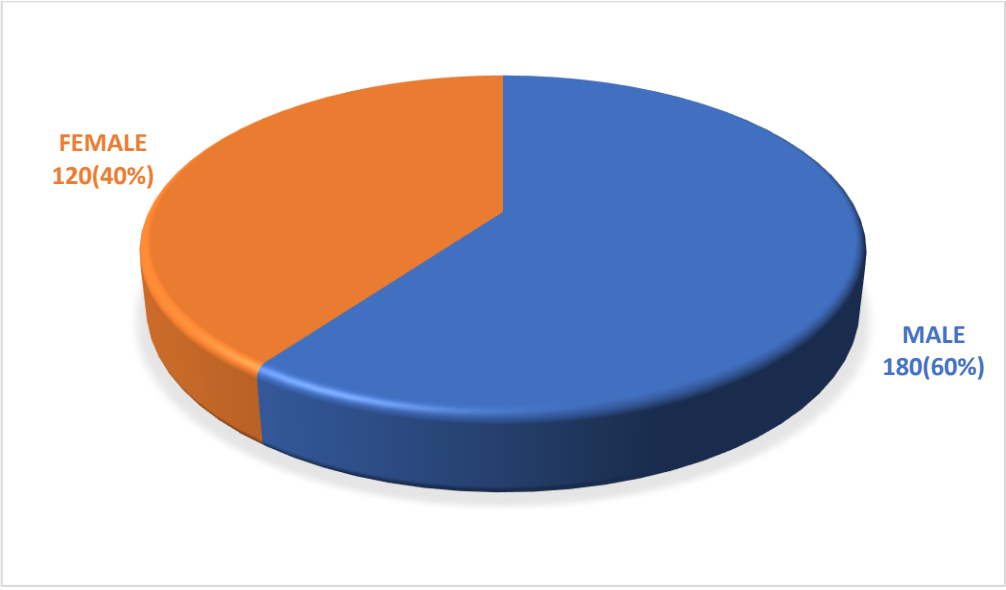
Participant Demographics

The study included 300 participants aged 18-25, with a mean age of 21.3. The sample was evenly split between medical (55%) and non-medical (45%) students. The largest age group was 21 years (30.7%, n=92), followed by 20 (25%) and 22 (18%). The P-value observed was 0.030311.



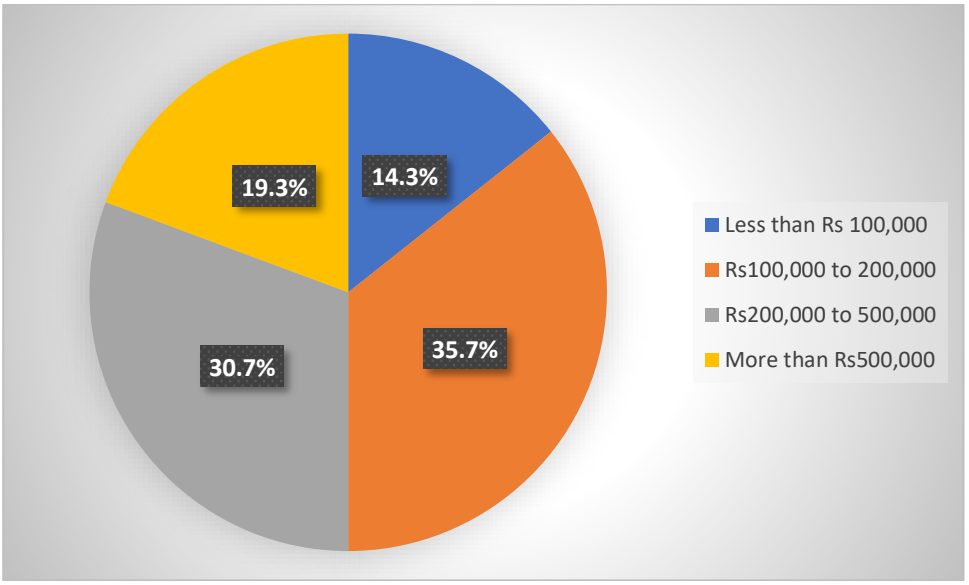
Graph 1. Shows a graphical representation of the age group

Gender Distribution: The sample consisted of 60% males and 40% females. Among medical students, 45% were female, compared to 35% among non-medical students. The observed P-value was 0.5.



