

Public Perceptions of HIV in Pune

An HIV and AIDS survey conducted by *Wake Up Pune*

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Introduction

This report presents some of the findings of a survey among the general population of Pune. The research was conducted by *Wake Up Pune* with technical input from NARI (National AIDS Research Institute).

This survey was conducted at the launch of *Wake Up Pune* as an evaluation of the public perceptions of HIV. The object of the research was to assess levels of knowledge and awareness about HIV/AIDS in populations and communities in Pune to gain information valuable in making future plans to control the spread of HIV in our city.

Background

Launched in November 2006, *Wake Up Pune* is a coalition of NGOs and representatives from civil society working to spread awareness about HIV and AIDS in the city of Pune, India. *Wake up Pune* is the first and only campaign directed across the entire city of Pune targeted at alerting people to the risks of HIV, attempting to bring about a change in risk behaviour and most importantly in breaking the cycle of Silence, Ignorance, Fear, Stigma and Discrimination surrounding HIV.

Methods

The survey was conducted from November 2006 to January 2007. The results were obtained via person to person interviews. Approximately 4,000 people from across the city were interviewed. The participants were from both captive audiences in places that *Wake Up Pune* was operating, including school and corporate events and noncaptive audiences, including floating populations at stations and markets in Pune.

The survey tool was compiled by the member NGOs with technical assistance from NARI.

Respondent Statistics

3,806 people were interviewed for this survey. 47.7% of participants were male and 49.1% were female. 90% of respondents lived in Pune and 4% were from other parts of India or around the world. 58% were unmarried, 33% were married, 1.5% lived with a partner but were unmarried, 2% were widowed and 1% were divorced.

The participants were mostly from the young student and working age population. 78.7% were younger than 30 and 57.8% were between the ages of 18 and 45. [fig. 1]

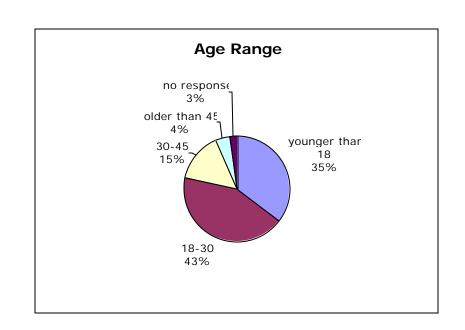
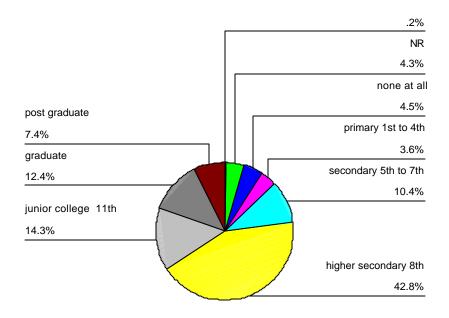


Figure 1

The range of education received was split across all levels of schooling. [fig. 2] The majority (57.1%) had completed the middle range of education having received schooling up until higher secondary (8th to 10th standard) or junior college (11th and 12th standard). Almost exactly the same amounts of people had received secondary (5th to 7th standard) or below education (18.2%) as had achieved graduate or above (17.8%)

Figure 2

Highest Education Received



Both high levels of knowledge and low levels of action were reflected across educational and age divides. A higher educational background did not strongly correlate with greater information and sympathetic behaviour regarding HIV. There was no evidence that people from higher educational backgrounds were more active in combating HIV and stigma in society and in their own lives. In fact it is often the case that greater levels of apathy and stigma about HIV are present in the middle and upper classes. This shows that HIV awareness and responsibility is not only an issue for the lower and undereducated classes. It is further worrying that such low levels of engagement and confrontation with HIV is present among the youth as they are the ones who must face this epidemic in the years to come and have the power to control the spread of HIV.

