E-Application in Awareness Generation of HIV/AIDS at Dakshina Kannada District

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ABSTRACT

In Human Immuno-deficiency Virus and Acquired Immuno-Deficiency Syndrome (HIV/AIDS), the HIV virus attacks the immune system, which defends the human body against pathogens. When there is balance against the immune system, the people living with HIV/AIDS (PLHA) become more susceptible to opportunistic infections (OIs). The District of Dakshina Kannada is not exceptional from the above mentioned burning problems of HIV/AIDS infections. Due to its larger rate of national and international migration drastic change in the lifestyle of the people, improvement in industrialization and urbanization directly or indirectly contributing to transmission of virus. In this paper, the researcher had made an attempt to examine the Technology and e-applications, its effects on the people in creating awareness with regard to HIV/AIDS. The researcher's main aim is to know both the traditional methods and the present Technologies, and its effect in creating awareness and prevention of HIV/AIDS. The target audiences are general public-youth between the age group of 19- 29 years. By adopting field survey and interview researcher collected 25 samples, studied in depth and analyzed them systematically.

Keywords: HIV/AIDS, Stigma and Discrimination, people living with HIV/AIDS (PLHA), opportunistic infections (OIs).

1.INTRODUCTION :

The numbers of HIV/AIDS cases are increasing day by day which is very much associated with sex, blood, drugs and death evokes basic human fears and inhibitions. HIV/AIDS are dramatically reducing life expectancy, increasing the vulnerability by creating millions of orphans and diminishing the capacity of public and private sectors. HIV/AIDS begins with medical problem; this virus progressively weakens the body's ability to fight off disease and ultimately ends up with death of the patient. It is not only a medical problem but it also have effect on social, cultural, economic and psychological aspects which as to be tackled systematically. In AIDS prevention, some segments of the population are more prone to be engaged in risk behaviors than others, but it is behavior that puts a person at risk, and not their affiliation with group. For this reason, prevention and care would depend upon their ability to influence specific behaviors. The urge for self management in different situations is a basic drive of human beings. Technology is the creative expression of this drive. It is both a liberating influence and a constraint depending on the specific situation. Techniques that minimize the risk of contracting sexually transmitted diseases, including HIV infection. Sexual activity between two uninfected people is safe. Any sexual activity between two individuals (one or both of whom may be infected) which does not involve an exchange of semen, vaginal fluids or any other contaminated body fluids is safe; e.g., use of condoms is considered a form of safe sex. There is no permanent cure or take away the virus from the body, but multiplication of HIV/AIDS can be controlled and by treating the opportunist infections through medicine [1, 2].

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E- Application of communication in development has often been understood in a technical sense to refer to the variety of ways of providing information and 'messages' to people, and the different approaches and media 'channels' for this purpose. A wide array of Technological communication interventions have proven effective – from media and social marketing campaigns that awareness generation about HIV/AIDS, to peer education that supports HIV prevention efforts in particular high-risk groups. Communication interventions have promoted engagement and dialogue – particularly among peers – has been keys for changes in behaviour [2].

2. APPROACHES FOR HIV/ AIDS PREVENTION :

The Government of India launched a National AIDS Control Programme in 1987, which concentrated on surveillance, blood safety and information, education and communication (IEC). A comprehensive five-year strategic plan was launched during 1992—97 with World Bank credit as the National AIDS Control Programme Phase 1. The second phase of the National AIDS Control Programme (NACP-II) was formulated with the two key objectives of reduction of the spread of HIV infection in the country and to strengthen India's capacity to respond to HIV/AIDS on a long-term basis (NACO 1999a, 1999b). Specific objectives of this phase include interventions to change behaviour, especially among high-risk groups through targeted interventions, decentralization of service delivery through State AIDS Control Societies (SACS), protection of human rights, operational research and management reform. Inter-sectoral collaboration with all government departments, elected representatives of the people, chambers of commerce and industry, community-based organizations and the civil society in general is another feature of this phase [2].

