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## From the desk of Secretary



# Dear Reader,

As I look back over the period October 2013 to March 2014, I find that there has been significant development that will have major impact on the National Programme in next 2-3 years. During this period we launched the comprehensive plan for the 4th Phase of National AIDS Control Programme (NACP-IV) with broad objectives to (i) Reduce new infections by 50% (2007 baseline of NACP III), (ii) Provide comprehensive care and support to all People Living with HIV/AIDS (PLHIV) and treatment services for all those who require it. On 31st March, 2014 we also achieved a major landmark in the history of NACP as we completed the ten years of Anti-Retroviral Treatment in the country. It has been a very challenging but fruitful journey of a decade where we witnessed an unprecedented scale up of service delivery in terms of provision of ART to PLHIV. In near future, we also intend to provide third line ART to PLHIV.

Under NACP high standards of quality in HIV testing have been assured through constant monitoring of laboratory performance and evaluation of quality control measures. This has resulted in accreditation of government departments in the audience 36 State Reference Laboratories by National Board of Calibration and Testing Laboratories (NABL).

In Blood Transfusion Services (DBTS) we are continuously working towards improvement in availability and access to safe blood and blood components through voluntary, non-remunerated blood donation. Rapid situation analysis has been undertaken to understand the current scenario of blood transfusion services in the country with specific reference to quality. Initiatives, such as the metro blood

bank project (Centre of Excellence in Transfusion Medicine), the policy on unutilized plasma & plasma fractionation centre give due emphasis to improve & facilitate the availability of essential therapeutic blood and plasma products for clinical use across the country.

During this period, we achieved another landmark the turning point in our efforts towards elimination of Mother to Child Transmission of HIV and Syphilis. The NACP also rolled out the provision of lifelong triple-drug Anti-Retroviral Treatment to all positive pregnant women across the country through its Prevention of Parent To Child Transmission programme. Elimination of congenital Syphilis is also a focus in the HIV prevention program. Another important activity is launching of the next round of Intearated Bio-Behavioural Surveillance (IBBS) focussing on rural areas as well as adolescents.

The efforts of mainstreaming HIV activities with other ministries and partners have been giving very fruitful results and eight MOUs have now been signed with different departments and ministries.

I would like to acknowledge the continuous support extended from communities and partners in preventing new infections, expanding services and in providing social protection to people vulnerable to HIV and those affected by it.

4 ulms

Dr. V.K. Subburaj

# Historical Judgment // // // // //

Centuries to live with the oppression of an indeterminate identity came to an end for transgenders and Hijras on 15/4/2014 when the Supreme Court recognized them as the "Third Gender". For long, transgenders had been an oppressed sexual minority in India, but the Supreme Court's historical judgment is set to end the exploitation of the transgender community by giving them their most basic human rights.

"We direct the centre and state governments to take steps to treat them as socially and educationally backward classes of citizens and extend all kind of reservations in cases of admissions in educational institutions and for public appointments". In its 111- page judgment the SC bench said that the, "Binary notion of gender (male and female) reflects in Indian Penal Code and also in laws related to marriage, adoption, divorce, inheritance, succession and other welfare legislations. Non-recognition of identity of Hijras/transgenders in various legislations denied them equal protection of law and they face wide-spread discrimination". The bench said that the transgender community had an inviolable constitutional right to enjoy freedom of expression (Article 19) and right to live with human dignity (Article 21). The Supreme Court's order giving Hijras and eunuchs 'Third Gender' identity and ordering their inclusion among Other Backward Classes (OBC) to avail 27 reservations in government educational institutions has put India on the world map as a country which is sensitive towards sexual minorities.

With continued advocacy by Department of AIDS Control (DAC), they are a prioritized group under the Indira Awas Yojana. Now DAC is advocating with the Department of Higher Education for recognizing the third gender in their "admission form" etc. so that, their education, skill-building and livelihood can be ensured.

With a dynamic next government at the centre, DAC looks forward to more such enabling laws and judgments to end discrimination of all kinds existing in society. We must move forward with a progressive & positive frame of mind for the welfare of all communities.

412 Ca W

Dr. Naresh Goel, DDG (LS) & JD (IEC)

### Welcome to our new Secretary!

It is our great pleasure to welcome Dr. V. K. Subburaj, who has joined DAC as Secretary Department of AIDS Control on 1st March 2014. An officer of the Indian Administrative Services from the 1980 batch (TN cadre), he has held a number of key



positions in various government departments and has a rich and varied experience in Administrative and Industrial fields. We look forward to his guidance in the successful implementation of NACP-IV.

### Welcome to our new Joint Secretary!

DAC welcomes Mr. K. B. Agarwal as Joint Secretary, Department of AIDS Control. He joined the Department on 11th of March 2014. An officer of the Indian Administrative Services from the 1985 batch (J&K cadre) he is also an engineer from IIT



Roorkee and LLB from Delhi University. We look forward to his guidance in the implementation of NACP-IV.

#### **Number of Patients on ART\***

Number of ART Centres Functional

425

Number of Link ART centres functional

7,68,840

870

Number of PLHIV receiving ART

-

Number of CLHA on ART

42,015

\*as of March 2014

## Launch of NACP-IVICU

Department of AIDS Control launches the fourth phase of NACP in Delhi on February 12, 2014.

Consolidating the gains made during NACP-III (2007-2012), the National AIDS Control Programme Phase-IV (2012-2017) aims to accelerate the process of reversal and further strengthen the epidemic response in India through a cautious and well-defined integration process over its five year period. NACP-IV will focus on intensifying and consolidating prevention services with a focus on High Risk Groups and vulnerable populations, increasing access, and promoting comprehensive Care, Support and Treatment services.



Following the approval of the fourth phase of the National AIDS Control Programme (NACP-IV) by the Cabinet Committee on Economic Affairs, a formal launch function for NACP-IV was organized at the National Media Centre, New Delhi on 12 February, 2014.