Sources of HIV knowledge

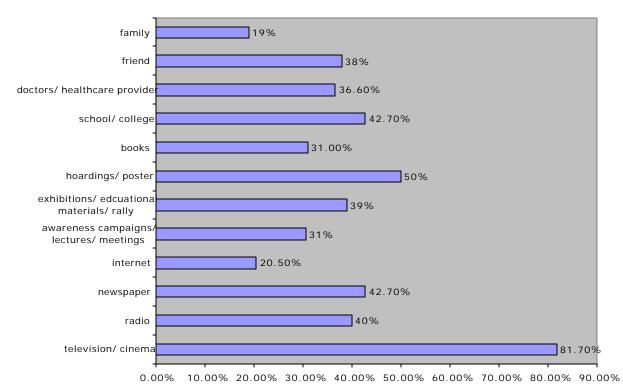
The majority of people had heard about HIV from television or cinema (81.7%). [fig. 3] A large percentage of people had also heard about HIV from other media sources like radio (40%) or newspapers (42.7%). The low percentage of people hearing about HIV from the internet (20.5%) is probably due to low levels of net access across the general population. Surprisingly small percentages of people had heard about HIV from such official sources of knowledge as books (31%) and doctors or healthcare providers (36.6%).

Whatever people may express their personal views about HIV to be, the stigma of talking about HIV/AIDS is shown in the sources of where participants receive their HIV knowledge. **People are not talking about HIV with those that are close to them.** Only 38% said they received knowledge about HIV from friends and only 19% of respondents had received information from their family. Though almost 80% of people surveyed were under the age of 30, only 43% had heard about HIV in their school or college. This result is probably related to the general policy against sex education in the state of Maharashtra.

Significantly for future investigation into the effects of awareness campaigns on perceptions and actions on HIV, in the time before *Wake Up Pune* began operating, only 30% of participants had ever heard about HIV from awareness campaigns, lectures or meetings.

Figure 3

Sources of HIV knowledge



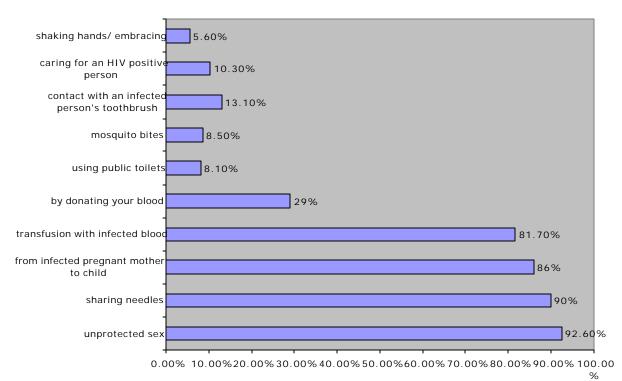
From where have you heard about HIV

Knowledge

The levels of knowledge about HIV transmission and protection were relatively high. The majority of people in Pune can correctly identify the correct ways HIV is transmitted from person to person. Most people knew that HIV can be transmitted through unprotected sex (92.6%), sharing needles (90%), a transfusion with infected blood (81.7%) and from an infected mother to her child (86%). [fig. 4] In addition only a small percentage of respondents mistakenly believed HIV could be transmitted through methods such as close personal contact like shaking hands/embracing (5.6%), through mosquito bites (8.5%) and by using public toilets (8.1%).

Figure 4

Knowledge of HIV transmission



In which of the following ways can HIV be transmitted from person to person

There were also high levels of knowledge about correct ways to protect oneself and others are getting infected with HIV. The majority of people knew that getting tested for HIV (88.4%), knowing your partner's HIV status (86.4%), using condoms every time (83.1%) and testing a pregnant woman for HIV (87.4%) were possible methods of protection from HIV infection.

The results showing high levels of correct information about HIV in the general population are positive. They show that there is relatively high awareness about HIV in Pune.