Graph 2. Shows the ratio of males and females taking part in the survey

Educational Background and socioeconomic status: All participants were enrolled in academic programs. Medical students had structured exposure to health topics, while non-medical students relied on informal sources for sexual health information. 40% of participants had family incomes between INR 1,00,000–2,00,000 annually, with no significant difference between the two groups (P-value = 0.5).

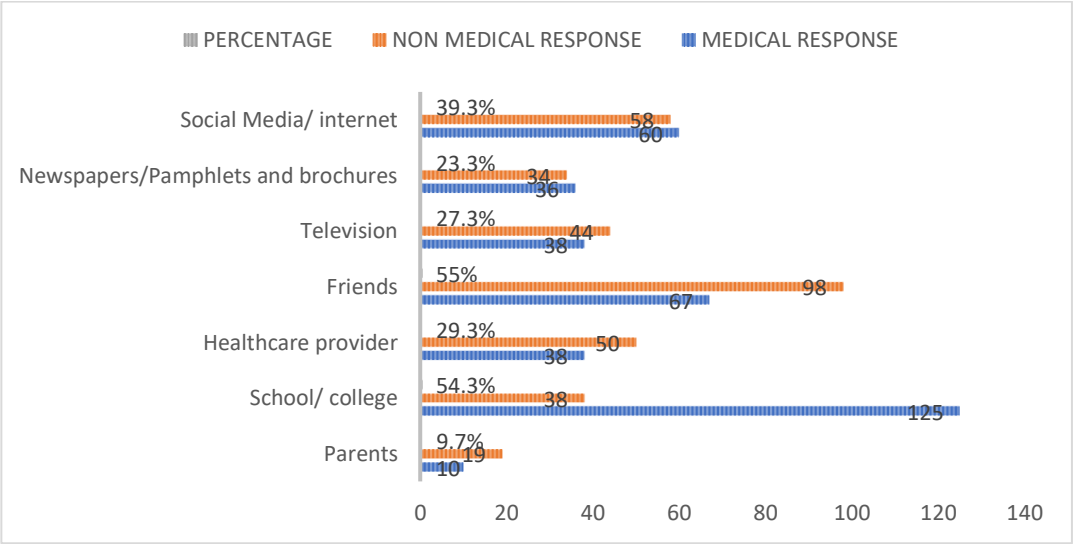


Graph 3. Shows the ratio of annual income of the family

Knowledge Levels

1. General Awareness:

- Medical students reported higher general awareness (85%) than non-medical students (65%), with most familiar with STDs like HIV/AIDS, gonorrhea, and syphilis. Non-medical students primarily used the internet (39%) and peers (55%) for information, while medical students relied on academic curricula (70%). The P-value was 0.376804.



Graph 4. Shows a graphical representation of the Information on sexual health and sexually transmitted diseases

2. Specific Knowledge:
Symptoms of STDs: 70% of medical students identified STD symptoms, versus 50% of non-medical students. Both groups lacked knowledge of trichomoniasis and HPV.

Table 1
Common symptoms of STDs.

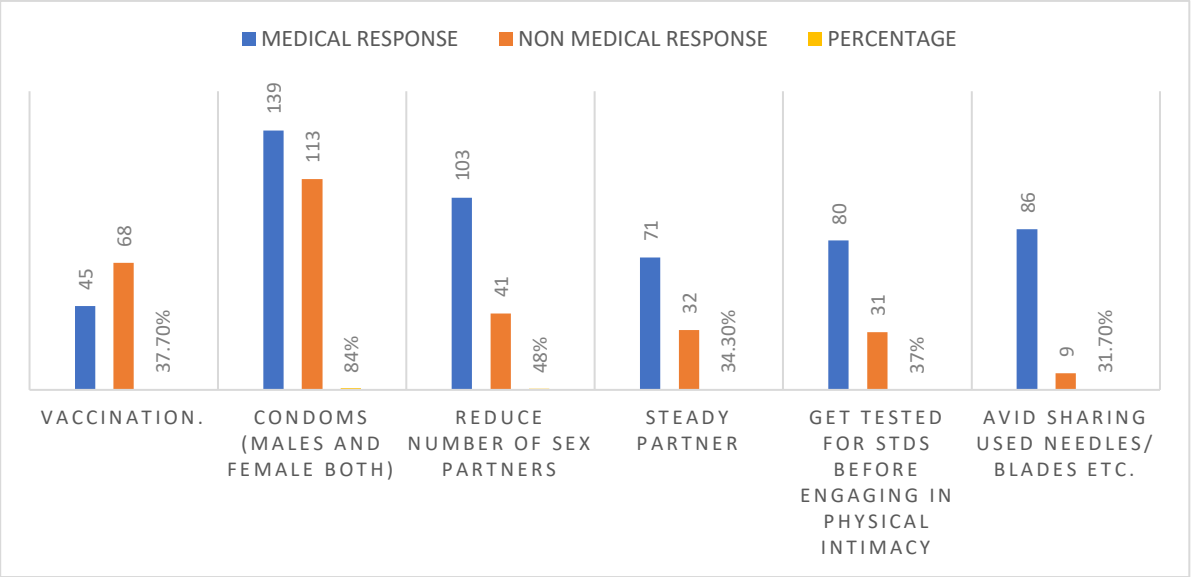
Option	Medical Response	Non-Medical Response	Total Response	Percentage
Sores or bumps on the genitals or in the oral or rectal area.	99	53	152	50.7%
Painful or burning urination.	98	80	178	59.3%
Discharge from the penis.	75	78	153	51%
Unusual or odorous vaginal discharge.	73	65	138	46%
Unusual vaginal bleeding.	52	44	96	32%
Pain during sex.	65	46	111	37%
Sore, swollen lymph nodes, particularly in the groin but sometimes more widespread.	45	28	73	24.3%
Lower abdominal pain	40	26	56	18.7%

