

National AIDS Control Organisation

Ministry of Health and Family Welfare, Government of India

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# Journey of 10 years of ART In India - Story of a Decade

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## Welcome to our Additional Secretary



It is our great pleasure to welcome Mr N. S. Kang, who has joined NACO as Additional Secretary on 20th October, 2014. An officer of Indian

Administrative Service from the 1983 batch (Punjab cadre), he has held a number of key positions in various government departments including NACO and has a rich and varied experience in administrative and financial fields. We look forward to his guidance in the successful implementation of NACP-IV.



## Integration and Mainstreaming

India is committed to achieve Millennium Development Goals (MDGs) in reducing HIV mortality.

During the third phase the objective of National AIDS Control Programme (NACP) was to "Halt and Reverse the HIV Epidemic" in India. There has been significant progress in reversing the epidemic and as suggested by data, annually new infections have come down by 57% from 2001 to 2011.

Effort in the fourth phase of the national programme is to further expedite this reversal and attain the goal of zero new infections as early as possible through focusing on integration and mainstreaming of the programme response.

Efforts are on to take the HIV services to remote delivery points within health systems and providing STI/RTI services through 28000 PHCs/CHCs at sub district levels and opening more and more facility integrated ICTCs throughout the country.

Also, efforts are being made to further integrate HIV/TB implementation framework jointly with RNTCP and set up more and more linkage ART centres at CHC level staffed by NRHM.

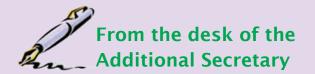
Efforts of mainstreaming with various Departments/ Ministries have started yielding results and 11 MoUs have been signed. There is an active follow up with the meeting of Joint Working Groups and activities on the ground in the states have started with active follow up by Mainstreaming Division of SACS.

There are five other MoUs in the pipeline to be signed very soon. With Department of AIDS Control no more remaining a separate department, the process of overall integration will also be expedited and the aim and objectives set under NACP-IV will be achieved faster.

I congratulate all those who are actively involved in these efforts and hope that NACO will set an excellent example to be emulated by others in the important field of integration and mainstreaming.

Hest

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



Dear Reader,

My current posting in the Ministry of Health & Family Welfare, with NACO being one of my charges, is like a home coming- since I was involved with NACP-II between the years 2000 and 2003. I am indeed happy that the programme has progressed significantly over the years.



Consolidating on the gains made in NACP-III, the Phase-IV aims to accelerate the process of reversal and further strengthening the response to HIV epidemic in India through a well defined integration process over the next five years.

The proposed objective of reducing new infection by 50% and comprehensive care, support and treatment to all persons living with HIV/AIDS will be achieved through proposed key strategies of intensifying and consolidating prevention services with a focus on HRG and vulnerable population; increasing access and promoting comprehensive care, support and treatment; expanding IEC services for general population and high risk groups with a focus on behaviour change and also demand generation and building capacities at national, state and district levels and strengthening the Strategic Information Management System.

The important initiatives under NACP-IV include upscaling of services, assured access to ART drugs, initiation of Early Infant Diagnosis for children below 18 months, the revised migrant strategy focusing on interventions at source and transit locations in addition to ongoing interventions at destinations, and specific interventions to target the risk and vulnerability among Transgenders/Hijras.

All these assure me that we are steadfastly progressing towards achieving the aim of reaching the three ZEROs - Zero New HIV Infections, Zero Discrimination, and Zero AIDS-Related Deaths.

Let us all join hands and take the oath of 'Yes, we can & Yes we will'.  $A \downarrow A$ 

N S Kang Additional Secretary, NACO Ministry of Health & Family Welfare Government of India



NACP-IV has entered the third year of implementation. During the year the HIV counselling and testing services have been rapidly scaled up through standalone ICTCs and facility integrated ICTCs.



The third line ART is being offered to people living with HIV (PLHIV) who are already receiving second line ART and have demonstrated treatment failure due to possible resistance to the second line drugs.

The World Blood Donor Day was observed on 14 June, 2014 to reiterate NACO's commitment of safe blood for the country.

Signing of Memorandum of Understanding with the Department of Telecommunications and Department of Electronics & Information Technology on 23rd July, 2014 is one more milestone, which will support National AIDS Control Programme by reaching out to large numbers of people through Common Service Centres with information on HIV prevention and HIV services.

A team of officials from NACO participated in the International AIDS Conference 2014 held at Melbourne, Australia during 21-26 July, 2014. The Conference called on governments and national and international organisations to step up the pace in terms of delivering universal access to treatment, care and prevention, not only for HIV but for other health issues as well.

NACO has given special focus to the North Eastern States due to the vulnerability and difficult terrain. These efforts are directed to ensure proper implementation of HIV/AIDS prevention and control activities in the North Eastern States to provide appropriate services to high risk groups and people living with HIV in these states. NACO has strengthened the Opioid Substitution Therapy (OST) In NE region and Punjab with 67 OST centres in NE region and 19 in Punjab.

On August 7, 2014, Department of AIDS Control has been merged with Department of Health & Family Welfare, Ministry of Health & Family Welfare, Government of India. This merger will serve the vision of integration of HIV in the health system.

K B Agarwal Joint Secretary, NACO Ministry of Health & Family Welfare Government of India

# Journey of 10 Years of ART in India: Story of a Decade

#### Globally acknowledged as a success story

The Department of AIDS Control (DAC), Ministry of Health & Family Welfare, Government of India, organised a programme in New Delhi on April 07, 2014, to celebrate 10 years of the successful Journey of the ART Programme in India. The programme was inaugurated by DAC Secretary Dr V. K. Subburaj. In his welcome address, Dr Subburaj informed that India has achieved 57% decline in new infections and 29% decline in deaths due to HIV/AIDS as a result of its efforts over the last two decades. He also presented details about the massive scale-up in providing free services under the ART Programme over the years, highlighting the fact that India's ART Programme is globally acclaimed as a success story. He acknowledged the role of technical experts, international agencies, related ministries, and representatives from civil society in ensuring that the programme has always delivered the best for people living with HIV (PLHIV) in the country. He reaffirmed the commitment of DAC to high-quality stigma-free universal access to care and support services.

