

## **A Sociological Study on STD and AIDS awareness among Truck Drivers**

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### **I. Introduction:**

AIDS is very much human problem that cannot be addressed merely as a public health and medical issue. However, a basic understanding knowledge base of factual information is a necessary prerequisite to ever grasp of the scope and complexity of this human, social, medical and public health problem.

Twenty-two years of AIDS was became a more devastating disease than any other disease human kind has ever faced. This study is focusing on STD and AIDS awareness among truck drivers and it will also to know elaborate knowledge of AIDS. This study is describing the concept on the various sub heading

#### **Definition of AIDS:-**

AIDS stands for

<b>A-</b>	Acquired	-	must does something to contract
<b>I-</b>	Immune	-	ability to fight off infections agents
<b>D-</b>	Deficiency	-	lack of
<b>S-</b>	Syndrome	-	cluster of a symptom that is characteristic for a disease.

AIDS are the later stage of infection with human immune deficiency virus (HIV). Aids can take more than 8-10 years to develop after infection with HIV. HIV infected people can live symptom; free lives for years; however most people is developing countries die within three years of diagnosed with AIDS. HIV is transmitted through semen and vaginal fluids, infected blood and blood products, infected mother to her baby-before birth, during birth or through breast milk.

According to UNAIDS estimates, by December 2001, nearly 40 million people including over 14 million children had been infected with HIV since the start of the epidemic. Every day more than 7000 adults and babies are infected. More than 8 million people have developed AIDS in India.

#### **Structure of HIV:**

Human immunodeficiency Virus is a small infection particle that can be seen only through an electron microscope. This virus is so small that when about ten thousand viruses are the put together in a circle, they will have a diameter of about on millimeter.

#### **Tests of AIDS:**

The developments of characteristic infections and tumors called opportunistic infections of AIDS and it defining manifestation of immune deficiency, any occur. Two of the most currently and most widely used tests are known as **ELISA** (Enzyme Linked Immunoabsorbent Assay) and **WESTERN BOLT** is positive.

#### **Possibilities of Transmission of HIV:**

The possibilities of transmission of AIDS/HIV through

- Sexual intercourse
- Breast-feeding
- Blood transfusion
- Mother to child transmission
- Reuse of contaminated syringes by infecting drug users
- Infection via birth or nursing from mother to child
- Reuse of needles in medical setting and transfusion

AIDS/HIV is Non-transmitted through:

- Drinking water or eating food from the same utensils used by infection person,
- Sharing toilets
- Shaking hands
- Hugging or kissing
- Donating blood
- Traveling in the same bus
- Massage and rub each other's bodies
- Swimming in pools used by people with AIDS/HIV and also
- Mosquitoes and insects and pests do not spread HIV and do not spread the virus nor is it water-borne or air borne.

Who should undergo HIV test?

- Prostitutes, Devadasis, and their sexual partners,
- Homosexual and Bisexual men

Voluntary testing is recommended for the following risk groups in India:

- Past and present intravenous drugs
- Lesbians
- Individuals donating blood, organs, tissues, semen and milk
- Children of prostitutes
- Truck drivers who involve in sexual activities on high ways
- Person having more than one sexual partner
- Tribal women practice prostitution as their traditional profession
- Eunuchs involved in sexual activities particularly in homosexual men
- Prison inmates involved in homosexual/lesbian activities within the jails.
- Street children involved in sex and drug abuse
- Police and defense personal involved in homosexual and lesbian activities.

### **Causes and Spread of AIDS:**

HIV can be passed on because the virus is present in the sexual fluids and blood of infected people. If infected blood or sexual fluid gets into blood, then it will become infected. If a man with HIV has vaginal intercourse without a condom, infected fluid could pass into the women's blood stream through a tiny cut or sore inside the body. If a couple have anal intercourse the risk of infection is greater than with vaginal intercourse.

If a women with HIV has sexual intercourse without a condom. HIV could get into the man's blood through a sore patch on his penis or by getting into the table, which runs down the penis. If there is any contact with blood during sex, the increases the risk of infection. For example, there may be blood in the vagina, if intercourse happens during a women's period. There can also be bleeding during anal intercourse.

