CHAPTER VII

IMPLICATION OF THE RESEARCH

Based upon the issues highlighted in this study, an attempt is made here to suggest a suitable plan of action towards prevention and control of HIV/AIDS. The major aspects considered under the plan are stated below along with relevant details.

AIDS is not only a medical problem but it is also a social problem. Social responsibility or collective responsibility is the prerequisite for tackling any social problems. With this perspective the model suggested for action is an Integrated Model. This model integrates social and medical aspects with due consideration of cultural values in the society.

7.1. INTEGRATED APPROACH TO PROVIDE CARE AND SUPPORT TO WOMEN INFECTED WITH HIV POSITIVE

Integrated approach is needed to ensure commitment from all sections of population in India to provide care and support to women infected with HIV positive and to establish AIDS free society. The social institution of family, community, hospitals, N.G.Os, women self help groups and government can be integrated to fight against AIDS and to provide care and support and relief and rehabilitation to the infected and affected people.

7.1.1. CREATION OF MECHANISM FOR COLLECTION OF DATA

Collection of relevant primary data with regard to number of women infected by HIV and circumstances leading to HIV is highly important to formulate policy and plan appropriate intervention programmes for the care and support and relief and rehabilitation of women infected with HIV positive. At present, the Government of India is estimating the number of women with HIV positive based on the sentinel surveillance cases from different government hospitals. The present method provides no accurate information about the number of women infected with HIV and causes and consequences of HIV on women. Therefore, alternative mechanism can be evolved to get the reliable data and information about women infected with HIV positive.
The data on women infected with HIV can be collected not only from Government hospitals and its voluntary testing and counseling centres but also from private hospitals and private labs. It will help to know the actual rate of infection among women and to plan policy and programmes for prevention and control of HIV among women, care and support and relief and rehabilitation of infected women.

7.1.2. SENSITIZATION OF WOMEN WITH HIV POSITIVE TO TAKE SELF CARE

Women with HIV positive are either ignorant or lack of knowledge about HIV/AIDS and positive living. The insufficient knowledge on HIV/AIDS made many women to get more depression and lack of hope in life soon after they were told that they are HIV positive. It leads to family disintegration and separation of spouses. Therefore, the infected women must be sensitized with correct information. It will help them to accept the infection and lead a positive life without infecting others. The infected women can also be sensitized on safe sex to protect themselves from reproductive tract infection, safe pregnancy and delivery, breast feeding and non-transmission of infection to their babies.

7.1.3. FAMILY AND COMMUNITY SENSITIZATION

To promote family and community care and support, the basic social institution of family and community can be sensitized in all possible ways with the support of mass media. The integration of infected women into social life is only possible when the family and community accept the reality of HIV/AIDS infected people. The social health of the infected women can be protected by integrating them into family and community life in the society.

7.1.4. REVIEW OF LAW

The law can be reviewed to protect the civil and human rights of women infected with HIV positive. The review of law is highly essential due to following reasons:

a) **Monitoring of atrocities:** The infected women are subjected to various abuse and violence both in the family and in the society. The HIV infection is feminized in India and all infected women are looked down as immoral women. As a consequence
of this notion the infected women are experiencing trauma which affects their total personality. Therefore, law can be reviewed to monitor the atrocities against women infected with HIV positive in order to guarantee a decent and dignified life for them.

b) Inheritance of property right: The infected women finds very difficult to inherit the property of her husband after his death. Therefore, the newly formulated property inheritance right of the women can be strengthened to help the infected women get their share like any other women in India.

c) Job of deceased husband: The infected women are subjected to severe economic hardships after the death of their husbands. To ensure economic security, law can be enacted to support the infected women to get the job from their husbands' employers.

d). Life Insurance: At present the people with HIV positive are denied life insurance scheme by the insurance companies of India. Therefore, law can be formulated to cover the people infected with HIV positive in insurance schemes to enable them to ensure for the benefit of their children and family.

e) Legalisation of marriage between infected man and woman: To get mutual care and support, the marriage between infected people can be encouraged by enacting appropriate legalisation. This will also help to control the spread of infection to the larger society. There is no provision in the existing marriage Act of India for legalising the marriage between the HIV infected people. Therefore, the Marriage Act should be reviewed to give provision for legalising the marriage between people living with HIV positives.