However there were slight inconsistencies between knowledge of transmission methods, beliefs about who is at risk for HIV and beliefs about effective methods of protection from HIV infection. 90% of people knew that sharing needles a possible way of HIV transmission and 87% of people thought that someone who shared needles was at risk for HIV but only 75% of people reported that using sterile needles and syringes was a way of projection from infection. 93% of people knew that HIV can be transmitted through unprotected sex and 86% of people thought both partners in a relationship being faithful to one another was a good way to protect against HIV but 23% of people didn't think that a person married to someone with multiple partners was at risk for HIV.

Attitudes

The overall attitudes toward people living with HIV were positive. Most people thought that HIV positive people should have equal rights as other citizens (93%), should be allowed to remain at work (89%) and shouldn't be separate from their families (90%). [fig.5] However, there are still some worrying questions to be asked from the survey results. Why do 27% of people think that people living with HIV do not deserve empathy? And why do 14% of people still think HIV positive people deserve to die?

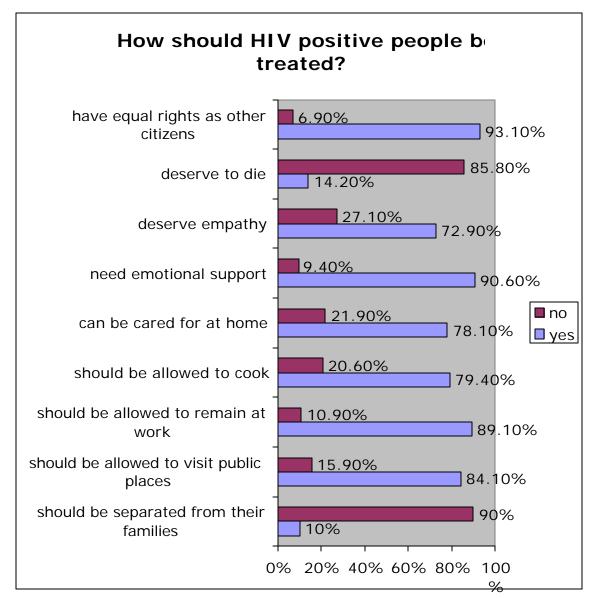


Figure 5

Stigma and Ignorance

As discussed in the 'Sources of HIV Knowledge' section, participants are not talking about HIV with people they are close to (family and friends) and sources of authority (school/college and doctors). Interestingly this silence is not reflected in ignorance of knowledge about HIV transmission; as shown in the 'Knowledge' section, the overall levels of knowledge about methods of transmission and protection from HIV infection were high. Similarly respondents reported generally positive attitudes toward how people living with HIV should be treated. Where the effects of a reluctance to talk about HIV are shown and where the underlying stigma toward people living with HIV is betrayed is in participants' responses to questions about practical knowledge, behaviour and conduct rather than in questions about their awareness.

While these results may suggest decline in stigma in society, the reality of HIV fear and discrimination in communities are very different, as underlying results in the survey show. What the survey actually demonstrates is that people have low perceptions of HIV stigma generally in society. Participants respond differently and more favourably to questions about HIV in general terms than questions that pinpoint specific situations. HIV intolerance becomes apparent in answers to questions about HIV in personal interactions.

Furthermore if these high levels of knowledge and reported high levels of positive attitudes toward people living with HIV were actually translating to lower levels of stigma and discrimination and a greater awareness about the risks of HIV in communities and society then we would not see such large inconsistencies in people's perceptions of the realities of HIV. 61% of participants said they didn't know anyone with HIV despite the fact that there are estimated to be at least 80,000 people living with HIV in Pune (1.8% population according to a NACO 2002 report). It displays the fact that people living with HIV/AIDS are still not living openly and positively in society. 56% of people said they had absolutely no risk of becoming infected with HIV. While people may know the risks of HIV and the best ways to protect themselves, they aren't acting on this knowledge in their everyday lives. This is because people still don't see HIV as a problem that affects *them*.