Modes of Transmission: 88% of medical students correctly identified key STD transmission modes (blood transfusion, unprotected intercourse, mother-to-child), while only 68% of non-medical students demonstrated similar understanding.

Table 2
How STDs are transmitted?

Option	Medical Response	Non-Medical Response	Total Response	Percentage
Through blood transfusions or using infected needles or surgical equipment	124	40	164	54.7%
Through sharing a used needle at a tattoo shop or for drug ingestion	123	91	214	71.3%
Through the used blades at the barbershop	105	88	193	64.3%
Through unprotected sex with an infected person	122	77	199	66.3%
Through Oral sex	62	72	134	44.7%
Through Kiss	28	48	76	25.3%
Only with homosexual relations (gay/ lesbian)	6	23	29	9.7%
Through hug	6	23	29	9.7%
Through sweat/ tears	13	15	28	9.3%
Mother to child	56	21	77	25.7%

3. Knowledge of Prevention:
Awareness of preventive measures such as condom use and regular testing was significantly higher among medical students (90%) than non-medical students (65%). The observed P-value is 0.021599.

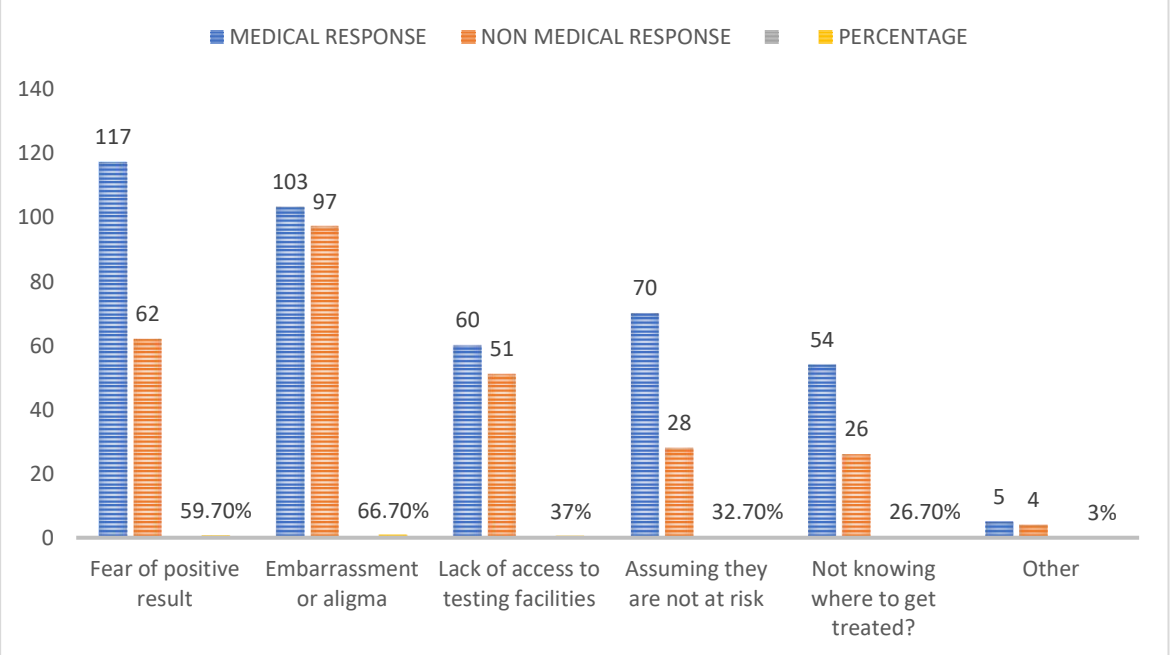


Graph 5. Shows a graphical representation of the How can you prevent STDs.