Shri Ghulam Nabi Azad. Hon'ble Union Minister for Health & Family Welfare, Government of India, the Chief Guest of the function, launched the fourth phase of NACP, which is aimed at accelerating the country's AIDS prevention and care programme. The Guests of Honour included Shri Oscar Fernandes, Hon'ble Minister of Transport, Road & Highways and Labour & Employment and President, Forum of Parliamentarians on HIV/AIDS, Smt. Santosh Chowdhary, Hon'ble Minister of State for Health & Family Welfare and Dr. J. D. Seelam, Hon'ble Minister of State for Revenue & Secretary General of the FPA. Mr. Lov Verma, Secretary, Department of AIDS Control Ministry of Health & Family Welfare and Ms. Aradhana Johri, Secretary, Department Pharmaceuticals, Ministry of Chemicals & Fertilisers also addressed the gathering during the launch function of NACP-IV.

The NACP-IV launch function was attended by the representatives of Development Partners including CDC, WHO, UNAIDS, BMGF, PHFI, The World Bank, GFATM, etc., representatives of Civil Society Organisations and NGOs, officers from various government departments, media personnel and officers from State AIDS Control Societies, and officers from the Department of AIDS Control.

On this auspicious occasion, the Hon'ble Union Minister for Health & Family Welfare made announcements which the Government of India has taken with respect to the HIV/AIDS programme in India. Firstly, the HIV/AIDS bill has been introduced in the parliament on 11 Feb 2014. Secondly the eligibility for receiving ART has been revised from a CD4 level of 350 to 500, which will be rolled out soon. This will ensure that HIV positive persons are initiated on treatment at an early stage, which will in turn enhance their longevity and productivity as well as contribute to the prevention of new infections. Thirdly, he announced the introduction of third line ART for all those who fail on second line ART under the programme. Another major initiative announced by the Hon'ble HFM was the initiation of ART for all HIV positive pregnant women, irrespective of their CD4 count, in the country; this strategy will help in the journey towards the goal of eliminating new HIV infections among children.

The dignitaries unanimously stressed on the fact that HIV/AIDS is posing a serious challenge to the health sector in the country, and also acknowledged that the response to the HIV epidemic in India has been

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remarkable in its spirit and action, as is evident from the significant decline in the adult HIV prevalence and new infections in the last decade. Shri Oscar Fernandes and Dr. I. D. Seelam, emphasized that the Forum of Parliamentarians on HIV/ AIDS will continue to support the National AIDS Control Programme, and said that the Forum is committed to take the issue of HIV/AIDS masses bγ engaging with representatives up to the village level to contribute more effectively to the national AIDS response. Smt. Santosh Chowdhary stressed that the priorities in winning the fight against HIV/AIDS included addressing stigma and discrimination, community mobilization, strong and effective leadership for creating awareness about the disease and providing access to HIV services for those in need. Mr. Lov Verma highlighted that NACP IV involves partnership of national and international allies, community participation and ensuring a quality-driven programme. Ms. Aradhana Johri emphasized that NACP IV has given a human face to the programme, and reiterated the important aspect of community participation, and the programme's financial portfolio being larger in size than the plan allocation.

A number of operational guidelines, factsheets and reports were also released on this occasion. Besides the NACP-IV Strategy Document, the other releases included Calendar of the Dept of AIDS Control, Monograph on Mainstreaming, Operational Guidelines for Care and Support Centres, HIV Sentinel Surveillance 2012-13 - A Technical Brief, District HIV Epidemiological Profiles of Seven States (Chhattisgarh, Delhi, Haryana, Jharkhand, Kerala, Odisha and UttarPradesh),



National Strategic Plan for PPTCT, National Technical Guidelines for PPTCT, National Framework for Joint HIV/TB Collaborative Activities, Laboratory Manual for Diagnosis of STI/RTI, and Operational Guidelines for STI/RTI Laboratories. These documents can be accessed on the website of the Dept of AIDS Control (www.naco.gov.in).

NACP-IV aims to reduce new infections and provide comprehensive care and support to all PLHIV and treatment services for all those who require it. The key strategies of the NACP-IV include 1) Intensifying and consolidating prevention services with a focus on HRG and vulnerable population, 2) Increasing access and promoting comprehensive care, support and treatment, 3) Expanding IEC services for the general population and high risk groups with a focus on behaviour change and demand generation, and

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4) Building capacities at national, state and district levels and 5) Strengthening the Strategic Information Management System (SIMS).

A number of new initiatives have been planned under NACP-IV. including scale-up of Opioid Substitution Therapy for Injecting Drug Users, scale-up and strengthening of migrant interventions at source, transit and destinations, scale-up of interventions among transgender populations by bringing in community participation and focused strategies to address their vulnerabilities, roll-out of multi-drug regimen for Prevention of Parent to Child Transmission, earmarking budgets for HIV among all key government departments through strong mainstreaming initiatives. Employer-Led establishment of four Metro Blood Banks as Centres of Excellence in Transfusion Medicine and a Plasma Fractionation Centre, and scale-up of Second Line ART.

The total budgetary resources for the fourth phase of the National AIDS Control Programme (NACP-IV) for five years are Rs 14,295.05 crores. The project is partly funded through grants from the Global Fund and credit from the World Bank.

M & E - DAC

### International Women's Day: Mumbai

Aishwariya Rai Bachchan supported the cause of preventing HIV infection amongst women and children

On the occasion of International Women's Day, 8 March, 2014, UNAIDS International Goodwill Ambassador, actor Aishwariya Rai Bachchan visited two centres of K.B. Bhabha Hospital, Mumbai, one that works towards preventing HIV infection among newborn children and a crisis-intervention centre for women. In her speech Ms. Rai said, "It is every mother's wish to have a healthy child ... and every child's right to live a healthy. happy and productive life. I also believe every girl has the right to grow up in a world, where she is not discriminated against because of her gender. Girls and women must be encouraged to recognize that equal opportunities exist in society today and they must be encouraged and supported to make productive and informed choices. Safety at home, in

school, at work, on the road and society at large must be ensured for every human being ... and girls/women in particular where society refuses to recognize and stand for gender equality. We don't need words reassurance."