The function was attended by over 300 participants, including many former and current DGs, secretaries, PDs, APDs, DDGs, JDs, POs/ TOs, JDs of SACS, PDs, TRG members, WHO country office officials, donor partners, NGO and GIPA staff members, among others working in networks and communities under the publicprivate partnership model. The function was jointly choreographed by Dr B. B. Rewari, NPO (ART) and Mr Manoj Pardesi from NCPI. The daylong programme was a mix of memories and stories of progress being shared, challenges being discussed in panel discussions and ideas being presented for the roadmap ahead for the next decade. There were also dance performances by the TG groups.

It was a rare occasion where many past NACO DGs and DAC Secretaries were present on one platform. Among those who spoke on the occasion were Ms Meenakshi Dutta Ghosh, Ms Shailaja Chandra, Mr J.V.R Prasada, Ms Sujatha Rao, Dr S.Y. Quraishi, Mr K. Chandramouli and Mr Sayan Chatterjee. Dr P. L. Joshi, former APD also shared memories of the simultaneous launch of the programme on April 01, 2004, at Tambaram



and at JJ Hospital. The speakers highlighted that the road to the current successes had not been easy and that various factors had contributed to the programme and facilitated this journey in their own way.

The people who contributed immensely to the programme over the years were acknowledged. For many in the audience there was nostalgia and for most others these were rare pieces of history being recalled. It was an emotionally charged atmosphere, with these dignitaries speaking in a heartfelt manner.

Many participants later commented it was a rare privilege to hear about the whole chain of events—from the preparation of the ART roll-out to its current stage—from the persons at the helm of affairs.

Dr A.S. Rathore, DDG CST, presented an overview of the programme. He said that, as we complete 10 years of the roll-out of ART in India, it is a time not only to remember our successes but also brace ourselves to continue on this journey ever more determined to overcome every obstacle in our way.

After the 'Lighting of the Lamp' ceremony, Dr B.B. Rewari, NPO ART, made a presentation on 'The Journey of ART in India' over the past decade. He dwelled on the process which went into the rollout of ART in India and how the scale-up was



Ex Director Generals, NACO and Secretary DAC graced the occasion of 10 years of ART Programme

done. He remarked that the journey of the ART Programme in the country over the last decade has been challenging but there has been unprecedented scale-up, which reflects best practices in evidence-based planning and optimal utilisation of resources for expansion of services to attain universal coverage.

Having been involved right from the planning stage of the ART Programme and implementing this at the national level, Dr Rewari described the various milestones that the Programme has traversed and challenges it has met in this difficult yet very satisfying journey over the last 10 years. He also highlighted various unique initiatives taken by the ART Programme.

Dr Rewari, during his presentation, remarked that the roll-out of the antiretroviral therapy (ART) has been the "tipping point" in India's fight against HIV/AIDS and has changed the face of the National AIDS Control Programme. It provided a motivation for people to come forward and get tested. He commented that he felt saddened that many lives were lost in the earlier years due to non-availability of drugs for treatment.

It was highlighted that the success of the ART Programme has resulted not only from the efforts of Department of AIDS Control alone, but because of the whole-hearted support from partners like WHO, UNICEF, UNAIDS, CDC, CHAI and many others.

The WHO country office has provided technical support throughout the journey. The support from

the Global Fund for provision of free ART—in six high-prevalence states initially (Rd IV) and later to all states (Rd VI)—has been a major catalyst in this scale-up. All along, the communities of PLHIV, civil society and NGOs have played a very supportive role and provided timely feedback on programme implementation in the field.

Mr Manoj Pardesi and Ms Daxa Patel, representing the PLHIV communities, acknowledged the efforts of the Department of AIDS Control in providing access to care and treatment. The Department, along with the PLHIV communities, felicitated all the key persons and stakeholders who have contributed to the success of the ART programme in India. All the participants declared their commitment to working for the initiative of "10X15"—i.e., to put 10 lakh PLHIV on ART by 2015.

Various dignitaries who spoke on the occasion said that it is important, even as the successes are celebrated, to look back, analyse and learn, as the Programme embarks on its future journey. They emphasised that achievement should not make us complacent and success should not



Participants released balloons to mark the grand finale

become our enemy. There are huge challenges ahead—increased numbers, decentralisation, reaching out to the primary care level, higher costs for new drugs/regimen, challenges in regular viral load monitoring, establishing pharmaco-vigilance and drug resistant programme—that require more commitment, more hard work and more resources.

This was followed by the release of a monograph on *Journey of the ART Programme in India: Story of a Decade.* This book is available on the NACO website at www.naco.gov.in.

During the closing session, post-lunch, Ms Anandi Yuvraj commended the key activists (past and present) who were involved in contributing to this national programme. Some key members from the community—Mr Naresh Yadav, Mr Vijay Nair and Ms R. Kaushalya—also shared the voices from across the country and shared their own experiences. Veterans like Dr Alaka Deshpande and Dr S. Rajasekaran also shared their memories of the ART Programme during their tenure.

A short cultural programme, which included a dance by TG Group, was presented to great applause. This was followed by a panel discussion on 'Implication of the Universal Healthcare Agenda on HIV CST Services'.

Later, 'Strategies to Overcome Issues Related to Patent, TRIPS and Trade Agreements' were discussed in a panel discussion by Mr Anand Grover and Mr K. Pradeep. The other participants



involved in the discussion were from LC, MSF, ITPC, APN+, YRG, NCPI and Generic Pharma.

The function ended with a vote of thanks by Mr K.B. Agarwal, Joint Secretary, NACO. Subsequently, all the participants, led by the DAC Secretary, participated in the release of balloons to mark the 'Treatment @10' initiative. The success of the Programme was attributed to great teamwork by staff from CST, NCPI, I-TECH and funding support from many donors and partners working closely with NACO.

The meet closed with the reminder that while the programme has come a long way, a lot more needs to be achieved. Many challenges need to be overcome yet to bring high-quality stigma-free universal access to ART services to the people.