Attitudes

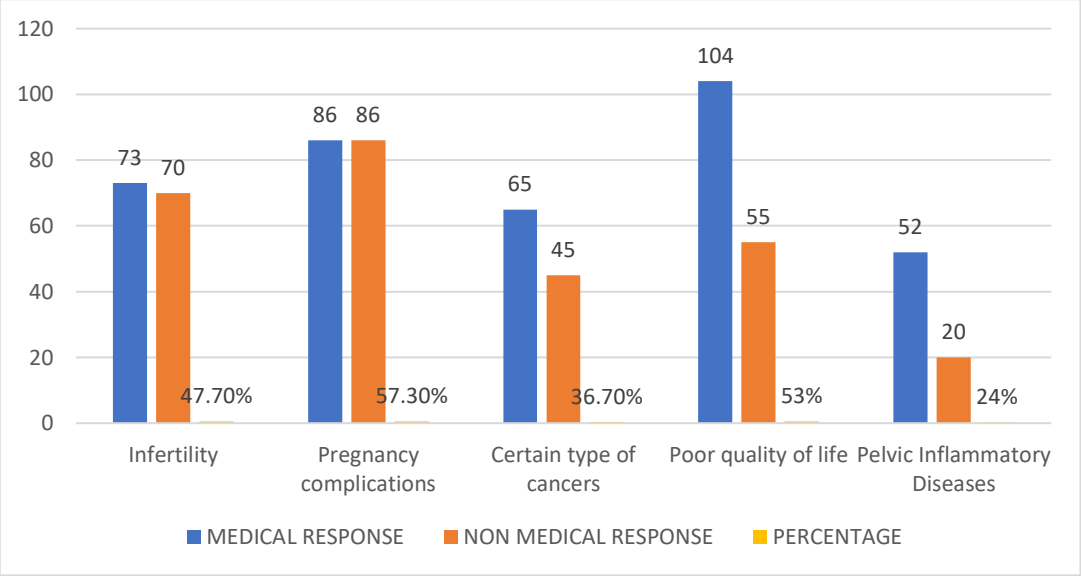
1. Stigma and Embarrassment:

30% of participants felt uncomfortable discussing STDs, with 40% of non-medical students and 20% of medical students affected. 65% of medical students, and 45% of non-medical students, felt comfortable discussing STDs.



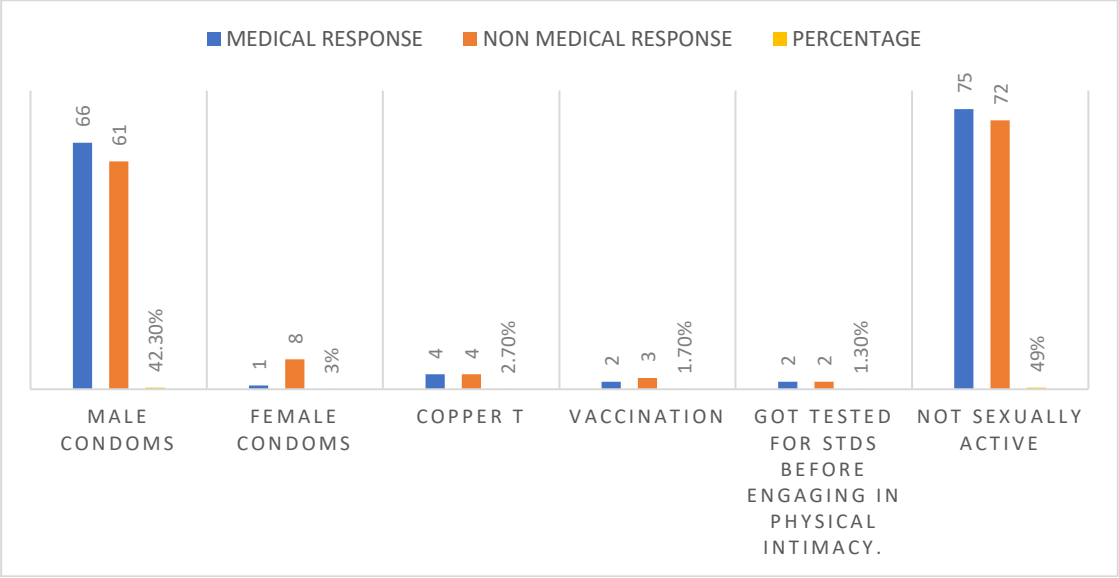
Graph 6. Shows a graphical representation of the primary reasons people avoid getting tested for STDs.

