ANNEXURES

A. International Guidelines on HIV/AIDS and Human Rights
B. Rights of the child in the context of HIV/AIDS
C. Clinical case record proforma
D. Schedule for counseling and recording the psychological issues
E. Schedule of questionnaire for health staff and medical students
F. Schedule of questionnaire for college teachers and students
G. Press cuttings
ANNEXURE A

International Guidelines on HIV/AIDS and Human Rights

1. States should establish an effective national framework for their response to HIV/AIDS which ensures a coordinated, participatory, transparent and accountable approach, integrating HIV/AIDS policy and programme responsibilities across all branches of Government.

2. States should ensure, through political and financial support, that community consultation occurs in all phases of HIV/AIDS policy design, programme implementation and evaluation and that community organizations are enabled to carry out their activities, including in the field of ethics, law and human rights, effectively.

3. States should review and reform public health laws to ensure that they adequately address public health issues raised by HIV/AIDS, that their provisions applicable to casually transmitted diseases are not inappropriately applied to HIV/AIDS and that they are consistent with international human rights obligations.

4. States should review and reform criminal laws and correctional systems to ensure that they are consistent with international human rights obligations and are not misused in the context of HIV/AIDS or targeted against vulnerable groups.
5. States should enact or strengthen anti-discrimination and other protective laws that protect vulnerable groups, PLWHAs and people with disabilities from discrimination in both the public and private sectors, ensure privacy and confidentiality and ethics in research involving human subjects, emphasize education and conciliation, and provide for speedy and effective administrative and civil remedies.

6. States should provide for the regulation of HIV-related goods, services and information, so as to ensure qualitative prevention measures and services, adequate HIV prevention and care information and safe and effective medication at an affordable price.

7. States should implement and support legal support services that will educate people affected by HIV/AIDS about their rights, provide free legal services to enforce those rights, develop expertise on HIV-related legal issues and utilize means of protection in addition to the courts.

8. States should promote a supportive and enabling environment for women, children and other vulnerable groups by addressing underlying prejudices and inequalities through community dialogue, specially designed social and health services and support to community groups.
Annexure B

Rights of the child in the context of HIV/AIDS

The United Nations Convention on Rights of the Child in the context of HIV/AIDS has spelled out principles for reducing children's vulnerability to infection and for protecting children from discrimination because of their real or perceived HIV/AIDS status.

Children should have access to HIV/AIDS prevention education, information and to the means of prevention both in school and out of school, irrespective of their HIV/AIDS status. Measures should be taken to remove social, cultural, political or religious barriers that block children's access to these. No discrimination should be suffered by children in leisure, recreational, sport, and cultural activities because of their HIV/AIDS status.

Children's right to confidentiality and privacy in regard to their HIV status should be recognized. This includes the recognition that HIV testing should be voluntary and done with the informed consent of the person involved which should be obtained in the context of pretest counselling. If children's legal guardians are involved, they should pay due regard to the child's view, if the child is of an age of maturity to have such views.
All children should receive adequate treatment and care for HIV/AIDS, including those children for whom this may require additional costs because of their circumstances, such as orphans. States should include HIV/AIDS as a disability, if disability law exist to strengthen the protection of people living with HIV/AIDS against discrimination. Special measures should be taken by governments to prevent and minimize the impact of HIV/AIDS caused by trafficking, forced prostitution, sexual exploitation, inability to negotiate safe sex, sexual abuse, use of injecting drugs, and harmful traditional practices.
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1. Weight Loss > 10% of Body Weight
2. Diarrhoea > One Month
3. Fever > One Month
4. Cough > One Month
5. PGL > One Month
6. Herpes Zoster
7. Extra Genital Molluscum
8. Non-healing Tropical Ulcer
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Other Investigations:

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Tissue Biopsy (if indicated):

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<td>WHO Staging</td>
<td>1 - Zero Negative 2 - Asymptomatic HIV Positive 3 - ARC 4 - AIDS 9 - NK</td>
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Treatment: (1 - Yes 2 - No 9 - NK)  

| Antibiotics | Anti Tuberculca  
|-------------|------------------|
| Anti Fungal | Anti Diarrhoeal  
| Anti Pyretic | Anti Malaria  
| Anti Viral | Anti Neoplastic  
| Placebo/Misc. | Treatment Point: 1 - Out Patient 2 - In Patient 9 - NK  
| Counselling  | 1 - Done 2 - Not Done 9 - NK  
| Discharge In Weeks |  
| Outcome | 1 - Alive 2 - Dead 3 - Lost to followup 9 - NK  

