



Research Paper

Socio economic analysis of HIV infected victims of Vindhya region

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Received: 13/04/2014

Revised: 15/04/2014

Accepted: 25/09/2014

Abstract: In the research report we have studied the relationships between socio-economic factors and HIV prevalence in Rewa and Mauganj of Rewa district of Vindhya region of Madhya Pradesh using district level data and also analyzed the drivers of the epidemic and found out what socio-economic and other factors make people susceptible to HIV (Human Immunodeficiency Virus) infection.

Keywords: socio-economic, prevalence, epidemic, HIV infection.

INTRODUCTION

HIV was first reported in the United States in 1981 and has since become a major worldwide epidemic. AIDS (acquired immuno deficiency syndrome) is caused by HIV. By killing or damaging cells of the body's immune system, HIV progressively destroys the body's ability to fight infections. Around 2.5 million peoples suffering from HIV infection in India (WHO updates).

Health is an important to economic and social development of any healthy societies likely to become wealthy societies. At the global level, there is a strong correlation between HIV and the absolute poverty rate. In other words, HIV

and AIDS has become a life destroying epidemic in the developing world, but has been controlled for in developed rich countries. At regional level in Africa, however, the association between HIV and poverty level is significantly negative poorer countries having less HIV and the epidemic is disproportionately affecting richer, more mobile populations (Bloom and Sevilla, 2001). Currently there is no vaccine or treatment available that can cure HIV infection. Only controlling HIV transmission is an alternate solution, using different methods.

RESEARCH METHODOLOGY

In order to study the socio-economic condition of AIDS victims in Rewa District of Madhya Pradesh a field survey was conducted with the help of formally designed questionnaire (*see appendix*). Sample size taken for the survey was 60 (30 rural and 30 urban) samples were chosen randomly, from the Rewa and Mauganj areas of Rewa district of Madhya Pradesh. Face to face interview with public health department officials, personnel of NGOs, doctors and social activists and CBOs working in the region was also conducted for the research work. For data

RESULT AND DISCUSSION

When we surveyed the socio-economic condition of HIV victims of Vindhya region of Rewa district of Madhya Pradesh we came across some very interesting findings. We observed a strong relationship between marital condition and HIV infection. We found that 62 percent of the total AIDS victims surveyed by us were the married ones. It means that extra-marital relations are becoming more common in this region and people have more than one sex partners today. An interesting finding of our study was that as much as 90 percent of disclosed AIDS victims were males. Only 10 percent women disclosed as AIDS victims. What a pity that large number of female AIDS victims is dying silently without any medication due to lack of awareness and social barriers both. We found that 37.7 percent of the total HIV infected victims surveyed by us belonged to the age group of 16-25 years and 39.3 percent belonged to the age group 25-35 years, 16.4 percent were of age group between 35-45 Years and 6.6 percent were above 45 years age group. That means, older people are the less sensitive targets. Risk of HIV infection is highest among the teenagers and young adults than younger ones. We further observed that HIV infection is more common in joint families than nuclear families. 60 percent AIDS victims of Rewa district belonged to joint families and only 40 percent belonged to nuclear families.

We found that 47 percent AIDS victims were from the rural sector, 24 percent were from semi-urban areas and 27 percent were from the urban areas. That means, cases of HIV is more visible in rural areas of Vindhya Region of Madhya Pradesh than urban areas. We also observed that percentage of AIDS victims among schedule tribes (ST) is very low. Percentage of HIV infected patients is highest among general categories, followed by other backward class (OBC) and Scheduled Caste (SC) peoples. We found that 27.9 percent of the total HIV infected victims belonged to non SC,

ST and OBC category. 27.9 percent HIV positive patients belonged to OBC, 24.6 percent belong to SC and only 19.7 percent belonged to ST category. These finding shows how the moral values of some of the so called upper caste people is gradually on decline mode. Tribes are considered as among the most socially and economically backward classes. But percentage of HIV infection is quite low among them. Even among the schedule caste population, percentage of AIDS victims is lesser than general caste and other backward classed.

It is found that 1.6 percent of the total HIV infected victims were post graduates, 8.2 percent were professional degree holders, 9.8 percent were graduates, 21.3 percent studied up to higher secondary level, and 27.9 percent stopped their studies after passing their matriculation exams. 16.4 percent left the school before matriculation, 8.2 percent were simply literate and rest 6.6 percent were illiterate. That means most of the HIV victims were neither highly qualified nor illiterates.

Our study shows that most of the AIDS victims were modestly educated people. Almost 50 percent AIDS victims studied up to higher secondary level. We found that AIDS is more common among employed people. As per our findings as much as 90 percent male AIDS victims were employed somewhere and only 1.6 percent of the total HIV infected victims were unemployed ones. 4.6 percent HIV positive patients were farmers, 4.9 percent were students, 6.6 percent were businessman, 13.1 percent were engaged in part-time jobs, 18 percent worked as daily wages laborers and 31.1 percent were doing other jobs. It was found that 26.2 percent of the total HIV infected victims had 1 to 4 members in their family, 37.7 percent had 5 to 8 members in their families, 24.6 percent had 9 to 12 members in their families and 11.5 percent had 13 to 15 members in their family. That means, in almost 74 percent cases, HIV victims had more than 4 members in their respective families. It many persuade us to draw a conclusion that HIV is more significantly present in joint families. We found that most of the AIDS victims were from the middle class

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families having income between Rupees 80,000 to Rupees 160,000. That means, this income group comprised of more than 64 percent of the total AIDS victims surveyed by us. Interestingly only 1.6 percent HIV infected patients came from Rupees 40,000 to Rupees 80,000. We found that 24 percent HIV victims were from Rupees 200,000 and above income group category. Surprisingly, only 9.8 percent AIDS victims comprised from the income group between Rupees 160,000 to Rupees 200,000.

It was found that 37.7 percent of the total HIV infected victims were the migrated Labors, 14.8 percent were truck drivers and, 47.5 percent participants were associated with other types of jobs. That means, unlike popular assumptions that truck drivers are the biggest carriers of HIV infection; it was migrant labors who were injecting HIV in the lives of the people of Rewa district of Vindhya region. But, one thing is clear that majority of the AIDS victims were non static people who used to migrate from one part of the state to the other parts of the country. This clearly shows that migrant labours and truck drivers are infusing HIV in the Vindhya region.

Conclusion: On the basis of discussion it can be concluded that, there is no strong correlation between poverty and HIV transmission in Mauganj and Rewa of Madhya Pradesh of Vindhya Region. Our study shows that neither poor nor rich get HIV infection but it is the middle class. An interesting finding of our study was that 90 percent of AIDS victims were males,

only 10 percent women disclosed as AIDS victims. What a pity that large number of female AIDS victims is dyeing silently without any medication due to lack of awareness and social barriers both. Percentage of HIV infected patients is highest among general categories, followed by backward class and scheduled caste people. These finding shows how the moral values of some of the so called upper caste people is gradually on decline mode. Tribes are considered as among the most socially and economically backward classes. But percentage of HIV infection is quite low among them. So there is a need to think beyond poverty, backwardness and social taboos.

Acknowledgement: I would like thank to my supervisor Dr. Devendra N. Pandey and Prof. U.K. Chauhan for their valuable suggestions and kind support.

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