CST Team, NACO

## IEC materials displayed at the programme venue



## Observance of World Blood Donor Day - 14th June 2014



World Blood Donor Day is celebrated every year on June 14 in homage to Karl Landsteiner, the Nobel Prize Laureate who discovered the ABO bloodgroup system. The Day is also observed to raise awareness about the need for safe blood and blood products and acknowledge the role of voluntary blood donors who are an important part of the blood transfusion services. The theme for the year 2014 is 'Safe Blood for Saving Mothers', which primarily aims to increase awareness about timely access to safe blood and blood products as part of a comprehensive approach to prevent maternal deaths.

In this connection, Department of AIDS Control (DAC) and Delhi State AIDS Control Society (DSACS), in collaboration with CDC and CMI, organised an event on the occasion at the Auditorium, PGI Block, Dr RML Hospital, New Delhi.

Dr Harsh Vardhan, the Hon'ble Union Minister for Health & Family Welfare, Government of India, graciously presided over the function. Mr Lov Verma, Secretary, Ministry of Health & Family Welfare Government of India, Mr V.K. Subburaj, Secretary, Department of AIDS Control, Dr Jagdish Prasad, Director-General of Health Services, Dr S.P. Aggarwal, Secretary-General, Indian Red Cross Society, Dr H.K. Kar, Medical Superintendent, Dr Ram Manohar Lohia Hospital and Dr Sunil D. Khaparde, DDG (DBTS), DAC, also graced the occasion with their presence. During the event, organisations that arrange for voluntary blood donations and voluntary blood donors as well as states doing commendable work in promoting voluntary blood donations were felicitated.

Five organisations—Sant Nirankari Mandal, HDFC Bank Ltd., Blood Connect, Mr Shiv Sushila Bindal Charitable Trust and National Thalassemia Welfare Society—were awarded for their contributions in promoting voluntary blood donations. Five voluntary blood donors—namely, Mr Vijay Negi, Mr Suraj Pal Singh, Mr Tarun Bhutani, Mr Anil Kumar Kaushik and Mr Amit Arora—were also honoured. Here it is pertinent to mention that Mr Vijay Negi, inspite of being sightless, had been a regular voluntary blood donor and has become a role model for many. The Blood Transfusion Services of Uttarakhand SACS, Madhya Pradesh SACS and Gujarat SACS were felicitated for their excellent performance.

Organisations such as ISBTI, ASTM and the Blood Transfusion Services of Delhi SACS were also commended for their performance. A voluntary blood donation drive was organised by the Blood Bank of Dr RML Hospital and was inaugurated by Dr Harsh Vardhan, who became the first donor at the event, inspiring the nation and showing that anyone between the ages of 18 and 65 can donate blood, without compromising one's health. He said that India faces a blood shortage of three million units per annum, which can be addressed if an additional 2% of Indians donate blood. He expressed concern over the high rate of maternal mortality in the country due, in part, to the unmet need for safe blood during pregnancy. He added that in the next one or two years, every district in the country would have a blood bank. The programme ended with a Vote of Thanks to the Chair and all the dignitaries on the dais.

#### **BTS Team, NACO**



Audience at World Blood Donors Day function

# Capacity-building of State IEC Teams

State IEC teams trained in communication planning and management



Considering that capacity-building and honing of skills on the job is essential to bring in uniformity and quality in programme outputs, training of all IEC staff members working at the State AIDS Control Societies (SACS) and Municipality AIDS Control Societies (MACS) was conducted during the month of June 2014 to build their capacities in communication planning and management. A cascading model of capacity-building was undertaken, whereby a team of senior officials-Joint and Deputy Directors (for IEC), Regional Communication Officers and the core team of IEC officers at NACO-were handpicked as master trainers to conduct the training of all state-level cadre working in the IEC divisions at the various SACS. A five-day training of master trainers (MToT), supported by Integrated Healthy Behaviour Project (IHBP) was conducted in Delhi from May 26 to 30, 2014, to orient them on facilitating the training of IEC cadre from SACS/ MACS. The MToT was facilitated by external experts and resources from DAC and IHBP; altogether, 16 participants received the training



Participants carrying out the context and people analysis

to facilitate the further capacity-building planned for the state-level IEC cadre.

Three five-day batches comprising 103 IEC and mainstreaming officers and youth consultants from 38 SACS/MACS were trained on communication planning and management in June 2014 in Delhi. The participatory approach adopted and simulation group works conducted helped reinforce the learning. As the feedback reflected, the training was considered very useful by the participants for future planning and implementation of communication campaigns in their respective states. All state teams were assigned the post-training task of planning and implementation of at least one communication campaign in the year 2014-15.

The next level of training is planned at the state levels, which will be for two days, for the Programme Managers of DAPCUs and the Project Officers of Targeted Intervention (TI) projects. Joint and Deputy Directors from SACS IEC units will be oriented to conduct the trainings and NACO officers will monitor and provide necessary support.

The capacity-building programme is aimed at creating a cadre of trained resources in all states to provide quality inputs for the prevention segment of the NACP.

Dr Sanjib K. Chakraborty IEC Consultant, NACO

NACO News Apr-Sep 2014

# **North East Conclave**

The Department of AIDS Control in collaboration with Government of Manipur organised North East Conclave-I from 3rd to 5th June 2014 in Imphal, Manipur. The Conclave strategised to facilitate discussions about the epidemic in the North East (NE), assess the NACP implementation by NE states and to collectively brainstorm and develop appropriate and localised solutions for the response by NE states to address the epidemic.

NE Conclave-II was organised in collaboration with the Government of Nagaland from 3rd to 5th September 2014 in Kohima, Nagaland. The objectives of NE Conclave-II were to

- a) Jointly review the progress on actions agreed in NE Conclave-I
- b) Review implementation of NACP in NE
- c) Develop a NE strategy in consultation with drug user community and civil society
- d) Discuss new initiatives on HIV interventions in prisons and accreditation of OST centres in public health settings.

NE Conclave-II was attended by the Health Minister of Nagaland Mr P. Longon, Additional Chief Secretary of Nagaland Mr C J Ponraj, Commissioner and Secretary, Health & Family Welfare of Nagaland, Project Directors of the State AIDS Control Societies in the eight NE states and officials from NACO led by Mr K. B. Agarwal, Joint Secretary, MoH&FW, Government of India.