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vii
10. Extensive Psoriasis
11. Oral Candidiasis
12. Extensive erosive herpes simplex
13. Halit Leucoplakia
14. Norwegian Scabies
15. Extensive Dermatophytosis
16. Pulmonary TB
17. Extra-Pulmonary TB (Ind Disseminated)

Specify:

18. Pneumonia

Specify:

19. Kaposi's Disease
20. Meningitis (Cryptococcal)
21. Meningitis (Tuberculous)
22. Meningitis (Bacterial)
23. Encephalitis (Tox6)
24. Encephalitis (Viral)
25. Dementia Complex (Use Evaluation Chart)
26. Neuritis (Specify Mono / Poly)
27. Genital Ulcers
28. Genital Discharge
29. Genital Growths
30. Eubo
31. Others (Specify)

General Examination:

1. Weight: _________ Kg.
2. Pallor: 1 - Yes 2 - No 3 - Nil
3. Hair (Sparse/Brittle/Infertess): 1 - Yes 2 - No 3 - Nil
4. Nail Changes (Yellow/Leucos): 1 - Yes 2 - No 3 - Nil
5. Adenopathy: 1 - Cervical 2 - Supraclavicular 3 - Axillary 4 - Epitrochlear 5 - Inguinal 6 - Nil 7 - Nil

Systemic Examination:

Respiratory System: __________________________
**Alimentary System**


**Cardio-Vascular System**


**Central Nervous System**


**Genito-Urinary System**


**Joints**


**Investigations:**

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<td>TC (l/mm)</td>
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<td>SC (L, E, B, M) %</td>
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<td>Platelet Count (l/mm)</td>
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<td>LFT (SGOT, SGPT, Total Proteins, Globulin)</td>
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<td>Se. Bil. (mg%)</td>
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<td>Albumin (gm%)</td>
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**VDRL**

- 1 - Positive
- 2 - Negative
- 9 - ND/NK

**Gram Stain**

- 1 - Positive
- 2 - Negative
- 3 - Not done
- 9 - NK

**MTM Culture**

- 1 - Positive
- 2 - Negative
- 3 - Not done
- 9 - NK

**Chancroid Culture**

- 1 - Positive
- 2 - Negative
- 3 - Not done
- 9 - NK

**Donovan Bodies**

- 1 - Positive
- 2 - Negative
- 3 - Not done
- 9 - NK

**Routine Urine (If indicated)**


**Routine Stool (If indicated)**


**CSF (If indicated)**

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<td>HIV Status</td>
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ANNEXURE D

Schedule for counseling and recording the psychological issues

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Reasons for hospital visit: 1. STIs  2. Skin Disease  3. HIV/AIDS from outside  4. Referral from any other hospital/clinic/doctors  5. Any other

SEXUAL RISK IDENTIFICATION

Age at first sexual experience: ____________________________

No. of sexual partners in the past year: ____________________

<table>
<thead>
<tr>
<th>Frequency of Sex:</th>
<th>Week</th>
<th>Month</th>
<th>Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>Are you under the influence of Alcohol / Drugs?</td>
<td>Yes / No / Occasionally</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Reason for non-usage / Irregular usage</td>
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</tr>
</tbody>
</table>

### Awareness about HIV / AIDS / STD

**Do you know about STDs?**  
Yes / No

**If yes, what do you know?**

**Do you know about HIV / AIDS?**  
Yes / No

**If yes what do you know?**

### Psychological Assessment?

**Past history of psychiatric illness?**  
Yes / No

**Nature of illness:**

### Past Responses to Stressors:

- (e.g. family arguments; job dissatisfaction; mental disorder; separation; serious financial problems; poverty, divorce, death of a spouse; chronic illness; physical and sexual abuse; suicide of a spouse)

**How did the client cope with them?**

### Concurrent Stressors:

**Mental state examination:**

**Appearance / Behaviour:**

1. General appearance - (self-neglect - dirty unkempt look / unwashed clothes; weight loss / gain)

2. Facial appearance - (maintaining eye contact; expressions suggestive of depression / anxiety / relief / guilt / anger / unchanging "wooden" expression)

