

NACO NEWS

A Newsletter of the
National AIDS Control Organisation

Vol. VII Issue 1
Jan - June 2011

India's Presence at the 65th UN General Assembly High Level Meeting on HIV/AIDS

June 8-10, 2011



2011 HIGH-LEVEL MEETING ON AIDS
General Assembly | United Nations | New York
8-10 June 2011

unite
for universal access



TABLE OF CONTENTS

3| MESSAGE from Secretary & DG, NACO

LEAD STORY

4| UN High Level Meeting 2011
Reviews Progress, Sets New Goals

VOICES FROM THE GRASSROOTS

7| CHANGEMAKERS: Standing up to be counted

EVENTS & CELEBRATIONS

10| International Women's Day (IWD), 2011

14| World Blood Donor Day 2011

20| Candle Light Memorial Service

WORK SHOPS & CONFERENCES

22| National Folk Media

24| State Level Folk Media Workshop

26| Mainstreaming HIV in Insurance

27| National Harm Reduction Consultation

UPDATE

28| Upgrading Link Art Centre to Link Art Centre Plus Scheme

29| NACO Second Annual Report presents Overall HIV Picture

FROM THE STATES

32| Goa Celebrates National Youth Day

32| Kerala Launches Legal Aid Clinic and Mobile Blood Unit

33| Rajasthan legislators' Forum on HIV/AIDS

CAMPAIGNS

34| North-East Multimedia Campaign



Letters to the Editor



I came across the NACO News in the petroleum ministry and was pleasantly surprised to see the kind of work that is being done to create awareness around HIV and other related conditions like sexually transmitted diseases and reproductive tract infections.

Most of us who have petrol pumps and gas agencies tend to hire a lot of migrant labour. We would surely get in touch with relevant NGOs who can help us sensitise our staff on risk factors. I did randomly check with some of them. In spite of large scale advocacy over television and radio, there still is ambiguity in people's minds. Seeing the last issue where you had a story on the Red Ribbon Express gave me confidence. Indeed, these are the kind of campaigns that are needed to reach out to a vast and spread out country like India. My compliments and best wishes to the RRE team.

CP Sharma
Secretary

LPG Federation of Delhi



It is heartening to note that the Indian Government and the Ministry of Health and Family Welfare's efforts have succeeded in bringing down the rate of new HIV infections in the country. NACO has indeed done some pioneering work in the field, reaching out to high risk groups as also the general population.

Working in the area of mental health, our experience has shown that there do not exist enough focused and organised interventions relating to HIV and mental health. We all know that HIV is a complex health condition and one that needs counselling, guidance and support. We would like to know if there is any data that indicates how many HIV positive people are schizophrenic or bipolar or suicidal and if the outreach staff, working with targeted interventions in the field, are trained to identify symptoms and make suitable referrals? Also, if there are any studies that throw light on the subject?

Nidhi Sood

Mental Health Specialist
Whole Mind India Foundation
Sant Nagar, New Delhi

Help us in our constant endeavour to make NACO Newsletter more participative by contributing case studies, field notes and experiences, news clips, forthcoming events etc.

For back issues and for information on HIV/AIDS, log on to:
www.nacoonline.org or mail mayanknaco@gmail.com

– Editor

Dear Reader,

We have come a long way in stabilising the epidemic and in helping reduce HIV/AIDS infections which have dipped by half over the last decade. Effectively, this means that as stakeholders – affected communities, civil society organisations, NGOs and partners – we have developed a prevention model that has delivered results on the ground. Our targeted interventions cover an estimated 70% of the population most at risk. There is improvement in counselling, testing and number of people receiving anti-retroviral drugs. Our HIV/AIDS programme is being talked about globally as a success story.

This success was effectively showcased and commended in the recent UN High Level Meeting, held in New York on 8-10 June, 2011. The Indian delegation was led by Hon'ble Minister of Health and Family Welfare. The Meeting took stock and reviewed three decades of global response to AIDS. It also brought together all stakeholders to reaffirm their current commitment and action for a sustained response to HIV prevention, care and support.

Our stories -- Voices from the Grassroots validates NACO's near two decades of work with communities. As our programmes matured and provided support, empowering individuals and communities, it created a ripple effect as ordinary people became foot soldiers of change, transforming their lives and those of their communities forever. We tell you their journeys of possibility.

NACO's initiatives have aimed to innovate and provide succour to those infected and affected by HIV. The Insurance Conference -- "Mainstreaming HIV and AIDS: Role of Insurance in India", held in New Delhi on 3-4 February, 2011 brought HIV/AIDS within the ambit of the insurance sector. It showcased global experience and provided a platform for PLHIV, insurance sector, policy makers, and government officials to collectively explore the best and most viable option in India. A working group is outlining a road map to take the issue forward.

On March 8, the world celebrated 100 years of International Women's Day (IWD), bringing high risk groups, general population, civil society and NGOs to come together to



find new ways of reducing stigma and discrimination, making people aware of HIV treatment, care and support.

The Voluntary Blood Donation Day is important to us from the point of view of propagating messages on HIV, creating ownership, especially in small towns where activities like this turn out to become large participatory events.

As part of ongoing advocacy efforts, we have been holding multi-media campaigns in the North-East. Our last issue covered Phase I of the music and sports-based gala event and this issue looks at the concluding Phase II.

Similar efforts have been made in the area of developing standardised scripts and creative materials for various folk forms that find their way into states' IEC agendas. The second national Folk Workshop was held in Delhi, where different folk forms were taken up and interspersed with simple and effective HIV/AIDS messages to reach a wide audience.

For readers wanting an update on NACO's activities, there is a story on our comprehensive Annual Report for the year 2010-11. A useful document with the latest data and programme details, it promises to inform, educate and empower not just those who are part of the large HIV family but also those who serve to be a part of the 'enabling environment'.

Finally, thank you readers for your feedback and support. We hope to continue to make NACO News more reader friendly, informative and filled with substance.

A handwritten signature in blue ink, appearing to read 'Sayan Chatterjee', written over a light blue horizontal line.

Sayan Chatterjee
Secretary, Department of AIDS Control and
Director General, NACO
Ministry of Health and Family Welfare
Government of India



UN High Level Meeting 2011 Reviews Progress, Sets New Goals

From left to right: Hon'ble Minister of Health & Family Welfare Mr. Gulam Nabi Azad, Secretary & DG, NACO Mr. Sayan Chatterjee, Additional Secretary NACO Ms. Aradhna Johri

India learns from others' example and shares snippets from its own eventful journey

Thirty years into the AIDS epidemic, and 10 years since the landmark UN General Assembly Special Session on HIV/AIDS, the world came together to review progress and chart the future course of the global AIDS response at a High Level Meeting on AIDS from 8–10 June 2011 in New York. The meeting reaffirmed current commitments and actions to guide and sustain the global AIDS response on HIV prevention, care and support.

More than 3000 delegates from 192 countries attended the three-day conference. The delegations included 30 heads of states and governments, Ministers, senior officials, representatives of international organisations, civil society and people living with HIV.

The Indian delegation was led by the Union Health and Family Welfare Minister (HFM), Ghulam Nabi Azad along with Oscar Fernandes, Chairman, Committee on Human Resource Development, J D Seelam, Member of Parliament, Sayan Chatterjee, Secretary & DG, Department of AIDS Control,

Aradhana Johri, Additional Secretary, Department of AIDS Control, Dr. B.B. Rewari, National Programme Officer (ART) and Manilal Raghawan, Project Officer (Targeted Interventions), NACO. More than a dozen representatives from civil society and NGOs participated in the deliberations.

The meeting had five panel sessions of the General Assembly and 40 other side events providing a unique milestone to the progress and challenges of the last 30 years while attempting to shape and fund the future AIDS response. The meeting marked 10 years of the historic 2001 United Nations Special Session on HIV/AIDS, and the 2006 signing of the Political Declaration where UN member states committed to moving towards universal access to HIV prevention, treatment, care and support

Developing a more inclusive approach

The Hon'ble HFM, Ghulam Nabi Azad in his speech at the General Assembly session, gave an overview of the

National AIDS Control Programme, saying that India with its focused and intensive programme had succeeded in containing the epidemic with an HIV prevalence of just 0.31% and an annual drop of 50% in new infections. He attributed the positive trend to a robust programme that focused on high risk groups, expansion of services and improved access to ART.

“We are at the threshold of NACP-IV and while new strategies will gain ground, we will strengthen earlier programmes too. Preventing mother to child transmission will be a priority as we convert the existing 27 million annual pregnancies into institutional deliveries for efficacious preventive intervention, ensuring better detection of HIV positivity among pregnant women.”

Speaking of India’s ongoing efforts, the Hon'ble Minister spoke of new initiative to deliver male and female condoms at the household level which was being launched through 800,000 Accredited Social Health Activists (ASHA) in 233 districts of 17 states, covering a population of about 200 million. This will be scaled up across the country, helping prevent the spread of HIV infection and also strengthen the government’s efforts in population stabilisation.

Funding issues

The Minister assured that domestic funding for HIV/AIDS would be increased. He also urged the international community to look at ways of filling the resource gap and to work together to remove barriers like Intellectual Property Rights to ensure flexibility in Trade-Related Intellectual Property Rights (TRIPS) get used for better availability of affordable medicines.

The meeting ended with the adoption of a Political Declaration on AIDS, setting the course for a global response to HIV/AIDS by defining measurable targets for achieving universal access to prevention, treatment, care and support by 2015. The declaration noted that HIV prevention strategies inadequately focus on population/s which are at higher risk, especially Men who have sex with Men (MSM), Injecting Drug Users (IDU) and Commercial Sex Workers (CSW) whereas focus should also be on getting nations to mount a response based on their epidemiological and national profiles.

The Declaration recognised that access to sexual and reproductive health has been and continues to be essential to the AIDS response and that governments were responsible for providing public health services. It was agreed that member states would review their law and policies to see if they adversely impacted the successful

and equitable delivery of HIV prevention, care and support programmes.

With nearly 7000 new HIV infections each day, the declaration emphasised that HIV prevention would continue to be the chief determinant of all national, regional and international responses to the AIDS epidemic and would urge nations to deploy new bio- medical interventions.

Redouble existing efforts

The declaration called on all UN member states to redouble their efforts to achieve universal access to HIV prevention, treatment, care and support. The 16-page, 105-point declaration includes a commitment to work towards cutting sexual transmission of HIV by half, reducing spread of HIV among IDU and to work towards eliminating mother-to-child transmission of HIV and to dramatically bring down AIDS-related maternal deaths by 2015.

Besides defining commitments, the Declaration broadly laid out principles to achieve the above mentioned goals. For example, in a section on advancing human rights to reduce stigma, discrimination, and violence related to HIV, it called for intensified national efforts to create legal frameworks to



A Demonstrator at UN High Level meeting

eliminate them and to promote access to HIV prevention, treatment, care, and support services. It also pledged to eliminate gender inequality, gender-based violence, and to increase the capacities of women and adolescent girls.

The countries agreed to advance their efforts towards reducing sexual transmission of HIV and halving HIV infection among people who inject drugs by 2015, while agreeing to push towards eliminating new infections among children in the next five years.

Among its many goals, the document set a target of having 15 million HIV-positive people on ARV drugs by 2015 to

enable them protect themselves from infections. Member states pledged to close the global resource gap for AIDS and work toward increasing funding to between \$22 - 24 billion a year for low- and middle-income countries by 2015. This would be a heartening move, especially since international aid has for the first time since 2001 seen a significant drop.

The UN High Level Meeting through its vast network of partners has set a new global agenda for HIV/AIDS. As UN General Secretary Mr Ban-ki-Moon, said, "With global solidarity, we can end this epidemic once and for all."