During the past few years the programme has witnessed a rapid expansion and decentralization in the country SACS have been set up in 35 states/UTs and three municipal corporations (Mumbai, Chennai and Ahmadabad). These 38 societies have adequate financial and administrative powers to identifies and respond to local needs. SACS operate through the regular health infrastructure and have designated district nodal officers to carry out activities related to prevention and control of HIV/AIDS [3]. Considerable progress has been made in the past few years in implementing quality interventions. Two landmark policies, the National AIDS Prevention and Control Policy and the National Blood Policy, were adopted by the government in 2002. These are expected to be the framework on which the comprehensive national response to the epidemic will be based upon. The major approach of HIV/ AIDS prevention has been developing awareness, especially among the youth between the age group of 15-49, are more vulnerable age group though mass media. IEC (Information, Education and Communication) techniques have been used as a major strategy of prevention programmes in India.

3. INFORMATION EDUCATION AND COMMUNICATION :

Under IEC activities, multimedia campaigns are being taken up. Special communication packages are developed for vulnerable groups like sex workers, IDUs, truckers and street children. Focused radio programmes are broadcast on a regular basis to provide information about prevention and control of HIV/AIDS. Field publicity units and the song and drama division have taken extensive campaigns in rural areas. AIDS hotlines with the 1097 toll-free numbers have been established in major cities in the country. Another example of a successful programme for the youth has been the Universities Talk AIDS (UTA) programme, which covered 3.5 million students in 4,044 institutions in the country. This programme was launched in 1991 and implemented by the National Service Scheme (NSS) with assistance from the WHO and NACO. The programme was aimed at reaching all universities and 10+2-level higher secondary schools. Along with a training manual in English (translated into various regional languages), a lot of text material was produced and distributed to students. The evaluation reports of the UTA programme by the WHO and other professional agencies indicate that the programme was successful in creating awareness about HIV/AIDS and developing a positive attitude towards sex in both boys and girls [4].

(a)Information (by using technology): The technology used to communicate the public in any field has a significant role to play in creating and sustaining public opinion. And of this kind will work effectively and can bring tremendous change in the field of HIV/AIDS epidemic [5, 6]. The media can facilitate certain trends and phenomenon in the community or society that facilitate the spread of

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HIV/ AIDS and inform the public about them. They help in educating the masses about the risk factors and about the importance of prevention. In doing so, they help create public awareness and mobilize public opinion against cultural practices. And this will play active role in sensitizing people on the burning issue like HIV/ AIDS epidemic.

(b) Prevention Education: Education in the context of HIV prevention has mainly been targeting the youth. Specific information courses that are an integral part of the school curriculum were developed in many countries. It was aimed at reaching out to students and educators. All these efforts have highlighted the differences between the education levels, social/cultural background and local situations.

(c) Communication (non-media): Communication here refers to the exchange of information between both professional information advisers and counsellors. In this context emphasis has been placed upon counselling. It is recommended that counselling should always accompany testing. This is to give them the right information and also to help them make future plans. Advocacy is also needed in areas of safe attitudes and practices, including the use of condoms [6].

A number of factors determine the usage of mass media in reaching out with the message of AIDS. Important groups are not reached out by the Technology and media prevention messages due to multiple factors. These can be politics, due to remote area without basic amenities and the attitude of the authorities. Communicate in minority languages to reach out people was difficult.

4. MEANS OF COMMUNICATION :

A. Traditional Means: Traditional means of communication is a specific culture for communication of ideas and dissemination of information. When we discuss the components of culture such as art, mythology, religious practices, family, social systems, the role communication plays in the perpetuation of culture [7].

Folklore: Folklore is one of the oldest means of communication by the people. Folklore refers to word of mouth from person to person, generation to generation information is passed by the people by means of folk tales, riddles, costumes, dances, dramas, songs, etc Folk medicine refers to the various means of communication available to the rural and tribal people which can be performed without much expenditure or training. Folk media are easily accepted by most Indian masses and it various from community to community.

Storytelling: The story teller uses histrionic gestures and rhythmic language to tell the story. The audience responds with laughter and body movements. Themes of the stories can well bring forth the values that are held in a particular community. The same method is used as case studies in present context to pass information to people, to be model or understand better and effectively the situation.