3. Co-operative - (giving and receiving of information; nature of responses)

4. Comprehension - (appropriate responses; asking relevant questions; non-verbal behaviour)

5. Others
MOOD:
1. DEPRESSED - (sleep disturbance; crying spells; pessimistic thoughts; lack of interest and enjoyment; weight loss; lack of appetite; suicidal ideation)
2. ANXIOUS - (fearful anticipation; irritability; restlessness; repetitive worrying thoughts; night terrors)
3. FEARFUL - (tense; overwhelmed; scared; panic)
4. STATUS QUO - (indifferent)
5. SUICIDAL - (direct statement of intent; depressive disorders or feelings of hopelessness)
6. OTHERS -

Support systems available? Who is providing emotional and social support? (family / friends / others etc.)

PERCEPTION OF RISK TO SELF: YES / NO / NOT SURE:

COUNSELLOR'S REMARKS:

Consent for HIV testing: Thumb Impression / Signature:

POST-TEST COUNSELLING

Date:

Name of Counselor:


RESPONSE TO HIV DIAGNOSIS:
1. Denial 2. Anger 3. Fear
### Important Psychosocial Issues Raised by the Client:

1. Illness / Death:

2. Guilt:

3. Marital / Mental relations:

4. Pregnancy / Children:

5. Sharing information with sexual partner / family / employer / friend:

6. Jobs / Career / Immigration:

7. Future sexual activities:

8. Support needs (e.g. shelter, treatment, food):

9. Social stigma / discrimination:

### Assessment of Motivation (assess whether client is ready for taking decisions for change in life style, etc.)

---

### Counsellor's Future Plans

---
ANNEXURE E
QUESTIONNAIRE FOR HIV/AIDS CLINICAL
MANAGEMENT KNOWLEDGE, ATTITUDES, BEHAVIOUR
AND PRACTICE (For Health Care Providers)

These questions are intended to assess the qualities in a health care
provider and not your personal abilities. So please do not indicate
your name on this form. Please tick the right answer. More than one
answer may be correct.

1. The commonest mode of HIV transmission in India today is
   (a) Heterosexual (b) Homosexual (c) Blood transfusion
   (d) Mother to child (e) IV Drug use
2. I would first use the following test(s) for diagnosis of HIV
   infection in a clinical setting
   (a) ELISA (b) SPOT (c) Western Blot
   (c) PCR (e) Viral culture
3. Being HIV antibody positive means
   (a) Infected with HIV (b) AIDS disease
   (c) Death in a months time
4. Being HIV antibody negative means
   (a) Having no HIV infection (b) Having no AIDS
   (c) There could be early HIV infection
5. AIDS diagnosis is made when
(a) The patient meets the criteria for AIDS diagnosis and the patient is HIV positive
(b) The patient has lost more than 10% of body weight and has diarrhoea
(c) The patient is HIV positive
(d) The patient has pulmonary TB and is HIV positive
6. Which of the following causes symptoms and signs of AIDS
(a) The HIV infection opportunistic infection
(c) CD4 + Cells depletion
7. ZIDOVUDINE has the following effects
(a) Kills HIV (b) Treats opportunistic infections
(c) Inhibits HIV multiplication
8. Who of the following would I give HIV/AIDS counselling
(a) A person suffering from an STD
(b) A person infected with HIV
(b) A spouse of a person infected with HIV
(d) A group of people attending a business meeting
(e) Work place associates
9. For a person with oral candidiasis, the treatment would be
(a) Tab Ketoconazole (b) Tab Co-trimoxazole
(c) Tab Nystatin (d) Clotrimazole Oral Application
10. To prevent transmission of HIV in a hospital setting, I would recommend:
   (a) Not to touch any patient without gloves
   (b) Patient with HIV not using the same toilets with other patients
   (b) To avoid contact with blood and blood products from all patients
   (c) To avoid contact with blood from HIV infected individuals
   (d) To test all patients for HIV, before surgery
11. HIV is a:
   (a) Retro virus
   (b) Adeno virus
   (c) DNA virus
   (d) RNA virus
   (e) An STD pathogen
12. For an HIV patient with typhoid perforation who requires emergency operation, I would
   (a) Operate immediately
   (b) Need a separate theatre
   (c) Use separate instruments for HIV patients
13. For a severely ill HIV infected patient, I would
   (a) Treat him at home
   (b) Admit him in an isolation hospital
   (c) Admit him in a general hospital
14. The following can be the differential diagnosis for AIDS
   (a) Enteric fever
   (b) Tuberculosis
   (c) Kala-azar
   (d) None of the above
15. The following conditions can be differential diagnosis of persistent generalised lymphadenopathy
   (a) TB lymphadenitis
   (b) Lymphoma
   (c) Syphilis
   (d) None of the above
16. Pneumocystis Carinii is (a) A fungus
   (b) A parasite
   (c) A virus
   (d) An opportunistic organism
17. An instrument contaminated by blood and body fluids should be 
(a) Disposed by incineration (b) Decontaminated before re-cycling 
(c) Disposed without decontaminated
18. A person infected with HIV should be advised to 
(a) Live in isolation (b) Lead a normal family life 
(c) Use condoms for all sexual intercourse
19. Condom is an effective method to prevent 
(a) Pregnancy (b) STD 
(c) HIV infection (d) Promiscuity 
(e) Prostitution
20. How long after acquisition of HIV infection does an individual 
transmit the disease? Tick the most common period 
(a) Upto 2 years (b) Upto 5 years 
(c) Upto 10 years (d) Life long
21. AIDS is a global crisis True/false
22. AIDS is completely preventable by certain behaviours True/false
23. HIV can be transmitted social contact True/false
24. The most efficient vehicle of transmission of HIV is blood True/False
25. HIV may be transmitted by unprotected sexual contact with
   Infected spouse True/false
   Multiple partner True/false
   Unknown men True/false
   Unknown women True/false
26. HIV is transmitted by insect bite True/false
27. HIV can be transmitted through the use of
(a) Contaminated protoscopes True / false
(b) Injury with blood soiled sharps True / false
(c) Examination of patient without skin lesions True / false
(d) Caring for a patient with HIV infection True / false

