## **Sexually Transmitted Diseases Taboo: Time to Rethink**

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Abstract: Sexually transmitted infections (STIs) are infections that are spread primarily through sexual contact. In our daily practice, we see gonorrhea, chancroid, syphilis, and chlamydial infections that can be cured, as well as HIV, genital herpes, HPV, and hepatitis B infections that cannot be cured but can be managed with available treatments. Many people in India are infected with Sexually transmitted diseases (STDs), and the figures are quite high because of a lack of awareness and communication, as well as a taboo against these diseases. Numerous taboos and associated stigma shape patients' lives and have a significant impact on health care policies, medical research, and current issues in medical ethics. Current statistics emphasize the importance of delivering sex education to this important demographic promptly. The long-standing tradition of girls marrying very young, especially in rural areas, and often too much older men, causes a slew of STIs. Stigma and HIV have a cyclical relationship; people who experience stigma and discrimination are marginalized and made more vulnerable to HIV/STDs, while those living with HIV are more vulnerable to stigma and discrimination. As urban pressures have grown, so have slums - and they have fast become ideal breeding grounds for STDs. In developed countries, strict laws have been enacted requiring people suffering from STDs to seek immediate treatment as well as contact the health department. Unfortunately, because of the stigma associated with the disease, patients in India are reluctant to reveal the source of infection. With various schemes, India is attempting to promote sex education and awareness. For example, the Ministry of Health and Family Welfare developed the National Adolescent Health Programme (also known as the Rashtriya Kishor Swasthya Karyakram) in partnership with the United Nations Population Fund (UNFPA). Whereas, National AIDS Control Organisation was set up so that every person living with HIV has access to quality care and is treated with dignity and breaking all taboos. It becomes clear that research and healthcare policies will not be effective in assisting patients with STDs unless these "nonscientific" elements are taken into account.

**Keywords:** sexually transmitted diseases, sexually transmitted infections, taboo, stigma, HIV/STDs, sex education and awareness, treatment, quality care, medications, healthcare policies

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