f) Law against HIV/AIDS discrimination: At present severe stigma is associated with **HIV/AIDS**. The stigma resulted in social discrimination in which the infected people are subjected to social boycott and social distancing. The elimination of discrimination is only possible by taking the issue under the influence of law. The person or any organisation which involved in discriminating the infected people in general and women in particular can be punished as per legal provisions. The formulation of law against HIV/AIDS discrimination will ensure a decent and dignified life for the people infected with HIV positive.
Social policy and its related planning and implementation are important to secure the right to life of women infected with HIV positive. Formulation of social policy for the welfare of people infected with HIV positive will help to build movements for social justice, economic equality, and participation of infected people in AIDS prevention and control programmes. Social policy can be formulated to ensure the following activities for the care and support and relief and rehabilitation of women infected with HIV positive:

a) **Involving women infected with HIV positive in formulation of policy:** Women infected with HIV can be given representation in the formulation of policy. By involving the infected women in the formulation of policy, the policy makers will receive first hand information about the urgent needs of the infected women to survive in the society in a dignified manner.

b) Benefits to infected women under poverty alleviation programme: The women infected by HIV positive are suffering due to economic deprivations. Economic support from government is essential to empower them and motivation towards self care and participation in AIDS prevention and control activities. The government can consider the women infected with HIV positive as economically deprived and marginalized segments and they are to be included in poverty alleviation programmes so as to avail the benefits to sustain their livelihood.

c) **Integration of positive women net work with Women Development Corporation:** The State AIDS Control Societies are encouraging emergence of positive women net work in all districts to provide platform for the infected women to get peer support to share their feelings and problems, information and counseling, and to get economic and medical support in coordination with State AIDS Control Societies and various national and international funding agencies. Women Development Corporation is functioning in Tamil Nadu for the empowerment of women through the concept of women self help groups. The positive women net work can be integrated with Women Development Corporation to get the status of self help groups and avail financial assistance with subsidy from banks to generate assets.
and employments. Support for generation of assets and employment will empower the infected women to control their reproductive health as well as to improve their socio-economic status in the society.

d) Integration of positive women with Women Self Help Groups: Women self help groups in Tamil Nadu are emerging as movement for the empowerment of women. They must be sensitized to participate in AIDS intervention activities as well as in providing care and support to women infected with HIV positive in their respective areas. The integration of positive women with women self help groups will promote de-stigmatization of diseases, empowerment of infected women and social support system for the women infected with HIV positive.

e) Integration of Panchayat Raj Institution with State AIDS Control Societies in AIDS prevention and control and care & support programmes for infected people: Panchayat Raj Institution play an important role in various aspects of Indian social life. It has contributed a lot for the socio-economic transformation in India. Evolving people’s participation from identification of problems to evaluation of development programmes implemented for them are the principal areas of Panchayat Raj Institutions. Panchayat Raj Institution can easily mobilize public commitment towards AIDS intervention programmes. Therefore, they can be integrated with State AIDS Control Societies to mobilize public commitment towards AIDS prevention and control, care and support and relief and rehabilitation. It will help for creation of awareness, de-stigmatization of disease and promotion of community care and support for the people infected with HIV positive in general and women in particular.

f) Creation of free legal cell: Free legal cell can be created in all State AIDS Control Societies in order to provide legal support to the infected women to fight against atrocities, to avail social security measures and inherit property from their parents and in-laws. Creation of free legal cell also help to protect the women infected with HIV positive from social discrimination and boycott.

g) Creation of HIV/AIDS information Cell in all hospitals: HIV/AIDS information cell can be created in all hospitals of rural and urban areas. The HIV/AIDS information cell can have all updated information with regard to medicine, availability of treatment, counseling, availability of provision and benefits and the
mechanism of availing these benefits etc. It will help the infected women to sensitize themselves to lead a life with HIV positive without fear and confusion.

**h) Creation of short stay home for women with HIV positive:** Short stay home can be established in all district head quarters in co-ordination with N.G.Os to provide care and support to infected women who are abandoned by their family members. These homes can be provided financial and technical assistance to built infrastructure for the capacity building of inmates. Relief and rehabilitation of infected women can be ensured through these short stay homes.

**i) Integration of media in mobilizing public commitment to create awareness on HIV/AIDS:** Public commitment is essential both for creating awareness on HIV/AIDS without myth and promoting care and support and relief and rehabilitation of people infected with HIV positive. The media can play a vital role as change agents in the society. The regular dissemination of message of HIV/AIDS and the problems experienced by the infected people can bring attitudinal change among the public. The positive attitudinal change among the public will help to build social support system and community care and support for the women infected with HIV positive.

**j) Capacity building:** Capacity building means to equip the people to do things by their own based on ‘what they know’, ‘what they have’, ‘what they are capable of, and ‘what they can do’. The women infected with HIV positive can be helped to identify their innate capacities and accordingly the capacity building programmes are formulated to improve their knowledge, competencies, and vocational, managerial and marketing skills.

