Appendix A

Abbreviations and Acronyms

AIDS Acquired immune deficiency syndrome

GDP Gross Domestic Product
GNP Gross National Product

HIV Human immunodeficiency virus

IDU Injecting Drug User

NGO Nongovernmental organization

PWHA People living with HIV/AIDS

STD Sexually Transmitted Disease

TB Tuberculosis

UNAIDS Joint United Nations Programme on HIV/AIDS

UNDP United Nations Development Programme

WHO World Health Organization

Glossary

Epidemic: Usually prevalent, persistent at relatively constant levels

Epidemiology: the study of the distribution and determinants of disease and injury human populations

Externality: an unpriced side effect on a third party of transaction between two parties

Dross domestic product: a crude measure of the national well-being: aggregate expenditure by the residents of a country or final goods and services for consumption, investment, and government services.

Gross national product, an alternative measure to gross domestic product for measuring well-being. Adds to the gross domestic product income obtained by nationals from labour or property outside the country and deducts the income of foreign nationals residing in the country.

High risk behavior: unproctected sexual intercourse (i.e., without a condom) with many partners, or sharing of unsterilized injecting equipment.

HIV positive: having antibodies to HIV

Incidence of HIV: the number of new cases of HIV in a given time period, often expressed as a percentage for a given number of susceptible population.

Nongovernmental Organizations: for non-profit firms and private nonprofit organizations

Opportunistic illness: an illness that affects people with weak immune systems

Pandemic: an epidemic occurring simultaneously in many countries

Prevalence of HIV: the number of people with HIV at appoint in time, often expressed as a percentage of the total population.

Public Good: a good or service having the following two attributes: 1. consumption by one person does not diminish the amount available to others, and 2. excluding people from consuming the good is impossible or costly

Susceptible: vulnerable to becoming infected

Symptomatic: exhibiting sufficient symptoms to require medical treatment.

Appendix B

Table B(1)

SUMMARY OUTPUT

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Appendix C

QUESTIONAIRE

KINDLY ANSWER THE FOLLOWING QUESTIONS TO THE BEST OF YOUR KNOWLEDGE.

A. BACKGROUND:

- 1. NAME:
- 2. OCCUPATION @before infection)
- 3. AGE:
- 4. INCOME (Before Infection) a) Less than RM 500
 - B) RM 501 RM 1000
 - c) RM 1001 RM 1500
 - d) RM 1501 RM 2000
 - e) More than RM 2000

- 5. EDUCATION:
- a) No formal education
- b) did not complete primary education
- c) completed primary
- d) completed lower secondary
- e) completed secondary
- f) completed tertiary
 - othersplease specify

- 6. FAMILY SIZE:
- 7. VILLAGE/HOMETOWN:

B. PERCEPTION AND KNOWLEDGE OF HIV/AIDS

- Yes 1. Have you heard of HIV/AIDS before being infected No
- 2. What causes HIV/AIDS
- a) Germs/Virus
- b) Insects
- c) Fruits
- d) Food
- e) Supernatural Powers
- f) Enviroment
- g) Don't know
- 3. How does HIV/AIDS spread
- a) don't know
- b) mosquito
- c) blood
- d) skin contact
- 4. What are the ways to treat HIV/AIDS
- a) don't know
- b) cannot be treated
 c) traditional medication
- d) others

C. COPING STRATEGIES

- 5. How do you pay for medical treatment
- a) benefits form private health institutions
- b) government benefits/health care
- c) social security
- d) own

| 6. Did you dissave | Yes | No |
|---|--------------|----|
| (Average estimated amount of disaving) | RM,., | |
| 7. Was there a reduction in consumption expen | diture Yes | No |
| 8. Sale of household assets to pay medical bill | s/others Yes | No |
| 9. Household borrowings | Yes | No |

D. COSTS OF MEDICAL CARE/TREATMENT/OTHER INDIRECT COST

- 10. How much is the cost for treatment a month
- 11. How much is the transportation costs to seek treatment
- 12. Estimated loss of income per month due to HIV/AIDS
- 13. Estimated reduction in savings per month due to HIV/AIDS