



THE LIMINAL MIND

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AIDS AND ITS AWARENESS: A REVIEW

Every year on 1st December, World AIDS Day brings global communities together to raise awareness about HIV/AIDS, honour the more than 40 million lives lost to the epidemic, and combat stigma through education, testing drives, and advocacy campaigns. Established in 1988 by the World Health Organization (WHO) the first international health observance of its kind the event was initiated by public information officers James W. Bunn and Thomas Netter to draw attention to the growing global crisis, promote prevention, and support those affected.

Today, World AIDS Day is led by UNAIDS, with annual themes focusing on treatment access, health equity, and the global goal of ending AIDS as a public health threat by 2030. Activities such as displaying red ribbons, organizing policy discussions, and holding community events have significantly contributed to reducing new infections and AIDS-related deaths worldwide.

The AIDS epidemic was first publicly identified by the U.S. Centers for Disease Control and Prevention on June 5, 1981, after reports of rare cases of Pneumocystis pneumonia in five young gay men in Los Angeles. In September 1982, the CDC formally introduced the term "AIDS" (Acquired Immunodeficiency Syndrome), replacing the earlier term "GRID" (Gay-Related Immune Deficiency), as the disease was found in populations beyond gay men, including injection drug users and others. This shift in terminology marked a deeper understanding of the disease and its modes of transmission.

WHAT IS AIDS?

Acquired Immunodeficiency Syndrome (AIDS) is the most advanced stage of HIV (Human Immunodeficiency Virus) infection. HIV attacks and weakens the immune system, making the body vulnerable to serious infections and cancers.

HIV spreads mainly through:

- Unprotected sexual contact
- Sharing contaminated needles or syringes
- Transfusion of unscreened blood
- Mother-to-child transmission during pregnancy, childbirth, or breastfeeding

If HIV remains untreated, many individuals progress to AIDS, becoming highly susceptible to infections such as Pneumocystis pneumonia, tuberculosis, and Kaposi's sarcoma. Without treatment, nearly 50% of untreated individuals may develop AIDS within 10 years.

Rare transmission may occur through unsterilized medical equipment or unsafe medical procedures in areas with inadequate screening systems. HIV is not spread through saliva, sweat, tears, casual physical contact, mosquito bites, or sharing utensils.

Early Signs and Symptoms of HIV

Early HIV infection, known as acute retroviral syndrome, usually appears 2–4 weeks after exposure and often resembles flu-like illness.

Common early symptoms include:

- Fever and chills
- Fatigue
- Swollen lymph nodes (neck or groin)
- Sore throat or mouth ulcers
- Non-itchy rash (usually on the torso)
- Muscle and joint pain
- Headache
- Night sweats
- Diarrhoea, nausea, or vomiting

Many people may experience mild or no symptoms, which is why HIV testing after any potential exposure is essential rather than relying only on visible symptoms.

Progression of HIV to AIDS

Without treatment, HIV progresses through three main stages:

Stage 1: Acute HIV Infection

- Occurs 2–4 weeks after exposure
- High levels of virus in the body
- Symptoms may include fever, rashes, and swollen lymph nodes
- Significant damage to CD4 T cells begins

Stage 2: Chronic HIV Infection (Clinical Latency)

- May last 10 years or more without treatment
- Few or no symptoms
- Virus continues slow replication while CD4 cells decline
- Late symptoms may include fatigue and weight loss

Stage 3: AIDS

- Diagnosed when CD4 count falls below 200 cells/mm³
- Opportunistic infections and cancers appear
- Immune system becomes severely weakened
- Without treatment, survival averages about 3 years
- Modern ART (Antiretroviral Therapy) can completely prevent progression when started early

Prevention Methods

HIV prevention is based on behavioural, medical, and harm-reduction strategies.