**7.1.6. HOLISTIC AND NON-JUDGEMENTAL MEDICAL CARE**

Comprehensive medical care and support is the immediate need of women infected with HIV positive. The widespread discrimination in the healthcare system created guilt and fear in the minds of infected women to take treatment in the hospitals. In general, treatment seeking behaviour is less among the Indian women. The stigma and discrimination associated with AIDS prevents women to take early treatment for their ailment in the hospital. When compared to other diseases, the cost for the treatment of HIV/AIDS related illness is high and most of the Indian women are not in a position to spend large amounts for availing treatment. The infected
women can be given care and support without considering the root cause of infection. There is no need of separate ward for HIV/AIDS patients. They can be given equal treatment like any other patient. The infected women can have easy access to Anti Retro Viral (ARV) drugs. Therefore, the Government can plan to distribute ARV to the AIDS patients in all Government hospitals including Primary Health Centre. All Primary Health Centre can be equipped with all necessary medical equipments and it can be upgraded to provide treatment for HIV related illness. The upgrading of Primary Health Centre will help to promote treatment seeking behaviour among infected women in India.

7.1.7. OPERATION OF ACTION PLAN

The plan can be operated with the strategy of integration of the social institution of family, community, hospitals, organisations such as N.G.Os, women self help groups and the Government. The role of N.G.Os is very important to sensitize family, community and women self help group to extend their support to the infected women to lead a normal life in the society. Government is the powerful institution to mobilize political commitment towards AIDS intervention by formulating appropriate policy, programmes and reviewing the laws for the welfare of people infected with HIV positive in India.

7.2. INSTITUTIONAL APPROACH FOR CREATING AIDS FREE SOCIETY

The network of invisible rules and institutional arrangements which guide the behaviour of individual are the base for Indian social structure. By interacting with each other, people are governed by cultural patterns of norms, values, beliefs and symbols. It defines the behaviour of individual towards the fulfillment of social goals. All social institutions are interrelated and interdependent to accomplish basic social tasks. Institutions provide established answers to recurring problems of living. Each institution is a sort of societal master plan - a kind of “grand design” - whereby essential activities are organised, directed, and executed. Because of institutions, every one in the society feels that there is some measure of regularity, efficiency and certainty in daily activities. In the context of HIV/AIDS, every institution can contribute by taking up certain specific social function to realise the goal of AIDS free society.
The institutions of family, marriage, community, religion, social organisations, government, academic institution, hospitals, industries, media, N.G.Os and women self help groups can be motivated and mobilized towards the activities of AIDS prevention and control, care and support and relief and rehabilitation of people infected by HIV/AIDS.

7.2.1. Family

Family is the primary agent of socialization of individual. If there is any defect in socialization it will lead to the unapproved social behaviour of individual resulting in pre or extra marital sex and using drugs for enjoyment. Therefore, the family can be made aware of its important role in socializing the individual according to the expectation of the society with regard to moral values and ethics. Throughout the world, the family has been assigned the responsibility for shielding, protecting, sustaining and otherwise maintaining children, the infirm and other dependent members of the community. Healthy family relationships afford companionship, love, security, a sense of worth and a general feeling of well being.

Each and every family can be integrated in the AIDS intervention programmes to sensitize the family members to take active part in prevention and control of HIV/AIDS in the family and providing care and support to the infected and affected members of the family. By sensitizing the family with regard to care and support of people infected with HIV positive and destigmatization of disease, it is possible to mobilize the family to take the role of advocacy to provide the community care and support to the infected people.

To prevent and control the spread of HIV in the society, the family can be motivated to socialize the individual on the line of values of society to avoid sex outside marriage and to integrate the infected people within the family. Family harmony is important to prevent extra marital sex which leads to acquiring HIV infection. Gender equality with regard to reproductive health and women empowerment can be promoted in the family to prevent HIV infection. The family can be motivated to create friendly atmosphere to the adolescents to share their doubts on sex and sexuality with their parents. Sharing and getting information related to sex and sexuality from the parents will prevent the adolescents from sexually transmitted
infections including HIV/AIDS. The family can also be made aware of taking early
treatment for their sexually transmitted diseases to avoid the possibility of acquiring
HIV infection.

To promote care and support in the family, the HIV infected people can be
advocated to stay within the family instead of absconding from the family. All family
members can be advocated to take care of infected people like any other sick persons
and to provide financial and moral support for treatment. Destigmatization of disease
can start from the family by considering HIV/AIDS like any other disease. The
infected people, especially the women can get their property share of husbands and
parents to lead a decent life and they can be encouraged self employment by the
parents to sustain in the society.

