

Research Article

HUMAN RIGHTS AND ITS VIOLATIONS IN HIV POSITIVE WOMEN OF UDUPI DISTRICT – KARNATAKA

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ABSTRACT

In India women account for around one million out of the 2.5 million estimated numbers of people living with HIV/AIDS. Violence against women has been described as “perhaps the most shameful human rights violation, and the most pervasive.” Violence against women means any act of gender based violence that results in or is likely to result in physical, sexual or psychological harm or suffering to women, including threats of such acts, coercion or arbitrary deprivation of liberty, whether in public or private life. Karnataka is in the “RED LIST” in the country with regard to HIV/AIDS. Udupi district, the southernmost part of Karnataka is among the six districts which have high incidence of HIV cases and of human rights violation in HIV. Thus the present study was planned to find the magnitude of human rights violations in HIV positive women in Udupi district, Karnataka. Objectives behind the study was to find out the HIV/AIDS related discrimination/violation of human rights in HIV positive women. To assess the nature, extent and pattern of such AIDS related discrimination/ violation of human rights. A cross sectional study was conducted among HIV positive women who were registered in two non-governmental organizations working for HIV positive women. A purposive convenient sampling method was used to select the participants. A total of 30 participants were approached to assess the degree of human rights violation through a face to face interview by trained investigators. Several human rights violations were assessed using a pre-determined pre tested questionnaire. Women living with HIV/AIDS had experienced disease related discrimination / violation of human rights in access to health care, personal liberty, security and privacy, right to employment and family relationship. Women also experienced different types of physical and psychological violence. 37.5% were denied medical care or services and 25% experienced an unjustified delay in receiving treatment or care. 46.7% were not offered any treatment to reduce the mother to child transmission of HIV. 30% of the respondents were ridiculed, insulted, threatened with violence or assaulted because of HIV status. 13.3% of the respondents were forced to change their residence because of their HIV status of which 50.0% changed their residence due to the pressure or ill treatment by their neighbours. It was also brought to light that 76.7% of them lost financial support from their family due to their HIV status. Human rights violations among HIV positive women happen in one way or other. The low social status commonly associated with women was found to be exacerbated in women who were HIV positive. Women lack negotiation power concerning their sex lives such as requesting condom usage which significantly increases their risk of contracting HIV. HIV positive women are treated very differently from men in many developing countries. HIV related discrimination remains an enormous barrier to effectively fight the HIV and AIDS epidemic. Progress has to be made in overcoming the violation of human rights by making the people aware of their rights in society. They need to be educated so that they are able to challenge the discrimination, stigma and denial that they meet in society. Finally a more enabling environment needs to be created to increase the visibility of people with HIV/AIDS as a “normal “part of any society.

Key Words: *Human Rights, Violation, Discrimination, HIV*

INTRODUCTION

Violence against women is a manifestation of historically unequal power relations between men and women, which have led to domination over and discrimination against women by men and to the

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prevention of the full advancement of women, and that violence against women is one of the crucial social mechanisms by which women are forced into a subordinate position compared with men. The circumstances underlying the correlation between violence against women and HIV and AIDS are a complex weave of social, cultural, and biological conditions. Since 2005, when the first results of the World Health Organization (WHO) Multi-Country Study on Women's Health and Domestic Violence were launched, the number of intimate partner violence prevalence studies increased fourfold, from 80 to more than 300, in 2008 (Garcia-Moreno *et al.*, 2005). Thus the present study was planned.

Aim of the Study

Our present study is focused on human rights violation among HIV positive women.

Objectives of the Study

The main objectives of the study

- To find out the AIDS-related discrimination/violation of human rights in HIV positive women in India.
- To assess the nature, extent and pattern of such AIDS-related discrimination/violation of human rights.

MATERIALS AND METHODS

A prospective, questionnaire based research method has been selected.

Selection of Research Design

Cross-sectional study design

Research Setting

The proposed study has been carried out in those non-governmental organizations that are helping for all HIV positive patients namely DEEPJYOTI and JEEVAN SANGHARSH.

Sampling Method

Purposive convenient sampling method was used.

Sample

A sample size of 30 was selected in study duration of 2 months.

Interview Tools

A validated questionnaire translated in local language (i.e Kannada) was used.

Pilot Study

A pilot study was carried out on 10 HIV Positive women to verify the reliability of the questionnaire and the language validity which is done by translating the questionnaire from English to Kannada and back to English and taking opinions from the experts.