2011 HIGH-LEVEL MEETING ON AIDS
General Assembly | United Nations | New York
8-10 June 2011

unite
for universal access



People who represented India's Success story in the UN High Level Meeting



"India has a strong prevention programme which goes hand in hand with care, support and treatment. We have been able to contain the epidemic with a prevalence of just 0.31 %. We have also brought about a decline of 50% in new infections annually."

Shri Gulam Nabi Azad,
Hon'ble Minister of Health and Family Welfare

"The High Level Meeting brought home the need for governments to work together, so that technologies related to medical care, like anti retroviral drugs, reach vulnerable population of developing countries at the lowest prices."

Mr Sayan Chatterji,
Secretary and Director General, NACO



"This High Level Meeting recognized India's HIV programme as a success story. The Declaration gives us renewed enthusiasm and commitment to ensure HIV prevention, care and support to all. We are assured that HIV/AIDS will continue to be an important mandate for the world."

Ms Aradhan Johri,
Additional Secretary, NACO

Dr B.B. Rewari
National Programme Officer (ART)
NACO

CHANGEMAKERS: Standing up to be counted



Seeta, President of UPNP+, Uttar Pradesh.

In the last two decades as NACO's interventions matured and made a dent in the lives of communities, it empowered people to swim the tide and become changemakers and anchors for their communities. NACO NEWS captures the success stories of India's HIV Programme.

It has been 25 years since HIV first made its appearance in India. The National AIDS Control Programme (NACP) began in 1992 and has for the last two decades worked towards providing prevention, care, support and treatment for PLHIV. As NACP Phase III reaches culmination and NACP-IV gets drawn up, NACO's programmes have matured, showing visible results. The most prominent change in India has been of successfully stemming the tide and not going the way of the African pandemic. With an estimated 23.9 lakh PLHIV in the country, the epidemic is seeing a slowdown – 50% decrease in new HIV infections.

Many reasons have led to the improved scenario, significant being the untiring work of making HIV everyone's mandate, involving communities most at risk and the general population. In a conservative society that believed HIV happened to only others and especially those who were promiscuous, NACO broke the silence that surrounded sex and sexuality, getting people to speak in open fora, confronting behaviours and attitudes, and working in taboo

areas of sex work and drug addiction, amongst others. A robust surveillance system led to continuous monitoring and understanding of the flow of the epidemic, bringing in new vulnerable groups like migrants within its fold and putting in place new migrant interventions that addressed migrants across source, transit, destinations and with families back in the villages.

In addressing the core issue, it got people to think and make healthy choices. NACO scaled up gradually to reach districts with Integrated Counselling and Testing Centres (ICTCs), ensuring that through Prevention of Parent-to-Child Transmission (PPTCT) programme, each pregnant mother who was HIV positive had a fair chance of having an HIV free newborn. NACO provided free ART and brought new technology for early detection of HIV in babies as young as six months of age. Meanwhile, new research is helping make breakthroughs in vaccine designs that will in times to come build on the many positives that have already proven successful on the ground.

By revamping voluntary blood donation, NACO reduced blood borne infections dramatically. High Risk Groups (HRGs) were reached through a larger network of peer-led interventions. Initiatives such as convergence with National Rural Health Mission (NRHM) forged partnerships for TB/STI/HIV. Currently, mainstreaming efforts are underway, with hope pinned on providing insurance to HIV infected and affected families.

Behind the Numbers

Beyond statistics, AIDS is still a condition shrouded in denial, evoking fear and stigma, preventing HIV positive people from accessing treatment or openly acknowledging their status. NACO NEWS goes behind the statistics, to give readers insights into lives of people who have broken free to come to terms with their positive condition. Some of them are not infected and have still chosen to dedicate their lives to HIV. This issue celebrates the spirit and courage of these unsung people who are in their own way heroes and changemakers.

Being an Anchor

Sita's parents named her after the legendary wife of Lord Ram. Growing in the temple city of Varanasi surrounded by the rippling waters of the Ganga, she was a bright eyed optimist and born leader. Liked by her family and friends alike she was married to a truck driver. Four years later much to her horror Sita's perfect began unraveling, her husband fell sick. Despite best efforts his health kept deteriorating. Unknown to her, he had AIDS and it was only after his death that she discovered that she too had HIV.

Suddenly from being the loved and favoured one of the community, Sita found herself at the edge of the precipice, shunned and ignored. Sans financial support, she wondered how other women in similar circumstances coped as outcastes. After much introspection she realised she had only two ways to live – in fear or fearlessly.

She contacted the local administration for help and was directed to the Uttar Pradesh State AIDS Control Society (UPSACS). Soon, she was inducted into a network that had active NGOs and CBOs working on HIV/AIDS. She was a quick learner who connected effortlessly with families. Working more than 10 hours a day, she took on additional responsibilities and went on to become the President of Uttar Pradesh Network of Positive People (UPNP+) and board member of Positive Womens Network Plus (PWN+) India. The challenge of working in a large state is daunting, but her aim has been to alleviate the suffering of women and bring them into the programme so that they can avail

timely treatment, care and support – things which sometimes individuals cannot do themselves but have to be guided by others like them. She takes this role very seriously.

Turning the Tide

42 years ago in the dusty by lanes of Wadgaon village in Belgaum district of Karnataka, a baby boy was born to a weaver couple. They named him Vinayak, after their family deity. Growing up in poverty, the child discovered he was different. He was effeminate and loved house work. Teased by family, he was the butt of their jokes. When he turned 12, his parents took him to the temple of Yellamma and dedicated him to the goddess, turning him into a 'Jogappa'. 'Mujhe moti bandh diya aur bhagwan pe chod diya' (Beads were tied to my wrists and I was offered to the Gods), says Vinayak. He began wearing sarees openly and earned a living through sex work. His guru named him Chandini. He alternated between two genders, switching identities of man and woman.

At 18 when he got a sexually transmitted infection, he went to a local hospital where he was ignored and told he got what he deserved. This was the most humiliating experience of his life. Thereafter, his friends took him to a drop-in centre (DIC), where he found others like him. Gradually, he accepted his sexual identity of being an MSM-men who have sex with men. He lived in a one room tenement with his aging father. Things got better only when he joined Sweekar (acceptance), a CBO that works on MSM and transgender issues.

He is today Vice President of the CBO and National Consultant for another international agency. He has trained 500 policemen and worked with truckers. He is happy to help people – from getting them ration cards, to making visits to government offices.

Crossing the Threshold

At 38, Pankaj Kumar Sonkar defied social norms to marry the man he loved. He admits that after a life of endless tribulations, he is living on his terms and is comfortable being "different". He lost his parents at the age of five and was thereafter, sexually and physically exploited by a gang of local goons, pushing him into a world of violence, prostitution, abuse and penury. In those years, the only thing that kept him going was his love for music and dance. He was a gifted child with an ear for rhythm and beat. He gradually honed his skill to enable him earn a modest living, dancing at parties, weddings and in religious functions.



Puii, Project Head, Shalom, Manipur.

He joined Lucknow-based Bharosa (trust), a CBO focusing on male sexual behaviour, educating and creating awareness amongst sexually marginalised and stigmatised male population and communities to prevent STD/HIV/AIDS. As a counsellor and field worker, he is associated with “Apka Bhai” (your brother) initiative which promotes preventive methods and practices. “We equip partners and family members with skills to face a life crisis or significant transition, helping them overcome depression and anxiety, building better relationships and dealing with abuse/trauma/addiction. We provide quality care in an atmosphere free of judgement, fear and discrimination.”

The Path of Shalom

Thousands of miles from the dusty by lanes of Uttar Pradesh where Pankaj is turning his life, around is Churachandpur, a border town in Manipur, a state which was the AIDS capital of India in the 1990s. It is here that Shalom – Society for HIV/AIDS and Lifeline Operation in Manipur – provides salvation to people infected and affected by HIV. Headed by 34 year old Lalruatpuii, or Puii as she is called, the NGO has been bequeathed to her by her father Dr Munna, who quit a government job in 1995 to start Shalom after the first HIV case of injecting drug user (IDU) was detected in Imphal jail.

For Puii, it was not easy to step into her father’s shoes but she has in her own way, brought a new energy to the work. Shalom runs programmes around Churachandpur. The

needle and syringe programme was started in 1996. As a harm reduction programme, it provided safe space for drug users to come in and use fresh syringes, and adopt health seeking behaviour. They reach over 1,000 IDUs and 200 sex workers.

Shalom’s training and advocacy programme reaches all Church-based communities. A major breakthrough they achieved early on was to stop the practice of wrapping bodies of people who died of AIDS in thick plastic sheets before burial. In 1999, they started a community care centre (CCC) which today houses a 20-bed hospice. Outside the CCC, a group of people have been supported by Shalom to start the Consortium of Positive People of Churachandpur (CPPC). Most members are reformed drug users but who are HIV positive. The women in the group are mostly widows, infected and whose husbands died of AIDS.

The CPPC has many members. They work within Shalom as outreach workers and have formed a forum of Positive Speakers, visiting schools, colleges and churches, sharing stories of their lives. For 45 year old Denga, an active member of CPPC, “We are ‘living testimonies’ – sharing our lives with the hope that we can cure isolation and rejection which are more painful than AIDS.”

■ Madhu Gurung
Media Advisor
NACO

“I do, I will, I shall”: Women Speak up on International Women’s Day (IWD), 2011



Women from different parts of the country.

Women across the country join hands to share and learn from each other as they learn to play a central role in their own lives.

This year, March 8 had a special sheen. It was the centenary year of the historic International Women’s Day (IWD) which is observed in more than 150 countries, in as many different ways but with a common central message from women that says in one unified voice, “we matter”.

The day has acquired a special relevance for women across the world, in developed and developing nations and in urban and rural settings. The fact that women have been so excited in giving shape to what they perceive as “their” day, goes to show just how badly such an affirmation, recognising their right to equality, freedom of expression and to know that they were cared for, was needed.

Women have come a long way from championing for their cause in 1908 when 15,000 women bravely marched through New York City demanding shorter hours, better pay and voting rights and to the first IWD that was held in 1911. Cut to the present, and women can be seen in top echelons of the corporate and political hierarchy, charting their paths and being trailblazers in many areas.

As women began to navigate their life journeys on their own, there was a shift in the nature of IWD observance. From being an occasion to stress on the negatives, it became a platform to rejoice over the positives – the

advancements they had made, the battles they had conquered, the triumphs they had achieved and the plans they had for those women who still had to learn how to make their presence count and voices heard. This awakening has been complemented by a series of cultural and location specific events that brought women together, helping them reach out to other women and to scale up their competencies in both the personal and professional spheres.

In some areas, this camaraderie really worked well, as in the field of HIV/AIDS where women were far more vulnerable to getting infected as also suffering the consequences of poverty, disease and discrimination. In India, IWD is a symbol of respect, trust and love. Organisations, NGOs, activists and the government spearhead a multitude of activities that strengthen women’s efforts and back them by saying, “We are there behind you.” In what have been male dominated societies, change might have been slow in coming, making occasions like IWD even more relevant, for they serve as a strong reminder to communities to not forget words of Napoleon Bonaparte, “Give me a strong mother, and I will give you a strong nation.”

NACO News gives you a brief account of what the country did to celebrate womanhood on IWD, 2011.

Women find a voice in Andaman & Nicobar Islands

Women express the need for a special forum to share problems and learn ways of finding a more equitable say in family decisions, including negotiating safe sex.

Mainstreaming was a well thought out theme as Andaman & Nicobar SACS reached out to women from different strata of society, getting them to participate in a niche event in Port Blair on 8-9 March, 2011. Since awareness on HIV transmission was already an established fact, thanks to an ongoing series of programmes, the need was felt to involve women at a deeper level.

