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In this context of increased availability of data and the requirement of decentralized planning at the district level, NACO had undertaken a project titled "Epidemiological Profiling of HIV/AIDS Situation at District and Sub-district Level using Data Triangulation" in 25 states (539 districts) in two phases during 2009-10 & 2010-11. This exercise was undertaken with the objective of developing district HIV/AIDS epidemic profiles, consolidating all the available information for a district at one place and drawing meaningful inferences using data triangulation approaches.

This technical document is an outcome of the data triangulation process and consists of a snapshot on the district background, and on the HIV epidemic profile of each district based on the updated information on HIV Sentinel Surveillance, monthly programme data and key vulnerability factors. As the first volume of "District Epidemiological Profile", this document gives an overview of the HIV epidemic scenario in each of the 104 districts from the states of Madhya Pradesh, Punjab, Uttarakhand and Rajasthan.

This document would be useful to a wide audience including the HIV programme managers in the districts and states, policy makers at all levels, as well as for researchers and academicians as a quick reference guide to the HIV/AIDS situation in the districts.



National AIDS Control Organisation

India's voice against AIDS Department of AIDS Control

Ministry of Health & Family Welfare, Government of India 6th Floor, Chanderlok Building, 36, Janpath, New Delhi-110001 www.nacoonline.org

District Epidemiological Profiling Using Data Triangulation

FACT SHEETS

(Madhya Pradesh, Punjab, Rajasthan, Uttarkhand)

DECEMBER 2012



RAJASTHAN

DISTRICT EPIDEMIOLOGICAL PROFILING: FACT

SHEETS

VOI-











National AIDS Control Organisation

India's voice against AIDS Department of AIDS Control Ministry of Health & Family Welfare, Government of India

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Acknowledgement

For the 'District Epidemiological Profiling' project under NACO, consolidation of all the available information for 539 districts was done from multiple sources such as Surveillance data, Programme data, etc., into a meaningful framework using data triangulation approaches.

This enormous task was possible due to the involvement and ownership of district level programme managers and staff of service delivery units. The efforts done by the district level personnel including the DAPCU teams, Counselors, TI staff and others who were actively involved in the entire process are highly appreciated.

The collaborative effort of the State Coordinating Agencies and the State AIDS Control Societies, who implemented the exercise, starting from identifying programme questions, performing quality checks and data validation, preparation of data tables, and compiling data for development of district profile reports, is sincerely acknowledged.

The financial support to this exercise provided by the partner agencies including UNAIDS, USAID, BMGF and PHFI are greatly acknowledged.

Special thanks to the relentless efforts made by the National Technical Team including officers from CDC, FHI 360, WHO along with SIMU team at NACO in developing the guidelines and tools, finalizing the district database and preparation of district factsheets.

Acronyms

ANC Antenatal Clinic

ART Anti-Retroviral Therapy

BB Blood Bank

DLN District Level Network of HIV Positive People

FSW Female Sex Workers

HIV Human Immunodeficiency Virus

HRG High Risk Groups

HSS HIV Sentinel Surveillance

ICTC Integrated Counseling and Testing Centre

IDU Injecting Drug Users

MSM Men who have Sex with Men

NACO National AIDS Control Organisation

NACP National AIDS Control Programme

NGO Non-Governmental Organisation

PLHIV People Living with HIV/AIDS

PPTCT Prevention of Parent to Child Transmission

RTI Reproductive Tract Infections

STD Sexually Transmitted Diseases

STI Sexually Transmitted Infections

TI Targeted Intervention

Introduction

The National AIDS Control Programme (NACP), since its third phase (2007-12) has a strong focus on district level planning, implementation and monitoring of interventions for prevention and control of HIV. The Programme is generating a rich evidence base on HIV/AIDS through a robust and expanded HIV Sentinel Surveillance system, monthly reporting from over 15,000 programme units, mapping and size estimations, behavioural surveys as well as several studies, research projects and evaluations. District level focus of the programme demands consolidated information that helps better understand HIV/AIDS scenario in each district, identify districts for priority attention and identify programme areas that need focus within a district.

In this context of increased availability of data and requirements of decentralized planning at the district level, NACO had undertaken a project titled "Epidemiological Profiling of HIV/AIDS Situation at District and Sub-district Level using Data Triangulation"/"District Epidemiological Profiling (DEP)" in 25 states (539 districts) in two phases during 2009-10 and 2010-11. This exercise was undertaken with the objective of developing district HIV/AIDS epidemic profiles consolidating all the available information for a district at one place and drawing meaningful inferences using data triangulation approaches.

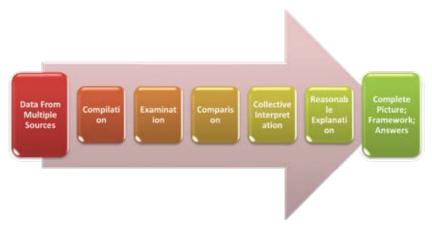
While the National Technical Team developed guidelines and tools, the project was implemented as a collaborative effort of State AIDS Control Societies and identified public health institution in each state (State Coordinating Agency). The most important aspect of this exercise was the involvement and ownership of district level programme managers and staff of service delivery units in the entire process starting from identifying programme questions, performing quality checks and data validation, preparation of data tables and making them responsible for development of their respective district profiles. Thus, two key achievements of this exercise were institutional strengthening and capacity building of programme staff in data analysis and data use.

This technical document is an outcome of the data triangulation process and consists of a snapshot on the district background, and on the HIV epidemic profile of each district based on the updated information on HIV Sentinel Surveillance, monthly programme data and key vulnerability factors. As the first volume of "District Epidemiological Profile", this document gives an overview of the HIV epidemic scenario in each of the 104 districts from the states of Madhya Pradesh, Punjab, Uttarakhand and Rajasthan.

Methodology

Concept of Data Triangulation: Data Triangulation is an **Analytical Approach** that synthesizes data from multiple sources, to improve the understanding of a public health issue and guide programmatic decision-making to address the issue. By putting different bits of information from different sources into a meaningful framework, it explains and improves the understanding of HIV/AIDS scenario in the district. By providing answers to vital programme questions, it helps in taking effective decisions for planning and implementation of HIV prevention and control efforts. It helps understand the gap between need and programme response and also helps identify the information gaps that hinder effective planning.

The basic principle of Data Triangulation is "To analyse and interpret a dataset in the light of information emerging from other datasets, so that the synthesis offers a better understanding of the issues than what will be inferred from a single dataset." Triangulation involves **compilation**, **examination**, **comparison** and **collective interpretation** of data from multiple independent data sources, followed by **reasonable explanation** of facts pertaining to the issue under consideration. The explanation is aimed towards developing a comprehensive picture of the issue, building an epidemiological framework that depicts the possible interplay among various factors and answering some pre-specified questions. Schematic representation of processes involved in Data Triangulation is presented below.



Other key features of the process of Data Triangulation are:

- 1. Gives importance to every bit of information
- 2. Helps overcome limitations and biases inherent in each dataset
- 3. Adds value to each dataset and improves their utility
- 4. Gives high importance to quality analysis of data and undertakes thorough quality checks and validation
- 5. Indicates the level of reliability in any inference or conclusion

Framework of District Epidemiological Profiling (DEP): DEP has two broad components — Descriptive Analysis and Triangulation. The following table summarises the two components.

Components of District Profiling	What it Does?	Guiding Elements	Action To Do	Output
Descriptive Analysis	Describes (What? Who? When? Where?)	Themes	Analyse Data & Describe the Themes	Descriptive Section of District Report
Triangulation	Explains (How? Why?)	Questions	Triangulate Data & Answer the Questions	Synthesis Section of District Report

Descriptive analysis of different datasets is organized into the following four thematic areas/themes.

- 1. Current state of HIV epidemic (Levels, Trends, Differentials and Burden of HIV; Profile of PLHIV)
- 2. Drivers of Epidemic (Size and profile of risk groups; Vulnerabilities STIs, Risk Behaviours, Migration, Contextual factors/Regional vulnerabilities)
- 3. Programme Response and Gaps
- 4. Information Gaps

Triangulation synthesizes/triangulates the data on the following three elements to explain the inferences arrived at in the descriptive analysis and provide answers to the programmatic questions.

- 1. Information on HIV and STIs in Different Population Groups (Epidemiological data)
- 2. Information on Vulnerabilities (Mapping and Behavioural data on Risk Groups, District Vulnerabilities)
- 3. Information on Programme Response (Programme data)

Triangulation may be of information on same data element from different data sources or of information on different data elements. Triangulation may be done in time plane or geographical plane.

Process of District Epidemiological Profiling: The process starts with identifying a broad set of important, actionable and appropriate questions that the programme wants to find answers to, in a given region, and revisits and refines the questions at every step of the process. The process of DEP has the following steps:

- **Step 1:** Understanding Thematic Areas and Questions for District Profiling and Triangulation
- **Step 2:** Review of Data Sources and Assessment of Data Availability in the District
- **Step 3:** Decision on Themes to be described and Questions to be answered for the district
- **Step 4:** Compilation of Secondary Data
- **Step 5:** Quality Check for Completeness, Correctness and Consistency

- **Step 6:** Data Validation, Adjustments and Filling Data Gaps
- **Step 7:** Preparation of Data Tables with clean data for analysis
- **Step 8:** Data Analysis, Interpretation and Inferences; Describe Thematic Areas
- **Step 9:** Data Triangulation (Hypotheses Building; Answer Triangulation Questions)
- **Step 10:** Preparation of District and State Reports
- **Step 11:** Discussions and Consultation with SACS, Local experts, District level programme managers and service delivery functionaries on draft reports
- **Step 12:** Presentation and Discussion of Draft Reports with National Technical Team
- **Step 13:** Finalisation of District and State Reports

Important Outcomes of District Epidemiological Profiling may be summarized as below.

- 1. Cleaning up and validation of Programme data since 2004
- 2. Systematic compilation of all the data related to HIV for each district at one place for routine use
- 3. District Reports describing the profile of HIV epidemic and programme response in each district
- 4. Development of Framework for Re-prioritisation of districts under the programme
- 5. Prioritisation extended upto sub-district/block level with high priority blocks identified
- 6. Identification of Information Gaps at district and state level for planning Strategic Information Activities
- 7. Capacity building of district level programme managers and staff of service delivery units in handling and analyzing data, enabling them to understand the importance of the data they generate and the need for ensuring its quality, and appreciate the use of data for programme review, decision-making and effecting improvements.
- 8. Enhanced understanding among the programme managers of HIV epidemic and response in the state and different districts
- 9. Better use of data in developing District and State Annual Action Plans
- 10. Institutional Strengthening (building state level resource pools) and fostering linkages between programme units and academic institutions for addressing Strategic Information needs in the programme

Data Sources used for District Epidemiological Profiling

Thematic areas for HIV Epidemiological Profiling	Major Sources
HIV Levels, Trends and Differentials	HIV Sentinel Surveillance (HSS); Integrated Biological & Behaviroual Assessment (IBBA); ICTC data; PPTCT data; Blood bank data; NFHS-III; Any other HIV prevalence studies
STI Levels, Trends and Differentials	HSS; Behaviroual Surveys (BSS, IBBA, BTS, etc.); STI Clinic data; Targeted Intervention (TI) data; NFHS — I,II & III; DLHS — I, II & III; Other Behavioral studies
HIV burden in the district	HIV estimations
Size Estimates of General Population and Other Risk Groups	Census Population Projections; Mapping of HRG; TI data
Profile, Turn-over & Migration of key risk groups	HSS; IBBA; BSS; Mapping of HRG; ICTC data; STI Clinic data; TI data; Other Studies on High Risk Groups; DLHS
Size & Patterns of Migration among General Population	Census data; Mapping of Migrants; Population Council studies; Other studies on migrants
Risk Behaviours and Prevention Practices among key risk groups and general population	BSS; IBBA; DLHS; TI data; Mapping of HRG; Other published/ unpublished data
Profile of PLHIV	HSS; IBBA; ICTC data; PPTCT data; ART data; Positive person networks; Blood Bank Data; NFHS-III; Any other HIV prevalence studies
District Vulnerabilities	Local Knowledge; Open sources such as Wikipedia; District Websites; State Government Websites; etc.
Programme Response	Programme reporting through CMIS

Specific Notes on Fact sheets

- 1. Each district fact sheet has two parts: narrative part consisting of background along with a map, HIV epidemic profile and key recommendations, and a tabular part consisting HIV levels and trends, PLHIV profile, block-level details, vulnerabilities and programme response. While the narrative part gives an overview of the district HIV/ AIDS profile, the table provides detailed information about the HIV/AIDS scenario in the district.
- 2. Background gives a brief overview of the district with respect to its geographic location, key demographic information like total population with male-female distribution, literacy status based on 2011census. The section also describes the district characteristics or contextual factors that makes it vulnerable to spread of HIV.
- 3. Epidemic profile describes the thematic areas mentioned above (under the data sources) for each district based on the available information.
- 4. From DLHS-III, percentage of ever married women aged 15-49 years who have heard of HIV/AIDS and RTI/STI have been taken as awareness indicators among women for HIV and RTI/STI respectively.
- 5. 'Key recommendations' is the final section of the factsheet where 'Triangulation' of data is attempted to highlight the key programme priorities for the district based on the HIV epidemic profile and programme gaps. Any future potential for spread of infection, if indicated by any information or results, is highlighted and appropriate action to address the situation is suggested. On the basis of this analysis, recommendations for improving existing programme, and the need for initiation of new programmes, etc. are highlighted. The recommendation section also highlights information gaps, if any.
- 6. Data on ANC utilization mentioned in the table refers to the proportion of women who received at least three or more antenatal checkups (Data source: DLHS-III).
- 7. HIV positivity rates among HSS-ANC, PPTCT and Blood bank attendees are used to represent levels and trends of HIV Infection among general population. Level is interpreted as high (HIV positivity>1%), moderate (HIV positivity = 0.5-1%) or low (HIV positivity<0.5%). HIV trend is interpreted as rising, stable or declining.
- 8. HIV positivity rates among HSS-HRG, HSS-STD and ICTC general clients disaggregated by sex and nature of client (direct walk-in and referred) are used to represent levels and trends of HIV Infection among high risk groups and vulnerable population. Level is interpreted as high (HIV positivity>10%), moderate (HIV positivity = 5-10%) or low (HIV positivity<5%). HIV trend is interpreted as rising, stable or declining.
- 9. Positivity at HSS, PPTCT, Blood bank and ICTC sites are presented only for those years where the sample size is valid i.e. HSS-ANC: 300 tested, HSS-HRG/STD: 187 tested, ICTC (male + female/direct walk-in + referred): 600 tested, PPTCT and BB: 900 tested.
- 10. HIV positivity among PPTCT and ICTC attendees at sub-district level wherever data is available is presented under block level details.

- 11. Size, demographic and risk profile of PLHIV in a district is inferred from three data sources: ICTC data, ART Registration data and data from PLHIV Network in the district.
- 12. Information on major vulnerabilities that are influencing the epidemic/high risk behaviour i.e drivers of the epidemic are included under "vulnerabilities" section. They include
 - a. Size and Profile of HRG
 - b. STIs levels and trends
 - c. Migration patterns
 - d. District Vulnerabilities/ Contextual Factors (refer background)
- 13. Information on size and profile (demographic or sub-typology) of HRG is available from the mapping data. Size of HRG as proportion of population has been stated wherever available, for comparison purposes. The Taluks/blocks with high concentration of different HRGs has been given under block level details, wherever available. TI target and coverage of HRG population are also mentioned, wherever available under "HRG size".
- 14. Based on CMIS-STI data, number of episodes of STI/RTI managed using syndromic approach and VDRL/RPR test results for syphilis in the district are given under STI/RTI.
- 15. Wherever possible, an attempt has been made to describe the male out-migration patterns in the district based on census 2001 data. The table also includes proportion of male migrants going to other states (inter-state) along with top five destination districts.
- 16. The section on programme response describes number of facilities under NACP-III and services provided in the district till 2011. This covers both prevention interventions and care, support and treatment interventions.
- 17. The number of TIs mentioned in the document includes only NACO-supported TIs. Migrant TIs include source, transit and destination TIs.

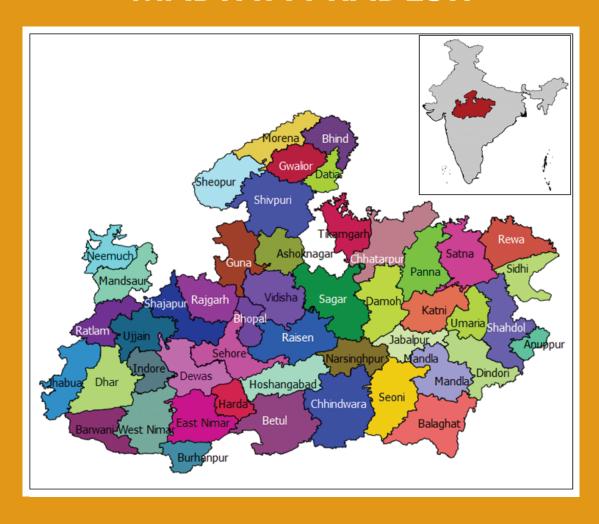
Glossary

- 1. ART Centres: Free first line and second line Anti-Retroviral Treatment (ART) is provided to clinically eligible PLHIV at designated centres across the country. As soon as a person is detected to be HIV positive at ICTC, he is referred to the ART centre for pre ART registration. At the time of registration, all the baseline investigations are done including CD4 count. If the person is clinically eligible for treatment, he is started on first line ART. Otherwise, they are followed up every six months for CD4 count. The number of PLHIV on ART mentioned in the document refers to those on first line ART at NACO supported ART centres. Another 30,000 PLHIV are estimated to be receiving ART in private sector.
- Blood Safety: Under the Blood Safety programme, blood banks across the country are supported and voluntary blood donation is strongly promoted to ensure that every blood unit collected is screened and is free from HIV and other infections.
- 3. **Community Care Centres (CCC):** CCCs have been set up in the non-government sector with the objective of providing PLHIV with psycho-social support, counseling for drug adherence and nutrition, treatment of Opportunistic Infections, home-based care, referral and outreach services for follow up, besides tracing patients lost to follow up (LFU) and those missing to get ARV drugs as per schedule.

- 4. Condom Promotion: NACO's Condom Promotion strategy focuses on two aspects: ensuring availability and creating demand for condoms. There are 2 channels of condom supply by the Government, namely free and socially marketing. Under the pogramme, free condoms are distributed to High Risk Groups through TI projects and service delivery outlets such as ICTCs, STI Clinics etc. Under the Targeted Condom Social Marketing Programme, condoms are provided at subsidized rates for HRG as well as general population through traditional and non-traditional condom outlets, rural outlets, and outlets at TIs and truck halt points.
- 5. **Core Composite TI:** TI that provides prevention services to more than one high risk group.
- 6. **Counseling and Testing Services:** Integrated Counseling and Testing Centre (ICTC) is a place where a person is counselled and tested for HIV on his/her own volition (Client Initiated) or as advised by a health service provider (Provider Initiated) in a supportive and confidential environment. These centres are the entry points for reinforcing HIV prevention messages and linking HIV positive people to HIV care, support and treatment services. There are several contexts for providing HIV testing services voluntary counseling and testing, prevention of parent to child transmission, screening of TB patients and diagnostic testing among symptomatic patients.
- 7. **Drop-in-Centres (DIC):** DICs is a platform to provide PLHIV psycho-social support, linkages with services and counseling on drug adherence, nutrition, livelihood and legal issues. They have been set up in A and B category districts and are managed primarily by PLHIV networks.
- 8. **High Risk Groups (HRG):** Populations with high risk behaviour for contracting HIV, include Female Sex Workers (FSW), Men who have Sex with Men (MSM), Injecting Drug Users (IDU), Single Male Migrants and Long Distance Truckers. The last two groups are also referred to as Bridge Population.
- 9. **Link ART Centres:** In order to facilitate the delivery of ART services nearer to the homes of beneficiaries, Link ART Centres, located mainly at ICTC in the district/sub-district level hospitals, were set up and linked to a nodal ART centre within accessible distance.
- 10. PLHIV Networks: Networks of HIV Positive persons and women are formed at national, state and district levels. Such networks act as platforms for people living with HIV to share their concerns, seek support and legal aid. They address stigma and discrimination related cases among their members and also provide social support for those isolated by their family and community. The networks are encouraged to advocate and promote the utilisation of HIV related services.
- 11. **Prevention of Parent to Child Transmission (PPTCT):** Mother to child transmission of HIV may take place during pregnancy, during childbirth or through breastfeeding. To prevent this, under PPTCT programme, every pregnant woman visiting antenatal clinics or visiting hospital at the time of delivery are tested for HIV. If a pregnant woman is positive, she is closely followed up to ensure institutional delivery. At the time of delivery, the pregnant woman and the new-born baby are given single dose of Nevirapine to prevent mother to child transmission of HIV.
- 12. **Red Ribbon Clubs (RRC):** Red Ribbon Clubs formed in colleges provide a forum for students to come together to share information on HIV/AIDS and safe behaviours, discuss related issues and also motivate them to participate in voluntary blood donation.

- 13. **STI/RTI Services:** Sexually Transmitted Infections/Reproductive Tract Infections increase the risk of HIV transmission significantly. STI/RTI services are aimed at preventing HIV transmission and promoting sexual and reproductive health under NACP-III and Reproductive and Child Health (RCH II) of the National Rural Health Mission (NRHM).
- 14. **Targeted Intervention (TI):** TIs are peer-led preventive interventions focused on HRG and bridge population, implemented by Non-Government Organisations (NGO) and Community-based Organisations (CBO) in a defined geographic area. They provide prevention services such as behavioural change communication, condom distribution, STI/RTI services, needle and syringe exchange, opioid substitution therapy, referrals and linkages to health facilities providing HIV/AIDS services, community mobilisation and creating enabling environment.

MADHYA PRADESH



Balaghat, Madhya Pradesh

Background:

Balaghat is a tribal district situated in the Jabalpur division in Southeastern part of Madhya Pradesh. It has a population of 17.01 lakhs with a sex ratio of 1,021 females per 1,000 males; a female literacy rate of 69.7% and an overall literacy rate of 78.3% (2011 Census). The economy of Balaghat district mainly depends on agriculture. Since only 30% of the total land is cultivable, there is out-migration for labor work, from rural pockets in Balaghat to Raipur, Chhattisgarh and the neighboring Nagpur district of Maharashtra. There are no major industries in Balaghat; however, the presence of manganese and copper mines attracts in-migration. Due to mining activity many areas of Hukwa, Sirodi and Baravali blocks have become trucking halt points. The major highways that pass through Balaghat, Madhya Pradesh State Highways are National Highways 11 and 26.



HIV Epidemic Profile:

- Based on PPTCT and Blood Bank data, the level of HIV positivity as per 2011 data was low (0.04-0.23%), with a stable to declining trend. HIV prevalence as per HSS-ANC data was 0.50% in 2010 and had a stable to declining trend.
- HIV positivity among ICTC attendees in 2011 was low among direct walk-in (2.03%), and referred (1.10%) clients, as well as among male (1.78%) and female (1.34%) clients; the overall trend among ICTC attendees was declining with increase in the number of clients being tested for HIV
- As per mapping conducted in 2008, FSW (895, 55% of total HRG) was the largest HRG in the district, followed by MSM (414, 25% of total HRG) and IDU (318, 20% of total HRG); of the FSW, 66.6% were home-based and 33.4% were street-based.
- The Syphilis positivity rate among STI clinic attendees in 2010 was 0.9% and the number of STI episodes treated were 6823 which in 2011 increased significantly compared to previous year.
- HIV and RTI/STI awareness rates among women were 34.3% and 14.6% respectively (DLHS-III).
- Of the 141 PLHIV registered at the District-level Network (DLN) in 2009, 44% were on ART, 11% were married and 40% were widowed or divorced.
- As per the 2001 Census, 10% of the male population were migrants; 45.9% of them migrated to other states and 10.2% migrated to other districts within the state.
- The top two destinations for out-of-state male migration from Balaghat were to Nagpur and Gondiya in Maharashtra.
- There has been a gradual increase in the number of ICTCs in the district from 2008 onwards with corresponding increase in number of clients under going HIV testing.

- Strengthen ICTCs to include spousal counseling and testing specifically in out migrant areas as well among HRGs of Balaghat district.
- There is a need to generate and better understand the dynamics of HIV transmission among FSW, MSM and IDU, through initiation of HRG sites for HIV Sentinel Surveillance (HSS) or IBBS and further analysis of ICTC/PPTCT and ART data on geographic, age distribution and migration (residence) parameters of it.
- Since the largest HRG is FSW, better assessment of the size and profile of clients population, including migrants and truckers, will further improve understanding of district vulnerabilities.
- Considering that IDUs and MSMs account for 45% of the HRGs in the district, there is a need for a composite TI to be in operation in the
 district to help keep their HIV prevelance as low as possible.
- Parent to child transmissions are high in the district, therefore, it is necessary to better understand the profile of these attendees and their spouses through ICTC and ART data analysis.

Balaghat, Madhya Pradesh

District Population: 17,01,156 (2.3% of MP Population); Female Literacy!: 69.7%; ANC Utilization²: 64%

-			TANK	1000	Twomoles		INC I was also as I NII							denough	History				
		2004	2005	2006		2008	2009	2010	2011		HRG Size			Vallelan	Sallines	Jale Migration	2001 Census		
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HSS-ANC	NT⁴			400	400	400		400		Size Est.	i c			No. out-	1	+			.,
PPTCT	PP					90.0	0.22	0.24	0.23	(Mapping, Year: NA)	895	414	2.8	migration	97LL/ u	32620	597/ 07		31241
	F				,	1686	3168	3727	6162	Jan leter 70	10	25 45	0,	% of male	le c	7 20			7.0.1
Blood Bank	요!	0.40	0.41	0.32	0.33	0.11	0.19	0.06	0.04	70 IOIGI DING	10.66	23.43	19.33						4.37
	₩ 8	1730	2178	2534	3302	4416	4295	7195	6825	% Total Pop.	0.05	0.02	0.05	% of total	al 100	45.86	10.21		43.92
HSS-STD	: \													migration	1	tricts for into	Ton district for inter ctate of attitude	- doite	
	ЬР									Programme					In do	ווורו ווורו	late out in		
HSS-FSW	N									Target									
M264 2311	ЬР									Drogrammo									
INSO-INISINI	IN									Coverage			•						
HALL SOFT	ЬР				-			-		000	Homebased-								
033-100	IN										66.55%;	Kothi-	Daily						
OTO Mala	ЬР		*	*	8.15	*	4.49	3.01	1.78		Brothel	Ϋ́	_=		ur, Gondiya,			dha,	Wardha, Shardara,
ICTC Male	IN		*	*	368	*	698	1562	3090	Typology	-pased	Panthi-			Maharashtra Maharashtra		Chattisgarh Mahar	ashtra Ma	aharashtra
-1	Ы		*	*	2.58	*	2.09	1.37	1.34		NĄ:	NA,		^					
ICIC remaie	N	,	*	*	1007	*	1052	2342	3049		Street	decker-	<u>:</u>						
ICTC Bofornod	ЬP		*	*	4.06	*	1.45	1.08	1.10		based-	N A	₹						
I'C Nelelled	NT		*	*	960	*	1172	2215	3991	L	33.45%								
ICTC Direct	ЬР		*	*	4.10	*	5.47	3.26	2.03	% <25 yrs.	30.51								
Valk-in	IN		*	*	415	*	749	1689	2118	% Married	/6.78						_		
			P.F	HIV Profile,	5002						STI/RTI		-						
					%						2008	5000	\dashv	2011					
	% On ART	% 15-24	% III., Prim.		Widowed					No. episodes treated % Symbilis pos	ted -		259 (6823					
			Edu.	Marileo	divorced					of children			2000	Programme	Response				
ART (140)		10	0		-					No.	2004	2002	2006 2	2007 2008	2009	2010	1102	H	
DLN (141)	44			11	40					FSW TIs		,		- 1	-	2	2		
	Rou	Route of HIV Transmission, ICTC 20	nsmission, ICT	TC 2011						MSM TIs									
	Hetero-	Homo-	7	Needle/	Parent to	<u> — </u>				IDU TIS					,		'		
	sexual	sexnal	B1000	Syringe		UNKNOWN				Comp. TIs	-	-	-		1				
% of Total Pos.	CC 70	. 13	c		$oxed{oxed}$,				ICTCs	-	-	-	1 2	3	7	10		
(N=94)	67.73	2.13	>	>	9.5/	90.1				Total tested ⁵		96	358 1	1375 2218	5089	7631	12301		
			Blo	ck-Level D	etails					Blood Banks	-	-	-	1	-	-	-		
No HPG.EGM	Balaghat,	Waraseoni,	Lalburra,	Baihar,	Birsa,	Paraswada,				STI clinics	-	-	-	-	-	-	-		
VVC 1-10/11	460	285		135	165	52		,		ART centres							1		
No. HRG-MSM										Link ART centres					-	-	-		
No. HRG-IDU			,			,				PLHIV Networks	,				-	-	-		
% Por ICTC	Balaghat,	Balaghat, Waraseoni,	C crainfiel	Ϋ́	۳	Khairlanji,	Ϋ́	Daihar 0	Corid	Red ribbon clubs					∞	∞	∞		
70 FUS., ICIC	21	2	- 1	\rightarrow		0	13	Dallidi, o	DII Sa', O	Comm. care centres	res -								
% Poc PPTCT	Balaghat,	Balaghat, Waraseoni,	lahırra 0	22	Oilue	Ë	Kirnapura,	Raihar 2	Rirca 0	Drop-in-centres	,						'		
	m	2		0	, if	0	0	1	2 (2012)	Condom outlets	,					1452	1288		

* Inadequate sample size; - Data not available; 1 2011 Census; 2 Source: DLHS III; 2 Data presented only for years where sample size is valid (HSS-ANC: 300 tested, HSS-HRG/STD: 187 tested, ICTC: 600 tested, PPTCT and BB: 900 tested); 4 PP = percent positive, NT = number tested; 6 General clients and pregnant women

Barwani, Madhya Pradesh

Background:

Barwani is situated on the south-west side of Madhya Pradesh with the Holy River Narmada as its northern border. The district is surrounded by Satpuda (in South) and Vindhyachal (in North) forest ranges. It has a population of 13.85 lakhs, a sex ratio of 981 females per 1,000 males, and a female literacy rate of 43.1%, with an overall literacy rate of 50.2% (2011 Census). Economically Barwani is entirely dependent on agriculture, with several other small industries developing in the area. There is no major highway that is passing through the district.

HIV Epidemic Profile:

- Based on 2011 PPTCT and Blood Bank data, the level of HIV positivity of the district was low (≤ 0.13%), with a stable trend. HIV prevalence as per 2010 HSS-ANC data was also low (0.25%), showing a decling to stable trend.
- HIV positivity among ICTC attendees in 2011 was low among direct walk-in (2.02%) and moderate among referred (5.12%) clients; also HIV prevalence was low among male (4.43%) and female (2.96%) clients. Overall

HIV positivity trend at ICTC was declining, with increase in the number of clients being tested.



- As per mapping conducted in 2008, FSW (1200, 100% of total HRG) was the only HRG in the district and 100% of them were brothelbased.
- The Syphilis positivity rate among STI clinic attendees in 2010 was 1.2%.
- As per the 2001 Census, 6.08% of the male population were migrants; 19.4% of them migrated to other states and 30.6% migrated to other districts within the state.
- The top two destinations for out-of-state migration were Jalgaon and Dhule in Maharashtra.
- HIV and RTI/STI awareness rates among women were 24.5% and 18.4% respectively (DLHS-III).
- Of the 206 PLHIV registered at the Anti-Retroviral Therapy (ART) center in 2009, 5% were 15-24 years of age, 66% were on ART, 47% were illiterate or only had a primary school education and 52% were widowed or divorced.
- There has been a sudden increase in the number of ICTCs from two to six in 2011.

- Focus on outreach efforts for FSWs, since their presence indicates an opportunity for transmission.
- There is a need for intense interventions in more vulnerable blocks of the district.
- There is a need to better understand the dynamics of HIV transmission among FSWs, either through initiation of HRG sites for HIV Sentinel Surveillance (HSS) or further analysis of ICTC/PPTCT and ART data.
- Since the only HRG in the district is FSW, better assessment of the size and profile of clients population, including migrants and truckers, will
 help in better understanding of district vulnerabilities.