Senior representatives from Centre for Disease Control (CDC) Dr Pauline Harvey and Dr Sampath were also present. Representatives of the drug user community and civil society were specially invited to be part of the discussions and for development of the action plans. The event was reported extensively in the media.



Key activities conducted during NE Conclave-II

- Development of a NE Strategy for NACP through community consultation and group work with SACS officials facilitated by NACO.
- Experience sharing by Punjab SACS and TSU on "Opioid Substitution Therapy (OST) in Public Health Settings" through presentation followed by discussion.
- Technical orientation on "Accreditation of OST in Public Health Settings' through presentation by CDC followed by discussion.
- Review of the implementation of NACP in the NE States through presentations made by NACO programme divisions followed by presentations made by SACS on implementation of respective Annual Action Plans (AAPs).
- Review on progress of Action Plan developed during NE Conclave-I through presentations made by NACO and North East Regional Office (NERO) followed by discussion.
- Development of Action Plan based on discussions during NE Conclave-II

#### Targeted Intervention (TI) Team, NACO

Adults registered for ART	17,70,272
Adults alive and on ART	7,65,747
Children registered for ART	1,12,719
Children alive and on ART	44,592

# NACO & Indian Pharmacopoeia **Commission Sign MoU**

#### To monitor the safety of antiretroviral medicines



Since the establishment of ART in 2004, the national treatment programme has scaled up provision of ART to about 796,269 people. In order to make treatment more accessible. ART centres are located in tertiary/district hospitals and medical colleges. To ensure the safety of ARV medicines used in the programme, Indian Pharmacopoeia Commission (National Coordination Centre for Pharmaco-vigilance Programme of India) and National AIDS Control Organisaltion (NACO) formally agreed on 15th September 2014 to collaborate, for setting up systems and processes for reporting, analysis and monitoring of Adverse Drug Reactions due to anti-retroviral medicines in the programme.

A Memorandum of Understanding (MoU) was signed between NACO and Indian Pharmacopoeia Commission on 15th September 2014 at the NACO office, New Delhi, under the chairmanship of Mr R. K. Jain, Additional Secretary, Directorate General of Health Services, Ministry of Health & Family Welfare, Government of India. Dr A. S. Rathore, Deputy Director General, Care, Support & Treatment Division, and Dr G. N. Singh, Secretarycum-Scientific Director, Indian Pharmacopoeia Commission, signed the MoU on behalf of NACO and Indian Pharmacopoeia Commission respectively. Senior Ministry officials, including the Joint Secretary, Mr K. B. Agarwal, Senior Advisor for Pharmaco-vigilance Programme of India, Prof S.K. Gupta, and officers from WHO India, Dr Madhur Gupta and Dr Nicole Seguy were also present on the occasion. In the first phase, 30 Antiretroviral Therapy Centres would be identified and training will be provided to them before 1st January 2015, and then would be scaled up in a phased manner in 2015.

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Dr Rita Prasad PO - CST NACO

## **NACO Observes Hindi Pakhwada**

Hindi Pakhwada was organised by National AIDS Control Organisation, Ministry of Health & Family Welfare, from September 01 to 14, 2014.

During this fortnight-long programme, various competitions were organised, such as Hindi Essay-Writing Competition, Hindi Noting & Drafting Competition, Official Language & General Knowledge Competition, Hindi Dictation Competition and Hindi Poem Recitation Competition. There was good response from employees at all levels who took part in these competitions in large numbers.



Prize winners of competitions organised during 'Hindi Pakhwada'



Successful participants were felicitated with a certificate and a cash prize by the Joint Secretary on the Hindi Day function, which was celebrated in NACO. The Deputy Secretary encouraged the participants and congratulated the prize winners for their efforts. He asked them to use Hindi increasingly in their day-to-day office work.

The Joint Secretary congratulated the winners and participants. He was happy to see the response from the staff. He commended the Official Language staff for successfully organising the Hindi Pakhwada.

> Suresh D Dubev Hindi Division, NACO



# **Mainstreaming HIV**

Since HIV vulnerability emanates from sociobehavioural risks, the health and medical aspect of addressing it is just not sufficient. The goal of 'zero new infections, zero HIV related deaths and zero discrimination' cannot be achieved in India unless the epidemic is addressed holistically. Thus, 'Mainstreaming' and 'Partnerships' have been recognised as key to the NACP (National AIDS Control Programme) approach to facilitate multi-sector responses engaging a wide range of stakeholders. The collaboration of NACO and various ministries will support the national efforts of HIV prevention and care for people infected and affected by HIV/AIDS. NACO has been successful in formalising partnerships with three key ministries—the Ministry of Road Transport & Highways and the Ministry of Communications & Information Technology as well as separately with the Department of Electronics & Information under the Ministry of Communication & Information Technology.

1. Dr V. K. Subburaj, Secretary, DAC, and Mr Vijay Chhibber, Secretary, Ministry of Road Transport & Highways signed a Memorandum of Understanding on June 09, 2014, with the objective to spread awareness among truck drivers, transport workers and other key population groups with information on STI/HIV/AIDS and related services. This partnership was considered crucial as HIV-prevalence among truckers is 2.57% as against the national prevalence rate of 0.27% in the adult general population.

Transport is a social vector in the transmission of the disease as are high-risk behaviours such as injecting drug use and commercial sex, which fuel the epidemic. Transport sector workers are more likely to acquire HIV infection as transport workers serve as bridge-population groups linking high-risk groups with the general population across regions. Because of this bidirectional relationship, HIV/AIDS programmes for the transport sector are crucial to prevent a wider spread of the disease in India.

2. NACO signed a Memorandum of Understanding with the Ministry of Communications & Information Technology on July 23, 2014. The MU was signed by the Hon'ble Minister of Communication and Information Technology Mr Ravi Shankar Prasad and the Hon'ble Minister of Health and Family Welfare Dr Harsh Vardhan and the respective Secretaries— Dr V. K. Subburaj, Secretary DAC and Mr Ram Sevak Sharma, Secretary, Department of Information Technology and Mr Rakesh Garg, Department of Telecommunications.

The partnership aims to spread correct and comprehensive knowledge for the prevention of HIV as well as information on prevention and treatment and care services available in the country, especially for those who are most at risk of contracting HIV.

