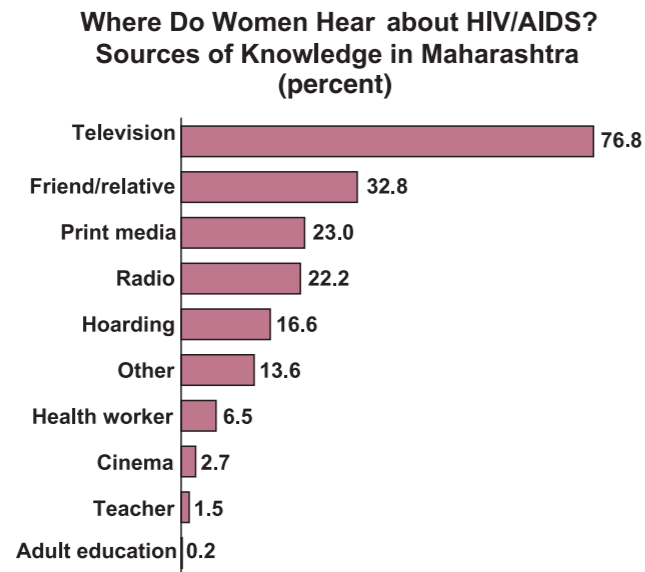


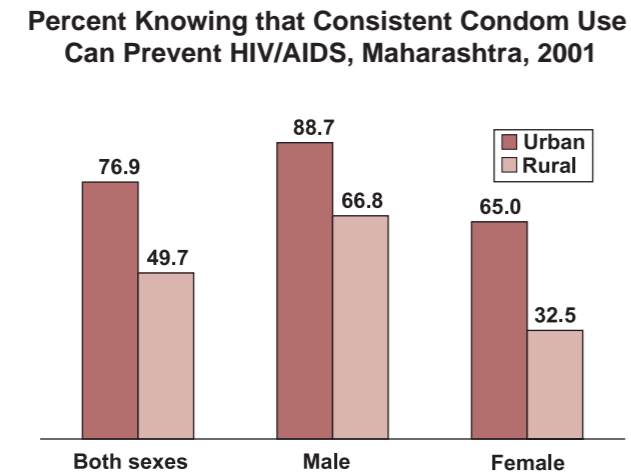
**People Need HIV/AIDS Information**

For people to take steps to avoid HIV/AIDS, they must first hear of it. In Maharashtra, 82 percent of adults have heard of the disease. Television is the most likely source of HIV/AIDS knowledge, followed by friends or relatives and print media. Only 6.5 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)

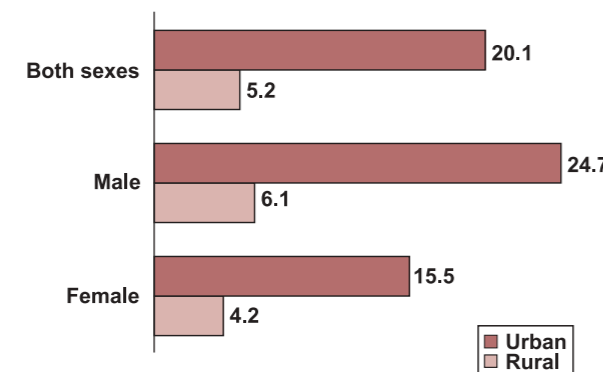
Personal experience with the disease is becoming more widespread, according to the Behavioural Surveillance Survey (BSS) 2001. Overall, 20.8 percent of BSS respondents knew of someone who had died of AIDS, 30.6 percent in urban areas and 14.6 percent in rural areas.



Behavioural Surveillance Survey 2001 National AIDS Control Organisation

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

**Percent Knowing a Place Where They Could Be Tested for HIV/AIDS, Maharashtra, 2001**



Behavioural Surveillance Survey 2001 National AIDS Control Organisation

Awareness of the use of the condom as a means to prevent HIV/AIDS was far from universal. In the rural areas, two-thirds of women and one-third of men were not aware of its role in disease prevention.