Barwani, Madhya Pradesh

District Population: 13,85,659 (1.91% of MP Population); Female Literacy': 43.1:%; ANC Utilization?: 21.6%

Maintain Maintain				HIV Le	vels and	Trends ³									Vulnerabil	ties			
Part 1,55,5 1,00			2004	2005	2006	2007	2008	9006	2010	2011		HRG				Male Mi	gration, 2001	Census	
No. No.		DD4	0 50	3		0 50	0.05		0.05			FSW	MSM	+		Overall	Inter-state	Intra-state	Intra-district
No. No.	HSS-ANC	NT⁴	400	400	400	400	400		400		Size Est. (Mapping,	1200	0	0	No. out-	33321	6483	10017	16821
NIT NIT	H	ЬР				*	*	0.10	0.10	0	2008)				migration				
N	7	F	,	٠	,	*	*	1031	066	1535	% Total HRG	100	0	0	% of male	6.08	1.18	1.83	3.07
Mile	0	ЬР			0	0.04	0		0.38	0.13					% of total				
Photophysical Part Photoph	Blood Bank	N			4568	5278	5292		6793	6298	% Total Pop.	0.09	0	0	migration	100	19.46	30.06	50.48
NI NI NI NI NI NI NI NI	OES SAIL	ЬР									Programme					Top district f	0 040401	aoiteacion tu	
Ph Ph Ph Ph Ph Ph Ph Ph	UIS-SSH	N									Target		'	'		TOP districts to	or mer-state o	ut-mgration	
Miles Mile	WIGE COM	ЬР					,				Programme	693	'	'					
Photography	W57-55H	N									Coverage	Home							
NIT NIT	IICC PACPA	ЬР										-pased							
Physic P	INICINI-CCTI	N										.%0							
NT 1.0	141	ЬР									F	Brothe				Dhule,	Nagpur,	Nandurbar,	
Ph Ph Ph Ph Ph Ph Ph Ph	001-88H	N									iypology	100%.				rd Ividudiasnird	Manarasnua	Manarasmua	Mariardsritta
NIT	OTC Male	ЬР				9.93	5.02	5.88	4.30	4.43		Street			rs-				
Ph Ph Ph Ph Ph Ph Ph Ph	ICIC Male	N				403	917	1173	860	835		-pased							
MT 1.0	LCTC Formula	ЬР				5.80	3.01	4.02	3.07	2.96	70. 70. 70	0%							
NT 1.0	ICIC remale	N				200	1095	968	815	912	% <25 yrs.	36.51							
NT NT NT NT NT NT NT NT	Females OLD	ЬР				10.16	4.35	5.89	3.80	5.12	D Mallico	ST	I/RTI						
No. No.	ורור עפופוופת	IN				384	942	1087	1025	1113		2008	2009	\neg	2011				
NI	ICTC Direct	ЬР	,	,		5.78	3.55	4.18	3.54	2.02	No. episodes	0	0	645	798				
% O n ART % 15-24 % III, Prim. % Married % Windowed of divorced % O n ART % 15-24 % III, Prim. % Married % Windowed of divorced % O n	Walk-in	F				519	1070	982	650	645	% Syphilis pos.			1.26					
% On ART % 15-24 % III.) Prim. % Married % Widowed or divorced 200 2004 2005 2006 2007 2008 2009 2010				PL	HIV Profile,	2009								1 1	Iram	sponse			
Fig. 10 Fig.		% On ART		% III., Prim. Edu.	%		id or				No. FSW TIs	2004	2005	-	Ш	+	2010	2011	
SS SS SS SS SS SS SS S	ART (206)	99	2	47	7	52					MSM TIs								
Hetero	DLN (215)	28			98	0					IDU TIS					-			
Hetero- Homo- Sexual			Soute of HIV	Transmission,	ICTC 2011						ICTG IIS				-	2	2	9	
Blood Syringe Child Child Unknown Syringe Child Child		Hetero-	Homo-		Needle/	Parent to					Total tested ⁵				_	3100	2665	3282	
Secondary Park Pa		sexual	sexnal	Blood	Syringe	Child	Unknow	_			Blood Banks	-	-	-	1	-	-	-	
S4.29 U D D-tails	% of Total Pos.	00	(i i	(STI clinics	-	-	-	-	-	-	-	
W Slock-Level Details Editor Centers 1 <th< td=""><td>(N=70)</td><td>94.29</td><td>0</td><td>0</td><td>0</td><td>5.71</td><td>0</td><td></td><td></td><td></td><td>AKI centers</td><td></td><td></td><td></td><td></td><td>-</td><td>+</td><td></td><td></td></th<>	(N=70)	94.29	0	0	0	5.71	0				AKI centers					-	+		
W Image: State of this indicated by the state of the state of this indicated by the state of th				B	k-Level	etails					centers					1	_	_	
Machine Methods Meth	No. HRG-FSW										PLHIV					1	-	-	
Thikati, 0 Barwani, 0 Sendhwa, 0 Pati, 0 Rajpur, 0 Raj	No. HRG-MSM	,	,				,				Networks Red ribbon					-			
CTC Rajpur, Thikri, Pansemal, Banvani, Sendhwa, Pati, Khetiya, Others, Niwali, Comm. care Comm. Care Control Care Control Care Care Care Care Care Care Care Care	No. HRG-IDU										clubs					10	10	10	
Thikari, 0 Barvani, 0 Sendhwa, 0 Parisemal, Pati, 0 Rajpur, 0 Khetiya, 0 Niwali, 0 . Gondom outles	% Positive, ICTC	Rajpur, 2.31	Thikri, 2.72	Pansemal, 4.58		Sendhwa, 3.24	Pati, 7.03	Khetiya, 5.49	Others, 8	Niwali, 13.16	Comm. care centers					,			
I IIIKali, U Balwalii, U Seliuliwa, U 1 Fau, U Najpu, U Nieuya, U Niwali, U -	% Positive,	- : - : - : - : - : - :	-	o e e e e e				1	0		Drop-in-centers					-			
	PPTCT	I nikarı, u	Barwani, U	sendnwa, u		Pati, U	Kajpur, U	Knetiya, U	Niwali, U		outlets				1	1	•		

* Inadequate sample size; - Data not available; 1 2011 Census; 2 Source: DLHS III; 3 Data presented only for years where sample size is valid (HSS-ANC; 300 tested, HSS-HRG/STD: 187 tested, ICTC: 600 tested, PPTCT and BB: 900 tested); 4 PP = percent positive, NT = number tested; 5 General clients and pregnant women

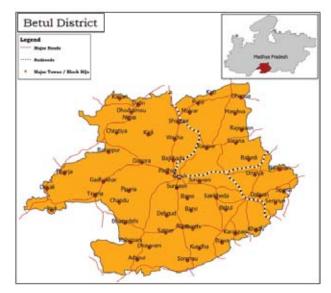
Betul, Madhya Pradesh

Background:

Betul is one of the marginally located southern districts of Madhya Pradesh lying almost along the Satpura Plateau. It has a population of 15.75 lakhs, a sex ratio of 970 females per 1,000 males, and a female literacy rate of 61.6% with an overall literacy rate of 70.1% (2011 Census). Betul's economy is predominantly an agrarian one and due to the large forest cover, it is somewhat also based on forests. However, recently there has been some advancement in the industrial sector of Betul due to factors like good road and rail network and better telecomm facilities. The major highways that pass through Betul district are National Highway 59 and 69.

HIV Epidemic Profile:

- Based on 2010 HSS-ANC, 2011 Blood Bank and PPTCT data, the level of HIV positivity was low (≤ 0.13%); trend was stable for PPTCT but due to lack of data for HSS-ANC and blood bank, their trend was not determined.
- HIV positivity among ICTC attendees in 2011 was low among direct walk-in (1.49%), referred (1.02%) and also among male (1.47%) and female (1.0%) clients; due to lack of data trend was not determined.



- The number of STI episodes treated in the district were 1644 in 2011, which was a significant increase compared to last year.
- As per the 2001 Census, 7.8% of the male population were migrants; 20.1% of them migrated to other states and 29.4% migrated to other districts within the state.
- The top two destinations for out-of-state male migration were Amravati (65%) and Nagpur (22%) in Maharashtra which were a high prevalent state.
- HIV and RTI/STI awareness rates among women were 36% and 44.3% respectively (DLHS-III).
- There was an increase in the number of clients under going HIV testing at ICTCs. The total number of ICTCs in 2011 was four.
- Though there was one FSW and one composite TI, there was no mapping information of any of the HRG in the district.

- Assessment of the size and profile of HRG population will help in better understanding of district vulnerabilities.
- Although there is a low level of HIV epidemic in the district, vulnerability of district in transmission of HIV needs to be analyzed from ICTC/ART and STI data.
- Strengthen outreach programme through awareness campaign especially among women, and around trucking halt points and highways in the district.
- There is a need to better understand the dynamics of HIV transmission among HRGs, either through initiation of HRG sites for HIV Sentinel Surveillance (HSS) or further analysis of ICTC/PPTCT and ART data.
- Parental transmissions are notable, hence, more needs to be done to strengthen PPTCT Programmes.

Wardha, Raipur, Maharashtra Chhatisgarh

Betul, Madhya Pradesh

District Population:15,75,247 (2.17% of MP Population); Female Literacy¹: 61.6:%; ANC Utilization²: 43.2%

Intra-district 28172

50.48 3.97

Vulnera		ndı	100	migration	% of male	dod .	% of total	migration		I			Daily	A.	NA; Amravati, Nagpur, Chandrapur, Wardha,	Non dally injectors-	NA			-		2010 2011	591 1644	2 38	Programme	2006 2007 2008					-	2 2								
	ize	FSW MSM										Home	based- Kothi-	Rrothel Panth-			Street decker-				STIVRTI	2008 2009	0	,		2004 2005				. ,	-		-							
			Cio Ert	(Mapping, Year: NA)	% Total HRG		% Total Pop.		Programme Target	Programme	Coverage				Typology				% <25 vrs.	% Married			No. episodes	rreated % Synhilis pos	on of the second		FSW TIs	MSMTIs	IDU TIS	Comp. Tls	ICICS	Rlood Banks	STI clinics	ART centers	Link ART centers	PLHIV Networks	Red ribbon clubs	Comm. care centers	Drop-in-centers	Condom outlets
	2011			0.13	4594	60:0	4333									1.47	2784	-	2209	1.02	3136	1.49	1808															,		
2	2010	0	399	90.0	3592	0.18	3976	-	-				-	-	-	1.81	3199	1.31	2067	1.80	3063	1.36	2203															-		
HIV Levels and Trends ³	2009			0.30	1661	-	-															٠						-			1			ŀ						
	2008					-	-	-				-	-	-										-	ed or					Unknown		3.17								
d Trends ³	2007						-	-					-	-										e, 2009	% Widowed or	divole				Parent to		6.35	Details	Ŀ						
Levels an	2006						-	-					-	-									٠	₹.	. Warring	Maillea		OC JEJI	ווי ורור צט	Needle/	-y-mgc	4.76	Block-Level Details	ŀ		·				
	2002							-																۵.	% III., Prim.	- Luu.			Idiisiiissio	Blood		3.17	8	ŀ						
	2004			-		-	-	-	-	-	-	-	-	-	-							,			%	+2-0		T /III Jo	Noute of mry framsmission, ICIC 201	-OMOH	Schaal	0								
10000		PP⁴	NT⁴	ЬР	N	ЬР	NT	ЬР	NT	ЬР	IN	ЬР	NT	ЬР	IN	PP	IN	ЬР	N	ЬР	NT	PP	F		% On	NY.			nou	Hetero-	Scyddi	82.54								
		,	HSS-ANC	DDTCT	-	Jacob Dool	SIOUU BAIIK	OLD SUB	U15-661	771	VS-1-561	140k4 33	INSO-INISIMI	III 33H	0.01-661	CTC Male	CI C INIGIR	CTC Female		CTC Referred		ICTC Direct	Valk-in			ART (NA)	DIN (NA)	CEIN (INA)			L of Total Bor	(N=63)		No. HRG-FSW	No UPG MCM	VO. HING-INISINI	No. HRG-IDU	% Positive, ICTC	% Positive,	PTCT

* Inadequate sample size; - Data not available, 1 2011 Census, 2 Source: DLHS III; 3 Data presented only for years where sample size is valid (HSS-ANC; 300 tested, HSS-HRG/STD: 187 tested, ICTC; 600 tested, PTCT and BB: 900 tested); 4 PP = percent positive, NT = number tested; 5 General clients and pregnant women

Bhind, Madhya Pradesh

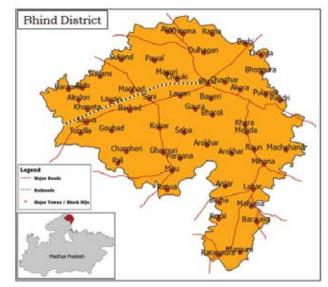
Background:

Bhind district is geographically known for its ravines, fertile land and dense forests. The district is situated in Chambal region in the northwest of Madhya Pradesh and falls under the Chambal Division. It has a population of 17.04 lakhs with a sex ratio of 838 females per 1,000 males, a female literacy rate of 64.0% and an overall literacy rate of 76.5% (2011 Census). The district's economy relies mainly on agriculture and dairy is the main supplementary source of income of the farmers in the district. Animal husbandry is another sector of the economy of Bhind. Most of the industrial activities in the district are concentrated in the city of Bhind. Most of the large and medium scale industries are located at Malanpur. The economic importance of the local forests is limited to fuel only. The major highway that passes through Bhind district is National Highway 96.

HIV Epidemic Profile:

 Based on 2010 HSS-ANC, 2011 PPTCT and Blood bank data, the level of HIV positivity was low (≤ 0.08%). There was a declining trend in HIV positivity among PPTCT

attendees. Due to lack of data, a trend could not be determined for HSS-ANC and blood bank.



- HIV positivity among ICTC attendees in 2011 was low among direct walk-in (3.72%) and referred (1.22%) clients, and also among male (1.25%) and female (3.14%) clients. Due to lack of multiple data point a trend could not be determined.
- The Syphilis positivity rate among STI clinic attendees in 2010 was 0.78% and number of STI episodes treated were 1235 in 2011.
- As per the 2001 Census, 5.7% of the male population were migrants; 26.7% of them migrated to other states and 38.97% migrated to other districts within the state.
- The top two destinations for out-of-state male migration were Ahmedabad in Gujarat and North East Delhi.
- HIV and RTI/STI awareness rates among women were 34.7% and 20.6% respectively (DLHS-III).
- Number of ICTCs increased from one to three in 2011.
- There was no information available for the HRGs in the district.

- Compilation and analysis of ICTC-PPTCT and STI data with focus on characteristics like age, migration, occupation and geographic areas of
 positive people would provide knowledge on sexual dynamics and spread of HIV in this district.
- Possibility of vulnerability along NH-96 around trucking halt points and highways in the district should be explored.
- Current interventions for truckers and migrants across the state should be strengthened which may have indirect gain in reduction of risk and vulnerabilities in this district.
- Assessment of the size and profile of HRG population will help in better understanding of district vulnerabilities.
- The percentage of transmission via parent to child are high. Therefore, there is a need to better understand the profile and dynamics of clinic attendees and their spouses, through analysis of ART and ICTC data.

3688

3602

3070

2009

2008

9

9

19

Bhind, Madhya Pradesh

District Population: 17,03,562 (2.3% of MP Population); Female Literacy¹: 64.0%; ANC Utilization²: 18.6%

Intra-district 15392

Overall

Male Migration, 2001 Census Inter-state 12016 34.27

38.97

26.76 1.54

100

% of total migration

Top districts for inter-state out-migration

1.97

17501 2.24

44909

No. out-migration

5.76

% of male pop.

South Delhi

North West Delhi

Surat, Gujrat

Ahmadabad, North East Gujarat Delhi

			⋛	IV I evels and Trend	Trance								5	Village
		2004	2005	2006	2007	2008	5009	2010	2011		HRG Size	ze		Г
0	PP4	,	,					0			74.00		-	Г
HSS-AINC	NT⁴							400			FSW	MSM	חמו	
DDTCT	ЬР						0.33	0.12	0.08	Size Est.				
	F	,					3070	2409	2408	(Mapping, Year: NA)				Т
Jaca boola	ЬР	-	-	-	-	-	-	*	*	% Total HRG			-	Т
Jour ballk	NT	-		-	-	-	-	*	*	% Total Pop.			•	
OES SEE	ЬР			-		-				F		1		Т
010-00	N									Programme larget			-	Т
WO D	ЬР									Programme Coverage				Т
H33-F3W	NT					-					Home has od-	Kothi		
DACK DOLL	ЬР				-	-					NA;	N N	Daily	
INICINI-CO	N	,	,								Brothel	Panthi-	Injectors-	, b
-	ЬР									Typology	based-	N.		>
HSS-IDU	N										NA;	Double	injectors-	ها، حا
CTC harle	ЬР							4.70	3.14		Street has od-	decker-		
- Male	NT							511	478		NA	<u> </u>		
CTC Famula	ЬР							2.79	1.25	% <25 vrs.				
IC remale	N							682	802	% Married				
OTO Bafarrad	ЬР							2.65	1.22		STI/RTI	II.		1
L Releired	NT			-	-	-	-	793	305		8000	2000	2010	2011
ICTC Direct	Ы							5.50	3.72		2007	5007	$^{+}$	5 8
alk-in	NT				-			400	37	No. episodes treated	5	0	1.26	1235
			P.	HIV Profile	9, 2009					% Syphilis pos.				
	% On ART	% 15-24	% III., Prim. Edu	% Marriad	% Widowed or	d or				No.	2004	2005	2006 2	2007
ART (NA)			- Ludi.	nailien .	nikolica					FSWTIs				
DIN (NA)						T				MSM TIs				
6.4.1	Rc	Route of HIV Transmission, ICTC 201	ransmission,	ICTC 2011						IDU TIs				
	Hetero-	Homo-	2	Needle/	Parent to		Γ			Comp. TIs				
	sexnal	sexnal	BIOOD	Syringe	Child	UNKNOWN				ICTCs	-	-	-	-
% of Total Pos.	84	4	4	0	80	0				Total tested ⁵	٠ ,	' -		٠ -
=23)							-			Sim Book	- -			- -
			B	Block-Level	Details					A DT contact	1	-	-	-
No. HRG-FSW										Link ADT contour		+	+	1
No. HRG-MSM										CHINAMI CONCOL				1
No. HRG-IDU										PLHIV Networks				٠ ٠
% Positive, ICTC			,	,		,	,	1	,	Comm. care centers			 	
% Positive,		,			,				,	Drop-in-centers				$ \cdot $
TOTA														

* Inadequate sample size; - Data not available; ' 2011 Census; 2 Source: DLHS III; 3 Data presented only for years where sample size is valid (HSS-ANC: 300 tested, HSS-HRG/STD: 187 tested, ICTC: 600 tested, PPTCT and BB: 900 tested); 4 PP = percent positive, NT = number tested; 5 General clients and pregnant women

10

Bhopal, Madhya Pradesh

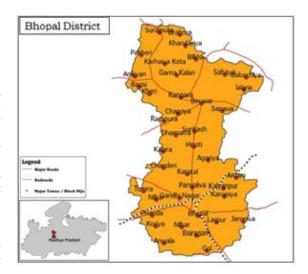
Background:

Bhopal District is bound by the district of Guna to the north, Vidisha to the northeast, Raisen to the east and southeast, Sehore to the southwest and west and Rajgarh to the northwest. Bhopal is the capital of Madhya Pradesh. It has a population of 23.68 lakhs, a sex ratio of 911 females per 1,000 males, and a female literacy rate of 76.6% with an overall literacy rate of 82.2% (2011 Census). The economy of Bhopal is mainly based on industries. The major industries in the old city of Bhopal are of electrical goods, cotton, chemicals and jewellery. Other industries include cotton and flour milling, cloth weaving and painting, as well as matches, sealing wax, and sporting equipments. Bhopal is well connected by rail to all parts of the country. The major highways that pass through Bhopal district are National Highway 12, 34 and 86.

HIV Epidemic Profile:

- Based on 2010 HSS-ANC, 2011 Blood Bank and PPTCT data, the level of HIV positivity was low (ranges 0.10-0.25%) with a stable trend
- Based on 2010 HSS data, HIV prevalence was moderate among both MSM (8.5%) and IDU (5.5%).
- HIV positivity among ICTC attendees as per 2011 data was moderate among direct walk-in (5.41%) but low among referred (2.46%) clients, and as well as among male (3.67%) and female (2.35%) clients; with an overall declining trend and an increase in the number of clients being tested at ICTC.
- As per mapping conducted in 2008, MSM (1496, 43.1% of total HRG) was the largest HRG in the district, followed by IDU (1370, 39.5% of total HRG) and FSW (602, 17.3% of total HRG).
- The Syphilis positivity rate among STI clinic attendees in 2010 was 0.69% and the number of STI episodes treated were 7941 in 2011, a significant increase in the number compared to previous year.
- As per the 2001 Census, 3.09% of the male population were migrants; 38.07% of them migrated to other states and 46.4% migrated to other districts within the state.
- The top two destinations for out-of-state male migration were Raipur in Chhattisgarh, Mumbai, Thane and Pune in Maharashtra which were high prevalent states.
- HIV and RTI/STI awareness rates among women were 72.5% and 18.9% respectively (DLHS-III).
- Of the 444 PLHIV registered at the Anti-Retroviral Therapy (ART) centre in 2008, 11% were 15-24 years of age, 51% were on ART, 63% were illiterate or only had a primary school education and 62% were widowed or divorced.
- There has been a rapid increase in number of ICTCs in the district from 2008 onwards with corresponding increase in number of HIV testing
- There were targeted interventions (TI) sites for all HRG types.

- MSM and IDU constitute around 80% HRGs; hence HIV positivity data evidenced in HSS 2010 data suggests strengthening the quality of
 interventions in high risk group population of Bhopal.
- HIV Positivity at ICTC suggests continuing transmission among male and female in Bhopal along with risky behavior. So there is a need to
 establish a mechanism to understand the dynamics of HIV transmission among HRG and migrant population. Demographic and geographic
 mapping of positivity with sexual dynamics study is recommended to understand source of HIV transmission for interventions.
- Large contribution of HIV is through needle and syringe (route of transmission) indicating the role of sexual work, including homosexual
 transmission and drug sharing among IDUs which was also evidenced by HIV positivity among HRGs in Bhopal district emphasizing saturation
 of these groups by TI/ NGOs.
- Indirect evidence of 62% widow's among all ART patients suggests to strengthen early testing and linkages of patients from ICTC to ART centers with focused prevention approaches in preventing spousal/sexual partner transmission.



Nagpur, Maharashtra

Bhopal, Madhya Pradesh District Population; Female Literacy: 76.6%; ANC Utilization: 59.4%

Intra-district

5861 0.60 15.53

2,	H				Ĺ		Ĺ									TC Male		CTC Fomalo		FOTO Deferred		ICTC Direct		-	%				He	\dashv	% of Total Pos. 72		No. HRG-FSW	No. HRG-MSM	No. HRG-IDU	% Positive, ICTC	% Positive Far
2	F	4d.	NT⁴	PP	F	PP	F	PP	٦	PP	IN	PP	F	PP	IN	PP	IN	ЬР	M	PP	NT	PP	Þ	-	% On ART %	51	١,	Rout	Hetero-	\dashv	72.17		ŀ,	ļ.		Fanda, [+
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HIV Levels and Trends ³	2005							*	*	0.40	250					17.89	408	23.44	192	17.16	443	26.75	157	PI	% III., Prim. Edu.	63	,	Route of HIV Transmission, ICTC 201	Blood		2.49	8				Others, 6.48	Others
HIV Levels an	2006	0	400					*	*		-					15.47	543	18.01	211	13.06	513	22.82	241	≩.	% Married	24		ICTC 2011	Needle/	Syringe	17.87	ork-I evel	,				
d Trends ³	2007	0.75	400	0.21	3782			*	*				,	,		17.14	671	17.15	379	19.84	338	15.59	299	e, 2009	% Widowed or divorced	62			Parent to	Child	3.39	Details					
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	2011			0.10	19626	0.12	38474									3.67	6008	2.35	5832	2.46	11464	5.41	2735										Ŀ		,		
		Size Est. (Mapping,	2008)	% Total HRG		% Total Pop.	Programme	Target	Programme	Coverage				Typology				% <25 yrs.	% Married		oponico oly	In treated	% Syphilis pos.		No. FSW TIs	MSMTIs	IDU TIS	Comp. Tls	Total tested ⁵	Blood Banks	STI clinics	ART centers	Centers	PLHIV Networks	Red ribbon	Comm. care	Dron-in-centers
	HRC	FSW 602		17.36		0.03				Пошо	hasad-	NA;	Brothel	pased	NA;	-pased	A	•	•	S	7008	0	,	H	2004		•	. ,	- 605	2	2			- 8			
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* Inadequate sample size; - Data not available; 1 2011 Census; 2 Source: DLHS III; 3 Data presented only for years where sample size is valid (HSS-ANC; 300 tested, HSS-HRG/STD: 187 tested, ICTC: 600 tested, PPTCT and BB: 900 tested); 4 PP = percent positive, NT = number tested; 5 General clients and pregnant women

Burhanpur, Madhya Pradesh

Background:

Burhanpur is situated on the bank of river Tapti. Burhanpur district was created on August 15, 2003, from the southern portion of Khandwa district. It has a population of 7.57 lakhs, a sex ratio of 951 females per 1,000 males, and a female literacy rate of 57.1% with an overall literacy rate of 65.2% (2011 Census). Burhanpur is best known for its textile industries. It is the largest hub for power loom industry in the state. There is no major highway that passes through Burhanpur district.

HIV Epidemic Profile:

- Based on 2010 HSS-ANC data, there was moderate HIV prevalence (0.50%) in the district; the prevalence has remained at moderate level in last three survey rounds.
 2011 PPTCT and Blood Bank data showed low postivity (0.09- 0.12%), with a stable to declining trend.
- HIV positivity among ICTC attendees in 2011 was moderate among direct walk-in (8.89%) clients, and low among referred (1.37%), as well as among male (3.59%) and female (1.54%) clients, with an overall declining

trend. HIV positivity among direct walk-in and male clients have remained very high for all the years till 2009, however, number tested were also fewer.

Burhanpur District



- The number of STI episodes treated in 2011 were 1558 although STI clinic was present since 2004.
- As per mapping conducted in 2008, FSW (666, 81.4% of total HRG) was the largest HRG in the district, followed by MSM (152, 18.5% of total HRG).
- Of the 399 PLHIV registered at the Anti-Retroviral Therapy (ART) centre in 2009, 2% were 15-24 years of age, 68% were on ART, 60% were illiterate or only had a primary school education and 53% were widowed or divorced.
- Number of ICTCs increased gradually from 2010 onwards.

- Data assessment and analysis of positive people at ICTC/PPTCT, ART and Blood Bank is recommended to understand the source and spread
 of HIV.
- Since the largest HRG is FSW, better assessment of the size and profile of clients population, including migrants will further improve understanding of district vulnerabilities.
- Improved data availability of migration, HRG size and bio-behavior will give a better insight to the district HIV vulnerabilities.
- The district needs to continue to focus on HIV prevention, especially among people who have high risk behaviour. Despite having over 800 FSWs and MSMs, the district did not have an operating TI till 2011. System needs to evolve in order to cover HRGs with prevention programmes.

Burhanpur, Madhya Pradesh

District Population: 7,56,993 (1.04% of MP Population); Female Literacy': 57.1%; ANC Utilization²: NA

-			HIV Leve	els and Trer	-spu									Vulnerabili	abilities				
		2004	2005	2006	2007	2008	2009	2010	2011		HRG Size					Male Migra	Male Migration, 2001 Census	snsus	
	PP⁴			0	0.75	0.75		0.50		ı	FSW	MSM	M			Overall	Inter-state	Inter-state Intra-state Intra-district	Intra-district
HSS-ANC	NT⁴			400	400	400		399		Size Est.	999	153	c	9	No. out-				
TOTAG	ЬР					0.40	0.40		0.12	(Mapping, 2008)	900	761	>	mig	migration				
- L	IN					1000	1514		4254	Od Total	C	0		%	% of male				
0	Ы						0.10		0.09	% IOTAI HRG	81.42	8.38	О	Dop.					
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E S	ЬР									/o lotal l op:	000	20:02	,	mig	migration				
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HCC MCM	ЬР										Home	144.7							
IVICIVI-CCT	Þ										based-		Daily						
-14	Ы										NA; Brothel	Panth-	Injectors-	_					
UZI-CCH	IN			-				-		Typology	based-	NA;	Non doi:			,			
OTCI MINI	ЬР	-	-	23.66	18.91	12.65	11.48	-	3.59	1	NA,	Double	injectors-	_					
IC IC INIQIE	IN		-	317	518	553	792	-	1615		based-	decker-	N N						
ICTC Fomolo	ЬР			5.01	2.95	4.02	3.09	-	1.54		NA	NA							
ICIC I elliale	Þ			518	2333	1441	1745	,	2791	% <25 yrs.									
ICTC Poforod	PP		-	8.20	3.90	4.66	3.64	-	1.37	% Married									
ICIC Nelelled	Þ		٠	707	2588	1392	2362	,	3946			STI/RTI	ı						
ICTC Direct	ЬР			36.95	26.61	25.27	33.71		8.89		8007	5007	7 01.07	11.07					
Walk-in	N			138	263	277	175		506	No. episodes	,		,	1558					
			PLHIV	Profile, 200	96					% syphilis. pos.									
			% Ⅲ.,	%	% Widowed or	od or							-	rogramm	e Response				
	% On ART	% 15-24	Prim.	Married	divirced	, p				No.	2004	2005	2006 2	2007	2008	5009	2010	2011	
(00C) TO 4	5	C	ing.		:	T				FSW TIS			+	-					
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DEN (277)				20	25	1				Comp Tic	
	NOL	Noute of FIV II distilission,		.: :: .:			T			ICTCs			-	-	-)	4	
	Hetero-sexual	Hetero-sexual Homo- sexual	Blood	Needle/ Svringe	Parent to Child	Unknown	Ę			Total tested ⁵			835 2	2851	2994	4051	٠,	8660	
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% Pocitive PPTCT	Burhanpur,	Khaknar,						,	,	Drop-in-centers					,				
in the second	0.43	4								Condom outlets									

* Inadequate sample size; - Data not available; 1 2011 Census; 2 Source: DLHS III; 3 Data presented only for years where sample size is valid (HSS-ANC; 300 tested, HSS-HRG/STD: 187 tested, ICTC; 600 tested, PPTCT and BB: 900 tested); 4 PP = percent positive, NT = number tested; 5 General clients and pregnant women

Chhatarpur, Madhya Pradesh

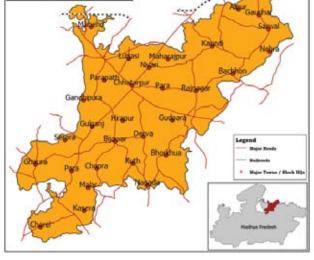
Background:

The District is situated at North East border of Madhya Pradesh. It has a population of 17.62 lakhs, a sex ratio of 884 females per 1,000 males, and a female literacy rate of 54.3% with an overall literacy rate of 64.9% (2011 Census). The district's economy relies mainly on Agriculture. Cultivation of crops like paddy, wheat and jowar is practiced in the district of Chhatarpur. Good quality timber is also produced here. The district has a good connectivity with national cities of the country through National Highways across the district. National highways passing through the district are National Highways 34, 75 and 86.

HIV Epidemic Profile:

- Based on 2011 Blood Bank and PPTCT data, the level of HIV positivity was low (range 0.05- 0.07%), with a stable trend.
- HIV positivity among ICTC attendees in 2011 was low among direct walk-in (0.30%), referred (0.29%), male (0.62%) and female (0.06%) clients; trend of HIV positivity was stable to declining with increasing number of attendees tested at ICTCs.

