Abstract

The research study is on awareness of HIV/AIDS among female sex workers in Kollam. Sex workers in India are as much an issue as the discrimination faced by other marginalized groups along lines of class, caste, race or religion. Due to this women cannot access good healthcare and are often subject to abuse, violence and exploitation by police and government officials, while their children face harassment in schools and the workplace. The study titled awareness of HIV/AIDS among female sex workers in Kollam, Kerala involves Descriptive research design to identify HIV/AIDS awareness level among female sex workers. The study is conducted Purposive sample method among 30 sex workers in Kollam. The main objective of the study is to identify the socio economic challenges faced by female sex workers and to identify the level of knowledge on HIV/AIDS. The hypothesis of the study is higher the vulnerability, lower will be the socio-economic status and lower the awareness about safe sex, higher the risk to health hazards. The universe of the study is Female sex workers in Kollam, and the unit of the study is Female sex workers in Vallikeezhu. Inclusion sample as women who are engaged in sex work and the exclusion sample as Women who are not engaged.
I. INTRODUCTION

India has a long chronicled record and set by tradition, it is basic to face the authentic background of prostitution to see how for practices in the earlier year for the position of women in present day society and strengthened toleration of assaults on the balance of women by sexual violence and obliged prostitution. India which is genuinely declared to be a champion among the most out of date human progressions of the world, shows a wide record of the rising and change of the prostitution.

Prostitution means the practices of sexual activities for the purposes of money similar to organ trade etc. The practice has been accounted for in basically every culture and depicted all through written history. As a type of abnormality, prostitution has been important to sociologists as an impression of different social procedures and marvels. Ladies occupied with sex work have been battling for the essential offices like sustenance, safe house and wellbeing. It is on the grounds that ladies in this business are for a constrained period. A lady is a whore "just for the constrained timeframe that takes part in the exercises, and the lady seeking after this occupation has no a greater amount of a character, destiny, or perpetual quality than a man has who is an expert baseball player or officer. Prostitution is one of the colorful pictures sustained by a social texture which wishes to propagate the status of its ladies as sexual items.

1.1 Causes behind Prostitution:

- **Poverty**: Poverty is one of the primary drivers which push lady towards prostitution. Financially discouraged lady with low training level move toward becoming casualties of prostitution. There are other social variables which are in charge of the corruption of lady status. One variable is that perspective of individuals about lady as ware.

- **The Trafficking Process**: An unlawful lady trafficking is another purpose for the prostitution in India. Young ladies those are reject for the sex are brutally treated and assaulted and push them into this business.

- **The Government's Attitude**: Prostitute is the group where government needs to give consideration for their restoration. In any case, the administration's disposition towards recovery is extremely poor.

- **Old Tradition like Devadasi**: Old Tradition like Devadasi is one reason which pushes parcel of ladies into the prostitution.


Sex specialists are among the individuals who are most powerless against HIV disease on the planet today. A few variables elevate sex laborers' powerlessness to HIV. Many sex laborers are vagrants and generally portable inside country states and are in this manner, diffi faction to reach by means of standard effort and wellbeing administrations. They confront social, social, legitimate and etymological hindrances to getting to administrations and data. Similarly critical, numerous ladies in sex work encounter...
savagery in the city, at work or in their own lives, which builds their defenselessness to HIV and other wellbeing concerns. For instance, examine from Bangladesh, Namibia, India and somewhere else demonstrates that many sex specialists, especially the individuals who chip away at the boulevards, report being beaten, debilitated with a weapon, cut, stifled, assaulted and constrained into sex.

The danger of sexual transmission of HIV disease is entrenched. In circumstances where sex laborers don't have entry to condoms, HIV counteractive action data and sexual wellbeing administrations, or are kept from ensuring their wellbeing and utilizing condoms for any reason, they are at expanded danger of contracting HIV. Viciousness has an immediate and backhanded bearing on sex laborers' capacity to shield them from HIV and keep up great sexual wellbeing. Assault (successive and posse assault), by people occupied with high-hazard practices' can straightforwardly build their danger of getting to be plainly contaminated with HIV through vaginal injury and slashes. Sex laborers are encompassed by an intricate web of "guards" including proprietors of sex foundations, chiefs, customers, suggest accomplices, law implementation experts and neighborhood control representatives who frequently have control or control over their day by day lives. Guardians, for instance, may apply control by directing the sum charged by a sex specialist, regardless of whether a sex laborer ought to go up against a specific customer and significantly whether the sex specialist can or can't demand condom utilize. A few guards may apply control through inconspicuous means, for example, holding an obligation, enthusiastic man demand condom utilize. A few guardians may apply control through unpretentious means, for example, holding an obligation, passionate control or through obvious means, for example, danger of a real sexual and physical savagery, physical disengagement, risk of giving them over to lawful specialists and constrained medication and liquor utilize.