A majority felt it was possible to be tested confidentially for the disease (58.6 percent), but only 20 percent in urban areas and five 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 Maharashtra and is now a genuine epidemic.**

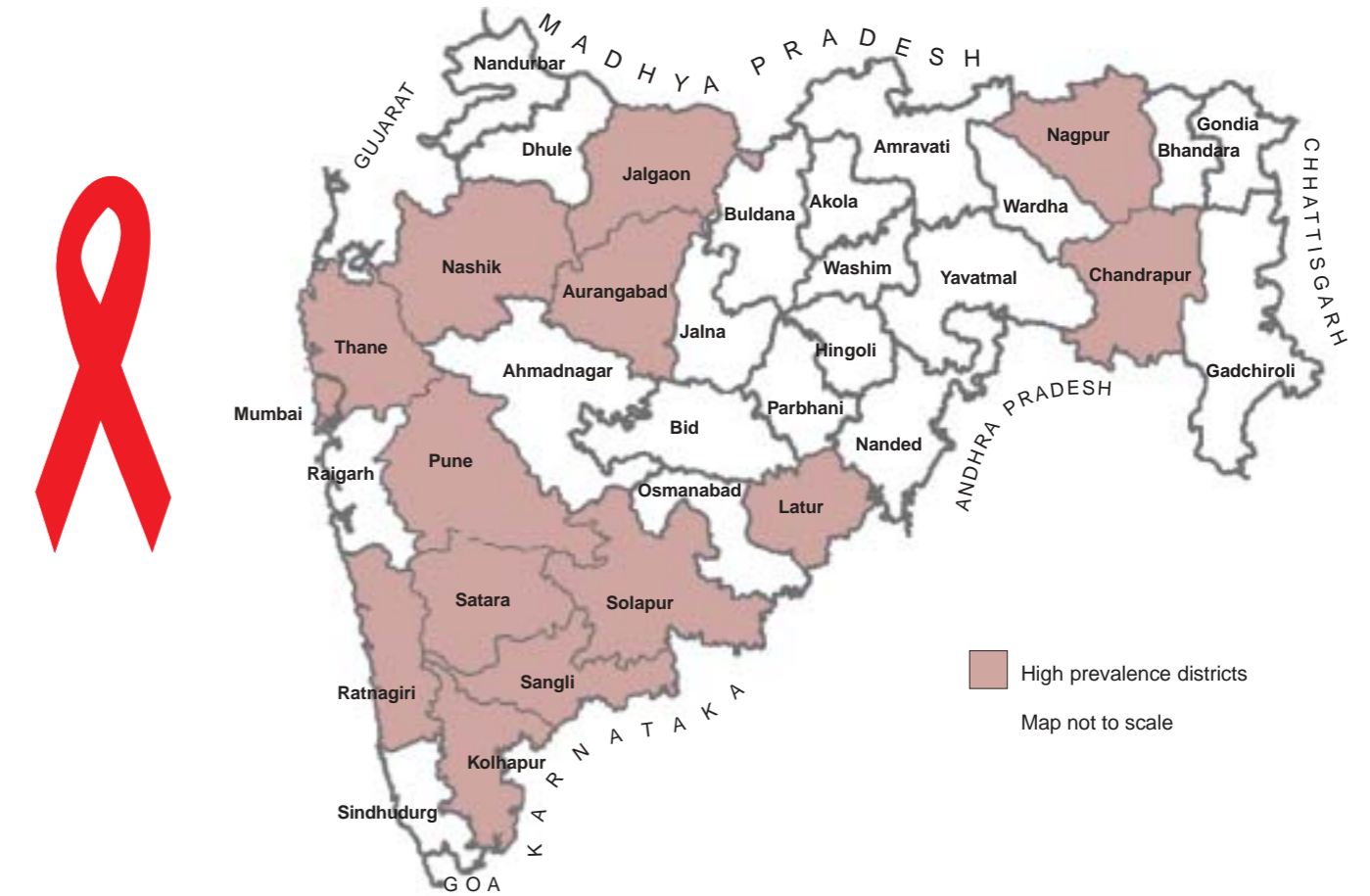
This series of factsheets on the six hard-hit HIV/AIDS states (Andhra Pradesh, Karnataka, Maharashtra, Manipur, Nagaland and Tamil Nadu) are available in English and the respective state language and are free of charge to individuals and organisations. For additional copies, please contact the Population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

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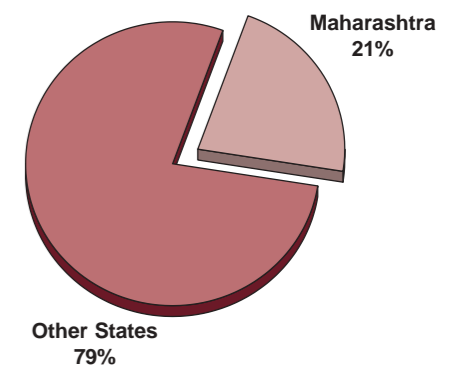
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**Maharashtra HIV/AIDS in India The Hard-hit States**



**Maharashtra was one of the earliest states to be affected by HIV/AIDS in India and one of the first to be considered high prevalence. The first AIDS case in the state was detected in Mumbai in May 1986. Through mid-2003, 21 percent of the country's reported cases of AIDS was in Maharashtra. 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. Maharashtra is now on the same path. But HIV can be prevented by intensifying the current HIV control programme. 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.**

**Maharashtra's Share of India's Reported AIDS Cases, 1986 - 2003**



National AIDS Control Organisation

### How Far Has AIDS Spread?

Officially reported AIDS cases from hospitals and clinics are only a small fraction of the total. However, their rise from 4,459 in March 2001 to 11,829 through August 2003 shows that the disease is quickly gaining ground. Of those 11,829 cases, 1,160 were added in the first eight months of 2003 alone. Mumbai accounted for 2,595 of all reported cases.