Chhatarpur District



- The Syphilis positivity rate among STI clinic attendees in 2010 was 4.75% and number of STI episodes treated in 2011 were 10,099. The number increased very significantly compared to previous year.
- As per the 2001 Census, 4.6% of the male population were migrants; 34.9% of them migrated to other states and 21.9% migrated to other districts within the state.
- The top two destinations for out-of-state male migration were Jammu district (17%) in J&K state followed by North west (12%) and South west Delhi (8%).
- HIV and RTI/STI awareness rates among women were 24.5% and 8.4% respectively (DLHS-III).
- As per mapping conducted in 2008, FSW (1140,67% of total HRG) was the largest HRG in the district, followed by MSM (368, 22% of total HRG) and IDU (205, 12% of total HRG); of the FSW, 72% were home-based and 10% street-based.
- Of the 35 PLHIV registered at the Anti-Retroviral Therapy (ART) centre in 2008, 9% were 15-24 years of age, 69% were on ART, 57% were illiterate or only had a primary school education and 46% were widowed or divorced.
- There were 11 ICTCs in the district in 2011.
- Red ribbon clubs were established from 2009 onwards for the awareness about HIV/AIDS among the youth.

- Data assessment and analysis of positive people at ICTC/ PPTCT, ART and Blood Bank is recommended to understand source and spread of HIV in in the district.
- Since the largest HRG is FSW, better assessment of the size and profile of clients population, including truckers and in-migrants will further improve understanding of district vulnerabilities.
- Strengthen outreach programme in TIs, among women and around trucking halt points and highways in the district.

Dhaulpur, Rajasthan

Intra-district 15625

43.15 1.98

Chhatarpur, Madhya Pradesh

PP ⁴ - NT ⁴ - NT	Ľ	2	s and Ir	H	0000	0000	0400	4 4 00				Λ	Vulnerabilit	ties	1 24		
	2005	5 2006		2007	2008	2009	2010	2011		HRG Size	a				Male Migration, 2001		Census
	•									FSW	MSM				Overall	Inter-	Intra-
	•	_														state	state
	'			_	*	80.0	0.05	0.05	Size Est.	1140	368	205		No. out-	36213	12634	7954
	-			-	*	1264	1824	2189	(Mapping, 2008)		1	+	Ī	migration			
	-	-		-	0	0	0	0.07	% Total HRG	66.55	21.48	11.97		% of male	4.59	1.60	1.01
	-	'			1651	1845	2159	2989				+	Ī	pop.			
0	Ť			\dashv	0.40				% Total Pop.	90.0	0.02	0.01		migration	100	34.89	21.96
250	226	250		250	248				Programme Target		ŀ			1.	Top districts for inter-state out-migration	nter-state o	It-migratio
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	·	_							lypology	-pased-		ž		Jammu and		ţ	Uttar
		*		1.78	1.44	0.58	0.31	0.62		19.57%;	Double			Kashmir	Delhi	Delhi	Pradesh
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	'	*	0.	0.78	1.81	0.54	0.38	90.0		9.31%							
		*	5	510	441	910	1310	1689	% <25 yrs.	15.79							
		*		0	0	95.0	0.40	0.29	% Married	75.03	•	-					
	•	*	2,	246	460	1071	1749	2383		STIVRTI	_						
•	•	*	1.	1.72	3.23	0.57	0.26	0.30		2008	2009	2010	2011				
•	-	*	9	989	464	1038	1155	929	No. episodes treated			2830	10099				
		PLHIV	Profile, 200	6					% Syphilis pos.			4.75					
% 15-24	%	Ë	% Married % M	% Widowed or	JC							Prog	amme Re	sponse			
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Laundi,	_	Saurihar, Nowg	Nowgoang, Rajn	Rajnagar, M	Malhara B	ha,	Chhatarpur,	Bijawar,	Red ribbon clubs						6		6
3.47					0.91	0	0.68	0.65	Comm. care centers								
Isha	-		Bada		Baxwaha, G	Gaurihar,	Chhatarpur,		Drop-in-centers	-							
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* Inadequate sample size; - Data not available; 1 2011 Census; 2 Source: DLHS III; 3 Data presented only for years where sample size is valid (HSS-ANC; 300 tested, HSS-HRG/STD: 187 tested, ICTC; 600 tested, PPTCT and BB: 900 tested); 4 PP = percent positive, NT = number tested; 5 General clients and pregnant women

Chhindwara, Madhya Pradesh

Background:

Chhindwara district is located on the South-West region of "Satpura Range of Mountains" and is a part of Jabalpur division. It has a population of 20. 90 lakhs, a sex ratio of 966 females per 1,000 males, a female literacy rate of 63.3% and an overall literacy rate of 72.2% (2011 Census). Chhindwara district has a majority of tribal population. The city has some old industries of pottery, leather moots and ornaments of zinc, brass and bell metal. On the outskirts, vegetables, especially potatoes, are raised in large quantities for export to nearby districts. Chhindwara town is the center for local trade and there is a market for the sale of cattle, grain and timber near railway station. The major highway that passes through Chhindwara is National Highway 69.

HIV Epidemic Profile:

- Based on 2010 HSS-ANC and 2011 Blood Bank and PPTCT data, the level of HIV positivity was low (range 0.18- 0.25%), with a stable trend.
- HIV positivity among ICTC attendees was low among direct walk-in (4.49%) and referred (1.66%) as well as
 - among male (3.55%) and female (2.39%) clients; overall trend of HIV positivity was declining with an increasing number of attendees being tested at ICTCs except among direct walk in which showed increasing trend from 2008 onwards suggesting increasing risk behavior of population.
- The Syphilis positivity rate among STI clinic attendees in 2010 was 1.91% and the number of STI episodes treated in 2011 were 8617. The
 numbers increased very significantly compared to previous year.
- As per mapping conducted in 2008, FSW (2671, 88.4% of total HRG) was the largest HRG in the district, followed by MSM (348, 11.5% of total HRG). Of the FSW 51.6% were home-based and 41.8% were street-based.
- As per the 2001 Census, 7.7% of the male population were migrants, 18.3% of them migrated to other states and 19.7% migrated to other districts within the state.
- The top two destinations for out-of-state male migration were Nagpur (65%) and Amravati (16%) districts of Maharashtra which were high prevalent districts in state.
- HIV and RTI/STI awareness rates among women were 30.7% and 16.4% respectively (DLHS-III).
- Of the 102 PLHIV registered at the Anti Retroviral Therapy (ART) centre in 2009, 11% were 15-24 years of age, 57% were on ART, 43% were illiterate or only had a primary school education and 63% were widowed or divorced.
- There has been a scale-up of ICTCs since 2009 while two composite TIs were functional in 2011.
- Though there were large number of FSWs, there was no FSW TI in the district in 2011.

- Data assessment and analysis of positive people at ICTC, PPTCT, ART and Blood Bank is recommended to understand source and spread of HIV in local risk groups.
- Heterosexual routes of HIV transmission are predominant in the district. The largest HRG is FSW, better assessment of the size and profile of
 clients population, including truckers and in-migrants will further improve the understanding of district vulnerabilities.
- Considering large number of FSWs in the district, establishing FSW TIs is highly recomended.
- There is a need to better understand the dynamics of HIV transmission among MSM and FSW, through initiation of HRG sites for HIV Sentinel Surveillance (HSS).
- Focused IEC for general population with awareness generation to reduce risky behavior is recommended.



Chhindwara, Madhya Pradesh

District Population: 20,90,306 (2.8% of MP Population); Female Literacy': 63.3%; ANC Utilization²: 44.3%

			Ž H	evels and	Trends³									Vulnerabilities	pilities				
		2004	2002	2006	2007	2008	2009	2010	2011		HRG	HRG Size				Male Migra	Male Migration, 2001 Census	Census	
	PP⁴	0.25	0.25	0.50	0	0		0.25			FSW	MSM	ndi			Overall	Inter-state	Inter-state Intra-state	Intra-district
HSS-ANC	NT⁴	400	400	400	400	400		400		Size Est.				No. out-	+				
DDTCT	ЬР					0.18	0.22	0.11	0.22	(Mapping,	2671	348	0	migration	noi	72511	13291	14287	44933
17111	M	,	,	,	,	1131	2669	3583	2773	2008) 8/ Tet-1 IIBC	00		+	70	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	200	6		7 7 1
Blood Bank	ЬР	0.04	0.17	90.0	0.07	0.03	-	0.08	0.18	% Total Ben	4,00	50.11	>	% of male	% of male pop.	00.7	04.	C.	4./5
2000	N :	4777	4775	6330	6741	5591	8723	9155	10661	70 IOtal Pup.	0.13	0.02	0	70 UI LOLAI	ion	100	18.33	19.70	61.97
HSS-STD	a !				-	'		•		Programme					'				
	E I				'	'				Target					φ.	Top districts for inter-state out-migration	inter-state or	ut-migration	
HSS-FSW	ЬР				'	'		'		Programme									
	¥									Coverage			•						
HCC_MCM	PP				,	•					Home								
INCINI-CCII	IN										-paseq-	Kothi-	-						
HSS-IDII	ЬР										51.61%;	_							
1133-1100	ΙN	-				•					Brothel		_		Namir	Amravati Ch	Chandraniir	Yavatma	Wardha
CTC Mails	ЬР		*	8.08	5.78	2.59	3.62	3.06	3.55	Typology	-pased	17.15%;	Ž		ashtra Mal	_	aharashtra I	Maharashtra	Maharashtra
ICIC Male	TN		*	433	554	887	1435	1403	1211		6.53%;								
ICTC Formula	ЬР	-	*	5.69	2.15	5.94	2.85	2.67	2.39		haced-	decker-							
ICIC reliale	NT	-	*	439	1163	320	878	1572	1337		41.86%								
CTC Referred	ЬР	,	*	6.67	2.77	4.82		2.13	1.66	% <25 yrs.	17.47	15.54	'						
nelelled CIC Melelled	N		*	465	721	332	\dashv	1739	1570	% Married	73.92		'						
ICTC Direct	PP		*	7.13	3.71	2.97	3.24	3.88	4.49		ST	STI/RTI							
Valk-in	IN		*	407	966	875	1419	1236	981		2008	5009	2010	2011					
	-		PH	IV Profile,	2009					No. episodes			3) 0665	8617					
	, 0	On ART	%	Prim.	% Married Wi	% Widowed				treated % Supplie poe									
		15-24	24 Edu.			or divorced				o appinits pos.			16:1	Programme	Response				
ART (102)	57	11	43		10	63				No.	2004	2005	2006	2007	2008	2009	2010	2011	L
DLN (NA)										FSW TIs			Т		-	2	3		
	R	Route of HIV Transmission, IC	ransmission,	\mathbb{H}						MSM TIs									
	Hetero-	- Homo-	Blood	Needle/	Parent to		Unknown			IDUTIs					,				
% of Total Pos.	seynal	+	+	Jan 19	+					Comp. IIs						~ ~	7 .	7	
(N=74)	90.54	2.70	0	0	6.76	9	0			Total tested ⁵		132	877	7171	7338	4987	4 55.58	5371	
			Bloc	ck-Level D	etails					Blood Banks	2	2			2	2	2	22.	
No. HRG-FSW	Junnardeo,	Damua,	Chhindwara,	, Sousar,	ď	۰				STI dinics	1	1		-		1	-	-	
	230	220	427	- 1	420					ART centers			-						
No. HRG-MSM	Chhindwara,	Parasiya,			•	•		•		Link ART centers							-	1	
	177	- 1								PLHIV Networks									
No. HRG-IDU					-	\neg	-	\neg	\rightarrow	Red ribbon clubs						17		17	
% Positive, ICTC	Chhindwara, Amarwada, 4.31 0.2	Amarwada, 0.2	Parasiya, 4.35	Jamai, 0	Chourai, 10.94	i, Mohkhed, 6.25	ed, Sousar, 8.93	Pandhurna, 0	na, Bichua, 0	Comm. care centers									
% Positive,	Chhindwara, Amarwada,	Amarwada,	Pandhuma,	4	Chours.	icaicl	Σ	d, Bichua,	S	Drop-in-centers	-	-	-	-	-			-	
PPTCT	0.12	0	0.65	0.88	, in local	- 1	6.25	0	0	Condom outlets					,		925	1084	

* Inadequate sample size; - Data not available; 1 2011 Census; 2 Source: DLHS III; 3 Data presented only for years where sample size is valid (HSS-ANC: 300 tested, HSS-HRG/STD: 187 tested, ICTC; 600 tested, PPTCT and BB: 900 tested); 4 PP = percent positive, NT = number tested; 5 General clients and pregnant women

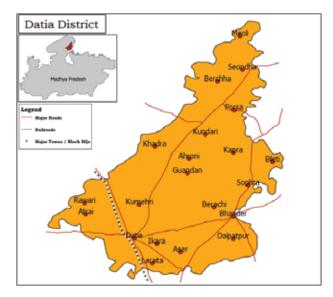
Datia, Madhya Pradesh

Background:

Datia District is in the Gwalior Division of Madhya Pradesh. The town of Datia is the district headquarter. It has a population of 7.86 lakhs, a sex ratio of 875 females per 1,000 males, a female literacy rate of 60.2% and an overall literacy rate of 73.5% (2011 Census). It is an ancient town, mentioned in the Mahabharata as Daityavakra. The town is a market centre for food grains and cotton products; handloom weaving is an important industry in the district. National Highway 75 passes though the district.

HIV Epidemic Profile:

- Based on 2010 HSS-ANC and 2011 PPTCT data, the level
 of HIV positivity was very low (≤ 0.04%). Among PPTCT
 attendees trend was stable and HSS-ANC showed a low
 prevalence at 0%.
- HIV positivity among ICTC attendees was low among direct walk-in (0.25%), and referred (0.08%) clients and also among male (0.32%) and female (0.10%) clients; trend of HIV positivity was not possible due to lack of data.



- STI episodes treated in 2011 were 2426, number had increased significantly compared to 215 episodes in 2010 year.
- As per the 2011 Census, 3.85% of the male population were migrants; 16.7% of them migrated to other states and 33.8% migrated to other districts within the state.
- The top two destinations for out-of-state male migration were Jhansi (78%) and Lucknow (22%) districts of Uttar Pradesh.
- HIV and RTI/STI awareness rates among women were 36% and 21.8% respectively (DLHS-III).
- There has been a scale-up of ICTCs and one composite TI was working in 2011.

- Data Triangulation of Datia district suggested that role of migration, National highway (Truckers/ sex workers), low awareness of HIV/AIDS
 were possible vulnerability factors in the district and needed attention.
- Data assessment and analysis of positive people at PPTCT, ART and Blood Bank is first recommended to understand the source and spread of HIV.
- Focus on establishing mechanism for regular monitoring of HSS-ANC, PPTCT-ICTC and Blood Bank data.
- Improved data availability with mapping for HRGs and truckers to gain a better insight to district HIV vulnerabilities is recommended.

Datia, Madhya Pradesh District Population; Female Literary!: 60.2%; ANC Utilization?: 24.8%

Intra-district 6432

49.42 1.90

	Census	Intra-state		4407		1.30		33.86	Top districts for inter-state out-migration						,											2011	- 107			1	3	10,2	2			, 9	,	
	Male Migration, 2001 Census	Inter-state		2175		0.64		16.71	inter-state o						,											2010	207				2 5253	1	2			. 9	,	
	Male Migr	Overall		13014		3.85		100	districts for					Lucknow.	Uttar	Pradesh										2000				_	2	-	2			. 9	,	
rabilities				No. out- migration		% of male	% of total	migration							Jhansi, Uttar Prodoch	LIGORNI										me Response		,	-		-	-	-	-				
Vulne		_			1								<u>^</u>	ors-		ors-				П		2011		2426		Program 2007	- 1007				-	-	1					
		ndi			1	'		_	ľ		'			⊆.	Non daily				ľ	_		2010		1217	0	2006					-	-	1					
	a	MSM		•		•		•				: :	Kothi-	Panth-	NĄ;	Double	decker-	¥ Z			_	5000				2005						-	1					t
	HRG Size	FSW						í				Home	Dased-	Brothel	based-	NA:	Street	-nasen			STI/RT	2008				2004	1007					-						
	•		Size Est.	(Mapping, Year:	NA)	% Total HRG		% Total Pop.	Programme Target	Programme	Coverage			-	lypology				% <25 yrs.	% Married			No enisodes	treated	% Syphilis pos.	ON ON	FSW TIS	MSM TIs	IDUTIs	Comp. TIs	ICTCs Total tectods	Blood Banks	STI dinics	ART centers	Link ART centers	Red ribbon clubs	Comm. care centers	
	2011			0.04	2401	*	*									0.32	622	0.10	1049	0.08	1262	0.25	406															
	2010	0	400	0.12	3467	*	*				-		-	-		0.34	1169	0	979	0	908	0.45	887															
1011 24.076	2009			0.05	1883						-		-	-		-		-		,		,											ľ					
AINC OIIIIZAL	2008										-		-	-		-		-		,	-	,							nwo u dul	INIOMI	0		r				,	
onation), refige Literacy : 50.2%, AINC OURZATION : 24.8% HIV Levels and Trends³	2007				-									-		-		-						5005	% Widowed or divorced		-		Parent to		0	- Printe	citalis					
evels and	2006										-	-	-	-		-		-		,	-			IV Profile,	% Married	-	-	C 2011	/eedle/	-	0	- love l	TREVEL D					
opulation), I	2005		,		-						-	-	-	-		-		-			-			PLH	% III., Prim. Edu.		-	mission, ICT	Blood		0	o la	- I					
13 % OI IMP II	2004					,					-		-	-		-		-		,		,			% 15-24 %		-	Route of HIV Transmission, ICTC 2011	Homo-	sexual	0		r					
7.1) C / C ′ 00′		PP⁴	NT⁴	ЬР	IN	ЬР	F	ЬР	N	Ы	NT	ЬР	NT	ЬР	N	ЬР	IN	ЬР	N	ЬР	NT	ЬР	IN		% On ART			Route	Hetero-	-	100		r				,	
District Population: 7,86,575 (1:03 % OI IMF population		Clas	HSS-ANC	PPTCT		Blood Bank		MS-SSH		W100 0011	33-1300	NO. 10 10 10 10 10 10 10 10 10 10 10 10 10	INICINI-SCH	IIdi san	001-66	CTC Male		CTC Eamala	- C remaie	OTC Boforrod	L Neielleu	ICTC Direct	Walk-in		-0-	ART (NA)	DLN (NA)			\exists	% of Total Pos.	√=5)	No upo com	NO. HRG-F3W	O. HING-INICINI	No. HRG-IDU	% Positive, ICTC	0/ 000:4:00

* Inadequate sample size; - Data not available; 1 2011 Cersus; 2 Source: DLHS III; 3 Data presented only for years where sample size is valid (HSS-ANC: 300 tested, HSS-HRG/STD: 187 tested, ICTC: 600 tested, PPTCT and BB: 900 tested); 4 PP = percent positive, NT = number tested; 5 General clients and pregnant women

Dhar, Madhya Pradesh

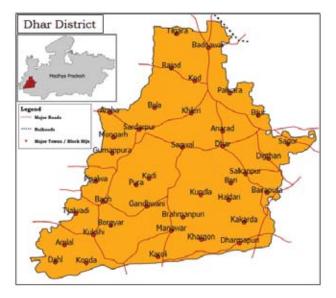
Background:

Dhar is located in the Malwa region of western Madhya Pradesh and was a Maratha Princely state ruled by the Puars (Pawars). Dhar is the administrative headquarter of the District. It is picturesquely situated among lakes and trees surrounded by barren hills, and possess, besides its old ramparts, many interesting buildings. It has a population of 21.84 lakhs, a sex ratio of 961 females per 1,000 males, a female literacy rate of 49.7% and an overall rate of literacy 60.6% (2011 Census). The economy of Dhar district mainly depends on agriculture and there are many industries in and around Dhar. National highway 69 and 79 pass through the district.

HIV Epidemic Profile:

- Based on 2010 HSS-ANC data HIV prevalence was moderate (0.50%); among Blood Bank and PPTCT attendees, the level of HIV positivity was low (≤ 0.10%) in 2011, but trend of HIV prevalence was not determined due to lack of data points.
- HIV positivity among ICTC attendees was moderate among direct walk-in (6.76%) clients, and low among
 - referred (1.97%) clients and as well as among female (2.26%) clients but near-moderate among male (4.85%) clients; overall trend of HIV positivity was not possible due to lack of data points. Positivity data among direct walk-in and male was moderate suggesting possible risky behavior among them.
- The Syphilis positivity rate among STI clinic attendees in 2010 was 1.12% and the number of STI episodes treated in 2011 were 6518, the number increased very significantly compared to previous year.
- As per the 2011 Census, 7.3% of the male population were migrants; 5.7% of them migrated to other states and 45.2% migrated to other districts within the state.
- The top destinations for out-of-state male migration were Vadodara (31%), Surat (17%) in Gujarat State and Mumbai (15.4%) in Maharashtra state which were high prevalent states with migration driving epidemics.
- HIV and RTI/STI awareness rates among women were 29.9% and 13.7% respectively (DLHS-III).
- There was a sudden increase in the number of ICTCs from one to 10 in 2011. One composite TI was working although there was no
 information of risk groups in the district.

- Data Triangulation of Dhar district suggested that risk behavior of population evident from moderate HIV positivity, among direct walk-in and
 male ICTC attendees migration to high prevalent states, passage of national highways and low HIV/STI awareness were possible vulnerability
 factors in the district and needs to be focused upon.
- Data assessment and analysis of positive people at PPTCT-ICTC and Blood Bank is recommended to understand source and spread of HIV along with data in local risk groups.
- Establish a mechanism to understand the dynamics of HIV transmission among out-migration and spousal transmission from ICTC data and
 counseling sessions of positive people to take corrective measures.
- Additional information on HIV epidemic profile of the district will improve in the understanding of district vulnerability.



Dhar, Madhya Pradesh

District Population: 21 84 672 (3% of MP population): Female Literacy! 49 7%: ANC Hillization²: 37 3%

HW Love Alone			MIT	1000	and Tennoles									July or shill it inc				
		,000	2000	IIIV LEVEIS alli	2007	0000	0000	0100	1,00		orio San			- Including	MA	Mala Microtion 2001 Control	TOT CONCINC	
		7004	5007	9007	7007	2007	5007	7010	1107		DIC DUL				IM	are ivilgidation, 21	on cellsus	
ONV SOIL	PP⁴							0.50			FSW	MSM	ndi		Overall	Inter-state	Intra-state	Intra-district
HSS-AINC	NT⁴							400		Size Est.				No. out-	65354	3743	29583	32028
1	ЬР						*	*	0.10	(Mapping, Year: NA)				migration	4	4	3	25.75
	N			,			*	*	1039	CG11 1-4-E				% of	,	ç	,	
المدوا لموراه	ЬР							0	0.02	% IOTAI HKG				male Don	7.34	0.47	3.32	3.90
DIOUG BAIIK	N							5276	6045					% of total	L			
OES SSI	PP				-			-		% Total Pop.				migration	90	5.73	45.27	49.01
U15-55H	IN			,						Programme Target	,				┨.	Top districts for inter-state out-migration	te out-migrati	ioi
79101 0011	ЬР									Programme							,	
WS1-55H	N									Coverage								
9 40 9 4 00 1	ЬР										Home							
HSS-IVISIVI	N										-pased	Kothi-	Daily					
4	ЬР										Drothol	NA;	Injectors-	- Parket			F	
HSS-IDO	N			,				-		Typology	-based	NA:	Ž,	Vadodara, Guiarat	a, Surat,		Maharashtra Maharashtra	Buldana,
	ЬР			,			,	5.60	4.85		NA;	Double	Non daily	Cujara			onice in initial	Maharashtra
ICIC Male	N							947	948		Street	decker-	Injectors-					
OTO.	ЬР		,	,				1.94	2.26		based-	₹	į					
רור בנומב	N							1594	1370	10.00	Į.							
OTC Boformod	ЬР							2.29	1.97	% < 25 yrs.								
ורור עפופוופת	IN	٠		٠				1616	1725	/o ividilico	TG/IT3	, E						
ICTC Direct	ЬР		,	,				5.08	97.9		2006	2000	2010	2011				
Walk-in	IN							925	592	bottoott sobosiao oli	2000	5007	T	107				
			PL	HIV Profil	e, 2009					% Synhilis nos			\top	00 1				
			% III Prim.	%	% .								Prog	ramme Respor	nse			
	% On ARI	% 15-24	Edu.	Σ	Widowed or divorced					No.	2004	2005	2006 20	2007 2008	2009	2010	2011	
ART (NA)										FSWTIs				-	•			
DLN (NA)										MSM TIs					•			
	Rou	Route of HIV Transmission, ICTC 201	nsmission, IC	TC 2011						IDU TIS	·							
	Hetero-	Homo-		Needle/	Parent to					Comp. TIs					-		-	1
	sexnal	sexnal	Blood	Syringe		Unknown				ICTCs	-	-	-	1	-	-	10	
% of Total Pos										Total tested ⁵					615	3265	3357	
(N=77)	84.42	0	0	5.19	10.39	0				Blood Banks	-	-	-	1	-	-	-	
			ä	ock-Level	Details					STI dinics	1	1	1	1 1	1	1	1	
No. HRG-FSW				·						ART centers	-	-	-	-	-		-	
No. HRG-MSM	,		,					,	,	Link ART centers	-			-				
No HRG-IDII										PLHIV Networks	-				1	1	1	
										Red ribbon clubs	-		-		6	6	6	
% Positive, ICTC	-	-		-	-			-		Comm. care centers	-	-	-	-	-		-	
% Positive,										Drop-in-centers	-			-				
PPTCT										Condom outlets	,					1518	976	

* Inadequate sample size; - Data not available; 1 2011 Census; 2 Source: DLHS III; 3 Data presented only for years where sample size is valid (HSS-ANC; 300 tested, HSS-HRd/STD: 187 tested, ICTC; 600 tested, PPICT and BB: 900 tested); 4 PP = percent positive, NT = number tested; 5 General clients and pregnant women

Dindori, Madhya Pradesh

Background:

The town of Dindori is the district headquarter. Dindori is a rural and tribal dominant district of Madhya Pradesh. The district is a part of Jabalpur division. It has a population of 7.04 lakhs, a sex ratio of 1004 females per 1,000 males, a female literacy rate of 53.5% and an overall literacy rate of 65.5% (2011 Census). The economy of the district depends on forest produce and agriculture. The 37.3% area of the district is covered by Sal forest. Irrigation facilities are not adequate. Dhan, Makka, Kodo, Kutki and Oil seed Ramtilla (Jagni) are main crops. Due to primitive agricultural practices production rate is very low. There is no industrial area in the district and not even a single industry exists. Overall, the economy of the district is very poor and per capita income is very low.

HIV Epidemic Profile:

- Based on 2011 PPTCT data, the level of HIV positivity was low (≤ 0.13%). There was lack of data to determine trend of HIV epidemic in Dindori.
- HIV positivity among ICTC attendees was low among direct walk-in (1.27%) and referred (1.82%) clients and
 - also among male (1.38%) and female (1.09%) clients; overall trend of HIV positivity was not possible due to lack of data.
- The number of STI episodes treated in 2011 were 323. The number increased significantly compared to 38 episodes in 2010.
- As per the 2011 Census, 4.4% of the male population were migrants; 9.4% of them migrated to other states and 36.2% migrated to other districts within the state.
- The top destinations for out-of-state male migration were Bilaspur (35%), Raipur (27%) and Korba (18%) in Chhattisgarh state while 20% migrated to Thane district of Maharashtra which was a high prevalent district.
- HIV and RTI/STI awareness rates among women were low at 11.1% and 6.4% respectively (DLHS-III), indicating poor knowledge on HIV and RTI/STI.
- Number of ICTCs in the district increased from one to three in 2011.
- Parent to child transmission of HIV was high in the district (16.67%).

- Data Triangulation of Dindori district suggested that role of out-migration and low awareness of HIV/AIDS were possible vulnerability factors in the district that needed focus.
- Data assessment and analysis of positive people at PPTCT-ICTC and STI clinics is first recommended to understand source and spread of HIV
 in the district.
- Improved data availability with mapping for HRGs and migrants with risk behavior which will provide better insight to district HIV vulnerabilities is recommended.
- Focused IEC for general population with awareness generation and strengthening of PPTCT programme is recommended.

Dindori, Madhya Pradesh
District Population: 7,04,218 (0.97% of MP population); Female Literacy!: 53.5%; ANC Utilization?: 16.9%

District Population: 7,04,216 (0.37 % of fire population), refilede Etterlety : 33.3 %, AINC Othization : 10.3%	0,012,40,7	1.57 /0 OI INIT	population),	, reiliale Litelacy .	eldty . John	יייי אור (סי	ation	0					\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	ulnorabilitios				
		2004	JOOL	Jooc Jooc	n Irenus.	9000	0000	0100	1,000		HRG Size			differences	M alcM	Male Migration 2001 Centus	Concile	
	à	5004	5007	2002	7007	2000	5007	70107	1107		ECIA/	MSM			Owerall	1004		Intra-
HSS-ANC	₽ď į			,	,	·					NS.	MSIM	20		Overall	Inter-state	Intra-state	district
	NT⁴									Ciao Ect				+io oly				
PPTCT	ЪР						*	0.19	0.13	(Manning, Year: NA)				migration	12756	1202	4617	6937
- -	N						*	1067	1490	% Total HRG				% of male	\downarrow			
Juca poola	ЬР	-	-	-		-	-	-						pop.	4.39	0.41	1.59	2.39
DIOUG DAIIK	M									% Total Pop.				% of total				
E S	Ы									-				migration	001	9.47	36.19	54.38
U18-88H	M									Programme Target					Top districts f	Top districts for inter-state out-migration	ut-migration	
781011	Ы									Programme								
N33-1300	M									Coverage								
MON OUT	Ы										Home	, + 0 7						
IVISIVI-SCI	M										-Dased N∆	NA.	Daily					
4	Ы									F	Brothel	_	Injectors-	i		ī		
HSS-IDU	N									lypology	based-		Non daily	Bilaspur,	Bilaspur, Raipur, Thane, Korba,	Thane,	Korba,	
T and OHO	&						,	0.81	1.38		.X	Double	injectors-	Ciliatisga	Ciliatisgaill	Mailaidsiiia	Cilialisyam	
ICIC Male	N							492	724		Street	decker-	NA NA					
L CHO	심						,	0	1.09		NA NA	<u> </u>						
	¥							169	642	% <25 vrs.								
LCTC Boformod	ЬР							2.52	1.82	% Married								
ורור עפופונפם	N							119	329		STI/RT	E						
ICTC Direct	ЬР							60.0	1.27		2008	5000	2010 2011	11				
Walk-in	N							1064	946	No. episodes treated			109 32	323				
			Ч	HIV Profile	le, 2009					% Syphilis pos.				,				
	TG 4 - 0 /9	15 24	% III., Prim.	%	% Widowed	-							Progr	ramme Respo	nse			
	% On AKI	% 15-24	Edu.	Married	or divorced					No.	2004	2002	2006 20	2007 2008	5009	2010	2011	
ART (NA)										FSWTIs								
DLN (NA)										MSM TIs		,						
	Rout	te of HIV Trar	Route of HIV Transmission, ICTC	TC 2011						IDU TIS	-	-	-	-	-			
	Hetero-	Homo-	7	Needle/	Parent to					Comp. Tls					,			
	sexnal	sexnal	poord	Syringe	Child	UIIKIOWII				ICTCs			1	1 1	1	1	3	
% of Total Pos.	66 60	c	c	c	15.67	c				Total tested ⁵					287	2250	2856	
(N=18)	03.33	>	>	>	10.07	>				Blood Banks								
			Ble	Block-Level I	Details					STI dinics	-		1		1	1	1	
No. HRG-FSW										ART centers	-							
No. HRG-MSM				,						Link ART centers	•	•	•					
IIOI SUN ON										PLHIV Networks				-				
NO. LINGTIDO										Red ribbon clubs	•				2	2	2	
% Positive, ICTC										Comm. care centers								
% Positive,										Drop-in-centers	-							
PPTCT										Condom outlets	-	,	,					

* Inadequate sample size; - Data not available; 1 2011 Census; 2 Source: DLHS III; 3 Data presented only for years where sample size is valid (HSS-ANC: 300 tested, HSS-HRG/STD: 187 tested, ICTC: 600 tested, PPTCT and BB: 900 tested); 4 PP = percent positive, NT = number tested; 5 General clients and pregnant women

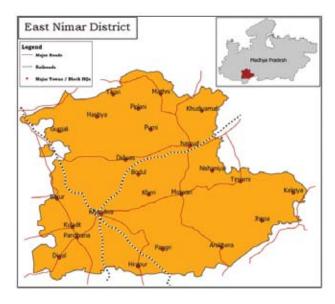
East Nimar, Madhya Pradesh

Background:

East Nimar district currently known as Khandwa district lies in the Nimar region of the state, which includes the lower valley of the Narmada River. It has a population of 13.09 lakhs, sex ratio of 944 females per 1,000 males, a female literacy rate of 56.5% and an overall literacy rate of 67.5% (2011 Census). The district's economy relies mainly on agriculture, as well as tourism. The district is one of the largest producers of Marijuana. It also possesses several kunds, religious places and English architecture. The location, easy availability of resources and other socio-economic factors are in favour of making the place a very good industrial region. There is no major highway passing through the district however it is well connected through railways.