Secretary DAC along with other DAC and Mumbai AIDS Control Society officers attended the program. On the occasion, Secretary DAC in his speech highlighted PPTCT services under the National AIDS Control Program. Dr. Luiz Loures, Deputy Executive Director of UNAIDS also spoke on the occasion highlighting the new legal steps that have been put in place to protect women in metro cities as well as in villages of India.

IEC - DAC

# DAC at the first International Communications Management Conference (ICMC)

DAC Officials presented perspectives of the National AIDS Control Programme (NACP) at Mudra Institute of Communication (MICA), Ahmedabad

A team comprising of officials from DAC, Nagaland SACS, PHFI, BBC World Service Trust (BBC WST) and INP+participated in a special session on HIV issues on 14 February, at the first International Communications Management Conference (ICMC) on the theme 'Managing Health Communication: People, Programmes and Products' organized by Mudra Institute of Communication (MICA), Ahmedabad from February 12-14, 2014. At a session moderated by Dr. Preeti Kumar, Project Director HIV/AIDS Project, PHFI; the panel presented perspectives of the National AIDS Control Programme (NACP) with focus on communication strategy. Dr. Goel presented on the progress of NACP, the achievements of the NACP III and the strategy for NACP IV.

Phase-wise shifting of focus in communication strategies was presented by Dr. Rajesh Rana while Dr. Sanjib K. Chakravarty presented on the Red Ribbon Express. Ms. Elizabeth Michael spoke about mainstreaming, advocacy and social protection initiatives.



Panel Discussion at ICMC L-R - Mr. Ashish Yadav, Dr. Naresh Goel, Ms. Elizabeth Michael, Dr. Preeti <u>Kumar</u>

Ms. Ayieno Kechu, Nagaland SACS, provided a glimpse of the multi-media campaign. Mr. Ashish Yadav of BBC WST presented about audio visual productions made under NACP and Mr. Manoj Pardeshi, National Coordinator, International Treatment Preparedness Coalition - India (ITPC-India), INP+ spoke on positive living and its provisions under NACP.

IEC - DAC

# Folk Campaign Rolled-Out in 25 LWS Districts of Maharashtra

MSACS had planned to roll out phase-II of mid-media activities in 25 LWS districts as per approved AAP-2013-14. At the same time, a need was identified jointly by MSACS IEC, TI and LWS divisions that folk troupes might roll out in the LWS villages with the prevention messages.

With the joint support of DAC IEC and LWS technical teams, in February 2013, a 2-day state-level planning meeting and training workshop was organized by MSACS in Pune. All 25 district DPMs attended the planning meeting and made an in-depth presentation on village-level route plans. With the inputs of DAC IEC and LWS officers, the participating folk troupe leaders and DPMs had an open house discussion on roll-out strategies and expected outcomes. By March 2013, the LWS team and IEC folk troupes jointly implemented 2900 folk performances as a part of the mid-media activities in 1440 LWS villages. MSACS TI and LWS team monitored the performances. In view of the successful implementation of folk campaigns in LWS villages, the DAC IEC and LWS team have jointly planned to implement mid-media activities in 106 LWS districts and 10,600 villages in FY 2014-15.



### **DAC Observes Voluntary Blood Donation Camp** on 1st October, 2013

Department of AIDS Control Felicitated Centurion Blood Donors

The Union Health Minister, Shri Ghulam Nabi Azad, inaugurated a Voluntary Blood Donation Camp followed a "Sensitization Workshop "Safe Blood for All" that was organized on 1 October 2013 at the Ram Manohar Lohia Hospital as a special initiative of DAC. This effort of DAC is the first of its own kind as around 100 officials from a single department donated blood in a single day. Even officials from other departments came forward to donate blood.

Miss Universe 2012, Ms Olivia Culpo graced the occasion and complimented GOI for its AIDS control programme. She also called upon youth to come forward to donate blood and save more lives.



Speaking on the occasion and emphasizing the value of VBD, Shri Azad stated that India is a multi-religious and multi-ethnic country and emphasized DAC's role in increasing voluntary blood collection.

Mr. Lov Verma, Secretary, DAC encouraged youth to take a pledge that they would voluntarily donate blood regularly. Ms. Aradhana Johri, Addl. Secretary, DAC said that there is a massive scale-up of the programme. Out of existing 2600 Blood Banks, Department of AIDS Control supports nearly half of them. The blood collection which was 44 lakh in 2007 has increased two fold and reached to 98 lakh in 2013. As mentioned oan Voluntary Blood Donation day, 1 October, 2013, a sensitization workshop was also conducted by DAC at Post Graduate Institute of Medical Education and Research (PGIMER), Dr Ram Manohar Lohia Hospital, New Delhi. The theme for this workshop was "Blood Safety - Safe Blood for all".



Guests present at the occasion

The workshop was widely attended by the voluntary blood donors, donor organisers and heads of various Blood Banks in the Delhi. The aim of this workshop was to sensitize the blood donors on the importance of voluntary blood donation, donor recruitment and motivation, in addition to the benefits of voluntary donation for provision of safe blood. Distinguished speakers discussed about core issues surrounding blood safety in present times. The eminent Heads of the Departments, Dr. Veena Doda, Blood Bank at Dr RML Hospital, Dr Manisha Shrivastava, Transfusion Medicine, BMHRC at Bhopal, Dr. Tulika Chandra, Department of Transfusion Medicine, KGMU at Lucknow and Dr Kabita Chatterjee, Department of Transfusion Medicine AIIMS, New Delhi shared their observations and expectations from youth. The sensitization workshop was a grand success and enlightened the participants on safe blood practices.