II. REVIEW OF LITERATURE

- The motivation behind the writing survey is to discover what has done beforehand about the issue to be contemplated, what stays to be done, what strategies have been utilized in other research and how the aftereffects of other research in the region can be consolidated to create information. Therefore, a survey of writing can clear up an issue, legitimize look into for the proposed issue, shed light on proper strategies and contribute toward the improvement of a reasonable structure. It should be possible prior and then afterward choosing the issue. As indicated by Abdellah and Levine, "The material accumulated in the writing audit ought to be made as a fundamental piece of research information, since what is found in writing not exclusively can have an imperative impact on plan of issue and outline of research, additionally give near material when the information gathered in research is examined".

- "Led a cross sectional Study on learning and familiarity with the HIV/AIDS among Pakistani youthful grown-ups (Male and female). A multi organize group testing configuration was utilized to gather the information from 650 male and female grown-ups matured 17-21 years living in Karachi utilizing an organized poll. A bivariate and
multivariate investigation was utilized. The review uncovers that 2% of females (n=390) detailed not caught wind of HIV/AIDS. Among the guys, those with a Poor learning were more youthful, with under six years of tutoring and components for poor information were youthful age), low financial status, absence of enrolment at school/school and being unmarried. The review stresses the need to teach youthful grown-ups and outfit them with the suitable data and abilities to empower them to shield themselves from HIV/AIDS”. (Farid-ul-Hasnai N S, Johansson E, Krantz G. (2009))

- Directed a pilot study to test school construct adolescent instruction program centering in light of HIV/AIDS anticipation among 1846 number of school kids chose arbitrarily from 25 schools in Mumbai and led a school based young training program for a six week. Result measures gathered at a month and a half were HIV/AIDS learning, states of mind toward forbearance/condom utilize, peer weight, a rehashed measures investigation of difference was led with pre test and post test scores with information, convictions, mentalities and certainty as the inside gathering measures and sexual orientation as the between-gathering measure. The review uncovered that both young men and young ladies fundamentally enhanced learning, state of mind and convictions in regards to HIV/AIDS and young ladies expanded more information, concurrence with restraint), better comprehension of HIV/AIDS, safety measures against HIV/AIDS and a higher certainty level in managing hazardous social circumstances. So general young ladies profited from the progression intercession than young men. Furthermore, uncovered the event of sexual orientation differences in HIV/AIDS learning, data hotspots for young people in India”. (Chhabra R, Springer C, Rap KP. (2008)).

- Directed a review to decide level of learning about HIV/AIDS by utilizing elucidating examination. A non likelihood test was framed from 208 understudies from the secondary schools and poll managed in regards to HIV/AIDS aversion and transmission mode was connected. The review uncovered that 24.5% detailed a decent level of knowledge, 67.3% have reasonable level of learning and 8.2% insufficient information so consider recommend that instructive methodologies' must be actualized to enhance information about malady, its results and preventive measures for ensuring this gathering at hazard. “(Davila ME, Taglia Ferro AZ. (2008)).

- Directed a review in Mumbai, India to assess the pre and post test n a school based HIV/AIDS instructive program the pre test was controlled to 2919 understudies with respect to methods of transmission and counteractive action of HIV/AIDS. A training system was established at 10 optional schools. After one month the post test was directed to 2400 understudies, before the instructive intercession just half of the understudies realized that HIV/AIDS is transmitted sexually, Only 84% knew that there are no meds to cure for HIV/AIDS. After mediation 95% of the understudies realized that HIV/AIDS is transmitted sexually, 92% realized that there is n cure for HIV/AIDS. These outcomes proposed that school based instructive projects for young people in...
India can prevail with regards to giving fundamental data in regards to HIV/AIDS”. (Shankarnarayanan S, Naik E, Reddy TS, Gurunani G. (2006))

