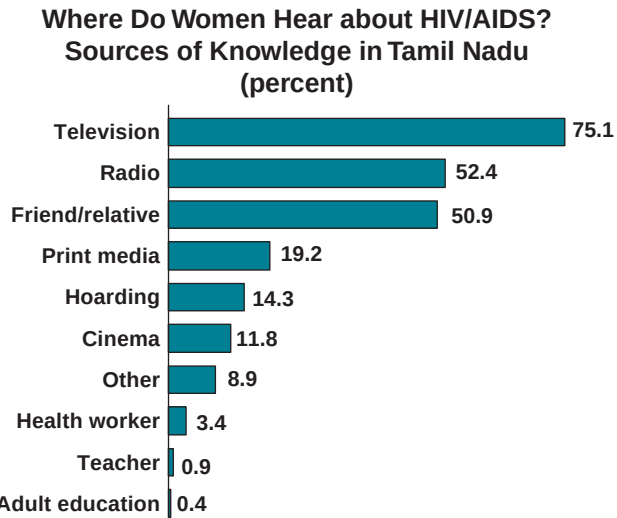


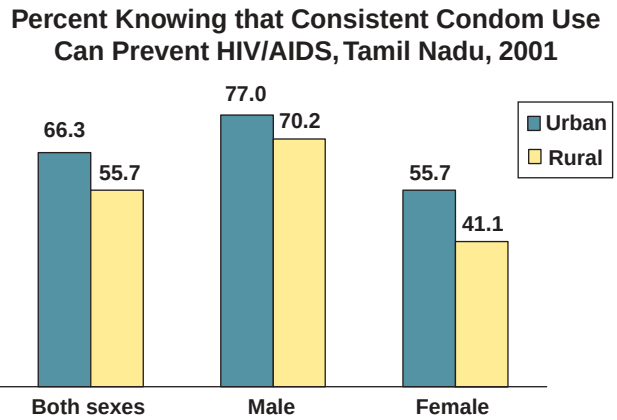
People Need HIV/AIDS Information

For people to take steps to avoid HIV/AIDS, they must first hear of it. In Tamil Nadu, 89 percent of adults have heard of the disease. In the rural areas, however, 16 percent of women are unaware of its existence. For those who have heard of the disease, television accounted for most of that knowledge, followed by radio and friends or relatives. Only 3.4 percent of ever-married women had heard of the disease from a health worker.



National Family Health Survey 1998-99 (survey of ever-married women, ages 15-49)

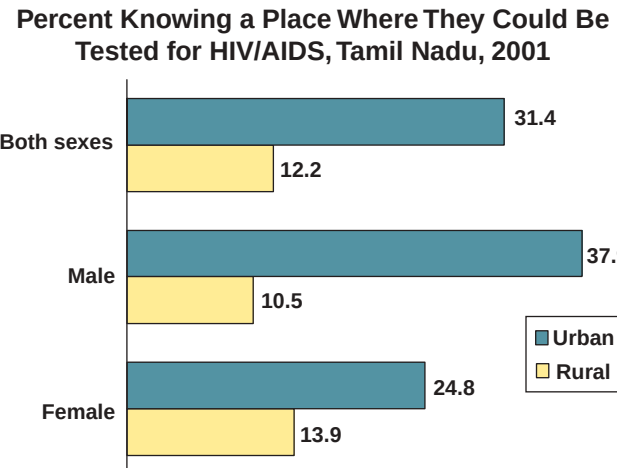
While one's becoming aware of HIV through media is a useful and desirable first step, interpersonal communication is vital for understanding the nature of the illness. Such education is woefully lacking in the state, with nine out of ten residents having had no such counselling, according to the Behavioural Surveillance Survey (BSS) 2001.



Behavioural Surveillance Survey 2001 National AIDS Control Organisation

Accurate knowledge, testing and counseling are three main weapons in the struggle against HIV/AIDS...

Personal experience with the disease is becoming more widespread. Overall, 18.4 percent of BSS respondents knew of someone who had died of AIDS, 19.4 percent in urban areas and 17.9 percent in rural areas.



Behavioural Surveillance Survey 2001 National AIDS Control Organisation

A majority felt it was possible to be tested confidentially for the disease (65.9 percent), but only 31.4 percent in urban areas and 12.2 percent in rural areas knew where to go for testing. Testing for HIV is not only in the individual's own self-interest, but would act as a strong deterrent to its spread.