#### **Blood Transfusion Services - DAC**



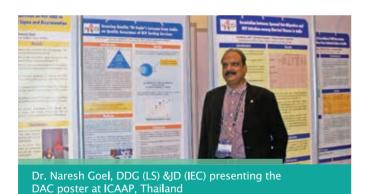
### Presentations by DAC in ICAAP - Thailand

DAC officials present India's HIV/AIDS issues, challenges and successes to the world at the 11th International Congress on AIDS in Asia and the Pacific

DAC officials presented India's HIV/AIDS issues, challenges and successes to the world at the 11th International Congress on AIDS in Asia and the Pacific

The 11th International Congress on AIDS in Asia and the Pacific was held from 18 to 22 November 2013 in Bangkok, Thailand, More than 3,800 delegates from 74 countries participated in the Congress. Over 113 delegates representing the communities, civil society organisations, PLHIVs, officials from State AIDS Control Societies and Department of AIDS Control from India participated. Policy makers, community members, media and government officials deliberated. brainstormed, took pledges, show cased the HIV/AIDS issues and challenges and addressed the stigma and discrimination issues at the event.

Improving low coverage of ART, importance of scaling-up of combination HIV prevention initiatives, reducing new infections among MSMs, improving legal and policy environment enabling zero stigma and discrimination were the calls for action at the closing ceremony.





The Indian experience was shared during a South-to-South round table meeting by Ms. Aradhana Johri, Additional Secretary, Department of AIDS Control. Paper presentations by DAC officials included:

- Experience of engaging youth through multi-media events - Dr. Sanjib K. Chakravarty
- Management of non-health risk of PLHIVs especially dealing with Cardiac Vascular Diseases - Dr. B. B. Rewari
- India's experience in prevention programmes especially with mobile population, newer initiatives such as scaling up of transgender population - Dr. Subash Ghosh
- Experience on Geographic Prioritization for scaling up HIV Testing in ANC settings and Integrating Linkages with MCH in India - Dr Raghuram Rao

TI-DAC



DAC Participants with other international delegates at ICAAP, Thailand

## Parliamentarians support HIV Counselling & Testing and Blood Donation

Ministers and MPs came forward to undergo counselling and testing and donate blood

event organized by the Forum of Parliamentarians on HIV & AIDS, with technical assistance from the Department of AIDS Control (DAC) and supported by UNAIDS and the International Labour Organization (ILO). connection with the World AIDS Day (1 December 2013); Central Ministers and Members of Parliament (MPs) from Lok Sabha and Rajya Sabha came forward to voluntarily undergo Counselling and Testing for HIV at a Mobile ICTC (Integrated Counselling & Testing Centre) unit that was arranged by Delhi State AIDS Control Society. In addition, the MPs donated their blood through a mobile van of the Indian Red Cross Society. Mr B.P. Singh, Vice Chairperson, Nehru Yuva Kendra Sangathan (NYKS) and Mr Rohit Chaudhary, President, National Students' Union of India (NSUI) along with several youth volunteers also participated in the camp.

The gathering was addressed by Shri Oscar Fernandes, Union Minister for Road Transport and Highways, and the President of FPA, Shri I D Seelam, Minister of State for Finance and Secretary General of FPA, Mr. Kalikesh Singh Deo, MP from Orissa and Dr. Sunil D. Khaparde, Deputy Director General at the Department of AIDS Control (DAC). In a note sent to

the FPA, UNAIDS Country Coordinator for India Mr Oussama Tawil congratulated the Forum Members and thanked them for their leadership, "I hope this bold gesture by the Parliamentarians will further promote voluntary counselling and testing for HIV throughout the country."

### IEC - DAC & Navneet Tewatia, Forum of Parliamentarians on HIV/AIDS



Shri Oscar Fernandes and MP, Mr. Shailendra Kumar at the **Blood Donation Camp** 

### DAC Club C



DAC family welcomed the New Year 2014 singing songs in classical ragas, film songs and Bhangra performances. Staff from all divisions participated in an inter-divisional competition with enthusiasm and strong team spirit. Prizes were given to the top three performances by Secretary, DAC. The 1st prize went to the Blood Transfusion Services Team for good recitation and melodious songs, while the 2nd prize was bagged by Shri S.V. Venkataraman of Admin Team for playing a pleasant flute performance. The 3rd position was secured by Shri Tejinder Singh from IT Team for a lively Bhangra dance performance.



# Consultation on Elimination of Parent-to-Child Transmission of Syphilis

DAC develops a strategy toward elimination of Parent to Child Transmission of Syphilis

As per HIV Sentinel Surveillance (HSS) 2010-11, syphilis sero-prevalence among the pregnant women in India was reported as 0.38%. Using HSS and Health Information Management System (HMIS) data it is has been estimated (using WHO Method of Estimation) that annual burden of syphilis among pregnant women is around 1,02,806 and any adverse outcome due to maternal syphilis is 52595 and cases of congenital syphilis is 16,144. Considering the very low prevalence of maternal syphilis and rare reported cases of congenital syphilis in India, elimination of Parent to Child Transmission of Syphilis seems easily achievable in India.

There are many adverse outcomes due to maternal syphilis like spontaneous abortion, still birth, low birth weight, congenital syphilis and even neonatal mortality. Congenital syphilis is a serious but preventable disease, which can be eliminated proactively through effective screening of all pregnant women for syphilis and treatment of those infected, including their partner and newborn.