By talking of how HIV could be mainstreamed in all aspects of life, supported by different ministries, ownership was created with women resolving to don the mantle of change agents, working effectively within the household, workplace and community to fight the infection and live with dignity.

A parallel session on advocacy was held, focusing on prevention and control of HIV/AIDS/STD. A special session

was held for women and adolescent girls, informing them on various aspects of HIV/STI and reproductive health. They were also told about the 13 integrated counselling and testing centres (ICTCs) where free and confidential services were provided. Many admitted feeling a sense of shame and embarrassment at talking about subjects that were taboo.

Discussions focused on vulnerabilities of women and how they had to battle gender inequality; be more exposed to the virus; and navigate cultural, social, economic and other barriers, all of which placed them at higher risk of infection.

■ Dr. Jahanara Yasmeen
DD (IEC), A&N AIDS Control Society

Media support in Assam leads to large Turnout at all Events

Wide media coverage of meetings, rallies, marches and college gatherings ensured audience interest with helplines ringing and SACS flooded with queries.

Assam SACS in collaboration with Assam State Commission for Women, Government of Assam and Brihattar Noonmati Nari Niriyatan Birodhi Akyamancha, a prominent women organisation, held an open meeting to discuss the severe impediments which women faced in their quest for leading safe and healthy sexual and reproductive lives.

The meeting was inaugurated by Mridula Saharia, Chairperson, Assam State Commission for Women and presided over by Jayanti Patnaik, the first Chairperson of the National Commission for Women and wife of Governor J. B. Patnaik. Others present on the occasion included M. Hajger Barman, Project Director, Assam SACS and Dr. N. S. Tishya, Deputy Director (Blood Safety).

The observance of IWD was marked by a series of mass events such as a rally and human chain that went through the entire capital city; an information, education and communication (IEC) stall set up at the meeting venue with



Awareness campaign led by Assam SACS.

posters and banners on HIV/AIDS; street play on HIV/AIDS; and a cultural performance. All IWD activities were widely covered by the local media, generating interest and appreciation for the efforts made by SACS.

■ Bonti Saikia
Asstt. Director (Publicity), Assam SACS

Popular film star steers IWD Observance in Gujarat

Celebrity endorsement for the cause of women worked wonders in Gujarat with women turning up in large numbers and showing interest.



Actress Mona Thiba, giving away the mementos to the women for their contribution in health interventions.

A strong fervor for empowerment and emancipation shone on the faces of more than 4500 women from different social strata, who gathered on the sprawling exhibition ground of DCC High School, Jamnagar for the state level observance of IWD on 8 March, 2011, organised by Gujarat SACS in collaboration with local District AIDS Prevention & Control Unit (DAPCU) and an NGO, Shree Sarvodaya Mahila Mandal.

Popular Gujarati film star Mona Thiba turned out to a pleasant crowd puller. Huge banners had been put up with her smiling face, urging women to attend. Her star status was one of the reasons for an audience of over 5000 thronging the venue, and her appeal to women to ensure healthy living, and prevention and control of HIV/AIDS made the programme a runaway success. Earlier

in the morning, she had led a procession of over 1500 women through the busy areas of the city.

The programme was attended by district level functionaries that included the District Collector, District Development Officer and Chief District Health Officer. During the function, mementos were given away to 40 women for their contribution in the district health interventions. The cultural programme included a thematic group dance on the life of Rani Laxmi Bai of Jhansi; group dance on the theme of HIV/AIDS; and group song by young students of a local school for blind children. Large crowds visited the exhibition stalls set up by DAPCU and other district health institutions.

■ Hemant Shukla
Joint Director (IEC), Gujarat SACS

MPSACS honoured Positive Women who worked for the Community

Brave efforts of HIV positive women who worked with infected and affected families were acknowledged in a public event.

Madhya Pradesh SACS dedicated March 8, 2011 as a day to honour the efforts of HIV positive women in Bhopal. Attended by 250 women from different segments of society, including 50 positive women, representatives of AIDS Alliance, UNICEF and other stakeholders, students, youth and media conveyed their support and solidarity to building the emotional and physical strength of women.

The Commissioner, Health and Project Director, MPSACS, Dr. J. N. Kansotia felicitated women who had gone beyond the call of duty, responding to people and situations with their heart, doing all they could to make the lives of children and families infected and affected by HIV/AIDS better.

Raj Kumari Sen of Sagar district worked with AIDS sufferers. She lived with them for two years, providing them support. Malti Kagde of Indore guided HIV positive women through peer counselling, helping them become a source of strength to their families. Rajkumari Ganguly of Burhanpur helped 50 HIV families get BPL cards, apart from helping widows

receive benefits of pension. She ensured that awareness on food and nutrition was stepped up and children received healthy diet. Varsha Newaskar of Dewas district set up the Network of Positive Women Welfare Society. Rekha Bai Teli of Neemuch visited villages guiding people on adopting methods to prevent the infection and to seek treatment.

Dr. Kansotia stressed the role of education in women empowerment, expressing concern on falling sex ratio, urging everyone to work towards bringing positive changes in the overall outlook towards women. Other events which were put up included plays by students of girls colleges, highlighting stigma and discrimination suffered by HIV infected women; technical sessions on AIDS prevention and management of STI; and government schemes on reproductive and maternal health.

■ Savita Thakur
Joint Director (IEC)
Madhya Pradesh SACS

“Educate Us”: Fervent plea of women in Chandigarh

Women from privileged and marginalised backgrounds come together for an interactive dialogue.

Chandigarh State AIDS Control Society in collaboration with partner NGOs observed IWD at different locations, with women from different socio-economic backgrounds. Of special note was the gathering at the picturesque Rose Garden where 250 women from the villages and slums of Chandigarh got together to talk about their lives. The interactive dialogue facilitated by NGOs was cathartic. Many admitted that education was the key to their being treated well at home, work and within the community.

For many participants, it was a first outing to the Rose Garden, in spite of residing in the city for decades. Many did not know the range of services provided in the health care centres and the risk of leaving STIs untreated or of indulging in unsafe sex. Women were apprised of their sexual, matrimonial and property rights to enable them



Participants on a city excursion in Chandigarh.

assert themselves within the familial structures with knowledge and confidence.

■ Dr. Jitender Dahiya
Joint Director (IEC)
Chandigarh SACS

Voluntary Non-Remunerated Blood Donation Gets an Impetus



Voluntary Blood Donor from Arunachal Pradesh

NACO's ongoing efforts to promote safe and hygienic blood and blood products saw renewed enthusiasm in the month preceding VBD day which fell on June 14.

Schools, colleges, district hospitals and corporate campuses across the country saw frantic activity with tents being put up, refreshments served and a general bonhomie exuded with young people milling about as they donated blood and talked of their experiences. Indeed, the Voluntary Blood Donation Day on June 14, acquired immense significance with multiple agencies coming together to propagate values associated with non-remunerated voluntary blood donation.

In recent years, the campaign has gained momentum on two accounts – one to dispel myths and misconceptions which abound, keeping healthy donors away and two to make young people feel good committing the honourable act of donating blood, not once but at regular intervals. Awareness around rare blood groups and about donating blood not just during emergencies but through the year is now bearing fruit with the number of regular donors going up and blood banks having a fair amount of surplus blood in their stocks.

According to the WHO, safe blood donors are the cornerstone of a safe and adequate supply of blood and blood products. Safest blood donors are voluntary, non-remunerated blood donors from low risk populations. Despite this, family/replacement and paid donors, which are associated with significantly higher prevalence of transfusion transmissible infections (TTIs) include HIV, hepatitis B, hepatitis C, syphilis and Chagas disease, continue to provide more than 50% of the blood collected in developing countries. WHO advocates and recommends Member States to develop national blood transfusion services based on voluntary non-remunerated regular blood donation in accordance with World Health Assembly resolution 28.72, which was adopted in 1975.

NACO has over the years provided immense support to its State AIDS Control Societies who have in turn worked closely with local NGOs, CBOs and other organisations, including those which are faith-based, student-focused and

women-based to spread awareness and bring a larger number of people under the blood donation umbrella. In the paragraphs below, you can get an overview of how India responded to the clarion call for safe blood, through focused and intensified activities that ran for a month preceding VBD day on 14 June, 2011.

Collaborative Effort of Agencies Seen in Arunachal Pradesh

The month-long activities on VBD which were based on the theme of “more blood, more life” concluded with a state function held on June 14, 2011. Mr. Atum Welly, Health Minister of Arunachal Pradesh spoke to a packed hall, placing on record the good work done by individual blood donors, NGOs and CBOs who had worked selflessly for decades to remove the stigma and clarify the myths that surrounded blood donation. His advice to people was to “focus on creating a sense of community ownership towards the cause of blood donation and to understand the significance of safe blood.”

The year 2010-11 was a special year in respect of the VBD movement in the state. More than 25 camps were organised by different NGOs, CBOs, NSS/RRC, paramilitary forces and blood banks of hospitals. The total blood collected was 518 units out of which 401 units were from male donors and 39 from females.

Tangwang Wangham, Parliamentary Secretary, Health & Family Welfare stressed the need to recruit and retain donors as also improve long-term safety and sufficiency of the state’s blood supply while promoting healthy lifestyles. Media was used extensively to inform people of the schedule of camps and create exuberance around donation. Camps were held on June 17, June 23, June 27, June 30, June 6, June 8 and June 14, 2011 to mark the month-long campaign.

Andhra Pradesh Endorses ‘Safe Blood’ Messages

Using mass mobilisation techniques to bring large numbers of people together to go for VBD, understand the significance of safe blood and respond to blood related emergencies in a voluntary and non-commercial manner was the focus of VBD observance in Andhra Pradesh.

Walks and rallies saw huge turnout. On Blood Donors Day, APSACS organised a walk through the central areas of the city that see maximum activity. More than 300 members/ volunteers took part, holding placards and banners with catchy slogans. The rally was flagged off by Dr. Sujatha, Deputy Director (Blood Safety), APSACS in the presence of



Rally from Jal Vihar, Necklase Road, Hyderabad

N.Venkateshwar Rao, Deputy Director (IEC), Dr. Rama Krishna, Deputy Director (HIV-TB coinfection), Programme Officers of partner organisations, representatives of NGOs/ CBOs, media and students from Nursing Colleges.

Blood donation camps were held at P.V. Narsimha Rao Gatt and the Institute of Preventive Medicine. A cultural programme was held to mark the occasion.

Goa Felicitates Regular Donors

Goa SACS joined hands with the State Blood Transfusion Council to hold a state level function at the Secretariat on June 14, 2011. The Chief Guest Dr. Pramod Salgaoncar, Chairperson, Core Committee, Goa SACS honoured 22 blood donors who had been steadfast in their commitment to VBD. The presence of Balkrishnan, Secretary to Chief Minister, Dr. C. P. Das, Acting Dean, Goa Medical College, Bambolim and Dr. Vasudev Devari, Deputy Director, Directorate of Health Services, Campal gave out a clear message that denoted the support of multiple agencies



Donors donating blood at the Blood donation camp for the World Blood Donor Day 2011

and government departments to the issues that surrounded blood donation.

A special speaker was Kiran Kerkar who had donated blood more than 50 times. He talked of how he was actually healthier since the act of VBD made him feel happy and proud to be of service to the community, state and nation. The event was followed by a blood donation camp which saw hundreds of volunteers taking part and apprising themselves on facts related to blood donation, and HIV/AIDS.

Students at the centre of celebrations in Jammu and Kashmir

For over a month, activities were held in Jammu and Kashmir to bring discussion of voluntary blood donation in the public eye. JKSACS worked closely with government and non-government organisations, in an attempt to reach a larger cross section of the population. However, it was activities involving youth that drew maximum attention.

