

“Positive Living” among women infected with HIV.

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Abstract- INTRODUCTION- An estimated 2.5 million Indians live with HIV/AIDS. Spread primarily through heterosexual contact, the epidemic is shifting toward women, 29% of whom are currently infected, with still more cases going unreported. OBJECTIVES: The study was intended to assess' positive living among HIV infected woman and to associate positive living with their demographic variables. MATERIALS & METHODS: A cross sectional study among 200 women infected with HIV attended ART centre, Govt General Hospital, Chennai. TN, India. Their positive living was assessed by Standard Becks Self Reported hopelessness Inventory Scale. RESULTS: The mean score of positive living by Hopelessness was 11.355 with Standard Deviation of 2.53357 and a Median score of 11; most of the women (75%) were moderately Hopeless and none of them were in minimal Hopeless. Computed χ^2 value indicated that there was no statistically significant association of positive living with any of their demographic variable at $p < 0.05$ in women. CONCLUSIONS: The study findings revealed that majority of women(75%)infected with HIV were having moderate and 11% had severe level of Hopeless, which suggests to implement relaxation Therapy further to them, and none of the Demographic variables played a significant role on their positive living among women infected with HIV. RECOMMENDATIONS(1)Formulate an intervention strategy like counseling, Relaxation therapy to them to reduce their Hopelessness.(2)Promote consistency in condom usage to them during their Sexual Intercourse with partners.(3)Promote sexual Assertiveness among them to prevent increase in Viral Load.(4)Encourage Adherence to ART among them.(5)Empower them to approach life optimistically.

Index Terms- Positive Living,HIV,Women,infection

I. INTRODUCTION

An estimated 2.5 million people living with HIV/AIDS, India has the third high-test number of HIV-infected people in the world, despite reductions in prevalence among the general population, the percentage of all infections occurring among Indian women is continuing to raises. An estimated 2.5 million Indians live with HIV/AIDS. Spread primarily through heterosexual contact, the epidemic is shifting toward women, 29% of whom are currently infected, with still more cases going unreported.

Depression is one of the most prevalent psychiatric diagnoses seen in HIV – positive individuals. Women with HIV are about four times more likely to be depresses than those who are not infected Depression is highly prevalent among women living with HIV which is still under diagnosed and undertreated,

and there is a need to incorporate mental health services an integral component of HIV care.

Stigma shapes the lives of people living with HIV and may affect their willingness to seek medical care. But treatment delays can compromise health and increase the risk of transmission to others.

Enacted and internalized stigmas were correlated with delays in seeking care after testing HIV positive. Depression symptoms mediated the associations of enacted and internalized stigmas with care - seeing delays, whereas efforts to avoiding disclosing HIV status mediated only there association between internalized stigma and care - seeking delays.

Health system models that converge or link HIV services with other reproductive health services need to t be tested to provide comprehensive reproductive healthcare to infected women in India. Access to reproductive health services in Human Immunodeficiency Virus (HIV) programs can greatly enhance programs potential to limit the spread of disease, reduce unintended pregnancies and safeguard the health of infected people.

Women's risk of HIV infection from their partner and observed associations between sexual violence and HIV from their partner and observed associations between sexual violence and HIV infection in India underscore the importance of understanding determinants of forced sex. As the primary caregivers for their families, women face many challenges when it comes to accessing care; these include dealing with discrimination from family, community, and health care providers, and a general lack of education, social support, and nutrition guidance and sustenance.

II. OBJECTIVES

The study was intended to asses' positive living among HIV infected woman and to associate positive living with their selected clinical and demographic variables.

III. MATERIALS AND METHOD

The cross sectional study was done among 200 women infected with HIV

IV. SAMPLE

The 200 women infected with HIV were selected by convenience sample technique at ART Centre, Government General Hospital Chennai for their ART Treatment

Inclusion Criteria

1. Females in the age of 18-49 Years irrespective of their marital status. 15-20 - Severe Hopelessness
2. Females who diagnosed to have HIV infection more than one year (HIV Positive) with CD4 count >250.
3. Females residing in Chennai district for past one year.
4. Females willing for participation.
5. The woman understands, read and write in Tamil language.