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.

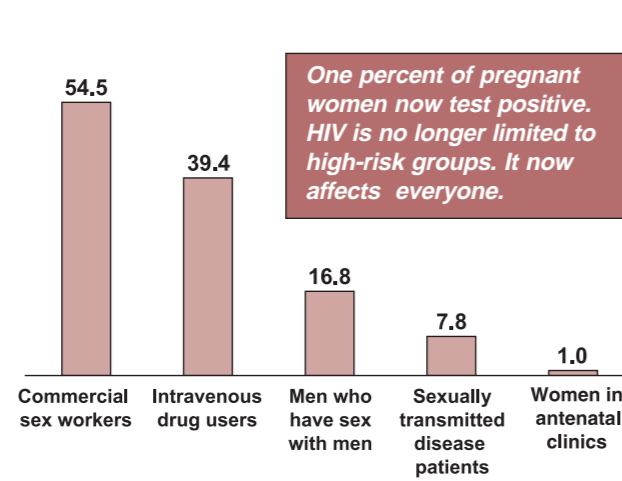
### Measuring the Spread

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 sexually transmitted disease (STD) clinics, commercial sex workers (CSWs), patients at intravenous drug user (IDU) clinics and men who have sex with men (MSM). Women treated in antenatal clinics (ANCs) form the low-risk group.

The National AIDS Control Organisation (NACO) classifies the HIV/AIDS epidemic in Maharashtra 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 Mumbai, rates for ANC women as high as three percent were recorded in 2002. This is a very high rate for women in the general population, who typically do not engage in risky sexual behaviour and whose risk is considered low.

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

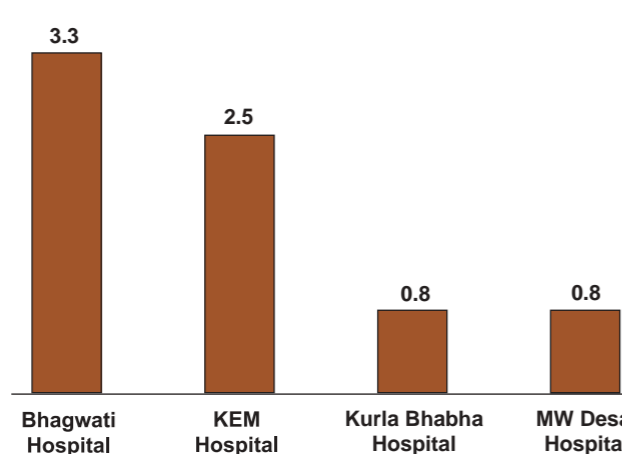
Percent Testing Positive for HIV at Sentinel Sites, Maharashtra, 2002



National AIDS Control Organisation

**Of the 49 high prevalence HIV/AIDS districts in India, 14 are in Maharashtra...**

Percent of Pregnant Women Testing Positive for HIV, Mumbai, 2002



National AIDS Control Organisation

**A true AIDS epidemic is not a future possibility for Maharashtra. 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 the disease through their own behaviour, but through that of their husbands.

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

The high rates of infection for those with less education show the importance of educating women and their partners about the dangers of HIV/AIDS.

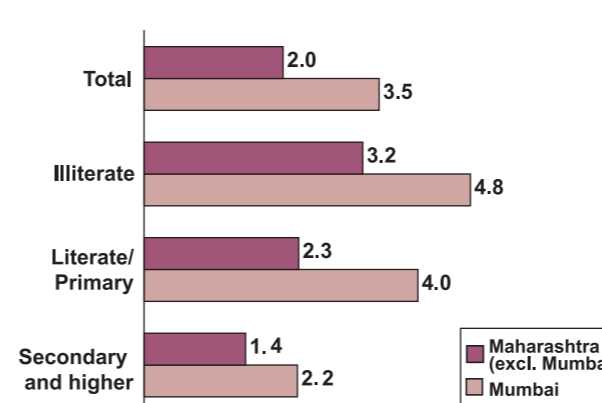
### Added Risk with STDs

Sexually transmitted diseases (STDs) increase vulnerability to HIV infection. Contrary to the notion that AIDS primarily affects urban areas, high levels of HIV have been found among rural STD patients as well. This raises a serious public health issue as rural populations have less access to medical diagnosis and treatment, including STD services.

