

CHAPTER TWO

METHODOLOGY AND PROFILE OF RESPONDENTS

The study area

The present study was conducted in a military unit located in northern part of West Bengal State (India) commonly called as North Bengal. Tribal population who works as labourers in the adjoining tea gardens surrounds the unit. It is situated at a distance of 15 Kms from New Jalpaiguri railway station and about 13 Kms. from Bagdogra (Siliguri) airport. The unit is one of the Signals units of Indian Army responsible to provide radio, line and satellite communication to various army units located in North Bengal, Sikkim and areas of North East states. In addition to providing above communication support, the unit has also a role of interception, counter electronic warfare, and monitoring overall radio communication of this sector.

Historical Background of the Unit under study

The unit, from which the sample population has been selected, was raised to provide radio and electronic communication as required in the organization. It was initially raised at Shillong (Assam, India) in 1960. During the Sino Indian border conflict in 1962, the unit was shifted from Shillong (Assam) to Bagdogra (Siliguri, West bengal, India). It has direct communication link with stations like Calcutta, Shillong and Delhi through radio and telephone. An additional communication network of this unit also exists with various military units in Sikkim, Binnaguri, Siliguri and parts of Assam.

The unit is geographically located in an area of north-eastern part of India connected by rail, road and air with rest of the parts of the country. Another important consideration behind selecting

the unit was that this unit was under direct observation of the investigator. The geographical proximity of the researcher with the unit and its socio cultural milieu was a matter of consideration before designing such a sensitive study. While conducting this study among Army personnel of the Indian Army, certain socio cultural aspects in relation to the personnel of Indian Army in general vis-a-vis the other armies of the world, has been kept under consideration. So far the Indian Army does not have female entry in ranks. It has a small percentage of female officers (introduced in 1993) and lady doctors and nurses. As known the American, British, Israel armies have women in the ranks and the Indian army has a basic difference in organization with these countries. As mentioned earlier the universe of study the researcher has opted for interview of the personnel of a Signals unit. In such a unit the composition of other ranks is of male population from various states of India unlike an infantry unit which are mostly comprised of one single community, e.g. a Gorkha battalion, a Madras unit or a Bihar regiment. In case of a unit of single community composed with a homogeneous mix of population it would not have been possible and the study would have been prototype with bias only. But the selected study population has been such that it represents a cross section of almost all states and union territory of the country, since a Signals unit comprises of a mixed population.

Manifestation of sexual behaviour of respondents.

Historically⁶ Prostitution⁷ have been inseparable with Military Bases. But it has taken calculated policies to sustain that fact : policies to shape man's sexuality, to ensure little readiness, to determine the location of businessmen, to structure women's economic opportunities, to affect wives, entertainment and public health. It is striking that these policies have been so successfully made invisible around bases local and foreign in North America and western and Eastern Europe, where as they have attracted so much notoriety around bases in poorer countries of third world.

It is worth thinking about why military prostitution is so politically invisible in some places and so notorious on others. Which facets of foreign and domestic military base life have been

deemed to be 'political' so to warrant public action? In North America, Europe, New Zealand and Australia, local military bases only rarely become issues (often when threatened with closure), while foreign military bases have become politicized when local citizens have begun to see them as jeopardizing their own security and sovereignty. Prostitution and its attendant threats to public health and morality have been scarcely mentioned. By contrast, groups protesting against foreign bases in third world countries have made prostitution as a central issue. (*Cynthia Enloe : 1989*).

India is one such country in the third world where professional^{at} sex work is always publicly highlighted. The prevailing scenario in this regard prior to world war II and post Independence of Indian union and post Colonization period have distinct demarkation and significance. No foreign military base exists any where in India after 1947 and the present composition of Indian army is indigenous. Though their own army bases are located at different places of the country there is no designated area of professional 'sex workers' to publicly entertain soldiers of Indian army. There are odd 'red light' areas in almost all cities as explained earlier, which are part of the society and not meant for or earmarked for the army as such. Circumstantially some of the Indian army personnel at times get allured to visit prostitutes, though during the survey only very few evidenced it. Here unlike an American or Soviet soldier, such visit to prostitutes is not officially approved. This act on the part of army men is considered to be against unit administration and is considered as a violation of the unit discipline which restricts movement of its personnel in normal course. As *Cynthia Enloe* in her book mentions that visiting prostitutes by soldiers of an American or Russian army is quite common, but it is a culturally considered as a central issue in case of personnel of Indian army.

As per *Cynthia Enloe*, the Phillipino women line up twice a week to undergo VD and AIDS check up because the American servicemen demand 'VD and HIV clear' from the 'sex workers' they visit which conversely is demanded by such sex workers from them also. Such example depicts the exact political picture of the society where prostitution for the army is not made public. Such is

the cultural construction of sexuality in Indian society which reflects directly on its army population also. It affects them more because the professional circumstances compel them to starve sexually and yet there is no official approval for sexual release.

Though the statistical data of any unit of the Indian Army shows a very negligible percentage of VD cases and also of AIDS/HIV infections, it does not bring us to conclude that such urge to visit professional 'sex workers' is non-existent in them. The cause of least percentage of VD cases among Indian army men is due to the following reasons (a) resolute leadership of Indian army officers who imbibe strong motivation in their command (b) application of direct interpersonal communication between the leader and the led (c) the cultural construction of 'sexuality' enabling them to exercise penance and self control of sexuality. So far as the transmission of VD to the army men are concerned, it is due to 'unprotected sexual liaison' with an infected partner or a 'professional sex worker' deliberately or inadvertently. In case a soldier is found to be HIV positive it will be unjustified to outrightly conclude that the same infection is caused through sexual contact only. In many cases it has been initially contacted by a single source either due to sexual liaison or due to use of unsterilized syringes in hospitals or the medical information rooms (MI rooms) and thereafter the careless use of infectious needle caused spread of further infections. Later the use of disposable syringe has been enforced. Such infections other than through sexual route carried on unchecked till the detection of the first case. There had been many such transmissions through transfusion of untested blood also. There should be no illogical deduction against any victim and there should be no moral condemnation of the infected ones.