Nearly 90% of those infected by HIV are in the age-group of 15 to 49 years. This group needs to be reached through appropriate technology and is most dependent on communication tools such as the mobile phone, electronic messaging Thus, (SMS), emails, etc. Ministry of Communication & Information Technology has a major role to play in spreading awareness, promoting behavioural change, enhancing access to service delivery, facilitating strategic information management through national e-governance, community service centres, pushbased SMS, etc.



Signing of MoU: Mr Vijay Chhibber, (5th from left) Secretary, Ministry of Road Transport and Highways and Dr V. K. Subburaj, (4<sup>th</sup> from left), Secretary and Mr K B Agarwal, (3<sup>rd</sup> from Left) Joint Secretary, Department of AIDS Control with other officers of Ministry of Road Transport and Highways and Department of AIDS Control



Signing of two MoUs between Department of Electronics and Information Technology (E&IT), Department of Telecommunications and Department of AIDS Control by Hon'ble Minister of E & IT Mr Ravi Shankar Prasad and Hon'ble Minister of Health & Family Welfare Dr Harsh Vardhan. Secretaries of all three Departments were also present on the occasion.

3. NACO has signed a separate Memorandum of Understanding with the Department of Electronics & Information of the Ministry of Communication & Information Technology with the objective of reaching large numbers of people through the Common Service Centres, with information on prevention and services of HIV. This will also encourage voluntary blood donation and also facilitate access to social protection schemes. The telecon services in India have been widely recognised as crucial to the nation's socioeconomic development. The partnership will also help in awareness-generation through display of IEC materials, hoardings etc. at strategic locations in and around offices and public spaces.

> Mainstreaming Unit NACO

# Strengthening of Mainstreaming Activities in 22 States

NACO has recently placed nine Regional Programme Managers (RPMs) to take forward the MoUs signed by NACO with different ministries in 22 States. The objective is to facilitate PLHIVs and most at risk people (MARP) to access and avail the social protection schemes. The RPMs are based at nine State capitals; Hyderabad, Chennai, Bangalore, Jaipur, Kolkata, Raipur, Chandigarh, Delhi and Guwahati. In coordination with SACS mainstreaming officers the RPMs will focus to the functions of the Joint Working Groups and to roll out the MoUs in the States. Currently, the RPMs are working in 22 States - Andhra Pradesh, Telangana, Tamil Nadu, Kerala, Karnataka, Gujarat, Rajasthan, Odisha, Bihar, West Bengal, Jharkhand, Madhya Pradesh, Chhattisgarh, Punjab, Haryana, Chandigarh, Himachal Pradesh, Delhi, Uttar Pradesh, Nagaland, Manipur, Assam and Mizoram.

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MS Team, NACO



# National Youth Consultation Meet

The primary objective of the National Youth Consultation Meet (NYCM) held on July 16-17, 2014, was to review, revise and reform the guidelines for programmes under Youth Affairs—namely, the Adolescent Education Programme (AEP), Red Ribbon Club (RRC) Programme and Out-of-School Youth (OSY) Programme. The meet, organised by NACO in collaboration with United Nations Children's Fund (UNICEF) was inaugurated by Dr V.K. Subburaj, Secretary, DAC.

The two-day Meet saw major participation from the states. Youth consultants from across India were invited to share and give a fruitful insight on the hindrances and challenges that they face in the implementation of youth programmes in their respective states. The Meet saw a lot of exchange of fresh ideas on how to better tap and implement the youth programmes in the best possible manner.

The technical session with the Department of Higher Education and the Department of Sports was organised for identifying areas where departments can work together for better implementation of youth programmes in India.

Marking the conclusion of the NYCM, Dr Naresh Goel, JD (IEC), congratulated all the participants for coming forward and being a part of this fruitful consultation. He further thanked all the youth consultants for actively taking part in NYCM 2014 and sharing their experiences and suggestions. He said also that the Youth Affairs Programme Guidelines would be reviewed and revised and the framework given final shape soon.

A presentation by Technical Officers, Youth Affairs, explained to participants from the states about the significance and procedures of the event.

> Ms Richa Pathak & Ms Pallavi Joshi, Technical Officers - Youth Affairs, NACO



# Using Folk Media in HIV/AIDS Prevention in Rural India

## States have undertaken the innovative approach to HIV and AIDS prevention based on the use of folk media

Given the important role played by the verbal tradition in local settings throughout the rural and media dark areas, States have undertaken the innovative approach to HIV/AIDS prevention based on the use of folk media.

In the basket of communication initiatives, folk media has been recognised as an important tool to disseminate messages on HIV/AIDS mainly in the rural and media dark areas. For the first time folk media has been brought on the management board to undergo smart and astute planning process following a scientific and logical frame. Development and technical vetting of the scripts in regional languages, State level planning of roll out and training of folk troupes, and formation of District Support Teams for ground level support and monitoring were the key components of the strategy adopted. Mid-media plays a pivotal role in the Link Worker Scheme (LWS) and Migrant Health Camps. In 17 States LWS is been implemented in 163 vulnerable districts, reaching out to HRGs and vulnerable communities with Inter Personal Communication (IPC), sharing of information and knowledge through various activities including folk performance, which is the most popular and well accepted medium.

During July-August 2014, various outdoor and mid-media IEC activities were implemented in most of the villages under the scheme. During the first two quarters of FY 2014-15, as many as 3210 folk performances were rolled out in LWS districts, while 4324 shows promoted the district level "Migrant Health Camps". Under the regular mid-media campaign about 9000 theme-based performances were rolled out in 20 States.

Remaining 14 States could not start the campaign due to some administrative and other technical issues. However, roll out is to be completed by the end of February, 2015. How much of the messages have been received by the audience to enhance their knowledge and to change their attitude and practice will be reflected in the records of service uptake during the campaign.

Ms Sanchali Roy Consultant (IEC) NACO



State level planning meeting with District Support Team, Folk Troupe Leaders, NACO & IEC Team, KSACS at District WAYANAD, Kerala



# **Innovative Social Welfare Schemes**



On May 14, 2014, Mr Oommen Chandy, the Hon'ble Chief Minister of Kerala, recommended the rollout of a series of social protection schemes that would benefit children and adults affected by HIV/AIDS in the state. Multi-faceted schemes

that benefit PLHIV, intended for co-ordination with various line departments, were declared. The initiative will boost efforts of the State Government's ongoing effort to expand innovative social welfare schemes for the weaker sections.