The N.G.Os and mass media can take a leading role to sensitize the family
about HIV/AIDS and integration of infected people within the family.

7.2.2, Marriage

The rate of HIV infection is high among married women who are in
monogamous relationship. In many cases the men who experienced pre marital sex
with multisexual partners and got infected by HIV are not aware of their infection
before marriage. They are married with out being aware of their HIV status. The
women are also socialized to be a passive partner in sexual life with their husband.
Woman’s assertive role in sexual life is condemned by the society in general and
husband in particular. This rigid notion on sex and sexuality in marital life is the
major cause for the rapid spread of HIV among married women in India. Therefore,
changes can be made in the Institution of marriage with regard to sex and sexuality of
women in order to empower women over their reproductive health.

Voluntary HIV testing can be advocated among youth before marriage to
prevent HIV infection through marriage. Pre-marriage counseling on sex related
issues, mutual trust and marital harmony and creation of awareness on sex and
reproductive health can be imparted to prevent HIV infection in marital life.
Awareness on safe sex, early treatment for STD and parent to child transmission can
be imparted to infected couples to control HIV infection in society. Mutual care
giving can be promoted among the infected couples in order to prevent separation of
spouses due to HIV/AIDS. Marriage between infected male and female can be
encouraged as a part of providing relief and rehabilitation for the people infected with HIV positive.

7.2.3. Community

Community sensitization is the urgent need today to control the spread of HIV/AIDS and to provide care and support and relief and rehabilitation of people infected with HIV positive. Since HIV/AIDS is considered as social problem, it is the responsibility of the community to provide care, support, relief and rehabilitation to the infected and affected people. If the community is sensitized, people can be easily mobilized to achieve AIDS free society and to promote care and support and relief and rehabilitation to the people infected with HIV positive.

The HIV/AIDS sensitized community can prevent and control the spread of HIV infection through social mobilization with community participation to promote gender equality in reproductive health and empowerment of women to control over their reproductive health. The community has to take a key role to ensure availability and accessibility of condom for needy people and access to health care to all to control the spread of infection. The community can exercise control over the sale and use of injecting drugs to control infection through contaminated needles. Destigmatization of HIV infection is essential to promote community care and support for the infected people. Community can encourage the marriage between infected male and female in order to promote mutual care and support as well as to mobilize community care and support to people infected with HIV positive. For relief and rehabilitation of infected people, the community can involve in generation of funds to infected people in order to help them to establish self employment.

Sensitization of community on HIV/AIDS can be done with the support of N.G.Os, State AIDS Control Societies, Academic Institutions, local panchayats, mass media and women self help groups.

7.2.4. Religion

Norms, beliefs and rituals provide the cultural fabric of religion. It act as an informal means of social control agent to regulate and shape the behaviour of individual in the society. Each religion has its own structural organisation to mobilize
people to impart religious values in their life. These religious organisations or missionaries can be mobilized to take part in creating AIDS free society as well as to provide care and support and relief and rehabilitation to the people infected with HIV positive. The religious missionaries can bring changes in the attitude and behaviour of people by disseminating message on morality, ethics and values of behaviour. Attitudinal change in the minds of people will help to control the spread of HIV infection by promoting gender equality and empowerment of women. Religious institutions can influence people to provide care and support to the infected people. These institutions can also establish care home and funding support to N.G.Os for the welfare of people infected with HIV positive. The religious institution can also mobilize to start employment programmes for the deprived people in general and infected people in particular. The religious missionaries can be sensitized on HIV/AIDS with the support of government and religious leaders.

7.2.5. Social Organisations

Social organisations, especially the Panchayat Raj Institutions are working for the welfare of the people with the principal with people’s participation in all its activities. People participation is the core essence for the stability of Panchayat Raj Institutions in India. Panchayat Raj Institutions can be integrated with AIDS intervention mission along with government organisations to prevent and control the spread of infection in India. The local panchayat can be mobilized to work with N.G.Os to promote women empowerment, impart value education to public and to create awareness on safe sex practices and condom use to prevent and control HIV infection in society. It can also destigmatize the disease by involving in AIDS intervention programmes, creating information cell on HIV/AIDS and its related issues and extending funding support to infected people to take treatment. The panchayat raj institution can provide relief and rehabilitation by providing financial support to infected people for the generation of self employment for their dignified survival in the society.