Exclusion Criteria

1. Females in the AIDS stage (CD4 cell <200)
2. Females migrated from other states.
3. Pregnant Women.

V. INSTRUMENT

The Instrument used as 2 sections

Section 1: Baseline Data

Section 2: Standard Becks Self Reported Hopelessness Inventory Scale consists of 20 items.

Scoring (Standard Becks Self Reported hopelessness Inventory Scale)

- 0-3 - Minimal Hopelessness
- 4-8 - Mild Hopelessness
- 9-14 - Moderate Hopelessness

VI. DATA COLLECTION PROCEDURE

The data was collected from December 2015 to February 2016 under the guidance of Dr.C.Susila, Principal, Billroth College of Nursing, Chennai and formal permission from Head of the Institution Government General Hospital, and for Beck Hopelessness scale, permission obtained from Pearson clinical and talent assessment Company, Bangalore, India. Brief Introduction about self and study has given and informed consent had obtained from the women for the assurance of participation. Confidentiality of their response was maintained. Women were selected at ART Centre by convenience sampling technique. Positive living by Hopelessness was measured in Becks Self Reported Hopelessness Inventory Scale. Their responses were scored and categorised into Minimal, Mild, Moderate, Severe Hopelessness. Instrument took 10 minutes to complete.

VII. RESULTS

Section- A: - Base line data of women.

Table-1 Demographic data of women infected with HIV.

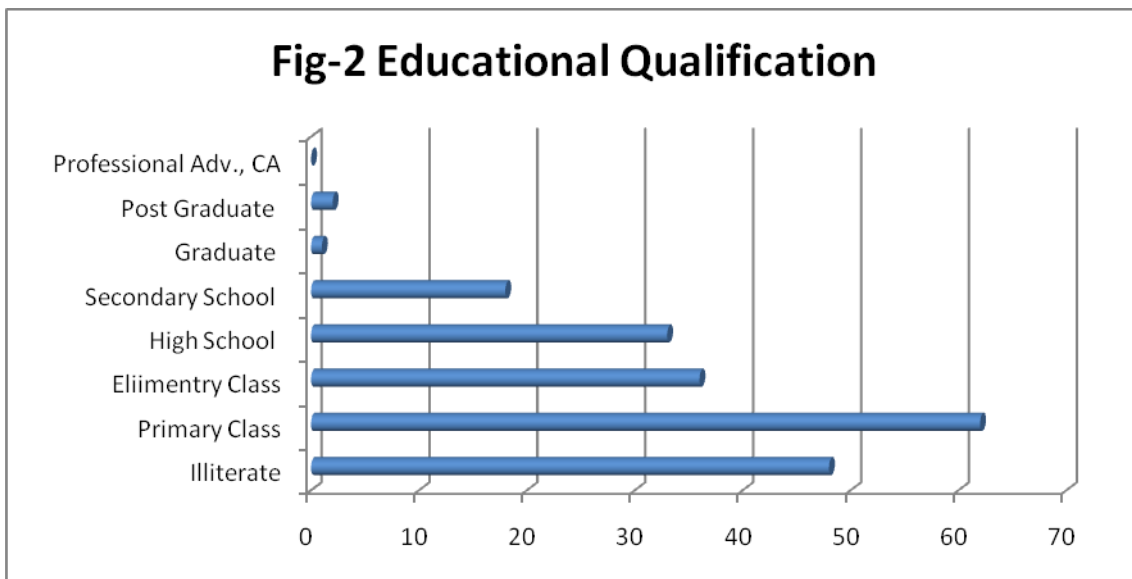
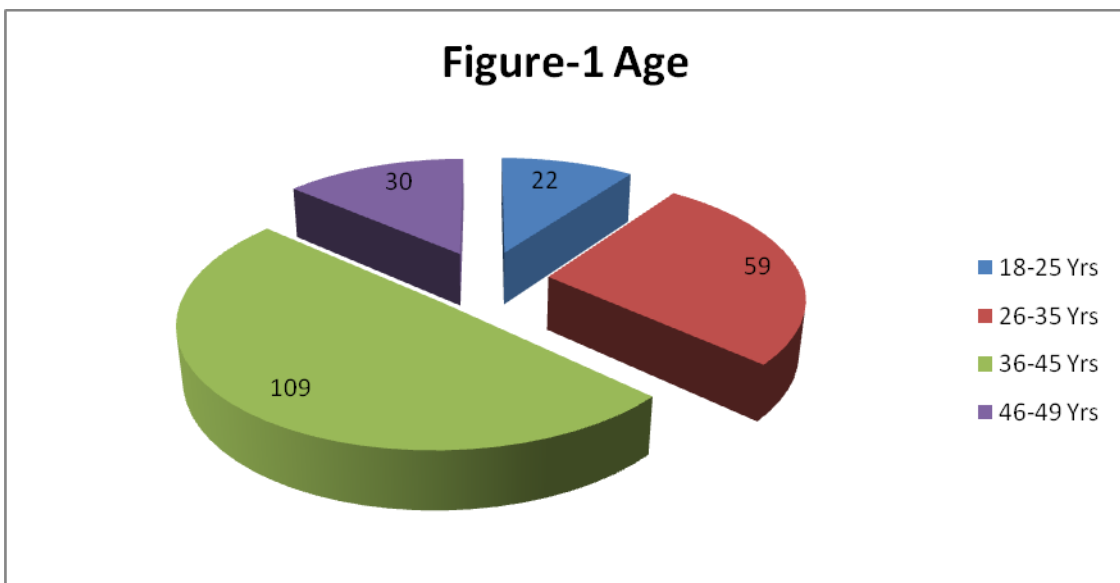
N-200