Tamasha and Nautanki: Entertainment is part and parcel of every people from generation. Tamasha has been traditionally used as a medium of entertainment and to communicate religious stories. Its contemporary use includes creating social and political change by generating public opinion. Nautanki is a north Indian folk drama performed in an open theatre. This folk form has a narrator called sutradhar. The dialogues are sung in popular folk melodies and this played a major role of developing public opinion on particular issues. People after finishing their job and during their free and leisure time needed some kind of entertainment and these Tamasha and Nautamki were the only source of entertainment for them. So to have this, people used to walk miles together and reach to the place of tent were they used to get some sort of entertainment and these sources were able to build a public opinion.

Jatra's and street plays: Jatra literally means 'journey'. It is a popular folk theatre helped to popularize the Bhakti cult among the masses. During the freedom struggle Jatra was used for popularizing the movement. The streets plays are organized in the public square were people are gathered in large number to get their attention on the issues, within short period, low cost and effective way. These street plays are also relevant to the present situation to create awareness among people on burning issues.

Folk Music, Riddles and Quotations: Folk music, riddles and quotations are powerful traditional media's in India. The rural folk of India appreciate these forms of communication regardless of their economic condition or educational status. Even though the music, riddles or quotes are old and in

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their vernacular language it will be relevant to present sophisticated society too. These forms are rooted in the culture and tradition of the community and have its own significance.

Puppetry, Pictures, Posters and Cartoons: Puppetry is essentially a folk art used since several centuries to relate myth and legend. The medium has undergone change and is being used in many present day situations to impart education, entertainment and even therapy. Pictures and posters with multi color fusion attracted the children as well as adults towards the message comprised in it. All this was taken over by present day cartoon net work and its impact is more on children.

B. Modern Means of Communication

The modern means of communication have been made use of extensively in health interventions. Mass media are used to sensitize populations on the threats and the measures they can adapt to for disease prevention. Polio campaigns, the DOTS programme for tuberculosis, early detection of cancer are some campaigns that have made an impact on the masses. Let us take a look at these; [10].

Radio: Radio is a cheap and useful communication tool. Almost every household in the Indian society, both urban and rural, owns one. Considering the affordability and accessibility, radio is the most popular medium in India.

Print: Print Media plays a significant role in creating and increasing awareness on different issues of public concern, including HIV / AIDS among the people. Press campaigns featuring modes of transmission and prevention are a regular feature. Pamphlets, handouts, stickers, flash cards, wall hangings and posters are developed for greater reach.

Television: Television could be an effective means of communication for HIV/AIDS prevention. Television is both audio-visual, so it is a powerful means of communication.

Internet/ Websites: Internet is a good option for people who do not have much time to commute from one place to another place to collect data and compare it. With the advancement in technology the world has become a smaller place where one person can access information about the other country sitting on the computer. This advancement in technology has made the work of researcher's easier and less time consuming. Internet system plays a vital role in disseminating information, research findings and results [10].

Telephone/Mobile phone: Toll free numbers also play a significant role when people want to communicate directly with officials and experts. Mobile phone with wide advance will chip in every day. The advance mobile will have all features from calling, messaging and internet facilities. Almost all people do their daily trip to school/college/workplace with their trusty mobile phone. These pocket-sized tools can do anything from make a standard phone call to surf the web. The presence of cell phones presents a host of options and challenges for today's youth.

5. GENERAL IMPACT OF TECHNOLOGY (MOBILE) :

The impact of present technology especially the mobile phone on people are; It contact easily with the people, solution for all day to day problems, use of internet to search out the useful information, use the mobile as minicomputer, use dictionary and thesaurus, to get up-to-date news, to listen F.M radio for entertainment, to make photos and movies, to use blue tooth infrared technology to transfer the data from mobile phone to mobile phone or to computer and computer to mobile without any cost in few seconds. In it, data can be transferred even from other mobile or computer which is 15 to 20 feet away. Along with this the device can handle and move easily because it is light weight and so.