Interview Schedule

The clients were interviewed during the monthly counseling conducted at specified locations by their respective NGOs in Udupi district.

RESULTS

During the period September through October 2011, 30 respondents were interviewed. The average age of the respondents was 38 (range 28 to 48). Marital status, formal education and employment of the respondents can be seen in table 1 (demographic data). The mean duration since the diagnosis of HIV of the cases was 8.51 years with a standard deviation of ± 3.32 . 33.3% of the total selected sample had primary level of education. The study showed that 43.3% of the sample was unskilled laborers. 86.7% of the HIV positive females were Hindus. Out of the selected sample 60% of the HIV positive females were found to be widowed or separated followed by 40% who were living together. Discrimination in the form of denial was found among 26.7% of the PLHIVs. All of the participants were accompanied by a friend or family member during the test. Most of them received Pre and posttest counseling (93.3% and 96.7%). 40% of them felt the time taken was very long. personal liberty and security was another field. 30% of the respondents had been ridiculed, insulted, threatened with violence or assaulted because of HIV status. 13.3% of the respondents were forced to change their residence because of their HIV status. 50% of them changed their residence due to the pressure or ill treatment by their neighbors.

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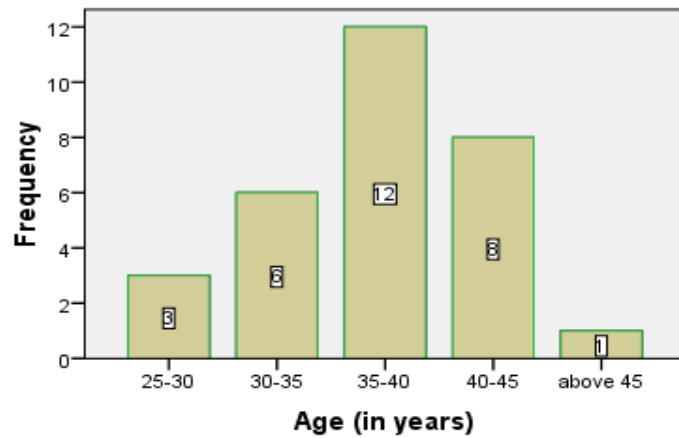