28. HIV can be prevented by
(a) Immunization True / false
(b) Observing universal precautions True / false
(c) Chemoprophylaxis with AZT True / false

29. HIV can be prevented by
(a) Safe sex True / false
(b) Safe blood True / false
(c) Sterile needles and instruments True / false
(d) Keeping away from AIDS patient True / false

30. HIV infection and AIDS are one and the same True / false

31. Asymptomatic HIV infected individuals transmit infection by unprotected sexual intercourse True / false

32. Counselling should be mandatory for HIV testing in a clinical setting True / false

33. All those found to be HIV infected but healthy must be counselled True / false

34. HIV positive mother can infect the baby:

During pregnancy True / False
Around and during delivery True / False
During breast feeding True / False
35. It is possible to diagnose HIV in an adult with serological test
1 wk. after exposure  True / false
3 months after exposure True / false
1 year after exposure True / false
36. All patients attending the hospital should be tested for HIV True / false
37. Universal work precautions should be practiced:
In all patients True / false
In HIV infected patients only True / false
In AIDS patients True / false
38. Barrier precautions are mandatory in
Labour room during delivery True / false
Urology O.T True / false
Routine examinations True / false
Dental O.P.D True / false
Casualty-while handling an accident case with bleeding True / false
39. Testing for HIV should be mandatory for those providing patient care Agree Disagree Undecided
40. HIV infected Health Worker might transmit HIV to patients during health care True / false
41. A HIV infected health care worker would withdraw from active service Agree Disagree Undecided
42. HIV infected patients need extra care & support Agree Disagree Undecided
43. HIV status of the patient should be confidential Agree Disagree Undecided
44. The HIV status of a patient should be shared with the other
Health care workers involved in medical care in strict confidence.