HIV Epidemic Profile:

 Based on 2011 Blood Bank and PPTCT data, the level of HIV positivity was low (0.09 - 0.11%) with a stable trend among blood bank attendees. Trend of HIV prevalence was stable around 0.25% as per HSS-ANC data from 2006 to 2008.



- HIV positivity among ICTC attendees was low among direct walk-in (3.04%) and referred (3.34%) clients and also among male (4.20%) and female (2.79%) attendees; the overall trend was decreasing but in year 2010 and 2011 positivity remained same inspite of increased testing, which could be due to detection across the district with a scale up of ICTCs from one to six.
- The Syphilis positivity rate among STI clinic attendees in 2010 was 0.37% and the number of STI episodes treated in 2011 were 2638, which
 increased significantly compared to previous year.
- As per the 2001 Census, 8.07% of the male population were migrants, 17.4% of them migrated to other states and 33.83% migrated to other districts within the state.
- The top destinations for out-of-state male migration were Jalgaon (41%), Thane (9%), Buldhana (9%) and Amravati (9%) in Maharashtra state, which was a high prevalent state.
- Of the 176 PLHIV registered at the Anti Retroviral Therapy (ART) centre in 2009, 78% were on ART, 51% were illiterate or only had a primary school education and 64% were widowed or divorced.
- Heterosexual (87.50%) and parent to child (12.50%) transmission of HIV were predominant routes in the district.
- HIV and RTI/STI awareness rates among women were 39.7% and 20.8% respectively (DLHS-III).

- Data Triangulation of East Nimar district suggested that role of out of state migration, risk behavior and poor awareness of HIV/STI among
 population were possible vulnerability factors in the district that needs attention.
- High percentage of parent to child route of HIV transmission should be verified. HIV positivity evidenced among all programme data hints presence of HRGs role, so a recommendation is for mapping of HRGs as well behavioral assessment as priority.
- Better assessment of the size and profile of migrants will further improve the understanding of district vulnerabilities.
- Focused IEC for general population with awareness and sexual risk reduction messages is recommended.
- Additional information on HRGs, migration, and sexual dynamics of positives will improve the understanding of district vulnerability.

East Nimar, Madhya Pradesh District Population: 13.09 4/3 (1.8% of MP Population): Female Literacy: 56.5%; ANC Utilization?: 27.2%

District Population	1. 15,09,445	District Population: 13,09,443 (1.8% of MP Population); Female Literacy: 56.5%; AINC Utilization:: 27.2%	lation); rem	ale Literat	.y'': 50.570,	ANC DUIL	auon 27.7	0/.3										
			HIV Leve	els and Trends	ends	-	-	ŀ	-				٥٨	Vulnerabilities				
		2004	2005	2006	2007	2008	2009	2010	2011		HRG Size	ze			Male Migrati	Male Migration, 2001 Census	sns	
JIV JOH	PP⁴			0.25	0.50	0.25		•			FSW	MSM	2		Overall	Inter-state	Inter-state Intra-state	Intra-
USS-AINC	NT⁴			400	400	399		•							;			district
DETCT	ЬР	-	-	-	-	*	*	*	0.09					No. out-	71117	12448	24078	34651
- - - -	Þ					*	*	*	3338	(Mapping, Teal, NA)				mgiation of of mala				
Aned bools	ЬР	*	*	0:30	0	0.21	Н	Н	Н	% Total HRG	1			% or male	8.07	1.41	2.73	3.93
DIOCU DAIIN	Þ	*	*	66	1124	1424	1893	2996	4622					% of total				
OE SOIL	ЬР					•		•		% Total Pop.		•		migration	100	17.49	33.83	48.68
U15-55H	NT	-	-		-	-		-		Programme Target				1	Top districts for inter-state out-migration	ter-state out-r	nigration	
חכם בנוווו	ЬР	-	-		-	•		-		Programme								
N33-F3W	IN	-	-			-		-		Coverage								
LICE MACM	PP				'	•		_			Home							
IVICIVI=CCTI	IN				,	•		-			-pased	Kothi	Daily					
101 5311	dd		-	-	-	-		-			Rrothol		드					
DOI-SCH	Þ				٠	•				Tvnology	-pased-			Jalgaon,	Jalgaon, Thane, Buldana, Amravati,	Buldana,	Amravati,	Surat,
OTC MAIL	ЬР					7	*	3.90	4.20	(Garali,	NA;		Non daily	Maharashtra	Maharashtra M.	aharashtra N	//////////////////////////////////////	Gujarat
ICIC Male	Ä					497	*	770	928		Street	decker-						
ICTC Fomula	ЬР				,	8.73	*	2.67	2.79		-based-	¥	<u> </u>					
ורור בנוומונ	F				•	229	*	787	1149		Ā							
Dofour	ЬР	,			,	8.62	*	3.19	3.34									
ICIC Referred	IN					255	*	753	1168	% Married	- CTI/DT							
ICTC Direct	ЬР					7	*	3.36	3.04		9000	0000	0100	-				
Walk-in	Þ			,	,	471	*	804		No posico of postorior	2008	5007	+	- 0				
			PLHIV	Profile, 2	600					W. Cyphilic por	>	5	$^{+}$	• I				
	w 0w	% 15-24	% Ⅲ.,	%	%	wed or				o sypinis pos.		•	Progre	amme Response				
	ART	2	Prim. Edu.	Married	÷	ced				No.	2004	2005	2006 2007	7 2008	5009	2010	2011	l
ART (176)	78	-	51	6	64	_				FSW TIs								
DLN (NA)					-					MSMTIs				,				
		Route of HIV Transmission, IC	mission, ICT.	TC 2011						IDU TIS								
	Hetero-	Homo- sexual	Blood	Needle/	۵.	o Unknown	OWN			Comp. Tls								
	sexnal			syringe	Calld	+				ICTG			1	-	-	-	9	
% of Total Pos.	87.50	0	0	0	12.50		0			Total tested ⁵				1502	571	1875	5415	
(14-12)			Plock	- Joye	Potaile					Blood Banks	-	-	1	-	-	-	-	
			1		calls	-	-	-	-	STI clinics	,	-	1 1	-	1	-	,	
No. HRG- FSW						'				ART centers			-			-	-	
No. HRG- MSM		,				•		•		Link ART centers							-	
No. HRG- IDU				•	•	'	•	•	•	PLHIV Networks				,	_	-	1	
)	$\overline{}$	L	Harsud,	Khalwa,	_	⊢	, Chaigaon,	_		Red ribbon clubs			•		80	∞	8	
% POSITIVE, ICIC	8.56	3.8	4.05	2	4.6	6.25	-	18.75		Comm. care centers	,	-	•					
% Positive,	Khandwa,	Dandhard	Darrie D	Khalwa,	Dinago	0	Chaigaon,	'n,		Drop-in-centers			-					
PPTCT	0.33		Hallsdu, O	0						Condom outlets								

* Inadequate sample size; - Data not available; 1 2011 Census; 2 Source: DLHS III; 3 Data presented only for years where sample size is valid (HSS-ANC: 300 tested, HSS-HRG/STD: 187 tested, ICTC: 600 tested, PPTCT and BB: 900 tested); 4 PP = percent positive, NT = number tested; 5 General clients and pregnant women

Guna, Madhya Pradesh

Background:

Guna district is gateway of Malwa and Chambal and is located on the northern-eastern part of Malwa Plateau. It has a population of 12.40 lakhs, a sex ratio of 910 females per 1,000 males, a female literacy rate of 52.5% and an overall literacy rate of 65.1% (2011 Census). The economy of Guna district mainly depends on agriculture. Guna District is generally known as the granary of region but lately Guna has awakened to the need of industrial and commercial expansion too. Lying mid-way between Gwalior in the north and Indore in the South the two big industrial and commercial centers, its situation on the main National Highway add to its potentialities in the sphere of industrialization. The major highway that passes through Guna district is National Highway 3.

HIV Epidemic Profile:

 Based on 2011 PPTCT and Blood Bank data, the level of HIV positivity was low (0.08 – 0.20%), and the trend has been stable for PPTCT. HIV prevalence based on HSS-ANC 2010 data was low at 0%.



- Based on 2010 HSS data, HIV prevalence among FSWs was low at 0.9%; while among ICTC attendees, HIV positivity during 2011 was low
 among referred (0.38%) clients and also among male (3.39%) and female (0.87%) attendees. Due to lack of data, trend was not determined.
 Near moderate positivity among direct walk-ins (4.8%) suggested risky behavior prevailing in the district.
- The Syphilis positivity rate among STI clinic attendees in 2010 was 3.0% and the number of STI episodes treated were 4002, the numbers were higher compared to 2010.
- As per the 2001 Census, 3.6% of the male population were migrants; 10.2% of them migrated to other states and 29.2% migrated to other districts within the state.
- The top two destinations for out-of-state male migration were Baran (43%) and Kota(24%) in Rajasthan.
- HIV and RTI/STI awareness rates among women were 25.9% and 22% respectively (DLHS-III).
- The number of ICTCs in the district increased from one in 2009 to six in 2011. There was one composite TI in the district.

- Data Triangulation of Guna district suggested that role of migration including in-migrants due to industrialization, national highway passing (Truckers/FSWs) and low awareness of HIV/AIDS were possible vulnerability factors in the district that needs attention.
- Data assessment and analysis of positive people at PPTCT-ICTC, Blood bank and STI clinics is recommended to understand the source and spread of HIV in the district.
- Improved data availability with mapping for HRGs and migrants with risk behavior will provide a better insight to the district HIV vulnerabilities.
- Strengthen outreach programme through awareness campaign especially among women, industry workers and around trucking halt points and highways in the district.

2010

Bundi, Rajasthan

Jhalawar, Rajasthan

Lalitpur, Uttar Pradesh

Intradistrict 19638

state 9471 1.07

Interstate 3310

0.37

figration, 2001 Census

2.22 60.58

29.21

10.21

for inter-state out-migration

Guna, Madhya Pradesh District Ponulation: 12 40 938 (17% of MP Ponulation): Female Literaryl: 52 5%-ANC

-			VIH	Levels and	HIV Levels and Trends ³	200 200 10							InV	Vulnerabilit	ities	
		2004	2005	2006	2007	2008	5005	2010	2011		HRG Size			F		Male Mig
JIV JOH	₽D₽		-	-	-	-		0			FSW	MSM	Ξ			Overall
JNA-661	NT⁴							398					2			
TOTAL	ЬР						60.0	90.0	0.08	Size Est.					No. out-	32419
	IN						3387	3343	1235	(Mapping, Year: NA)				 T	migration	
1 1	Ы							98'0	0.20	% Total HRG		•	•		% of male	3.67
Sioou balik	IN							3634	5859					T	000	
OE2 COL	Ы									% Total Pop.		•	•		% of total	100
UIS-SEL	IN	-		-	-			-		C constant				т Т	Ton	dietai ete
74101 331	dd							0.93		Programme larget				_ T	9-	10p districts 10
155-F5W	IN							216		Programme Coverage				T		
DOC MON	dd	-			-						HOMe hased-	Kothi				
IVICIVI-CCI	IN										NA:	NA:	Daily			
1101 331	dd	-	-	-	-	-		-			Brothel	Panthi	Injectors-		Baran,	Kota,
001-881	IN									Typology	-paseq	NA;	Non daily		Rajasthan Rajasthan	ajasthar
CTC Mala	dd	-	-	-	-	-	-	1.37	3.39		NA;	Double		د د		
CIC IVIAIR	IN	-	-	-	-	-	-	1896	384		Street	decker-	NAN			
CTC Female	ЬР		-		-	-	-	0.50	0.87		-pased-	A A				
- I C Telliale	M				-	-		1590	1039	20° - 70°	Ĭ			T		
CTC Poforrod	Ы							0.61	0.38	% Marrind	Т		
- I C Nelelieu	NT		-		-	-		2283	1041	nallien o/	CTI/RT			+		
ICTC Direct	ЬР							1.66	4.83		2008	2009	2010	2011		
/alk-in	M		-		-	-		1203	373	No enisodes treated	2 '	3 .	Т	4002		
			Ы	HIV Profil	e, 2009					% Syphilis pos.				-		
	% On ART	% 15-24	% III., Prim.	%	% Widowed or	od or					_		gra	mme Re	esponse	
			Edu.	Married	divorced					No.	2004	2002	2006	2007	2008	2009
ART (NA)					•	T				FSW TIs					1	
DLN (NA)				TO		$\frac{1}{1}$	-			MSM TIs						
	¥	oute of HIV	Route of HIV Iransmission, ICIC 201	ICIC 2011						IDU TIs						
	Hetero-	Homo-	Blood	Needle/	Parent to	Unknown	_			Comp. TIs						-
of Tabel Day	sexnal	PNXAS		ahıııkc	Crilla		T			ICTCs	-	-	-	-	1	-
% UI 10tdl rus.	90.91	0	0	0	60.6	0				Total tested ⁵						3387
1-2-2)			-	love I and	Dotaile					Blood Banks	-	-	-	-	1	-
			ā	ock-Level	Details					STI clinics	-	-	-	-	1	-
No. HKG-FSW										ART centers						1
No. HRG-MSM										Link ART centers						1
No. HRG-IDU		•	•	•	-					PLHIV Networks						-
										Red ribbon clubs						1
% Positive, ICIC										Comm. care centers						
% Positive,										Drop-in-centers		-				•
PTCT										Condom outlets						1

* Inadequate sample size; - Data not available; 1 2011 Census; 2 Source: DLHS III; 3 Data presented only for years where sample size is valid (HSS-ANC; 300 tested, HSS-HRG/STD: 187 tested, ICTC: 600 tested, PPTCT and BB: 900 tested); 4 PP = percent positive, INT = number tested; 5 General clients and pregnant women

1516

Gwalior, Madhya Pradesh

Background:

Gwalior district is at the center of the Gird region of Madhya Pradesh. Gwalior District is bounded by the districts of Bhind to the northeast, Datia to the east, Shivpuri to the south, Sheopur to the east, and Morena to the northwest. The district is a part of Gwalior Division. It has a population of 20.30 lakhs, sex ratio of 862 females per 1,000 males, a female literacy rate of 68.3% and an overall literacy rate of 77.9% (2011 Census). The economy of Gwalior is based on the industries housed in the territory. The main industries are textile mills, artificial silk manufacturing plants, handicraft and hand loom industry, tanning industry and chemical industry. Gwalior is the confluence of two rich cultures of Bundeli and Braj. Tourism in the district of Gwalior is well flourished. Gwalior is well connected to other parts of the state through National Highway 3, 75 and 92.



- Based on 2011 PPTCT and Blood Bank data, the level of HIV positivity was low (0.07-0.09) with a declining to stable trend among PPTCT attendees.
- HIV positivity among ICTC attendees was moderate among direct walk-in (8.36%) and male (5.13%) clients and low among referred (2.26%) and female (2.52%) attendees; with an overall declining trend, however, direct walk-in and male attendees showed a rise from 2009 till
- As per mapping conducted in 2008, FSW (423, 54.3% of total HRG) was the largest HRG in the district followed by MSM (355, 45.6% of total HRG).
- The Syphilis positivity rate among STI clinic attendees in 2010 was 1.08% and the number of STI episodes treated in 2011 were 16871 significantly more episodes than in 2010.
- As per the 2001 Census, 4.3% of the male population were migrants; 35.1% of them migrated to other states and 35.2% migrated to other districts within the state.
- The top destinations for out-of-state male migration were South Delhi, Pune in Maharashtra and Surat of Gujarat state, the latter were high prevalent states.
- HIV and RTI/STI awareness rates among women were 51.6% and 23.1% respectively (DLHS-III).
- There has been a gradual increase in the number of ICTCs from 2008 onwards in the district with corresponding increase in the number of clients getting tested for HIV.
- There was one targeted interventions (TI), each for FSW and MSM in the district.

- Data Triangulation of Gwalior district suggested that role of migration, HRGs in district, National Highways linking sex work with truckers and
 risky behavior of DWI attendees were possible vulnerability factors in the district and needs attention.
- Carry out differential analysis of direct walk-in (representative of vulnerable population) and male clients owing to moderate HIV positivity of among them by further analysis of ICTC data.
- Better assessment of the size and profile of HRGs, migrants and truckers due to contextual factors will further improve the understanding of district vulnerabilities.
- Focused IEC for general population with awareness and sexual risk reduction messages is recommended.
- There is a need to better understand the dynamics of HIV transmission among FSW and MSM, through initiation of HRG sites for HIV Sentinel Surveillance (HSS) or further analysis of ICTC/PPTCT and ART data related to demographic and geographic parameters.



2010

2009

3383

16929

11802

421

2010

2006

2005

North West Delhi

Maharashtra

Surat, Gujarat

Pune, Maharashtra

South Delhi

Daily Injectors-NA; Non daily injectors-NA

Kothi-NA; Panthi-NA; Double decker-NA

Thane,

Gwalior, Madhya Pradesh

District Population: 20,30,543 (2.7% of MP Population); Female Literacy': 68.3%; ANC Utilization²: 25.8%

Intradistrict

Intra-state

Inter-

Overall 38744

20000

MSM 355

Male Migration, 2001 Census

11461

13629

No. outmigration % of male

45.63

1.54

29.58

35.24

35.18

9

% of total migration

0.02

Top districts for inter-state out-migration

			~	Levels and Trends							13 741
		2004	2005	2006	2007	2008	2009	2010	2011		HKG SIZE
Old A Dill	P₽₫	,		,	,			,			FSW
HSS-AINC	NT4									Size Ect	
TOTAG	PP			*	0.28	0.13	0.04	90.0	60.0	(Mapping, 2008)	423
	M			*	1452	2394	7023	7080	7857	% Total UDG	54.27
Jacob Coole	ЬР						,	90.0	0.07	70 IOLAI TING	74.37
DIOUU DAIIK	NT							26560	28398	% Total Pop.	0.02
OE STE	ЬР	0	0.49	08.0	2	08'0		1.60			
U153-56D	IN	227	204	250	250	750		250		Programme Tagget	,
7813 3311	ЬР									Programme	
N33-F3VV	IN	-								Coverage	í
PACKA SSI	ЬР										Home
INCINI-CCI	IN										based-
1101 3311	ЬР										Y Y
001-661	IN	-								-	Brothel
CTC Marle	ЬР		*	12.70	10.16	9:28	3.70	4.74	5.13	lypology	-nasen
IC IC IVIAIE	NT		*	378	1358	1221	3671	5089	3920		Street
CTC Formula	ЬР		*	8.40	9.27	6.64	3.74	2.13	2.52		based-
IC IC rellidie	NT		*	250	755	919	2406	2633	5152		A
CTC Boford	ЬР		*	8.81	9.91	7.47	3.93	2.11	2.26	% <25 yrs.	
ICIC NEIBII BU	NT		*	545	1241	1365	3259	3790	7426	% Married	
ICTC Direct	Ы		*	11.48	2.87	9.81	3.48	8.05	8.36		2000
Walk-in	M		*	183	872	775	2818	932	1758	No enisodes	7000
			PLHIV	Profile, 200	6					treated	í
	% On ART	% 15-24	% III., Prim. Edu.	% Married	% Widowed or divorced	ъ				% Syphilis pos.	
ART (NA)									•	No.	2004
DLN (NA)										FSWTIs	
		Route of HIV	Route of HIV Transmission, ICTC 201	, ICTC 2011						MSM TIS	
	Hetero- sexual	Homo- sexual	Blood	Needle/ Svringe	Parent to Child	Unknown	_			Comp. TIs	
% of Total Pos.	37 08	151	0.30		6 03	151				Total tested ⁵	- -
(N=332)	00.00	 	0.0	>						Blood Banks	-
			Block	Block-Level Detail	S					STI dinics	-
No. HRG-FSW					,		,	,		ART centers	
No. HRG-MSM	,		,	,	,	,	,			Link ART centers	
No. HRG-IDU	,					,				Red ribbon clubs	. .
% Positive, ICTC	Gwalior, 2.68	Dabra, 0.29	Bhitarwar, 20	Ghatigaon, 1.75	Hastinapur, 0	Others 37.45			,	Comm. care centers	
% Positive,	Gwalior,	Hastinapur,	Dabra,	Bhitarwar, 0	Ghatigaon, 0					Drop-in-centers	
PPICI	0.05	0.28	0							Condom outlets	

* Inadequate sample sizer - Data not available, 1 2011 Census, 2 Source: DLHS III; 3 Data presented only for years where sample size is valid (HSS-ANC: 300 tested, HSS-HRG/STD: 187 tested, ICTC: 600 tested, PPTCT and BB: 900 tested); *PP = percent positive, NT = number tested; *General clients and pregnant women

1677

2102

30

Harda, Madhya Pradesh

Background:

Harda district is located in the southwestern part of Madhya Pradesh. It is predominantly a tribal area where the Korku and the Gond tribal groups forms two-third of the total population. It has a population of 5.7 lakhs, a sex ratio of 932 females per 1,000 males, a female literacy rate of 64.3% and an overall literacy rate of 74.04% (2011 Census). The economy of Harda district mainly depends on agriculture. Harda district is famous for Teak wood forests. The major highway that passes through Harda district is National Highway 59.

HIV Epidemic Profile:

- Based on 2010 HSS-ANC and 2011 PPTCT data, the level of HIV positivity was low (≤ 0.25%), and had a stable to decreasing trend.
- HIV prevalence among ICTC attendees was low among direct walk in (0.40%) and referred (0.48%) clients, as well as among male (0.58%) and female (0.32%) clients, with an overall declining trend and increase in the number of attendees undergoing HIV testing.
- As per mapping conducted in 2008, MSM (77, 60.6% of total HRG) was the largest HRG in the district, followed by FSW (50, 39.3% of total HRG).
- The number of STI episodes treated in STI clinics increased from 273 in 2010 to 1602 in 2011.
- As per the 2001 Census, 7.9% of the male population were migrants; 3.5% of them migrated to other states and 37.8% migrated to other districts within the state.
- The top two destinations for out-of-district migration were Indore and Hoshangabad in Madhya Pradesh, while out of state migragion was less and information was not available.
- HIV and RTI/STI awareness rates among women were 25.9% and 22.6% respectively (DLHS-III).
- Of the 59 PLHIV registered at the Anti-Retroviral Therapy (ART) centre in 2008, 5% were 15-24 years of age, 58% were on ART, 49% were illiterate or only had a primary school education and 59% were widowed or divorced.
- There has been a gradual increase in the number of ICTCs from 2009 onwards in the district with corresponding increase in the number of clients getting tested for HIV.

- Data triangulation of Harda district suggested although level of HIV epidemic was low, role of out migration, National Highways linking sex work with truckers and poor awareness of HIV/STI were possible vulnerability factors in the district which need to be focussed upon.
- Revised mapping with bio-behavioral assessment of the size and profile of HRGs, assessment of risk behavior among out -migrants and truckers will further improve the understanding of district vulnerabilities.
- Focus on establishing mechanism for regular monitoring of HSS-ANC, PPTCT, ART and Blood Bank data to understand source and spread of HIV.
- Strengthen outreach programme through awareness campaign especially among out migrant-men and around trucking halt points and highways in the district.



Harda, Madhya Pradesh

Intradistrict 11483 4.65

	1 Census	Catal Catal	וווומ-אומוב	7/1/6	2	3.00	2000	37.85		Top districts for inter-state out-migratio															2011				,	3	8769	,	1		1		5	,	٠
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	2011			0.03	3715											0.58	2572	0.32	2482	0.48	4631	0.40	494			-													
	2010	0.25	396	0.08	3833	*	*				-					0.59	2382	0.63	2398	0.56	4436	1.16	344													,	Ī		
on-: 42.0%	2009			1.39	2155	-										0.95	1051	1.50	109	1.25	1120	0.94	532								1						T		
pulation), Female Literacy: 64.3 %; ANC UtilizationF: 42.0 % HIV Levels and Trends³	2008	0	399	0.11	929						-					*	*	*	*	*	*	*	*	-	or	1	Т			Unknown	c	>					T		
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0,302 (0.78		H	NT⁴	ЬР	Z	ЬР	IN	ЬР	N	ЬР	LN	ЬР	IN	ЬР	IN	PP	IN	ЬР	NT	PP	NT	ЬР	L	-	o to	AK	28	Pourte	Jotoro -	sexual	-	/3/					+	1.48	
District Population: 5,70,302 (0.78% of IMP Po		ONG DAIL	JNIX-2011	DDTCT	,	Jaco poolo	Blood Barik	CES 551	UIS-SCH	78101 0011	1133-13VV	PACKA DOLL	INSN-INISIMI	1101 3311	1133-ID0	-1-44 OFO	ICIC Male	LCTC Formula	ורור בפוומופ	ICTC Doforod	ורור עפופוופת	ICTC Direct	Walk-in		%	VOJ/ 100/	AKI (59)	ברוג (ומיל)			% of Total Pos.			No. HRG-FSW	No. HRG-MSM	No. HRG-IDU	+	% Positive, ICTC	% Positive

* Inadequate sample size; - Data not available; 2011 Census; 2 Source: DLHS III; 3 Data presented only for years where sample size is valid (HSS-ANC: 300 tested, HSS-HRG/STD: 187 tested, ICTC. 600 tested, PTCT and BB: 900 tested); 4 PP = percent positive, NT = number tested; 5 General clients and pregnant women

Hoshangabad, Madhya Pradesh

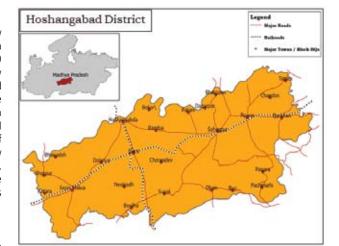
Background:

Hoshangabad district lies in the central Narmada Valley and on the northern fringe of the Satpura Plateau. It has a population of 12.40 lakhs, a sex ratio of 912 females per 1,000 males, a female literacy rate of 67.0% and an overall literacy rate of 76.5% (2011 Census). The economy of Hoshangabad district mainly depends on Agriculture. The land is quite fertile and farmers have good canal irrigation facilities from the Tawa reservoir throughout the year. Itarsi is the industrial and business center of the region. Itarsi Junction is one of the busiest junctions of the Indian Railways. Being centrally located, it falls on the routes joining the metropolitan cities. Itarsi also has the Diesel and Electric Locomotive sheds. The major highway that passes through Hoshangabad district is National Highway 69.

HIV Epidemic Profile:

- Based on 2011 PPTCT and Blood Bank data, the level of HIV positivity was low (0.04- 0.13%), the trend was increasing for the PPTCT positivity.
- Based on HIV Sentinel Surveillance (HSS) data, HIV prevalence among IDUs was near moderate (4.8%).
- HIV positivity among ICTC attendees was low among direct walk in (1.28%) and referred (0.94%) clients, and also among male (1.33%) and female (0.49%) clients; due to lack of data trend analysis was not determined.
- The Syphilis positivity rate among STI clinic attendees in 2010 was 2.8% and the number of STI episodes treated were 6811 in 2011, compared to 607 in 2010.
- As per the 2001 Census, 7.08% of the male population were migrants; 6.4% of them migrated to other states and 39.5% migrated to other districts within the state.
- The top two destinations for out-of-state male migration were Nagpur (27%) and Thane (21%) districts of Maharashtra; a high prevalent state
- HIV and RTI/STI awareness rates among women were 47.6% and 22.5% respectively (DLHS-III).
- There has been a gradual increase in the number of ICTCs from 2008 onwards in the district.
- There was one targeted intervention (TI) for IDU, TIs for FSW and MSM were reconfigured in composite approach in 2010; however mapping
 estimates in 2008 was not available on size of HRGs.

- Data Triangulation of Hoshangabad district suggested that migration including inter/intra state, National Highways linking sex work with truckers risk behavior and size and profile of IDUs are possible vulnerable factors in the district that needs attention.
- Revised mapping with bio-behavioral assessment of the size and profile of HRGs, assessment of risk behavior among out-migrants and truckers will further improve understanding of district vulnerabilities.
- Focus on establishing mechanism for regular monitoring of HSS-ANC, PPTCT, ART and Blood Bank data to understand source and spread of HIV.
- Strengthen outreach programme through awareness campaign especially among out migrant-men at destination points within district and around trucking halt points and highways.
- Collect and analyze data at TIs and patients at linked ART center to understand geography and profile of groups.
- Need to establish mechanism for understanding the dynamics of HIV transmission among HRG size and its linking with surrounding districts.
- · Considering the high rate of HIV transmission by needle/syringe there is a need to map IDU population to give better insight to the problem.



Hoshangabad, Madhya Pradesh District Population: 12, 40,975 (1.7% of MP Population); Ferrale Literacy: 67.0%; ANC Utilization?: 45.6%

			⋛	HIV Levels and	1 Trends									ln/	nerabilities				
		2004	2005	2006	2007	2008	2009	2010	2011		HRG Size					Male Migrat	Male Migration, 2001 Census	ensus	
	POG					2021		2			FSW	MSM	ngi i	_		Overall	Inter-state	Intra-state	Inter-state Intra-state Intra-district
HSS-ANC	Y Y									Size Est.					No. out-	0000	2000		
H	М						0	0.12	0.13	(Mapping, rear: NA)				_	migration	40488	5007	58861	76917
	M						1158	3431	4482	% Total UBG					% of male	80.7	37.0	00 0	2 0 2
	ЬР	,	,					80:0	0.04	70 IOIGI ING		·	'		pop.	90.7	0.40	7.00	2.03
Blood Bank	IN							3829	4762	% Total Pop.		'	_		% of total	100	6.43	39.50	54.07
dE 55	ЬР							0.4						<u>-</u> 1	migration				
U15-55H	M							249		Programme Target	•	•	_		F	Top districts for inter-state out-migration	iter-state ou	t-migration	
WIGH COTT	ЬР									Programme		-		T					
N33-F3VV	IN				-					Coverage									
PASPA SSE	ЬР										Home	\vdash							
INICINI-CCL	Ħ	,	,								-based-		- Daily	>					
101 001	ЬР							4.80			NA;	NA;	드		Nagpur,	Thane,	Durg,	Pune,	Nashik,
U21-65H	N		,					250		Tynology	pased-				Maharashtra N	Maharashtra Maharashtra Chhatisgarh Maharashtra Maharashtra	natisgarh N	Aaharashtra	Maharashtra
-1-84 010	ЬР	,						1.90	1.33	(Boods)	NA:			aily					
ICI C Male	IN							1740	2403		Street		r- Injectors-	ors-					
CTC Formula	ЬР			-			-	1.23	0.49		-based								
L'ICTERIBLE	Ł							1053	1831	10.	¥		+	T					
CTC Doforrod	ЬР							1.61	0.94	% <25 yrs. % Married			<u>'</u>	Ī					
CI CINCIPLIED	M							2294	3604		S	STIVRTI							
ICTC Direct	ЬР							1.80	1.28		2008	2009	2010	2011					
Walk-in	M							499	704	No. episodes			2292	6811					
			Ы	PLHIV Profile	, 2009					treated			2022	3					
	% On ART	% 15-24	% III., Prim.	% Marriad	% Widowed or	dor				% Syphilis pos.			98.7	Progran	mme Respons	e.			
ART (NA)					'	,				No.	2004	2005	2006	2007	2008	2009	2010	2011	
DIN (NA)										FSW TIS			-		-				
	Rc	Route of HIV Transmission, ICTC	ransmission,	ICTC 2011						MSM IIS									
	Hetero-	Homo-	7	Needle/	Parent to	1				Comp. TIs						-	2	- 2	
	sexnal	sexnal	poor	Syringe	Child	UNKHOWII				ICTCs	-	1	-	-	2	4	4	2	
% of Total Pos.	62.79	4.65	С	18.60	86.9	6.98				Total tested ⁵						1158	6224	8716	
(N=43)										Blood Banks	7	7	7	7	2	7	7	7	
			B	Block-Level I	Details					STI clinics	-	-	-	-	-	J		-	
No. HRG-FSW										AKI centers					,	1 4			
No. HRG-MSM			1	,		,	-			PI HIV Networks					
No. HRG-IDU										Red ribbon clubs						11	11	11	
% Positive, ICTC										Comm. care centers				,					
% Positive,										Drop-in-centers		-	-						
PPTCT										Condom outlets					-				
														L	1				

* Inadequate sample size; - Data not available; 1 2011 Census; 2 Source: DLHS III; 3 Data presented only for years where sample size is valid (HSS-ANC: 300 tested), HSS-HRG/STD: 187 tested, ICTC: 600 tested, PPTCT and BB: 900 tested); 4 PP = percent positive, NT = number tested; 5 General clients and pregnant women

Indore, Madhya Pradesh

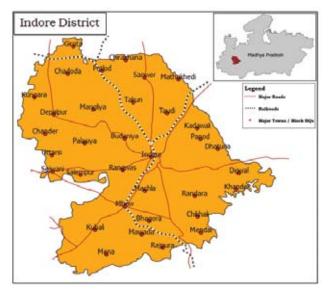
Background:

Indore is situated on the Malwa plateau and is bounded by Ujjain in the North, Dewas in the East, Khargone in the South, and Dhar in the West. It has a population of 32.72 lakhs, a sex ratio of 924 females per 1,000 males, and a female literacy rate of 74.9% and an overall literacy rate of 82.3% (2011 Census). Indore is the economic nerve center of the state. Textile or garment industry is the traditional business of the region and it is still an integral part of Indore economy. Besides such traditional economic activities, Indore is gaining pace as a Tire city of India. The major highways that pass through Indore district are National Highway 3 and 59.