The STI/RTI Division, under the Department of AIDS Control (DAC) in collaboration with the Basic Services Division, Maternal Health Division of Ministry of Health & Family Welfare and WHO/SEARO has led an initiative of developing a strategy toward elimination of Parent to Child Transmission of Syphilis. A National Expert Consultation for Developing a Strategy towards Elimination of Parent to Child Transmission of Syphilis was held on 19-20 December, 2013 at New Delhi. A total of 43 delegates from different states of India including the international agencies, research institutes, Civil Society, Medical Colleges and Professional Bodies participated from various fields.



Dr Lauri Newman, Medical Officer, WHO HQ Geneva, making a presentation on Global and Regional Scenario on Congenital Syphilis

The subject experts recommended that a Point of Care test for screening syphilis must be introduced at all levels of facilities. It was also recommended that Benzathine Penicillin is the drug of choice for treating maternal syphilis and Erythromycin can be used as an alternative drug for those found allergic to Benzathine Penicillin. The need for consolidating convergence mechanism at district and sub-district levels by the state and district level National Health Mission (NHM)-DAC co-ordination committees was expressed. Policy changes are required for involvement of private sector in providing services and reporting (enforce Clinical Establishment Act). The experts also recommended that the NHM should shift HIV and Syphilis testing from a desirable ANC package to Essential ANC Package for early detection and treatment of maternal syphilis and for successful Elimination of Parent to Child Transmission of Syphilis.

STI - DAC



### **Building partnerships for mainstreaming HIV**

DAC has formalized partnership for mainstreaming HIV with five ministries during last six months

"A multi-sectoral response to HIV is imperative to ensure better use of available resources of health and non-health sectors to reduce rick and vulnerability, to increase access to care, treatment & support services, to improve social protection and reduce stigma. Therefore DAC has been establishing formal partnerships by signing of MoUs, as under:



Signing of MoU: Mr. Rajeev Gupta (6th from left), Secretary, Dept. of Youth Affairs and Mr. Lov Verma, Secretary, Department of AIDS Control with other Officers of Dept. of Youth Affairs and DAC

DAC has signed a Memorandum of Understanding with the Department of Youth Affairs on 29 November, 2013. This partnership aims to prevent the spread of HIV infection among the youth through inclusion of youth specific HIV information and services, reduce the vulnerability of special category of young women and migrants and enhance the capacity of policy planners, researchers and trainers in the institutions under the control of Department of Youth Affairs to address the issue of HIV/AIDS.

DAC has signed Memorandum of Understanding with the Department of Sports on 29 November, 2013. This partnership aims to reach large numbers of youth engaged in sports activities with information on STI/HIV/AIDS prevention and related services, build the capacity of sports educators, administrators and coaches on "Minimising the risk of HIV transmission on and outside the sports field" and Promoting awareness generation through hoarding and banners at eminent places and sports infrastructure during state / national events and tournaments.



Signing of MoU: Mr. Ajit M. Sharan, Secretary, Dept. of Sports and Mr. Lov Verma, Secretary, Department of AIDS Control

DAC has signed Memorandum of Understanding with the Ministry of Petroleum & Natural Gas on 5 December, 2013 with the objective to reach large number of formal and informal workers with information and services pertaining to HIV and also provide impact mitigation.

continued...(page 14)



Signing of MoU: Mr. Vivek Rae (4<sup>th</sup> from left), Secretary, Ministry of Petroleum & Natural Gas and Mr. Lov Verma, Secretary, Department of AIDS Control with other Officers of Ministry of Petroleum & Natural Gas and DAC

# Scale-up of Opioid Substitution Therapy for IDUs

DAC's collaborative model of OST for IDUs

In 2008, Opioid Substitution Therapy (OST) was included as an additional component in the Harm Reduction package for Injecting Drug Users (IDUs). OST is an evidence based treatment for dependence on opioids and is also well established intervention for reducing drug related harms among IDUs particularly prevention of transmission of HIV and other blood borne diseases through the sharing of infected needles. However, the benefits of OST are not limited to just HIV prevention and extend to reduction of other harms associated with drug use, especially when combined with psychosocial interventions.

Buprenorphine and methadone are the two major medications used in substitution treatment programmes, globally and both are currently available in India for use in maintenance treatment of opioid dependence. Under the AIDS control programme, Buprenorphine based OST centres have been established in both NGO and government healthcare settings.

...continued (page 15)

OST stabilizes clients physically and psychologically which improves their ability to think coherently and makes them amenable to other lifestyle modifications necessary to achieve complete recovery and reintegration into the society



Number of OST centres and coverage of clients under OST programme

#### ...continued

On 11 December 2013, a Memorandum of Understanding was signed with Ministry of Housing & Urban Poverty Alleviation. The objectives set out in the MoU are to reach out to PLHIV and affected population with enhanced accessibility in the livelihood schemes and programmes of Ministry of Housing & Urban Poverty Alleviation through an inclusive approach as well as to improve social protection to PLHIV and Most At Risk Population (MARPS) through existing schemes and programmes for urban employment, poverty alleviation and housing.



Signing of MoU: Mr. Arun Kumar Mishra, Secretary, Ministry of Housing & Urban Poverty Alleviation and Mr. Lov Verma, Secretary, Department of AIDS Control with Dr. Naresh Goel, DDG (LS) &JD (IEC), DAC



Signing of MoU: Air Marshal D. P. Joshi, Director General, Armed Forces Medical Services and Mr. Lov Verma, Secretary, DAC

A Memorandum of Understanding was signed with the Department of Defence on 18 February 2014. The partnership aims to spread awareness and reach out to the large number of defence personnel with information on STI/HIV/AIDS and related services, to integrate ICTC/STI/HIV services in existing health infrastructure and to reduce social stigma and discrimination against People Living with HIV/AIDS and other affected groups.

Mainstreaming, IEC - DAC

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DAC has been supporting OST implementation in NGO settings since 2008. In this model, OST services are offered by NGOs already implementing an IDU TI project and offering the package of harm reduction services mentioned above. Hence, in this model, most of the harm reduction services are available from the same facility and OST is seen as an additional service provided to some of the IDUs. The services are offered by the existing staff of the IDU TI including a part-time doctor who is trained on OST. For dispensing of medications under supervision, an additional nurse is provided to the TI. The medications are dispensed to the clients on a daily basis directly under supervision by a qualified and trained nurse.

