

## HIV/AIDS VICTIMS AS AGENTS OF CHANGE

By

—Mrs. L. JAYASREE,

Associate Professor, Department of Law,  
Acharya Nagarjuna University,  
Nagarjunanagar, Guntur Dist., A.P.

In June 2001, the United Nations General Assembly declared HIV/AIDS to be “a global emergency”. Member states agreed to meet new targets for HIV prevention and care. These included a 25% reduction in infection rates globally by 2010 and a 20% reduction in the number of infants infested with HIV by 2005 and by 50% by 2010.

While effective HIV care and prevention strategies, together with strong political commitment, have helped to reverse the tide of HIV in some countries notably Senegal, Thailand and Uganda, the same can't be said of India.

Presently, the official figures suggest that almost 5 million people in India are stricken with HIV/AIDS. Further, the AIDS surveillance data identified Maharashtra, Tamilnadu, Manipur, Andhra Pradesh, Karnataka, Nagaland as States of high prevalence. Within the State, the epidemic is more alarming in the coastal districts of the Andhra Pradesh. Almost 5-10% of national AIDS victims are in Andhra Pradesh.

The high incidence of AIDS in the coastal districts is attributed to the absence of AIDS awareness, promiscuous nature in certain communities *etc.* The other area of interest is the location of AIDS prevalence villages along the National Highways. The truck drivers and sex workers who are identified high risk group are together spreading the AIDS. Since this area is also an active centre for automobile and transport many from this area are not only contracting HIV/AIDS but are also helping in spreading the disease.

The HIV/AIDS epidemic would remain confined to marginalized groups, such as injecting drug users, sex workers, promiscuous men like truck drivers turned out to be the worst sort of wishful thinking. An explosive rate of growth is having its inevitable consequences of population-wide spread. At present, the spread of the HIV/AIDS is shifting towards women, the socially weaker section and who are unable to protect their physical anatomy. Low literacy among women prevented them access to information on AIDS and safe sex practices is making them more vulnerable.

Gender and cultural norms mould the way men and women infected with HIV/AIDS are perceived, receive care and treatment. HIV positive women face greater stigmatisation and rejection than man. HIV positive women are further discriminated against.

Women have very little control over their partner's behaviour and run the risk of being infected without their knowledge. In most of the cases, in this part of the State women are infested through their husbands. Once tested positive, the women is blamed, though she was not responsible directly for the infection. Women are deserted by the family including the husband who is responsible for infection. Women are easily blamed and branded as ‘characterless’, socially ostracised. Thus women are hit psychologically, morally and physically.

The role of women in running the family is special. She prepares the food for the entire family. She takes care of the aged parent or aged in-laws, attends to the unwell members of the family. When the husband

became victim of AIDS heavy burden is placed on women as care takers and bread winners of the family.

The economic contribution of women is too high to ignore in this part of the State. Women contribute to nearly 50% of the food production and labour intensive farming activities. They are also linchpins of subsistence farming. Finally when women dies of HIV, the children are not only orphaned but their life in society becomes miserable. Uncared for, segregated as AIDS suspects *etc.*, the children live a life of unwanted.

The State Government on its part started a campaign through print and electronic media about the dangers of the HIV/AIDS. But in a country where people have no access for information, this campaign naturally failed to achieve desired effect. Beyond this campaign the Government has no other plans to tackle to rapid spread of HIV/AIDS while this action proved to be a deadly mistake, new tools are deployed against epidemic.

It is clear from the situation on the ground today in India, awareness campaigns alone are not enough of preventive. Retroviral drugs are out of reach of most of Indians. One answer could be a vaccine but that is a long way off.

Mobilising and building human capacities to cope with and overcome the effects of HIV/AIDS became an essential part of an effective response. The social organisations has taken lead in organizing the AIDS victims as the agents of change. Both women and children are part of this change Brigade working to change the society of attitude towards the affected and infested.

One population stand out as crucial in determining success and that population is the people living with HIV/AIDS not only because their lives are on the line, but also because they are the greatest untapped

resource with which to fight the HIV/AIDS epidemic.

The HIV/AIDS victims are encouraged in two ways. One to help them in establishing new lives through economic assistance, providing gainful employment that inturn boost their confidence. AIDS victims are made partners in microfinance programmes. They were provided with opportunities to operate business ventures. This helped them to generate enough household income to organize their work schedules around HIV-related case demands.

At the same time, the victims are encouraged to talk about their problem of AIDS, mode of infection and need and mode of preventing the contraction of that deadly disease. The first hand experience of the victims and their appeals are spreading better awareness campaign than the State sponsored multicrore AIDS awareness campaign. Women victims are answering all the doubts of ignorant women.

The child victims are earlier thrown out the schools on the false notion of AIDS being a contagious disease. Children are encouraged to understand the unfortunate condition of their friends. They were convinced through a variety of information sources about AIDS, the way of spreading about the health status of their friends. Their friendly interactions allowed to continue. This effort was a success. Now the children themselves are taking initiative in spreading the factual position of AIDS and AIDS victim. This is a sign of encouragement of the changing situation in the society.

No doubt, the AIDS victims are to be supported through legislation, health care, social support, economic assistance to lead honourable life. But victims with their lives already threatened still can serve the society as the agents of change and this is a wonderful way of controlling the spread of HIV/AIDS.