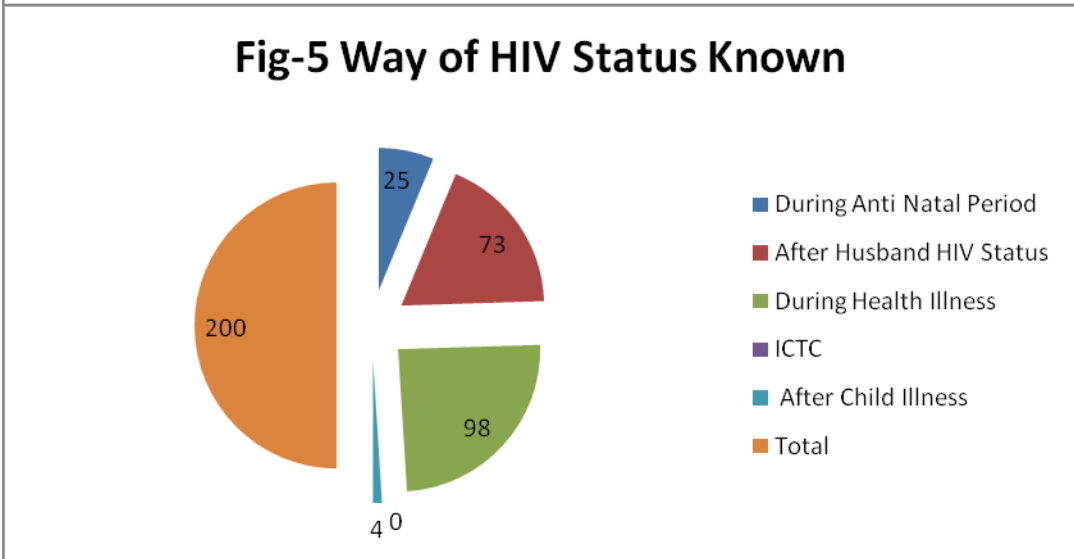
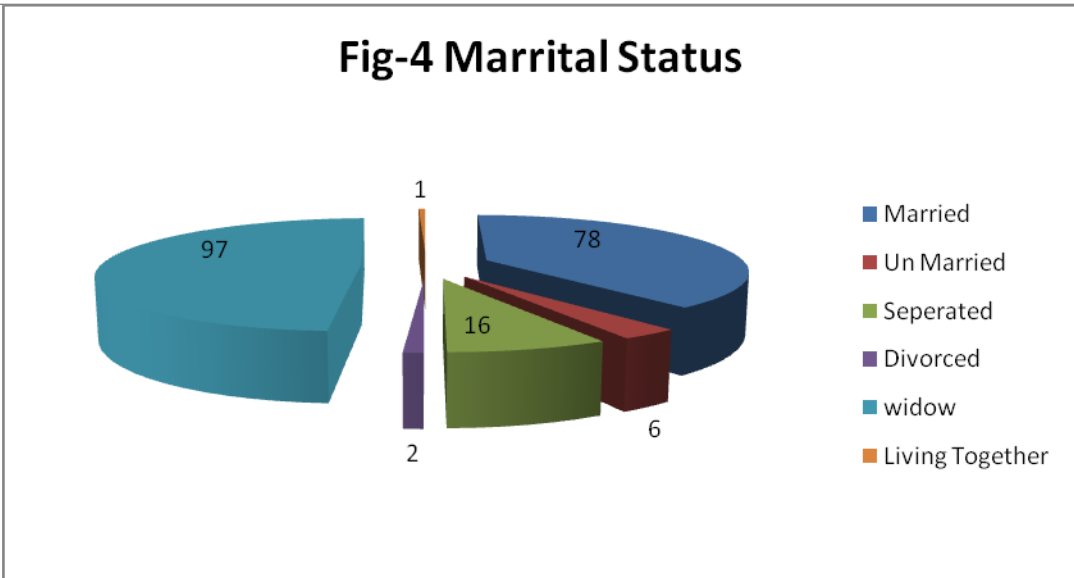
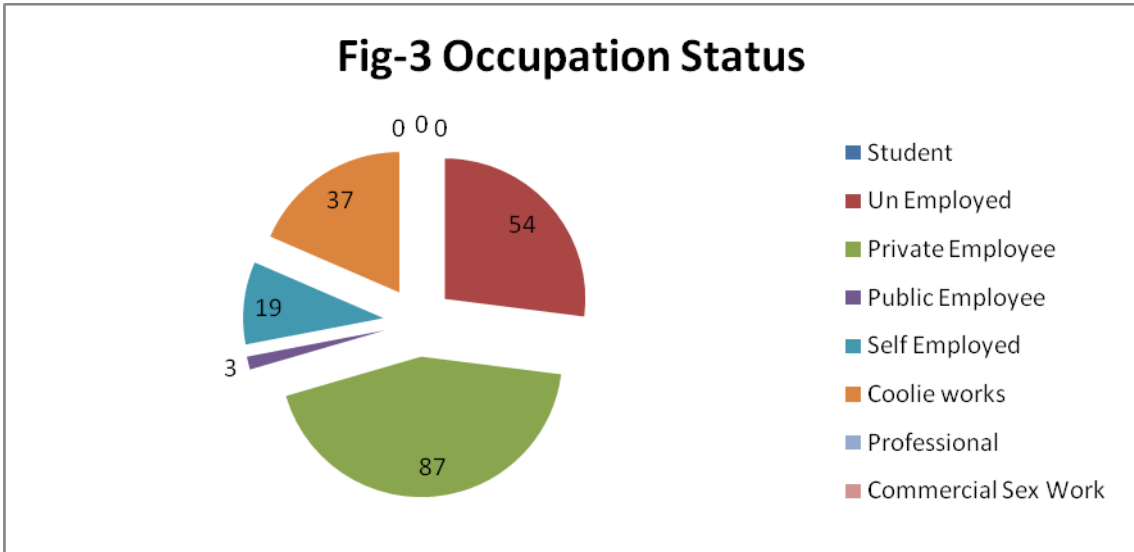
S. No.	Demographic Data	Number	Percentage
1	Age in Years		
	18-25 Yrs	22	11%
	26-35 Yrs	59	29.5%
	36-45 Yrs	109	54.5%
2	46-49 Yrs	30	15%
	Educational Qualification		
	Illiterate	48	24%
	Primary Class	62	31%
	Elementary Class	36	18%
	High School	33	16.5%
	Secondary School	18	9%
	Graduate	1	0.5%
Post Graduate	2	1%	
3	Professional Adv., CA	0	0
	Occupational Status		
	Student	0	0%
	Un Employed	54	27%
	Private Employee	87	43.5%
	Public Employee	3	1.5%
Self Employed	19	9.5%	