2. Perception of Risk:
   Medical students displayed a stronger awareness of personal risk, with 70% recognizing that STDs could affect anyone irrespective of demographic factors. Among non-medical students, only 50% shared this perception. The observed P-value is 0.042595.



Graph 7. Shows a graphical representation of the complications of STDs.

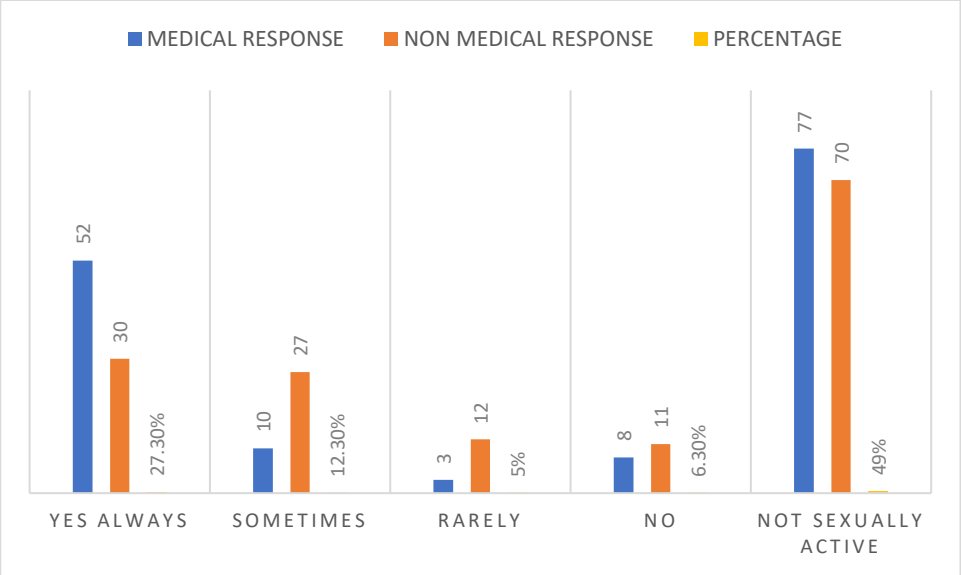
3. Beliefs about Prevention:
   84% of students recognized condoms as an STD preventive method. Medical students showed higher awareness (90%) compared to non-medical students (65%), though data is presented collectively without specific subgroup breakdowns.



Graph 8. Shows a graphical representation of which method of protection you use.

Practices

1. Use of Protection:
   - 75% of medical students and 50% of non-medical students reported consistent condom use. Among users, 60% of medical students and 40% of non-medical students used condoms correctly and consistently.



Graph 9. Shows a graphical representation of the use of any method of protection during intercourse.

2. Testing Frequency:
   75% of medical students had regular STD testing in the past year, compared to 50% of non-medical students. Non-medical students cited barriers like lack of awareness (30%) and fear of stigma (20%).
3. Partner Communication:
   70% of medical students discussed sexual health and STD prevention with partners, compared to 45% of non-medical students. Non-medical students cited discomfort (40%) and lack of knowledge (25%) as barriers.
4. Preventive Behaviors:
   Among medical students, 85% reported adopting at least one preventive behavior, such as vaccination against HPV or regular health check-ups. This was significantly lower among non-medical students, at 55%.

3.2 Discussion:

Use of Protection

The findings reveal significant differences in condom use between medical and non-medical students, with 35% of medical students consistently using protection compared to 20% of non-medical students. Medical students benefit from structured education, which likely promotes better awareness and practices, whereas non-medical students rely on informal sources of information, leading to inconsistent behaviors. The high proportion of participants identifying as "not sexually active" (49%) underscores the diversity in sexual behaviors, highlighting the need for tailored sexual health education for both active and non-active groups.

Testing Frequency

Medical students were significantly more proactive in regular STD testing (75%) compared to non-medical students (50%). Barriers such as stigma and lack of awareness were prominent among non-medical students, with 32% citing embarrassment as a deterrent. These findings stress the need for initiatives to normalize STD testing and ensure accessible, confidential testing services, especially for non-medical students.