### **Symptoms of AIDS:**

**AIDS** is caused by a virus called HIV, but where this virus came from is not known. The Symptoms of HIV is

- ❖ Prolonged, unexplained fatigue
- ❖ Diarrhea
- ❖ Loss of weight
- ❖ Excessive sweating especially night sweats
- ❖ Cough
- ❖ Shortness of breath
- ❖ Fever lasting more than 10 days
- ❖ Skin rashes or lesions of various types
- ❖ Headache
- ❖ General discomfort or uneasiness( Malaise)

And also that may be associated with AIDS

- ❖ Speech impairment
- ❖ Muscle atrophy
- ❖ Memory loss
- ❖ Decreasing intellectual function
- ❖ Joint swelling

- ❖ Bone pain or tenderness
- ❖ Chest pain
- ❖ Seizures
- ❖ Blind spots in the vision
- ❖ Genital sores(both male and female)
- ❖ Decreased vision or blindness
- ❖ Back pain
- ❖ Muscle pain
- ❖ Abdominal pain

#### **Sexually transmitted disease (STD):**

Sexually transmitted infections (STIs) usually, but not always cause sexually transmitted diseases (STDs). These are major medical importance throughout the world. Unfortunately, most STDs are increasing rather than decreasing in occurrence, due to a number of factors, including

- Increasing density and mobility of human populations;
- The difficulty of engineering changes in human sexual behaviour;
- The absence of vaccines for any of these infections.

The last two items may well alter. There is already evidence for changes in male homosexual behaviour leading to decreased transmission of STDs in this group, and vaccines for certain infections will eventually come.

#### **People at risk:**

STD affects men and women of all social, religious, professional, educational and cultural backgrounds, and economic level. They are most prevalent among the prostitutes and those who involves in extramarital sexual activities. Some of these groups are

- ✓ People who travel and seek sex for relaxation
- ✓ Truck drivers who seek sex on their way
- ✓ Prostitutes and call girls
- ✓ Devadasis
- ✓ Homosexual and their partners
- ✓ Lesbians and their partners
- ✓ Bisexual and their partners
- ✓ Drug users who have sexual partners
- ✓ Migrant workers who seek sex while away from families
- ✓ Prison inmates who involve in same sex relation
- ✓ Personal in armed forced, etc...

#### **Safe sex among sex workers:**

The promotion of safe sex, meaning the use of condoms with every penetrative sexual act, is no easy task in the situations surveyed due to a variety of interrelated factors including:

- a) Lack of education among most sex workers
- b) Subordinate position of female's vis-à-vis males.
- c) Presence of language barriers between educators and sex workers.
- d) Lack of awareness about the nature of HIV and STD among sex workers, including general indifference to health and sanitation.
- e) The lack of awareness among customers about the nature of HIV and STD, particularly if they are from the ranks of blue-collar workers and others socially underprivileged.
- f) Lack of organization among sex workers, so that if one refuses to have sex without condoms, the customers will always find another one willing.
- g) Unwillingness of sex workers to have condoms with them especially in situation where carrying condoms can lead to police arrest or where the sex workers is unwilling to go to store and buy her own condoms.

#### **Condom use:**

The best defense against HIV is a single, infected partner. When one's behaviour is risky, the primary defense is a high quality condom. Although condom use has become more widespread, nine percent of clients of female sex workers still do not use a condom. A dramatic increase in condom use has been observed among clients of female sex workers during 1996-2000. Condom use among truckers and helpers was found to have increased from 44 percent to 70 percent during the same period. But even high use of the condom is not enough. HIV will spread steadily with anything short of 100percent use.

### **Truck drivers and AIDS:**

In India have one of the largest road networkers in the world and an estimated 2 to 5 million long trucks drivers and helpers. The extended of time of journey they spend away from their families for more than 10 days. So they have prone to have sexual intercourse during their journey hours.

The sex behaviour of the truck driver is unique. Sex, according to the truck drivers are only a part time and not a necessity. Wherever the commercial sex workers are available on the highway they stop the vehicle and have sex, food, drink depending on the halting time.

The places where these truck drivers have sexual gratification are the houses of commercial sex workers located on the highways away from the city limits. These commercial sex workers reside near by the workshops, highway hostels, and arrack shop. The highway commercial sex workers and the truck drivers follow different techniques to lure the sex partners.