Till such time this disease was detected and identified, its epidemiology was not known to the army personnel. So far, VD was considered to be a damaging disease which is yet curable. So, the army health care department and its administrative machinery was geared up to disseminate the prevention policies to army units so far regarding STDs. With the appearance of such ghastly virus (HIV+) the system was alarmed and meanwhile few got infected due to non-existence of knowledge

about such disease.

When the infection of AIDS/HIV was initially detected, it aimed at one deduction only that the infected one is a guilty person of having enjoyed sexual intercourse with some one infected with HIV positive. At that stage it was beyond the perception of everyone, that it may be due to use of infected needle or use of contaminated blood through unchecked blood transfusion till they learnt the epidemiology of AIDS. Such basic social mental block in the society inscribed a stigma and discrimination against those who were unfortunate to be affected with HIV virus at its inception.

In the complete process of transmission of this virus, women are the receivers and male promiscuity often becomes the prime cause of spreading such disease sporadically. We find statistically the literacy rate of women surveyed upto 1995 of above 15 years in the world is 71.2% and in India it is 39.29% which is much less than that of men being 64.13% (*Demographic Year Book : 1995, UN Newyork*). Since the strength of any community develops through 'Education' achieved through literacy which is still very low among 'Women' in India, so the scope of access of this disease is wide. This noticeable difference of profile of HIV infection between male and female is socio cultural; male dominance and superiority, rampant illiteracy among women, poverty forcing women into commercial sexual exploitation, domestic sexual abuse, low access to women to socio economic opportunities. As if this is not enough, the plight of women is further exacerbated by denial or neglect of their basic human rights or in other words gender discrimination.

The power imbalance in the gender relationship is now being seen as the root cause of women's vulnerability. There are numerous hurdles to prevent HIV infections among women. They include certain sexual norms that limit women's access to seeking information on matters related to her own body and sexuality.

Violence against women, both at the domestic level and outside, the familial and social acceptance of male promiscuity are contributory factors to women's increased vulnerability. It is not uncommon at least in India to hear from some women that her husband enjoys sex with others

and if she ever protests she would be left. Women's economic and social dependence on men is wide spread, and provides the most powerful weapon in the hands of male chauvinists.

Double standards in marital relationship, and woman's dependence on man for economic and social support, lack of male initiative and responsibility in women's reproductive health problems and low access to health care facilities compound the already threatening social milieu. To top it all there are no 'women controlled' method of HIV prevention except for the 'Reality Female Condom'. Female now has a very limited option on this account. But the rest of the technology available is men centred and men focussed.

The real challenge in our society to day in this context is to empower women so that they can avoid exposure to infection and help themselves to cope with the threat of HIV. This is easier said than done.

Women in India, generally are not able to talk openly to their partners/spouses about sexuality and condoms because they are afraid of raising doubts about their fidelity. 'Condom' use in India as found till now is mainly to prevent pregnancy (*Shankar Chowdhury : 1998*).

Though under the circumstances before any sexual liaison a woman may try to persuade her partner to use 'condom' to ensure 'safe sex' she may not be successful. For her side also there is a small option in that she can use the 'Reality Female Condom' if she can get it. It may protect them against HIV, but it is not as good as the latex 'condom' men use. It has been verified during this study that the army men are encouraged to carry condom before they visit the city shopping centres. While mixing up with the civil population, some one may indulge in a casual sexual liaison with any professional sex worker in the town. Such use of condom if encouraged as a practice it will guard against HIV infection to them.

The degree of knowledge and its overall outcome through awareness regarding 'sex' and

'sexuality' of the army men has been examined in the close quarter and found that some amount of inconsistency exists among them. The reason found of such 'unawareness is mainly pointed towards the inadequate conception about such disease barring them from knowing the bio medical phenomena of human body, sex and sexuality in details. Their level of education is low and at that level Life Science which teaches of sex and sexuality is not in their curriculum and they are deprived to know about 'sex and sexuality' theoretically. For such group of people the knowledge about sex is only aimed at the sexual copulation and for that they hardly need any formal teaching on the subject as most of them feel. Their marital life is lead happily with this conception and there is no further desire to know about sex. Till date many educated people feel that it is against their dignity and social position to talk or mention about 'sex and sexuality' publicly. It even appears to be embarrassing for those who conduct study or research on this. This is the cultural construction of the society which differs grossly with that of many other countries in the world.

As discussed earlier the Indian culture depicting values and high ethical sense, inspire many not to indulge in sexual act other than with their own partner. Directly such motivation inspires them of 'abstinence'. Those who are fully motivated (though a very low percentage) do not need to follow 'safe sex' or use of condom because they are sure of there loyalty to a single partner without using 'condom'. Such category of people are also existing though they are of insignificant percentage. Their knowledge about the disease is also inadequate, because they follow the path of ignorance, considering it to be a boon to them.

The cultural construction of 'sex and sexuality' of Indian army men has practically undergone test of time. While some Indian army contingents had been representing the UN force recently, they displayed a distinct pattern of sexual behaviour while staying abroad. Their record of achievement of non indulgence in any sexual affair in such countries, drew attention of many including the Secretary General of UN himself who along with this aspects appreciated their professional skill and high standard of discipline. Such sense of 'abstinence' scored a very high position among others on the UN mission representing many countries of the world. It only denotes that the cultural construction of 'sex and sexuality' of Indians is distinct and can not be compared with the people of

any other country.