A large scale event was held in Kashmir University by the Department of Student's Welfare, JKSACS and Hussaini Relief Committee (NGO). Sham Lal Sharma, Minister of Health, Horticulture and Floriculture presided over the function along with dignitaries including Javaid Ahmad Dar, MoS for Health & Medical Education and Talat Ahmad, Vice-Chancellor.

On June 13 a poster competition on VBD was held in the university premises with students from different institutes



Felicitating a voluntary blood donor in UP

participating. A VBD camp was held in the college premises with over 75 blood units being collected. A special campaign on radio was organised by JKSACS in collaboration with Big 92.7 FM which beamed VBD messages at regular intervals on 14-15, June.

In Jammu province seminars, IEC events and VBD camps were organised by JKSACS in partnership with local hospitals, Indian Red Cross Society and blood banks.

Uttar Pradesh's Districts Take up Blood Donation on War Footing

The focus of all activities in Uttar Pradesh was to create awareness on the need to avoid replacement donation and instead go in for blood collection from voluntary blood donors. At the state level, a week-long campaign was held in collaboration with the Times of India, with the intention of reaching out to a large audience. Popular activities such as wall paintings and banner displays were done throughout the city prior to a function where 50 regular blood donors were honoured. Corporate sector involvement was seen with Telco Motors, Mahendra Club and Infratech pitching in by setting up stalls and giving branded merchandise such as T-shirts with safe blood messages.

At the district level a meeting was held under the chairpersonship of the District Magistrate. Blood donation camps were held at the tehsil level and district level with a healthy turnout at each location. At Bijnour, Allahabad (72 units collected), Aligarh (53 units), Pilibhit (36 units), Sultanpur (15 units), Rampur (15 units), Kanpur Nagar (18 units), Hatrus (10 units).



Voluntary Blood Donor from J&K

Ambassador of Goodwill Appointed to Promote VBD in Sikkim

Using the route of personal endorsements, Sikkim SACS decided to not just honour regular blood donors but also gave them an opportunity to share the stage at a well attended function and speak of their experiences.

Sunita Jhulka, a resident of Gangtok and a blood donor who has given blood more than 30 times was appointed as the first honorary 'Ambassador of Goodwill' for blood donation and motivation in Sikkim. She would serve the term for a period of one year, effective from June 14, 2011 to June 14, 2012 during which she would travel, give talks, speak on radio and television and reach out to people of all age groups. While the young would be implored to donate blood, the old would be counselled on the need to access safe blood and blood products.

World Blood Donor Day was jointly observed by Sikkim SACS and Sikkim State Blood Transfusion Council on June 14, 2011. As part of the pre-event publicity, video spots, jingles and interviews of regular donors were aired on the local cable channel. On June 14, a mass rally was jointly organised by SSBTC and SSACS. The two-km walk, from a popular junction to the Blood Bank at S.T.N.M Hospital saw large participation by people of all age groups, energetically holding placards with motivational messages and shouting slogans. The rally ended with a mass appeal made by regular donors urging the general population to make "blood donation everyone's business."

Tripura Holds Motivation Camps to Encourage Repeat Donors

Tripura SACS held a series of seminars on 'Motivation and retention of voluntary blood donors' across the state at the sub-district level. This was done in collaboration with local panchayat samitis, nagar panchayats and leading NGOs. These were backed by motivation camps in schools, colleges and ashrams, propagating the need to collect more safe and healthy blood units on an ongoing basis.

At each blood donation camp provisions were made to honour the donors. Also donor identity cards were issued after testing blood. The movement picked up with a lot of dialogue in the public space around myths and misconceptions of donation and the important things to keep in mind while seeking blood and blood products. Apart from advocacy through print, electronic and outdoor media, messages from political leaders such as the Health Minister and President of the Council and local celebrities helped in reaching out to people of all age groups, making blood donation everyone's concern.

Nagaland Reinforces Value of "Blood as Precious Gift"

A state level function was held at the Nagaland Civil Secretariat in collaboration with Nagaland Secretariat Service Association with Shri Lalthara, Chief Secretary to Government of Nagaland as Chief Guest. The programme was attended by Shri Menukho John, Commissioner &



Sunita Jhulka, appointed as the first honorary 'Ambassador of Goodwill'

Secretary, Health and Family Welfare, and Chairman, Nagaland SACS, Principal Director, senior officers from health department, members of RRCs, students, army personnel, medical technicians and NGOs.

Each of the dignitaries emphasised the need for more people to step forward to donate blood and view the act as a “precious gift of love and compassion since it was life saving in nature.” A painting competition was organised on the theme “Paint the world red; more blood, more life” for college students. The function was followed by voluntary blood donation where government officials, civil societies, students and armed forces personnel turned up in large numbers to donate blood.

A special function was also held at the Blood Bank in Mokokchung district blood where an announcement was made of forming a District Voluntary Blood Donor Association which would aim to promote voluntary blood donation and motivate and recruit voluntary blood donors. Its members would be drawn from schools, colleges and youth departments of church organisations.

Haryana's Blood Donors Lauded for Yeoman Service

World Blood Donor Day in the state of Haryana was a special occasion for its large number of voluntary donors who are committed to the cause and can be relied upon

in the event of any emergency. Appreciating the selflessness of the act, June 14, 2011 was treated as a ‘Thanks Giving Day’. Regular donors from different hospitals, NGOs, camps and Red Ribbon Clubs (RRCs) were invited at a state function held in their honour at the Rohtak Medical College.

Prior to that, as many as 20 VBD camps were held and 1,209 blood units collected. Media promotion and active engagement of RRC members with students and community members helped in ensuring that each camp was well attended. Also, those who did not give blood, still went back with enough information on blood donation and HIV/AIDS.

A district level function was held in Yamunanagar by District Red Cross where a small memorial service was held to pay tribute to the late KP.P. Sashi who was lauded as a star donor, having given blood 111 times. 258 donors/organisers/motivators were honoured by the Deputy Commissioner, Yamunanagar. Senior officials donated blood in the camp. About 635 blood units were collected by ESI blood bank of Yamunanagar and Blood Bank of PGIMER, Chandigarh.

Multiple Agencies Come Together in Assam

On the June 14 Assam SACS along with the State Blood Transfusion Council observed World Blood Donor Day in 27



State function held on the occasion of World Blood Donor day at the Rohtak Medical College.

districts. Additionally, Government Blood Banks and Office of the Joint Director of Health Services and CHC observed the day with the help of government departments, colleges, IRC, NYK, NSS, NCC, blood donor/women organisations, sports clubs and students associations.

A state level function was held at the Borooah Cancer Institute which was attended by more than 41 donor organisations.

Madhya Pradesh Uses Social Networking/Internet to Promote VBD

The reach of the Internet, especially amongst the youth was recognised by MPSACS who decided to commemorate VBD in a unique manner. At a well attended function, they launched a special website on Voluntary Blood Donation (HORA- idemo.mp.nic.in) at the District Hospital, Seoni on June 14. The District Collector did the honours and while speaking on the occasion said that they had already received positive feedback on the initiative which would be made more interactive in the months to come. Additionally, a Facebook account was opened to allow young people to speak of their experiences on blood donation. Going by the name of "BloodSafety MPSACS", it hopes to alleviate misconceptions that still surround the act of blood donation and bring young people into the blood donation community as regular repeat donors.

Elsewhere in the state, IEC activities were carried out, and blood camps held in hospitals and in the private and public sectors.

Strong Political Will Reflected in Rajasthan

Rajasthan State Legislative Assembly jointly with Rajasthan SACS and UNICEF organised a seminar on 'Status of HIV/AIDS in Rajasthan' on the eve of the opening of the Rajasthan Legislators' Forum on HIV/AIDS on June 6, 2011. A set of carefully thought out messages was finalised with the objective of catching the attention of people and informing them on the dos and don'ts of VBD. They were also gently guided on availing services related to STI, voluntary counselling and testing for HIV, PPTCT and ART. The messages were disseminated and communicated through colourfully designed wall panels, standees and vinyl posters and flex banners.

A parallel exhibition was also organised and inaugurated by the Chief Minister, Ashok Gehlot who along with Oscar Fernandez, Member of Parliament and President of Forum of Parliamentarians on HIV/AIDS, health minister, mayor and other dignitaries spoke on the occasion and participated in a



State level function held at Borooah Cancer Institute.

Signature Campaign devoted to the theme of VBD. The Chief Minister informed the gathering that PLHIV would no longer need to travel to states like Gujarat for second line treatment since they would soon avail of it in Rajasthan itself.

Mobile Blood Units Run through Tamil Nadu

Tamil Nadu SACS, Tamil Nadu State Blood Transfusion Council and Chennai Corporation AIDS Prevention and Control Society jointly observed the World Blood Donor Day in all districts of Tamil Nadu in cooperation with the District AIDS Prevention & Control Unit, District Health Administration, Government Blood Bank and Red Ribbon Club.

Dr. V. S. Vijay, Health Minister inaugurated a voluntary blood donation promotional campaign which entailed the holding of numerous blood donation camps and signature campaigns across the state and the flagging off of two mobile blood unit collection vans in the northern and southern parts of the state.

The mobile blood unit (Bus-1) undertook a well routed journey in 16 northern districts, collecting 234 blood units in Chennai; 51 units in Tiruvellore; 59 units in Kanchipuram; 59 units in Vellore; 120 units in Krishnagiri; 109 units in Dhramapuri; and 167 units in Salem in the week following June 14, 2011 before returning to Chennai on June 2.

Another mobile blood unit (Bus-2) was sent to the southern districts, collecting 85 units in Madurai; 68 units in Sivagangai; 62 units in Ramnathapuram; 65 units in Tutucorin; 54 units in Tirunelveli; 101 units in Kanyakumari; and 175 units in Virdhu Nagar.

■ Vinita Srivastava
Programme Officer (VBD), NACO
And With inputs from the States



115 Countries Pray For Those Who Died of AIDS

The International AIDS Candlelight Memorial Day has come to acquire great significance in the lives of those left behind, mourning for their dear ones, giving them strength and comfort in the knowledge that there are those who care deeply for them.

Candlelight Memorial Day observed in Nagaland by lighting the candle for the deceased.

The 28th International AIDS Candlelight Memorial gave strength and succour to survivors and families, observing the theme of “touching lives.”

In a unique effort to pay tribute to those who had lost their lives to AIDS, thousands of family members, friends and well wishers across the world observed a special Candlelight Memorial service, praying for the departed by lighting candles and offering prayers. The International AIDS Candlelight Memorial Day has come to acquire great significance in the lives of those left behind, mourning for their dear ones, giving them strength and comfort in the knowledge that there are those who care deeply for them.

The International AIDS Candlelight Memorial was launched by the Global Health Council and is today regarded as one of the oldest and largest grassroots mobilisation campaigns for HIV and AIDS awareness. It started in 1983 when the cause of AIDS was unknown and only a few thousand AIDS deaths were recorded.

Over the years, the Candlelight service has become more than just a memorial. It provides opportunity for leadership



The Dimapur Network of People Living with HIV/AIDS (DNP+) has been holding the memorial service every year to show support for those living with HIV and AIDS and to raise community awareness so that the stigma related to the disease is reduced.

Manipur is one of the highest HIV prevalence states in India. At a solemn function organised by MNP+, MACS (Targetted Intervention and Blood Safety) Deputy Director Dr Tomcha Khuman, Lifeline Foundation Chief Functionary Bikram Nepram, MNP+ Treasurer L Deven spoke to families and presented gifts. Select PLHIV and survivors stepped forward to share their thoughts on how they had coped with their loss.