The members of the Panchayat Raj Institution can be given training and motivation by the State AIDS Control Society to take part in AIDS intervention activities.
7.2.6. **Government**

Government has the power to give direction to human affairs and to mobilize people’s actions towards collective goals towards realizing welfare state ideals. It also has power to bring about changes in people’s attitude and behaviour. Therefore, government has to play a vital role in prevention and control of HIV/AIDS, care and support and relief and rehabilitation of people infected with HIV positive by formulating policy, reviewing law and planning and implementing programmes.

To prevent and control HIV/AIDS in India, the Government can make policy for creating AIDS free society with the support of all social institutions. It has to involve in planning, implementing, monitoring and evaluating AIDS intervention programmes in order to find the success and to frame alternative measures to reach the goal of AIDS free society. The government can frame policy to include infected people in all intervention programmes in order to enhance the effectiveness of the programmes. It has to organise regular campaigns against HIV/AIDS in all districts to create awareness on HIV/AIDS in the society. To control the spread of infection poverty alleviation programmes can be strengthened to generate employment opportunities for women to prevent their involvement in sex work. It has to create treatment facilities for STD in all public health centres to control the possibility of infection through STD.

To promote care and support, the government can influence the health care sectors to give treatment to HIV infected people along with other patients. It will help to destigmatize the disease in the society. The Government can ensure the availability of ARV drug in all districts hospitals to promote the access of ARV drug to all infected people. Legislation can be enacted to include HIV infected people under Life Insurance Scheme. It will help not only the infected people but also their family members. To provide relief and rehabilitation to the infected people the Government can establish care home in all district headquarters. It has to rehabilitate the sex workers by creating alternative employment opportunities.
7.2.7. Academic Institutions

Academic institutions are considered as an important agent of socialization of individual in the society. The academic institutions - schools and colleges - not only provide formal, and systematic training to the students but it also teach more than the skills and information specified in the curriculum. Students learn values, morality, responsibility, conscientiousness, reliability, thoroughness, self-control, efficiency and emotional stability from their schools and colleges. The healthy future of the nation is vested with younger generation, especially with the students. Therefore, the students can be made aware of HIV/AIDS and their role in creating AIDS free society.

Value based education, reproductive health education, education on gender sensitization and HIV/AIDS is important to prevent and control HIV/AIDS. This type of education can be imparted to the students through schools and college curriculum. All academic institution can have tutorial system to have close interaction with students. The tutorial system will help to understand the problems of the students in all aspects. The academic institutions can be insisted to establish counseling cell to counsel the students, especially the girl students on reproductive health and HIV/AIDS. The academic institutions can be motivated to organise meetings, workshops and seminars to create awareness on HIV/AIDS and reproductive health among students. It can also be encouraged to develop curriculum on extension activities in coordination with N.G.Os to generate awareness on HIV/AIDS and family and community care for people infected with HIV positive which leads to prevention and control of HIV infection in India. As a part of providing care and support, the academic institution can promote the involvement of parents-teacher association in its AIDS intervention activities. It will help to destigmatize the disease among the parents. Enrolment of infected children in schools and colleges is important to ensure care and support for people infected with HIV positive. It can be made possible by sensitizing parents and students through parent-teacher associations. The academic institutions can organise campaign for the promotion of relief and rehabilitation to people infected with HIV positive through their extension activities with the support of N.G.Os.
Teachers may be trained to take up AIDS intervention activities with the support of N.G.Os and State AIDS Control Society.

7.2.8, Hospitals

Society’s well-being depends upon a healthy labor force for carrying out vital tasks. Consequently, disease and illness must be socially controlled and the people under sick can ensure holistic and non-judgemental medical care and support for proper societal functioning. Physicians, nurses and other practitioners have vital role in ensuring equal and client friendly treatment to all patients. It is the duty of the hospitals to destigmatize the diseases and to provide healthy service to care seekers to promote treatment seeking behaviour among the infected people.

The hospitals can play a vital role in prevention and control of HIV/AIDS by promoting client friendly treatment, syndromic management for STD/RTI (Reproductive Tract Infection) and counseling to sterilized couples about safe sex to prevent HIV and other sexually transmitted infection. Counseling must be made compulsory in the hospital for both the patients and parents about HIV/AIDS before and after HIV test. Destigmatization of HIV/AIDS, non-judgemental and equal treatment to HIV/AIDS patients and creating the access to ARV drugs to HIV infected people will ensure care and support in the hospitals. The health care institutions can also involve in providing relief and rehabilitation to the infected people by way of supporting infected inmates of short stay home run by the government and N.G.Os.

The health care providers can be sensitized on HIV/AIDS to treat HIV/AIDS patients like any other patients without any discrimination.