In 2010, DAC piloted a collaborative model of OST delivery based on a tie-up between Government hospitals and the NGOs implementing Targeted Interventions for IDUs. In this model, the OST centre is located in a government health care setting (medical college hospital, district hospital, CHC, etc.) and is tasked with clinical assessment, diagnosis, prescription of substitution treatment and dispensing of the medications. Each of these OST centres is linked with nearby IDU TI(s) which facilitate the service uptake by motivating IDU clients in the project area and refer them to the centre for treatment. In addition, the linked IDU TIs also follow-up with clients who drop-out from treatment and conduct regular advocacy with local stakeholders to generate support for the OST programme.

As of February 2014, NACP is supporting over 150 OST centres in 100 districts across 29 State/District AIDS Control Societies (SACS/DACS), of the country with a total OST coverage of more than 15000 IDUs. In addition, identification, assessment has been completed for another 105 OST centres in the selected districts. It is expected that by the end of 2014-15, more than 300 centres would be functional and offering OST services to more than 30,000 IDUs.

The OST centres are regularly monitored and supervised through the State AIDS Control Societies (SACS), Technical Support Units (TSUs) and also by DAC officials. The NGOs undergo a biennial external evaluation of their functioning as IDU TIs on a standardized tool developed by DAC.

DAC has developed Clinical Practice Guidelines and Standard Operating Procedures for the OST centres.

In addition, the NGO OST centres are accredited by an external agency (National Accreditation Board of Hospitals and Healthcare Providers) once in 2 years.

TI - DAC



Illustrated communication materials to motivate IDU to access OST services

# International Conference on HIV/AIDS and Sensitive Social Protection

DAC organised a conference on HIV sensitive social protection measures to protect people against economic and social distress

A two-day International Conference on HIV/AIDS and Sensitive Social Protection was organized by the Department of AIDS Control (DAC), Government of India and the United Nations Development Programme (UNDP).

In his inaugural speech Mr. Lov Verma, Secretary, Department of AIDS Control said "Mainstreaming and social protection will continue to be a strategic priority as we embark on the fourth phase of the National AIDS Control Programme. The programme has a multi-pronged strategy that includes: advocacy, strong leadership, multi-sectored collaboration, responsive policy and supportive legal environment and continued expansion of services for underserved population." He also said that India is a "global success story" as a result of having brought down prevalence rates.

"In India we have achieved significant milestones of community involvement; however, obstacles such as supportive legislative amendments continue to hinder the process of development", said Mr. Oussama Tawil, **UNAIDS** Country Coordinator, India.

Ms. Alka Narang, Assistant Country Director UNDP, India said that, "the conference is a turning point, and one that reiterates India's position on the issue", India being a leader in the area of HIV/AIDS and Social Protection.



More than 200 participants from all sectors, from Djibouti in Somalia, Algeria, Dominican Republic, and Egypt were present during the inaugural session. Presentations for the day included those by Mr. Brian Lutz, Policy Expert, AIDS and MDGs, UNDP (New York), who defined the scope of social protection, and Dr. Mahipal, Director (P&P), Department of Rural Development who spoke about schemes addressing HIV/AIDS and Social Protection in the rural context. Sh. K K Abraham, of the Indian Network of People Living with HIV/AIDS, and Ms. Pushpalata R, Secretary, Swasthi Mahila Sangh who spoke on the issue of stigma and discrimination. Representatives from Sri Lanka, Cambodia, Thailand and Indonesia made presentations on the manner in which they have been working towards HIV sensitive social protection in their respective countries.

Mainstreaming, IEC - DAC

# Scaling-up Transgender and Hijra Interventions

DAC hosted the Asia-Pacific regions first workshop on need-based interventions with transgender and Hijra populations.

The Department of AIDS Control in partnership with UNDP hosted the "First National Workshop to Develop a Roadmap for Scaling-up of Transgender (TG) and Hijra interventions in India" on 5-6 December, 2013.



Audience at the Workshop for Scaling up of TG and Hijra interventions

This first-of-its-kind workshop in India and the Asia Pacific region showcased vital strategic information on estimation and epidemiology on transgender and hijras to develop prioritized need-based interventions and projecting India as a forerunner in conducting mapping and estimation exercises of transgender populations. This workshop was chaired Sh. Lov Verma, Secretary DAC and higher officials of Officials, Project UN Directors representatives of State AIDS Control Societies, Development Partners and Community members. Addressing a gathering of more than 200, this workshop demonstrated the leadership role of DAC in creating a platform exclusive to TG/hijras.

The DAC having prioritized working with transgender and hijras as a most-at-risk-population group in the NACP IV commissioned a national level mapping and size estimation exercise in 17 identified states.

Indian Council of Medical Research (ICMR) and IMRB made it possible to put together a much needed mapping study and produced valuable findings from it, which can have several implications for welfare of the community.

Technical presentations on key knowledge products, discussions on TG legal brief on identity, social protection paper, documentation of TGWB, public hearings provided valuable insights and sensitized key partners to the gravity of the situation. The results from the mapping will pave the way forward and be part of the annual work plan and strategic coverage and saturation of this target group to maximize prevention efforts.

One of the workshop highlights was sharing of the draft TG operational auidelines by the DAC TI team; this is envisaged to lead to HIV program management capacity along with improved technical, organizational and leadership capacity of NGOs and CBOs implementing the TG TIs.