HIV Epidemic Profile:

- Based on 2011 PPTCT and Blood Bank data, the level of HIV positivity was low between 0.12 to 0.25%, trend has declined for PPTCT from moderate to low level and has remained stable in recent years. 2010 HSS-ANC showed low (0.25%) HIV prevalence with a declining trend from high positivity level.
- HIV positivity among ICTC attendees was moderate among direct walk-in (5.16%) and male (6.30%) clients whereas it was low among referred (4.57%) and female (3.08%) clients; with an overall declining trend and increased testing with geographic scale up of centers across the district.
- HSS in 2010 showed moderate prevelance among MSM (7.40%) and low among IDUs (2.47%).
- As per mapping conducted in 2008, FSW (2108, 71.1% of total HRG) was the largest HRG in the district, followed by MSM (813, 27.4% of total HRG) and IDU (40,1.3% of total HRG).
- The Syphilis positivity rate among STI clinic attendees in 2010 was 2.5%; and the number of STI episodes treated in 2011 were 17791, compared to only 1828 in 2010.
- As per the 2001 Census, 4.4% of the male population were migrants; 21.5% of them migrated to other states and 43.5% migrated to other districts within the state.
- The top two destinations for out-of-state migration were Pune (11%) and Mumbai (10%) in Maharashtra state which were high prevalent districts.
- HIV and RTI/STI awareness rates among women were 71.9% and 30.3% respectively (DLHS-III).
- Of the 1480 PLHIV registered at the Anti-Retroviral Therapy (ART) center in 2008, 9% were 15-24 years of age, 74% were on ART, 44% were illiterate or only had a primary school education and 59% were widowed or divorced.
- Number of ICTCs and STI clinics were increased in the district.

- Data triangulation of Indore district suggested that size and profile of HRGs high risk and vulnerable population with moderate prevalence, risky behavior of population from out-migration as vulnerable factors of district to focus.
- Although FSWs constitute 70% of total core HRGs, there is no data available on HIV prevalence, hence, should be considered for HSS or IBBS
 for monitoring of FSWs role in district epidemic.
- HIV Positivity at ICTC suggests continuing transmission among male and female in Indore along with risky behavior. So there is a need to establish mechanism to understand the dynamics of HIV transmission among HRG and bridge (in and out migrant) population.
- Information on typology of HRG population is required to better understand district epidemiological profile.



24207

24362

9510

9879

9

9

2011

2010

2009

2008

2007

17791

2011

Nagpur, Mahrashtra

Ahmadabad,

Thane,

Mumbai (Suburban), Maharashtra

Maharashtra

Pune,

Gujarat

Maharashtra

Intra-district

Inter-state Intra-state

Overall 60339

Male Migration, 2001 Census

21040 1.56

26298

13001

No. out-migration % of male

1.94

34.87

43.58

21.55

100

% of total migration

god G

Top districts for inter-state out-migration

Indore, Madhya Pradesh

District Downston: 32 72 335 (4.5% of MP Population). Female Literacy: 74.9%. ANC Utilization²: 67.8%

74.9%; ANC Utilization?: 67.8% ds³ 2008 2009	2 1 0.25 408 400 400	0.58 0.25	17771	0.12	,	8.77	73/	Coverage	7.41	- 243	2.47	Typology	20.92 20.96 10.71 9.25 6.30	3389 2939 5940 4766 8365	18.72 7.33 5.68	2602 1880 4091 4345 9347 %<25 yrs.	18.49 20.45 10.16 6.47 4.57 % Married	3164 6162 6988	19.40 8.01 11.12	7 1655 3869 2123 3181	% Widowed or	pa	SW TIS	SITUOI	0		7.76 0.12 <u>lotal tested*</u> Blood Banks	ails STI dinics	ART centers	Link ART centers	PLHIV Networks Red ribbon clubs	Comm. Gree	
tion); Female Literacy!: HIV Levels and Tren 5 2006 20	0.50	0.14	2122		+	+	067		,				21.48	2253	21.65	1247	26.01	2253	28.15	PLHIV Profile. 2	%	ž	×	sion. ICTC 2011	\vdash	Syringe	2	Block-Level Det	- -	- -		pur, Sanwer,	_
2,335 (4.5% of MP Populati P 2004 2005	PP4	PP - 0.13	NT - 2271			* +	+	- LN		. IN		- TN	PP 12.01 17.67	NT 2740 2892	69.9	NT 2392 2053	PP 7.43 11.82	4439	22.94	NT 693 1197	% On ART % 15-24 % III., Prim.	17 01 0/	9 44	Route of HIV Transmission, ICTC 2011	Hetero- Homo- Plood	sexual	85.78 2.12 2.23	-				Hatod, Mhow, Depalpur, 86 12.08 15.86	2

* Inadequate sample size; - Data not available; 1 2011 Census; 2 Source: DLHS III; 3 Data presented only for years where sample size is valid (HSS-ANC: 300 tested, HSS-HRG/STD: 187 tested, ICTC: 600 tested, PPTCT and BB: 900 tested); 4 PP = percent positive, NT = number tested; 5 General clients and pregnant women

1875

2250

36

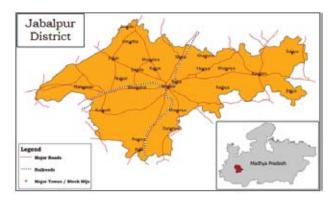
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36

Jabalpur, Madhya Pradesh

Background:

Jabalpur is one of the largest districts of the state which is situated in the center of state Madhya Pradesh and is part of Jabalpur Division. It has a population of 24.60 lakhs, sex ratio of 925 females per 1,000 males, a female literacy rate of 75.3% and an overall literacy rate of 82.4% (2011 Census). The economy of Jabalpur district mainly depends on agriculture. The Garment Industry is the one of the leading industry of the region. Other important industries of the district are the bidi, limestone, electrical and food processing industries. The Ordinance Factory and the Defense establishment hold prime importance in terms of earning revenue for the district. The major highways that pass through Jabalpur district are National Highway 12 and 34.



HIV Epidemic Profile:

- HIV prevalence among ANC remained at 0% till 2008 following which there was a surge to 0.50% in 2010.
- Based on 2011 PPTCT and Blood Bank data, the level of HIV positivity was low (0.08 0.13%). PPTCT trend from 2009 showed a gradual rise of positivity with increase in the number of clients tested, indicating continuing transmission of HIV that needs to be explored.
- In 2011 data HIV positivity among ICTC attendees was close to moderate among direct walk in (4.41%) clients and male (4.65%) clients but low among referred (3.67%) clients and female (3.08%) clients; showing an overall declining trend with increasing number tested and scale up of centers.
- As per mapping conducted in 2008, IDU (2352, 55.9% of total HRG) was the largest HRG in the district, followed by FSW (963, 22.9% of total HRG) and MSM (891, 21.1% of total HRG).
- The Syphilis positivity rate among STI clinic attendees in 2010 was 1.07% and the number of STI episodes treated in 2011 were 12563, comparatively much higher than 2010.
- As per the 2001 Census, 5.1% of the male population were migrants; 27.1% of them migrated to other states and 40.4% migrated to other districts within the state.
- The top destinations for out-of-state migration were Nagpur (13%), Thane (11%) and Pune (11%) in Maharashtra where epidemic was more prevalent.
- HIV and RTI/STI awareness rates among women were 52.2% and 12.4% respectively (DLHS-III).
- Of the 457 PLHIV registered at the Anti-Retroviral Therapy (ART) centre in 2008, 9% were 15-24 years of age, 60% were on ART, 40% were illiterate or only had a primary school education and 61% were widowed or divorced.
- There were targeted interventions (TIs) for FSWs, MSMs and IDUs.

- Data triangulation of Jabalpur district suggested that large number of HRGs, out of state migration, high risk behavior of population, National
 Highway passing through (FSW and Truckers link), probable in-migration and poor awareness of HIV/STI as plausible vulnerable factors in the
 district that needs focus.
- Major data gaps like profile of ART patients, profile of HRGs and their bio-behavior parameters and bridge population (out migrants and truckers) need to be addressed to further improve the district vulnerability.
- Need to strengthen and improve quality of outreach programme for IDUs, MSMs.
- Conduct special awareness campaign especially among pockets of out migrants transit points and around trucking halt points and highways in the district.
- Strengthen efforts towards prevention of spousal transmission at couple counseling and partner treatment at ICTC and STI clinics.
- There is a need to better understand the dynamics of HIV transmission among IDU, MSM and FSW, through initiation of HRG sites for HIV Sentinel Surveillance (HSS).

Mumbai (Suburban), Maharashtra

Jabalpur, Madhya Pradesh
District Population: 24.60.714 (3.3% of MP Population): Female Literacy!: 75.3%; ANC Utilization?: 61.1%

Intra-state Intra-district

19062 1.68 32.49

2007 2008 2009 2010 2011		399	* 0.25 0.07 0.12 0.13	7317 6696	0.11 0.08	32272 33759	0 1.20 2.94	249 249 238							9.91 7.65 6.44	1969 2220 3372 3200 5615	11.13 5.32 3.87	2744	11.21 7.25 5.65	2337 4274	8.37 5.10 4.01	1485 1051 1842 1744 3448	file, 2009	% Married % Widowed or divorced	61		Route of HIV Transmission, ICTC 2011	Parent to	Syringe Child Unknown	0 863	_	el Details					Shahpura, Kundam, Majhholi, Panagar,	
2009 2010	050		0.07 0.12	7317 6696		32272								•	7.65 6.44	3372 3200	5.32 3.87	2744 3024	7.25 5.65	4274 4480	5.10 4.01	1842 1744		ed or		Γ			Unknown	C	·						Majhholi,	,
2010	0.50	398	0.12	9699		32272	2.94	238	•			-			6.44	3200	3.87	3024	5.65	4480	4.01	1744						Г									Panagar,	,
	+	398		\vdash		H	2.94	238	-		-	-	-	\dashv	\dashv	\dashv	_			\dashv	\dashv	\dashv																
2011			0.13	11076	0.08	33759									4.65	5615	3.08	4506	3.67	6728	4.41	3448														,		
																											_											
	Size Est	(Mapping,	2008)	% Total HRG		% Total Pop.	Programme	Target	Programme	Coverage			-	Iypology				% <25 yrs.	% Married		No. episodes	treated	% Syphilis pos.	No.	FSWTIs	MSM TIs	IDU TIS	Comp. TIs	Total tartads	Blood Banks	STI dinics	ART centers	Link ART centers	PLHIV Networks	Ked ribbon	Comm. care	Drop-in-centers	CION III CEIREIS
HRG Size	FSW	963		22.90		0.04			089	Homo	based-	NA;	Brothel	Dased- NA:	Street	based-	¥		- I	2008				2004					7	2	2							
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		No. out- migration	alem de /o	% of male	% of total	migration							Nagpur	Maharasht						2011	5	1,2563		Programme Res 2007 2008					2 2		2 2	1				-	·	
Male Mi	Overall	58677		5.17		100	Top distribute	ו אוואפוח לוסו						ra Maharashtra										sponse 2009	1	-	-				3	1		-	45	-	-	
gration, 2001	Inter-state	15903		1.40	;	27.10	100	n mier-state o					Pune	Maharashtra										2010	-				17070	2	3	-		-	45	-	-	
Census	Intra-	23712		2.09	:	40.41	***************************************	remigration.					Raipur	Chhatisgarh										2011	1	-	2		21107	2	n	-		-	45	-		
Male Migration 2001 Census	5	Overall Inter-state Intra-stat	Overall 58677	Overall 58677	58677 e 5.17	S8677 e 5.17	S8677 e 5.17	S8677 e 5.17 Too dical factories	Overall S8677	Overall S86.77	S8677 e 5.17 100	S8677 e 5.17 100	S8677 S8677	Overall Inter-state Inte	Overall Inter-state Inte	Overall Inter-state Intra-state Intr	Overall Inter-state Inte	Overall Inter-state Inte	Overall Inter-state Intra-state Intr	1590 119-134e 1140-134e 1140-134e	Coveral Inter-state Intra-state Intr	Overall Inter-state Inte	Coveral Inter-state Inte	Overall Inter-state Inte	Overall Inter-state Intra-state Intr	Coveral Inter-state Inter-state Coveral Inter-state Inter-st	Coveral Inter-state Inte	Coveral Inter-state Intra-state Intr	Coveral Inter-state Intra-state Intr	Coveral Inter-state Inte	Coveral Inter-state Intra-state Intra-	Overall Inter-state Intra-state Intr	Overall Inter-state Intra-state Intra-	100 27.10 40.41	S8677 15903 23712	Coveral Inter-state Inte	Coveral Inter-state Inte	Overall Inter-state Intra-state Overall Inter-state Intra-state Intra-stat

* Inadequate sample sizer - Data not available; 1 2011 Census; 2 Source: DLHS III; 3 Data presented only for years where sample size is valid (HSS-ANC; 300 tested, HSS-HRG/STD: 187 tested, ICTC; 600 tested, PPTCT and BB: 900 tested); PP = percent positive, NT = number tested; 3 General clients and pregnant women

Jhabua, Madhya Pradesh

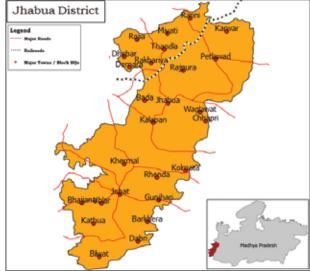
Background:

Jhabua is a predominantly tribal district located in the western part of Madhya Pradesh. It has a population of 10.24 lakhs, a sex ratio of 989 females per 1,000 males, a female literacy rate of 34.3% and an overall literacy rate of 44.4% (2011 Census). The district is highly drought-prone and degraded waste lands form the face for Jhabua. The women make lovely ethnic items including bamboo products, doll, bead-jewellery and other items that have for long decorated the living rooms all over the country. The men have since ages adorned "Teer-Kamthi", the bow and arrow, which has been their symbol of chivalry and self-defense. The major highway that passes through Jhabua district is National Highway 59.

HIV Epidemic Profile:

- Based on 2011 PPTCT the level of HIV positivity was low at 0% with a stable trend, while HIV positivity level among blood bank was moderate (0.50%). A trend could not be determined due to lack of data.
- HIV positivity among ICTC attendees in 2011 was low among direct walk in (0.39%) and referred (0.99%) clients and also among male (1.20%) and female (0.71%) clients. Due to lack of data, trend could not be determined.
- The Syphilis sero-positivity rate among STI clinic attendees in 2010 was 2.6%, and the number of STI episodes treated were 4718 in 2011, compared to 331 cases in 2010.
- As per the 2001 Census, 8.5% of the male population were migrants; 32.09% of them migrated to other states and 35.26% migrated to other districts within the state.
- The top destinations for out-of-state male migration were Kota in Rajasthan, and Vadodara and Surat in Gujarat.
- HIV and RTI/STI awareness rates among women were 12.4% and 7% respectively (DLHS-III).
- Link ART center, PLHIV network and red ribbon clubs were established 2009 onwards.
- ICTCs were strengthened in 2011 to seven, before that only two ICTC center were there.

- Strengthen quality outreach programme of TI towards FSWs and along the highways.
- Assess and promote special awareness campaign especially among women pockets of highways and out migrants in the district.
- Focus on establishing mechanism for regular monitoring of PPTCT-ICTC, Blood Bank and ART on demographics and geographic parameters.
- There is a need to establish mechanism for understanding the dynamics of HIV transmission and HRG size.



Bharuch, Gujarat

19648

2.80

Intra-district

32.65

Jhabua, Madhya Pradesh

District Population: 10,24,091 (1.4% of MP Population); Female Literacy¹: 34.3%; ANC Utilization²: 23.5%

	Census	Intra-	State	21215		3.02		35.26	ut-migration						Bundi,	Rajasthan										2011	1				6613	-	-			9		266
	Male Migration, 2001 Census	Inter-	state	19308		2.75		32.09	nter-state o							Gujarat R										2010	7010				4844	-	-			9		352
	Male Migra	Overall		60171		8.57		100	Top districts for inter-state out-migration						_											2000	1				1106	-	1			9	. .	
bilities				No. out- migration	% of male	pop.	% of total	migration	1							Rajasthan										SUUS SUUS	1					-						
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				Size Est. (Mapping, 2008)		% Total HRG		% Total Pop.	Programme Target	Programme	Coverage				Typology	lypology				% <25 yrs.	% Married	STI/RTI		No. episodes treated	% Syphilis pos.	No	FSW/TIc	MSM TIS	IDU TIs	Comp. TIS	Total tested ⁵	Blood Banks	STI dinics	ART centers	PLHIV Networks	Red ribbon clubs	Drop-in-centers	Condom outlets
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	2010			90.0	1674	0	651						-		-	2.76	1085	1.01	2085	1.56	3141	06.9	59										-		,	,		
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	2008												-		-		-	-			-	-		-	ō				Unknown		0		-					
Tren ds 3	2007								-				-		-		-	-			-	-		2009	% Widowed or divorced				Parent to		17.50	etails	-			,		
HIV Levels and	2006								-				-		-		-	-			-	-		IIV Profile,	% Married		-	ICTC 2011	Needle/	o) III Ide	2.50	ck-Level D	-					
HIV	2005				,				-						-					•				III PLI	% III., Prim. Edu.		-	ansmission, I	Blood		0	Blo	-		,			
	2004								-				-		-			-			-	-			% 15-24			Route of HIV Transmission,	Homo-	sevage	0		-					
		PP⁴	NT ⁴	Ы	μ	ЬЬ	IN	ЬР	NT	Ы	N	ЬР	NT	ЬР	NT	ЬР	NT	ЬР	NT	Ы	NT	ЬР	N		% On ART			Roi	Hetero-	sevnal	08		-					
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* Inadequate sample size; - Data not available; 1 2011 Census; 2 Source: DLHS III; 3 Data presented only for years where sample size is valid (HSS-ANC: 300 tested, HSS-HRG/STD: 187 tested, ICTC: 600 tested, PPTCT and BB: 900 tested); 4 PP = percent positive, NT = number tested; 3 General clients and pregnant women

Katni, Madhya Pradesh

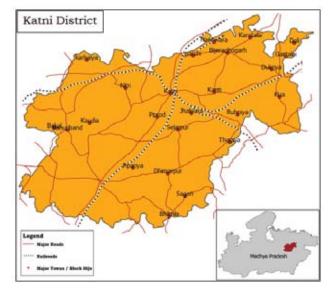
Background:

Katni district is located in the North-eastern part of Madhya Pradesh, it forms the northern district of Jabalpur commissionerate division. It has a population of 12.91 lakhs, a sex ratio of 948 females per 1,000 males, a female literacy rate of 62.5% and an overall literacy rate of 73.6% (2011 Census). Economy of Katni district mainly depends on agriculture. Many mineral based industries are located in the district and are growing rapidly besides these pulses mills in Katni. There is also a good market of cereals and other agrobased products in Katni. Katni District also has a good cloth market. The major highways that pass through Katni district are National Highway 7 and 78.

HIV Epidemic Profile:

- Based on 2011 PPTCT and Blood Bank data, the level of HIV positivity was found to be at zero percent with a stable trend for PPTCT.
- HIV positivity among ICTC attendees was moderate among direct walk-in (0.50%, 2010) and referred clients (0.54%, 2011) and also among male (0.56%, 2011)
 - clients but low among female (0.26%, 2011) clients. Due to lack of data, trend was not determined.
- The number of STI episodes treated were 3509 in 2011, increased significantly compared to 2010.
- As per the 2001 Census, 4.02% of the male population were migrants; 8.7% of them migrated to other states and 50.4% migrated to other districts within the state.
- The top destinations for out-of-state male migration were Raipur (30%), Bilaspur (30%) and Durg (21%) of Chhattisgarh.
- HIV and RTI/STI awareness rates among women were 31.8% and 13.8% respectively (DLHS-III).
- There has been a gradual increase in the number of ICTCs in the district from 2008 onwards.
- There was only one composite targeted intervention (TI) for High Risk Group (HRG) population in the district although 2008 mapping estimates not available.

- Data Triangulation of Katni district suggested that role of out as well in-migration, passing of National highways, and low awareness of HIV/ AIDS were possible vulnerability factors in the district that needs focus.
- Data assessment and analysis of positive people at ICTC and STI is first recommended to understand source and spread of HIV.
- Availability of data regarding mapping for HRGs, profile and pattern of migration and truckers is recommended for better insight to district HIV vulnerabilities
- Strengthen outreach programme through awareness campaign especially among women out migrants, industry workers of district and around trucking halt points and highways in the district.



2010

906/

6558

Nagpur, Maharashtra

Durg, Chhatis-garh

Katni, Madhya Pradesh
District Population: 12,91,684 (1.8% of MP Population); Female Literacy: 62.5%; ANC Utilization?: 19.7%

Intra-district

Intra-state

Inter-state

ration, 2001 Census

8978 1.64

1933 0.35 8.78

40.80

50.42

2.02

n inter-state out-migration

			₹	IIV Levels and	d Trends ³								Iny	nerabilities	
		2004	2002	2006	2007	2008	2009	2010	2011		HRG Size				Male Migra
JINV 33F	ЬР₫		-	-	-	-		0			FSW	MSM	Ē		Overall
HSS-AINC	NT⁴							400			400	AIC M	2		+
PDICI	ЬР	-	-		-	-	0.04	0	0	Size Est.				No. out-	22007
	N						2789	3007	3634	(Mapping, Year: NA)				migration	4
Jacob Dool	ЬР	-	-	-	-	-	-	0	0	% Total HRG				% or male	ale 4.02
DIOUU BAITK	IN							1998	2747					pop.	104
OLD SON	ЬР	-	-		-	-				% Total Pop.				70 UI (Utal	100
J15-551	N									Programme Target			,	h	Top districts for
700 001	Ы									Programme Coverage	ļ.				
H55-F5W	IN									riogiannie coverage	, Incirc				
DISC MON	Ы										-based-	Kothi-	;		
INICINI-SCL	F										NA;	NĄ:	Daily		
	Ы										Brothel	Panthi-	Injectors-	Q	
001-881	IN									Typology	pased-	NA;	Non daily	Chhatis-	, bilaspui,
CTC Male	ЬР	-	-	-	-	-	-	95.0	0.56		NA:	Double	injectors-	garh	
CIC Wate	M	-	-		-	-		1801	1958		bacod	gecker-	NA	1	
CTC Female	Ы							0.29	0.26		NA NA	Š			
CIC Iciliale	M	-	-		-			1750	2314	% ~ 75 vrc				-	
CTC Referred	Ы							0.37	0.54	% Married					
CIC Melelled	M	-	-		-			2675	3175		STIVRTI				
ICTC Direct	М	-	-		-			0.57	0		2008	2009	2010	2011	
Walk-in	N				-			876	1086	-			Ť		
			Z	≩	9, 2009	-				No. episodes treated			1338	3509	
	% On ART	% 15-24	% III., Prim.	% V	% Widowed or	Jo p				vo apprime pos.			rogr	amme Respor	se
ART (NA)			ron.	- 1	divolu	T				No.	2004	2002	2006 2	2007 2008	8 2009
DIN (NA)						Τ				FSWTIs				-	
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	Hetero-	Homo-		Needle/	Parent to		Τ			IDU TIS					1
	sexnal	sexnal	Blood	Syringe	Child	Unknown	_			Comp. IIs		-			
% of Total Pos.	NC 00	00 1	c	-	00 1	c	Γ			Total testads			_	η _	3
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			8	ock-Level	Details					DIOUU BAIIKS					
No. HRG-FSW										ART centers	-	+	+	-	 -
No. HRG-MSM										Link ART centers					Ľ
No. HRG-IDU		,								PLHIV Networks	-			-	
A Danishing ICTC										Red ribbon clubs					6
% FUSITIVE, IC.I.C.										Comm. care centers					
% Positive,		,								Drop-in-centers					_

* Inadequate sample size; - Data not available; 1 2011 Census; 2 Source: DLHS III; 3 Data presented only for years where sample size is valid (HSS-ANC; 300 tested, HSS-HRG/STD: 187 tested, ICTC; 600 tested, PPTCT and BB: 900 tested); 4 PP = percent positive, NT = number tested; 3 General clients and pregnant women

Mandla, Madhya Pradesh

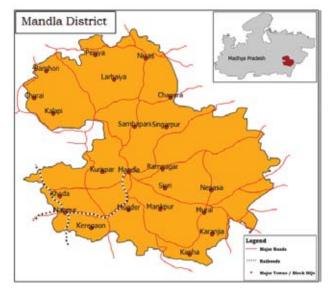
Background:

Mandla district lies in the Mahakoshal region, and most part of the district lies in the basin of the Narmada River. Mandla is a part of Jabalpur Division. It has a population of 10.53 lakhs, sex ratio of 1005 females per 1,000 males, a female literacy rate of 57.2% and an overall literacy rate of 68.2% (2011 Census). The district's economy relies mainly on forests and natural resources, as well as tourism. Kanha National Park, in particular, is Mandla's most famous tourist attraction. The major highway that passes through Mandla district is National Highway 12.

HIV Epidemic Profile:

- Based on 2011 Blood Bank data, the level of HIV positivity was low (0.32%) and the level of HIV positivity was moderate for HSS-ANC 2010 (0.75%). The trend of blood bank and HSS-ANC data was not determined due to lack of three data points.
- In 2011, HIV positivity among ICTC attendees was low among male (3.57%), and female (3.17%) clients and also among referred (3.81%) and direct walk in (2.61%) attendees. A trend could not be determined due to lack of data points.
- The number of STI episodes treated were 1082 in 2011 and 433 in 2010.
- As per the 2001 Census, 7.06% of the male populations were migrants; 15.7% of them migrated to other states and 38.13% % migrated to other districts within the state.
- The top destinations for out-of-state migration were Nagpur in Maharashtra and Raipur in Chhattisgarh.
- HIV and RTI/STI awareness rates among women were 24.5% and 8.4% respectively (DLHS-III).
- There was an increase in the number of ICTCs from one to eight in 2011 and there was one linked ART center in the district.

- Data triangulation of Mandla district suggested that role of out-migration, poor awareness of HIV/STI, probable presence of hidden FSWs and National highways were possible vulnerable factors in the district that needs attention.
- Data assessment and analysis of positive people at HSS-ANC, ICTC, Linked ART and STI clinics will provide further insights to understand source and spread of HIV in the district.
- Improved data availability with mapping for HRGs and migrants, truckers at halting points for risk behavior will provide more information regarding district vulnerabilities.



1868

Durg, Nainital, Chhatisgarh Uttarakhand

Mandla, Madhya Pradesh

District Population: 10,53,522 (1.4% of MP Population); Female Literacy!: 57.2%; ANC Utilization²: 28.4%

Intra-district

Male Migration, 2001 Census
Overall Inter-state state

14557 3.26

12020

46.17

38.13

Top districts for inter-state out-migration

	2004	2005	2006	2007	2008	2009	2010	2011		HRG Size	e				Male Mi	Male Migration, 2001 Ce
PP⁴							0.75			FSW	MSM	na			Overall	Inter-state
NT⁴							396		Cizo Ect							1
Ы						0.10	*	*	(Mapping, Year:		,	'	28	lo. out-	31527	4950
N						1019	*	*	NA)					IIgiatioii		
ЬР		,	,	,			0.16	0.32	% Total HRG		,	,	8 8	6 of male	7.06	1.11
NT					-	-	1850	2170					2 2	op.		-
dd		-	-	-	-				% Total Pop.		•	•	5° E	o or total	100	15.70
LN									Programme Target				T		on districts fo	r inter-ctate
ЬР									Programme						op distilled in	יוונבו אמנכ
IN									Coverage		•					
Ы										Home						
N										-pased	Kothi-	Daily				
Ы										NA;	NA;					
IN									Typology	-pased	NA:			Nagpur,	Raipur,	Kawardha,
ЬР							3.45	3.57	660046	NĄ:	Double			/aharashtra	Chhatisgarh	Chhatisgarh
LN							637	589		Street	decker-					
PP						-	3.87	3.17		- pased-	¥					
NT					-		439	410	% < 75 vrs	<u> </u>			T			
ЬР							3.06	3.81	% Married			,				
IN	,			,	,	,	490	929		STIVE	III.					
Ы							3.06	2.61		2008	2009	2010	2011			
NT		,					490	356	No. episodes	,		433	1082			
		PL	.HIV Profile	, 2009					% Syphilis pos.	,		12.24				
% On ART	% 15-24	% III., Prim.	% Married	% Widower	JO D							4	Programm	ne Response	e	
					Γ				No.	2004	2005	2006	2007	2008	2009	2010
									MSM TIS			,			-	
Roi	ute of HIV Tra	ansmission, I	CTC 2011						IDUTIs							
Hetero-	-omoH	Plood		Parent to	arroadal I				Comp. TIs							
sexnal	sexual	2000	_	Child					ICICs	-	-	-	-	-	_	-
100	C	C	c	C	C				Total tested ⁵	,	, ,	, ,	, ,		1019	1616
3	,	,	,	,	,				Blood Banks	_[.	_ .	-[-	_ ,		- - - -
		Ble	ock-Level D	etails					APT Contact			-		-	_	-
									Link ART centers							-
									PLHIV Networks	,					-	- '
		,	,						Red ribbon clubs						6	6
					-	-			Comm. care centers							•
									Drop-in-centers	,		,				
									Condom outlets		•	,			-	
	NIT			% 15-24 % III., Prim. % 15-24 % Edu. Married Church Februaries Signory, ICTC 2011 Homo- Blood Syringe O 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		% 15-24 % III., Prim. % % Widowced or change of HIV Transmission, ICTC 2011 Homo- Blood Syringe Child Un Sexual Blood Syringe Child Un Sexual Blood Syringe Child Un Syringe Child Un Syringe Child Un Sexual Blood Syringe Child Un Sexual Blood Syringe Child Un Syringe Child Un Sexual Blood Syringe Child Un Syringe Child Un Sexual Blood Syringe Child Un Sexual Blood Syringe Child Un Sexual Syringe Child Un Sexual Blood Syringe Child Un Sexual Syringe Child Un Sexual Syringe Child Un Sexual Syringe Child Un Sexual Syringe Child Un Syringe Child Un Sexual S		10.10 1.00		10 10 10 10 10 10 10 10	1. 1. 1. 1. 1. 1. 1. 1.	1.00 1.00	1019 1019	1	Size St. St.	10 10 10 10 10 10 10 10

* Inadequate sample size; - Data not available; ' 2011 Census; 2 Source: DLHS III; 3 Data presented only for years where sample size is vaild (HSS-ANC; 300 tested, HSS-HRG/STD: 187 tested, PCT and BB: 900 tested); 4 PP = percent positive, NT = number tested; 3 General clients and pregnant women

Mandsaur, Madhya Pradesh

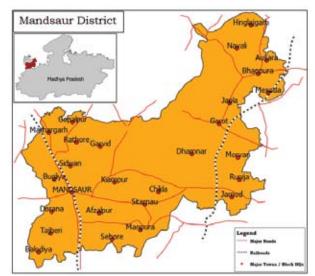
Background:

Mandsaur district is a part of the Malwa region, and forms the northern projection of Madhya Pradesh. It has a population of 13.39 lakhs, sex ratio of 966 females per 1,000 males, a female literacy rate of 58.3% and an overall literacy rate of 72.7% (2011 Census). Economy of Mandsaur district mainly depends on agriculture. The slate pencil industry is the main industry of the district. Mandsaur is famous in poppy's production. Huge mines of rocky stone and lime stone are available within the district. There is a high production of slate pencils which are created by rocky stone. The district of Mandsaur is noted for the manufacture of Kambals or coarse woolen blankets. The major highway that passes through Mandsaur is National Highways 79.