What must be done?

- ❑ The stigma associated with people living with HIV/AIDS must be ended. Women and orphans are cast from families, children from their school and workers from their workplace. Ignorance breeds needless fear.
- ❑ Confidential testing centres must be made operational in every district. HIV/AIDS must be fought at the grass-roots level.
- ❑ Women are a vital target for information and testing, lest they be left defenceless.
- ❑ HIV/AIDS information — and counseling — must be universal. Everyone should know the truth about HIV/AIDS.
- ❑ People must learn that a single, uninfected partner is the best defence.
- ❑ Those who do engage in risky behaviour must learn the value of a high quality condom and how to obtain one.
- ❑ Treatment for people living with HIV/AIDS, including antiretroviral drugs, should be provided free of charge, given that the expense is beyond the reach of many.
- ❑ The importance of *quickly* educating youth is a key element in the campaign.

All the danger signs are there. Knowledge of the disease itself is low, the knowledge of preventive measures is far short of what is necessary and counseling is unavailable to many. HIV/AIDS has come to Tamil Nadu and is now a genuine epidemic.

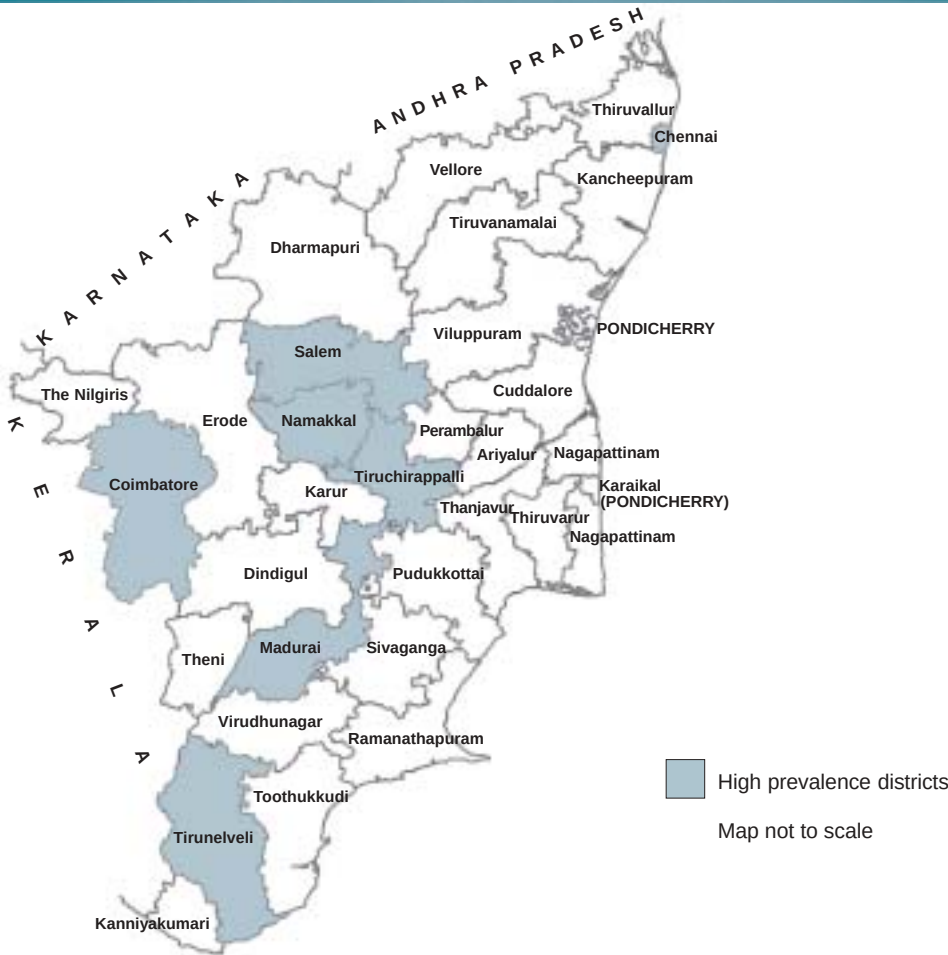
This series of factsheets on the six hard-hit HIV/AIDS states (Andhra Pradesh, Karnataka, Maharashtra, Manipur, Nagaland and Tamil Nadu) are available in English and the respective state language and are free of charge to individuals and organisations. For additional copies, please contact the Population Foundation of India at the address below.