7.2.9, Industries

Migrant labourers are more prone to HIV infection due to their multisexual contacts with sex workers. These labourers are ignorant about HIV/AIDS and its prevention and implications. Therefore, they can be given correct information about HIV/AIDS in their workplace by the management of industries as part of Workers Education. The involvement of industries in AIDS intervention activities can help to prevent and control the spread of HIV infection among the labour community.
Involvements of industries in HIV/AIDS intervention programmes are very essential to control and prevent HIV/AIDS among migrant labourers. The management of industries can be sensitized to frame work place policy to take work place intervention programmes and influence the trade unions to take part in HIV/AIDS intervention programmes to control and prevent the infection among labourers. The industries can also involve in providing care and support to the HIV infected workers by way of retaining them in work and giving equal opportunities in recruitment for infected people. The human resource management of industries can take up advocacy role to eliminate stigma and discrimination against HIV infected people in workplace. The Employees State Insurance (ESI) hospitals can be linked with AIDS intervention mission to provide treatment to the HIV infected labourers. The industries can also involve in relief and rehabilitation of HIV infected people by opening employment opportunities for the infected people and by providing medical leave and financial assistance to infected labourers to take treatment for their HIV related illness.

The State AIDS Control Societies and N.G.Os can take responsibilities to mobilize and sensitize industries towards creating AIDS free society.

7.2.10, Mass Media

Media is an important agent to disseminate the message to larger society. In all societies people are very keen to know day to day events of the world through various media. Television plays a vital role in attracting all categories of people and it disseminates the information at the doorstep of the people. The print and visual media can be sensitized and mobilized to give regular coverage on HIV/AIDS news and to mobilize the public opinion towards AIDS intervention mission to control and prevent the spread of HIV infection. It can also develop networking with N.G.Os to collect case studies of infected people for their projection. The media can have social responsibility to protect the people from the dreaded diseases. Therefore, it can give correct information about HIV/AIDS to public. It will help to destigmatize the disease in the society. As a part of providing care and support and relief and rehabilitation to the infected people, the media have to cover the violation of human
rights experienced by the infected people in the society and disseminating message on family and community care. The projection of HIV/AIDS related issues in media will help to mobilize community support to the people infected with HIV positive.

7.2.11. Non Government Organisations (N.G.Os)

N.G.Os are really interested to provide care to the uncared sections and the people at the bottom of the social stratum. Their work is people centered and hence they reach the unreached rural poor and live and work with them. They strive to promote the lives of the oppressed, deprived, marginalized, impoverished, downtrodden, hopelost, helpless, powerless, deserted and poverty stricken in the society. Therefore, the N.G.Os involvement is essential to provide care and support and relief and rehabilitation of women infected by HIV/AIDS.

There are two kinds of N.G.Os working in AIDS intervention activities. One is funding agencies which provide funds to the N.G.Os working in the field and the other is field agencies which implement the programmes for the benefit of larger society.

The funding agencies are expected to involve in:

1. Conducting research on women infected with HIV/AIDS among different cross sections.

2. Extending funds to the N.G.Os which focuses on care and support and relief and rehabilitation of women infected with HIV positive.

3. Establishment of Relief and Rehabilitation Cells in all States with partnership of Government. It can have common phone number in order to facilitate the infected and affected people to get immediate relief and rehabilitation for survival.

4. Co-ordination and networking of N.G.Os to know the success and difficulties faced in the implementation of care and support and relief and rehabilitation programmes to the infected women. It will help to find out alternative strategy for the sustainability of care and support services in the society for the people infected with HIV positive.
The N.G.Os working in the field can take up the following action for care and support and relief and rehabilitation of women infected with HIV positive:

1. Family and community sensitization to integrate the HIV infected women into the family and community.

2. Awareness building - (health and gender awareness) creation of awareness on HIV, STD, RTI, safe sex.

3. Promotion of treatment seeking behaviour among women infected with HIV positive and creation of awareness on the access to treatment.

4. Creation of positive women network to motivate the infected women to involve in positive prevention programmes.

5. Capacity building-promotion of vocational training to the infected women to generate self employment to sustain in the society.

6. Building hopes-promotion of self care and self support among the women infected with HIV to develop confidence in their life.

7. Networking with Human Right Organisations to represent the problems and humiliation experienced by the infected people.