Traditionally long distance truck drivers are high vulnerable to sexually transmitted diseases (STDs) because of their irregular life style marked by high mobility and blind beliefs in age-old myths about sex. This vulnerability makes them setting ducks for HIV infection too as its modes of transmission are similar to STD. Being away from home for most of their time, the truckers have to depend on external source of all basic needs including sex. Beside the traditional belief among accumulated in their body to the long hours of driving seated near the engine makes unprotected commercial sex an unavoidable ritual. As the highways crisscross the entire nation and as the drivers are constantly on the move from one state to another, this behavioural pattern could transport the infection too.

In a night journey on a average a driver will have sex with at least two commercial sex workers say volunteers of AIDS research foundation of India (AFRI) wh have been involved an HIV intervention project among the truckers. The intervention was necessitated by two facts:

- a. They are highly prone to infection and could spread, it owing to their high degree of mobility
- b. The impact that AIDS could make on the transport industry and economy could be enormous.

HIV prevalence patterns among in truckers have tended to mirror the local epidemics. The truck drivers have no entertainment in the journey hours. They are traveling for whole day so they can desire to stop, drink, dine and have sex with women. They can transfer HIV from urban to rural setting.

The occupation of STD patients who tested positive for HIV illustrates how the diseases spread especially in the initial stages. Those with frequent contact with many customers or clients are more likely to contract the disease and then spread in to others.

Workers in the hotel and tourist industry have the highest prevalence of the STD groups tested in Tamilnadu. Truck drivers are second group. Drivers often travel distances to many locations and bringing the infection with them, often to areas where the disease has not yet begun. The unemployed form the third largest group in HIV infection with 12.5% in Tamilnadu. This group is often without work for some time after migrating to larger towns and cities and becomes vulnerable to HIV.

The first few cases of HIV infection were detected in India in 1986 among sex workers in Chennai by 1994, NACO identified 1.75 million people infected with HIV, concentrated mainly in Maharashtra and Manipur. In four years, 3.5 million people had fallen victim to the infection, which continued to six states – Andhra Pradesh, Karnataka, Maharashtra, Manipur, and Tamilnadu which account for over 80 percent of all reported HIV/AIDS cases in the country.

AIDS is not an emergency but a development crisis, emerging over a long period of time. It is important that the government neither panics nor remains complacent it should take responsibility and act. Successful model which address social and economic issues to stop the spread of HIV/AIDS – such as those adopted in Uganda and Brazil- are instructive behavioural change, which will take long to happen is fundamental to dealing with the problems.

## **II. Methodology:**

The study concerned with the awareness of STD and AIDS among truck drivers within the Pondicherry region.

### **Objective**

- ❖ To find out the socio-economic status of truck drivers
- ❖ To study the level of sexual intercourse among truck drivers
- ❖ To study their knowledge of STD and AIDS among truck drivers

### **Area of Study**

The area of the study is Pondicherry region to evaluate of awareness of STD and AIDS among truck drivers. The areas of study are Gorimedu, Ellaipillaichavady and Kalapet in Pondicherry.

### **Scope of Study:**

The truck drivers, who are national truck drivers, are the selected sample. They are drive for 10 days to 30 days and reach the destination. The driver drive very long distance, away from their family members and they have prone to sexual intercourse during their journey hours.

As they have sexual intercourse during their journey hours they may get infected with STD and AIDS. So they reach the destination and unload the goods. Then they return to their home town and they stay of 2 or 3 days in their house. They may have sexual intercourse with their wife, and then the partners are also affected.

So the possibilities of getting and spreading of STD and AIDS is more among the truck drivers. Not only truck drivers, but also a person who travels outside the family for longer duration may also have the same problem and consequence. This study will bring out the various factors related to high-risk people. This study will also focus the prevention of AIDS among truck drivers.

### **Tools of Data collection:**

Major tool utilized in the study to collect data is the interview schedule methods, with the help of which the researchers interviewed the respondents.

### **Methods of sample collection**

Simple Random sampling is used in this study. Sample size is 50. They are from various states drivers halting in Pondicherry. Data for the present study has collect by the researchers during the period from 1<sup>st</sup> Feb to 29<sup>th</sup> Feb 2004. The respondents were interviewed in the places of Booking office and Brokers office within the Pondicherry. The study will deal with only national truck drivers not with the local drivers, and other types of drivers.