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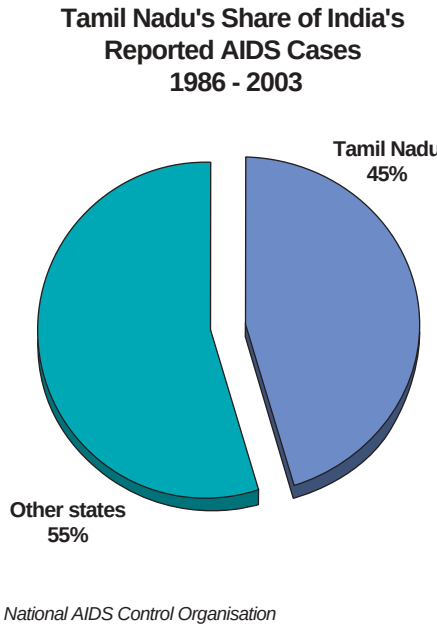
Funding was provided through the generosity of the Bill & Melinda Gates Foundation.

Printed in India at Ajanta Offset & Packagings Ltd., Delhi. November 2003.

Tamil Nadu HIV/AIDS in India The Hard-hit States



Tamil Nadu detected the first case of AIDS in India in Chennai in May of 1986. Through mid-2003, 45 percent of the country's reported cases of AIDS was in Tamil Nadu, although it has only six percent of the country's population. The epidemic began among groups with a high risk of infection, such as sex workers and their clients. But it has now spread to the general population. This is the way HIV/AIDS spread in Africa. Tamil Nadu is now on the same path. Accurate information on how to avoid the always-fatal disease — and the elimination of the stigma against its victims — can help the state stem the tide of the epidemic.

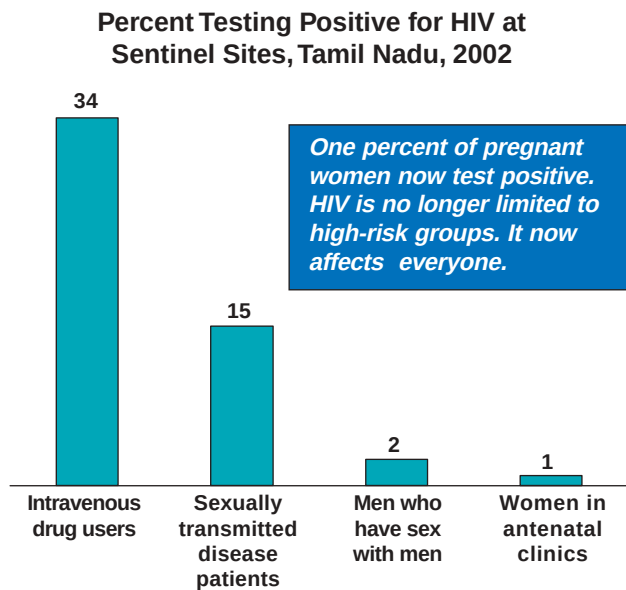


National AIDS Control Organisation

How Far Has AIDS Spread?

Officially reported AIDS cases from hospitals and clinics across the state are only a small fraction of the total. However, their rise from 9,714 in March 2001 to 24,667 through August 2003 shows that the disease is rapidly gaining ground. Of those 24,667 cases, 6,391 were added in the first eight months of 2003 alone.

Among adults, males are infected 3:1 compared to females, but the number of females with HIV/AIDS is rising. About 90 percent of the total reported AIDS cases are in the age group 15-44.



National AIDS Control Organisation

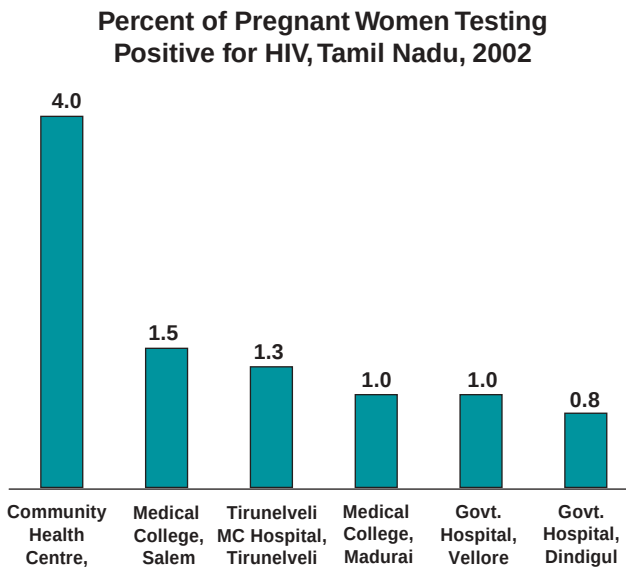
Of the 49 high prevalence HIV/AIDS districts in India, seven are in Tamil Nadu...