Agree    Disagree    Undecided

45. Employer should be informed about HIV status of the employee

Agree    Disagree    Undecided

46. I will avoid an HIV infected colleague

Agree    Disagree    Undecided

47. I am fully prepared to provide medical care to HIV infected and
AIDS patients in the present set up.

Agree    Disagree    Undecided

48. There should be an AIDS ward.

Agree    Disagree    Undecided

49. Terminally ill AIDS patient must be isolated for his own benefit
and comfort.

Agree    Disagree    Undecided

50. The chance of vertical transmission from HIV infected mother is:

0-30%    30-40%    60-90%    100%

H. [Note: Some of the questions are purely scientific and they
have been included so that there is more sincerity in
completing the form. This note was not included in the
questionnaires distributed]
I. ANNEXURE F Schedule of questionnaire for college teachers and students

<table>
<thead>
<tr>
<th>STUDY ON AIDS AWARENESS</th>
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<tbody>
<tr>
<td>(CONFIDENTIAL)</td>
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</table>

1. Class: 1) Pre-Degree  2) Pre-Degree-II  3) B.A./B.Sc./B.Com.  4) II  5) III
2. College/School: .........................................................
3. Age: ......................................................................................
4. Sex: 1. Male  2. Female
5. Religion: 1) Hindu  2) Christian  3) Muslim  4) Others

7. Family's approximate monthly income:
   1) Below Rs. 1000  2) Rs. 1001-2000  3) Rs. 2001-3000  4) Rs. 3001-4000  5) Rs. 4001-5000  6) Rs. 5001 and above

Please answer each question carefully and honestly. Make sure you place a tick mark(‐) next to the item that you think is correct or right. Please check the form after finishing to make sure you have answered all the questions. Your answers will not be used to others. They will help us understand what you know and how you feel about AIDS.

8. Have you heard about HIV and AIDS? 1) Yes  2) No

9. Where did you first hear about HIV/AIDS?

10. HIV stands for
    1. Human Immunodeficiency Virus
    2. High Infection Virus
    3. Human Immunodeficiency Virus
    4. Human Intensive Virus

11. Having HIV is the same thing as having AIDS?
    1. True  2. False

12. You can tell whether a person has HIV from the way he/she looks?
    1. True  2. False

13. There is a cure for AIDS?
    1. True  2. False

14. Please name the blood tests that are used to detect HIV in a person.
    1. ..........................................................  2. ..........................................................
15. Please tick-mark the ways in which a person can get the AIDS Virus (HIV)
1. Having sex without a condom
2. Being bitten by a mosquito
3. From an infected pregnant mother to her new born/unborn baby at birth or shortly after birth
4. Kissing someone who has the virus
5. Donating blood in a hospital
6. Receiving a blood transfusion
7. From Public or restaurant toilets
8. Sharing needles for I.V. drug use with other addicts.

16. HIV is mainly transmitted by body fluids—Please tick-mark them.

17. Please tick-mark whether you “Agree” or “Disagree” with each of the following statements. There is no right or wrong answer for the statements—we just want your personal opinion.
   a) I would be willing to be in a class with a student who has the AIDS virus.
      1. Agree 2. Disagree
   b) I would be a friend with someone who is HIV positive.
      1. Agree 2. Disagree
   c) I think people with AIDS deserve to get AIDS.
      1. Agree 2. Disagree
   d) I know how I can protect myself from getting HIV and I will never become infected.
      1. Agree 2. Disagree
   e) It is dangerous to have sex with many different people.
      1. Agree 2. Disagree
   f) Men should wear condoms when having extra marital sex.
      1. Agree 2. Disagree
   g) To avoid HIV infection, one should insist on the other person doing a HIV blood test before one gets married or lives together.
      1. Agree 2. Disagree
   h) One should have frank and open discussion about sex with a new friend/boyfriend or fiancé.
      1. Agree 2. Disagree
   i) It is alright for girls to have sex before marriage.
      1. Agree 2. Disagree
   j) It is alright for boys to have sex before marriage.
      1. Agree 2. Disagree
   k) Those who have contracted AIDS should be housed separately.
      1. Agree 2. Disagree
   l) Young people having AIDS should be allowed to get married.
      1. Agree 2. Disagree
   m) Open discussion on sexual health and sex related issues can lead to increase in morality among people.
      1. Agree 2. Disagree

18. Do you personally actually know someone of your age who has already had sex? 1. Yes 2. No
HIV/AIDS: India's Many Epidemics

India, facing an epidemic of its own, is home to one of the largest HIV/AIDS populations in the world. The disease has reached epidemic proportions in India, particularly among women and children. The government has taken several initiatives to combat HIV/AIDS, including education, counseling, and treatment programs. However, the infection rate continues to rise, with new cases being reported daily. The Indian government has also been criticized for its slow response in addressing the crisis, leading to a surge in the number of infected individuals. The disease has had a significant impact on the country's economy, leading to increased healthcare costs and loss of productive labor. The government has acknowledged the severity of the situation and has vowed to take decisive action to control the spread of the disease. However, the challenge remains significant, and continued efforts are needed to contain the epidemic.
**New Zealand spurns AIDS victims**

**WELLINGTON:** The New Zealand government has closed the door to victims of AIDS, including refugees. Immigration minister Tuiraki John Delamere announced on Tuesday that from July 1 next year all refugees, new immigrants and people wanting to work or study in New Zealand for more than two years must undergo HIV-AIDS tests.