“Directed a cross sectional review examine with respect to information and state of mind towards HIV/AIDS, sexually transmitted ailments, and sexuality among undergrads in Thiruvananthpuram District Kerala. 625 undergrad understudies were haphazardly chosen (164 young men, 461 young ladies age 18-22 years) and managed an organized survey on information and demeanor. Multivariable direct relapse was utilized to dissect the information. The review uncovered that all the understudy had found out about HIV/AIDS and just 45% realized that HIV/AIDS is not treatable at present, just 34% knew about the manifestations of STD's and 47% realized that STD are related with an expanded danger of AIDS. In multivariate investigation male understudies and urban occupants showed a higher information of HIV/AIDS and STD's and recommended that considerable lacunae in the learning and demeanor towards, STD’S and sexuality among undergrads”. (Lal SS,Vasan RS, Sarma PS,Thankappa KR. (2000))

“Led a review to assess the viability of arranged showing program with respect to avoidance of HIV/AIDS in chose Pre college schools, Mangalore. The discoveries of the review uncovered that an exceptionally huge distinction was seen amongst pre and post test scores of teenagers with respect to counteractive action of HIV/AIDS. They presumed that arranged showing project is a powerful technique in expanding the learning of young people with respect to counteractive action of HIV/AIDS” (Sindu S. (2003))

“Led a review to survey the information and state of mind towards HIV/AIDS among youths, Chandigarh. The example of 100 juvenile utilized offspring of Chandigarh and study configuration was forthcoming with pretested survey and utilized two arranged arbitrary examining strategy and data was gathered through individual meeting procedure. State of mind was measured utilizing a 5 point likert scale .The review uncovered that mean information and demeanor scores were 15.58 and 14.67,while 8% respondents were oblivious of the dangers of HIV/AIDS transmission through unprotected sex and blood transfusion, 20% were uninformed of the dangers related with intravenous medication utilize, just about one fourth of the kids had genuine misguided judgments in regards to HIV/AIDS transmission through easygoing contact , a huge extent of immature utilized kids have lacking learning as to methods of HIV/AIDS transmission”. (Sing S, Gambir S, kumar R. (1994))

“Directed a review on state of mind towards HIV/AIDS among dominantly white collar class youths in New Delhi secondary schools in four secondary schools in New Delhi, 186 understudies finished a poll surveying belittling of HIV/AIDS, vilification of sexuality, learning of HIV/AIDS, HIV/AIDS instruction and assets, and statistic attributes. . They for the most part needed exact information about the ailment and of related wellbeing assets female youths showed essentially less learning about HIV/AIDS contrasted and male teenagers, while the guys detailed altogether more
prominent presentation to HIV/AIDS training contrasted and the females. These outcomes recommend a requirement for more noteworthy HIV/AIDS instruction and consciousness of wellbeing assets, particularly among female young people. Instruction should straightforwardly address criticizing states of mind about HIV/AIDS, crevices in HIV/AIDS information and familiarity with HIV/AIDS-related wellbeing assets” (Pramanik S, Chartier M, Koop man C (2006))

- “Led a review on information and states of mind with respect to HIV/AIDS and safe sex of Indian understudies from a little city of India. Surveys were controlled to 188 members (44 men and 141 ladies) and results demonstrated that general members level of information was marginally poor The outcome recommend that absence of instruction about safe sex and adding to pestilences of HIV/AIDS disease in India.
- “Prostitution is the business or routine with regards to taking part in sexual relations in return for installment”- Merriam - Webster Dictionary (2013). Medical issues of Sex Workers”. (Seth P, McNair LD. (2004))
- In light of her work, a sex laborer has a more serious danger of getting sexually transmitted contaminations (STIs) and HIV than other ladies. Her hazard is expanded in light of the fact that sex work implies she should engage in sexual relations with various men every day. She might need to ensure herself by utilizing condoms and other more secure sex rehearses, yet the men who pay her can make this troublesome. This substance is from page 344 to 345 of Where Women Have No Doctor.

III. OBJECTIVES OF THE STUDY
   i.) To study the health level awareness regarding HIV/AIDS amongst the female sex workers.
   ii.) To study the attitude towards HIV/AIDS amongst the female sex workers.