As regards the cultural construction of this disease, it is felt that there is a cultural epidemic which need to be focused more than its bio medical angle. *Paula Treichler (1998)* calls it as an “epidemic of signification”. The book acts as a guide of social science researchers on AIDS. As the disease has its bio medical chapters to be investigated, it is more pertinent as per views that a social scientist can stretch his views beyond the virus, its symptoms and ensuring prevention. It involves the health communication, health education, clear conception and identity of inscription of gender. Social construction of reality based on social concept also is part of this. It relates more with behavioural aspects of men and women, the dominance of masculinity and obscurity of male folk about the ‘female’ sex of the society. It is an applied state of ‘sexuality’ with adequate or inadequate knowledge whichever is applicable.

How value based education, cultural legitimization of human behaviour plays a significant role in growing awareness about AIDS, Paula Treichler explains in her book. In case of Army personnel, the sample population of this study, the investigator has been able to explore the behavioural aspect of the interviewees. Their answers to a typical query whether there should be an officially sponsored brothels around their respective units or not was vehemently objected and negated by the majority of the interviewees most deliberately and spontaneously. It goes to prove that an army man of Indian army, in his heart of hearts is not in favour of going against discipline. Because he thinks the presence of any brothel around any unit lines will break its discipline.

There was no comment by any respondent about ‘Homosexuality’ or “lesbianism” because basically most of them were not aware of these two words and were not found very comfortable when the act was explained. Under the circumstances where such population grew up are mostly of poor middle class villages of India. They are hard working, honest and peace loving being of religious nature. ‘Homo Sexuality’ and ‘lesbiamism’ are not the terms known to them in their daily life and they do not consider knowing it as essential. The sexual urge can be satisfied showing

loyalty to a single life partner and not being promiscuous. In Indian culture the women other than own wife are considered as 'Mother' community and are respected as a mother only. Such noble cultural concept continues generation wise and any thing committed against is considered as a sin. "Homosexuality" and "Lesbianism" are the words which in normal course no body would like know or hear about. They feel surprised to think how sex can be manifested like this. They expressed saying that such act is mostly unwarranted and below individual dignity. Even practice of 'masturbation' is felt that it goes against health. It is also considered to be something bad and not of normal behaviour.

When such is the basis of cultural platform of the society and majority of the Indian army comprises mainly with its rural population, their behaviour even after joining the services remains to some extent unchanged as regards such cultural aspects. Though some of them feel that they should visit professional sex workers for sexual release, many out of them love to abstain. Some due to fear and apprehension and some out of strict self discipline and dedication to his family.

In addition, the spiritual concepts which are also a part of their rich cultural heritage, are carefully preserved by many of them showing a deep sense of concern. As a result a transformation of thought takes place regarding sex among army personnel after they join the army. The result shows that some percentage grow promiscuous due to sudden exposures, flow of cash and availability of opportunities, some become frugal, but few yet remain conservative, value oriented after knowing the evils of diseases like AIDS/HIV.

As in other countries of the world, 'homosexuality' and 'lesbianism' are most common terms and there is no special significance attached to it, in Indian society even today after introduction of cable TV culture, cultural globalization, these are very much a specific terms and are not most commonly known or practically experienced by many. There may be some who practice 'homosexuality' or 'lesbianism' the number of such are negligible and statistically insignificant.

'Homosexuality' and 'lesbianism' have various social back grounds in America, Europe and in Mombasa. Their perception of these terms and practical application are also not comparable to Indians.

This study is based on practical evaluation of behavioural aspect of each individual or sample of Indian army population representing each of their state, ethnicity and culture through their day to day behaviour in an army unit, on all behavioural aspects including sex and sexuality and this is not a composition of theoretical statements.

So it has been taken into consideration that there is a need to high light the socio-cultural aspects of the Indian army personnel with special reference to this pandemic disease AIDS/HIV infection.

The very concept perceived by *Paula Treichler (1998)* is unlike many books written on AIDS/HIV. She has covered an area of unattended thoughts and ideas which attract social science researchers towards a meaningful dimension of study. Her ideas arouse the sensitivity to culture which itself is a new technique of prevention of such disease.

Paula in her book says how a medical researcher can be attracted towards the cultural construction of the disease which is really difficult where as a social science researcher can do shifting his work design towards the epidemiology of the disease. There is a flexibility and option available with a social science researcher where as it is to not so incase of a medical scientist.

As regards this disease, medical research is possible and meaningful only when its sociological aspects of concerned population are taken care of. The cultural construction of AIDS differ significantly with various population attached with the disease. The interpretation of meaning of this disease will be different in sub Saharan Africa, in America, Europe and in India.

In this study the basic knowledge of 'Sex' and ideas about 'sexuality', 'women education

without gender classification' and introduction of 'Condom' culture will grow knowledge and the holistic awareness about AIDS/HIV.

Identification of Respondents

For present study, all the respondents were selected from the stated unit. The unit is organized with four subunits called 'companies'. Each company is earmarked with a specific technical and military role. The organization of the unit is such that it has more than one category of technical trades. They are radio operators, linemen, radio mechanics, telephone mechanics, drivers and various tradesmen. From this unit of about 850 personnel, a large group of volunteers came forward and then through a random selection a sample of 201 personnel was chosen for final selection and interviews. They constituted the ultimate unit of study and were the principal respondents of present enquiry. Individual background information as furnished by the respondents were verified from their office records. The master long roll containing biodata of each army personnel was found to be of vital importance to carry out such scrutiny of personal data. The fieldwork was conducted during April 1997 to July 1997 followed by a rechecking during Nov 1997 to Dec 1997. While identifying the respondents out of a military unit, the interviewer always kept in mind the point that such population basically belongs to Indian culture and have subsequently adopted a new way of life including their social habits, language and personal behaviour. So since the cultural aspect and perception of health, body, sexuality and the concerned disease are interrelated, its implication on the group of interviewees, has always been considered to be prime. As *Anthony Giddens (1989)* in his book '*Sociology*' mentions culture is the whole way of life. It includes how the Indian population dresses, their marriage customs and family life, pattern of work, religious ceremonies and leisure pursuits. Since the concerned disease is directly related to the behaviour of these personnel meaning of 'Culture' is obviously a significant starting point of such study.