At the two day workshop, key issues revolved around how to reach the TG & Hijra population, how to ensure their participation, how to address issues of empowerment, non-accessibility or service quality and the policies in legal context. The key priorities of DAC included ensuring community ownership of projects and scaling up of intervention programs in areas with high TG/Hijra population as well as areas where they are thinly spread, to address the problems faced by the community and formulate actionable plans on the same, data supported evidences are the most important prerequisites.

The workshop concluded that DAC & SACS, CSOs and the community, will work together to reach out to the Transgender and Hijra populations with HIV prevention services.

TI - DAC & UNDP



# The Cohort Analysis Workshop in Partnership with Centers for Disease Control (CDC)

The Department of AIDS Control organized a workshop on Cohort Analysis from 25-28 March, 2014 at New Delhi in collaboration with Centers for Disease Control and Prevention (CDC), the University of California San Francisco (UCSF) and WHO Country Office for India.

The objective of the workshop was to build the capacity of regional coordinators and research officers from Centers of Excellence on evaluating the quality of HIV treatment services in terms of treatment outcomes, highlighting key challenges and allowing the comparison over time and between groups of patients through the use of cohort data.

In his inaugural addresses, Dr. A. S. Rathore, DDG (CST) gave a broad overview of the CST programme and the expected outcomes while Dr. V. K. Subburaj, Secretary DAC, emphasised on the need for constant monitoring of quality of care provided at the ART centres. Among other eminent speakers; Dr. Pauline Harvey (CDC, India) Dr. Asheena Khalakdina (WHO), Dr. S. Venkatesh, DDG (M &E) and Dr B.B. Rewari, NPO (ART) DAC, spoke about the overview of key indicators that need to be monitored for constant quality check of the outcomes of patients availing services at these sites.

The workshop, conducted primarily by the experts from CDC, Atlanta and University of California, Los Angeles, focused on programme evaluations to be done on the performance of patient-based cohort analyses.

At the end of the workshop, all participants from COE Program Directors, Deputy Programme Directors, Research Officers, Regional Coordinators Technical officers from DAC) were trained to apply the

- Concept of a cohort to ART monitoring and evaluation
- Organize cohort data collected through routine program monitoring
- Calculate key quality indicators for HIV care and treatment programs
- Interpret cohort data to enhance capacity for HIV program monitoring
- Communicate the cohort information to stakeholders

Dr Reshu Agarwal, PO (CST) DAC wrapped up the four days learnings and a road map to move ahead with additional trainings in different regions of the country with the trained participants as master trainers.



Convergence with NRHM

NERO hosted a Regional Consultation on convergence between NACP and NHM for the 8 north-eastern states of India

The north-eastern region of India presents unique circumstances and constraints when it comes to delivering healthcare services under the various vertical programmes run by Government of India. These constraints and unique circumstances are attributable to the facts that 7 amongst 8 states are characterized by hilly and hard-to-reach areas with limited resources, limited road-rail-air connectivity and international borders with five countries (Nepal, Bhutan. China. Mvanmar and Bangladesh). Convergence between National AIDS Control Programme (NACP) and the General Health System of the states (NHM) is also an area which offers many challenges, while attempting to streamline the process of service delivery at the sub-district level across all the 8 NE states. In an effort to address these challenges, a one day Regional Consultation on Convergence between NACP and NHM for the 8 north-eastern states of India was held at the North East Regional Office (NERO) of the DAC on 5 February, 2014 in co-ordination with Regional Resource Centre for North Eastern States (RRC - NES) of MoHFW. The objective was to streamline the planning process and subsequent implementation strategies while the exercise for preparation of PIPs and AAPs of respective states for the year 2014-15 was being undertaken.



Members from 8 NE states at the Regional Consultation

Focal persons for NACP-NHM convergence from State AIDS Control Societies (SACS) and State NHM of all NE states except Arunachal Pradesh, senior officials from RRC-NES, DAC and NERO participated in the meeting. The meeting was chaired by Dr. Dinesh Baswal, Deputy Commissioner-Maternal Health, MoHFW, Gol. The summary outcome of the consultation was that all the focal persons from SACS and NHM of the 8 NE states were thoroughly sensitized on convergence and some ioint action areas were formulated and resolved.

STI - DAC

## IEC team at Capacity Building Workshop



a Capacity Building Workshop supported by IHBP in January, 2014. The workshop was inaugurated by Secretary, DAC.

All staff of the IEC division participated in

The workshop focussed on sharing International Best Practices in Health Communication by Chief of Party, IHBP. Further it also contained sessions on management and the need for leveraging resources for maximum impact in HIV/AIDS and health communication. During the valedictory session, the Secretary and JD (IEC), DAC made some valuable advisory points on which the team started working to enhance IEC strategies.

National Coordinator, NHCRSC (IEC) - DAC

### Condom Fate Study to Assess Gaps in Supply and Distribution of Free Condoms

Technical Support Group for condom promotion conducted Condom Fate Study to assess the fate of free condoms and determine gaps in supply and distribution of free condoms from SACS downwards i.e. to the TI-NGOs, from TI-NGOs to PE and finally from PE to HRGs.

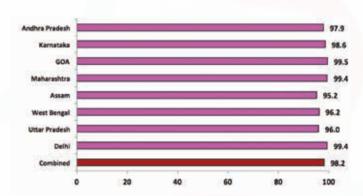
TI-NGOs from eight study states Uttar Pradesh, Delhi, West Bengal, Assam, Karnataka, Andhra Pradesh, Maharashtra and Goa were surveyed. The HRGs sample was tracked for a month wherein information on condom use on the previous day, number of free condoms procured from PE during the tracking period and details on free condoms used to determine wastage were obtained. Detailed interviews with officials at the SACS and TI levels were also conducted to get their views and opinions on the supply and distribution.