Partner Communication
Partner communication about sexual health and prevention was more prevalent among medical students (70%) than non-medical students (45%). Non-medical students reported discomfort (40%) and lack of knowledge (25%) as primary barriers. This emphasizes the importance of including communication skills in sexual health education, fostering open discussions, and promoting shared responsibility in preventive practices (Hensel & Fortenberry, 2013).

Preventive Behaviors
Preventive behaviors such as condom use, vaccination, and regular check-ups were more common among medical students (85%) than non-medical students (55%). While both groups recognized condoms as effective, medical students showed better consistency in their use (60% vs. 40%). Non-medical students' lower engagement in preventive behaviors highlights the need for targeted awareness campaigns to address these gaps.

Public Health Implications
The disparities in knowledge and practices underscore the need for targeted sexual health education for non-medical students. Destigmatizing testing, promoting vaccination programs, and improving access to resources can enhance STD prevention and management. Public health efforts must focus on inclusive and culturally sensitive approaches to reduce barriers and encourage safer practices (Lamont et al., 2012).

Limitations
The KAP survey on STDs among young adults has several limitations. Sampling bias may affect generalizability if participants aren't randomly selected. Self-reporting bias could distort findings, as participants may underreport risky behaviors or exaggerate knowledge. Recall bias may arise when recalling past sexual practices or STD knowledge. The limited scope of questions might leave gaps, and the lack of longitudinal data prevents tracking changes over time. Other limitations include language and cultural barriers, non-response bias, and inadequate representation of marginalized groups. Cross-cultural beliefs and misinformation from social media could also impact responses. Ethical considerations, such as confidentiality, are important for trust (Abudalbouh, 2023).

4 Conclusion

The study reveals that while young adults have some awareness of STDs, especially HIV/AIDS, there are significant gaps in their understanding of other STDs and preventive measures. The reliance on informal sources of information and the persistence of stigma around STD testing suggests that more comprehensive sexual health education is urgently needed to promote safe sexual practices and reduce the incidence of STDs in this population. By addressing these gaps through targeted interventions, it will be possible to foster a more informed and proactive approach to sexual health among young adults.

Acknowledgments
We are grateful to two anonymous reviewers for their valuable comments on the earlier version of this paper.

References

Abudalbouh, L. A. (2023). Electronic nursing documentation interventions to promote or improve patient safety and/or quality care in an acute setting: Rapid review. *International Journal of Health Sciences*, *7*(3), 154–164. https://doi.org/10.53730/ijhs.v7nS1.14313

Brotons, C., Björkelund, C., Bulc, M., Ciurana, R., Godycki-Cwirko, M., Jurgova, E., ... & Vuchak, J. (2005). Prevention and health promotion in clinical practice: the views of general practitioners in Europe. *Preventive medicine*, *40*(5), 595-601. https://doi.org/10.1016/j.ypmed.2004.07.020

Castaneda, A. E., Tuulio-Henriksson, A., Marttunen, M., Suvisaari, J., & Lönnqvist, J. (2008). A review on cognitive impairments in depressive and anxiety disorders with a focus on young adults. *Journal of affective disorders*, *106*(1-2), 1-27. https://doi.org/10.1016/j.jad.2007.06.006

Centers for Disease Control and Prevention. (2019). Sexually transmitted disease surveillance 2018. *Atlanta: US Department of Health and Human Services*, *10*.

Farley, T. A., Cohen, D. A., & Elkins, W. (2003). Asymptomatic sexually transmitted diseases: the case for screening. *Preventive medicine*, *36*(4), 502-509. https://doi.org/10.1016/S0091-7435(02)00058-0

Haffner, D. W. (1998). Facing facts: Sexual health for American adolescents. *Journal of Adolescent Health*, *22*(6), 453-459.