IV. RESEARCH METHODOLOGY
   i.) Research design: Descriptive research design will be used for conducting the study.
   ii.) Universe: Kollam district
   iii.) Population: Vallikeezhu
   iv.) Inclusion criteria: Women who are engaged in sex work
   v.) Exclusion criteria: Women who are not engaged
   vi.) Sampling: Purposive sampling method
   vii.) Tools for data collection: Self prepared questionnaire
   viii.) Statistical analysis: Microsoft Excel
   ix.) Ethical consideration
      ▪ Informed consent will be obtained from the respondent before data collection.
      ▪ Confidentiality should be maintained during the research study.
      ▪ Only collective data should be used for research study.
V. DATA ANALYSIS AND INTERPRETATION

Table 1: Age wise distribution of respondents

<table>
<thead>
<tr>
<th>Age</th>
<th>F</th>
<th>P</th>
</tr>
</thead>
<tbody>
<tr>
<td>Young Age</td>
<td>6</td>
<td>20</td>
</tr>
<tr>
<td>Middle Age</td>
<td>24</td>
<td>80</td>
</tr>
<tr>
<td>Old Age</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Total</td>
<td>30</td>
<td>100</td>
</tr>
</tbody>
</table>

From the above table indicates that, 80% of respondents belong to Middle age, 20% of respondents to Young age, and none of the respondents belongs to Old age. The table clearly mention that, majority (80%) of the respondents are belongs to Middle age.

Table 2: Mode of savings wise distribution of respondents

<table>
<thead>
<tr>
<th>Mode of savings</th>
<th>F</th>
<th>P</th>
</tr>
</thead>
<tbody>
<tr>
<td>No savings</td>
<td>7</td>
<td>23.33</td>
</tr>
<tr>
<td>Bank</td>
<td>16</td>
<td>53.34</td>
</tr>
<tr>
<td>Self</td>
<td>7</td>
<td>23.33</td>
</tr>
<tr>
<td>Total</td>
<td>30</td>
<td>100</td>
</tr>
</tbody>
</table>

From the above table indicates that 53.33% of respondents belong to Mode of savings is Bank, and 23.33% of respondents belong to mode of saving as No savings and Self. The table clearly mention that Majority of the respondents are belongs as mode of saving Bank.

Table 3: Attend any awareness class

<table>
<thead>
<tr>
<th>Attend any awareness class</th>
<th>F</th>
<th>P</th>
</tr>
</thead>
<tbody>
<tr>
<td>Always</td>
<td>19</td>
<td>63.34</td>
</tr>
<tr>
<td>Sometimes</td>
<td>9</td>
<td>30</td>
</tr>
<tr>
<td>Never</td>
<td>1</td>
<td>3.33</td>
</tr>
<tr>
<td>Can’t say</td>
<td>1</td>
<td>3.33</td>
</tr>
<tr>
<td>Total</td>
<td>30</td>
<td>100</td>
</tr>
</tbody>
</table>

From the above table shows that 63.34% of respondents belongs to always attend awareness class, 30% of respondents belongs to sometimes attend awareness class, and 3.33% of respondents belongs to attend awareness class as never and can’t say. The table clearly mentions that 63.34 % of respondents always attend awareness class.

Table 4: Testing on HIV

<table>
<thead>
<tr>
<th>Testing on HIV</th>
<th>F</th>
<th>P</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>30</td>
<td>100</td>
</tr>
<tr>
<td>No</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Total</td>
<td>30</td>
<td>100</td>
</tr>
</tbody>
</table>

From the above table shows that 100% of respondents feedback as YES. The table clearly mentions that 100% of respondents taken HIV test.

Table 5: Awareness level of condom use

<table>
<thead>
<tr>
<th>Condom use</th>
<th>F</th>
<th>P</th>
</tr>
</thead>
<tbody>
<tr>
<td>Always</td>
<td>25</td>
<td>83.33</td>
</tr>
<tr>
<td>Sometimes</td>
<td>5</td>
<td>16.67</td>
</tr>
<tr>
<td>Never</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Can’t say</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Total</td>
<td>30</td>
<td>100</td>
</tr>
</tbody>
</table>
From the above table shows that 83.33% of respondents belong to awareness level of condom use as always, 16.67% of respondents belongs to awareness level of condom use as sometimes, and none of respondents belongs to awareness level of condom use as never and can’t say. The table clearly mentions that 83.33% of respondents belong to awareness level of condom use as always.