Anybody who failed the test will be barred from entering the country, he said.

"The move is in keeping with our policy to balance the rights of entry with the potential risks to New Zealanders," he said.

The policy bars newcomers who pose a risk to public health and could be a burden on health services. Currently only tests for tuberculosis and syphilis are compulsory.

New Zealand admits about 750 refugees a year under a UN quota system. Last year, 105 people in the country were identified as HIV positive — 43 of them refugees.

The newspaper *Wellington* said a number of government departments had opposed the move, and civil liberties groups and the AIDS Foundation dubbed it discriminatory and unnecessary.

Delamere said it was purely a preventive step and brought New Zealand into line with the policy of Australia. (AP)
ജീവിതാംശവും, ജീവിതത്തിലെ പാർവ്വത്യം, നാമദേവി മലയാളത്തിലെ ഒരു കുട്ടിയാണ്. ഇത് കേരളത്തിലെ ഒരു പ്രാണികലയിലെ പ്രേക്ഷകളാണ്. ഇപ്പോൾ ജീവിതത്തിലെ പാർവ്വത്യം നാമദേവി മാനുഷ്യസാക്ഷരത്വം പ്രാപ്തമനും പുറത്തും മൂന്നാം നൂറ്റാണ്ടിൽ നിന്നും കൂടുതൽ പ്രാണികലയിലെ പ്രേക്ഷകളാണ്. ഇപ്പോൾ ജീവിതത്തിലെ പാർവ്വത്യം നാമദേവി മാനുഷ്യസാക്ഷരത്വം പ്രാപ്തമനും പുറത്തും മൂന്നാം നൂറ്റാണ്ടിൽ നിന്നും കൂടുതൽ പ്രാണികലയിലെ പ്രേക്ഷകളാണ്.
"അമ്പലം നടത്തുന്ന തോട്ടത്തിലെ തീരപ്രദേശങ്ങളിലേക്കുള്ള മുപ്പത്തിയഞ്ച് കിലോമീറ്റർ നിരവധി പ്രദേശങ്ങളിലെ സ്വാമികളുടെ വിജയദൈവത്തിന് മുന്നില്‍ നിന്ന് പോയിട്ട് വനാശഭീഷണി നടത്തിരുന്നു.

അമപട്ടിയുടെ പലാണിയുടെ പാലവും വനാശതോ തോട്ടത്തിലെ മറ്റും പ്രദേശങ്ങളിലെ സൂക്ഷിക്കലുകളിലും തീരപ്രദേശങ്ങളിലെ പൊതുവെ പ്രദേശങ്ങളിലും വനാശഭീഷണി നടത്തിയിരുന്നു.

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AIDS: Patient? 

AIDS എന്ന സംസ്ഥാനത്തിന്റെ പ്രത്യേകതയാണ്. എന്നാൽ, അതിന്റെ അടിസ്ഥാനത്തിൽ നിന്ന് സമൂഹത്തിന്റെ അറിവുകൾ പ്രകടമാക്കാം. 

AIDS പ്രസക്തിയുടെ പ്രത്യേകത എന്നാൽ, അതിന്റെ അടിസ്ഥാനത്തിൽ നിന്ന് സമൂഹത്തിന്റെ അറിവുകൾ പ്രകടമാക്കാം. 