N.G.Os can bring attitudinal change in the minds and behaviour of people related to their sexual behaviour in order to prevent and control HIV/AIDS in the society through its effective involvement in AIDS intervention activities in coordination with Government and other funding agencies. N.G.Os are capable of mobilizing grassroot leaders and SHG members towards advocating the family and community care and support for the people infected with HIV positive. It can also conduct research on various issues of HIV/AIDS in order to help policy makers and programmes planners to prevent and control HIV/AIDS in India. The N.G.Os can influence HIV infected people to bring their co-ordination in disseminating information on HIV/AIDS to the public in general and target groups in particular. The taboo and rigidity on the usage of condom among Indian women can be removed with the support of N.G.Os working with the people.
7.2.12. Women self help groups

Women self help groups are emerging as a movement in Tamil Nadu in women’s empowerment. The women self help groups are more powerful in mobilizing the people towards common cause. The Integration of the women self help group in AIDS intervention activities will help to sensitize the larger women folk within short period.

The women self help groups can be motivated to involve in mobilizing the women to take part in AIDS intervention activities. It will help in awareness creation on safe sex as well as to sensitize the women on reproductive health and their rights. The women's awareness and their empowerment on reproductive health will prevent and control HIV infection among women of different categories. The stigma and discrimination can be removed from the society if the infected women are accepted and assisted by the members of women self help groups. The women self help group can be motivated to provide care and support and relief and rehabilitation by accommodating sex workers and infected women in their groups and assist them through micro credit facilities in the promotion of income generation activities. Family and community care and support can be realized with the active participation of women self help groups in AIDS intervention programmes.

The N.G.Os and State AIDS Control Societies can take up the responsibility of providing training and other technical support to women self help groups in AIDS intervention activities.

Criteria to implement Action Plan

Joint effort is an urgent need to prevent and control HIV/AIDS in the society. The institution of Government, N.G.Os, Academic Institution and Mass Media can take a lead role to sensitize other social institutions of family, marriage, community, religion, social organisations, hospitals, industries and self help groups. Sensitization of social institutions definitely helps to sensitize the public and mobilize public commitment towards the mission of creating AIDS free society.
SCOPE FOR FURTHER RESEARCH

The present study has been conducted with specific objectives in Chennai City, Tamil Nadu. As there are certain issues remaining unexplored in this research, the researcher presents the following suggestion for further research.

1. A similar study can be conducted throughout Tamil Nadu to obtain comprehensive view on impact of HIV/AIDS on women’s social and economic life and the nature of discrimination experienced by them.

2. A study can also be conducted to find out whether the practices of reproductive health choice have a link with unsafe sexual practices in marital life.

3. A study can be conducted to find out the psychological problems of people living with HIV positive.
INTEGRATED APPROACH TO PROVIDE CARE AND SUPPORT TO WOMEN INFECTED WITH HIV POSITIVE

Society

Evolving Mechanism for Collecting Data

Holistic & Non Judgmental Medical Care

Sensitizing Women Living with HIV

Care & Support for Women Living with HIV

Sensitizing Family Members on HIV

Social Policy to Empower WLHA

Review of Law to Protect Rights of WLHA

Sensitizing Community on HIV
### INSTITUTIONAL APPROACH FOR AIDS FREE SOCIETY – ACTION PLAN