On the occasion, MNP+ informed the gathering that globally, barely six million people were getting treatment out of a total of 33 million HIV infected people in the world. In Manipur, 38,016 people had been identified as HIV-infected as of January 2011.

At another function in Nagaland, the gathering was apprised of data provided by DAPCU. The figure of HIV positive detection since 2008 till date stands at 2357, of which 205 are from antenatal centres. During the period January-April, 2011, as many as 277 positive cases were detected, with 24 cases being alerted from ANCs. On an average, 69 new positive cases were coming to light every month, which was a disturbing trend.

Dimapur being the epicenter of HIV detection in the state, was hoping for advanced treatment to be made available as also step up awareness amongst youth, so that the spread of new infections could be arrested. Events such as the Memorial service served as a stark reminder for the community and government at large to ensure care and support for survivors and more importantly to strive towards having zero new infections.

The memorial was a reassuring moment which in its own gentle and unobtrusive way told the world that it had kept its promise in delivering treatment and life to PLHIV with many countries offering advanced treatment and hope to those who were infected.

The movement is gradually gaining ground with a large cross section of society, especially those who are neither infected nor affected by HIV/AIDS joining in. This is a major breakthrough given the nature of the disease and the level of stigma and discrimination that has been associated with it.

development, policy advocacy, partnerships and improvement of community mobilisation skills. It serves as an important intervention for global solidarity, breaking down barriers, and giving hope to new generations.

India's Northeastern States Lend Dignity to a Solemn Event

Different countries observe the day in their own special way. In India, the Northeastern states actively observe it with churches and public venues being specially decorated, accommodating large groups of people who are joined by a single emotion: empathy and love for their close ones.

■ Madhu Gurung,
Media Advisor, NACO

Nation-wide Folk Media Workshops Held to Standardise Messages



Chaiti Ghoda performed by the folk artists from Orissa.

As a follow-up to the first workshop held in November, 2010, NACO organised its second national workshop in Delhi, in partnership with FHI and APAC-VHS

NACO has for long been supporting folk media in rural areas through State AIDS Control Society (SACS), NGOs and CBOs, recognising its potential in educating rural audiences and motivating them to adopt health seeking behaviour. Going forward, NACO realised that communication could be more effective if there was greater uniformity and standardisation of messages, beamed through different folk media products.

Towards this end, NACO organised two national level workshops in Delhi, involving the concerned states in a series of discussions, interactive exercises and mutual learning sessions. Resource persons and folk troupes developed scripts incorporating correct messages while simultaneously practicing these scripts under the guidance of NACO. The first workshop with support from APAC-VHS was conducted in November 2010, in which Rajasthan, Bihar, Jharkhand, Haryana, Tamil Nadu, Andhra Pradesh, Karnataka and Kerala participated. At the end of the

workshop, it was decided to follow-up the maiden initiative by holding more advanced residential trainings that could further refine the script development process.

Second Round of Training

Enriched by the learning of the first workshop and to take the learning curve of the participants forward, the second workshop was organised from January 17 - 21, 2011 in partnership with FHI India and APACVHS, at the National Institute of Health and Family Welfare with active participation of Chhattisgarh, Gujarat, Himachal Pradesh, Madhya Pradesh, Maharashtra, Orissa, Uttar Pradesh and Uttarakhand.

States were divided into three groups:

- Group 1: Madhya Pradesh, Chhattisgarh and Orissa
- Group 2: Uttar Pradesh, Uttarakhand and Himachal Pradesh
- Group 3: Maharashtra and Gujarat

Each group was given specific themes and asked to standardise messages for effective transmission; decide the role of IEC officers from SACS and resource persons; undertake the roll-out plan for states; and decide upon the budget.

The workshop aimed to help develop three scripts for each folk format along with primary and secondary themes which were allotted to each state. Among the seven selected themes, three were for primary focus on Condom and STI, Migrants, and Youth and Vulnerability; four were for secondary focus on Stigma & Discrimination, Blood Safety, PPTCT and Counselling & Testing.

In all, 63 scripts focusing on safe sex, migrants and youth were to be developed in 17 folk styles. A total of 120 participants were briefed by NACO officials.

Ms. Aradhana Johri, Additional Secretary complimented the states on putting forth their best forms of folk media for promotion of messages of HIV using different folk forms.



Ms. Aradhana Johari felicitating the participants in the workshop.

Learnings

- More time to be allocated to resource persons, master trainers and folk artistes to produce better quality work
- Role of lyricists in song-based folk forms like qawwali found to be crucial in the script development process and something that had to be catered for
- Representatives from SACS to have IEC background to provide necessary facilitation support to script development
- Along with men, women too needed to be part of every folk form
- Peer review to be encouraged as a good way of gathering comments and suggestions

A short performance by Ishara Puppet Theatre highlighted the modes of transmission and prevention of HIV. The play was well received since it maintained the right balance between entertainment and messaging, thus providing valuable inputs for effective communication to resource persons and artistes. Troupes from states were asked to stage trial performances, which were vetted and based on the feedback and scripts that had been accordingly revised. On the final day, 54 scripts on primary and secondary themes were developed in 15 folk styles.

Mr. Sayan Chatterjee, Secretary and DG NACO urged participants to discharge their responsibilities towards making the effort undertaken by NACO a success.

Way Ahead

The states have been asked to carry forward the outcome of the workshop by evolving roll-out plans based on what has been suggested by NACO. SACS have been asked to ensure quality performances based on vetted scripts by cultural troupes and teams that represented the different regions and districts. It was also suggested to have proper monitoring by state level teams to ensure that the right kind of folk media programmes reached the right target groups, and to assess the impact. The initiative is aimed at using the high impact quality of India's rich and vibrant folk forms to advantage, but in a manner that is standardised, tested and responsible, given the sensitive nature of the disease they would be communicating about through many creative and artistic formats.

■ Sanchali Roy
Consultant (IEC)
NACO



Street play performed by the folk artist in Karnataka

States Roll out Folk Campaign

After the series of 3 national workshops covering 22 states, 20 states have successfully conducted state level workshops involving the popular folk forms.

The national workshops in three phases (November-17-20, 2010; January 17-20, 2011 and April 5-8, 2011) succeeded in developing state resources to strengthen the folk art-based communication in HIV and AIDS for 22 states. A total number of 166 scripts were developed on seven thematic areas of HIV/AIDS messages in regional languages. These scripts were vetted by NACO for use in the states.

State level workshops were conducted in 20 states and troupes registered with song and drama division and state government departments participated. Training of folk troupes and preparation of roll out plan was the focus of the workshop.

Roll out of the campaign commenced in 13 states in Phase-I where 8500 performances were planned to reach out the rural areas. The states which have started the roll out of

campaigns in the month of May 2011 were: Andhra Pradesh, Karnataka, Chhattisgarh, Rajasthan, Kerala, Maharashtra, Jharkhand, Uttar Pradesh and Madhya Pradesh while Bihar, Uttarakhand, Himachal Pradesh and Sikkim started the roll out in June 2011.

North –East Joins the Campaign

Among the North-East states, Assam, Manipur and Sikkim conducted the state level workshops. Sikkim spearheaded the roll out of campaign. Special mention can be made of Sikkim for extending the campaign to tribal dominated northern part of the state for the first time.

Sikkim held its state level training workshop from June 7 to 10, 2011 at Gangtok. Ms. Sanchali Roy, Consultant (IEC), NACO, was the main facilitator who was supported by Sh. R. D. Lepcha, well known theatre expert, and Ms.

Folk Campaign at a glance:

| | States participated in the National Workshop | Total Number | State level workshop done | Roll Out Campaigns started in the states | Roll out awaited in the states |
|---------------------|--|--------------|---------------------------|--|-------------------------------------|
| Phase- 1 | Rajasthan, Bihar, Jharkhand, Haryana, Tamil Nadu, Andhra Pradesh, Karnataka, Kerala | 8 | 8 | 6 | Tamil Nadu, Haryana |
| Phase- 2 | Uttar Pradesh, Himachal, Uttrakhand, Gujarat, Odisha, Maharashtra, Chhatisgarh, Madhya Pradesh | 8 | 7 | 6 | Gujarat, Odisha |
| Phase- 3 | Punjab, West Bengal, Manipur, Sikkim, Tripura, Assam | 6 | 5 | 1 | Assam, Tripura, Manipur West Bengal |
| Total States | | 22 | 20 | 13 | |

Gaitry Rai and Sh. Nordon Lepcha, both folk experts from state culture department as resource persons. Participants came from all four districts of Sikkim along with nine folk troupes.

Assam - Project Director, Assam SACS took immense initiatives to make the state workshop at Guwahati a big success. The workshop was conducted from May 24 to 27, 2011 under the supervision of Dr. Sanjib K. Chakravarty, Consultant (IEC), NACO and other state officials. Eminent artists from theatre and film were the master trainers in the workshop.

Manipur - State level workshop in Manipur was conducted in Imphal from May 26 to 29, 2011. Sh. Mohnish Kumar

from NACO conducted the workshop as a lead facilitator along with other SACS officials.

A rigorous monitoring has been an important component of the campaign. The District Support Team (DST) constituted for the campaign has been entrusted with the responsibility to monitor the performances on a regular basis. NACO and SACS officials also monitored the performances to provide need based guidance on effective message delivery and performance components.

■ Sanchali Roy
Consultant (IEC), NACO
With inputs from the States



Folk artist perform in the state level training of folk media workshop in Sikkim

Mainstreaming HIV in Insurance

NACO to constitute working group to develop roadmap for providing insurance to PLHIV



Dignitaries in the International Conference on Mainstreaming HIV & AIDS Role of Insurance Sector in India.

To ensure uniform insurance coverage to individuals infected and affected by HIV has been an ongoing endeavour of NACO. So far, barriers to mainstreaming HIV in insurance in India have been lack of sensitivity of insurance sector; limited insurance literacy among PLHIV; stigma and discrimination; and absence of regulatory mandate.

Against this backdrop, an international conference was held on “Mainstreaming HIV and AIDS: Role of Insurance in India” in New Delhi on 3-4 February, 2011 by NACO in association with United States Agency for International Development (USAID) through Project Connect of Population Services International (PSI) and Health Systems 20/20.

The conference demanded market potential for including HIV as an insurable risk while facilitating development of a roadmap, bringing PLHIV within the ambit of insurance cover. It drew lessons from countries which had higher HIV prevalence rates: South Africa (17.8), Namibia (13.1), Uganda (6.5), Guyana (1.2), and United States (0.6) and had mainstreamed HIV/AIDS through Commercial Health Insurance Cover.

The conference was inaugurated by Dr. Syeda Saiyidain Hameed, Member, Planning Commission and was attended by Prof. Kaushik Basu, Chief Economic Advisor, J Hari Narayan IAS (Retd), Chairman, Insurance Regulatory and Development Authority, Sayan Chatterjee, Secretary and Director General, NACO, Aradhana Johri, Additional Secretary, NACO, Erin Soto, Mission Director, USAID, India, Dana Ward, Managing Director, PSI India and P. Kousalya, President, Positive Women’s Network.

More than 200 delegates from South Africa, USA and France, representatives from Indian Insurance Regulatory, Planning Commission, MoHFW, insurance councils/companies, UN agencies, partners, NGOs, PLHIV networks, academia and media took part in the conference.

Covering all aspects of insurance

Discussions were held on “Mainstreaming HIV in Insurance: Global Best Practices and Lessons for India”, “Insurance Solutions for PLHIV: Experience from India” and “Social Health Insurance Schemes”. Dr. Gangakhedkar from NARI and Dr. Rewari from NACO presented empirical evidence on insurability of PLHIV. Global best practices of regulatory frameworks in mainstreaming HIV vis-à-vis existing structures in India found an interested audience.