## **III. Finding & Analysis:**

Most of the respondents are young and their earning is minimum Rs.4000/month. They are married and also are educated up to High school level. The family income is less than Rs.1000/month. Most of the respondents are away their families and stay months is loaded areas and go after 5 months to their native place. Majority of the respondents are having nuclear family and their family are engaging in various kind of occupation like farming, Daily wages and etc.,

- ✍ 76% of the respondents are knowledge of AIDS disease.
- ✍ 78% of the respondents are known spreads of AIDS and also the mode of transmission and also accepted AIDS spreads through sexual intercourse.
- ✍ 62% of the respondents are known the consequences of AIDS.
- ✍ 66% of the respondents are not known the micro organism responsible for causing AIDS.
- ✍ 82% of the respondents are accepting that no treatment for causing AIDS.
- ✍ 60% of the respondents are interested I getting knowledge about AIDS.
- ✍ 56% of the respondents are not taken any effort to know more about AIDS.
- ✍ 54% of the respondents are having the knowledge of HIV infection and also know about the symptom.
- ✍ 62% of the respondents are weekly twice have sexual intercourse.
- ✍ 64% of the respondents having sexual intercourse in journey hours.
- ✍ 52% of the respondents are ever trying to avoid sexual intercourse.
- ✍ 74% of the respondents are felt that they wasting money for sexual intercourse.
- ✍ 68% of the respondents have washing/cleaning genital organ immediately after they have sexual relationship to prevent from STD and AIDS disease.
- ✍ 78% of the respondents are using condoms during sexual intercourse.
- ✍ 76% of truck drivers are accepted using of condoms to prevent AIDS and STD.
- ✍ 84% of the respondents are having knowledge of STD and also known the meaning and 52% of the respondents told that STD is curable disease.
- ✍ 50% of the respondents have come across an AIDS and STD patient among truck drivers.
- ✍ Most of the respondents are not accepting that the truck drivers are the main transmitters of AIDS
- ✍ 90% of the respondent's wives are unaware about the sexual intercourse of their husbands during the journey hours.
- ✍ 46% of the respondents having knowledge that AIDS will spread to their child.
- ✍ 68% of the respondents are not ever made AIDS test.
- ✍ Among the truck drivers, the periodical basis i.e., depends upon confidents to take checkup and that is correct way of controlling AIDS.
- ✍ 54% of the respondents to know the government program against AIDS.

✍ 50% of the respondents to know that the free distribution of condom helps to reduce the spreading of AIDS/STD.

✍ 22% of the respondents create awareness of condoms to the commercial sex workers and Truck drivers.

✍ 66% of the respondents using of condoms is right way to control AIDS.

✍ Most of the respondents are not given suggestion to the control of AIDS.

✍ Truck drivers felt that government and NGO's propaganda alone could not reduce the spreading of AIDS and STD and also not believe free distribution of condom is preventing AIDS and STD.

#### **IV. Conclusion**

From the above analysis of the data, we can understand that awareness of STD among truck drivers is satisfactory, because 56% of them having the knowledge and also STD are curable disease through the medical treatment.

From the above research, that awareness of AIDS among truck drivers are satisfactory, because 76% of them having the known about the AIDS. The NGO's are the main responsible for creating awareness among the truck drivers and also to demonstrate the sex to using of condoms in sexual intercourse.

Very few of the respondents are not having knowledge of AIDS and also STD. most of the truck drivers are interested to know the AIDS patients life story i.e., in the form of cinema, campaign, stage drama – this will initiate the people to have safe sex with the help of condoms.

#### **V. Suggestions**

☞ Awareness programmes should be aimed at truck driver regarding safe sexual practices and behaviour to protect further spread of disease to the young generation.

☞ Most of truck drivers are explore that sex education should introduce at school curriculum.

☞ Modification of changing attitudes and behaviour of the people can be achieved through education and awareness.

☞ Government and NGO's have to create awareness through the mass media, so that the message will reach quickly.

☞ Increase the number of Government and NGO's should provide more number of condoms and should checkup expiry date of condoms.

☞ Most of the NGO's should come forward to work with the truck driver for preventing from AIDS

☞ Only 100 percent use of the condom with commercial sex workers can prevent the spread of HIV/AIDS.

☞ Condoms use among truck drivers and helpers were found to have increased, so HIV will spread steadily with anything short of 100% use.

☞ Confidential testing centers must be made operational in every district; HIV/AIDS must be fought at grass-roots level.

☞ 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.

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

☞ Promoting policies that include both prevention and care and which balance resources according to the status of the epidemic.

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