According to Walsh (2007) the mobile phones use was believed to provide numerous benefits to user and is an intrinsic part of most young people's lives. Levinson (2004) claims the mobile phone lets humanity enter a new mode of interaction, one different from previous methods of communication. Communication was in-person for most of human existence, which allowed the full range of human communication but was restricted by physical proximity. Communication then came to include writing, which allowed communication to travel time and space but lost some of the depth of face-to-face interaction. The final stage, according to Levinson (2004), involves the technologies of the television, the internet, and the telephone, with the mobile phone allowing people to leave the home with the full conveniences of the phone. Furthermore, the most recent communication technology of the smart-phone combines the phone, internet and even television into a single mobile device and allows for interactions in a way unlike previous modes of communication. In this stage of communication, people can share ideas instantly across long distances; indeed, there is almost no

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place one can truly avoid communication. Arminen (2007) writes that, "Mobile devices allow new emerging types of communication that enable or contribute to the development of new forms of social action having an impact on the patterns of establishment and maintenance of social networks". Likely, the largest impact is the ability to continually be in touch with others. Turkle (2011) writes extensively about the social impacts on both individuals and society of adopting mobile phone technology to remain in touch almost everywhere. This connectivity can be a positive or negative depending on the situation an individual is in at the time. In the case of an emergency, the ability to contact help is extremely beneficial.

6. IMPACT OF TECHNOLOGY (MOBILE) IN CONTEXT OF HIV /AIDS :

To understand the immense challenge that communication strategies face in the event of HIV and AIDS, one needs to understand the behaviours it is addressing. They are largely sexual behaviours which are private and personal; behaviours that are habitual and repetitive (such as drug abuse); behaviours that satisfy physiological and psychological needs; behaviours whose discussion is taboo in most societies; behaviours that are moralized upon and stigmatized by society. Those who are involved in HIV prevention are well aware that success of any HIV prevention strategy can be only when there is a response efficacy. Another task at hand for communication specialists is reaching out to population groups that are difficult to reach by the conventional media channels. Commercial sex workers, truck drivers, and migrant populations are some such groups who are in need of special interventions. While choosing the medium of communication one should keep in mind the following factors: Type of audience, Sensitivity of the issue, Complexity of the issue, Cost of the medium; Prevailing social norms etc. The targeted audience has been shown to be of importance in communication for HIV prevention (Kakkar, 2005). Usually when messages are created for some vulnerable groups, they tend to bring forth an adverse response from the general population. They tend to disregard the messages as they link the risk not to certain behaviours but to certain groups [10].

7. TECHNOLOGY (MOBILE) CAN CHANGE BEHAVIOUR :

Behaviour Change Communication (BCC) is an interactive process with communities (as integrated with an overall program) to develop messages and approaches using a variety of communication channels to develop positive behaviours; promote and sustain. Stigma and discrimination are still an everyday experience for PLWHA (People Living with HIV and AIDS) and vulnerable populations, yet their complexity and diversity in practice, coupled with the failure to develop a greater understanding of their social roots, means they are often not addressed effectively. Stigma and discrimination are an example of where communication can be both part of the cause and the cure of social barriers. Stigma reflects existing social inequalities, since HIV is often associated with groups that are already marginalized. Few campaigns against stigma have been successful in breaking the silence around HIV/AIDS and to create awareness among the public [12].

8. CONCLUSION :

Researchers have highlighted the need for a systematic approach in communication strategies for HIV/AIDS prevention. Facilities which are available like Integrated Counselling and Testing Centres (ICTCs) are doing tremendous job in prevention by counselling. Success of a communication strategy would thus be assessed on the basis of outcomes, i.e. how many more youth are going to access the services of an ICTC in the specified period. There is a need of messages to reach out to the targeted audiences, communication strategies spotting out all those who are in the age of risk. So the communication strategies have to address the special issues of the vulnerable groups. It has a major role to play in combating stigma and discrimination. There is lot of traditional methods but because of stigma and discrimination and people hardly speak about risk behaviour in general public and as a result the transmission of HIV is not controlled in the society. Now new strategy like use of mobile phone will definitely help in reducing new HIV cases in the society. Just dial; use SMS or forward the message which will cost nothing to you and me. Lets catch hold the pluses of the youth and reach them by their own method.

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