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.

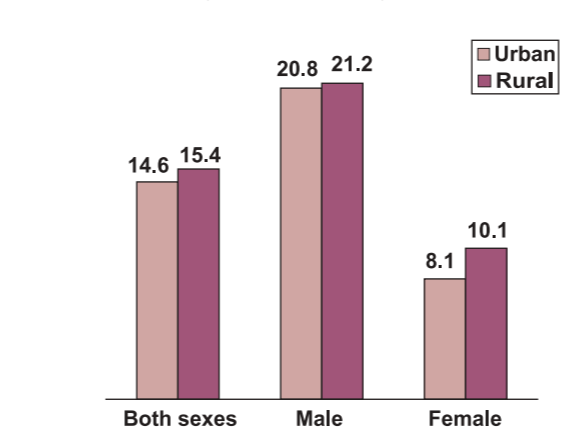
**"Bridge" groups, such as husbands who use the services of sex workers, infect their wives with HIV who then pass the disease to their babies. The epidemic is complete...**

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



National AIDS Control Organisation

Percent of STD Patients Testing Positive for HIV in Urban and Rural Areas by Sex, Maharashtra, 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 stigma 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 paints a clear picture of 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.

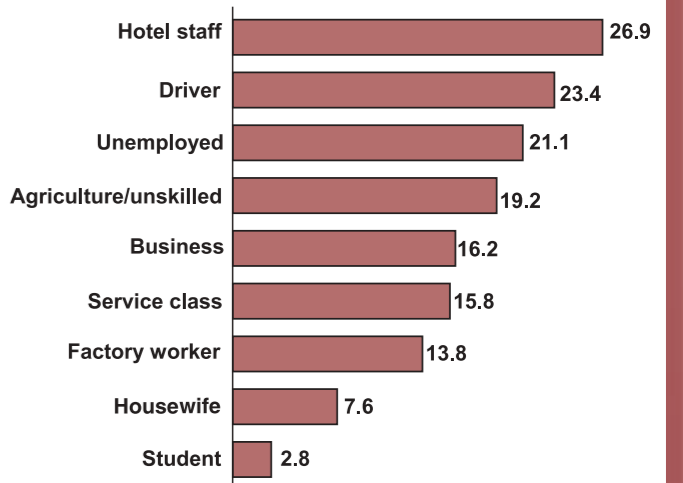
Workers in the hotel and tourist industry have the highest prevalence of the groups tested in Maharashtra, followed by drivers and the unemployed. Truck drivers who travel distances to many locations bring the infection with them, often to areas where the disease has not yet begun. Migrants in search of employment come to Maharashtra already infected or contract the disease after arriving. This group is often without work for some time and vulnerable to HIV.

A telling statistic is the high prevalence of HIV discovered among housewives at 7.6 percent. This high rate of infection is yet another signal of the expansion of HIV into the general public.

### 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 increased, one-third of clients of non-brothel-based female sex workers (FSWs) do not use a condom. One-fourth of those utilizing the services of brothel-based FSWS also fail to use a condom. This is a critical issue in that relatively high use of the condom is not enough. HIV will spread steadily with *anything short of 100 percent use*.

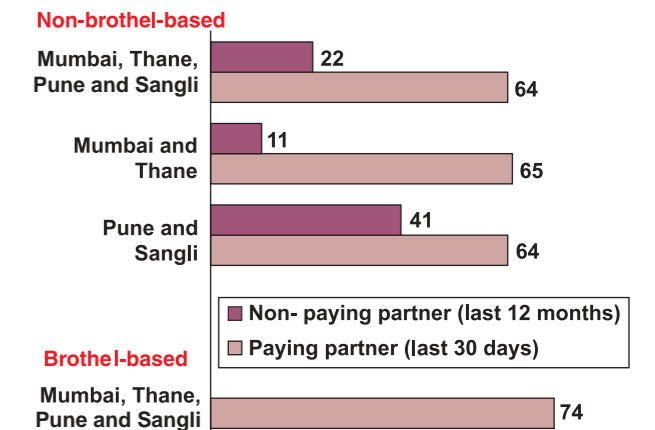
Percent Testing Positive for HIV at STD Sites by Occupation, Maharashtra, 2001



National AIDS Control Organisation

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

Consistent Use of the Condom by Clients of Female Sex Workers, Maharashtra, 2001 (percent)



Maharashtra State AIDS Control Society and Mumbai District AIDS Control Society

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