1. Behavioural Methods

- Use condoms correctly and consistently during vaginal, anal, or oral sex
- Practice abstinence or mutual monogamy with an HIV-negative partner
- Avoid sharing needles or syringes; use sterile equipment or needle exchange services

2. Medical Interventions

- PrEP (Pre-Exposure Prophylaxis): Daily pills or injectable medicines (e.g., cabotegravir) for high-risk HIV-negative individuals; reduces risk by up to 99% when taken properly
- PEP (Post-Exposure Prophylaxis): Taken within 72 hours after possible exposure
- People living with HIV who maintain an undetectable viral load through ART cannot transmit the virus (U = U: Undetectable = Untransmittable)

Additional Measures

- Regular HIV testing for early detection
- ART during pregnancy to prevent mother-to-child transmission
- Male circumcision, which modestly reduces heterosexual transmission risk

Conclusion

AIDS, once a fatal global epidemic, has become a manageable chronic condition due to the widespread availability of antiretroviral therapy (ART), which suppresses the virus, prevents disease progression, and eliminates the risk of transmission. Global health targets aim to achieve 95% diagnosis, treatment, and viral suppression by 2025.

Prevention strategies such as PrEP, condom use, public education, and ongoing scientific research continue to move the world closer to the goal of ending AIDS as a public health threat by 2030. Increased awareness, early testing, and access to treatment remain the most powerful tools in the fight against HIV/AIDS.

Dr. Mohandas. M
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MYTH vs FACTS - Men's Mental Health

Myth 1: "Men should be strong and not show emotions."

Fact: Expressing emotions is a sign of emotional intelligence, not weakness. Men who talk about their feelings have better stress regulation, healthier relationships, and lower risk of depression.

Myth 2: "Mental health issues are less common in men."

Fact: Men experience mental health challenges at similar or even higher rates—but they are less likely to seek help, which can worsen symptoms. Men also face higher suicide risk in many countries.

Myth 3: "Only weak men go to therapy."

Fact: Seeking professional help is an act of courage and responsibility. Men who go to therapy often recover faster, improve coping skills, and lead more balanced lives.

Myth 4: "Real men should solve their problems alone."

Fact: No one is meant to struggle alone. Humans are social beings. Reaching out for help is a healthy strategy, not dependence.

Myth 5: "Men can't be victims of trauma or abuse."

Fact: Men can and do experience trauma bullying, emotional abuse, physical violence, workplace pressure, relationship trauma but often hesitate to report it due to shame or stigma.

Myth 6: "Anger is the only emotion men naturally feel."

Fact: Anger is often a cover emotion. Men feel sadness, fear, shame, loneliness, and anxiety—but society teaches them to hide these feelings, which can turn into irritability or aggression.

Myth 7: "Men don't get depression, they just get stressed."

Fact: Men do experience depression, but often show different signs: Irritability, Anger or frustration, Workaholism, Substance use, Withdrawal. These signs are often ignored because they don't look like "typical" sadness.

Myth 8: "If a man looks successful, he must be mentally fine."

Fact: High-functioning anxiety and depression are common in men who appear confident, hardworking, or financially stable. Success doesn't protect against mental strain.

Myth 9: "Men don't need emotional support in relationships."

Fact: Men thrive when they feel valued, understood, and emotionally safe. Healthy relationships require mutual emotional care, not just financial responsibility.

Myth 10: "Talking about problems doesn't help."

Fact: Discussing stress, fear, or sadness reduces emotional pressure, increases problem-solving, and improves well-being. Social support is one of the strongest protective factors for mental health.

Mitha Hari. A.
M.Sc. Psychology

WORLD DIFFERENTLY-ABLED DAY: MAKING SPACE FOR ALL

December 3 is observed as World Differently-Abled Day, a day meant to remind us that inclusivity is not optional, it is essential. It draws attention to the rights, dignity, and well-being of differently-abled persons and urges society to move beyond sympathy towards meaningful inclusion. It is not just about recognizing differences but about respecting them and creating spaces where everyone can exist with comfort, confidence, and independence.

December 3 is less about posters, slogans, or social media posts and more about reflection. It gives me a pause to notice people who move, learn, or communicate differently, yet show up every single day with resilience that often goes unacknowledged. What stands out is rarely their ability or limitation, but how the world around them forgets to slow down, adjust, or even notice. The struggle is often not within the individual, but within environments that were never designed with them in mind.

I've seen differently abled people navigate workspaces that lack flexibility, public spaces built with stairs but no lifts, and conversations where patience runs thin. These barriers may not always be intentional, but they send a very clear message: "You are expected to adjust, we are not." Over time, this quiet exclusion becomes exhausting. Inclusivity challenges this message. It means asking instead of assuming, listening without rushing, and designing systems where support feels natural rather than like a favour. It means recognising access as a right, not a courtesy.