Collection of data

For this study, every identified sample respondent was contacted personally by the researcher/

investigator. All the respondents were interviewed with the help of an interview schedule. The interview schedule was pre designed as per objectives of proposed research. It was pre tested with a view to add essentials and delete those not of any consequence. The pre testing of questionnaire was done on other individuals from a neighbouring unit for the purpose of avoiding any bias. The investigator on the spot recorded the responses as the interview progressed. The officers however filled their respective schedules themselves. At the time of interview of junior leaders (JCOs) and Jawans, the questions of the schedule were translated in Hindi and the respondents were asked to answer those in any language convenient to them. Most of them replied in Hindi barring a few in English. These were mostly filled up by the interviewer to ensure accuracy and speed.

Before commencement of the study, and during fieldwork, the investigator faced a series of difficulties. Firstly, at the initial stage it was difficult to convince the army authorities to allow the researcher to proceed with a sociological study concerning army men. However, when the aim and objective of the proposed study was explained, the approval to proceed with such an enquiry was accorded.

Secondly, there was practically no perception among the respondents about such a social investigation where their involvement was direct regarding a subject of 'sex and sexuality'. Almost all of them expressed that during their service life they had never come across such investigation or such an academic pursuit, which probes into the personal life of army men. For obvious reasons, an initial apprehension mixed with hesitation existed in the minds of almost all respondents excepting few officers. Thus, they appeared to be somewhat indifferent and inexpressive at the beginning of the field enquiry. Through regular addressing them collectively by the investigator prior to individual investigation the respondents gradually took him into confidence and ultimately came forward without any hesitation or fear to respond to the questions asked to them. The informal interaction between the investigator and the respondents grew with the passage of time as the enquiry progressed. As a whole it was a successful mission and the process continued systematically as desired.

The Interview Schedule

An interview schedule was administered in present study. Structurally, it was divided into the following sections :

In the first section, the information like the personal background of the respondents, their nature of exposure to media, preference to media programs and exposure/access to other various sources of information, communication for health related messages including prevention of AIDS and HIV infection were collected. The second section dealt with various questions on the way of life of army personnel. The third and fourth sections sought information on communication and media messages, media behaviour of each respondent, their knowledge on AIDS and HIV infection were further grouped into following categories : (a) General (b) Sources of infection (c) Signs and symptoms (d) Modes of transmission (e) Perception of risk and (f) Methods of prevention.

Analysis

The answers furnished in the interview schedule were edited, standardized and finally tabulated. A good number of tables were generated. Statistical information derived from those tables helped explaining the knowledge, perception and behaviour of the respondents about AIDS and HIV infection keeping communication for health education as the bench mark.

The Army Personnel and their organizational milieu : A Profile

Discipline is the back bone of any army. It is the basic Leadership trait, which results in success, whether it is in the field of administration or military operation. It breeds a defined work culture to work in organized manner. Thus, it is only discipline, which acts as a prime and essential determinant of leading an organized life in the Army or elsewhere. Starting from basic training days, a soldier learns how to be disciplined in his day to day routine life. This leads to transform certain individual habits allowing him to get rid of minor inhibitions to shape up his personality to become a leader of a team training himself through a systematic and rigorous way of life conducive to defence standards. Army life enforces discipline in a stringent way because the existence of army without discipline is

like a ship without radar. No army can fight a war successfully, however equipped it may be, unless it is disciplined.

The army, a huge organization by itself is an inseparable organ of the country's core machinery. India is a vast country with its complex geographical layout. Due to vast and widely spread of international borders, there is special significance and importance of these borders from defence points of view. Thus India needs to maintain a large standing army which is expected to keep year round vigil along such borders. To achieve a high standard of alertness withstanding various climatic hazards, it is expected that an army person should be physically fit and mentally robust following outcome of a rigorous, systematic and methodical training procedure.

The term 'army personnel' in this context means its officers, junior leaders (Junior Commissioned Officers) and jawans (Other Ranks). Procedures of recruitment of each category of army personnel are different and are governed by a set of rules and regulations framed and passed by an apex body the Additional Director General (Recruiting), Army Headquarters, New Delhi from time to time as per policies of the Government of India. The selection and recruitment of officers is done through an examination conducted by the Union Public Service Commission (UPSC) and through departmental examinations in some cases. They are required to undergo written examinations and interviews held by the UPSC and Service Selection Boards respectively. Junior leaders are not generally recruited directly, except in Military Engineering Services or in Religious Teacher category. A soldier becomes a junior leader (JCO) in his organization when he attains a particular period of service and fulfils certain departmental qualifications. They attain this through gradual departmental promotions as laid down in the organization. The next in the category are the Jawans – who are recruited periodically by various Branch Recruiting Offices, which are located all over the country. Such recruitments (utilizing the existing trade wise vacancies) are also governed by certain laid down policies, rules and regulations edited by the Additional director General (Recruitment) Army Headquarters, New Delhi. The recruitment of Jawans is made through proper advertisement process in specified print and electronic media. Recruitment is finally carried out through all Branch

Recruiting Offices and Zonal Recruiting Offices as per existing vacancies.