### Table 6: Awareness level of spreading HIV/AIDS

<table>
<thead>
<tr>
<th>Spreading HIV/AIDS</th>
<th>F</th>
<th>P</th>
</tr>
</thead>
<tbody>
<tr>
<td>Always</td>
<td>26</td>
<td>86.67</td>
</tr>
<tr>
<td>Sometimes</td>
<td>2</td>
<td>6.67</td>
</tr>
<tr>
<td>Never</td>
<td>1</td>
<td>3.33</td>
</tr>
<tr>
<td>Can’t say</td>
<td>1</td>
<td>3.33</td>
</tr>
<tr>
<td>Total</td>
<td>30</td>
<td>100</td>
</tr>
</tbody>
</table>

From the above table shows that 86.67% of respondents belong to awareness level of spreading HIV/AIDS as always, 6.67% of respondents belongs to awareness level of spreading HIV/AIDS as sometimes, and 3.33% of respondents belongs to awareness level of spreading HIV/AIDS as never and can’t say. The table clearly mentions that 86.67% of respondents belong to awareness level of spreading HIV/AIDS as always.

### Table 7: Awareness of the respondent accordance with education

<table>
<thead>
<tr>
<th>Education/AWARENESS</th>
<th>High</th>
<th>Moderate</th>
<th>Low</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>F</td>
<td>P</td>
<td>F</td>
</tr>
<tr>
<td>Primary</td>
<td>0</td>
<td>0</td>
<td>2</td>
</tr>
<tr>
<td>High school</td>
<td>2</td>
<td>66.67</td>
<td>5</td>
</tr>
<tr>
<td>Plus two</td>
<td>1</td>
<td>33.33</td>
<td>2</td>
</tr>
<tr>
<td>Graduation</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Total</td>
<td>3</td>
<td>100</td>
<td>9</td>
</tr>
</tbody>
</table>

From the above table shows that, 66.67% of respondents with high school education have high level of sex education, 33.33% of respondents with high secondary education have high level of sex education. 55.56% of respondents with high school education have moderate level of sex education, 22.22% of the respondents with primary education and higher secondary education have moderate level of sex education, and both are proportionate. 50% of respondents with high school education have low level of sex education, 44.4% of respondents with high secondary education have low level of sex education.

### Table 8: Health of the respondent’s accordance with age

<table>
<thead>
<tr>
<th>Age/Health</th>
<th>High</th>
<th>Moderate</th>
<th>Low</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>F</td>
<td>P</td>
<td>F</td>
</tr>
<tr>
<td>Young age</td>
<td>2</td>
<td>100</td>
<td>1</td>
</tr>
<tr>
<td>Middle age</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Old age</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Total</td>
<td>2</td>
<td>100</td>
<td>1</td>
</tr>
</tbody>
</table>

From the above table shows that, 100% of respondents’ young age has high level of health condition, 100% of respondents with young age have moderate level of health
condition. 88.9% of respondents with middle age have low level of health condition; only 11.1% of the respondents with young age have low level of health condition.

VI. FINDINGS

- The major findings obtained through the analysis and data based on the objectives of the study.
- The researcher identified that, majority of respondents engaged in sex work belongs to Middle age.
- The researcher indicates that, 70% of respondents belong to Hindu religion, 30% of respondents to Christian religion, and none of the respondents belongs to Muslim religion.
- The researcher identified that, majority of the respondents is belongs to Kerala.
- The researcher indicates that, 40% of respondents are Married, and 26.66% of respondents are Divorced, 16.67% of respondents are single and widowed. Majority of the respondents are Married.
- The researcher identified that, 86.67% of respondents are Single family, and 13.33% of respondents are Joint family, and none of respondents are Extended family. Majority of the respondents are Single family.
- The researcher identified that, 40% of respondents belong to Pucca house, and 33.33% of respondents belong to Semi Pucca, and 20% of respondents belong to Kachaa house, and 6.67% of respondents belong to Hut house. Majority of the respondents are belongs to Semi pucca house.
- The researcher identified that, 53.33% of respondents have Bank account, and 23.33% of respondents have no saving. The table clearly mention that majority of the respondents have Bank account.
- The researcher indicates that, 43.33% of respondents have savings bank balance is below 10000, 30% of respondents have savings bank balance is 10000-20000, 20% of respondents no savings bank balance, and 6.67% of respondents have above 20000.
- The researcher identified that, 50% of respondents has no amount of debt, 40% of respondents are below 25000 as amount of debt, 10% of respondents belong to 25000-50000 as amount of debt, and none of respondents are 50000-75000 and Above 100000 as no amount of debt.
- The researcher identified that, 56.67% of respondents are Feeling low social status, and 43.33% of respondents are not feeling low social status. Majority of the respondents are Feeling low social status.
- The researcher identified that, 50% of respondents studied High school, 36.67% of respondents studied Primary school, and 13.33% of respondents are Plus two. Majority of the respondents are belongs to High school.
- The researcher identified that, majority of the respondents have children.
- The researcher identified that, majority of the respondents have their own house.
The researcher identified that, majority of the respondents are no sex abuse in childhood.

