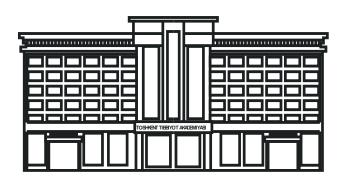
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ОИВ-ИНФЕКЦИЯСИ БИЛАН ХАСТАЛАНГАНЛАРГА НИСБАТАН МУНОСАБАТНИ ШАКЛЛАНТИРИШ

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ФОРМИРОВАНИЕ ОТНОШЕНИЯ К ВИЧ-ИНФЕКЦИРОВАННЫМ ЛЮДЯМ

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ОИТС одамлар, жамоалар ва мамлакатларга таъсир этувчи мураккаб ва даволаб бўлмайдиган касаллик бўлиб қолмоқда. ОИВ/ОИТС эпидемияси дунё тарихида илгари мавжуд бўлмаган. ОИВ/ОИТС 30 йилдан ошиқроқ тарихга эга ва бугунги кунда ҳам ОИВ/ОИТСга ҳарши кураш стратегиялари эпидемиянинг суърати пасайишини кафолатламайди.

Калит сўзлар: ОИВ-инфекцияси, саломатлик, стигматизация, дискриминация, ижтимоий муаммо.

СПИД остается сложной и неизлечимой болезнью, поражающей отдельных людей, сообщества и населения целых стран. Эпидемия ВИЧ-инфекции/СПИДа не имеет прецедентов в мировой истории. История ВИЧ-инфекции/СПИДа имеет тридцатилетнюю историю, и даже сегодня стратегии мер в ответ на ВИЧ-инфекции/СПИД не дают гарантии, что темпы эпидемии замедлятся.

Ключевые слова: ВИЧ-инфекция, стигматизация, дискриминация, здоровье, социальная проблема.

Dynamics of this illness such is that it affects and threatens not only lives of all people on the planet, but also applies a print on a social society organization; deforms it. Generates "a syndrome of a social anomy" of society in its most various implications: hunger, military conflicts, and other accepted phenomena. Stops processes of globalization and enlarges discrimination and stigmatization of people on these or those signs, thus, violating their rights for worthy existence, their realization as persons. HIV – infection/AIDS is reflected thereby in any sphere of human activity.

For today there is no treatment which would lead to excision of a virus from an organism. It is possible to detain development of an infection and to slow down its transition to AIDS stage and by that to provide to the HIV infected messages full-fledged life, but elimination of a virus is impossible. And, besides, the virus undergoes evolutionary changes and gains fastness to medicinal preparations, especially because of the wrong or interrupted treatment. A specific task of social work with group of HIV-positive clients is fight against stigmatization and discrimination as well as in relation to the client, and in relation to members of his family, as a result of the stigmata created at society. Even in spite of the fact that, for years of use of measures against AIDS epidemic in the world takes place of implication of stigmatization and discrimination in relation to HIV - infected. Laws fix discrimination of the people belonging to risk groups in many countries. However discrimination of those who are engaged in the sex industry the persons doing drugs, and the men having sexual relationships with other men only strengthens epidemic and doesn't give the chance to apply such measures which are most effective from the economic point of view. We have to provide that fight against AIDS was based on real data, but not on ideology, and we have to capture those who first of all need the help and who suffered most of all".

Specifics of social nature of spread of HIV infection in the Russian Federation are shown in cultural features, in the special relation of citizens to AIDS problem, low level of knowledge, the specific infantile relation to measures of personal security, predilection to risky behavior, etc.

Therefore, understanding relevance of a subject as high what are conducted actions in response to AIDS, it is set defined a task. To learn and understand how the relation to the HIV – infected was formed, it is necessary to analyse and describe aid programs. It is necessary to notice that only right execution of aid programs, helps, not only to achieve positive achievements in a campaign against AIDS, but also to achieve weakening or destruction of stigma and the discrimination arising in those societies where there is no big openness concerning the solution of problems on AIDS, in view of national and cultural, political and social traditions. Here it is possible to carry, for example, such regions which didn't present the to the reporting under UNAIDS. It is the Middle East, Egypt, Libya, Afghanistan, Turkmenistan, Venezuela, Fr. Guiana, North Korea, Bosnia and Herzegovina, Montenegro, Albania and Macedonia.

History of formation of the relation to HIV - infected in general for the entire period of a disease can be tracked on stories of its emergence and measures in response to epidemic. At the same time remove two tendencies in the history of formation of the relation to HIV - infected in the world and Russia which often didn't coincide and only recently began to have more similar problems, than for the previous period (the beginning of epidemic). The relation to HIV – infected in the world began with extremely negative estimates, but on the course of reduction of measures against HIV, expansions of a possibility of actions against HIV the attitude towards such people became, changes in a positive side.

At the daily level only the few know about the right of voluntary testing for existence of a virus. Therefore the people who don't have the reasons to be afraid of the positive diagnosis perceive the analysis as medical formality. Those who know or suspect about existence of an infection secret and illegal practice of identification of infected forces to ask for a medical care only in the AIDS Centers. People with HIV know that in what medical institution they wouldn't ask for the help, at first will test them and, in case of a positive take, will refer for treatment to the AIDS Center.