Measuring the Spread

In order to measure the extent of HIV infection, testing is conducted at “sentinel sites” among high and low-risk groups. High-risk groups are patients at intravenous drug user (IDU) clinics, sexually transmitted disease (STD) clinics, and men who have sex with men (MSMs). Women treated in antenatal clinics (ANCs) form the low risk group.

The National AIDS Control Organisation (NACO) classifies the HIV/AIDS epidemic in Tamil Nadu as *high prevalence*, with five percent or more of high-risk groups testing positive and one percent or more of women in antenatal clinics testing positive. In the state, rates for women in many ANC clinics have now risen above one percent. These are *very* high rates for women in the general population, who typically do not engage in risky sexual behaviour and whose chance of contracting HIV is considered low.

The sentinel site data show that the epidemic has now spread to the general population. In Tamil Nadu, the HIV/AIDS outbreak is a genuine epidemic.



National AIDS Control Organisation

A true AIDS epidemic is not a future possibility for Tamil Nadu. It is a present reality...

Bridge Groups

The high rate of HIV infection among women in antenatal clinics indicates that the disease is being carried to the general population by a “bridge” group. It is unlikely that these women contracted HIV through their own behaviour, but through that of their husbands.

Among these women, the high rates of infection for those with little or no education show the difficulty of reaching these groups with AIDS information.

Tragically, pregnant women can pass the infection to their unborn child or, after birth, by breastfeeding, an otherwise recommended practice.

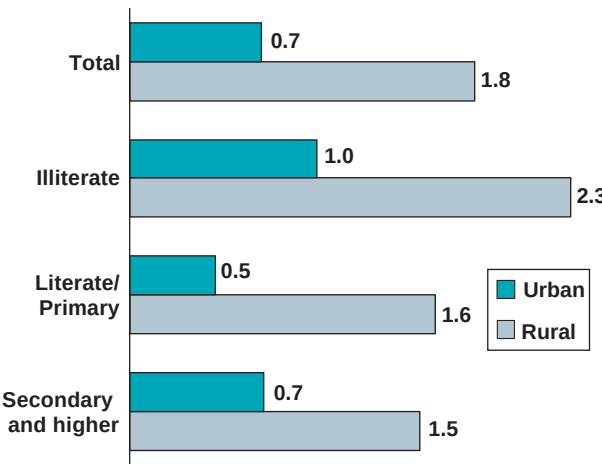
Added Risk with STDs

Sexually transmitted diseases (STDs) increase vulnerability to HIV infection. The level of HIV among patients in STD clinics in Tamil Nadu has now risen to an alarming degree, one of the highest in India. Infection rates are higher in rural areas than in urban areas, a serious public health issue as rural populations have less access to medical diagnosis and treatment.

The high rates in rural areas require greatly increased efforts for HIV education outside cities and towns. Reaching down to village panchayat leaders to convince them of the need to overcome the stigma associated with AIDS and the discussion of it has become a critical need. People fear the stigma from even being tested, knowing they are likely to be ejected from their household, village or school.

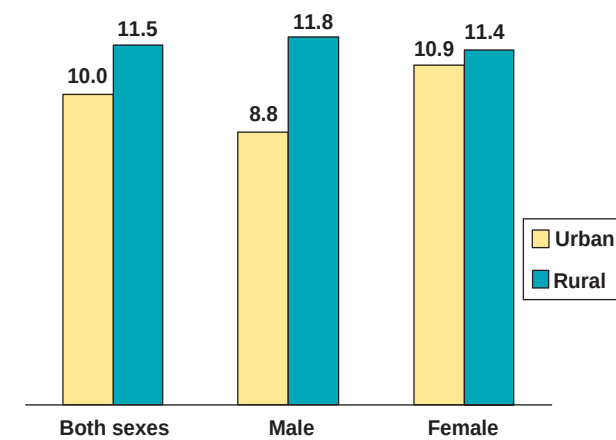
“Bridge” groups, such as husbands who use the services of sex workers, infect their wives with HIV, who then pass the disease to their babies. The epidemic is complete...