True inclusivity is not about extraordinary gestures, it lies in everyday choices. It is seen when classrooms adapt teaching styles, when workplaces accommodate without hesitation, and when public spaces are created with diverse bodies and minds in mind. Most importantly, it shows in attitudes, when differently-abled individuals are included in decisions that concern them, not spoken about but spoken with. The importance of December 3 lies in this powerful reminder that a truly inclusive society is one where no one has to fight for basic access or dignity.

When we include differently-abled individuals in our systems, policies, and daily interactions, we do more than improve accessibility. We deepen our empathy and strengthen our shared humanity. Inclusivity does not divide us, it connects us. It teaches us to be more patient, more aware, and more responsible towards one another.

On this day, and every day, inclusivity begins with awareness, grows through empathy, and becomes real through action. Because when everyone belongs, the world doesn't just become kinder, it feels complete.

By Anjala Mary
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**"EMPATHY BECOMES INCLUSION
WHEN
IT TURNS INTO ACTION"**

BREAKING BARRIERS AND PRIORITIZING MENTAL HEALTH

On November 19, International Men's Day celebrates worldwide the positive value men bring to the world, their families and communities. We highlight positive role models and raise awareness of men's well-being. Our theme for 2025 is "Celebrating Men and Boys". While physical fitness is commonly emphasized in men's health discussions, mental gains are equally, if not more, important. The day encourages awareness, support, and the promotion of healthier attitudes toward mental health among men.

Men face unique mental health challenges influenced by social and cultural expectations of masculinity. Traditional norms often discourage men from expressing vulnerability or seeking help, which exacerbates mental health problems like depression, anxiety, and stress (Journal of American College Health, 2001). These masculinity ideals can make men less likely to access mental health services, increasing the risk of untreated conditions and even suicide.

Research shows lifestyle interventions designed specifically for men have positive impacts on mental health outcomes. Drew et al. (2020) conducted a meta-analysis revealing that male-only programs addressing physical activity, diet, and mental health support lead to significant improvements in men's psychological well-being. Tailored approaches help overcome barriers, like stigma and neglect of emotional needs, making mental health care more accessible and effective for men.

Critical issues in men's mental health include under-diagnosis, stigma, and service gaps. Bilsker, Fogarty, and Wakefield (2018) emphasize the need for health systems to incorporate gender-sensitive mental health services that acknowledge men's experiences and challenges. Psychological interventions and social support programs must be redesigned to engage men on their terms, fostering environments where they feel safe to share and heal.

International Men's Day highlights why mental health is just as important as physical health. Promoting emotional openness, routine mental health check-ins, and breaking down stereotypes can improve men's overall well-being and quality of life (GAT Sport). It is a call to action for communities, health professionals, and men themselves to prioritize mental gains, support one another, and create healthier futures.

"Out of your vulnerabilities will come your strength"

Revathi Mohandas
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TEST YOUR KNOWLEDGE

- 1) Who is known as the father of psychoanalysis ?
- 2) According to Freud, which inner force contains the libido ?
- 3) Which animals were primarily used in B.F. Skinner's "Skinner Boxes" of operant conditioning?
- 4) Who was the first woman to earn a Ph.D. in psychology ?
- 5) Maslow's hierarchy of needs, which needs are considered the most primary ?
- 6) Which psychologist is famous for the "Little Albert" experiment ?
- 7) Who is known as the father of classical conditioning ?
- 8) Patients with schizophrenia will most likely display ____ in their brains.
- 9) What part of the brain is primarily responsible for processing visual information?
- 10) What is the name of the book that holds the diagnosis criteria and overview of all documented psychological disorders?

Sreya A,
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***Please Check page 4 for answers**

Make a wise choice while choosing between your mind and heart.

Because, neither a broken heart can be healed easily, nor a tamed mind.

While one can provide joy and pleasure, the other can provide luxuries and leisure.



All choices stand between Mind and Heart.

When your 'Mind' knows and your 'Heart' feels, you're on the right path.