	Coolie works	37	18.5%
	Professional	0	0%
	Commercial Sex Work	0	0%
4	Marital Status		
	Married	78	39%
	Un Married	6	3%
	Separated	16	8%
	Divorced	2	1%
	widow	97	48.5%
	Living Together	1	0.5%
5	Monthly Income		
	Below 2500	89	44.5%
	Rs. 2501-5000	57	28.5%
	Rs. 5001-7500	47	23.5%
	Rs. 7501-Above	7	3.5%
6	Religion		
	Hindu	168	84%
	Muslim	4	2%
	Christian	28	14%
	Others	0	0%
7	Types of Family		
	Nuclear	186	93%
	Joint	14	7%
8	Annual Income of the Family		
	Below Rs 100000	183	91.5%
	Rs 10000-200000	15	7.5%
	Rs 200001-300000	1	0.5%
	Rs 300001-400000	1	0.5%
	Rs 400001-500000	0	0%
9	Condom Usage During sexual Intercourse		
	Yes	63	31.5%
	No	16	08%
	NA	131	65.5%
10	Way of HIV Status known		
	During Anti Natal Period	25	12.5%
	After Husband HIV Status	73	36.5%
	During Health Illness	98	49%
	ICTC	0	0%
	After Child Illness	4	02%
11	HIV Status known years		
	0-2	30	15%
	3-4	29	14.5%
	5-6	46	23%
	7-8	31	15.5%