The key resolutions adopted in the meeting were as follows:

- Free clinical investigations: All PLHIV registered with the ART Centres will be entitled to free-ofcost clinical investigations upon approval from the Hospital Management Committee. If the hospital does not have facilities to conduct specific tests, the Health Department and Social Justice Department would together contribute to reimburse the patient for the sum spent on such clinical examinations.
- OI Drugs: Opportunistic Infection (OI) drugs that are not available at ART Centres and hospitals in the state will be made available through the Kerala Medical Services Corporation Limited.
- Treatment Care Team: It is decided to select interested members from the PLHIV community for providing bystander support (Treatment Care Team) to the PLHIVs who have been admitted in hospital. An honorarium and special training will be given to the selected PLHIV members by the Social Justice Department.
- Emergency Medical Care: The Government has also decided to reimburse expenses incurred for hiring an ambulance for referring HIV positive cases to hospitals.

- Monthly Aid and Widow Pensions: For any PLHIV registered with an ART Centre, aid has been hiked from Rs. 400 to Rs. 1000 per month.
- BPL Cards for PLHIV: The Government has decided to provide BPL cards to all people living with HIV/AIDS.
- Children affected by HIV/AIDS: Free education and scholarships will be provided to children affected by HIV/AIDS.
- Extension of other Social Protection Schemes: To ensure quality of life for PLHIV, the Social Justice Department has extended self employment and housing schemes for the needy PLHIV in the state. The Government has decided to provide Rs.100,000 through sponsors for conducting weddings of children of HIV-infected parents.
- Care Homes for PLHIV: The Government has decided to accommodate people who are HIV positive in the care home.
- HIV/AIDS in School Curricula: It is decided to include HIV/AIDS awareness in the school curricula.
- Additional position at ART Centres to coordinate social protection initiatives: It is decided to appoint one Counsellor at each ART Centre. The Social Justice Department will also help co-ordinate the welfare schemes for those who are HIV positive and registered at the ART Centre.
- Structure for executing these decisions for planning, speedy implementation and review of the above mentioned schemes, it has been decided to constitute a committee chaired by the Hon'ble Chief Minister.

Anjana G. Assistant Director (GIPA), Kerala SACS



## Folk Media Campaign



In Gujarat, the multi-colour Folk Media Campaign was marked by high spirits and a festive ambience, with large crowds witnessing the popular Bhawai and Sherinatak performances across 420 villages in 14 'High Priority' and Category 'A'

and 'B' districts-viz., Ahmedabad, Amreli, Banaskantha, Bhavnagar, Dahod, Kutchh, Mehsana, Navsari, Patan, Sabarkantha, Surat, Surendranagar and Vadodara-covering a total population of 68,226, comprising 43,309 men and 24,917 women. A total of 14 folk troupes, empanelled with Pune's Song & Drama Division, and technically trained by NACO and Gujarat State AIDS Control Society (SACS), rolled out a robust 15-day folk media campaign, from August 18 to September 01, 2014.

Enacting NACO-vetted scripts targeting youth, women, migrants and the general population, the troupes delivered key Behaviour Change Communication (BCC) messages on prevention of HIV/AIDS and STI and on creating awareness about availability of services of ICTCs/FICTCs, STI Clinics, ART and Linked ART Centres nearest to the villages covered by the programme. Promotion of voluntary blood donation was also highlighted in every folk performance.



Each folk troupe was assigned 30 performances (two per day) during the campaign. At the local level, Link Workers played a key role in districts where LWS is being implemented. In other districts, ASHA/ANM workers provided local support in collaboration with members from the village panchayats, PHCs and CHCs. For monitoring the folk performances, field visits were undertaken by officers of the Guiarat SACS. as well as officers from DAPCUs and district LWS units. This roll-out of the campaign was preceded by a four-day planning workshop from August 05 to 08, 2014, in Ahmedabad.

> Hemant Shukla JD (IEC) GSACS

# International Day Against Drug **Abuse & Illicit Trafficking**



Assam State AIDS Control Society (ASACS) in association with the Department of Social Welfare, Government of Assam, Maruwari Yuva Mancha (Guwahati) and social 'GOLD' organisation observed International Day against Drug

Abuse & Illicit Trafficking at the District Library Auditorium, Guwahati on June 26, 2014.

The speakers stressed that everyone must fight against drug abuse and illicit trafficking and drug users should not be ostracised, but rehabilitated. They appealed to the youth community of Assam to join hands to fight against the menace of drug abuse. The state level meeting was preceded by a bike rally on drug abuse awareness which was organised by Maruwari Yuva Manch.



motorbike rally and speeches

Ms Bonti Saikia JD (IEC) ASACS



# State Level Sensitisation Workshop on HIV/AIDS for Tribal Folk Artists

### Folk campaigns roll out in Karnataka by tribal folk artists



The rich cultural tradition of India is enriched by the vibrancy of tribal art across all the States and Union Territories. Their distinct cultural traditions practiced through generations are exhibited through

various forms characterised by unique and colourful costumes. The tribal arts of India have been aptly used for dissemination of information on temporal issues and on health issues through ages.

Tribal communities constitute about 7% of the total population of India. The State of Karnataka has a sizable population of tribal groups. As per Census 2011, there are 42.49 lakhs tribal population in Karnataka distributed across various regions. The Soliga, Hakki-Pikki, Koraga, Gouliga, Iruliga, Jenu/kadu Kuruba, Goulis, Lambanis, Siddis, Hallakis and Lambanis, Asalaru are some prominent tribes of Karnataka. The tribal communities in Karnataka have variety and complexity in the belief systems as well as the cultural practices that are documented through their oral traditions in the form of epics and songs.

Following the NACO guidelines on roll out of folk media activity, KSAPS had organised a State level workshop for tribal artists on tribal folk-art-based communication to generate awareness of HIV/ AIDS in the tribal areas of Karnataka. The workshop supported the tribal artists to upgrade and enhance their skills for communicating messages on STI, HIV/AIDS, safe sex and service uptake during the roll out of folk media campaign in the respective tribal communities. Development of scripts in local dialect covering issues like basic health care, ANC services, institutional delivery, immunisation and education of the children.