Various departments in Army organization

Army organization consists of large number of departments first among those is the department of foot soldiers called Infantry, which is the largest in number. In addition to Infantry battalions, it has Armoured Regiments equipped with tanks, tank recoveries both of towed and self propelled version, the Artillery regiments with guns, howitzers, mortars, radars, Engineer regiments, to construct roads, bridges and tracks, laying mine fields etc. Signal Regiments to provide communication, Army Service Corps to look after all logistics requirements of the army, Medical Corps to provide medical support, Electrical Mechanical Engineering branch to provide repairs and recovery cover, Military Police to ensure discipline, Judge Advocate General branch to look after legal matters, Military Farms, to supply milk and milk products, Remount Veterinary Corps, to maintain and look after animals like mules, horses and dogs Army Dental corps, Army Aviation, the Pioneers. All these departments have their own technical roles to play both during war and peace. These are broadly classified as arms and services. The Armoured corps, Infantry and Engineers are called arms and the rest are called services.

Since the study is concerning the army population, it is considered to be mandatory to have as much detailed knowledge about the community as possible. Unless we know the organizational milieu in which they live and work, the life of army personnel cannot be understood properly. Similarly if the general way of life of this particular population is not reviewed before hand, the study may fail to comprehend the problem under examination in totality.

The way of life of army personnel is quite different from that of any civilian counterpart. The socio cultural milieu of army life is altogether different. How do the army personnel live and pass their daily life ? What type of hazards are involved in their professional and social life? How do these hazards and other factors affect their behaviour pattern while in war or at peace - are some of the significant areas which need due consideration in the context of present study.

Training

Training carries a special significance in the army. The highest policy making body regarding training in the army is the Army Training Command. The newly recruited army staff and officers are imparted training with a view to bring them up to a laid down standard of physical and technical fitness. Basic military training is compulsory for all categories of personnel and branches. The next phase of training pertains to on the job training or the technical training of the respective arms and services in which an individual has been recruited. The similar procedure is followed in case of officers also, though the institutions and types of training are different.

Similarly the training schedules specified for officers and other ranks are different. A trainee officer passes through queer series of training phases both physical and professional. This training is conducted in Military Academies and Officers Training Academics located at different places in the country. On the other hand the other ranks need to undergo basic training and later respective job specific training. It is quite tough and arduous. The training procedure is scientifically designed technically oriented and flowlessly executed in such a way that it enables the recruits to adapt themselves with altogether a different culture, inculcating all good habits and code of conduct in a man. The well said principle 'the more you sweat in peace the less you bleed in war' is strictly followed in military training schedule with no compromise. The training for the other ranks is preliminary education, which can be understood by all personnel from all states of the country. They undergo physical training comprising of vaulting & agility, unarmed combat, physical endurance, running long distances, battle physical efficiency training, boxing, jumping etc. The daily routine commences early at dawn and continues for hours. They are taught weapon training, small arms firing, drilling and map reading. In general the training period in the army is regarded most sanctitiously and executed in ruthless manner. Minor injuries and accidents never dissipate the momentum of army training at training centres. After each training course the students are put through a test and graded as per individual performance. At the end of each term there is a passing out ceremony which symbolizes the convocation of a particular course successfully completing

their training. The training program is so designed that an untrained physique of a young boy with under developed muscles and weak formations of health gradually gets tough and endured to withstand all types of physical rigours and strains. It is systematic and stage by stage, so as to be able to adapt easily.

In case of officers the training curriculum is further enlarged with versatile disciplines and subjects. It is again proportionately balanced with physical and academic modules. It has many outdoor activities simulation training in the jungle and mountain warfare and rock climbings. It teaches them swimming, boxing and horse riding as compulsory subjects. The academics consists of number of science and arts subjects, law, organization, tactics etc. Officers are specially trained in leadership qualities. Games are compulsorily played by all everyday.

As a whole the training in the army both for men and officers is very tough and enduring.

Socio-Cultural Life

To know about socio cultural life of army personnel, it is imperative to understand the pattern, composition, and functioning of military units. A unit is the smallest functional entity of any army organisation which is composed of officers, junior leaders (Junior Commissioned Officers) and Jawans (Other Ranks). Depending upon the role of a unit, manpower strength of each unit varies from each other significantly. Human aspect of military life can not be ignored while carrying out the study on armymen. Therefore the physical, sociocultural and emotional aspects of army life need to be known to get an overall idea about the way of life of the army personnel in their working set up. As already said the day to day life of army personnel is quite different from that of others of the society, so a specific angle of study is generated to know and understand about the socio cultural milieu of military life, the basic features of unit life, and other specific areas. Once the unit life is understood, it may help comprehending the way of life of the army personnel as required in this study. All the army personnel belong to the same human stock of Indian society but due to professional

demands they are compelled to lead a different type of life quite distinct from other civilians. Thus, the army unit life acquires a unique culture of its own.

Soon after joining the army, a gradual transformation takes place in social habit, behaviour and temperament of a new recruit. He starts leading a life, which is routinized, disciplined, circumscribed, and highly mobile. Among other things, their food habit, rest and medium of communication undergo a gradual change. All these ultimately lead to a change in the personality of a new recruit and he gradually turns into a full-fledged trained army man within a short time. While analyzing the socio-cultural life in the army among others the first question comes up as to how do they live and spend family life ?

The number of family accommodation available to the army personnel in all military stations is not uniform. All married army personnel do not necessarily get posting to family stations always. There are field (non-family) and peace (family stations) establishments where each person has to serve during his service span. In a peace establishment, the army colony is called a Cantonment. In a cantonment, married accommodation is allotted to all army men on individual request maintained through a station seniority roster. Almost in all military stations the officers and junior leaders are facilitated more with quarters comparing with Jawans who are numerically large and because of policies on accommodation of each category, it does not allow 100% availability of accommodation to Jawans. When a married army person is not allotted with family accommodation, he perforce has to live as a single individual in unit lines with rest of the unmarried army personnel. The state of family accommodation and number of postings of an army man through out his service is such that there will be hardly few who is/are found to have stayed with family through out his service span. On the contrary, it is more common that the prime and fruitful period of life, of a soldier is spent out being far from his family for years together. The basic biological need of a human being is thus mostly denied to married army men debarring them from cohabitation with their wives which itself

is a major sociological concern that could be a separate topic of study. There is hardly any organisation where such social condition prevails. Apart from other reasons, such deprivation could be a cause of developing the tendency of promiscuity among the army personnel.