Need for a more inclusive insurance scenario

The conference helped create consensus on making the insurance sector more inclusive for PLHIV. NACO committed itself to following-up issues that emerged from the conference, constituting a working group comprising representatives from NACO, Insurance Regulator, PLHIV representatives and insurance experts who would work together on next steps.

■ Madhu Sharma
PO Mainstreaming
NACO-UNDP Mainstreaming Cell

National Harm Reduction Consultation

Dissemination of Situational Analysis of Harm Reduction intervention supported by NACO



From right to left: Ms Cristina Albertin, UNODC-ROSA, Prof. Rajat Ray, NDDTC, AIIMS, Mr O P Dogra, Ministry of Social Justice and Empowerment, Mr Ashok Alexander, AVAHAN, Mr Luke Samson, Indian Harm Reduction Network, Dr M Suresh Kumar, Consultant (Drugs and HIV), Chennai

Harm Reduction has been acknowledged as an effective strategy to provide HIV prevention services to Injecting Drug Users (IDUs) through a network of NGO-run targeted interventions (TIs). NACO, during NACP-III, scaled up TIs for IDUs based on evidence that showed IDU patterns emerging outside of North Eastern region in North and Central India. The number of such interventions increased from 90 by the end of NACP II (2007) to 261 (March 2011), covering approximately 1.42 lakh IDUs (80% of estimated 177,000 IDUs).

These IDU-TIs provide needle syringe exchange, OST, referrals to services (ICTC, ART, DOTS, etc.), condoms, counselling and IEC by engaging the community through a peer-led approach. In NACP III, NACO introduced Opioid Substitution Therapy. Presently, 57 OST centres across 15 states provide treatment to nearly 5000 IDUs.

To collate authentic data on quality of interventions, NACO commissioned an independent situation paper in association with DFID, focusing on current status of Needle-Syringe Programme, Opioid Substitution Treatment and services for female IDUs and partners/spouses of male IDUs. The nationwide study was the first scientific documentation of India's experience in implementing a harm reduction programme review that analysed data collected from multiple sources.

Key Recommendations

- Increase in IDU coverage through comprehensive package of interventions by community-based programmes (TIs)



Ms Aradhna Johri, Additional Secretary, NACO making opening remarks at the workshop.

- Improve quality of services delivered, and enhance utilisation by services by IDUs and their partners
- Need to improved linkage between other services

National Consultation on Harm Reduction

To disseminate findings of the review, NACO with support from DFID and development partners, organised a National Consultation on Harm Reduction on May 27, 2011 in New Delhi. Policy and strategy recommendations for India's response to IDU were discussed by scientists, academicians, civil society representatives and senior government officials from Ministry of Social Justice and Empowerment, Drug De-addiction Programme, Ministry of Health and Narcotics Control Bureau.

■ Dr Alok Agrawal, MD
Programme Officer (IDU/OST)
NACO

Upgrading Link ART Centre to Link ART Centre Plus Scheme

NACO introduces LAC Plus in 100 centres in an effort to decentralise ART services that are closer to PLHIV

Treatment adherence has been a challenge, especially in hard to reach areas. NACO, with partners and SACS adopted numerous measures to ensure people in need of ART are provided drugs regularly, their visits to ART centres are less inconvenient, long travel and cost factors are reduced and there are NGOs to handhold patients and facilitate their pre and post ART needs.

To make treatment services more accessible, Link ART Centers (LAC) were set up within ICTCs in district/sub-district hospitals and community health centres, closer to patient's residence. These were linked to Nodal ART centres. Main functions of LAC included monitoring of patients on ART, drug distribution, treatment of minor opportunistic infections, identification and management of side-effects and reinforcement of adherence on every visit.

Presently there are more than 600 functional LACs in the country. A mid-term assessment of the LAC scheme revealed an increase in patient satisfaction post LAC roll-out. It decreased the cost and time spent on travel to access ART. Nearly 40% people detected HIV positive at ICTC are not linked to care, support and treatment services (CST) since many are asymptomatic at time of detection and long distance travel to ART centres is a deterrent. About 20% patients reach ART centres at an advanced stage (CD4 count <50) when risk of mortality is nearly three times higher

To address these issues, scope and functions of Link ART centres were revised through LAC Plus (centres where more than 70 PLHIV are on ART) in 100 centres in year 1, to be upscaled in a need-based manner.

Services under LAC Plus include enrolment of PLHIV into HIV care and treatment (pre-ART care); pre-ART management (basic investigations and sample collection for CD4 count); follow-up of pre-ART patients not eligible for ART; referral of eligible patients to nodal ART centre for ART initiation; screening of HIV-TB co-infection; monitoring of PLHIV on ART; ARV drug distribution; treatment of minor OIs; identification of side effects; counselling on adherence, nutritional and positive prevention; tracing of Lost to Follow Up and Missed patients.

Currently ART Plus are being set up at following sites.

- ART Centre, GMCH, Aurangabad, Maharashtra
- ART Centre, GMCH, Nagpur, Maharashtra
- ART Centre, Sasoon Hospital & B J Medical College, Pune, Maharashtra
- ART Centre, GMCH, Surat, Gujarat
- ART Centre, GMCH, Salem, Tamilnadu
- ART Centre, KIMS, Hubli, Karnataka
- ART Centre, GGH, Vijayawada, Andhra Pradesh
- ART Centre, GMCH, Thrissur, Kerala

ART Plus Scheme

Second Line ART was rolled out in the country at 2 Centres of Excellence (COE) in January 2008. Later it was expanded to 10 centres in January 2009. as patients had to travel long distance to access the second line treatment. This resulted in low uptake of Second Line Treatment adding to inconvenience and difficulties to patients. In view of these, it was decided to expand the number of centres that can provide Second Line ART. For this, it is planned to upgrade some good functioning ART centres with geographical considerations and label them as 'ART Plus'.

The criteria for the selection of ART Plus is based on linkage to Lab for Viral Load testing. The availability of trained manpower in the institution. The geographical distribution of patients on Second Line ART. The accessibility and connectivity of the center. In addition, ART Plus Centres have been sanctioned at 13 more ART Centres and shall be further expanded in a need based manner so as to provide at least 1 ART Plus in each state and 4 ART Plus in high prevalence states of Karnataka, Maharashtra, TamilNadu & AP

Clinical Expert panels are being developed at all these sites for management of complicated cases/cases with treatment failure

Second Line ART, Alternate First Line & PI based regimen for Nevirapine exposed children are available at ART Plus Centres.

■ Dr. Reshu Agarwal
Program Officer CST
NACO

50% reduction in new infections over the last decade reflect the likely impact of prevention interventions



Recent HIV estimations show that the annual new HIV infections in India have declined by more than 50% during the last decade. India continues to be a low prevalence country (Adult HIV Prevalence – 0.31%) with an estimated 23.9 lakh persons living with HIV.

HIV epidemic in India is concentrated in nature with high HIV prevalence among high risk groups – Female Sex Workers (FSW), Men who have sex with men (MSM) and Injecting Drug Users (IDUs). Compared to this the prevalence among general population is much lower. Therefore, prevention through focused interventions amongst High Risk Groups and General Population is the main strategy under National AIDS Control Programme (NACP) Phase-III, along with Care, Support & Treatment for persons living with HIV/AIDS.

In order to provide HIV prevention services to High Risk Groups, Targeted Intervention projects have been scaled

NACO's Second Annual Report Presents Overall HIV Picture

The 121 page report for FY 2010-11 is a well fleshed out document presenting details of all activities with latest data, corroborating the strides made in combating HIV

up over the years to 1,447 projects, as on 31 Mar 2011, covering overall 31.32 lakh population including 81% Female Sex Workers, 76% Injecting Drug Users, 69% Men having sex with Men, 32% Migrants and 33% Truckers.

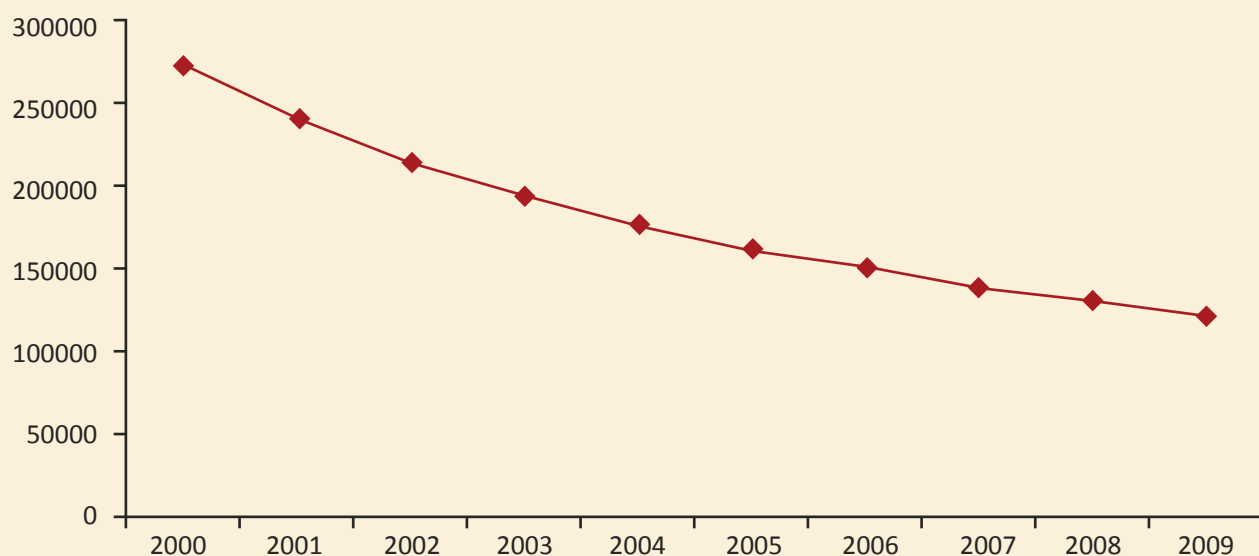
Link Workers Scheme is a community based intervention that addresses HIV prevention and care needs of the high risk and vulnerable groups in rural areas by providing information on HIV, condom promotion and distribution and referrals to counseling, testing and STI services. The scheme has been expanded to 230 districts across 20 states during 2010-11.

Access to safe blood has been ensured through a network of 1,127 blood banks, including 155 Blood Component Separation Units, 795 district level blood banks and 28 Model Blood Banks, besides 685 blood storage centres. Collection of blood units through voluntary blood donation has increased from 62% in 2008-09 to 79.5% in 2010-11. During 2010-11, 54,271 Voluntary Blood Donation camps were conducted and overall 79.2 lakh blood units were collected.

NACO has branded the STI/RTI services as “Suraksha Clinic” and has developed a communication strategy for generating demand for these services. STI/RTI services based on the Enhanced Syndromic Case Management are currently being provided through 1,033 designated STI/RTI clinics, including 90 new clinics established during 2010-11. Around 4,036 private preferred providers were identified for providing STI services to high risk population. Overall, 100.8 lakh STI episodes were treated during last year, till March 2011.

In phase III of the Condom Social Marketing Programme, launched on 1 July, 2010, condom promotion has been

**Estimated Number of New Annual HIV Infections
50% reduction in new infections**



scaled up in 370 high priority districts across 26 states/UTs, covering 77% of the country's adult population, through 8 Social Marketing Organisations. Under this programme, condom distribution has increased from 11 crores in 2008-09 to 24.5 crores in 2009-10 and 36 crores in 2010-11 and the number of condom stocking outlets has increased from 2.4 lakh in 2008-09 through 5.76 lakh in 2009-10 and 6.55 lakh outlets in 2010-11.