HIV Epidemic Profile:

- Based on the 2010 HSS-ANC data, level of HIV epidemic was high (2.75%) with a rising trend, and based on the 2011 PPTCT and Blood Bank data HIV prevalence was low (≤ 0.34%) showing a stable to declining trend.
- In 2011, HIV positivity among ICTC attendees was moderate
 among direct walk in (8.69%) but low among referred
 (3.37%) clients. Also HIV positivity among was close to moderate among male (4.81%) clients but low among (3.73%) clients. A fluctuating
 trend was observed for direct walk-in and male clients while stable to increasing trend was observed for female and referred clients.
- As per mapping conducted in 2008, FSW (395, 56.5% of total HRG) was the largest HRG in the district, followed by MSM (304, 43.4% of total HRG).
- The Syphilis positivity rate among STI clinic attendees in 2010 was 2.9%; and the number of STI episodes treated in 2011 were 3991, much higher compared to 2010.
- As per the 2001 Census, 5.3% of the male population were migrants; 18.4% of them migrated to other states and 31.6% migrated to other districts within the state.
- The top destinations for out-of-state male migration were Chittaurgarh (36%), Jhalawar (28%) and Kota (20%) in Rajasthan.
- HIV and RTI/STI awareness rates among women were 25.6% and 11.9% respectively (DLHS-III).
- Of the 177 PLHIV registered at the District-level Network (DLN) in 2009, 51% were on ART, 85% were married and 8% were widowed or divorced.
- There has been a gradual increase in the number of ICTCs from 2008 onwards in the district. One targeted intervention (TI) each for FSW and MSM population and one Anti-Retroviral Treatment (ART) centre were also present in the district.

- Data triangulation of Mandsaur district suggested that high risk behavior, size of FSWs and MSM, National highway, out migration and poor awareness of HIV/STI were probable vulnerable factors in the district and needs attention.
- Detailed analysis of positives at HSS, ART, ICTC-PPTCT and blood bank will be useful to identify sexual dynamics and spread of HIV in the
 district.
- Major gaps like assessment of profile of HRGs and their bio-behavior parameters will provide more knowledge on district vulnerability.
- Assessment or small study on out migrants and truckers may address the district vulnerability and their role in HIV epidemic.
- Strengthen outreach efforts through awareness campaigns especially among MSM, out migrant pockets and around trucking halt points and highways in the district.
- There is a need to better understand the dynamics of HIV transmission among FSW, MSM particularly through initiation of HRG sites for HIV Sentinel Surveillance.



2009

2008

12591

57272

3388

Udaipurr, Rajasthan

Bhilwara, Rajasthan

Kota, Rajasthan

Jhalawar, Rajasthan

Chittaurgarh, Rajasthan

Intra-district 16285

Inter-state 6013 0.99 18.44

Overall 32600

Male Migration, 2001 Census

10302

No. out-migration % of male pop.

49.95 2.69

31.60

100

% of total migration Top districts for inter-state out-migration

Mandsaur, Madhya Pradesh

District Population: 13,39,832 (1.8% of MP Population); Female Literacy¹: 58.3%; ANC Utilization²: 57.5%

E			_		-1	5- 1		_		_				_							Ξ	3991		Program	2007					1984		1	١.	T.			
		DOI	0		0	0					:	Daily	rijectors- NA:	Non daily	injectors-	¥						Т	Т		\vdash		+	+	+	H	+	+	+	H	\vdash	+	+
	r	MSM	304		43.49	0.02		†	_	t		Ä.				gecker- NA	ζ	<u> </u>	T.		2010	1509	2.98		2006				-	374					Ľ		_
٩	L	ž	3	- 1	43	ö	4	+		+	<u> </u>			z	20 -	9 2	_	Ļ	L		2009	١.			2002				-	360	- -	- -					
HRG Size	200	FSW	395		56.5	0.03			٠	Homo	based-	NA;	Brothel	pased-	Y Y	hased-	NA	1		STI/RTI	2008	,			2004				-	357		-					
			Size Est.	(Mapping, 2008)	% lotal HKG	% Total Pop.		Programme larget	Programme	Coverage				Typology				% <25 yrs.	% Married			No. episodes treated	% syphilis. pos.		No.	FSWTIs	MSM IIs	IDU IIS	ICTCs	Total tested ⁵	Blood Banks	APT contors	Link ART centers	PLHIV Networks	Red ribbon clubs	Comm. care centers	Drop-in-centers
2011	1 02		0.34	7265	0.22	9411									4.81	2889	3.73	2437	3.37	4426	8.69	066													Others,	2.75	Others,
2010	37.6	400	0.48	3523	0.25	7164			-					,	7.25	1518	4.05	1137	4.76	2310	13.33	345													Daloda,	24.53	Daloda,
2009	5007		0.26	3829	0.37	7272									5.49	1985	3.84	1458	3.97	1458	5.94	807													Suwasra,		Suwasra,
2006	2000	400	0.44	1361	0.46	7587	-		-		-		-		16.33	453	2.47	1574	2.4	250	16.33	453		d or					Unknown	1.27					Shamgarh,	4.55	Shamgarh,
2007	7007	400			-		-	-	-				-	,	8.94	514	2.08	1470	2.88	1214	5.32	770	, 2009	% Widowed or	divorced	2 0	0	Parent to	Child	5.91	Details				Bhanpura,	1.4	Bhanpura,
2006	2007	400			0.15	6702	-		-		-		-	,	*	*	*	*	*	*	*	*	≧.		Married	/ 05	CTC 2011	Needle/	Syringe	0	ork-level [ŀ			Garoth,		Garoth,
2005	2007	400					-		*	*	-				*	*	*	*	*	*	*	*	PL	% III., Prim.	Edu.	09	Trancmiccion	, inclination,	Blood	1.27	Blo	١.			Malhargarh,	17.91	Malhargarh,
2004	t007	401					-	-	-		-		-		*	*	*	*	*	*	*	*		% 15-	24	D)	T /III to oting	Homo-	sexnal	2.95		-			Sitamau,	4.19	Sitamau,
	POQ.	Y N	М	IN	dd	IN	ЬР	IN	ЬР	IN	ЬР	IN	ЬР	N	Ы	F	Ы	N	dd.	N	G.	F		% On ART	Į.	65		Hetero-	sexnal	88.61					Mandsaur, Sitamau, Malhargarh,	12.7	Mandsaur, Sitamau, Malhargarh,
		HSS-ANC	10100		Jacob Doold	Blood Bank	UCC CTD	U16-66H	//02 550	115.5-F 5VV	HSC-MSW	INICIAL-CCI	HOLDIN	001-551	ICTC Male	200	ICTC Female	200	CTC Referred	Pallacian Color	ICTC Direct	Walk-in			(010)	ARI (240)	DEIX (177)			% of Total Pos.	(OC 1 - NI)	No. HRG-FSW	No. HRG-MSM	No. HRG-IDU	% Positive ICTC	יס רטומיבי וכו כ	% Positive. PPTCT

* Inadequate sample size; - Data not available; 1 2011 Census; 2 Source: DLHS III; 3 Data presented only for years where sample size is valid (HSS-ANC: 300 tested, HSS-HRG/STD: 187 tested, ICTC: 600 tested, PPTCT and BB: 900 tested); 4 PP = percent positive, NI = number tested; 5 General clients and pregnant women

1065

9

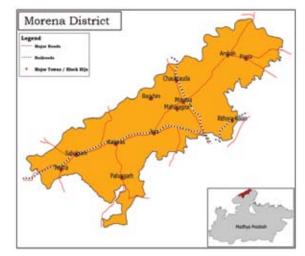
Morena, Madhya Pradesh

Background:

Morena district is situated in the Northern most portion of the state and is part of the Chambal division. It has a population of 19.65 lakhs, sex ratio of 839 females per 1,000 males, a female literacy rate of 57.6% and an overall literacy rate of 72.07% (2011 Census). Economy of Morena district mainly depends on agriculture. Aside from this agricultural endeavor, several industries have also set up operations, a majority of which are in the Industrial Development Center in Banmore. The major highway that passes through Morena district is National Highway 3.

HIV Epidemic Profile:

- Based on 2011 PPTCT and Blood Bank data, the level of HIV
 positivity was low (0.03 0.12%), a decreasing trend for PPTCT
 was observed. Due to lack of data points for blood bank, trend
 for blood bank could not be determined.
- In 2011, HIV Positivity among ICTC attendees was close to
 moderate in direct walk in (4.36%) but low among referred
 (1.23%) as well as among male (1.99%) and female (1.77%)
 clients, indicating higher infection rate among vulnerable population. The trend of epidemic was not determined due to lack of data points.



- The Syphilis sero-positivity rate among STI clinic attendees in 2010 was 3.2% and the number of STI episodes treated were 5302 in 2011, compared to 563 in 2010.
- As per the 2001 Census, 3.8% of the male population were migrants; 23.3% of them migrated to other states and 37.01% migrated to other districts within the state.
- The top destinations for out-of-state male migration were Surat (37%) and Ahemdabad (10%) in Gujarat which were high prevalent districts.
- HIV and RTI/STI awareness rates among women were 29.8% and 19.7% respectively (DLHS-III).
- There has been a gradual increase in the number of ICTCs from 2009 onwards in the district.
- There was one targeted intervention (TI) site for FSW and MSM.

- Data triangulation of Morena district suggested presence of HRGs based TI for FSW and MSM, out of state migration, high risk behavior of
 population, National Highway passing through (FSW and Truckers link) and poor awareness of HIV/STI as probable vulnerable factors in the
 district that needs attention.
- Information on ART patients profile data, estimates of size and profile of HRG, bio-behavior data of HRG, is required to improve the understanding of the district vulnerability.
- Focus on establishing mechanism for regular monitoring of HSS, PPTCT and Blood Bank data for positives to understand source and spread of HIV.
- Strengthen outreach programme through awareness campaign especially among women pockets of industry workers and around trucking
 halt points along highways in the district.

2010

4911

5437

15

South Delhi North East

Dhaulpur, Rajasthan

Delhi

Morena, Madhya Pradesh

District Population: 19,65,137 (2.7% of MP Population); Female Literacy': 57.6%; ANC Utilization?: 12.5%

Migration, 2001 Census

13161

12281

7743

0.89

1.51

1.41

cts for interstate out-migration

			ΑIN	Levels and	. Irends									Vallera	Dillines	
		2004	2005	2006	2007	2008	2009	2010	2011		HRG Size					Male N
0144	PP4										FSW	MSM	ngi			Overall
HSS-AINC	NT ⁴							,		Size Est.					No. out-	33185
HOH	ЬР						0.31	0.16	0.12	(Mapping, Year: NA)				7	migration	
L L	IN						1617	3800	2510	% Total HRG	,		•		% of male	3.81
	Ы							0.08	0.03						bob.	
Blood Bank	۲				,			2411	5869	% Total Pop.		,	•		% of total	100
9	ЬР							0		F					IIIIgiation	
	IN							246		Programme larget				<u> </u>	-	lop districts
78102 331	8									Programme		•	•			
NS-1-56	IN									Coverage	Homo			ı		
DOC MACM	Ь										-pased-	Kothi-	:			
IVICIVI-CC	N										NA;	Ä.	Daily			
14	8				,						Brothel	Panthi-	Injectors-	-5		hmodel
HSS-IDU	ħ									Typology	pased-	NA;	Z	>	Suldt, /	Gijarat
	Ы							3.52	1.99		NA;	Double		-5	oujaiat.	Cujarat
	N							682	1105		Street	decker-				
CTC	М							2.30	1.77		NA NA	Ĭ				
- IC remaie	N							955	1296	% / 75 yrc	-		,	ı		
T. D.f.	Ы							2.45	1.23	% Married				I		
	IN							1143	1868		STI/RTI	E				
ICTC Direct	ЬР	-	-				-	3.64	4.36		2008	2009	2010	2011		
alk-in	IN							494	528	No. episodes treated			1698	5302		
			Ы	HIV Profile	3, 2009					% Syphilis pos.			3.20			
	% On ART	% 15-24	% III., Prim.		% Widowed or	d or							Pr	ogramm	e Respons	9
			Edu.	Married	divorced					No.	2004	2005	5006	2007	2008	2009
ARI (NA)										FSW TIS					- -	
6.00	Ro	Into of HIV T	Boute of HIV Transmission ICTC 201	ICTC 2011						IDITIE						'
	Hetero-	Homo-	-	Needle/	Parent to					Comp. TIs						'
	sexnal	sexnal	Blood	Syringe		UNKNOWN				ICTCs			-	-	-	2
% of Total Pos.	05 11	2.12	c	c	0 51	90 1/				Total tested ⁵	-	-	-	-		1617
√=47)	00.	5.13	>	>	0.0	4.20				Blood Banks	1	1	1	1	1	1
			=	ock-Level	Details					STI clinics	-	-	-	-	-	-
No. HRG-FSW								,		ART centers	-	-	-	-	-	-
No. HRG-MSM								,		Link ART centers						
Vo. HRG-IDU								,		PLHIV Networks	,					•
										Red ribbon clubs	,					12
% Positive, ICTC										Comm. care centers	,					'
% Positive,										Drop-in-centers	,	,				'

* Inadequate sample size; - Data not available; 1 2011 Census; 2 Source: DLHS III; 3 Data presented only for years where sample size is valid (HSS-ANC: 300 tested, HSS-HRG/STD: 187 tested, ICTC: 600 tested, PPTCT and BB: 900 tested); 4 PP = percent positive, NT = number tested; 3 General clients and pregnant women

Narsimhapur, Madhya Pradesh

Background:

Narsimhapur district is situated in the central part of Madhya Pradesh. It has a population of around 10.92 lakhs, sex ratio of 917 females per thousand males, a female literacy rate of 67.6% with an overall literacy rate of 76.7% (2011 Census). The economy of Narsimhapur, well known for its fertile land, is primarily agrarian. Industries are few and mostly agriculture-oriented. The major highway that passes through Narsimhapur district is National Highway 26.

HIV Epidemic Profile:

- Based on 2010 HSS-ANC, 2011 PPTCT and Blood Bank data, the district had a low HIV prevalence (0-0.25%) with a stable trend observed for PPTCT. Due to lack of data for previous years in HSS-ANC and Blood Bank, a trend could not be determined.
- HIV sero-positivity among ICTC clients was low among direct walk-in (1.41%, 2011) and referred (0.68%, 2011) clients, as well as among female (0.96%, 2011) and male (0.88%, 2011) clients. Due to lack of data, a trend could not be determined.



- HIV and RTI/STI awareness rates among women were 40% and 19.2% respectively (DLHS-III)
- HIV programme in districts focused mainly on prevention aspects with four ICTCs, two TI's, one Blood Bank and one DSRC operational in the
 district in 2011.
- As per 2011 census, 5.43% of the male population were migrants, 3.37% of them migrated to other states and 35.07% of them migrated to other districts within the state.
- The top destination for inter-state out-migration was Nagpur in Maharashtra.
- One Link ART Centre was operational in the district to facilitate ART treatment for HIV positives.
- Red ribbon clubs (RRCs) were established in 2009 to generate awareness about HIV/AIDS in the youth. 10 RRCs were operational in the districts during 2011.

- The district has low HIV epidemic and low background vulnerabilities for HIV. Routine programme reporting, vital to understand the epidemic
 pattern in district, may be strengthened for completeness and quality. Data from existing ICTCs, Blood Banks and STI clinics may be examined
 to understand HIV transmission dynamics in district.
- The district may continue to focus on HIV prevention programme. IEC programme may be strengthened in district, especially around trucking
 halt points and highways in the district to improve the awareness on HIV.
- There is some parental transmission observed, which needs to be studied further to understand the source of these infections.

Narsimhapur, Madhya Pradesh

District Population: 10,92,141 (1.5% of MP Population); Female Literacy': 67.6%; ANC Utilization?: 50.4%

Intradistrict 16772

Intrastate 9556 61.56

35.07 struction

					COLLEGE										3		
		2004	2005	2006	2007	2008	5009	2010	2011		HRG Size	ize			2	Male Migration, 2001 Ce	n, 200
ONV SSE	pb⁴							0.25			FSW	MSM	nd			Overall	Inter-
3-AINC	NT ⁴							398			-			: 			state
PPTCT	ЬР		-	-			0	0.07	0	Size Est.	•	•	•	Ż 8	No. out- migration	27245	917
	NT		,		,		1294	1421	1544	% Total LIDG				8	% of malo pop	5 13	01
Jacob Coold	Ы					-		0.03	0.25	/o lotal lind		-	·	× 2	of total		<i>-</i>
ou ballk	NT							2922	2799	% Total Pop.	•	•	•	8 8	% OI (Utal	100	3.37
CE3	Ы					-				Programmer Toron	Š	Y.	V I	T		rices for inte	- 1
HSS-SID	N									Programme larget	₹	¥	YA.	 	sip doi	lop districts for inter-state out	I-Stati
791.33	М									Coverage	•		•				
N2-F2W	F									Soverage	Home			T			
FYSFY SSH	ЬР										-pased-						
INICINI-CO	F										NĄ;		Injectors				
2	М										Brothel				Nagnir		
UZI-SCH	N			,	,					Typology	-pased-				Maharashtra		1
TC 141-1-	М							0.98	0.88		NA:	Double	injectors-				
CIC Male	N							915	1244		barreet	decker-					
olemen T.	М							1.78	96:0		NA	<u> </u>					
- Lemale	N							561	1147	% <25 vrs.		-	-	_			
CTC Bofornod	ЬР	-	-	-		-		0.71	0.68	% Married		ŀ	ŀ				
na lialian	N							423	2071		ST	STI/RTI					
ICTC Direct	ЬР							1.52	1.41		2008	5009	2010	2011			
alk-in	NT			-		-		1053	427	No. episodes			1544	4646			
			P	LHIV Profil	e, 2009					treated			+				
	% On ART	% 15-24		Marriad	% Widowed or	Jo po				% syphilis pos.			O Prog	amme Re	esponse		
ART (NA)					'	,				No.	2004	2005	2006	2007	2008	5009	2010
DIN (NA)						T				FSW TIs	,				-	-	
4447	- B	Oute of HIV	Route of HIV Transmission ICTC 201	ICTC 2011			ŀ			MSM TIs		-	-	-	-	-	Ц
	Hetero-	Homo-		Needle/	Parent to		Г			IDU TIS							
	sexual	sexual	Blood	Svringe	_	Unknown	_			Comp. TIs							
of Total Pos.					╙		1			ICTCs			-	_	2	2	7
(N=22)	86.36	4.55	0	0	60.06	0				Total tested ⁵					,	1294	2897
Ì			В	lock-Level	Details					Blood Banks		-	-	-	<u>.</u>	-	4
No HRG-FSW										STI clinics	-	-	-	_	_	_	4
No. HRG-MSM										AKI centers							' -
No. HRG-IDU										PLHIV Networks							
										Red ribbon clubs						10	9
% Positive, ICIC										Comm. care centers							
% Positive,										Dron-in-centers							L

* Inadequate sample size; - Data not available, 1 2011 Census; 2 Source: DLHS III; 3 Data presented only for years where sample size is valid (HSS-ANC: 300 tested, HSS-HRG/STD: 187 tested, ICTC: 600 tested, PPTCT and BB: 900 tested); 4 PP = percent positive, NT = number tested; 5 General clients and pregnant women

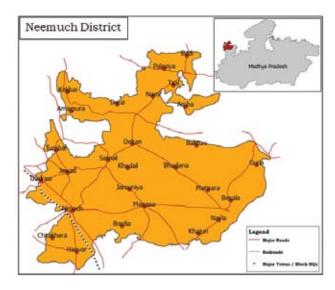
Neemuch, Madhya Pradesh

Background:

Neemuch is situated in the north-west border of Madhya Pradesh. It has a population of 8.26 lakhs with a sex ratio of 959 females per thousand males, a female literacy rate of 57.2% and an overall literacy rate of 71.8% (2011 Census). The economy of Neemuch is mainly agrarian and it is one of the largest producers of opium in the world. The major highway that passes through Neemuch district is National Highway 79.

HIV Epidemic Profile:

- Based on 2011 PPTCT and Blood Bank data, the level of HIV positivity was low (≤ 0.15%), representing a declining trend for PPTCT. Due to lack of data for Blood Bank, a trend could not be determined.
- HIV positivity among ICTC attendees was low among male (2.59%, 2011) and female (1.96%, 2011) clients and also among referred (2.59%, 2011) and direct walkin (1.11%, 2011) clients. A stable to declining trend was observed for HIV positivity in the district.



- As per mapping estimates in 2008, there were around 550 HRGs in district and most of them were FSW (90.4%), followed by MSMs (9.5%)
- The Syphilis positivity rate among STI clinic attendees in 2010 was 7.9%.
- As per 2001 Census, around 4.8% of the male population in district were out migrants (around 18 thousands); and around one fourth of them migrated out of state.
- Rajasthan was the destination state for most of males out-migrating from district. Around three fourth migrated to Chittaurgarh district followed by Bhilwara (13%), Udaipur (5%), Ajmer (2.9%) and Kota (2.7%) respectively.
- HIV and RTI/STI awareness rates among women were 30.7% and 13.7% respectively (DLHS-III).
- The HIV programme in the district was focused on prevention aspects with five ICTCs, one blood banks and one STI clinic were operational in the district during 2011.
- One Link ART Centre was operational in the district to facilitate delivery of ARV drugs for HIV positives.
- 142 HIV positive people were registered from the district at ART centre till 2009. These cases were recorded from Neemuch, Manasa and Jawad blocks of district.

- HIV epidemic in the district is at a low level. Routine programme data needs to be tracked and analyzed regularly to understand HIV transmission dynamics in district.
- A comprehensive HIV prevention programme to the core group population may be worked out as no TI's were operational since 2009 despite
 having known HRGs population.
- Coverage among PPTCT to be increased by initiating HIV counseling and testing services at more centers.
- IEC programme may be strengthened in district, especially around trucking halt points and highways in the district to improve the awareness
 on HIV

Kota, Rajasthan

Neemuch, Madhya Pradesh

Intra-district

8541

47.26

	With Levels and Training and Trends		AHV	Levels and	1 Trends									Vulnerab	abilities				
		2004	2005	2006	2007	2008	2009	2010	2011		HRG Size	ize		F		Male Mig	Male Migration, 2001 Census	Census	
Г	PP⁴			*	*	*					FSW	MSM	ndl	 		Overall	Inter-state		Ţ
	NT⁴			*	*	*		-					+	Ī		5		state	
	Ы					*	0.21	0.17	0.15	Size Est. (Mapping, 2008)	491	52	0		No. out- migration	18072	4629	4902	
	Ħ					*	1428	2971	3910	% Total HRG	90.47	0 5	C		% of male non	486	1 24	132	
	ЬР							0.13	0.12	2000	75.00	3	+	Ī	% of total		17:	70	\perp
	N							6781	10479	% Total Pop.	90.0	0.01	0		nigration	100	25.61	27.12	
	ЬР			*	7.58	0.40		2.46		Programme Target	ŀ		'	T		Ton districts for	inter-state out-mioration	urt-miorativ	ء ا
	N			*	238	250		244		Programme	L	-	+	T	=			in and	Ŀ
	М				,	,				Coverage		1	_						
	¥										Home			Γ					
	G.										-pased	Kothi-	- Valle						
	N										Ä.	¥.	_=	ors-					
	d.									1	Brothel				Chittaurgarh,		Udaipur,	Ajmer,	
	F									lypology	-nasen-	N C			Rajasthan	Rajasthan	Rajasthan	Rajasthan	22
	ЬР	*	*	*	5.75	8.60	4	2.59	2.59		Street	decker-	r injectors-	ors-					
CIC Male	N	*	*	*	1026	545	1170	1855	2045		-pased-	ΑN							
	ď	*	*	*	2.78	8.70	3.60	2.44	1.96		¥								
CTC Female	N	*	*	*	1297	229	666	1599	1840	% <25 yrs.		•	_						
	ď	*	*	*	3.98			2.07	2.59	% Married		_	_						_
CIC Reterred	¥	*	*	*	1457			2171	2780		STI/RTI	RTI							
	М	*	*	*	4.27	99.8	3.83	3.27	1.11	-	7008	5007	7010	7011					
Walk-in	¥	*	*	*	998	774	2169	1283	1081	No. episodes treated	,	,	1004	3987					
			P	HIV Profil	e, 2009					% Syphilis pos.			7.95						
	% On ART	% 15-24	% III., Prim.	% Marriad	% Widowed or	ed or							4	rogramn	ie Response				
	37	œ	285	79	99					No.	2004	2005	2006	2007	2008	2009	2010	2011	
		,	3		3					FSW IIIS					-				
	RC	T HIV I	Route of HIV Transmission, ICTC 201	ICTC 2011						INI TIE			.		.		_		
	Hetero-	Homo-	poold	/elpeeN	Parent to	amondall				Comp. TIs									
	sexual	sexnal	noold	Syringe	Child	OIIKIIOW				ICTCs	-	-	-	-	-	m	m	2	_
% of Total Pos.	94.37	С	1.14	c	3.41	1.14				Total tested ⁵	- 68	117	197	2323	1354	3597	6425	7795	_
		,		,						Blood Banks	-				-	-	-	-	_
			B	ock-Level	Details					STI clinics	-	-	-	-	-	-	-	-	
No. HRG-FSW										ART centers									
No. HRG-MSM										Link ART centers						-	-	-	_
No. HRG-IDU										PLHIV Networks						1	1	-	_
, L	Neemuch,	Manasa,	Jawad,							Red ribbon clubs						∞	∞	∞	_
% Positive, IC IC	3.47	6.05	2.84						-	Comm. care centers									
% Positive,	Manasa,	Jawad,	Neemuch,							Drop-in-centers									
	0.5		0.24			,				Condom outlets	-			-		-	-		

* Inadequate sample size; - Data not available; 1 2011 Census; 2 Source: DLHS III; 3 Data presented only for years where sample size is valid (HSS-ANC: 300 tested, HSS-HRG/STD: 187 tested, ICTC: 600 tested, PPTCT and BB: 900 tested); 4 PP = percent positive, NT = number tested; 5 General clients and pregnant women

Panna, Madhya Pradesh

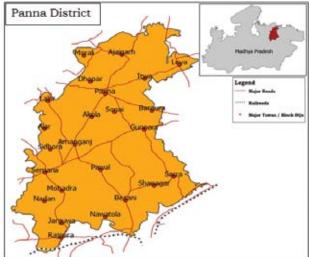
Background:

Panna district, famous for its diamonds, is situated in the Sagar Division of Madhya Pradesh. It has a population of 10.16 lakhs with a sex ratio of 907 females per thousand males, a female literacy rate of 55.6% and an overall literacy rate of 75.6% (2011 Census). The economy of Panna depends largely on its famous diamond mines. Mines are situated in the interior of Panna district, mostly in Majhgawaon, which attracts in migration from the neighboring districts. Panna is also a tourist's delight with its temples, museums, palaces, forests, waterfalls and diamond mines. The major highway that passes through Panna district is National Highway 75.

HIV Epidemic Profile:

- Based on 2010 HSS-ANC and 2011 PPTCT data, HIV
 prevalence had been low (≤ 0.04%) with a stable trend.
 ANC prevalence for three consecutive HSS rounds has
 been zero.
- HIV positivity among ICTC attendees was low among direct walk-in (0.23%, 2011) and referred (0.16%, 2011) clients as well as among male (0.30%, 2011) and female (0.10%, 2011) clients, with a stable to declining trend.
- As per mapping estimates of 2009, there were around 1275 HRGs in district. Around two thirds (63.6%) of them were FSWs, followed by IDU
 (21.8%) and MSM (14.4%).
- The Syphilis positivity rate among STI clinic attendees in 2010 was 3.8%.
- As per the 2001 Census, 3.6% of the male population (around 16,200) were out migrants; around 17% of them migrated to other states and while another one third (35.3%) out migrated to other districts within the state.
- The destination locations for out-migrating male population from Panna were disperse. The destination location included Ganganagar in Rajasthan, Gurgaon in Haryana, North-west Delhi in Delhi and Banda in Uttar Pradesh.
- HIV and RTI/STI awareness rates among women were 15.7% and 5.3% respectively (DLHS-III).
- 23 PLHIV were registered at the Anti-Retroviral Therapy (ART) center till 2009. Most of them (22) belonged to Panna block of district.
- HIV programme in the district was focused on prevention aspect with five ICTCs, two TI's, one blood bank and one STI clinic were operational in the district during 2011.
- One Link ART Centre was operational in the district to facilitate delivery of ARV drugs for HIV positive individuals.

- Though the district has a low HIV epidemic, considering background vulnerabilities for HIV epidemic in terms of in migration and HRG
 presence, necessary precautions should be taken.
- As the HIV epidemic is very low and stable, prevention programme may remain the main component of HIV programme in district.
- Coverage of PPTCT programme to be improved by increasing the facilities for HIV testing.
- IEC programme may be strengthened in the district, especially around mines and halt points on NH-75 to improve the HIV awareness level.
- The district has a sizeable population of FSWs but no direct information on HIV level and trends in the group is available for district. In the
 absence of HSS surveillance sites, routine programme data from district need to be strengthened for completeness and accuracy, and should
 be examined regularly to understand HIV transmission dynamics in district.
- Owing to the high rates of HIV transmissions via homosexuals, as well as parent to child transmissions, analysis of ICTC, PPTCT and ART data
 are needed to better understand the profiles of these clinic attendees.