Intimidation of HIV-positive people at the state level is based on their obligatory statement in popularity about criminal liability for notorious infection of other person with HIV infection and for creation of a situation when there is a possibility of such infection (article 122 of the current version of the Criminal Code of the Russian Federation). During posttest consultation of people inform that from this point they become potential offenders. In the criminal code and comments to it doesn't make a reservation and the partner's consent, use of agents of preservation at which the transmission of infection is impossible isn't taken into account. The fact of the sex relations with not infected person is considered a crime. The criminal liability formulated thus legitimates the ban on the sex relations for infected. The mechanism of protection against intimidation is the aspiration of people not to know about the HIV status as ignorance of the diagnosis exempts from criminal liability. It compels those who suspect or know about the HIVpositive status, not to address to the AIDS Centers, completely losing a possibility of receiving medical services.

Idea of personal responsibility of HIV-positive people for infection is widespread. R. Vaytts (Weitz, 1990) showed that AIDS is socially designed as the self-caused illness. For traditional consciousness transfer of HIV infection is bound to such socially not approved types of behavior as the use of narcotics and sex dissoluteness or "perversion". Therefore HIV-positive people are defined not as "the innocent victims", and as the people personally guilty of what happened to them. At the same time fault degree in acquisition of HIV infection is various. The children and adults who caught in the intrahospital way are found not guilty. The others - narcomaniacs, homosexuals and just sexly illegible people - carry stigma of own guilt in infection. Unlike the patients with other serious illness, for example cancer or tuberculosis, people with HIV don't meet at the level of daily communication of sympathy and compassion from representatives of not infected majority.

Other widespread reaction to HIV-positive people their perception as threats of own safety, the aspiration to be protected from this threat by means of the hostile relation, discrimination and a segregation.

Though HIV infection is only illness, it has a set of social and emotional consequences not only for HIV-positive people and patients with AIDS, but also for their families and friends, for all people concerned by distribution of this illness.

The intolerance which is the cornerstone of discrimination to all alien develops in practice into labeling, intimidation and threats, in physical violence, the appeal to public opinion with demands to protect society from these people by coercive measures of impact on them, up to isolation from people around.

The similar relation results in tragic results. Children force to throw school, discharge patients from office, turn out them also apartments. Some die all alone without any leaving. Often people about HIV/AIDS section on "the innocent victims" and "those who are guilty". The babies who caught from mothers the people infected at transfusion of an unchecked blood wives who were infected by husbands are considered as "the innocent victims" and cause sympathy. The same who "is allegedly guilty" of own infection, for example, of the prostitute narcomaniacs, homosexuals, are considered deserved illness and death.

People who don't carry themselves to these groups, consider that danger doesn't threaten them and don't safeguard the behavior. They think: "It can't happen to me" But AIDS is not about "us" and about "them". One don't catch HIV because they "bad", and others aren't protected from HIV because, they are "good". The person catches HIV as a result of the acts, but not as a result of that whom he or she is. Any person making the acts adjoining on risk of infection of HIV can get sick with AIDS. Nobody is insured from illness if puts itself at risk. Nobody deserves to receive this illness. And until we don't realize that any can catch HIV, epidemic will continue to extend.

Thus, it is possible to conclude that AIDS is the illness caused by the human immunodeficiency virus (HIV); as independent nosological unit it is allocated in 1981. The disease is characterized by the final fracture of immune system doing an organism sensitive to opportunistic infections from which finally the person also perishes.

HIV epidemic already made emotional impact on our society and caused in it split. It was suggested that all HIV-positive people should be isolated. Such offer is absolutely unacceptable from universal positions and is simply unreal as it should isolate for many years about 1,5 million Americans infected now with HIV.

Stigma roots in the field of HIV/AIDS and as its investigation, implications of discrimination against the people living in HIV first of all are cut in insufficient knowledge of the population and concrete knowledge of prophylaxis of HIV/AIDS.

Results of a research showed not only the insufficient general level of knowledge of prophylaxis of HIV, but also low level of knowledge of legal questions, the legislation, moreover, it was noted among professionals who owing to the duties have to possess this information.

Stigmatization of this disease began with the moment of emergence of epidemic of HIV and its distribution in the world and generated a pavor before this illness. Especially the pavor of infection is expressed in need of rendering services for the HIV infected in particular from health workers. Now as a result of carrying out researches and implementation of target programs, many stigmata and forms of discrimination ceased to be shown. Considerably the relation (especially not physicians) to infected improved.

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Relevance of this article is caused by the fact that AIDS remains the difficult and incurable disease striking certain people, communities and the countries. Epidemic of HIV infection/AIDS has no precedents in world history. History HIV – infection/AIDS has a history, and even for today on today's strategy of measures in response to HIV infection/AIDS don't give a guarantee that rates of epidemic will be slowed down.

Key words: HIV infection, Stigma, discrimination, health, social problem.