Percent of Pregnant Women Testing Positive for HIV, by Education, Tamil Nadu, 2001



National AIDS Control Organisation

Percent of STD Patients Testing Positive for HIV in Urban and Rural Areas by Sex, Tamil Nadu, 2001



National AIDS Control Organisation

Stigma: An Ally of AIDS

The fight against AIDS will fail if its stigma cannot be overcome. The fear of being stigmatized for simply being tested for the infection allows HIV/AIDS to spread undetected from person to person...

HIV Moves through Society

The occupation of STD patients who tested positive for HIV illustrates how the disease spreads, especially in the initial stages. Those with frequent contact with many customers or clients are more likely to contract the disease and then spread it to others.

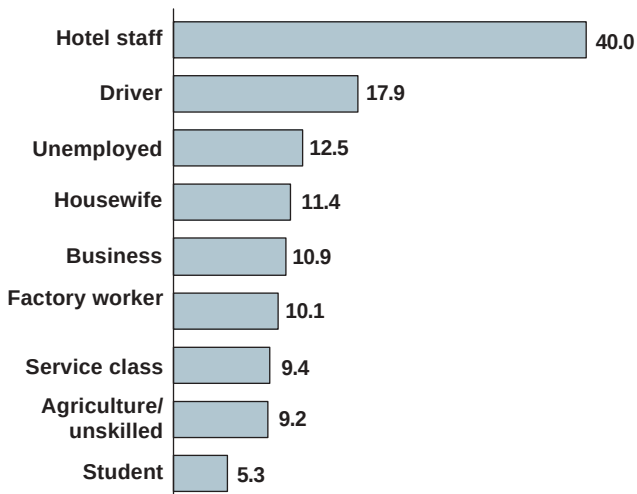
Workers in the hotel and tourist industry have the highest prevalence of the STD groups tested in Tamil Nadu. Truck drivers are the second group. Drivers often travel distances to many different locations, bringing the infection with them, often to areas where the disease has not yet begun. The unemployed form the third largest group in HIV infection with 12.5 percent in Tamil Nadu. This group is often without work for some time after migrating to larger towns and cities and becomes vulnerable to HIV.

A telling statistic is the high prevalence of HIV discovered among housewives at 11.4 percent. This high rate of infection is another signal of the general expansion of HIV.

Condom Use Short of Goal

The best defence against HIV is a *single, uninfected partner*. When one's behaviour is risky, the primary defence is a high quality condom. Although condom use has become more widespread, nine percent of clients of female sex workers (FSWs) still do not use a condom. A dramatic increase in condom use has been observed among clients of FSWs during 1996-2000. Condom use among truckers and helpers was found to have increased from 44 percent to 70 percent during the same period. But even high use of the condom is not enough. HIV will spread steadily with *anything short of 100 percent use*.

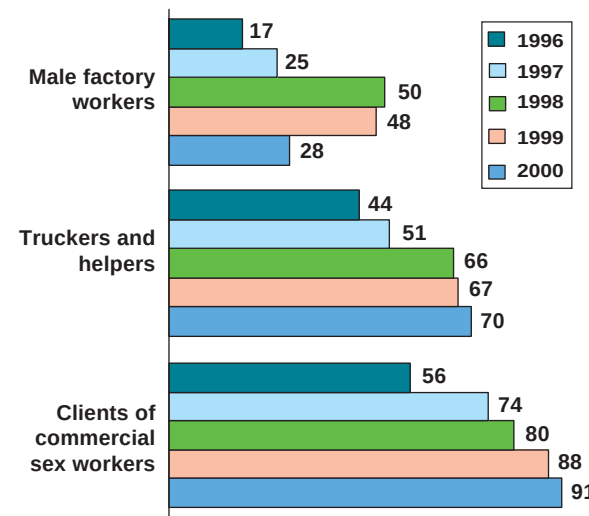
Percent Testing Positive for HIV at STD Sites by Occupation, Tamil Nadu, 2001



National AIDS Control Organisation

The best defence against HIV/AIDS is a single, uninfected partner...

Condom Used During Last Sex with a Non-regular Partner, Tamil Nadu



APAC-VHS, Chennai and Tamil Nadu State AIDS Control Society

Only 100 percent use of the condom with commercial sex workers can prevent the spread of HIV/AIDS. Tamil Nadu is far short of this goal...