

In a world plagued by floods, earthquakes, tsunami, typhoons and hurricanes; swamped by poverty and hunger, and hit by epidemics every other day, HIV/AIDS along with cancer, continues to be one of the most dreaded of diseases, a chart-topper with no cure in sight.

In India, as elsewhere, AIDS is often seen as “someone else’s problem” – as something that affects people living on the margins of society, whose lifestyles are considered immoral. Even as it moves into the general population, the HIV epidemic is still misunderstood among the Indian public. People living with HIV have faced violent attacks, been rejected by families, spouses and communities, been refused medical treatment, and even, in some reported cases, denied the last rites before they die.

Women and children become particularly destitute and abandoned - in many cases following the death of the husband from AIDS. Relatives and village communities tend to isolate these families so that they are forced to leave their village with a feeling of total despair, with no money, no food and with no will to live.

With a population of over 66 million, Tamil Nadu is the seventh most populous state in India. In 2007 HIV prevalence among antenatal clinic attendees was 0.25%. HIV prevalence among injecting drug users was 16.8%, third highest out of all reporting states. At that time HIV prevalence among men who have sex with men and female sex workers was 6.6% and 4.68% respectively. Presently, in the Nilgiris, the numbers of reported HIV cases is thought to be in excess of 700 (623 recorded April 2009) and so these percentages would have increased. Statistically, the reported HIV/AIDS cases doubled in 2008/9.

The Earth Trust (ET) runs an HIV/AIDS programme which aims to offer home care and support to HIV/AIDS infected destitute people in the Nilgiri Hills region of Tamil Nadu. The focus of ET is to undertake integrated treatment using traditional herbal medicines based on ancient Siddha practices, to counsel and closely monitor mental and physical health via clinical trials, build confidence and provide life skills and education to the children and families of AIDS patients and infected children as well as to provide various training programmes and encourage sustainable livelihoods.

It is an uphill task for ET. Firstly patients, who are referred by the local government hospital and testing centres, may not approach ET at all for fear that if they do so their condition will become known to members of their family or village. They refuse to come to the ET office at times and prefer meeting at an independent, neutral place where the meeting will not look suspicious. If they do approach ET and start taking the Siddha medicines, as soon as their condition improves they stop coming and stop taking medicines as well. Sometimes when their condition becomes suspect in the village, they migrate to the plains and lose contact with ET. However, the heartening revelation is that every patient who has taken the Siddha medicine has shown a clear improvement in overall health with higher immunity levels. This is evidenced by patient records and the blood test monitoring programmes in place.

36 patients participate in monitoring programmes which include regular 6monthly blood tests. It is these tests, as well as when reviewing the general patient’s condition, that support our view that Siddha, when taken regularly, does help re-build the immune system. Data is meticulously recorded to check for improvements and standardisation of the treatment.

ET has also been conducting workshops and training sessions for the villagers in the Nilgiris. Over 150 villages have been covered and more than 2800 people have benefited from

programmes ranging from basic awareness programmes to basic and advanced health programmes, to HIV/AIDS awareness and sensitivity programmes as well as Herbal garden and herbal medicine preparation programmes.

Awareness and counselling is provided to families of patients, awareness camps are held for students and vocational training for widows is provided.

While it is a struggle for the team they derive satisfaction from seeing the improvement in patient well-being and they are looking forward to the day when the social stigma will go away and seeing HIV/AIDS treated as if it were just another ailment that need not be feared.