The key study findings revealed that there were no major issues with respect to supply and distribution of free condoms from SACS to TIs across all the study states. It was observed that demand estimation exercises for free condom supply were being done in consonance with the guidelines prescribed, involving the HRG in the process and based on the population covered, number of sexual encounters, factoring in

use of social marketing and commercial condoms and condoms brought by clients. Based on the sexual encounters the HRGs had during the tracking period, it was observed that more than 98 percent of the total free condoms received through PE network have been utilised. The utilisation was highest in Goa (100%) and lowest in Assam (95%).

TSG is to continuously strive to improve upon the present situation so that the wastage is minimized at all possible levels.





Free Condom Utilisation (in Percent)

**CASE STUDY** 

### **Ending Discrimination against PLHIV in India**

Prashant (name changed) is a 13-year-old boy from Kathua district, Jammu. When his school learnt of his HIV-positive status, the teachers mocked him, and his peers abused him. His elder brother was also picked on. His mother spoke to school authorities several times, in vain. She then approached the local Care & Support Centre (CSC) established Discrimination Response Team (DRT) at the district level; which deals with psychological support to PLHIV and advocates on their behalf. In this case, the DRT promptly met with the sarpanch and together they approached the school authorities and encouraged them to be non-discriminatory. The authorities were convinced after several rounds of discussions and committed to be fair to the boys. "I am happy to be back in school. Though I see a change in behaviour of my teachers and peers, it will take some time for me to adjust again," says Prashant. Discrimination denies PLHIV their dignity and respect and leads to reduced self-confidence and loss of motivation. It has profound implications on all HIV-related services and reduces people's willingness to be tested for HIV, disclose their HIV status, practice safer sex and access health care.

CST - DAC & Vihaan - India HIV/AIDS Alliance



# Voluntary Blood Donation Uttara

Uttarakhand SACS conducts IEC activities, motivational talks blood donation camps, rallies and seminars to Increase voluntary blood collection

On October 1, 2013, the Uttarakhand SACS celebrated the Voluntary Blood Donation Day. The ceremony was observed through voluntary blood donation camps, rallies and seminars. The core objective was to increase voluntary blood collection from various local institutions and civil societies. The regular repeat donors were honoured through a state-level ceremony. An appeal titled with the theme of campaign "Voluntary Blood Donation will cost you nothing but it will save a life" by Hon'ble Health Minister of Uttarakhand.

Ms. Uma Prakash, JD IEC



Officials of USACS with a Blood Donor on VBD Day

### World AIDS Day 2013 at Vadodara

Gujarat State AIDS Control Society commemorated the World AIDS Day with young participants of Vadodara

collaboration with Vadodara Municipal Corporation (VMC), Gujarat State AIDS Control Society organized the state level observance of World AIDS Day at Vadodara on 1st December 2013 with flagging off of a rally comprising of more than 1500 persons, including ASHA and ANM workers, officials from district health department, volunteers from local NGOs and other stakeholders. 90% of the participants were women. A team of DAPCU officials performed a play on prevention of HIV and services available at ICTC, PPTCT and STI centres.

Mr. Hemant Sukla, JD IEC



GASCS observing World AIDS Day



Participants at World AIDS Day celebrations

#### **PUDUCHERRY**

# Secretary DAC visited Puducherry in January 2014



Launch of NDAP workshop by Department of AIDS Control.

The National Data Analysis Plan under NACP-IV has been rolled out by the Data Analysis & Dissemination Unit, DAC to analyse the huge amount of data generated under the programme and develop analytical reports to support evidence-based planning and programme management. Analysts and mentors have been selected from various Research Institutes, Medical Colleges, State AIDS Control Societies, Development Partners and Consultants from across the country. To launch NDAP and to bring together all Analysts and Mentors on one platform, a workshop was organised at JIPMER, Puducherry during 16-18 January, 2014. Secretary, Department of AIDS Control, graced the valedictory function along with other distinguished guests. During his visit, he interacted with MSM and TI NGOs and visited the State Referral



Laboratory (SRL), ICTC& Link ART Centre and Model Blood Bank.

**M&E DAC & IEC - PACS** 

# **Assam SACS Celebrates International Women's Day**

250 girls celebrate International Women's Day at Guwahati

On March 8, 2014 the Assam State AIDS Control Society (ASACS) celebrated International Women's Day at Guwahati with around 250 girl students from various Red Ribbon Clubs. Project Director, Shri S K Roy, spoke on the theme, 'Equality for Women is Progress for all'. Renowned writer, Smt. Nirupam Borgohain, noted women rights activist Dr. Akashitora, and President of the Indian Network of Positive People (INP+) Jahnabi Goswami, Commissioner and Secretary, Health & Family Welfare Department, Swapnanil Baruah, spoke on the occasion.

IEC Team, Assam



Renowned speakers at ASACS International Women's Day celebration

# Welcome to the Family of DAC / CCOMC October 2013 to March 2014

### October '13

Ms. Richa Pathak



### November '13

Ir. Translator (O.L.)

#### December '13

**Mr Harpreet Singh** NPO (Blood Transfusion Services)

Dr Shikha Handa

### January '14

### March '14



Dr. V. K. Subburaj

Joint Secretary

Ms. Lakshmi Sripada Specialist Knowledge Transfer (AFC)

## **Upcoming Events**

- 20th International AIDS Conference, AIDS and HIV Medical Congress, Australia, Melbourne: 20-25 July, 2014
- Consultation of stakeholders on Strengthening Procurement and Supply Chain Management of Anti-retroviral (ARV) Medicines: May, 2014
- Visit of UK parliamentarian team to DAC- April, 2014
- Visit of delegates from Ghana & Angola under S2S to DAC- April, 2014
- Visit of delegates from Zanzibar under S2S to DAC- May, 2014





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Dr. Raghuram Rao, National Programme Officer (ICTC),

Dr. Yujwal, National Programme Officer (M&E) and Ms. Sanchali Roy, Consultant (IEC)

DAC News is a newsletter of the Department of AIDS Control (DAC), Ministry of Health and Family Welfare, Government of India.

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