The objectives of the State level workshop were to disseminate information on the following.

- To promote prevention of HIV/AIDS and STI among vulnerable tribal population
- To motivate people to undergo voluntary testing at ICTC
- To motivate against stigma and discrimination towards PLHIVs



Amazing Siddhi Boys, a tribal male team from Uttarakannada





Performance by the Malekudiyar, women tribal team from Madekeri district

State level Master Trainers and Resource Persons, who have expertise in tribal folk art forms and tribal dialects, trained the folk troupes as per NACO guidelines in coordination with Karnataka State AIDS Prevention Society (KSAPS) IEC team. The scripts developed in the workshop were vetted by the technical team of KSAPS. A total of 70 tribal folk artistes from 11 selected folk troupes participated in the five-day workshop. All the trained troupes have fanned out to the remote areas across the tribal districts to perform and disseminate messages on HIV/AIDS issues. The workshop has been documented and the strategy adopted by KSAPS to conduct the workshop on tribal folk art forms and subsequent roll out could be adopted by other States.

> Dr Leela Sampige, JD (IEC) KSAPS Ms Sanchali Roy, Consultant IEC , NACO



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Community Resource Person addressing the gathering

Hallaki Troupe

# Visit of Delegates of South to South Programme

## Visit of UK Parliamentarians to NACO (11 Apr 2014)

Hon'ble Ms Pamela Nash, Member of Parliament (MP), House of Commons and the Chair of All Party Parliamentary Group (APPG) on HIV and AIDS, visited NACO on 11 April 2014 with the aim to understand India's HIV/AIDS Response, particularly about the Care & Treatment Programme and the Forum of Parliamentarians on HIV and AIDS in India. She was accompanied by their Policy Advisor, Ms Susie Pelly and two other members of the group Baroness Barker and Graham Jones, MP. On the following day, the UK Parliamentarians Team visited and interacted with the staff at the ART Centre at RML Hospital, New Delhi as well.



Mr. K B Agarwal, JS NACO chaired the interaction sessions with UK Parliamentarians and NACO officers

## Visit of Delegates from Ghana & Angola (14-22 Apr 2014)

As part of the South to South Knowledge Exchange Initiative, a 15-member delegation from Ghana & Angola visited NACO and its implementation sites in Tamil Nadu from 14-22 April, 2014 with the objectives of understanding India's National Response on HIV/AIDS, sharing of experiences and best practices between countries (India, Ghana & Angola), and sharing technical assistance areas based on the visit. The delegation team visited NACO on 22nd April 2014 and had interaction and experience sharing session with senior officials of NACO under the Chairmanship of Dr V. K. Subburaj, Secretary, DAC. In addressing the meeting, the Secretary, said that the partnership between India and the African countries has been a very fruitful process to exchange experiences and best practices. Dr Neeraj Dhingra, DDG (TI) made a comprehensive presentation on India's National Response on HIV/AIDS. Dr Joseph D. Williams, Project Director, SHARE Project shared a brief outline on the purpose of the visit. Mr P. Arvind Kumar, USAID shared the knowledge transfer approaches and the purpose of the Guided Exposure Visit (GEV). Dr Joseph Amuzu, Director of Policy & Planning, Ghana AIDS Commission, Ghana and Dr Maria

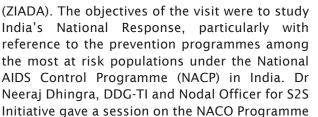
> Lucia Furtado, Deputy Director, National AIDS Institute, Government of Angola shared their country experiences with India. The delegation comprised of representatives from AIDS Commission, UN agencies, Civil Society Organisations, Government including Judicial & Prison/Police. National AIDS Institute. USAID, Capacity Building/Research Institutions and Technical Managers. The visit was hosted by VHS-SHARE project (supported by USAID/INDIA).



A group photograph of visitors from Ghana and Angola with Dr. Subburaj, Secretary and other NACO officers

## Visit of Delegates from Zanzibar AIDS Commission (26-30 May 2014)

A five member delegation from Zanzibar visited NACO on 26 May 2014 and its implementation sites in Karnataka from 26 to 30 May 2014. The team comprised of representatives from the Zanzibar Police Force, First Vice President's Office, Zanzibar AIDS Commission and Zanzibar Interfaith Association for Development and AIDS





Dr. Subburaj, Secretary and Mr. K B Agarwal, Joint Secretary with Zanzibar team and NACO officers

in India, elaborating on NACO's NACP principles and guidelines; programmedesign, implementation and evaluation; role of donors and partnerships; and on why the programme has been a success. The Zanzibar delegation made a presentation on their country programme and their expectations out of the learning visit to India. The delegation team was led by Dr Islam Seif Salum, Deputy Principal Secretary, First Vice President's Office, Zanzibar.

## Visit of Delegates from Burkina Faso, Cameroon & Togo (4-8 August 2014)

Under Knowledge Exchange Initiative of India, a seven member delegation from Western Africa Countries, viz., Burkina Faso, Cameroon & Togo visited India from 4-8 August 2014. The delegation visited NACO on 4 August and also its implementation sites in Tamil Nadu between 5-8 August. The key objective of visit was to study India's National Response, particularly focusing on Most-at-Risk-Populations (MARPs), Care, Support & Treatment for PLHIV, Private Sector Engagement & Mainstreaming Initiative. An experience sharing and interaction session was organised under Chairmanship of Dr V. K. Subburaj, Secretary, DAC. Dr Yujwal Raj, NPO, Strategic Information, NACO. made а comprehensive presentation on India's experiences. Mr Zoungrana Zakaria, Programme Assistant, FHI 360, Burkina Faso, Ms Ngatchou (épse) Touko Denise, Chairperson, Horizons Women, Cameroon and Ms Hortense ME, Country Coordinator, FHI 360, PACTE-HIV, Togo shared the respective country experiences with NACO officials.