Social Profile of the Respondents

The army personnel generally enjoy a homogeneous social identity and status of a soldier. They are considered both financially and otherwise a privileged section of the society. The organization looks after their personal requirements so that they need not keep themselves preoccupied to meet up such necessity. In an event of any sudden death the family of an army man is provided with guaranteed financial support to a reasonable sum whether the demise is caused due to war, low intensity conflict, aggravation of service conditions or otherwise. Such financial security assurance has been introduced in order to provide a substantial financial help to the family of a deceased soldier.

Socio cultural life of army personnel is often influenced by inherent social conditions of the unit, area and place of living, the rank structure etc. The personnel staying at unit lines as single, have almost no scope to interact with family members. In any cantonment social intercourse takes place among the resident families particularly with those who live in the close vicinity of their quarters. Caste or community factor generally has no worth while effect in army life and as such it does not influence their social interaction also. Such socio cultural phenomenon in complex society to day is unique and exemplary only in case of army population.

In the case of married personnel their scope of social interaction with other families is somewhat better than those who are unmarried and staying alone at unit lines/barracks. Thus, marital status of armymen is considered as an important factor in regulating their social intercourse with his unit colleagues. Let us look into the distribution of personnel by their marital status by rank in the sample population.

Out of the surveyed sample, it has been observed that 63 per cent officers, 96 per cent junior leaders and 75 per cent jawans are married. Among the officers, in an army unit, the number of junior officers are more who are with less service, and who are mostly unmarried.

Therefore, proportionally the number of married officers in any unit is less because of their age structure. On the other hand, almost all-junior leaders (JCOs) are found married. It is so because they are the individuals who have put in minimum 16-20 years of service and they belong to higher age group. So it is obvious that in a unit the percentage of married junior leaders would be more than the officers. Among the jawans, about 25 per cent are new recruits who are found unmarried. Some of the unmarried jawans living in barracks may be found susceptible towards promiscuous activities. Broadly it is, because all of them keep sound health, they consume good balanced diet in routinized manner, they are highly potent due to their young age. Most of them are immature in their decision making. They do not understand the after effects of any action taken by them. They stay away from their families so there is a possibility to develop keenness to meet a female and let loose their sexual urges. Health education guidelines are essential for such army men who are young, bachelor and who live as a single at the unit lines. Their perception about sex and its effects on health should be clear and specific. They should know what are the evils of diseases on health grown out of ignorance. Knowledge with adequate exposure to health education will help them grow awareness about AIDS/HIV infection which is the area of concern of this study. The study reveals the percentage of married and unmarried army personnel in a unit and the proportion of jawans who are in exact potent age group are found to be unmarried. As described already such status of army personnel may be one of the significant factors to develop keenness to indulge in sexual liaison with female without realizing after effects.

The factor of marital status of army staff may not be the sole criterion in determining the propensity towards their often displayed promiscuity. Some co-related factors like educational

standard, knowledge about 'sexually Transmitted diseases' and various means of entertainment available to the personnel often influence their sex related behaviour to determine their proneness towards promiscuity.

**Table : 5 COMBINED ANALYSIS OF AGE, STATE AND MARITAL STATUS
WITH RANK OF RESPONDENTS**

Age Group	Officers (16)		Junior Leaders (23)		Jawans (162)	
	No.	Percentage	No.	Percentage	No.	Percentage
20 – 30	7	42	–	–	74	46
31 – 40	6	36	9	35	72	45
41 – 50	2	12	14	55	12	8
51 above	1	6	–	–	4	2
B. State	–	–	–	–	–	–
U. P.	5	33	7	30	27	17
Maharastra	2	12	–	–	26	17
W. B.	1	6	2	8	22	13
H. P.	–	–	2	8	2	1
T. N.	2	12	–	–	5	3
Rajasthan	–	–	1	4	4	2
Kerala	1	6	2	8	9	5
Others	5	33	9	39	67	42
C. Marital Status	–	–	–	–	–	–
Unmarried	1	6	–	–	28	18
Married	15	92	23	100	132	82
Widower	–	–	–	–	2	1

The sample population in Table 5 above shows, that majority of population belongs to the age group of 20-30 years. It is known that people of age group of 20-30 years are more prone to AIDS/HIV infection than any others. From the above statistics, it is clear that the suceptivity of infection from AIDS is more among the youth of the army population. The nucleus fighting force of the Indian Army is young, who are justified to have the tendency and attraction towards frequent

sexual liaison. This leads to understand that army, as an organization needs to lay down a strong and well-defined prevention policy to safeguard its young population against the spread of such a ghastly and fatal infection.

As per studies there are least chances of infection of HIV to the people of higher age group. Therefore, the Commanding officers of army units can suitably utilize the knowledge and perceptions and involvement of serving soldiers towards dissemination of preventive messages to the rest of the population keeping in view the cultural construction of both the society and that of the disease. The total strength of this population is about 2-5 percent of the total population of the country which is no less. The population who are senior in age and service are mostly senior in rank also, and they normally have the leader's role to play in a unit, so far as motivation of the jawans regarding this disease is concerned. Therefore, it is a workable proposition to utilize the experience of senior soldiers in a unit with their perception of the disease and keenness in educating their juniors on AIDS/HIV through regular counselling and motivation in the unit lines. Being the largest state of India, UP subscribes maximum manpower to the army. Therefore it is obvious that health education campaign in UP state should be proportionately exhaustive according to its demographic status down to the village level. Similar program will exemplify other states in the country with which the dimension of awareness about AIDS/HIV will be multiplied. Individual State culture influences its population individually which they display in their day to day life when they join the army. Their manifestation of sexual urge differs grossly with each other as they grow up in this organization. A man from Punjab (one of the states of North India) and the other from down south i.e. Kerala state may display different course of action to satisfy their sexual desire though living in same unit. The one will hesitate to visit a sexual worker where as the other may not. Such variation relates to individual state culture, their family back ground and ethical perception. Some personnel strictly abstain from sexual liaison with other women, because they follow principles of '*Bramhacharya*' (abstinence) manifested by Swami Vivekananda or Mahatma Gandhi. Where as some one thinks it otherwise and he loves to enjoy life in a way as the opportunities arise. There is no significance of national culture for them who has no education. Though it is a diverse population, yet under discipline