Intensive multi-media Information Education & Communication (IEC) campaigns have been launched to take the HIV prevention messages to the general population through spots and long format programmes on TV & Radio, folk performances and Red Ribbon Express, as well as through inter-personal communication. A total 39,488 folk performances were organized that reached approximately 31,59,040 people.

Red Ribbon Express (RRE), the special exhibition train on HIV/ AIDS and other health issues, is the world's largest mass mobilization drive on HIV and AIDS. Apart from three exhibition coaches on HIV and AIDS, a new exhibition coach on NRHM providing information on common diseases has been added. The Red Ribbon Express phase II completed one year journey on 1st December, 2010 after traversing 25,000 kms covering 152 stations in 22 states. It disseminated messages on HIV prevention, treatment, care and support. Outreach programmes and activities were also held in the villages through IEC exhibition vans and folk troupes. During RRE-II, around 80 lakh people were reached through the train and outreach activities; 81,000 district resource persons

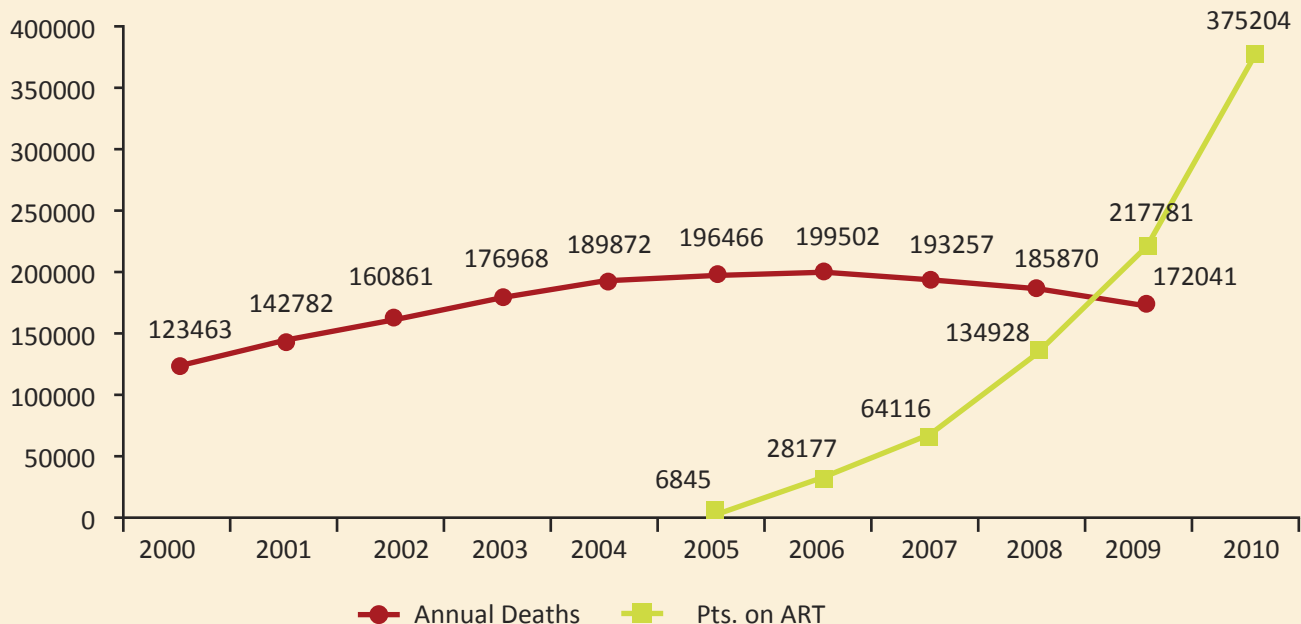
were trained, 36,000 people got themselves tested for HIV and 28,000 people received general health check-up services. Impact assessment of RRE indicates that the comprehensive knowledge of routes of HIV transmission, methods of prevention, condom use, STI prevention and treatment and other services such as ICTC, PPTCT and ART was significantly higher among respondents exposed to the RRE project as compared to those not exposed.

As part of the initiatives to mainstream HIV/AIDS response, about 6.5 lakh front line workers and personnel from various Government Departments, Civil Society Organisations and corporate sector were trained during 2010-11. Over 1,300 companies have adopted work place policies on HIV/AIDS.

Persons provided counseling and testing services has increased from 65 lakh in 2007-08 to 162 lakh in 2010-11, more than doubled in the last four years. Access to these services was facilitated through 5,246 Integrated Counseling and Testing Centres (ICTC) apart from 2,221 ICTCs at 24x7 PHCs and 789 ICTCs under Public Private Partnership model, as on 31 Mar 2011.

As of March 2011, nearly 12.5 lakh persons living with HIV/AIDS have registered and 4.07 lakh clinically eligible patients, including 23,854 children, are currently receiving free Anti Retroviral Treatment (ART) at 300 ART centres and 580 Link ART Centres. The targets of NACP-III for providing access to free ART have already been exceeded and wider access to ART has resulted in a decline in the estimated

Wider access to ART led to decline in estimated annual AIDS related deaths in India



Source: HIV Estimations, 2008-09

number of people dying due to AIDS related causes.

During 2010-11, NACO conducted the 12th round of HIV Sentinel Surveillance (HSS) at 1,361 sites, in which, around 4.4 lakh samples are collected. The HIV estimates were developed through improved methodology and updated epidemiological data using Estimation Projection Package and Spectrum Package. Strategic Information Management System (SIMS), a web-based integrated data management system, was launched in August 2010 and roll out is in progress.

New Initiatives

Universal access of second line ART: The Second Line ART introduced in 2008 has been expanded to 10 centres in 2009. Currently, 1,929 patients are receiving free Second Line ART. It has now been decided to make second line ART available to all those in need of it in a phased manner.

Earlier, diagnosis of HIV was possible only beyond 18 months of age, which hindered timely diagnosis and treatment for infected children. With the launch of National Early Infant Diagnosis programme, it has now become possible to closely monitor HIV-exposed infants and children under 18 months of age, identify their HIV status and provide appropriate treatment to reduce HIV-related mortality and morbidity. 11,434 infants and children under 18 months of age were tested under this programme through 766 ICTCs and 181 ART centres till Mar 2011.

Recent evidence has shown that migration from rural areas to high HIV prevalence destinations is contributing to the rising trends of HIV observed in some of the low prevalence

districts. In order to address the vulnerabilities due to single male migration, the Migrant Intervention Strategy has been revised to provide HIV prevention services to migrants, by linking them with services and information on HIV prevention, care and support at source (at their villages), at transit (places like rail or bus stations where large number of migrants board train or bus to travel to their places of work) and at destination (the places of work). 122 districts with high outmigration (based on Census 2001) across 11 States have been identified, which are on priority for starting up community level migrant interventions. Transit interventions have started at 47 locations across 8 states covering migrants at railway stations and bus stops where inter-state migration occurs.

New initiatives under Blood Safety programme include setting up of four Metro Blood Banks as Centres of Excellence in Transfusion Medicine with capacity to process more than 100,000 units of blood each annually in New Delhi, Mumbai, Kolkata and Chennai, and a Plasma Fractionation Centre with a processing capacity of more than 1,50,000 litres of plasma, which can fulfill the country's demand. State Governments of Delhi, Maharashtra, Tamil Nadu and West Bengal have identified land for the construction of these centres. Design DPR Consultants for these sites have been identified to initiate work. Lay-out plans and detailed Project report have been received for all four sites, and equipment requirement has been planned.

■ Dr. Yujwal Raj
Programme Officer, Surveillance
NACO

Goa Celebrates National Youth Day

Long years of working with the youth on ground, Goa SACS believe that the best way to reach out to them with messages of safe sexual behaviour is through constant reminders and affirmations

In an attempt to sustain the momentum of youth engagement with their ongoing activities, Goa SACS regularly coincides its events with observance of national days, college festivals and other youth-centric programmes. One such well attended occasion was the recent National Youth Day on January 12, 2011 which the Saraswat Vidyalaya's Sridora Caculo College of Commerce & Management Studies held in association with SACS. To mark the day, a new Red Ribbon Club was inaugurated.

Dignitaries present were Shri Dilip Betkekar a renowned retired teacher, Chief Guest, Dr. Pradeep Padwal, Project Director, Goa SACS, Dr. Santosh B. Patkar, Principal of Saraswat Vidyalaya's Sridora Caculo College, Umakant Sawant, DD (IEC), Goa SACS, Jeunesse D. Fernandes,

Consultant, Youth Affairs, Yogesh Bhosle and Reshma Verlekar, NSS Programme Officers.

Dr. Pradeep Padwal in his presentation spoke of how young blood donors could play a positive role in the HIV movement and be harbingers of hope and succour. He urged young people to shed being passive observers and instead adopt the role of active change makers, who through passion, grit and determination not only led exemplary lives but also motivated their friends and social groups to demonstrate responsible behaviour in all aspects of their lives, including adhering to safe sexual behaviour.

■ Umakant Sawant
Deputy Director(IEC), GOA, SACS

Kerala Launches Legal Aid Clinic and Mobile Blood Unit

The progressive state scores an ace in combating HIV with a strong legal facility; it also launches an unusual 'Blood Mobile' concept.



Dignitaries on the launch of Legal Aid Clinic in Kerala.

Kerala got its first Legal Aid Clinic on 3 March, 2011. Inaugurated by Kerala's Chief Justice of High Court, Shri Jasti Chelameswar, others present on the occasion included Dr. K. Shylaja, Project Director, Kerala SACS, Dr. T. V. Velayudhan, Addl Project Director, Kerala SACS, Dr. M. Prasanna Kumar, Team Leader, TSU and other legal

luminaries who discussed different aspects of HIV along with legal implications which surrounded the infection.

Kerala which is bordered by high prevalence states and heavy in and out migration has an estimated 40,060 PLHIV who need to be well informed. Under the care and support programme of NACP-III, NACO asked states to set up Legal Aid Clinics to provide free legal services to PLHIV and their families. KSACS in cooperation with KELSA initiated a series of workshops with advocates suggested by KELSA. Draft guidelines have been developed for establishing these clinics in 14 districts. A two-day consultative workshop was held, covering all legal services and potential legal aid services that PLHIV need and which the state currently provides.

■ Reshmi Madhavan
Assistant Director (Doc. and Publicity)
Kerala SACS

Strong Political Will Reflected in Rajasthan

The desert state will now have an even more HIV-sensitive environment, with all its MLAs being part of the Legislators' Forum



Lamp lighting ceremony to inaugurate the seminar.

The Rajasthan State Legislative Assembly jointly with Rajasthan SACS and UNICEF organised a seminar on 'Status of HIV/AIDS in Rajasthan' on the eve of the opening of the Rajasthan Legislators' Forum on HIV/AIDS on June 6, 2011. A set of carefully thought out messages were finalised with the objective of catching the attention of people and informing them on the do's and don'ts of VBD.

Through the messages, they were gently guided on availing services related to STI, voluntary counselling and testing for HIV, PPTCT and ART. The messages were disseminated and communicated with the help of colourfully designed wall panels, standees and vinyl posters and flex banners. One of the key messages that could be seen at multiple locations was, "To fight against HIV/AIDS, the commitment, understanding and participation of each individual, group and community is imperative. Institutionally, tremendous



Dignitaries visiting the exhibition stall.

efforts are being made to halt and reverse the HIV/AIDS epidemic. Come forward and be a part of this national effort."

On the occasion, a parallel exhibition was organised and inaugurated by the Chief Minister, Ashok Gehlot who along with Oscar Fernandes, Member of Parliament and President of Forum of Parliamentarians on HIV/AIDS, health minister, mayor and other dignitaries spoke on the occasion and participated in a Signature Campaign devoted to the theme of VBD. The campaign had a powerfully worded slogan that said, "with all our might, we will fight HIV/AIDS for the war against AIDS."

