



## Lack of Awareness on Aids – A Cause for Exclusiveness – A Study

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### ABSTRACT

*In India, as elsewhere, AIDS is perceived as a disease of "others" – of people living on the margins of society, whose lifestyles are considered "perverted" and "sinful." Discrimination, Stigmatization, and Denial (DSD) are the expected outcomes of such values, affecting life in families, communities, workplaces, schools, and health care settings. At the beginning of 1986, despite over 20,000 reported AIDS cases worldwide, India had no reported cases of HIV or AIDS. There was recognition though, that this would not be the case for long and concerns were raised about how India would cope once HIV and AIDS cases started to emerge. In the year 1986, India's first cases of HIV were diagnosed among sex workers in Chennai, Tamil Nadu.*

*At this juncture, the researchers had intellectual discomfort after going through lot of literature that created an interest to study on HIV/AIDS among college students. The study was undertaken in Arignar Anna Government Arts College in the Karaikal District of the Union Territory of Puducherry with the aim to find out the quantum of knowledge of AIDS, among the post graduate students.*

*Even though other studies among college students in India and abroad have reported good knowledge of HIV/AIDS. The study was done among the Post Graduate students belonging to the Departments of Social Work, Public Administration, Commerce and Economics. A total of 43 students (16 boys & 27 girls) responded to the David Pelletier (Nov 2003) Questionnaire. All those (students) who attended the college on the day (08.07.2011) of the data collection participated in the study. Karaikal, being a small town in the Union Territory of Puducherry, is surrounded by rural areas from where most of the students come with deep rooted traditional ideas. Economic backwardness of the students adds to the woe. Moreover, the lack of interest and constructive interaction to update their knowledge keeps them out of the track, thereby giving them a bright chance to marginalize the person infected with HIV/AIDS. So, an attempt has been made to study the Quantum of Knowledge about HIV/AIDS among the Post Graduate students of Arignar Anna Govt. Arts College and thereby helping them in all necessary ways, to avoid such marginalization.*

*Few important and astonishing findings of the study states that 21% of the respondents are of the view that sharing the cup of an AIDS infected person would get AIDS. 7% of the respondents are of the view that AIDS can be cured by jumping up and down on one foot in the rain. 47% of the respondents opine that insects transmit HIV. 28% of the respondents are of the opinion that one can be infected with HIV by sleeping around. 47% of the respondents say that one can get HIV from toilet seats. Since, the students are the core elements of the society their knowledge should be enriched in such a manner to remove marginalization towards inclusiveness through Red Ribbon Clubs to impart basic knowledge on HIV/AIDS at regular intervals.*

### KEYWORDS :

#### INTRODUCTION:

In India, as elsewhere, AIDS is perceived as a disease of "others" – of people living on the margins of society, whose lifestyles are considered "perverted" and "sinful." Discrimination, stigmatization, and denial (DSD) are the expected outcomes of such values, affecting life in families, communities, workplaces, schools, and health care settings.

At the beginning of 1986, despite over 20,000 reported AIDS cases worldwide, India had no reported cases of HIV or AIDS. There was recognition, though, that this would not be the case for long, and concerns were raised about how India would cope once HIV and AIDS cases started to emerge. In the year 1986, India's first cases of HIV were diagnosed among sex workers in Chennai, Tamil Nadu.

The number of people living with HIV rose from around 8 million in 1990 to 33 million by the end of 2009. The overall growth of the epidemic has stabilised in recent years. The annual number of new HIV infections has steadily declined and due to the significant increase in people receiving antiretroviral therapy, the number of AIDS-related deaths has also declined.

Since the beginning of the epidemic, nearly 30 million people have died from AIDS-related causes.

#### HIV & AIDS – GLOBAL VIEW

The statistics of the global HIV and AIDS epidemic were published by UNAIDS in November 2010.

	Estimate	Range
People living with HIV/AIDS in 2009	33.3 million	31.4-35.3 million
Adults living with HIV/AIDS in 2009	30.8 million	29.2-32.6 million

Women living with HIV/AIDS in 2009	15.9 million	14.8-17.2 million
Children living with HIV/AIDS in 2009	2.5 million	1.6-3.4 million
People newly infected with HIV in 2009	2.6 million	2.3-2.8 million
Adults newly infected with HIV in 2009	2.2 million	2.0-2.4 million
AIDS deaths in 2009	1.8 million	1.6-2.1 million
Orphans (0-17) due to AIDS in 2009	16.6 million	14.4-18.8 million

At the end of 2009, women accounted for just over half of all adults living with HIV worldwide.