and motivation, a unique culture is found to take shape in the Army. The life in the Indian army teaches all to lead a uniform life without discrimination of daily customs, food habits religion and the general way of life. Their Regimental life is regulated through a continuous motivation system administered by their officer corps through self examples. For a leader of such mixed group of people, it is very hard task to guide them to a common cultural spectrum. Though the army population is considered to be of 'high risk' category their risk can however be receded helping them to adopt exact practices through exact knowledge about the disease disseminated through firm leadership and executive command.

While studying the level of literacy of the subject population it is seen that 100 percent officers are literate and higher educated. Therefore, as a responsible citizen of the society, it is the moral responsibility of each officer of such organization to help grow awareness about AIDS/HIV infection even if no official instructions/orders to such effect is issued to them. Out of junior leaders 5 per cent are found illiterate where as 1 per cent jawan can not read and write. So the commanders at all levels, while implementing prevention policies regarding AIDS/HIV have a great deal of responsibility to improve upon the educational standard of junior leaders and jawans. Such endeavour would achieve 100 per cent literacy in a unit. It will also enable such group of people to gain adequate knowledge regarding AIDS/HIV and help them growing awareness of required standard that will obviate further spread of the disease/virus.

The worked out data (see Table 5) also shows that 39 per cent of junior leaders are educated below class X level where as 65 per cent jawans are found non-matriculate. This signifies that health related messages to the army population, require to be simple, logical and interesting. Thus it will easily help them in gaining required degree of knowledge about AIDS/HIV infection.

As discussed earlier the Army as an organisation consists of a heterogeneous population, which is represented by the people hailing from various states of the country. By religion majority of the respondents (90%) are Hindus, 6 percent are Muslims, 4 per cent are Sikhs and 2 per cent are Christians (Table 6).

Though individual religion has no consideration to identify an army personnel, it can however

It is seen from Table 6 that as per rank there is no junior leader other than Hindus out of the sample population. The Christian and Muslim army men are found only among the jawans rank but in lesser percentage. This indicates that for motivation of the soldiers of Muslim community, the officers have a major role to play in such unit. In contrast, the representation of the Sikhs in the rank of officers and jawans is relatively higher and the 'Gyaniji' (Religious head) has a major role to play in disseminating health related messages concerning AIDS alongwith other religious teachings.

When there is a need to propagate health education about AIDS/HIV infection one can not ignore the question of literacy playing a major role to receive such messages and perceive clearly about the disease. So, among the respondents their level of education has been cross-tabulated with their ranks for easy comprehension (see table 7).

It is obvious that to grow knowledge about this disease it is imperative to survey the overall literary background of sample population first. An educated person is expected to be a good receiver of all messages on AIDS and once he receives such a message, he will be able to adjudge its applicability as is expected. His interpretation will be specific and meaningful. On the other hand, an illiterate person is a poor receiver of any message and disseminating any message to them will be futile. Table 7 depicts that only 2 percent of the respondents are illiterate. Among the jawans 64 percent are found literate up to secondary standard. So an appropriately edited health message should be administered to them. The cause of ignorance on the part of many among population is lack of educational strength and lack of knowledge regarding health and associated diseases.

Conversely the replies of officers (all educated) were definite and specific. Hardly an officer gave a misleading reply. This authenticates the fact that education has a major role to play in acquiring knowledge about AIDS/HIV and implementing those in real life. So the survey of literacy standard among this population infact is the preliminary requirement before proceeding on the ultimate study.

Table : 7

**DISTRIBUTION OF RESPONDENTS
BY RANK AND LEVEL OF EDUCATION**

RANK	LEVEL OF EDUCATION				TOTAL
	Illiterate	Less than Class X	Class X to BA	Post Graduate & Above	
Officers	0 —	0 —	13 (81)	3 (19)	16 (100)
Junior Leaders	1 (4)	9 (39)	11 (48)	2 (9)	23 (100)
Jawans (OR)	1 (1)	104 (64)	57 (35)	0	162 (100)
Total	2 (2)	113 (56)	81 (40)	5 (2)	201 (100)

Figures in the parenthesis denote percentage.

As shown in Table 7 the highest level of education in the army has been found among the officers. There are 19 percent postgraduates among officers and 9 percent among the junior leaders. Junior leaders are found mostly (56 percent) educated up to secondary and collegiate (40 percent) levels. The majority (64 percent) of Jawans has education up to secondary standard. The awareness about AIDS among officers is the highest and it is highly variable in case of junior leaders and other ranks. The standard of education has also a very significant role as regards this disease because it enables an educated individual or a group to understand exactly the ground realities. In case of army population the basic characteristics remain unchanged, to understand the simple epidemiology of this disease, the basic standard of education is not barely the ability to read and write alone. As higher is the level of education, easier is the method to understand the epidemiology of this disease.

The social interaction pattern of army personnel in a unit has certain significance in the matter of communication and exchange of information. It is assumed that if there are regular entertainment programs interesting and healthy enough to satisfy the need of young army men in units, they would never run after any cheap source of entertainment outside. So it suggests that, there should be adequate, accessible and repeated entertainment programs in units to be enjoyed by all, at their

own turn.