2010

2007

2006

2005

2011

5009

3.87 2010

3685

Panna, Madhya Pradesh

Intra-district 7725

Inter-state Intra-state

Overall 16193

MSM 182

2751 0.61

No. out-migration % of male

3.62 100

21.88 275

14.48

Male Migration, 2001 Census

47.71

35.31

16.99

% of total migration

0.03

0.02

212

123

Top districts for inter-state out-migration

Banda, Uttar Pradesh

North West Delhi

Gurgaon, Haryana

Ganganagar, Rajasthan

Daily Injectors-NA; Non daily injectors-NA

Kothi-NA; Panthi-NA; Double decker-NA

			HIV Le	vels and Tre	ends ³						
		2004	2005	2006	2007	2008	2009	2010	2011		HRG Size
JAV 33H	bp⁴	-		1.25	0	0		0			ECM/
HSS-AINC	NT4			400	401	400		400			AAC L
DETCT	ЬР				*	0	0	0.05	0.04	Size Est.	800
	M		,		*	1110	1975	1983	2794	(Mapping, 2008)	
Jaco poola	ЬР			*	*	*	-	*	0	% Total HRG	63.64
DIOUG DAIIK	IN	-		*	*	*	-	*	484		
HCC.CTD	ЬР									% Total Pop.	0.08
010-001	N									December Towns	
HCC_FC/W	ЬР							,		Programme larget	٠
VVC -CC	Ä									Programme	٠
HCC-MCM	ЬР									Coverage	
WISH CCIT	IN							-			Home
1101 3311	dd	-						-			. Naseu
001-88H	IN		-					-			Brothel
CTC Mala	ЬP				1.17	0.18	0.37	0.17	0:30	Typology	based
ICIC Male	NT	-			343	695	1069	1756	2011	6	Ä.
رادسول کلکا	ЬР				0.28	0.31	0.16	0.17	0.10		Street
	LN	-			363	326	641	2315	5968		pased
OTC Bodonica	ЬР				1.25	0	0.39	0.20	0.16		Ϋ́
ורור עפופוופת	NT				399	318	1270	3053	3088	% <25 yrs.	-
ICTC Direct	dd		-		0	98.0	0	0.10	0.23	% Married	
Walk-in	LN				347	258	440	1018	1777		STI/R
			PLHI	V Profile, 20	600						2008
	% On ART	% 15-24	% III., Prim.	% Married	% widowed or	ed or				No. episodes treated %.	
ART (23)	9	4	39	13	divolce 48						
DLN (NA)										No.	2004
		Route of HIV	Route of HIV Transmission, ICTC 2017	CTC 2011						FSWTIs	
	Hetero- sexual	Homo-	Blood	Needle/ Svringe	Parent to	Unknown				MSM TIS IDU TIS	
% of Total Pos.	29:99	11.11	0	0	22.22	0				Comp. TIs	
(S-N)			Bloc	k-Level Deta	ails					Total tested ⁵	,
No. HRG-FSW										Blood Banks	-
No. HRG-MSM										STI clinics	-
No. HRG-IDU						,				ART centers	
No. PLHIV	Panna, 22	Ajaygarh, 1				,				PLHIV Networks	
% Positive, ICTC	Panna, 0.25	Gunnour, 0	Pawai,	Ajaygarh, 0	Total, 0.29					Red ribbon clubs	
% Positive,	Panna,	Gunnour, 0	₹	Total,						Drop-in-centers	$\left[\cdot \right]$
PPTCI	Э			0						Condom outlets	

* inadequate sample size; - Data not available, 1 2011 Cersus, 2 Source; DLHS III; 3 Data presented only for years where sample size is valid (HSS-ANC; 300 tested, HSS-HRG/STD; 187 tested, ICTC; 600 tested, PPTCT and 8B: 900 tested); * PP = percent positive, NT = number tested; * General clients and pregnant women

525

964

ڡ

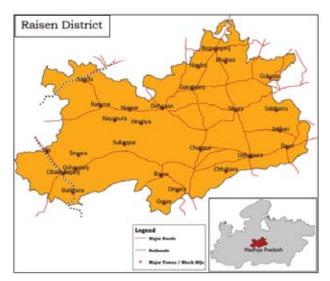
Raisen, Madhya Pradesh

Background:

Raisen District, a part of the Bhopal Division, is situated in the central part of the state Madhya Pradesh. It has a population of 13.31 lakhs with a sex ratio of 899 females per thousand males, a female literacy rate of 65.1% and an overall literacy rate of 74.2% (2011 Census). The economy of the district is primarily agrarian, but it also has tourist destinations, places like Sanchi, Bhojpur and Bhimbhetika are full of historical and natural attractions. The district is well connected by roadways to the major cities of the state as well as the country. The major highways that pass through Raisen district are National Highway 12, 34, 69 and 86A.

HIV Epidemic Profile:

 Based on 2010 HSS-ANC and 2011 PPTCT data, the HIV prevelence was low (≤ 0.07%). A stable trend was observed for PPTCT, but due to lack of data from previous years for HSS-ANC, a trend analysis could not be completed.



- Same was further corroborated by low HIV sero-positivity recorded among ICTC attendees during 2011 among direct walk-in (0.56%) and referred (0.48%) clients, as well as among male (0.78%) and female (0.26%) clients. Due to lack of data a trend could not be determined.
- The Syphilis positivity rate among STI clinic attendees in 2010 was 0.14%.
- As per the 2001 Census, 6.4% of the male population (around 38.1 thousand) were out- migrants; around 12% of them migrated to other states while 33.68% moved to other districts within the +state.
- Nagpur district in Maharastra was a preferred destination for males migrating out of state from the district.
- HIV and RTI/STI awareness rates among women were 33% and 9.6% respectively (DLHS-III).
- HIV programmes in the district focused primarily on prevention with eight ICTCs, two TI's, one Blood Bank and one STI clinic operational in 2011.
- One Link ART Centre was operational in the district to facilitate provision of ART drugs for HIV positives.
- Red ribbon clubs were established from 2009 onwards for the awareness about HIV/AIDS in the youth. Eight RRCs were operational in the district in 2011.

- As the HIV epidemic is very low and stable, prevention programmes may remain the main component of HIV programme in the district.
- Coverage of PPTCT programme needs to be improved through increasing the facilities for HIV testing.
- IEC programme may be strengthened in district, especially around tourist locations and halt points on National highways to improve the HIV
 awareness level
- The district has presence of HRGs but no direct information on HIV level and trends among HRGs is available for district. In the absence of
 HSS sites, routine programme data from district need to be strengthened for completeness and accuracy, and should be examined regularly to
 understand HIV transmission dynamics in district.
- Homosexual transmissions are high, thus more needs to be done to understand the profile of these centre attendees through in depth analysis
 of ICTC and ART data.

2010

8572

∞

Raisen, Madhya Pradesh

District Population: 13,31,699 (1.8% of MPPopulation); Female Literacy¹: 65.1%; ANC Utilization²: 25.9%

Intra-district 20701 3.47 54.35

Intra-state

state 4562 0.77

Male Migration, 2001 Census Inter12827

2.15

districts for inter-state out-migration

33.68

11.98

			ΑIIΛ	Leveis and	=								3		
,		2004	2005	2006	2007	2008	2009	2010	2011		HRG Size	e,			Male Migratio
214 231	pb⁴							0			FSW	MSM	=		Overall
S-AINC	⊳LN							400			-	AC A	2		a diameter
1	ЬР						0	0.10	0.07	Size Est.	'	_	•	No. out-	38090
	N						1253	3140	4120	(Mapping, Year: NA)				migration	
Jacob poor	ЬР			-		-		*	*	% Total HRG	•	•	•	% of male	6:39
Blood Barik	N							*	*					pop.	
OE OE	Ы									% Total Pop.	•			% or total	100
U15-55H	N									F					in the state of th
74 00	Ы									Programme larget		-			10p districts for inte
H55-F5W	N									Programme Coverage	. moH				
9 40 40 00	М										hased-				
INICINI-CCL	N										NA;		_		
4	Ы										Brothe				
HSS-IDU	F									Typology	pased-				Amravati,
1 - 64	Ы							09.0	0.78		NA;	Double	injectors-		Maharashtra Maharashtra
CIC Male	F							1495	2178		Street				
- I J - J	М							0.29	0.26		-Dased				
CIC remaie	N							2082	2274	% / 75 vrc	ξ,	-	-		
TC Baffarina	Ы							0.28	0.48	% Married	ŀ	-	-		
C Reletted	IN							1814	2074		STI/RTI				
ICTC Direct	ЬР	-	-	-	-	-	-	0.57	0.56		2008	2009	2010 20	2011	
alk-in	NT							1763	2335	No. episodes treated			T	5428	
			PL	HIV Profile	٤, 2009					% Syphilis pos.			T		
	% On ART	%	% III., Prim.	%	% widowed or	dor							2	ne Re	
		12-74	Edu.	Married	divorced					No.	2004	2005	2006 20	2007 2008	2009
AKI (NA) DLN (NA)						1				FSW TIS MSM TIS				- -	
	RC	Route of HIV Transmission, ICTC 201	ansmission,	ICTC 2011		_				IDU TIS					
	Hetero-	-omoH	Poole	Needle/	Parent to	and all	Γ,			Comp. Tls					2
	sexual	sexnal	piood	Syringe	Child	UTIKTIOW	_			ICTCs	0	0	1	1	3
% of Total Pos.	56.52	21.74	4.35	8.70	8.70	C				Total tested ⁵					1253
=23)	10.00		2	5	2	,	4			Blood Banks	-	-	-	1	-
			Bi	Block-Level	Details					STI clinics	1	1	-	1 1	1
No. HRG-FSW										ART centers					
No. HRG-MSM			-	-	-	-	-	-		Link ART centers				,	•
No. HRG-IDU	٠									PLHIV Networks	•				
0.000										Red ribbon clubs					00
% Positive, ICIC										Comm. care centers					
% Positive,										Drop-in-centers					

* Inadequate sample size - Data not available: 1 2011 Census, 2 Source: DLHS III; 3 Data presented only for years where sample size is valid (HSS-ANC; 300 tested, HSS-HRG/STD: 187 tested,ICTC; 600 tested, PPTCT and BB: 900 tested); 4 PP = percent positive, NT = number tested; 5 General clients and pregnant women

Ratlam, Madhya Pradesh

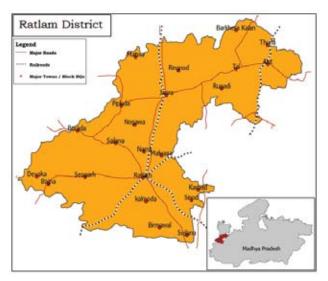
Background:

Ratlam, a part of the Ujjain Division, is situated in North-West region of Madhya Pradesh. It has a population of 14.54 lakhs, sex ratio of 973 females per thousands males, a female literacy rate of 56.5% and an overall literacy rate of 68.2% (2011 Census). The district is rich in industries, with lots of chemical factories. The district is also famous for its gold ornaments, its purity and designs. Ratlam was once one of the first commercial centres in Central India being the centre of an extensive trade in opium, tobacco and salt. The major highway that passes through Ratlam district is National Highway 79.

HIV Epidemic Profile:

- Based on 2010 HSS-ANC data, the district had a moderate (0.50%) level HIV epidemic among general population with a declining trend till 2008; there was a surge in 2010. For 2011 PPTCT and Blood Bank data, the level of HIV positivity was low (< 0.27%) with a stable trend.
- HIV sero-positivity among ICTC clients in 2011 suggestsed
 a low level HIV epidemic among direct walk-in (2.76%) and referred (1.37%) clients, as well as among male (2.23%) and female (1.15%)
 clients with a declining trend; HIV positivity among direct walk-in clients remained at moderate level till 2010.
- As per mapping estimates 2008, there were around 800 HRGs in district mostly located in Jaora and Ratlam block. MSMs (46.2%) were the
 largest HRGs in the district followed by FSWs (34.7%) and IDUs (19.01%).
- The Syphilis positivity rate among STI clinic attendees in 2010 was 2.43%.
- As per the 2001 Census, 6.2% of the male population (around 39 thousand) were out-migrants; 14% of them migrated to other states while another 42% migrated to other districts within the state.
- Around three fourth of males migrating out of state from Ratlam district went to Rajasthan (Chittaurgarh, Kota, Banswara, Jhalawar, Bhilwara).
- HIV and RTI/STI awareness rates among women were 27.4% and 6.9% respectively (DLHS-III).
- HIV programme in the district focused primarily on prevention with seven ICTCs, one TI, one Blood Bank and one STI clinic operational in district in 2011.
- One Link ART Centre was operational in the district to facilitate provision of ART drugs for HIV positive individuals.
- Of the 178 PLHIV registered at the Anti-Retroviral Therapy (ART) center till 2009, 6% were 15-24 years of age, 65% were on ART and 52% were illiterate or only had a primary education.

- Considering moderate HIV positivity among HSS-ANC and direct walk-in clients (in 2010) the district may continue to focus on HIV prevention
 programme, especially among people with high risk behavior.
- IEC programme may be strengthened in district, especially around industrial areas and halt points on National highways to improve the HIV
 awareness level.
- As there are indications of moderate HIV epidemic among people with high risk behavior, pockets of interstate out-migration may be mapped and provided prevention services.
- The district has presence of HRGs with indications of moderate HIV prevalence. The district may be considered for surveillance activities to
 understand the epidemic in a better way. In the absence of surveillance sites, routine programme data from district need to be strengthened
 for completeness and accuracy, and should be examined regularly to understand HIV transmission dynamics in district.



2010

2009

2008

2007

2.43

5395

2011

2010

29.06

7822

4911

2375

1038

1251

493

Bhilwara, Rajasthan

Jhalawar, Rajasthan

Banswara, Rajasthan

Kota, Rajasthan

Chittaurgarh, Rajasthan

Daily Injectors-NA; Non daily injectors-NA

Intradistrict 16917

Intra-state

Interstate 5399

Overall 38550

D

Male Migration, 2001 Census

16234

43.88

2.62

14.01

0.87

6.22

% of male pop.

19.01

No. outmigration

157

% of total migration

Top districts for inter-state out-migration

Ratlam, Madhya Pradesh

District Population: 14,54,483 (2% of MP Population); Female Literacy¹: 56.5%; ANC Utilization²: 50.2%

* Inadequate sample size; - Data not available, 1 2011 Census, 2 Source: DLHS III; 3 Data presented only for years where sample size is valid (HSS-ANC: 300 tested, HSS-HRG/STD: 187 tested, ICTC: 600 tested, PPTCT and BB: 900 tested); 4 PP = percent positive, NT = number tested; 5 General clients and pregnant women

552

828

∞

∞

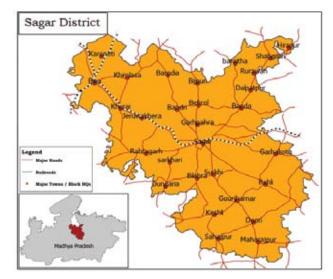
Sagar, Madhya Pradesh

Background:

Sagar district is located in the north-central part of the state of Madhya Pradesh. It has a population of 23.78 lakhs with a sex ratio of 896 females per thousand males, a female literacy rate of 67.7% and an overall literacy rate of 67.7% (2011 Census). The district is a major agricultural trade centre. Besides, it has industries such as oil and flour milling, saw-milling, ghee processing, handloom cotton weaving, railway and engineering works. The major highways that pass through Sagar district are National Highway 26 and 34.

HIV Epidemic Profile:

- The district had a low (0.25%) HIV prevalence for ANC HSS sites during 2010. Based on 2011 PPTCT and Blood Bank data, HIV positivity was low (≤ 0.19%) with a stable trend for PPTCT; but due to lack of data for Blood Bank a trend could be determined.
- Based on 2010-HSS at FSW site, the level of HIV epidemic was low (1.21%).



- HIV sero-positivity among ICTC attendees was low among direct walk-in (1.94%, 2011) and referred (0.56%, 2011) clients, and also among
 male (1.08%, 2011) and female (0.61%, 2011) clients. There was not enough data to determind a trend among ICTC attendees.
- The Syphilis positivity rate among STI clinic attendees in 2010 was 0.50%.
- As per the 2001 Census, 5.7% of the male population were out migrants (around 61 thousand), 8.2% of them migrated to other states while around one third migrated to other districts within state.
- The top two destinations for out-of-state migration were Lalitpur in Uttar Pradesh and Nagpur in Maharastra.
- The HIV and RTI/STI awareness rates among women were 46.3% and 15.7% respectively (DLHS-III).
- HIV programme in the districts focused on a comprehensive package of prevention as well as treatment services. Prevention services were
 offered through 12 ICTCs, three TI's, one Blood Bank and two STI clinics in the district in 2011.
- One ART Centre was operational in the district from 2011 to provide ART drugs for HIV positive individuals.

- · As the HIV epidemic is low and stable, prevention programme may remain the main component of HIV programme in district.
- Facilities for HIV counseling and testing may be expanded to improve the coverage of PPTCT programme.
- IEC programme may be strengthened in district, especially around major trade centers, industrial locations and halt points on National highways to improve the HIV awareness level.
- Awareness among women regarding HIV and RTI/STI must be enhanced through programme coverage.

Bilaspur, Chhatisgarh

South West

Delhi

Intra-district 35188

Intra-state 20953 57.51

34.25 1.95

e out-migration

Sagar, Madhya Pradesh District Population; Female Literacy: 67.7%; ANC Utilization²: 40.3%

					2											
		2004	2005	2006	2007	2008	2009	2010	2011		HRG Size	j.			Male Mi	Male Migration, 2001
0	PP⁴							0.25			FSW	MSM	=		Overall	Inter-state
HSS-AINC	NT4				,			400		i						
TOTAG	ЬР						0.04	0.02	0.08	Size Est.	•	•		No. out- migration	61183	5042
5	N						4878	4741	5196	(iviappilig, real. IVA)				"Mof male		
Jung Poor	ЬР	-		-	-		-	0.10	0.19	% Total HRG	•			Dop.	5.70	0.47
Blood Bank	F				٠			7761	8333	1				% of total	:	
UCC CTD	ЬР	-		-				-		% Lotal Pop.				migration	001	8.24
010-00	Þ									Programme Target					Top districts for inter-state	r inter-state
W102 55H	ЬР	-				-		1.21		Programme						
13-F3VV	M	-	-	-				247		Coverage						
DOC MONA	ЬР	-									Home	3				
IVICIVI-C	NT										based-	Kothi-	Daily			
4	ЬР										Rrothol	Panthi-	Injectors-	- I		
HSS-IDU	N									Typology	based-	 ¥	.; .;	Uttar	Nagpur,	Raipur,
TC MA-L-	ЬР		,		,			1.74	1.08	(Garatic	Ŋ.,	Double	Non daily	Pradesh	Maharashtra Chhatisgarh	Inhatisgar
CIC Male	N							2471	4243		Street	decker-	Injectors-			
T. Cample	ЬР							0.55	0.61		-pased	¥				
CIC remaie	N							3078	3593	10	¥					
Dogwood J.	ЬР							0.79	0.56	% <25 yrs.						
CIC Reletied	N							3790	6034	70 Mailleu	CTI/DTI	. II.				
TC Direct	ЬР							1.71	1.94		2008	600	2010 2011	1-1		
Walk-in	N							1759	1854	No enisodes	2004	╀	+			
			PL	≩	, 2009					treated		,		13058		
	% On ART	% 15-24	% III., Prim. Fd₁	% Marripd	% widowed or	o or				% Syphilis pos.		-	0.50	- Respon	030	
ART (NA)			,			,				No.	2004	2005	2006 20	2007 2008	2009	2010
DLN (NA)						Γ				FSWTIs		-	+	┡	-	-
	- E	oute of HIV T	oute of HIV Transmission, ICTC 201	ICTC 2011			_			MSM TIs					1	-
	Hetero-	Homo-	Poola	Needle/	Parent to	awoudull	Γ,			IDU TIS						-
	sexna	sexnal	200	Syringe	Child		. T			Comp. IIIs	, -				- <	
% of lotal Pos. (N=71)	88.73	1.41	1.41	4.23	4.23	0				Total tested ⁵					4878	10290
			B	Block-Level D	Details		-			Blood Banks	1	1	.	1	1	1
No. HRG-FSW			٠					ŀ		STI dinics	-	-	-	-	-	-
No HRG-MSM		ŀ								AKI centers						
I I I I I I I I I I									1	PLHIV Networks				-	-	-
200										Red ribbon clubs		,			22	'
% Positive, ICTC										Comm. care centers						
% Positive,		,			,	,			,	Drop-in-centers						
TOTA																

* Inadequate sample size; - Data not available; 1 2011 Census; 2 Source: DLHS III; 3 Data presented only for years where sample size is valid (HSS-ANC: 300 tested, HSS-HRG/STD: 187 tested, ICTC: 600 tested, PTCT and BB: 900 tested); 4 PP = percent positive, NT = number tested; 5 General clients and pregnant women

Satna, Madhya Pradesh

Background:

Satna district, a part of the Rewa Division, is located in the eastern part of Madhya Pradesh. It has a population of 22.28 lakhs with a sex ratio of 927 females per thousand males, a female literacy rate of 63.4% and an overall literacy rate of 73.7% (2011 Census). The economy of Satna mainly depends on agriculture. However, there are few industries related to cement manufacturing, handloom weaving, flour, oilseed milling, and the distribution of agricultural and fabric products via road and rail junction. The major highways that pass through the district are National Highway 75 and 34.

HIV Epidemic Profile:

- Based on 2011 PPTCT and Blood Bank data, the level of HIV positivity was low (≤ 0.14%) with a stable trend among PPTCT attendees.
- Based on 2011 data, the HIV sero-positivity recorded among ICTC attendees was low among direct walk-in (0.26%, 2011) and referred (0.38%, 2011) clients and also among male (0.23%, 2011) and female (0.63%,

2011) clients. A trend could not be determined due to lack of data.



- The Syphilis positivity rate among STI clinic attendees in 2010 was 10.42%.
- As per the 2001 Census, 5.7% of the male population were out migrants (around 55 thousand); 15.2% of them out migrated to other states and 30% out migrated to other districts within the state.
- Most of the out of state migrants went to Maharastra and Gujarat. The top two destinations for out-of-state migration were Thane in Maharastra and Surat in Gujarat, which were high prevalent districts.
- HIV and RTI/STI awareness rates among women were 31.8% and 22.3% respectively (DLHS-III).
- HIV programme in districts focused primarily on prevention with 10 ICTCs, one TI, one Blood Bank and one STI clinic operational in district in
- One Link ART Centre was operational in the district to facilitate provision of ART drugs for HIV positive individuals.

- As the HIV epidemic is very low and stable, prevention programme may remain the main component of HIV programme in district.
- Coverage of PPTCT programme to be improved through increasing the facilities for HIV testing.
- IEC programme may be strengthened in district, especially around major industrial locations, trade centers and halt points on National highways to improve the HIV awareness level.
- The district has presence of HRGs but no direct information on HIV level and trends among HRGs is available for district. In the absence of
 HSS sites, routine programme data from district need to be strengthened for completeness and accuracy, and should be examined regularly to
 understand HIV transmission dynamics in district.

Raipur, Chhattisgarh

Satna, Madhya Pradesh
District Population: 22,28,619 (3% of MP Population); Female Literacy: 63.4%; ANC Utilization: 28.6%

Intra-district 30034

54.73 3.10

	001 Census	Inter-state Intra-state		16494	1.70	+	30.06	Top districts for inter-state out-migration						Mumbai,	Maharashtra	3										2011			-	10	11629	<i>-</i>	-		- '	14		
	Male Migration, 2001 Census	Inter-st		3 8345	0.86	H	15.21	5 for inter-sta							(Suburban),	alica idida										3 2010	'	-	-	2	4447	-			- '	14	'	
	Male	Overall		548/3	p. 5.66	L	100	Top district							Gujarat										se	2009	'	<u>.</u>	-	2	975		-		·	14	•	
Authorabilities			No. out-	migration	% of male pop.	% of total	migration	,						Thane,	Maharashtra										mme	2008				-		-	-	. .	ŀ			
W		IDN		,								Vied	Injectors-	NA;	Non daily	injectors-	¥.					2011	3244 8077	- 42		2006 2007				-			-	. .				
		II WSW										Kothi-		_	Double		¥					9 2010	0 32	10.42	-	2005 20	-		· -	-			_		<u>'</u> -			
	HRG Size	FSW NS		,							Home	based-	NA:	Brothel	Daseu- N∆.	Street	based-	¥.			Εľ	2008 2009	0		-	2004 20	+			-		_	_	.				
				(Mapping, rear:	% Total HRG		% Total Pop.	Programme Target	Programme	Coverage				100	iypology				% <25 yrs.	% Married			No. episodes	"Ireated % Synhilis nos	o opposition poor.	No.	FSW TIS	MSM IIS	Comp. TIs	ICTCs	Total tested ⁵	Blood Banks	SII clinics	Link ART centers	PLHIV Networks	Red ribbon dubs	Comm. care centers	
	2011			0.04	4877	0.14	12568									0.23	3873	0.63	2879	0.38	3412	0.26	3417											Τ.		T		I
	2010			0.07	1351	01.0	11838	1.60	250							1.44	1457	0.61	1639	0.72	2355	1.89	741															
10H*:28.6%	2009			0.10	975		,										-																					
opulation); remaie Literacy:: 63.4%; AINC Utilization=:28.6%	2008			,	-				-	-	-						-								Jo P	Τ.			awoudull	OIIVIO	0							İ
Tyn: 63.4%;	2007				-				-	-	-						-	-	,	-				, 2009	% widowed or	-			Parent to	Child	3.70	Potoile	Significant					
on); remale Litera	2006				-				-	-	-	-					-	-		-			-	HIV Profile	% Marriad	Dink.		ICTC 2011	Needle/	Syringe	0	1 1000	-					
opulation); h	2005				-													-		-				Ы	% III., Prim.			ransmission, ICTC 201	Ploof	nooia	0	ā	lia '					
(3% OT IMP P	2004				-				-	-	-	-					-	-		-			-		% 15-24			Route of HIV T	Homo-	sexnal	0							
610'87'77		₽Ď₫	. NT⁴	М	NT	Ы	Ħ	ЬР	NT	dd	NT	ЬР	¥	Ы	¥	Ы	NT	ЬР	N	PP	N	Ы	NT		% On ART			Ro	Hetero-	sexnal	96.30							
District Population: 22,28,619 (3% of MP P			HSS-ANC	DITCI	101		Blood Bank	CT ST	U16-66H	747.55	NS-1-260	PACE ASEA	INISINI-SSI		HSS-IDO	- F4-1-	CIC Male	CTC Female	- Cielliale	Dogwod OLD	nelellen	ICTC Direct	alk-in			ART (NA)	DLN (NA)				% of Total Pos.	4=27)	No HDG-EGW	No HRG-MSM	No HRG-IDII		% Positive, ICTC	

* Inadequate sample size; - Data not available; 1 2011 Census; 2 Source: DLHS III; 3 Data presented only for years where sample size is valid (HSS-ANC; 300 tested, HSS-HRG/STD: 187 tested, ICTC: 600 tested, PPTCT and BB: 900 tested); 4 PP = percent positive, NT = number tested; 5 General clients and pregnant women

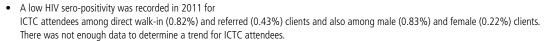
Sehore, Madhya Pradesh

Background:

Sehore is a tribal district situated in the Bhopal Division of Madhya Pradesh. It has a population of 13.11 lakhs with a sex ratio of 918 females per thousand males, a female literacy rate of 58.8% and an overall literacy rate of 71.1% (2011 Census). The economy of Sehore district mainly depends on agriculture. The district has a few trade and industries. The major highway that passes through Sehore is National Highways 86.

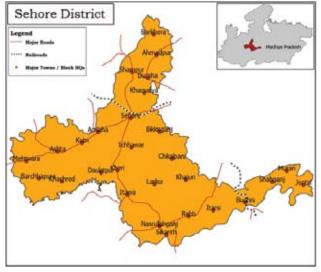
HIV Epidemic Profile:

- Based on 2010 HSS-ANC data, the HIV positivity level was high (2.50%), however, a trend could not be determined due to lack of previous years data.
- Based on 2011 PPTCT and Blood Bank data, the level
 of HIV positivity was low (≤ 0.04%). A stable trend
 was observed among PPTCT attendees, though due
 to lack of data for Blood Bank, a trend could not be
 determined.



- The Syphilis positivity rate among STI clinic attendees in 2010 was 0.67%.
- As per the 2001 Census, around 5% of the male population were out-migrants; less than 2% migrated out of the state and 45.7% out-migrated to other districts within the state.
- HIV and RTI/STI awareness rates among women were 33.4% and 15.1% respectively (DLHS-III).
- Heterosexual transmission accounted for 47.83% of the total HIV transmission, but more importantly, transmission by needles and syringes
 accounted for 52.17% indicating contribution of IDU's to the epidemic.
- The HIV programme in districts focused primarily on prevention with 10 ICTCs, two TI's, one Blood Bank and one STI clinic operational in district in 2011.
- One Link ART Centre was operational in the district to facilitate provision of ART drugs for HIV positives.

- High prevalence among HSS-ANC in 2010 needs in-depth analysis of clients and their spouse profile.
- As the HIV epidemic is very low and stable, prevention programme may remain the main component of HIV programme in district.
- Coverage of PPTCT programme to be improved through increasing the facilities for HIV testing.
- Considering high rates of HIV transmission by sharing needles and syringes, there is a need to map IDU population and establish HSS-IDU site to give a better insight to the problem.
- IEC programme may be strengthened in district, especially around major industrial locations, trade centers and halt points on National highways to improve the HIV awareness level.
- The district has presence of HRGs but no direct information on HIV level and trends among HRGs is available for district. In the absence of
 HSS sites, routine programme data from district need to be strengthened for completeness and accuracy, and should be examined regularly to
 understand HIV transmission dynamics in district.



Sehore, Madhya Pradesh

District Population:13,11,008 (1.8% of MP Population); Female Literacy': 58.8%; ANC Utilization²:45.0%

Intra-district

12826 14721 2.60 52.53

DISITICL FORMISTION: 15, 11,006 (1.6% 01 MIF PUPUL	2004			PP -	- LN		Blood Bank NT -		- IN UIC-CCH	- dd	- NN - N		- TN WISINI-CCT	- dd	- IN DUI-SSH	- dd	ICIC Male NT - NT	CTC Female		- PP -		act	Walk-in NT -		% On ART % 15-24	ART (NA)	DLN (NA)	Route of HIV Transmi	Hetero- Homo-	sexnal	% of Total Pos. 47.83 0			No. HRG-FSW	No. HRG-MSM	No. HRG-IDU	% Positive, ICTC	
Population),	2005							-																PL	% III., Prim. Edu.			ansmission,	Blood	2000	C	,	BI	,				
Levels and	2006						-											,						HIV Profile	% Married	,	,	ssion, ICTC 2011	-	Syringe	52 17	:	ock-Level D	,		,		
aton), refliate Literacy: 30.0%, And Utilization: 45.0% HIV Levels and Trends	2007						-	-																, 2009	% widowed or divorced				Parent to	Child	c	,	etails					
, AINC OUIIE	2008			-			-	-										,							jo P	Γ			Inknown		c	,						
40.07	2009			0.07	2705																																	
	2010	2.50	399	0.14	3628	0.07	1502									1.32	1665	0.73	1642	0.82	2670	1.88	637														,	
	2011			0	3892	0.04	2313									0.83	1690	0.22	2746	0.43	3910	0.82	612							_								
				Size Est.	(Mapping, real INA)	70 IOIGI IIVO	% Total Pop.	Drogrammo Targot	Programme langer	Coverage	3600				Typology				% <25 vrs.	% Married			No. episodes treated	% Syphilis pos.	No.	FSWTIs	MSM TIs	IDUTIs	Comp. TIs	ICTCs	Total tested ⁵	Blood Banks	STI clinics	AKI centers	Link ART centers	PLHIV Networks	Red ribbon clubs	COLLEGE COLLEGE
	HRG Size	FSW		,			,				Home	based-	NA;	Brothel	-pased	NA;	hased-	NA			STI/RTI	2008		-	2004					-	,	-	-					
	ze	MSM														Double	uecker-	5			RTI	600			2005	-				-		-	-	-				
Vuln		ndi	2									-	Dally	- NA:	Non daily	injectors-	¥					2010 2011	2980 5523	- 10.67	Programm 2006 2007	1			1	-		1	-					
erabilities				No. out-	migration 9/ of male nen	% of male pop.	% of total		300													Ī . -	<u>e</u>		ime Response					-		-	-		,			
	Male Migration, 2001 Census	Overall	5	28022	30 V	4.90	100	ictricts for inte	וסף שאנוורנא וסו ווונפו-אנפנה טמנ-ווווקו פנוסוו																2009			1	-	2	2705	-	-				، و	
	n, 2001 Cer	Inter-	state	475	000	0.00	1.70	100011	-state out-																2010			1	-	2	6935	_	-		-		۰	
	25	Intra-	state	12826	7,00	7	45.77	i	Ď						1										2011			-	-	2	8328	_				' '	ا ه	

* Inadequate sample size; - Data not available; ' 2011 Census; ² Source: DLHS III; ³ Data presented only for years where sample size is valid (HSS-ANC: 300 tested, HSS-HRG/STD: 187 tested, ICTC. 600 tested, PPTCT and BB: 900 tested); ⁴ PP = percent positive, NT = number tested; ⁵ General clients and pregnant women

Seoni, Madhya Pradesh

Background:

Seoni, a tribal district, is situated in the southern part of Madhya Pradesh. It has a population of 13.78 lakhs with a sex ratio of 984 females per thousand males, a female literacy rate of 64.1% and an overall literacy rate of 73.01% (2011 Census). The economy of Seoni mainly depends on agriculture and on rich timber resources of the district. The major highways that pass through the district are National Highway 24 and 7.

HIV Epidemic Profile:

- Based on 2010 HSS-ANC, the level of HIV positivity was high (1.75%), with an overall rising trend. For 2011 PPCTC and Blood Bank data, the level of HIV positivity was low (≤ 0.21%) and a stable to declining trend was observed.
- HIV sero-positivity recorded among ICTC attendees was low among direct walk-in (2.36%, 2011) and referred (1.12%, 2011) clients and also among male (2.12%, 2011) and female (1.01%, 2011) clients. There was an overall stable to declining trend.
- As per mapping estimates of 2008, there were approximately 800 HRGs in district. Slightly less than three fourth (72%) of them were FSWs, while another one fourth were MSMs (25%). Of the FSWs, 50.93% were street-based and 30.19% were brothel-based.
- As per the 2001 Census, 7.6% of the male population in district were out-migrants; 12% of them out-migrated to other states while another one third migrated to other districts within the state. Most of the out-of-state migrants went to the state of Maharastra.
- The Syphilis positivity rate among STI clinic attendees in 2010 was 0.68%.
- HIV and RTI/STI awareness rates among women were 23.1% and 8.6% respectively (DLHS-III).
- HIV programmes in the districts focused primarily on prevention with three ICTCs, one TI, one Blood Bank and one STI clinic operational in district in 2011
- One Link ART Centre was operational in district to facilitate provision of ART drugs for HIV positives.
- Of the 112 PLHIV registered at the Anti Retroviral Therapy (ART) till 2009, 7% were 15-24 years of age, 54% were on ART and 46% were illiterate or only had a primary school education and 62% where either widowed or divorced.