#### AIM OF THE STUDY:

The aim of the study is to assess the quantum of knowledge possessed by the Post Graduate students of Arignar Anna Govt. Arts & Science College, Karaikal.

#### OBJECTIVES OF THE STUDY:

1. To document and analyse the outcomes or responses
2. To know the socio-economic background of the students
3. To study the level of knowledge about HIV/AIDS
4. To lay down a few suggestions to improve the knowledge on HIV/AIDS

#### HYPOTHESES:

1. Students hailing from rural areas have more knowledge about HIV/AIDS when compared to urban students.
2. Girl students have more misconceptions about HIV/AIDS when compared to boy students.
3. Students with less attendance have poor knowledge about HIV/AIDS.

### OVERALL BACKGROUND OF THE STUDY:

The study was done in Arignar Anna Govt. Arts & Science College, in Karikal district of the U.T of Puducherry. The study was undertaken to assess the quantum of knowledge possessed by the Post Graduate students of the institution. Most of the students are from rural with poor economic background and have deep rooted traditional beliefs. Moreover, the lack of interest and constructive interaction to update their knowledge, especially about HIV/AIDS, keeps them out of the track, thereby paving the way for marginalising of those infected with HIV/AIDS.

The researchers would like to quote the relevance of this topic with the concept of Marginalisation, with a firm belief in "Prevention is better than cure." Being a social worker, preventive form of social work is much smarter than curative form of social work.

Contradictory to the findings of this study, students in India and abroad have reported good knowledge of HIV/AIDS, and hence, they continue to be in the mainstream of the society (to move along with the society). So, an attempt has been made to study the Quantum of Knowledge about HIV/AIDS among the Post Graduate students of Arignar Anna Govt. Arts & Science College and thereby helping them in all necessary ways, to avoid marginalisation of those possessing HIV/AIDS.

The study was done among the Post Graduate students belonging to the Departments of Social Work, Public Administration, Commerce and Economics. A total of 43 students (16 boys & 27 girls) responded to the Questionnaire. All those (students) who attended the college on the day of the data collection participated in the study.

### RESULTS OF THE STUDY

**1-10 correct answers – Low level of knowledge**

**11-20 correct answers – Moderate level of knowledge**

**21-30 correct answers – High level of knowledge.**

### OVERALL LEVEL OF KNOWLEDGE ABOUT AIDS

On the whole, 14% of the respondents are found to be with low level of knowledge about HIV / AIDS and 86% of the respondents are found with satisfactory level of knowledge.

Not even a single respondent is found to be with high level of knowledge.

### AGE vs LEVEL OF KNOWLEDGE ABOUT AIDS.

When the age factor of the respondents were analysed with their level of knowledge about HIV / AIDS, it was found that 37% of the respondents are in the group of 20-21 years of age, 58% of the respondents are between 22-23 years and only 5% of them are 24 years and above.

Among those who are with moderate level of knowledge, 63% of them are between 22-23 years of age, 35% of them are between 20-21 years of age and only 2% are 24 years & above.

Among those who possess low level of knowledge, 50% are between 20-21 years, 33% are between 22-23 years and 2% are 24 years & above.

### SEX vs LEVEL OF KNOWLEDGE ABOUT AIDS.

37% of the respondents are male and 63% are female.

7% of the male students have low level of knowledge and 93% have moderate level of knowledge.

19% of the female students have low level of knowledge and 81% have moderate level of knowledge.

### AREA OF DOMICILE vs LEVEL OF KNOWLEDGE ABOUT AIDS.

The analysis of area of domicile with the level of knowledge about AIDS showed that 61% of the respondents have rural background and 39% are from urban areas.

Among those respondents who hail from rural areas, 12% of them have low level of knowledge and 88% of them have moderate level of knowledge.

Among those who come from urban areas, 18% have low level of knowledge and 82% have moderate level of knowledge.