	9-10	64	32%
12	Social Support		
	Husband	79	39.5%
	Parents	26	13%
	Relatives	13	6.5%
	Friend	10	05%
	Children	30	15%
	None	42	21%

Table-1 Shows most of the women aged 36 to 45 yrs (54.5%), majority of the women (89.5%) studied below high school and employed in private concern. 48.5% of women became widow and 49% of women HIV infection diagnosed during their Health illness, second highest after their husband HIV status known and most of the women living with husband were using condom 63(31.5%) during their sexual intercourse.





Section:B Level of positive living.

Table: 2 Level of Positive living in women infected with HIV.

N=200

S.No	Level of Positive Living by Hopelessness	Number	Percentage	
1.	Minimal	0	0%	Mean11.355 SD-2.53357 Median-11 Skewness 0.133682
2.	Mild	27	13.5%	
3.	Moderate	150	75%	
4.	Severe	23	11.5%	

Table: 2 shows that majority of the women (75%) were Moderately Hopeless

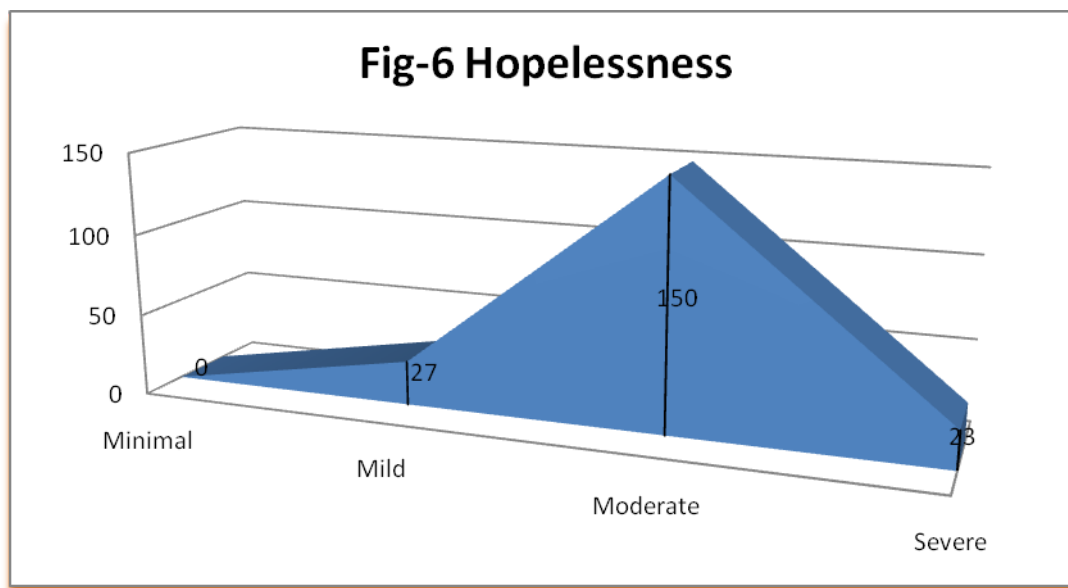


Table: 3 Association of positive living by their Hopelessness with their demographic Variables.