Figure 1: Showing the socio-demographic data of the subjects

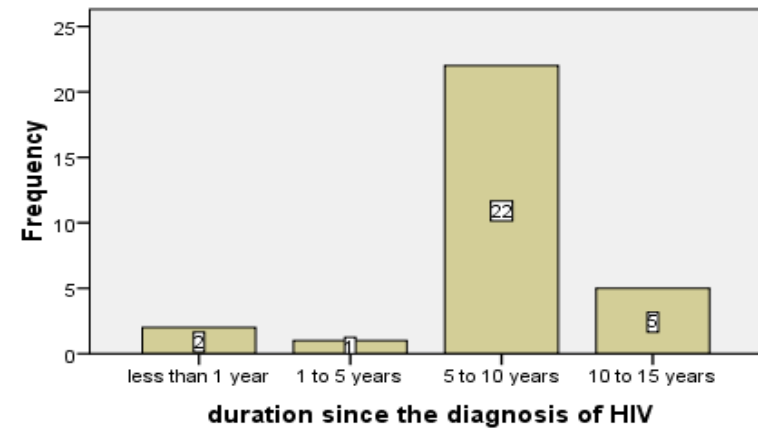


Figure 2: Duration since the diagnosis of HIV

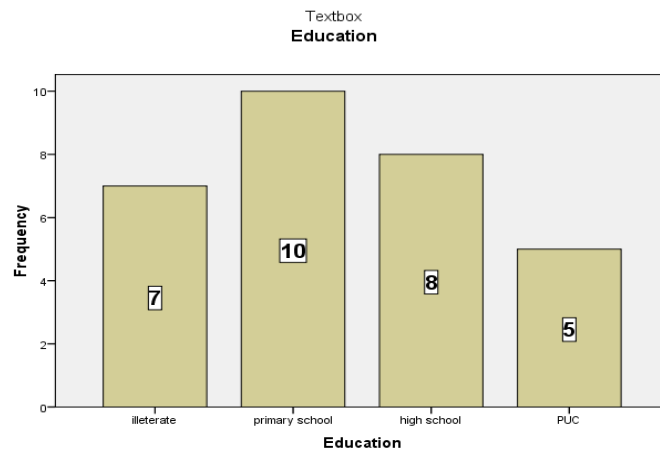


Figure 3: Educational status of the subjects

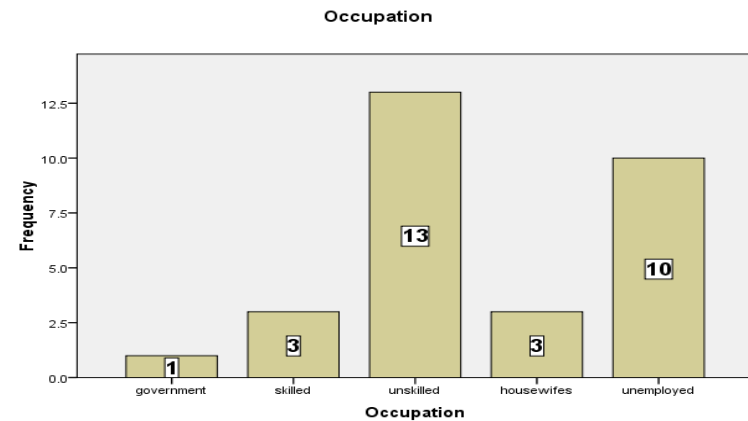


Figure 4: Type of occupation of the subjects

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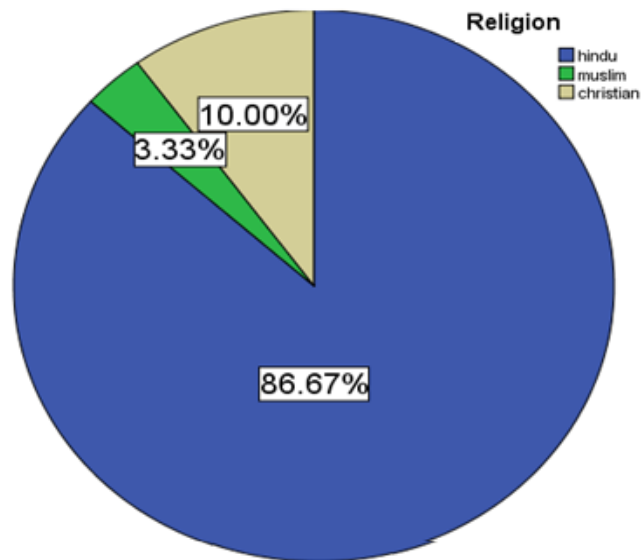