Hensel, D. J., & Fortenberry, J. D. (2013). A multidimensional model of sexual health and sexual and prevention behavior among adolescent women. *Journal of Adolescent Health*, *52*(2), 219-227. https://doi.org/10.1016/j.jadohealth.2012.05.017

Knottnerus, J. A., & Muris, J. W. (2003). Assessment of the accuracy of diagnostic tests: the cross-sectional study. *Journal of clinical epidemiology*, *56*(11), 1118-1128. https://doi.org/10.1016/S0895-4356(03)00206-3

Lamont, J., Bajzak, K., Bouchard, C., Burnett, M., Byers, S., Cohen, T., ... & Senikas, V. (2012). Female sexual health consensus clinical guidelines. *Journal of obstetrics and gynaecology Canada*, *34*(8), 769-775. https://doi.org/10.1016/S1701-2163(16)35341-5

Lavanchy, D. (2005). Worldwide epidemiology of HBV infection, disease burden, and vaccine prevention. *Journal of clinical virology*, *34*, S1-S3. https://doi.org/10.1016/S1386-6532(05)00384-7

Mulye, T. P., Park, M. J., Nelson, C. D., Adams, S. H., Irwin Jr, C. E., & Brindis, C. D. (2009). Trends in adolescent and young adult health in the United States. *Journal of Adolescent Health*, *45*(1), 8-24. https://doi.org/10.1016/j.jadohealth.2009.03.013

Tsevat, D. G., Wiesenfeld, H. C., Parks, C., & Peipert, J. F. (2017). Sexually transmitted diseases and infertility. *American journal of obstetrics and gynecology*, *216*(1), 1-9. https://doi.org/10.1016/j.ajog.2016.08.008

Wang, X., & Cheng, Z. (2020). Cross-sectional studies: strengths, weaknesses, and recommendations. *Chest*, *158*(1), S65-S71. https://doi.org/10.1016/j.chest.2020.03.012

WHO. (2023b). Sexually transmitted infections

WHO. (2003). Towards Adulthood: Exploring the Sexual and Reproductive Health of Adolescents in South East Asia, Geneva.

WHO. (2023a). Sexually transmitted infections.

ANNEXURE A

TITLE: "Knowledge, Attitude, and Practice about Sexually Transmitted Diseases among Young Adults, a Cross-Sectional Observational Study"

1. Name initials: _____
2. Age: _____
3. Gender:

 Male Female Other

4. Income of earning member of the family:

 Less than Rs50,000
 Rs50,000 to 100,000
 Rs100,000 to 200,000
 More than Rs200,000

5. Level of education:

 Secondary school
 Higher secondary school
 Diploma
 Graduate
 Postgraduate
 Illiterate

6. Are you currently working or studying in the health care department? (any medical or Para medical field)

 Yes
 No

7. What is your marital status?

 Single
 Married
 Widowed
 Divorced

8. Are you aware of what sexually transmitted diseases (STDs) are?

 Yes
 No

9. Do you feel embarrassed or shy to talk about STDs?

 Yes
 No

10. From where/whom did you get information on sexual health and sexually transmitted diseases?

 Parents
 School/ college
 Healthcare provider
 Friends
 Television
 Newspapers/Pamphlets and brochures
 Social Media

11. How will you define sexual education received at school was____

 Good and sufficient
 Not Sufficient
 Didn't receive any information at all

12. How STDs are transmitted? (select all that applies)

 Through blood transfusions or using infected needles or surgical equipment
 Through sharing a used needle at a tattoo shop or for drug ingestion
 Through the used blades at the barbershop
 Through unprotected sex with an infected person
 Through Oral sex
 Through Kiss
 Only with homosexual relations (gay/ lesbian)

 Through hug
 Through sweat/ tears
 Mother to child

13. Which of these are sexually transmitted diseases (STDs)? (Select all that applies)

HIV/AIDS	Syphilis	HPV
Hepatitis B	Gonorrhea	Herpes
Hepatitis C	Chlamydia	Polio
TB	Meningitis	Don't know

14. What are the common symptoms of STDs? (select all that applies)
 Sores or bumps on the genitals or in the oral or rectal area.
 Painful or burning urination.
 Discharge from the penis.
 Unusual or odorous vaginal discharge.
 Unusual vaginal bleeding.
 Pain during sex.
 Sore, swollen lymph nodes, particularly in the groin but sometimes more widespread.
 Lower abdominal pain.
15. How can you prevent STDs?
 Vaccination.
 Condoms (males and female both)
 Reduce the Number of Sex Partners. ...
 Steady partner
 Get tested for STDs before engaging in physical intimacy
 Avid sharing used needles/ blades etc
 Use Condoms.
16. What are the complications of STDs?
 Infertility
 Pregnancy complications
 Certain types of cancers
 Poor quality of life
 Pelvic Inflammatory Diseases
17. What do you think are the primary reasons people avoid getting tested for STDs? (select all that applies)
 Fear of positive result
 Embarrassment or aligma
 Lack of access to testing facilities
 Assuming they are not at risk
 Not knowing where to get treated?
 Other_____
18. Do you believe in using Protection during intercourse?
 Yes
 Yes, but only with new or occasional Partner
 No, not with a steady Partner
 No
19. Do you use any method of protection during intercourse?
 Yes always
 Sometimes
 Rarely
 No
 Not sexually active
20. If yes then which method of protection do you use?
 Male condoms
 Female condoms
 Copper T