N-200

S. No.	Demographic Data	Minimal	Mild	Moderate	Severe	Chi-square
1	Age					P value- 0.9584 NS At 0.05 level
	18-25 Yrs	0	0	22	0	
	26-35 Yrs	0	9	43	7	
	36-45 Yrs	0	14	80	15	
	46-49 Yrs	0	4	25	1	
2	Educational Qualification					P value- 0.490 NS At 0.05 level
	Illiterate	0	2	38	8	
	Primary Class	0	7	49	6	
	Elementary Class	0	4	26	6	
	High School	0	7	25	1	
	Secondary School	0	7	9	2	
	Graduate - Non	0	0	1	0	
	Post Graduate - Non	0	0	2	0	
Professional Adv., CA			0			

3	Occupational Status					P value- 0.9534 NS At 0.05 level
	Student	0	0	0	0	
	Un Employed	0	10	41	3	
	Private Employee	0	13	65	9	
	Public Employee	0	1	2	0	
	Self Employed	0	0	16	3	
	Coolie works	0	3	26	8	
	Professional	0	0	0	0	
Commercial Sex Work	0	0	0	0		
4	Marital Status					P value- 0.888 NS At 0.05 level
	Married	0	12	61	5	
	Un Married	0	0	6	0	
	Separated	0	2	10	4	
	Divorced	0	0	2	0	
	widow	0	13	70	14	
Living Together	0	0	1	0		
5	Monthly Income					P value- 0.2804 NS At 0.05 level
	Below 2500	0	10	63	16	
	Rs. 2501-5000	0	7	45	5	
	Rs. 5001-7500	0	10	35	2	
Rs. 7501-Above	0	0	7	0		
6	Types of Family					P value- 0.6758 NS At 0.05 level
	Nuclear	0	25	141	20	
	Joint	0	2	9	3	
7	Way of HIV Status known					P value- 0.998 NS At 0.05 level
	During Antenatal Period	0	5	16	4	
	After Husband HIV Status	0	11	53	9	
	During Health Illness	0	11	77	10	
	ICTC	0	0	0	0	
After Child Illness	0	0	4	0		
8	Social Support					P value- 0.2427 NS At 0.05 level
	Husband	0	12	62	5	
	Parents	0	1	20	5	
	Relatives	0	0	12	1	
	Friend	0	2	7	1	
	Children	0	4	25	1	
None	0	8	24	10		

Computed χ^2 value indicated that there was no statistically significant association of positive living with any of their demographic variable at $p < 0.05$ in women.

VIII. DISCUSSION

This chapter discusses the findings of the study derived from the statistical analysis and its pertinence to the objectives of the study. This study was conducted to estimate positive living by Hopelessness among women infected with HIV in Chennai District, Tamilnadu.

1. Level of positive living among Women infected with HIV.

The mean score of positive living by Hopelessness was 11.355 with Standard Deviation of 2.53357 with a Median score of 11; most of the women (75%) were moderately Hopeless and none of them were in minimal Hopeless.

2. Association of positive living with their selected Demographic Variables.

Computed χ^2 value indicated that there was no statistically significant association of positive living with any of their demographic variable at $p < 0.05$ in women.

IX. CONCLUSION

1. The study findings revealed that majority of women (75%) infected with HIV were having moderate and 11% had severe level of Hopeless, which suggests to implement relaxation Therapy further to them
2. None of the Demographic variables played a significant role on their positive living among women infected with HIV.

X. RECOMMENDATIONS

1. Formulate an intervention strategy like counseling, Relaxation therapy to them to reduce their Hopelessness.
2. Promote consistency in condom usage to them during their Sexual Intercourse.
3. Promote sexual Assertiveness among them to prevent increase in Viral Load.
4. Encourage Adherence to ART among them.
5. Empower them to approach life optimistically.

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