Figure 5 : Religion of the subjects

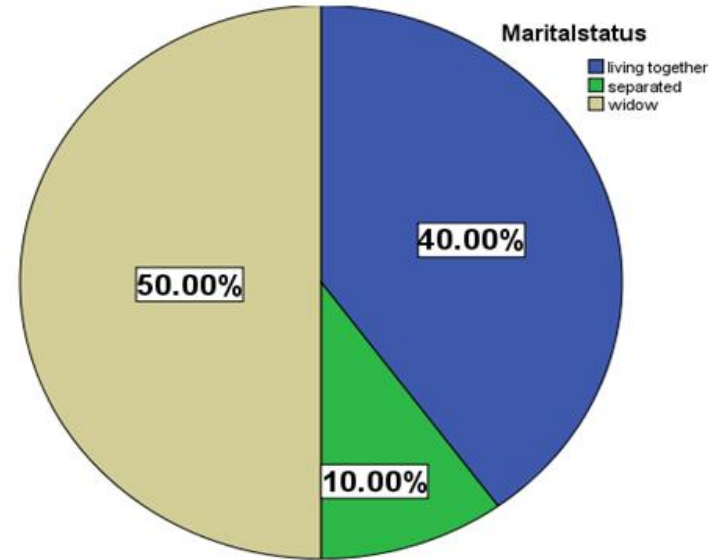


Figure 6: Marital status of the subjects

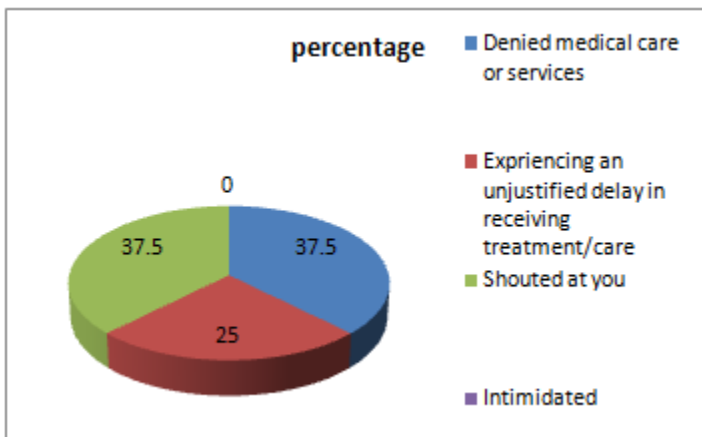


Figure 7: Attitude of health care providers

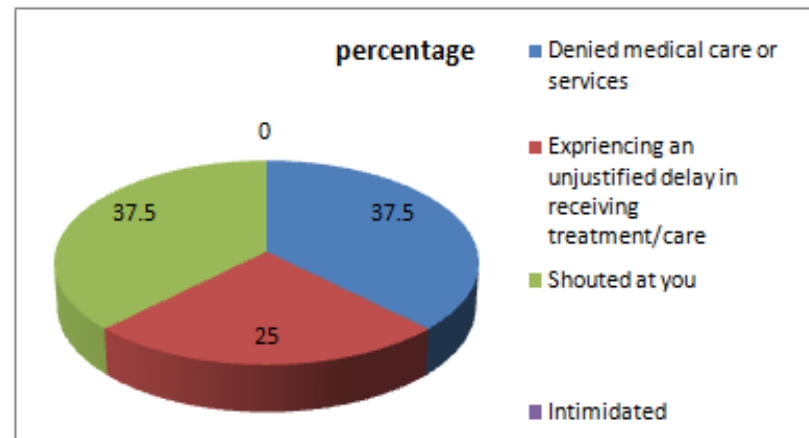


Figure 8: Circumstances that caused the subjects to change their residence

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Table 1: Age-wise distribution of the subjects

Age groups (in years)	Number	%
25-30	03	10.0
30-35	06	20.0
35-40	12	40.0
40-45	08	26.7
Above 45	01	03.3
Total	30	100.0

Table 2: Greater involvement for people living with HIV/AIDS

Greater involvement for people living with HIV/AIDS	YES		NO	
	Number	Percent	Number	Percent
Have you ever participated in government processes that concerned the interests and needs of PLHAs?	12	40.0	18	60.0
Do you think that it is important that PLHAs or representatives of PLHA organisations participate in government processes that are intended to assist PLHAs?	27	90.0	03	10.0
Do you know of anyone who is HIV positive who participated in a government process where they met with officials about the interest and need of PLHAs?	18	60.0	12	40.0
If yes, did the meeting or event result in government doing anything for PLHAs?	10	33.3	19	63.3
Did an NGO invite you to attend a meeting or workshop concerning the interest and needs of PLHAs?	15	56.7	13	43.3

Table 3: Access to health care services

ACCESS TO HEALTH CARE SERVICES	YES		NO	
	NUMBER	PERCENT	NUMBER	PERCENT
Have you ever been treated unfairly or badly by any health care worker due to your HIV status?	8	26.7	22	73.3
Have you ever been forced to pay additional charges for medical services due to your HIV status?	3	10.0	27	90.0
Do you feel that you have reasonably good access to the health services you need, including information, e.g about PMTCT, safe sex practices?	25	83.3	5	16.7

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Table 4: Testing for HIV and maintenance of privacy

TESTING AND PRIVACY	YES		NO	
	NUMBER	PERCENT	NUMBER	PERCENT
Were you tested for HIV without being told first	3	10.0	27	90.0
Were you forced into having a HIV test	3	10.0	27	90.0
Do you think this was a reasonable, acceptable amount of time or was the time too long	18	60.0	12	40.0
Did you receive counselling about the test before it was done	28	93.3	2	6.7
Did you receive counselling before being told your result	28	93.3	2	6.7
Did you receive counselling after you receive the results	29	96.7	1	3.3
If yes, did you understand what was said to you	28	93.3	2	6.7
Was any friend or family member with you when you went to be tested	30	100.0	0	0
If yes, was it a good thing	28	93.3	2	6.7
Has a health care worker ever told anyone else about your HIV status without your permission	6	20.0	24	80.0

Table 5: Personal liberty and security of the subjects

PERSONAL LIBERTY AND SECURITY	YES		NO	
	NUMBER	PERCENT	NUMBER	PERCENT
Have you ever been refused entry, removed from, or asked to leave a public place	4	13.3	26	86.7
Have you ever been forced to change your residence because of your HIV status	4	13.3	26	86.7
Have you ever been ridiculed, insulted, threatened with violence, or assaulted because of your HIV status	9	30.0	21	70.0
Have you ever been forced to disclose your HIV status	1	3.3	29	96.7
Have you ever been quarantined, detained, isolated or segregated because of your HIV status	2	6.7	28	93.3