> **Jimreeves K.** Donor Coordinator, NACO



Dr. Subburaj, Secretary with Cameroon, Burkina Faso and Togo visitors and other NACO officers





# Vihaan Programme: Joint Review & Co-ordination Meeting

#### **Strengthening Synergistic Linkages**

NACO Care, Support & Treatment Division in coordination with the India chapter of HIV/AIDS Alliance, organised a meeting for all Project Directors of Vihaan Sub-Recipient Partners on July 7-8 at Srinagar, Kashmir. The objective of the meeting was to review the progress of the Vihaan Care and Support Programme till May 2014, evaluating it against the targets of each of the core performance indicators. It was also aimed at identifying programmatic gaps, barriers and challenges to identify feasible ways and means of addressing the identified gaps. The meeting also aimed at strengthening the co-ordination and synergistic linkages with different programme divisions of the National AIDS Control Programme (NACP). The meeting was attended by Secretary, DAC, DDG-CST, Project Director J&K SACS, Country Director of India HIV/AIDS Alliance, Project Director of Vihaan Programme from 16 SR partners (KHPT Karnataka, MAMTA Delhi for North Region, NMP+ Maharashtra, TNP+ TN, CPK+ Kerala, UPNP+ Uttar Pradesh, MPNP+ Madhya Pradesh, NNP+ Nagaland, MNP+ Manipur, FXB NE, GSNP+ Gujarat, RNP+ Rajasthan, HLFPPT Punjab and Chhattisgarh, SAATHI for West Bengal and Jharkhand, Lepra for Odisha, Plan India for Bihar), programme officials from various divisions of NACO and the VIHAAN team from Alliance.

In his key note address, Dr Subburaj, Secretary, DAC expressed his happiness to be part of the meeting. He also commented that drugs or medicines alone do not treat disease and that psychological and emotional support contributes to successful treatment. Care and support play a significant role in the treatment of PLHIV.

He added that to trace the missing people is the key objective and that consistent follow-up is required for about 1.5 million PLHIV registered at ART Centres. He also highlighted the importance of strengthening the HIV-TB integration into CSCs and striving for early detection and treatment. In addition, he also emphasised the need for developing a scientific way of tracking PLHIV.



Dr. Subburaj (Secretary), Dr. A. S. Rathore (DDG CST NACO), Ms. Sheetal Nanda (PD- J&K SACS) & James Robertson (Executive Director, India HIV/AIDS Alliance) participating in the review meeting

## Hon'ble Union Minister for Health & Family Welfare, Gol visited DAC



Dr Harsh Vardhan, the Hon'ble Union Minister for Health & Family Welfare, visited the Department of AIDS Control (DAC) on June 12, 2014, to review the activities undertaken by the Department. He appreciated the successes achieved by India in the control of HIV/AIDS and hailed the collaborative efforts of the Department, communities and all partner agencies and institutes. He advised the Department that besides promoting condoms, communication strategies should also promote safe behaviour patterns and strengthen the cultural values. He underlined the importance of scaling up voluntary blood donations. He highlighted the need to focus on prevention of new infections in such regions and states

where HIV incidence is rising. He also emphasised the criticality of providing free treatment to PLHIV.

Dr Harsh Vardhan envisioned that India should be the first country to achieve the global dream of 'End of AIDS'. He encouraged the Department to bring in innovations and out-of-the-box thinking to formulate new strategies and implement them with renewed energy. In view of the rich experience that India has, he desired that India should set its own targets to move towards the goal of ending AIDS in the country.

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Dr Yujwal Raj NPO (SI)

NACO News Apr-Sep 2014

# Welcome to the Family of NACO

**April - September 2014** 

May

June

July

August-

September

22 nd Ms Pallavi Joshi Technical Officer, Youth Affairs (IEC)

th Mr Animesh Purohit TI Programme Officer (Truckers)

Ar Sonoo Jha Technical Officer (M&E) Technical Officer (FSW)

5<sup>th</sup> Mr Dew Stanly Ephraim Technical Officer (Truckers) 12<sup>th</sup> Ms Mariyam Technical Officer (M&E) 19<sup>th</sup> Ms Vandana Technical Officer (M&E)

(Counselling) BSD

8<sup>th</sup> Ms Reema Gil Programme Officer 25<sup>th</sup> Ms Nisha Kadyan Programme Officer (CB) CST 25<sup>th</sup> Dr Asha A Hegde National PPTCT

Consultant (BSD)

- Celebration of World AIDS Day, December 1st 2014
- Launch of
  - National AIDS Helpline, December 1st 2014
  - Digital Resource Centre, December 1st 2014
  - Inventory Management System, December 1st 2014
- National Meet on Strengthening HIV Laboratories in India 4th & 5th December 2014.

## From the Desk of the Secretary



### Dear Reader,

By a notification dated 6th August 2014 issued by the office of the President of India, the Department of Aids Control merged with the Department of Health & Family Welfare under the Ministry of Health & Family Welfare. Thus the Department of AIDS Control reverted to the National AIDS Control Organisation (NACO) as per the present Government's agenda of "minimum government and maximum governance".

NACO will henceforth function as a vertical programme within the Department of Health and Family Welfare like other health programmes. Notwithstanding the structural change, the National AIDS Control Programme will carry the same importance and there will be no let up in the efforts to achieve the objectives set for the programme in the time frame decided.

Efforts towards integrating HIV/AIDS programme into the Department of Health have been carried out over the last decade yielding definite and positive outcomes. The integration will strengthen the programme because of the larger infrastructure and extended resources available under the Department of Health and Family Welfare.

All the stakeholders involved with the programme including development partners and communities need to work with renewed vigour to not only sustain and consolidate the achievements made by the National AIDS Control Programme but also to stride at an unrelenting pace to achieve the objectives of the programme.

Lov Verma Secretary, Ministry of Health and Family Welfare

## National AIDS Control Organisation welcomes Mr Jagat Prakash Nadda, Hon'ble Minister for Health & Family Welfare, Government of India





# **International Youth Day Celebrations**



Editor-in-Chief: Mr Lov Verma, Secretary, Ministry of Health & Family Welfare, Government of India Editor: Dr Naresh Goel, DDG (LS) & JD (IEC) Editorial Panel: Dr Neeraj Dhingra, DDG (TI), Dr Shobini Rajan, ADG (STI & Blood Safety),

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

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