<table>
<thead>
<tr>
<th>INSTITUTIONS</th>
<th>PREVENTION AND CONTROL</th>
<th>ACTIVITIES</th>
<th>CARE AND SUPPORT</th>
<th>RELIEF &amp; REHABILITATION</th>
</tr>
</thead>
<tbody>
<tr>
<td>FAMILY</td>
<td>Socialization of individual based on morality, values and ethic</td>
<td>Support to treatment for infected</td>
<td>Financial support to the infected to establish self employment</td>
<td>A I D S</td>
</tr>
<tr>
<td></td>
<td>Perception, motivation and learning about sex</td>
<td>Caring of sick and orphaned children</td>
<td>Marriage between infected can be encouraged</td>
<td>F R E E S</td>
</tr>
<tr>
<td></td>
<td>Gender equality and women empowerment</td>
<td>Moral &amp; psychological support</td>
<td>Marriage between infected male and female</td>
<td>S O C I E T Y</td>
</tr>
<tr>
<td></td>
<td>Integration of HIV infected people</td>
<td>Property sharing</td>
<td>Generation of funds to self employment for sex workers and to the networks of positive people.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Sharing of information on safe sex and early treatment for STD</td>
<td>Living together</td>
<td>Providing employment to the infected people</td>
<td></td>
</tr>
<tr>
<td>MARRIAGE</td>
<td>Pre-marriage counseling</td>
<td>Facilitating treatment to the infected people and children</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Motivation to voluntary HIV test</td>
<td>Mutual care giving</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Awareness on sex and reproductive health</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Mutual trust and marital harmony</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Knowledge on the prevention of parent to child transmission</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>COMMUNITY</td>
<td>Community participation to create knowledgeable community</td>
<td>De-stigmatization of disease</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Gender equality and empowerment of women</td>
<td>Social interaction with the infected</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Creation of awareness on safe sex</td>
<td>Acceptance of marriage between infected</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Social mobilization to generate social responsibility</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>RELIGION</td>
<td>Involvement of religious missionaries in AIDS prevention programmes and advocacy</td>
<td>Establishing care homes with treatment</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Networking with NGOs</td>
<td>Funding support to NGOs</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Imparting morality, ethics and values of individual behavior</td>
<td>Advocating the public with regard to care and support of the infected people</td>
<td></td>
<td></td>
</tr>
<tr>
<td>INSTITUTIONS</td>
<td>PREVENTION AND CONTROL</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>--------------</td>
<td>------------------------</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
| SOCIAL ORGANISATION | - Involving caste panchayat and local panchayat in intervention  
|                | - Empowerment of women  
|                | - Value education  
| GOVERNMENT | - Legislation, funding support to NGOs, policy, planning, programme, monitoring & evaluation  
|             | - Formulation of policy on non-discrimination in work place  
|             | - Regular campaign against HIV / AIDS in all districts  
|             | - Generation of local self employment  
|             | - Treatment facilities in all PHCs  
| ACADEMIC INSTITUTIONS | - Value based education  
|             | - Reproductive health education  
|             | - School and College intervention on HIV/AIDS  
|             | - Creation of guidance counseling cell  
|             | - Sensitization of Parents-Teachers Association  
| HOSPITALS | - Syndromic management  
|             | - Counseling before and after HIV test to patients and family members  
|             | - Client friendly treatment and  
|             | - Counseling to the sterilized couples about safe sex  
|             | - Integration of AIDS intervention with family planning  
|             | - Sensitization of health care personnel  
|             | - Breast feeding counseling  
|             | - Counseling to discordant couples on safe sex  

277
<table>
<thead>
<tr>
<th>ACTIVITIES</th>
<th>RELIEF &amp; REHABILITATION</th>
</tr>
</thead>
<tbody>
<tr>
<td>CARE AND SUPPORT</td>
<td></td>
</tr>
<tr>
<td>✤ De-stigmatization of disease</td>
<td>✤ Support to infected and sex workers for self employment</td>
</tr>
<tr>
<td>✤ Non-discriminatory approach towards infected people</td>
<td>✤ Care homes in all district headquarters</td>
</tr>
<tr>
<td>✤ Funding support to infected to take treatment</td>
<td>✤ Nutritious food to infected people</td>
</tr>
<tr>
<td>✤ Orientation to health staff</td>
<td>✤ Contact phone no. for needy for help (Help line)</td>
</tr>
<tr>
<td>✤ Distribution of ARV through all district hospitals</td>
<td>✤ Design vocational training programmes</td>
</tr>
<tr>
<td>✤ Insurance to HIV positive</td>
<td>✤ Counseling cell</td>
</tr>
<tr>
<td>✤ Infected people can be included in poverty alleviation programmes</td>
<td>✤ Networking with NGOs for better treatment</td>
</tr>
</tbody>
</table>
### Institutional Approach for AIDS Free Society – Action Plan

<table>
<thead>
<tr>
<th>Institutions</th>
<th>Prevention and Control</th>
<th>Activities</th>
<th>Care and Support</th>
<th>Relief &amp; Rehabilitation</th>
</tr>
</thead>
</table>
| **Industries** | Workplace intervention  
Creation of awareness through workers education programme  
Counseling cell  
Involvement of trade unions in intervention | Employment to infected people  
Equal treatment  
Advocacy  
Linking ESI hospitals with AIDS intervention | Information for de-stigmatization of disease  
Projection of the violation of human rights | Employment to infected people  
Medical leave and financial assistance / loan for treatment |
| **Mass Media** | Compulsory coverage on HIV / AIDS  
Mobilize people participation  
Documentary on HIV/AIDS to educate the mass  
Dissemination of information and education | **NGOs** | Intervention for prevention and control  
Mobilization of grass root leaders  
Advocacy to family, community  
Coordination with NGOs & Govt.  
Involving infected people in intervention | ARV distribution  
Counseling  
Liaison with hospitals  
Advocacy to family members | Dissemination of message on family care  
Projecting the issues of abandoned |
| **Women Self Help Groups (SHG)** | Involvement in intervention programmes  
Mobilization of people  
Creation of awareness on safe sex | Integration of infected in SHGs | Care homes  
Capacity building through income generation activities  
Integration of infected in the society  
Support to creation of income generation activities | |