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AIDS PATIENT

അമ്പതു് ദാനിക

ബിരുദത്തിലൂപ്പി:

കരോടായ നിരീക്ഷണം കെട്ട്

നിരന്തരം
ഭീമനായാണ്
എന്നറിയുന്ന
കാളനായ

govind

"ഭീമനായാണ്
എന്നറിയുന്ന
കാളനായ
govind

1. എന്റെ വേദനയെ പരിശീലിക്കുക, പ്രധാനമായും പ്രവൃത്തിയാണ്
എന്നറിയുന്ന
govind

2. എന്റെ വേദനയെ പരിശീലിക്കുക, പ്രധാനമായും പ്രവൃത്തിയാണ്
എന്നറിയുന്ന
govind

3. എന്റെ വേദനയെ പരിശീലിക്കുക, പ്രധാനമായും പ്രവൃത്തിയാണ്
എന്നറിയുന്ന
govind

4. എന്റെ വേദനയെ പരിശീലിക്കുക, പ്രധാനമായും പ്രവൃത്തിയാണ്
എന്നറിയുന്ന
govind

5. എന്റെ വേദനയെ പരിശീലിക്കുക, പ്രധാനമായും പ്രവൃത്തിയാണ്
എന്നറിയുന്ന
govind

6. എന്റെ വേദനയെ പരിശീലിക്കുക, പ്രധാനമായും പ്രവൃത്തിയാണ്
എന്നറിയുന്ന
govind

7. എന്റെ വേദനയെ പരിശീലിക്കുക, പ്രധാനമായും പ്രവൃത്തിയാണ്
എന്നറിയുന്ന
govind

8. എന്റെ വേദനയെ പരിശീലിക്കുക, പ്രധാനമായും പ്രവൃത്തിയാണ്
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9. എന്റെ വേദനയെ പരിശീലിക്കുക, പ്രധാനമായും പ്രവൃത്തിയാണ്
എന്നറിയുന്ന
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10. എന്റെ വേദനയെ പരിശീലിക്കുക, പ്രധാനമായും പ്രവൃത്തിയാണ്
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11. എന്റെ വേദനയെ പരിശീലിക്കുക, പ്രധാനമായും പ്രവൃത്തിയാണ്
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12. എന്റെ വേദനയെ പരിശീലിക്കുക, പ്രധാനമായും പ്രവൃത്തിയാണ്
എന്നറിയുന്ന
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13. എന്റെ വേദനയെ പരിശീലിക്കുക, പ്രധാനമായും പ്രവൃത്തിയാണ്
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14. എന്റെ വേദനയെ പരിശീലിക്കുക, പ്രധാനമായും പ്രവൃത്തിയാണ്
എന്നറിയുന്ന
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15. എന്റെ വേദനയെ പരിശീലിക്കുക, പ്രധാനമായും പ്രവൃത്തിയാണ്
എന്നറിയുന്ന
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16. എന്റെ വേദനയെ പരിശീലിക്കുക, പ്രധാനമായും പ്രവൃത്തിയാണ്
എന്നറിയുന്ന
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17. എന്റെ വേദനയെ പരിശീലിക്കുക, പ്രധാനമായും പ്രവൃത്തിയാണ്
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18. എന്റെ വേദനയെ പരിശീലിക്കുക, പ്രധാനമായും പ്രവൃത്തിയാണ്
എന്നറിയുന്ന
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19. എന്റെ വേദനയെ പരിശീലിക്കുക, പ്രധാനമായും പ്രവൃത്തിയാണ്
എന്നറിയുന്ന
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20. എന്റെ വേദനയെ പരിശീലിക്കുക, പ്രധാനമായും പ്രവൃത്തിയാണ്
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21. എന്റെ വേദനയെ പരിശീലിക്കുക, പ്രധാനമായും പ്രവൃത്തിയാണ്
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22. എന്റെ വേദനയെ പരിശീലിക്കുക, പ്രധാനമായും പ്രവൃത്തിയാണ്
എന്നറിയുന്ന
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23. എന്റെ വേദനയെ പരിശീലിക്കുക, പ്രധാനമായും പ്രവൃത്തിയാണ്
എന്നറിയുന്ന
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24. എന്റെ വേദനയെ പരിശീലിക്കുക, പ്രധാനമായും പ്രവൃത്തിയാണ്
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25. എന്റെ വേദനയെ പരിശീലിക്കുക, പ്രധാനമായും പ്ര

26. എന്റെ വേദനയെ പരിശീലിക്കുക, പ്രധാനമായും പ

27. എന്റെ വേദനയെ പരിശീലിക്കുക, പ്രധാനമായും പ

28. എന്റെ വേദനയെ പരിശീലിക്കുക, പ്രധാനമായും പ

29. എന്റെ വേദനയെ പരിശീലിക്കുക, പ്രധാനമായും പ

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