The researcher identified that, majority of the respondents are faced violence during sex work as sometimes.

The researcher indicates that, 86.67% of respondents belong to started sex work as more than 6 years, 13.33% of respondents belong to started sex work as 3-6 years.

The researcher indicates that, majority of the respondents never exchanged sex for drugs.

The researcher identified that, Majority of the respondents are sometimes exchanged sex for other goods and other services.

The researcher identified that, 46.67% of respondents belong to started sex work age as 18-25 year, 40% of respondents belong to started sex work age as 25-35 year, 10% of respondents belong to started sex work age as below 18 year, and 3.33% of respondents belong to started sex work as above 35 year. Majority of the respondents started sex work age as 18-25 year.

The researcher identified that, majority of the respondents family members don’t know they are sex worker.

The researcher identified that, majority of the respondents close friends, acquaintance and neighbors know they are sex worker.

The researcher identified that, majority of the respondents are reason for started sex work for money.

The researcher identified that, majority of the respondents couldn’t get another job.

The researcher identified that, majority of the respondents don't have enough money in a straight job.

The researcher identified that, majority of the respondents like straight job.

The researcher indicates that, majority of the respondents are belongs to using drugs and money to pay for them as No

The researcher identified that majority of the respondents’ particular goal in their mind.

The researcher identified that, majority of the respondents always using condoms with their partners.

The researcher identified that, majority of the respondents are no health issues while using condoms after sex.

The researcher identified that, majority of the respondents always visiting medical service.

The researcher identified that 100% of respondents taken HIV test.

The researcher identified that

100% of respondents HIV results are Negative.

The researcher identified that majority of the respondents’ health condition than about the same as one year ago.
The researcher identified that majority of the respondents don’t have intermittent fever.

The researcher identified that majority of the respondents don’t have diseases during this period.

The researcher identified that majority of the respondents didn’t did sex reassignment surgery.

The researcher identified that majority of respondents got awareness class.

The researcher identified that majority mentions that 63.34% of respondents always attend awareness class.

The researcher identified that majority of respondents sometimes facing discrimination in hospital.

The researcher identified that majority of respondents government service satisfaction as sometimes.

The researcher identified that, majority of respondents belong to awareness level of condom use, spreading HIV/AIDS, and government schemes, other health issues, service centers as always.

VII. CONCLUSION

The researcher concluded that awareness level is very important for every sex workers. This will helps to maintain good health condition. Through the researcher identified that the awareness level of HIV/AIDS and other sexually transmitted diseases attained by the sex worker. The majority of the respondents engaged in sex work for attaining reasonable income for her income. The social stigma associated with them is a major barrier to attain social security.

VIII. SUGGESTIONS

- Proper rehabilitation enables the sex workers to avoid unhealthy life practices.
- Social security of sex workers must be ensured by NGO’S government and other local authorities.
- The awareness sex workers helps them to know about the problems of unprotected sexual inter course and reducing the chance of other Sexually Transmitted Diseases (STD).
- The government and other responsible institution take necessary measures to avoid sexual violence against sex workers.
- The sex workers must ensure HIV test once in every six months.

IX. REFERENCES


A number of school kids chose arbitrarily from 25 schools in Mumbai and led a school based young training program for a six week.

[3] Davila ME, Taglia Ferro AZ (2008) “Directed a review to decide level of learning about HIV/AIDS by utilizing elucidating examination. A non likelihood test was framed from 208 understudies from the secondary schools and poll managed in regards to HIV/AIDS aversion and transmission mode was connected.”

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[5] Lal SS, Vasan RS, Sarma PS, Thankappa KR. (2000) “Directed a cross sectional review examine with respect to information and state of mind towards HIV/AIDS, sexually transmitted ailments, and sexuality among undergrads in Thiruvananthpuram District Kerala. 625 undergrad understudies were haphazardly chosen (164 young men, 461 young ladies age 18-22 years) and managed an organized survey on information and demeanor.”


[9] In light of her work, a sex laborer has a more serious danger of getting sexually transmitted contaminations (STIs) and HIV than other ladies. This substance is from page 344 to 345 of Where Women Have No Doctor.


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