Practical Knowledge and Behaviour

While people's theoretical knowledge about HIV was high, their practical knowledge about HIV testing and treatment was much lower. Only 64% of participants knew that there are treatments to prolong the lives of people living with HIV. Only 52% knew where to go to receive ART treatment to slow the spread of the virus. While 88.4% of people thought that getting an HIV test was a good way to protect oneself or others from getting infected with HIV, only 64% knew where to go to get an HIV test and only 28% had ever motivated someone to get an HIV test.

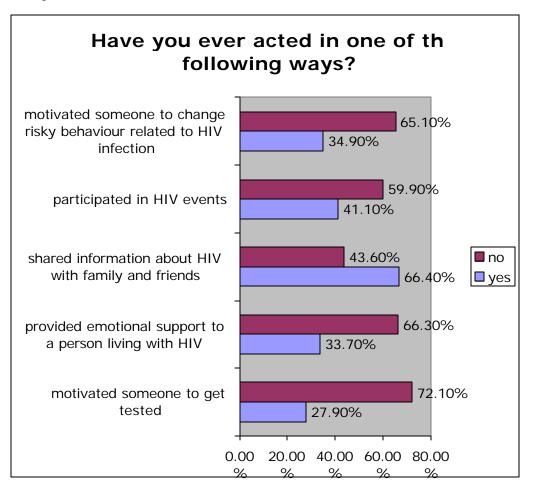
While 85% of people knew that close personal contact such as shaking hands with or hugging a person with HIV or AIDS is not a risk of contracting the virus, 23% still said that someone living in the same house with an HIV positive person was at risk for HIV and AIDS, 28% of people wouldn't buy vegetables touched by a shopkeeper who is known to be HIV positive and 28% of people said they would be afraid to let their child play with another child who had HIV/AIDS. When asked if they would be ashamed to be seen in public with a friend who is HIV positive, only 75% of people said no.

Conduct related to HIV

People's high levels of knowledge about HIV and positive attitude toward HIV positive people has not translated into action in their own lives in fighting the spread of HIV and stigma and discrimination. While 90% of people said that HIV positive people deserve emotional support only 33.7% said they had provided emotional support to someone living with HIV. [fig. 6] 35% of respondents said they had not tried to get someone to change risky behaviour despite the fact that at 80-90% of people knew the correct methods of HIV transmission and the ways to protect oneself and others from infection.

For future investigation into the effects of awareness campaigns on perceptions and actions on HIV, prior to the start of *Wake Up Pune*, 41% of people said they had never participated in an HIV related event.





Summary and Implications

The results show that people's sources of HIV knowledge are widely from media sources rather from expert or personal sources. Despite a widespread culture of silence on HIV on a person-to-

person basis there are high rates of knowledge about methods of HIV transmission and protection from infection. However, despite encouraging levels of knowledge, the survey displays worrying results about the general population's perceptions on HIV. The survey shows discrepancies that suggest that people's high levels of knowledge about HIV and positive attitude toward HIV positive people has not translated into fighting the spread of HIV and

stigma and discrimination in their own lives. There is still widespread fear of HIV among participants if it personally affects them.

It is not clear from the survey if this lack of action is the product of fear resulting from stigma and prejudices related to HIV or due to general indifference. However, even if this idleness is due to overall levels of apathy, this further demonstrates how the majority do not view HIV as a problem in their own lives and are not aware of or are not accepting the scope of the epidemic and the dangers that HIV poses now and in the future. As shown in the survey, most people aren't hearing about HIV from people that are close to them, don't think they know any infected persons, and don't think they are at risk for HIV.

This survey prior to the start of the *Wake Up Pune* campaign highlights the need for HIV campaigns that focus on fighting the underlying prejudices, stigma, discrimination and silence that aid the spread of infection and the ostracisation of people living with HIV in society. The results demonstrate that it is not enough to only provide information on methods of HIV transmission and protection. There must also be approaches and education at all levels in society aimed at reducing underlying attitudes of stigma and encouraging action to fight HIV.