### PARENTAL EDUCATION vs LEVEL OF KNOWLEDGE ABOUT AIDS

On the whole, 74% of the respondent's parents are literate and 26% of the respondent's parents are illiterate.

In the category of literate parents, 12% of the respondents possess low level of knowledge and 88% of them possess moderate level of knowledge.

Among those parents who are illiterate, 18% of the respondents possess low level of knowledge and 82% of them possess moderate level of knowledge.

### FAMILY INCOME vs LEVEL OF KNOWLEDGE ABOUT AIDS.

67% of the respondent's family income is between rupees 3001 – 7000 per month and 33% of the respondent's family income is between rupees 7001-9001 & above per month.

Those respondents whose family income is between rupees 3001-7000 per month, 17% have low level of knowledge and 83% have moderate level of knowledge.

Those respondents whose family income is between rupees 7001- 9000 & above, 7% have low level of knowledge and 93% have moderate level of knowledge.

### ATTENDANCE IN COLLEGE vs LEVEL OF KNOWLEDGE ABOUT AIDS.

88% of the respondents are said to have good attendance in college and 12% have satisfactory attendance.

Among those students who have good attendance, 13% have low level of knowledge and 87% have moderate level of knowledge.

Among those students who have satisfactory attendance, 20% have low level of knowledge and 80% have moderate level of attendance.

### HYPOTHESES (FINDINGS)

The following findings have been derived after the testing of three hypotheses.

1. Students hailing from rural areas have more knowledge about HIV/ AIDS when compared to urban students.
2. Girl students have low level of knowledge about HIV / AIDS when compared to boys.
3. Students with less attendance have low level of knowledge about HIV / AIDS.

### LIMITATIONS OF THE STUDY

Boys constitute only 37% of the study sample. The potential reason for the under – representation include an increased "failure rate" among boys in the qualifying examinations or an increased admission rate of girls in the post graduate courses of this institution.

The use of questionnaire for obtaining information about sexual matters could have been problematic for many reasons. Respondents are very well known to indulge in "guessing" the answers and might have even provided desirable responses so as to "look good".

### SUGGESTIONS

1. The "Red Ribbon" association need to be started and carry out programmes at regular intervals.
2. The study emphasizes the need to improve the role of teachers in HIV / AIDS awareness programmes.
3. Awareness programmes can be started by targeting the girl students by lady professors alone.
4. The students should come out of the closed type of mindset and interact & clarify issues related to HIV/ AIDS.
5. Continuous assessment of the activities of the Red Ribbon is need to ensure its effectiveness.

### CONCLUSION

On examining the responses, the researchers have identified substantial deficiencies in knowledge of HIV / AIDS in certain basic as well as key areas. Thus the researchers have come to the point of mentioning that not even a single respondent could answer all the questions

correctly, when asked on the areas of the basic knowledge of HIV / AIDS. 86% of the respondents were found to be with moderate level of knowledge, 14% of them are with only low level of knowledge and not even a single percent of the students have high level of knowledge about HIV/ AIDS.

This study has certainly identified gender and rural differences in knowledge about HIV / AIDS with rural residents demonstrating reasonably better than their urban counterparts.

It is heartening to see that 21% of the respondents say that they get infected with HIV / AIDS from sharing the cup of an infected person, 7% say that contraceptive pills protects the most against HIV infection and 11% still believe that there is a cure for AIDS.

95% of the respondents went on to say that they can get HIV from toilet seats, 40% of the respondents opine that if they are fit & healthy, they won't get AIDS, the most serious and damaging part is that 47% of the respondents say that if they have sex with people they know, they won't become infected with HIV, and at last they also said that married people don't become infected with AIDS.

**To wrap up, the researcher would like to raise a few questions:**

Given the level of knowledge of HIV/AIDS among the Post Graduate students, what is the state of Under Graduate students?

Have the P.G. students not attended any AIDS awareness programme?

What is role of local NGO's?

Isn't there any organisation in the college to look after issues related to HIV / AIDS awareness?

Therefore, it would not be shocking to see these respondents / students with low level of knowledge, marginalising the HIV / AIDS infected person. And to prevent this from happening, the institution must take utmost care in creating a better level of awareness on HIV/ AIDS among the students.

Hence, better the knowledge of HIV/ AIDS, leads to inclusiveness of person infected with HIV/ AIDS, into the main stream of society.