The next point of consideration of social welfare is the accommodation pattern of army units. It has direct bearing on their nature and form of social interaction. Due to inadequate number of houses/quarters at army stations, all of the married military personnel do not get the opportunity to stay with their families and children when they want. However, provisions to live in rented houses though exists, in all practical considerations it does not appear feasible everywhere because of number of difficulties. Consequently, many army personnel, married, perforce have to stay 'single' in units and have to wait (often prolonged) for their turn of allotment of accommodation. This is one sort of deprivation of socio-psychological need of individual creating adverse effect in their mind.

Out of those who get accommodation the pattern of interaction among them is somewhat unit based and rank oriented. Those with family also lead a life within boundaries of norms and restrictions. But there are institutions like Family Welfare Centres in each unit/station where the resident families assemble every month on a predetermined date and time. In Family Welfare Centres apart from meeting each other, programs like lectures on health & hygiene and prevention of diseases etc are also often organized. The wife of the Commanding Officer of army units is supposed to be the president of Family Welfare Centres (FWC) who is responsible to work out programs and conduct those effectively. She is also expected to communicate/disseminate valuable information, points which are related to current topics of social importance. She maintains discipline of such gathering explicitly through her administration. While interacting with the wives of junior leaders and jawans of such units, the president FWC, becomes familiar with many small administrative problems related to its members informally. This enables her to intervene to sort out problems on health, accommodation, and many day to day problems to upgrade the living conditions. In some cases, sensitive family issues also figure in, which with timely audience and appropriate counselling by the senior most lady that is the wife of the Commanding Officer, are easily resolved. The president of the welfare centre sometimes seeks assistance of unit administration on some matters which are

beyond her jurisdiction. Therefore, it is a highly workable interactive machinery of army cantonment life which benefits all married families living in areas which are away from civilization and are at secluded places. The FWC is an intimate social forum of a unit which harnesses all families of that unit with a bondage of love, understanding, personal care and concern about all. The ladies of army units mutually share their ideas of house-hold management including finance, problems of small children, children education, cooking recipes of other regional dishes, guest care and many other domestic management problems. This is an informal forum which directly contributes to a soldier's family life in developing a common culture among themselves. These interactions enable them to communicate through a common language i.e. Hindi/Hindustani which the South Indian and Eastern parts of India, ladies pick up very easily.

In addition to family welfare centres about wives welfare, there is another bigger welfare organisation in the army, which is called Army Wives Welfare Association (AWWA). It is run under the aegis of all formation (of army organisation) headquarters. It is a recognized welfare organisation, with its headquarters located in New Delhi and headed by the wife of the Chief of the Army Staff. All wives of serving army personnel, irrespective of the rank of their husbands are the members of this association.

AWWA is an active organization, which renders all kinds of assistance to the families of army personnel through employment, financial help and vocational training. It promotes educational facilities to army wives by holding special classes at AWWA centres. Entertainment programs at regional and national level are also organized to raise its funds. The widows of army personnel are employed by offering them inhouse jobs as per individual educational qualification. At times it arranges marriages of needy/deceased soldiers' daughters and promotes many such social welfare schemes to help army wives and their children. It also runs Spastics Schools of Army Children with trained technical staff. Most of these schools are named as ASHA (hopes).

So with all activities we understand that the army life has its own culture and a typical social paradigm grown over ages. The composite administrative and welfare management system of army, helps them to maintain a well designed and disciplined life style which does not ordinarily require interaction with other institutions and agencies as far as their daily and individual needs are concerned.

An army unit is maintained with utmost cleanliness and pride. It functions round the clock and some personnel always remain on duty during day or night. The daily routine of an army unit begins early in the morning with a call of 'bed tea' and it's proceeds continue thereafter. During the day, other than various specified administrative activities training of personnel continues as a matter of routine. In such daily training schedule, both the operational and administrative subjects are taught in details. It also includes indoor and outdoor exercises, deployments, move practices as laid down in military tactics and field craft studies. Various capsule training schedules are also held on programmed basis. At the end of any working day or a holiday, there is a system of conducting a parade (forum) in each sub unit to account for all activities of the day which is called 'Roll Call' parade. This is a control and reporting system of personnel and equipment everyday ensured through such method. Through such type of interpersonal communication system, command and control of army unit is less prone to problems and there is least error of management. In this forum all administrative instructions are passed in the form of a short brief on any prevailing disease/infection explaining its causes and prevention, which also includes the preventive measures to be taken by them as an individual/group. In health care series of AIDS/HIV, lectures are also conducted by the Duty Officers or Regimental Medical Officers to impart/refresh their knowledge about such disease. These lectures are regular and are of great importance. It has direct impact since it is conveyed as an interpersonal message, where individual queries are clarified.

In addition to all the above administrative care, troops are counselled by the duty officers in units everyday to safeguard them against any infection from sexually transmitted diseases. STD is considered to be harmful and the infected cases count against good discipline of a unit. Now with

the discovery of infection of the ghastly disease called AIDS/HIV infection, it occupied a special order in disease cycle applicable to military personnel and the officers are trained to address troops regarding this disease occasionally in addition to VD.

In army units the structure of command is unique and has least chance to management failure. The duty officer is fully empowered by convention to check and report on any matter of the unit which he finds wrong, either verbally or in writing. He is available round the clock at the duty room who is assisted by a small administrative detachment. The duty officer is the authentic communication channel in a unit for passage of any information after office hours or an authority to handle an emergency.

Out of all communication methods, the army personnel are subjected mainly to direct communication system, which is free from error and has quick result. This interpersonal communication system enables the commanders to implement any impending job systematically achieving success to its target. The communication behaviour of army personnel is required to be known in details while studying their awareness about AIDS/HIV because communication is the major tool with which such a large organization is controlled. Accordingly, in the next chapter communication behaviour and exposure to health messages have been analyzed.