Zeba & Rushdha
M.Sc. Psychology

BENDING REALITY



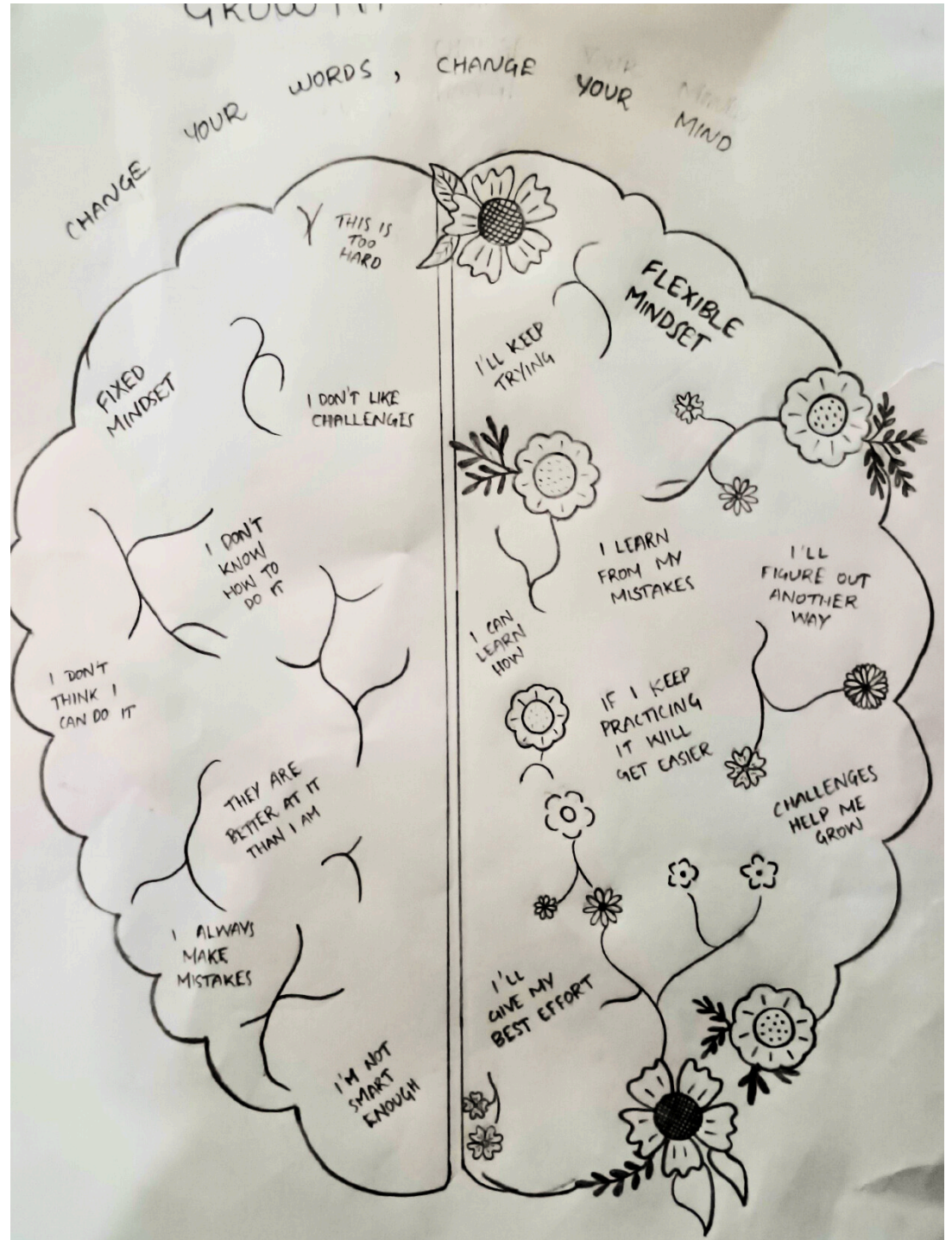
Liya PJ
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Voices of Hope: A Tribute to World AIDS Day

World AIDS Day, a call to stand tall,
Raising voices, breaking down the wall.
Awareness fights the silent fight,
Solidarity heals through the night

Layana Liyakkath
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CHANGING WORDS, CHANGING MINDS - FROM I CAN'T TO I'M LEARNING



Angel Minnutty Godfer
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Answers to Test your Knowledge

1. Sigmund Freud
2. ID
3. Rats & Pigeons
4. Margaret Floy Washburn
5. Physiological needs
6. John B. Watson
7. Ivan Pavlov
8. Enlarged Ventricles
9. Occipital lobe
10. Diagnostic and Statistical Manual of Mental Disorder (DSM)