The Chief Minister informed the gathering that PLHIV would no longer need to travel to states like Gujarat for second line treatment since they would soon avail of it in Rajasthan itself. Meanwhile, what was unique about the forum was that irrespective of party affiliation, it brought together all the Members of the State Legislative Assembly and with them other elected members in an attempt to frame appropriate laws and policies that could help people infected and affected by HIV to lead better lives.

The forum will also help RSACS in accomplishing the main goal of NACP Phase III, in that reverse the epidemic and stall new infections. The Mukhya Mantri Jeevan Raksha Yojana (the Chief Minister's Life Protection Scheme) has been specially launched for HIV positive patients. It allows PLHIV to avail medicines free of cost. More such schemes are on the anvil, including one on life insurance.

Rajasthan SACS is working with as many as 56 NGOs who are actively engaged with young people, high risk groups and members of the general population to spread awareness, carry out focused targeted interventions, create advocacy around voluntary testing and counselling through its 182 ICTCs and spread messages on safe blood donation via the 45 blood banks that function in the state.

■ Dr. Pradeep Chaudhary
JD (IEC)
Rajasthan SACS

Bringing North-East Multimedia Campaign to a close

The northeastern states of Assam, Sikkim, Mizoram and Meghalaya use music and sports to advantage as they for the second time, conduct the hugely popular Multi-media campaign. The paragraphs below provide a snapshot of the big picture:

Performance by the rock bands in the Red Ribbon Superstar Meghalaya icon

Assam Concludes Multimedia Campaign with Popular Ethnic Festival

Capitalising on local cultural fairs and festivals, messages of HIV disseminated

The Assam State AIDS Control Society, in association with Hamren Subdivision Development Society, a targeted intervention project working in Karbi Anglong district, organised the 37th Karbi Youth Festival, 2011 from 15-19 February, 2011. The festival which is an ethnic annual event of Karbi people saw about 40,000 visitors.

Folk performances, exhibitions displaying village crafts and handlooms, cultural exchange programmes, workshops, contemporary art, photography and videos, sound and architectural installations and other IEC activities created mass advocacy. The concluding day saw Manas Robin, well-known producer, director and singer, giving a stellar performance with choreographed numbers on HIV/AIDS.

The Joon Beel Mela, a community fair was organised by ASACS in Morigaon district from 20-22 January, 2011. A series of IPC trainings were held in Lakimpur, Dhemaji and Sonitpur, Morigaon and Nagaon, Golaghat, Jorhat, Sivasagar, Tinsukia, Dibrugarh, Mangaldai, Kamrup and Kamrup districts. A Convention for religious leaders was held on 19th February with about 85 leaders participating and sharing their thoughts on HIV/AIDS.

All 27 districts of the state were clubbed into 10 districts with each performing at the grand finale on 25th March, 2011 in Guwahati. More than 30 participants crooned to an audience of more than 3,000 people. Prasanta Rajkhowa was crowned Red Ribbon Super Star.

The most heartening outcome was the coming forward of major pressure groups like ASDC Youth Front, KNCA and KSA showing willingness and enthusiasm to participate and carry forward the message of HIV/AIDS.

Picturesque Sikkim Resonates with Notes of Music

Advocacy intensified with participation of NGOs, CBOs, FBOs, celebrities, media and educational institutions

Sikkim SACS initiated "Red Ribbon Sikkim Star" a theme-based performing art competition, as part of the Multi-Media Campaign 2010-11 in the three categories of music, song and drama.

The campaign made its debut during the stakeholders meeting attended by representatives from government departments, NGOs, Nehru Yuvak Kendra, Sikkim University, Sikkim Armed Police, jail officials, FBOs, members of SNP +, AIDS Ambassador Santosh Niras, print and electronic media and SSACS officials. This was followed by a training on IPC for effective implementation of MMC. Advertisements in print, electronic, private FMs and All India Radio generated interest with appeals from personalities such as Indian Football Captain, Arjuna Awardee, Baichung Bhutia and Youth Icon singer, Girish Pradhan screened regularly.

Popularising messages of HIV/AIDS through music, culture and drama, this first-ever competition in the state was initiated from Mangan a district in North Sikkim. Participants from remote and more populous areas, registered for auditions and 45 teams were selected for semi finals (5-6 January 2011) in Gangtok. The grand finale was held on 12th February 2011 in Tadong where Dawa Norbu Takarpa, Hon'ble Minister, Health Care Human Services & Family Welfare Department was Chief Guest.

The finalists put up an impressive show and the dance group 'Kala Kunj Natya Sadan' from Sakyong, West Sikkim, walked away with the title of Red Ribbon Sikkim Star, 2010-11. Dasharthik Sangh from Drama Category from West Sikkim was adjudged 1st runners up and BRSTP dance group from South Sikkim secured 3rd position.

The campaign reached around 10,000 youth with the help of political personalities, bureaucrats, celebrities, village panchayats, civil society and stakeholders.

Mizo Youth Absorb Messages on Safe Sex and Condom Use

216 teams played 209 football matches as part of Red Ribbon Inter Village Football Tournament

Mizoram SACS partnered with Mizoram Football Association, LPS Cable Network, Department of Sports & Youth Services, I&PR Dept, AIR and PIB to hold the Red Ribbon Inter Village Football Tournament, from 12th February to 11th March, 2011.

A State Level Committee was set up under the chairmanship of Lalrinliana Sailo, Hon'ble Minister, Health and Family Welfare, Government of Mizoram with Parliamentary Secretary in-charge of Sports & Youth Services, Director, Sports & Youth Services Dept, Secretary, Health & Family Welfare, Secretary, Sports & Youth Council, Director, Information & Public Relations Dept, Superintendent of Police, Aizawl and others as members.

The focused advocacy and mass mobilisation initiative resulted in visible changes being evidenced on the field, within communities and government offices. The number of participating teams increased from 206 in 2010 to 212 in 2011. Getting permission to play matches with the fully lit AR Ground becoming a popular venue for all age groups.

Highlights of the month-long activities included a match played between Chief Minister's and Speakers Team, showing high level of political participation and support.

Meghalaya Icon Doubles up as HIV Ambassador

A formal contract was signed between MSACS and winner of the competition

Music is a universal language and serves as a powerful leadership and inspirational tool. Meghalaya AIDS Control Society's Red Ribbon Superstar Meghalaya Icon had a unique clause in its contract – winner of the competition to serve as the state's HIV Ambassador and Spokesperson for a year. This branding was seen as an innovative and impactful medium for strengthening information and communication efforts.

Planning for the mega event began in September 2010 with entries from seven districts received from March 2011 onwards. The campaign was launched through the Cable TV news programmes in the Khasi, Jaintia and Garo hills, inviting local music groups to present their best musical compositions.

Popular radio channel, Red FM 93.5 was a partner, undertaking promotional work for over a month. Road shows and poster campaign helped expand coverage. Use of social networking sites like Facebook, ensured young people's involvement as cheer leaders and supporters of HIV.

The state's abundant talent was seen with enrolment of 28 bands, each receiving counselling on HIV/AIDS at the nearest ICTC and DiC, to enable them weave HIV messages in their musical lyrics. Eight finalists were judged on the basis of an interview and music competition that gauged their understanding of HIV.

■ With inputs from the States



Players lined-up in Red Ribbon Inter-village football tournament.

14th June, 2011

World Blood Donor Day

"Celebrating your gift of blood"



Shri Dinesh Trivedi
Hon'ble Minister of State,
Health & Family Welfare



Smt. Sonia Gandhi
Hon'ble Chairperson, UPA



Dr. Manmohan Singh
Hon'ble Prime Minister



Shri Ghulam Nabi Azad
Hon'ble Minister of
Health & Family Welfare



Sh. S. Gandhiselvan
Hon'ble Minister of State,
Health & Family Welfare

Strength does not define who we are,
our compassion does

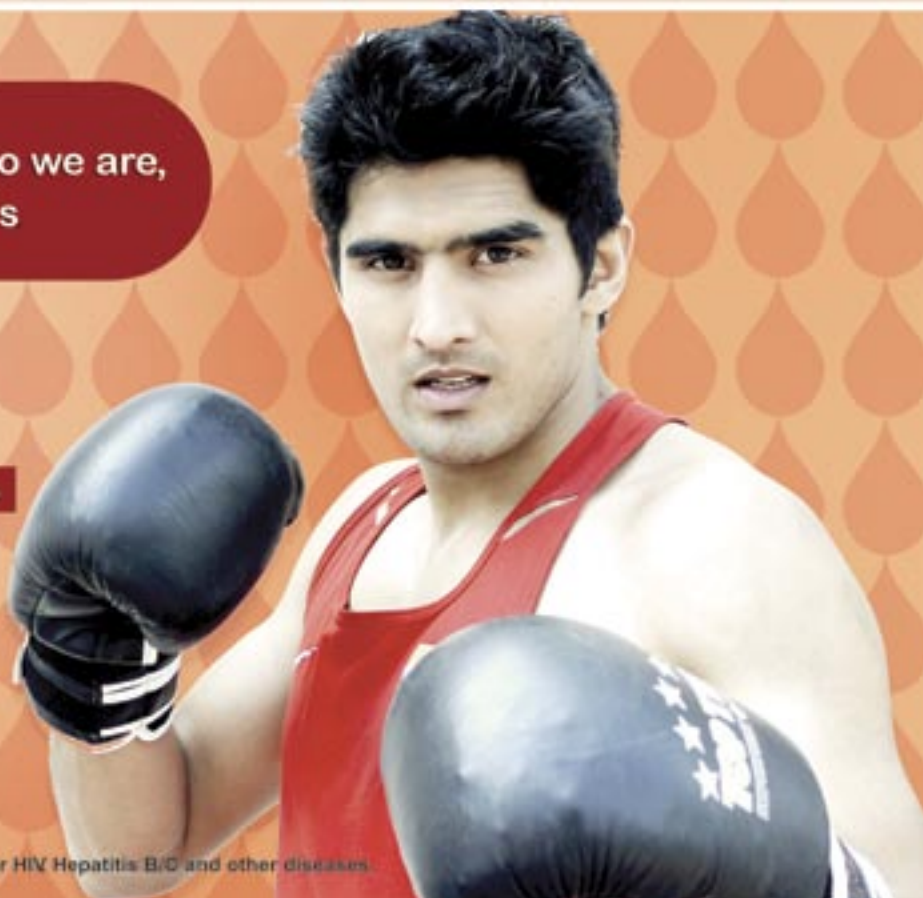
Donate Blood :

From 18 years of age

Every three months

At any licenced blood bank or blood donation camp

Donate blood
It feels good



Blood from a licensed blood bank is the safest as it is tested for HIV Hepatitis B/C and other diseases

Editor-in-Chief: Ms Aradhana Johri, Joint Secretary

Editor: Dr Sandhya Kabra, ADG (Lab Services & Quality Assurance)

Editorial Panel: Dr S. Venkatesh, DDG (R&D and M&E), Dr M. Shaikat, ADG (BS), Dr Neeraj Dhingra, ADG (TI),
Dr S. D. Khaparde, ADG (STI), Ms Madhu Gurung, Media Advisor (IEC)

NACO News is a newsletter of the National AIDS Control Organisation (NACO), Ministry of Health and Family Welfare, Government of India,
9th Floor, Chandralok Building, 36 Janpath, New Delhi-110001. Tel.: 011-23325343, Fax: 011-23731746, www.nacoonline.org

Compilation, design & production: New Concept Information Systems Pvt. Ltd., New Delhi
Printed with support from UNDP