Table 6: Right to employment

Right To Employment	Yes		No	
	Number	Percent	Number	Percent
Have you experienced bad or unkind treatment from your employer or fellow workers at work because of your HIV status	1	3.3	26	86.7
Have you ever been forced to be tested for HIV as a requirement for employment	2	6.7	25	83.3

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Table 7: Family and relationship

Family and relationship	Yes		No	
	Number	Percent	Number	Percent
Have you undergone mandatory HIV testing during pregnancy or illness of your child	8	26.7	13	43.3
Was treatment offered to reduce the chance of transmission from mother to child	14	46.7	14	46.7
Were you advised to not have any more children after being diagnosed	12	40.0	9	30.0
Have you been excluded from usual family activities since becoming HIV positive	8	26.7	22	73.3
Have friends or family member avoided you or visit much less frequently since being diagnosed	7	23.3	23	76.7
Were you financially dependent on your former partner	23	76.7	4	13.3
Have you lost financial support from your family	23	76.7	7	23.3

A very small percent (10%) experienced bad or unkind treatment from their employer due to their HIV status. Family relations are very badly affected because of the HIV status. 76.7% of the respondents had lost financial support from their family due their HIV status. 46.7% of women were not offered any treatment to reduce the mother to child transmission of HIV. Section 3 of the study was regarding different kinds of violence experienced by the HIV positive people. It was seen that none of the respondents experienced any kind of sexual violence from their partners. However 20% of them had been physically abused and 23.3% of them were a victim of psychological violence. 25% of the respondents had been physically abused by their spouse whereas the rest of them had been abused by others which included other relatives and family members. Most of the respondents who underwent physical violence reported of having physical violence by means of slapping and kicking with fist and other objects. 62.5% of the respondents reported of having physical violence frequently and whereas 25% of them reported it to be quiet often. Those who underwent psychological violence 57.14% of them had reported of getting from relatives and distant family members and neighbors. 42.8% reported of getting psychological violence from their own spouses. 42.5% of the respondents were subjected to intimidation and 28.6% underwent belittling whereas 14.2% were prevented from seeing family and friends.

DISCUSSION

This study showed average age of females having HIV was 38 years within the range of 35 to 40 years. 40% of the respondents staying with their partners and 10% were separated or divorced. This was in conformity with the study done in Indonesia which showed 33% to be staying together or 5% to be divorced or separated. The educational level as well as the type of occupation of the study population matched with Indonesian study (ICW). Majority (83%) of the respondents did not experience any work place discrimination as well as the treatment by the health care worker was in conformity with the Indonesian study. This study clearly showed that the respondents were ridiculed, insulted threatened with violence or assaulted because of their HIV status and few were forced to change their residence due to their HIV status. None of the respondents' experienced any sexual violence from their partners, but physical and psychological violence were experienced by them from the partners, relatives and neighbors. Most of them underwent physical violence as slapping and kicking with fist and other object frequently or often. Many were subjected to intimidation and belittling whereas few were prevented from seeing family and friends.

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Conclusion

Human rights violations among HIV positive women happen in one way or other. It appears that some amount of unjustified denial in providing medical service is shown to them. The severity of stigma and discrimination and treated badly while accessing medical care and health services which are indeed mainly as a result of the discriminative attitude and behaviour of the workers towards PLHAs. The low social status commonly associated with women was found to be exacerbated in women who were HIV positive. Women lack negotiation power concerning their sex lives such as requesting condom usage which significantly increases their risk of contracting HIV. HIV positive women are treated very differently from men in many developing countries. HIV related discrimination remains an enormous barrier to effectively fight the HIV/ AIDS epidemic. Progress has to be made in overcoming the violation of human rights by making the people aware of their rights in society. They need to be educated so that they are able to challenge the discrimination, stigma and denial that they meet in society. Finally a more enabling environment needs to be created to increase the visibility of people with HIV/AIDS as a “normal” part of any society.

Practice Points

- Human rights violation in HIV +ve women happens one way or other
- Women lack negotiation power concerning their sex lives
- HIV positive women are treated very differently from men
- HIV related discrimination remains an enormous barrier to effectively fight the HIV/ AIDS
- Women need to be educated so that they are able to challenge the discrimination

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