 Vaccination
 Got tested for STDs before engaging in physical intimacy.
 Not sexually active
21. What kind of partners do you have?
 Steady Partner
 Occasional partner
 None
22. How many sexual partners have you had in the last 2 years?
 One
 Two
 Three
 More than three
 Not sexually active
23. Do you believe that proper education on STDs & STD prevention can improve the quality of life?
 Yes
 Not sure
 No

Thanks for taking part in this survey

ANNEXURE B

INFORMED CONSENT FORM

Parul Institute of Pharmacy and Research
Parul University, Limda, Waghodia District;
391760; Vadodara

Project Title: "Knowledge, Attitude, and Practice about Sexually Transmitted Diseases among Young Adults, a Cross-Sectional Observational Study"

Participant initials: _____ Date: _____
Subject no._____
Name of the Principal Investigator: _____
Patient's address:

I have received the information sheet on the above study and have read and understood the written information. I have been given the chance to discuss the study and ask questions. I consent to take part in the study and I am aware that my participation is voluntary. I understand that I may withdraw at any time without this affecting my future care. I understand that the information collected about me for my participation in this research such as disease information, prescription, etc. may be looked at by the investigators of the study for research purposes only. I give access to these individuals to utilize my records. I understand my personal information will remain confidential. I have been given adequate time to consider my decision and have been given a copy of the patient information sheet and a copy of the informed consent form. I agree with my full consent to take part in this study.

Date: _____
Study investigator name: _____
Study investigator signature: _____
Signature of the participant: _____
Signature and name of Guardian: _____

Biography of Authors

Shah Margiben Shaileshbhai
is a dedicated Pharm D student at Parul Institute of Pharmacy & Research, with a strong interest in clinical research and public health education. Her ongoing project, "Knowledge, Attitude, and Practice about Sexually Transmitted Disease among Young Adults: A Cross-Sectional Observational Study," aims to assess awareness and behavioral trends related to STDs. Passionate about patient care and healthcare advancement, she strives to contribute to the field through research, education, and community awareness initiatives.
Email: margisks1@gmail.com

Khunt Vishwash Hareshbhai
is a Pharm D student at Parul Institute of Pharmacy & Research, with a keen interest in clinical research and public health. His current project, titled "Knowledge, Attitude, and Practice about Sexually Transmitted Disease among Young Adults: A Cross-Sectional Observational Study," focuses on assessing awareness and behavioral patterns related to STDs. Passionate about healthcare and evidence-based practice, he aims to improve public health awareness and patient care through research and education.
Email: vishwashkhunt7@gmail.com

Patel Shiv Kiranbhai
is a Pharm D student at Parul Institute of Pharmacy & Research, keenly interested in clinical research and healthcare awareness. His ongoing project, "Knowledge, Attitude, and Practice about Sexually Transmitted Disease among Young Adults: A Cross-Sectional Observational Study," focuses on evaluating awareness and perceptions regarding STDs. Committed to improving public health, he aims to contribute through research, education, and evidence-based healthcare practices to enhance community well-being.
Email: skpatel101201@gmail.com

Chauhan Meet Chaganji
is a Pharm D student at Parul Institute of Pharmacy & Research, with a strong passion for clinical research and public health. His current project, "Knowledge, Attitude, and Practice about Sexually Transmitted Disease among Young Adults: A Cross-Sectional Observational Study," explores awareness and behavioral aspects related to STDs. Dedicated to advancing healthcare, he strives to contribute through research, education, and initiatives aimed at improving community health and awareness.
Email: meetchauhan255@gmail.com

Mohit Buddhadev
is an Assistant Professor in the Department of Pharmacy Practice at Parul Institute of Pharmacy & Research, Parul University, Vadodara, Gujarat. He serves as the Project Guide and Corresponding Author for the research titled "Knowledge, Attitude, and Practice about Sexually Transmitted Disease among Young Adults: A Cross-Sectional Observational Study." With extensive expertise in clinical research and pharmacy education, he is committed to mentoring students, advancing evidence-based healthcare practices, and contributing to public health awareness through impactful research and academic excellence.
Email: *mohit.buddhadev19150@paruluniversity.ac.in*