

Hiv in india

[Health & Medicine](#)



The paper " Human Immunodeficiency Virus and Acquired Immune Deficiency Syndrome in India" is an exciting example of a term paper on health sciences & medicine. The first reported case of HIV infection in India happened in 1986 in Tamil Nadu. However, over time the HIV spread from the high-risk groups to the general population where about 5.7 mln people living with HIV/AIDS in India in 2011 (UNICEF 1). However, the number increased to 7 million in 2012 where 2.5 percent of this population received an HIV-positive test result (UNICEF 1). While most HIV victims are women who contracted the virus from husbands or partners, HIV infection among males is also on the increase in India. Indeed, the recent research confirms that women contribute 39% of the HIV victims in India (World Bank 1) and about 220,000 children are HIV positive were close to 60,000 children are born every year to HIV positive mothers (UNICEF 1). An increase of new infections is evident in India where young people aged between 15 and 24 years amount to 50% of new infections (UNICEF 1). Notably, the adult prevalence of HIV infection in India is about 0.34% where children infections amount to 3.5% of all infections (World Bank 1). HIV prevalence in India is dominant in four states in South India that include Andhra Pradesh with 500,000 new infections, Maharashtra with 420,000 new infections, Karnataka with 250,000 new infections, and Tamil Nadu with 150,000 new infections (World Bank 1). The four states amount to about 55% of all HIV infections in India while other states like West Bengal, Gujarat, Bihar, and Uttar Pradesh account for about 22% of HIV infections in India (World Bank 1). Despite the low prevalence rate, India occupies position three of the countries with the largest number of people living with HIV in the world (UNICEF 1). Notably, the prevalence rate of HIV infections in India decline between 2000 and 2011 but <https://assignbuster.com/hiv-in-india/>

started rising in 2012 (AVERT 1). The recent findings on HIV in India reveal that HIV epidemic affects women, who account for 40 percent of the total infections in the country where the epidemic is rampant in urban areas than rural ones and decreases with increasing education levels (UNICEF 1).

Numerous factors lead to a continued increase in HIV prevalence in India. Indeed, most HIV infections in India occur through sexual transmission, which accounts for 85.6% while about five percent of new HIV infections relates to parent-to-child transmission (UNICEF 1). As seen above, sexual transmission of HIV infections in India is the greatest cause of the current prevalence rate in India. Specifically, the sexual relationships among sex workers and their clients contribute to the high prevalence rate. In fact, most women who are HIV positive acquired the virus from their regular partner during paid sex (World Bank 1). This emanates from the fact that sex workers engage in unprotected sex with their clients. Indeed, India's National AIDS Control Organization confirms that most HIV infections in India occur during unprotected heterosexual intercourse (World Bank 1). Moreover, the sex workers inject themselves with drugs, which foster HIV prevalence as the drug users share contaminated injecting equipment.

However, various barriers hinder the efforts aimed at solving the problem in this country. Indeed, factors like sex work, men who have sex with men, injecting drug use, migration and mobility, low status of women, and widespread stigma prevent the country from solving this social epidemic (World Bank 1). Sex work and outdated laws hinder effective HIV prevention and treatment efforts (World Bank 1). Sex workers rarely use condoms and <https://assignbuster.com/hiv-in-india/>

have limited access to HIV information and awareness thus promoting HIV prevalence (World Bank 1). Men who have sex with men have a stigma, do not use condoms, and equally, have limited access to HIV information and awareness thus promoting HIV prevalence (World Bank 1). Moreover, injecting drugs with contaminated injecting equipment is another barrier to address the problem in India since the drug users do it in secrecy and do not consider HIV information and awareness (World Bank 1). Large migrations and the mobility of sex workers increase the prevalence rate of HIV transmission since it connects high-risk sexual networks thus creating a barrier to address the problem (World Bank 1). The unequal power relations and the low status of women lower their ability to protect themselves and negotiate safer sex thus hindering the efforts geared towards addressing HIV infections in India (World Bank 1).

Nevertheless, various measures seek to address this health problem in India. Indeed, we can solve this problem by addressing the issue of human rights violations and creating an enabling environment that increases knowledge and encourages behavior change among men, women, drug users, minorities, and sex workers (World Bank 1). We can achieve this by advocating for the availability of HIV information and awareness to all groups and appeal for equality between men and women. Moreover, we can achieve this by encouraging safe sex practices in heterosexual and homosexual relationships. The government should also create an environment that discourages drug injection and encourages reduced stigma to allow society to appreciate and address the problem.