- As per HSS at ANC sites, the district has a high prevalence of HIV, though this is not corroborated by programme data. However, background
 vulnerabilities do exist in the district as indicated by out migration of males from the district to high prevalence state as well as presence of
 High Risk Groups. The epidemic need to be further understood through analysis of existing data to understand HIV transmission dynamics in
 district.
- With few PLHIVs recorded in district, prevention programme may remain the main component of HIV programme in district.
- Coverage of PPTCT programme needs to be improved by increasing the facilities for HIV testing.
- IEC programme may be strengthened in district, especially around major trade centers and halt points on National highways to improve the HIV awareness level.
- Parent to child transmission is high, thus PPTCT programme needs to be strengthened.



10735

4021

1757

2265

783

9

9

10

2011

2010

2009

2008

2007

2006

2005

3116

2010 2142 0.68

2009

Raipur, Wardha, Bhandara, Yevatmal, Chhatisgarh Maharashtra Maharashtra

Nagpur, Maharashtra

Daily Injectors-NA; Non daily injectors-NA

Kothi-NA; Panthi-NA; Double decker-NA

Seoni, Madhya Pradesh

District Population: 13,78,876 (1.93% of MP Population); Female Literacy¹: 64.1%; ANC Utilization²: 48.4%

Intra-district 25210

Intra-

Overall 44705

3 24

MSM 198

Male Migration, 2001 Census Inter-state 14191

5304 0.90

2.41

7.60 9

No. out-migration % of male

56.39 4.29

31.74

11.86

% of total migration

0

0.0

Dop.

24.72

Top districts for inter-state out-migration

HRG Size		FSW	670	2/3	72.28		0.04			805	Home	based-	18.88%;	Brothel	based-	30.19%;	Street harod	-nasen-	20.25	2.36	STI/RTI	2008 2	H	\mathbb{H}	2004 2	╀	-		+	\pm	+	1	 			+	+	+
ľ	-	_		4	7	+	_	+	+		Ŧ	<u> </u>		<u>~</u>	ع قد	₩,	Λ <u>.</u>	2 5	310	'		70	- - -	Ĥ	70	Ľ	Ĺ	H	_	_	+	ŀ	Ė	ľ	Ė	4	2	7
			Size Est.	(Mapping, 2008)	% Total HRG		% Total Pop.	F	Programme larget	Programme	Coverage				Typology				% <75 vrs	% Married			No. episodes treated	% Syphilis pos.	No.	FSW TIs	MSMTIs	IDUTIs	Comp. TIs	ICTG	Blood Banks	STI clinics	ART centers	Link ART centers	PLHIV Networks	Red ribbon clubs	Comm. care centers	Drop-in-centers
2011	22		0.21	3267	0.07	2722									2.12	3107	1.01	5027	1.12	5551	2.36	2287													,	Other,	25	Other,
2010	20107	300	0.75	4762	0.04	2855	1.21	247				-	-	-	2.04	2897	1.24	3076	1.26	4444	2.68	1529														Kurai,	4.8	Kurai,
2009	2007		0.36	1083	0.15	2668									2.68	1193	2.06	1745	2.64	1549	1.94	1389							1		_					Gansore,	7.7	Gansore,
2008	2000	300	G c	809	0	2418	1.60	250				-	-	-	3.82	418	3.14	731	3.34	717	3.47	432		o				Unknown		0						Dahenora,		Dahenora,
2002	1007	77.0	g c	121	0.23	2173	1.20	250					-	-	3.39	825	1.74	1319	2.57	815	2.25	1329	5009	% widowed or divorced	62			Parent to	DIIIO	10.08	etails							Keolari, I
2006	2007	0.75	2 .		0.04	2046	0	250					-	-	3.26	368	2.40	415	2.88	347	27.5	436	PLHIV Profile,	% Married	13	-	n, ICTC 2011	Needle/	syringe	1.68	Slock-Level De					Lakhnadon,	67.1	Lakhnadon,
2005	5007				60.0	2004	3.60	250						-	*	*	*	*	*	*	*	*		% III., Prim. Edu.	46		Route of HIV Transmission, ICTC 201	Blood		0		Lakhnadon,	134			Chapara,	3.7/	Chapara,
2004	1007				60.0	2134	2	250						-	-		-		-					% 15-24	7		Route of HI	Homo-	sexnai	0		a,	145			Barghat,	1.3/	Barghat,
Ī	200	NT ⁴	d	E	&	F	A.	F	Ы	N	Ы	M	ЬР	NT	ЬР	M	ЬР	NT	ЬР	Ħ	ЬР	Þ		% On ART	54	-		Hetero-	sexnal	88.24		Seoni,	526			Seoni,	3.89	Seoni,
		HSS-ANC		PPTCT	1	Blood Bank	E	H35-51D	WG2 3311	HSS-FSW	PACKA COL	IVICIVI-CCT	IIII 33H	UZI-KKH	ICTC Male	ICIC Male	olema J	ורור בנוומום	ICTC Boformad	ICIC Melelled	ICTC Direct	Walk-in			ART (112)	DLN (NA)				% or lotal ros.	(2)	WO JOH ON	NO. HING-LOW	No. HRG-MSM	No. HRG-IDU	% Positive. ICTC		% Positive,

* Inadequate sample size; - Data not available; 1 2011 Census; 2 Source: DLHS III; 3 Data presented only for years where sample size is valid (HSS-ANC: 300 tested, HSS-HRG/STD: 187 tested, ICTC: 600 tested, PPTCT and BB: 900 tested); 4 PP = percent positive, NT = number tested; 5 General clients and pregnant women

Shahdol, Madhya Pradesh

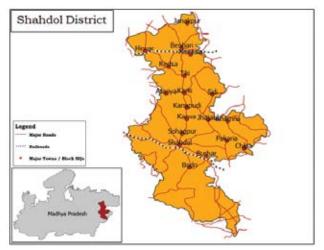
Background:

Shahdol, predominantly a tribal district, is situated in the eastern part of Madhya Pradesh. It has a population of 10.64 lakhs with a sex ratio of 968 females per thousands males, a female literacy rate of 58.2% and an overall literacy rate of 68.3% (2011 Census). The economy of Shahdol district mainly depends on agriculture. Shahdol is very rich in its mineral resources; minerals found in district are coal, fire clay, ochers and marble. The major highway that passes through Shahdol is National Highways 78.

HIV Epidemic Profile:

- Based on 2010 HSS-ANC, 2011 PPTCT and Blood Bank data, the level of HIV positivity was low (≤ 0.12%). A stable trend for PPTCT was observed, but due to lack of data points for HSS-ANC and Blood Bank, trend could not be determined.
- Low level of HIV epidemic was observed by the data of ICTCs among direct walk-in (2.24%, 2011) and referred (2.09%, 2011) clients, and also among male (2.31%, 2011) and female (1.76%, 2011) clients. There was not enough data to determine a trend.
- The Syphilis positivity rate among STI clinic attendees in 2010 was 2.48%.
- As per the 2001 Census, 5.2% of the male population were out migrants; 16.8% of them out-migrated to other states while 32.60% moved to other districts within the state.
- Most of the out-of-state migrants went to the state of Chattisgarh, Koriya and Bilaspur were the destination districts for most of the migrants going out-of-state.
- HIV and RTI/STI awareness rates among women were 22.4% and 9.8% respectively (DLHS-III).
- HIV programmes in the district focused primarily on prevention with three ICTCs, two Blood Bank and one STI clinic operational in district in 2011
- One Link ART Centre was operational in the district to facilitate provision of ART drugs for HIV positive individuals.

- As HIV epidemic and related background characteristics are very low, prevention programme may remain the main component of HIV
 programme in district.
- Coverage of the PPTCT programme needs to be improved through increasing the facilities for HIV testing.
- IEC programme may be strengthened in district, especially around major trade centers and halt points on National highways to improve the HIV awareness level.



2010

2009

2008

2773

3246

3445

Koriya, Bilaspur, Korba, Raipur, Surguja, Chhattisgarh Chhattisgarh Chhattisgarh Chhattisgarh

Raipur,

Shahdol, Madhya Pradesh
District Population: 10.64.989 (1.4% of MP Population); Female Literacy: 58.2%; ANC Utilization: 42.3%

Inter-state Intra-state Intra-district

Male Migration, 2001 Census Overall Inter-state Intra-

21019

13543

6975

No. out-migration % of male pop. % of total migration

50.60 2.62

32.60

16.79

1.69

0.87

5.17 100 Top districts for inter-state out-migration

			AΗ	HIV Levels and Trends	Trends									
		2004	2002	2006	2007	2008	2009	2010	2011		HRG Size	Size		П
4	PP⁴							0		i	FSW	MSM	NGI	Т
HSS-ANC	NT⁴							400		Size Est.				
PDICI	ЬР						0	0	0.10	NA)				
	N						3445	2348	1970	% Total HRG	_		'	
1	ЬР							0.09	0.12					
Blood Bank	N							6873	8101	% Total Pop.	•	'	_	
GE 2311	ЬР									Programme			+	Т
UIS-SCH	F									Target	•	•	_	
78100 0011	ЬР									Programme				
HSS-FSW	F					,				Coverage	_	<u> </u>	<u>'</u>	Т
9 40 50	ЬР	,	,	,							Home			
MSMI-SSH	N										-based	- Kothi-	Daily	_
4	ЬР										NA;	_	드	-S-
HSS-IDU	F									Typology	based-			-
-	ЬР					,		0.70	2.31	3	N X		e Non dally	<u> </u>
ICIC Male	F							713	519		Street	decker-		2
-1	ЬР					,		1.08	1.76		Dased-			
ICIC remaie	N							185	284	20, 3C - 70				T
T C O DE	ЬЬ							1.22	2.09	% <25 yrs.	. .		· ·	
I reletted	F							409	383		ST	STI/RTI	-	1
ICTC Direct	ЬР							0.41	2.24		2008	2009	2010	2011
Walk-in	N					,	,	489	401	No. episodes			2167	3067
			4	HIV Profile	9, 2009					"Fated % Synhilis nos			2.48	'
	% On ART	% 15-24	% III., Prim. Edu	% Married	% widowed or divorced	no po				on of the control of			24.7	臺
ART (NA)						Τ				No.	2004	5002	7000	7007
DIN (NA)						T				PSW IIS				٠
	Ro	ute of HIV T	Route of HIV Transmission. ICTC 2011	ICTC 2011						IDU TIS				. .
	Hetero-	Homo-		Napdle/	Parent to					Comp. TIs				
	sexual	sexual	Blood	Svringe	Child	Unknown				ICTC	-	-	-	-
% of Total Pos.		,	,	-6. (-		,				Total tested ⁵	-			
(N=17)	94.12	>	>	>	2.88	>	_			Blood Banks	-	-	-	-
			B	Block-Level [Details					STI dinics	-	-	-	-
No. HRG-FSW										AKI centers				
No. HRG-MSM										PI HIV Networks				٠ ٠
No. HRG-IDU						,			,	Red ribbon clubs				
% Positive, ICTC										Comm. care				
% Positive,										Drop-in-centers	ŀ			
PPTCT	-							-	-	Condom outlets				

* Inadequate sample size: - Data not available: 1 2011 census; 2 Source: DLHS III; 3 Data presented only for years where sample size is valid (HSS-ANC: 300 tested, HSS-HRG/STD: 187 tested, ICTC: 600 tested, PPTCT and BB: 900 tested); 4 PP = percent positive, NT = number tested; 5 General clients and pregnant women

Sheopur, Madhya Pradesh

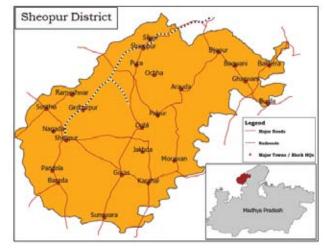
Background:

Sheopur district is located in the north of Madhya Pradesh. It has a population of 6.87 lakhs with a sex ratio of 902 females per thousands males, a female literacy rate of 44.5% and an overall literacy rate of 58.02% (2011 Census). The economy of Sheopur district mainly depends on agriculture. The district is also known for its wood carved handicrafts. Sheopur is one of the most backward districts of state and is receiving funds from the Backward Regions Grant Fund Programme (BRGF). It has poor connectivity through roads and no major highway passes through the district.

HIV Epidemic Profile:

- The district had a very low level of HIV epidemic as indiacted by zero HIV sero-positivity recorded at HSS among ANC attendees (2010) and at PPTCT (2011). Due to lack of data points, a trend could not be determined.
- HIV sero-positivity among ICTC clients was low in 2011
 among direct walk-in (1.33%) and referred (0.23%) clients, as well as among male (0.69%) and female (0.28%) clients. Trend could not be
 determined based on lack of data points.
- As per the 2001 Census, 2.9% of the male population were out migrants; 17.6% of them out-migrated to other states while another 14% out-migrated to other districts within the state.
- Most of the out of state migrants went to state Rajasthan. The top two destinations for out-of-state migration were Kota and Baran districts in Rajasthan.
- HIV and RTI/STI awareness rates among women were 12.3% and 9.5% respectively (DLHS-III).
- HIV programmes in the district focused primarily on prevention with nine ICTCs and one STI clinic operational in district in 2011.

- HIV epidemic in district is at low level. Regular programme data needs to be tracked and analyzed regularly to understand HIV transmission dynamics in district.
- As the HIV epidemic is very low and stable, prevention programmes may remain the main component of HIV programme in district.
- Coverage for PPTCT to be increased through initiating HIV counseling and testing services at more centers.
- IEC programme may be strengthened in district to improve the awareness on HIV.



Sheopur, Madhya Pradesh

District Population: 6,87,952 (0.9% of MP Population); Female Literacy': 44.5%; ANC Utilization?: 14.4%		
istrict Population: 6,87,952 (0.9% of MP Populati	%	
istrict Population: 6,87,952 (0.9% of MP Populati	NC Utilization ² :14.49	
istrict Population: 6,87,952 (0.9% of MP Populati	iteracy¹: 44.5%; A	and Tuesday
istrict Population: 6,87,952 (0.9% of MP Populati	n); Female L	-1 1 / WI
istrict Populatio	P Population	
istrict Populatio	0.9% of M	
istrict Populatio	6,87,952 (
District	Population:	
	District	

District Fopulation: 0,07,322 (v.5 % of MF Fopulation), remaie Energy : 44.5 %, AIV. Othization : 14.4 %	0,266,70,0.	7.9 /0 OI INIF I	opulation), i	בוומוב דוגרו	acy . ++.2 /2	Alve Othing	1011												
		7000	HIVLEY	Levels and	=	9000	0000	0100	1,00		orio Dan	0.5	>	vuinerabilities		Mala Microtion 2001 Contra	2001 Cons	917	
		7004	5007	9007	7007	2007	6007	7010	7011		S DAIL	L			MIGI	2	, 2001 Cerr	sns	
0.01	PP4	,	,					0			FSW	MSM	ndi		Overall	- 1	Inter-state Intra-state Intra-district	a-state Int	ra-district
HSS-AINC	NT ⁴							400		Size Est.				No. out-	8208		1500	1194	5814
L	Ы						*	*	0	(Mapping, Year: NA)				migration	+	+	+	5	5
7	N						*	*	1067	% Total HRG		•		% of male	ale 2.88		0.51	0.40	1.97
-	Ы			,			,							od ;	+	+	+		T
Blood Bank	N						,			% Total Pop.	•	•		% of total	tal 100		17.63	14.03	68.34
Œ	ЬР									F				IIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII	- 1	_	-		
U15-55H	IN									Programme larget					lop distri	l op districts for inter-state out-migration	-state out-m	ngration	T
79101 0311	Ы									Programme	•	•							
MSS-FSW	IN		-		-					coverage	Home								
I I C D A C D A	Ы										based-	Kothi-	-						
INCINI-CCLI	N										NA;								
100	Ы										Brothel		NA:	Kota	Raran			ainir	
HSS-IDO	N									Typology	-pased							Raiasthan	
-1-24 DTO	ЬР							0.63	69.0		Ϋ́					Rajasthan			
ICIC Male	IN							640	434		harod	decker-							
ICTC Formula	ЬР			-		-		0.27	0.28		NA								
רור בוומע	N							749	1082	% <25 vrs.									
Dofounda	ЬР							0.43	0.23	% Married	,		-						
ורור אפופוופת	N							1167	1318		ST	STIVRTI							
ICTC Direct	ЬР			-		-	-	0.49	1.33		2008	5005	2010 20	2011					
Walk-in	IN							222	225	No. episodes treated	,		843	1556					
			P.	HIV Profile	e, 2009					% Syphilis pos.	,								
	% On ART	%	% III., Prim.	_	% widowed or	ed or				:	, 000	1000	<u>م</u> -	me R	se	-	-	.,,	
		4	Edu.	Married	alvorced	p				NO.	7004	5002	7000	2007 /007	8 7009	+	7 0107	7011	
ART (NA)										FSW TIs			-	1	-		_		
DLN (NA)	-			-						MSM TIs					•				
	Rc	Route of HIV Transmission, ICTC	ransmission,	ICTC 2011						IDU TIS				1	_				
	Hetero-	Homo-	To old	Needle/	۵	1				Comp. TIs			-		-				
	sexnal	sexnal	nonia	Syringe	Child	OIINIOW				ICTCs			1	1 1	1		1	3	
% of Total Pos.	001	c	c			c				Total tested ⁵			-		37		2086 2	2583	
(N=6)	3	0	0	0	>	>				Blood Banks	-		-	-					
			BIG	Block-Level I	Details					STI clinics	-	-	-	-	_		_	_	
No. HRG-FSW				-						ART centers	,		,	1	_		_		
No. HRG-MSM				-						Link ART centers									
No. HRG-IDU										PLHIV Networks									
										Red ribbon clubs	,		,	1	-		_	-	
% Positive, ICTC										Comm. care centers	,								
% Positive,										Drop-in-centers	,				1				
PPTCT										Condom outlets							-	-	

* Inadequate sample size; - Data not available; 1 2011 Census; 2 Source: DLHS III; 3 Data presented only for years where sample size is valid (HSS-ANC: 300 tested, HSS-HRG/STD: 187 tested, ICTC: 600 tested, PPTCT and BB: 900 tested); 4 PP = percent positive, NT = number tested; 5 General clients and pregnant women

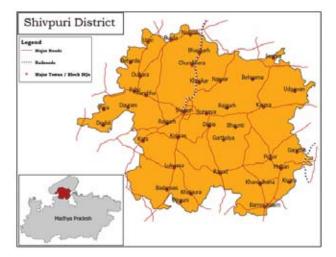
Shivpuri, Madhya Pradesh

Background:

Shivpuri district is situated in the northern part of the Madhya Pradesh. It has a population of 17.25 lakhs with a sex ratio of 877 females per thousand males, a female literacy rate of 49.5% and an overall literacy rate of 63.7% (2011 Census). The economy of Shivpuri district mainly depends on agriculture, however, industries are growing in the district. The Leather and handicraft industries are emerging employment industries for people. There are two centers of Sericulture industry in Kolaras and Pohri Block. The major highways that pass through Shivpuri are National Highways 3 and 11.

HIV Epidemic Profile:

 Based on 2010 HSS-ANC, 2011 PPTCT and Blood Bank data, the district had a low (≤ 0.13%) HIV positivity. A declining trend was observed for PPTCT attendees but due to lack of data points, a trend could not be determined for HSS-ANC and Blood Bank.



- HIV sero-positivity among ICTC attendees as recorded in 2011 was low among male (2.52%) and female (0.08%) clients and also among
 referred (0.69%) clients. The positivity was near moderate among direct walk-in (4.39%) clients. Due to the lack of data points trend could
 not be determined.
- The Syphilis positivity rate among STI clinic attendees in 2010 was 17.42%.
- As per the 2001 Census, 2.8% of the male population were out-migrants; 8.3% of them out-migrated to other states and 33.87% out-migrated to other districts within the state.
- The top two destinations for out-of-state migration were Baran (Rajasthan) and Jhansi (Uttar Pradesh).
- HIV and RTI/STI awareness rates among women were 20% and 15.3% respectively (DLHS-III).
- HIV programmes in the district focused primarily on prevention with six ICTCs, one TI, one Blood Bank and one STI clinic operational in district in 2011.
- One Link ART Centre was operational in district to facilitate provision of ART drugs for HIV positives.

- Coverage of PPTCT programme needs to be improved through increasing the facilities for HIV testing.
- IEC programme may be strengthened in district, especially around industrial locations, trade centers and halt points on National highways to improve the HIV awareness level.
- The district has a presence of HRGs but no direct information on HIV level and trends among HRGs is available for district. In the absence of
 HSS sites, routine programme data from district need to be strengthened for completeness and accuracy, and should be examined regularly to
 understand HIV transmission dynamics in district.

2008

2007

2006

9079

3064

2011

2010

Shivpuri, Madhya Pradesh

District Population: 17,25,818 (2.3% of MP Population); Female Literacy': 49.5%; ANC Utilization²:14.3%

Intradistrict 12394

Intrastate

Interstate 1787

Overall 21444

3

Male Migration, 2001 Census

7263

1.60

33.87

8.33

100

% of total migration

No. outmigration % of male Top districts for inter-state out-migration

Jhansi, Uttar Pradesh

Baran, Rajasthan

Daily Injectors-NA; Non daily injectors-NA

												I
		2004	2005	2006	2007	2008	2009	2010	2011		HRG Size	.,
JIV 3311	bp⁴							0			FSW	MSI
HSS-AINC	NT ⁴		,					396		400		1
TOTAG	М						90.0	0.04	0	Manning Year		
L L	IN		-				3319	2685	3094	NA)		
Diood Bank	ЬР		-					0.17	0.13	% Total UDC		
DIOUG BAIIK	IN							3532	3937	70 IOLAI FING		
GE3 3311	dd					-		-		% Total Pon		
U15-56H	IN											_
781011	М									Programme Target		
HSS-FSW	N							,		Programme		
A00 A 001	Ы									Coverage		*52
MSN-KSH	IN										Home based-	
141 001	Ы										NA; Prothol hasad	Pant
HSS-IDO	N				,					Typology	brounel based-	
- I-14 OEO	Ы							1.78	2.52		Street based-	Dour
ICIC Male	IN							1291	1307		N A	
CTC Lampala	Ы							0.49	0.08	% ~ 75 vrc		1
ורור בפוומופ	IN							2847	3269	% Married		1
ICTC Boformal	dd					-		0.72	69.0		STI/RTI	Ē
ורור עפופוופת	IN							3336	3791		2008	2009
ICTC Direct	Ы	,	,	,	,		,	1.62	4.39	No. episodes		
Walk-in	IN		-	-		-		802	797	treated		
			Ы	PLHIV Profile,	, 2009					% Syphilis pos.	•	
	% On ART	% 15-24	% III., Prim.	%	% widowed or	d or				No.	2004	2005
		!	Edu.	Married	divorced					FSWTIs	-	
ART (NA)										MSM TIs		
DLN (NA)	,				,					IDUTIs		
	Rou	Route of HIV Transmission, ICTC 2011	ansmission,	ICTC 2011						COMP. IIS		. -
	Hetero-	Homo-	Blood	/elpeeN	Parent to	Unknown	_			Total tested ⁵		
	sexnal	sexnal		Syringe	Child		T			Blood Banks	-	-
% of lotal Pos.	92.08	0	0	0	4.92	0				STI clinics	-	-
(4-01)			B	ock-Level	Details					ARI centers		
No. HRG-FSW										PLHIV Networks		١.
No. HRG-MSM										Red ribbon clubs		
No. HRG-IDU				,						Comm. care		
% Positive, ICTC										Dron-in-centers		١.
1000										The second second second		

* Inadequate sample size; - Data not available; 1 2011 Census; 2 Source: DLHS III; 3 Data presented only for years where sample size is vaild (HSS-ANC: 300 tested, HSS-HRG/STD: 187 tested, ICTC: 600 tested, PPTCT and BB: 900 tested); *PP = percent positive, NT = number tested; 5 General clients and pregnant women

1033

Sidhi, Madhya Pradesh

Background:

Sidhi district is situated in the North-Eastern part of Madhya Pradesh. It has a population of 11.26 lakhs with a sex ratio of 952 females per thousand males, a female literacy rate of 55.2% and an overall literacy rate of 66.1% (2011 Census). The economy of Sidhi district mainly depends on agriculture. About 40% of the land is forest. There are also coal deposits in the area. The major highway that passes through Sidhi is National Highways 75.

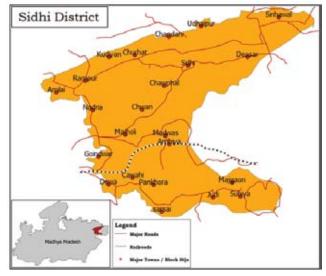
HIV Epidemic Profile:

- As per 2010 HSS-ANC data, HIV positivity was low (0.25%) in the district, but due to lack of data, a trend could not be determined.
- Based on 2010 Blood Bank and 2011 PPTCT data, the district had a low (≤ 0.05%) HIV positivity. A declining trend was observed for PPTCT attendees but due to lack of data points for Blood Bank attendees, a trend could not be determined



- The Syphilis positivity rate among STI clinic attendees in 2010 was 2.43%.
- As per the 2001 Census, 3.4% of the male population (around 32 thousand) were out- migrants; 21.7% of them out-migrated to other states and another 22.2 % out-migrated to other districts within the state.
- The top two destinations for out-of-state migrants were Sonbhadra (Uttar Pradesh) and Koriya (Chhatisgarh).
- HIV and RTI/STI awareness rates among women were 13.1% and 5.2% respectively (DLHS-III).
- HIV programmes in the district focused primarily on prevention with four ICTCs, one TI, one Blood Bank and one STI clinic operational in district
 in 2011
- One Link ART Centre was operational in district to facilitate provision of ART drugs for HIV positives.

- As the HIV epidemic is very low and stable, prevention programme may remain the main component of HIV programme in district.
- Coverage of the PPTCT programme to be improved through increasing the facilities for HIV testing.
- IEC programme may be strengthened in district, especially around women and halt points on National highways to improve the HIV awareness level.
- The district has presence of HRGs but no direct information on HIV level and trends among HRGs is available for district. In the absence of
 HSS sites, routine programme data from district need to be strengthened for completeness and accuracy, and should be examined regularly to
 understand HIV transmission dynamics in district.



Sidhi, Madhya Pradesh

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MIT																			
NIT 1659 2006 2007 2008 2009 2001 2001 2008 2009 2				ΛĦ		Trends								nA	/uinerabilities				
NIT			2004	2002	2006	2007	2008	5009	2010	2011		HRG Siz	g;			Male Mig	ration, 200	Male Migration, 2001 Census	
NIT	SINO-SSH	PP⁴	,						0.25			FSW	MSM	ngi		Overall	Inter-	Intra-state	Intra-district
NT NT NT NT NT NT NT NT	JNIA-CCII	NT⁴				,			400		Size Ect						State		
NT NT NT NT NT NT NT NT	PPTCT	ЬР						0.12	0.08	0.05	(Mapping, Year:		,		No. out-	32006	9969	7119	17921
NI	2	F	,	,		,		1659	3619	1856	NA)				IIIIgiatioii				
NIT	Jaco boolo	ЬР	-		-	-		-	0	*	% Total HRG				% of male	3.38	0.74	0.75	1.89
NIT	Blood Bank	N							2154	*					Dop.				
NT NT NT NT NT NT NT NT	OE STE	ЬР	,								% Total Pop.				% of total	100	21.76	22.24	55.99
NT	U15-55D	IN									Programme				- Indiana				
NIT	78101 001	ЬР	,								Target					Top districts for inter-state out-migration	r inter-stat	e out-migrat	ion
NT NT NT NT NT NT NT NT	H55-F5W	N	,	,	,	,					Programme								
NT NT NT NN NN NN NN NN NN	4 00	ЬР	,	,		,													
NT	HSS-IMISIM	N	,	,	,	,			,			Home based-		Daily					
NT	4	ЬР	,	,								Rrothel		Injectors-	Conbhadra				
NT 1.00 1.	001-881	N									Typology	based-	NA:	NA:	Uttar	Koriya,	Surat,	Surat, Thane,	Nagpur,
NIT	- L- W O TO	ЬР							0.63	1.29		NĄ;		Non dally injectors-	Pradesh	Chhatisgarh	ত ujarat	Maharashtra	Maharashtra
NT 1.46 1.40 1.40	ICI C Male	IN							2378	851		Street based-		NA					
NT	CTC Formula	ЬР							1.46	1.40		¥.							
NT NT NT NT NT NT NT NT	ICI C Lellidie	IN	-	-	-	-		-	754	785	% Narried								
NT 2385 1264 No. episodes 2009 2009 2009	CTC Deferred	ЬР							0.38	0.71		STI/R							
NT NT NO episodes NO e	ICI C Reletied	IN							2385	1264		Н	H	2010 2011					
NT PHHV Profile, 2009 747 373 % Syphilis pos.	ICTC Direct	ЬР							2.28	3.49	No. episodes			7378					
% On ART % %	Walk-in	IN	,						747	373	treated		+	+					
% On ART % III., swidowed of print % widowed of divorced of print % widowed of law or swidowed or print No. 2004 2005 2004 2005				PL	HIV Profile	2009					% syphilis pos.		1	- F.43	mmo Boenor	95			
15-24 Frim Married divorced Figure F				% Ⅲ.,	%	% widowe	d or				No.	⊩	┞	2006 2007	2008	2009	2010	2011	
NSM Is DUTS		% On ARI		Frim.	Married	divorce	Р				FSWTIs	Н	Н	H	Н		.		
Fourte of HIV Tansmission, ICTC 2011 Comp. IIS Comp. IIIS Comp. IIIIS Comp. IIIIIS Comp. IIIIIS Comp. IIIIIS Comp. IIIIIS Comp. IIIIIIIS Comp. IIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII	ART (NA)		,								MSM TIS			+			, ,		
Route of HIV Transmission, ICTC 2011 Congression Con	DLN (NA)										Comp. Tls				. .		- -		
Hetero- Homo- Blood Needle/ Parent to Unknown Sexual Syringe Child		Ro	ute of HIV Tr	ansmission,	ICTC 2011						ICTCs			-	-		-	- 4	
Sexual Sexual Divou Syringe Child Orikitown Divous		Hetero-	Homo-	700	Needle/	Parent to					Total tested ⁵					1659	6751	3492	
91.30 0 4.35 4.35 0 0 0 ART centers 1 1 1 ART centers		sexnal	sexual	BOOIS	Syringe	Child					Blood Banks	-			-	-	-	-	
ART centers	% of Total Pos.	01 30	c	1.35	7.35	c	c				STI clinics	1	-	1	-	-	-	-	
Block-Level Details Link-ART centers Link-ART	(N=23)	00.10	>	1.5	J.:	,	>				ART centers	,					٠		
PIHA Networks PIHA Network				BI	굿	etails					Link ART centers						-	-	
Red ribbon dubs Comm. Carle Centers Drophics Condens C	No. HRG-FSW		,	,	,						PLHA Networks	,				. :	. !	. !	
Confinit cale centers Drop-in-centers Condens outlier	No. HRG-MSM	-	-	-	-	-		-	-		Red ribbon dubs					01	2	01	
Drop-in-centers	No. HRG-IDU										centers						•		
	% Positive, ICTC		,		,	,		,		,	Drop-in-centers								
	% Positive, PPTCT										Condom outlets						1412	898	

* Inadequate sample size; - Data not available; 1 2011 Census; 2 Source: DLHS III; 3 Data presented only for years where sample size is valid (HSS-ANC: 300 tested, HSS-HRG/STD: 187 tested, ICTC: 600 tested, PPTCT and BB: 900 tested); 4 PP = percent positive, NT = number tested; 5 General clients and pregnant women

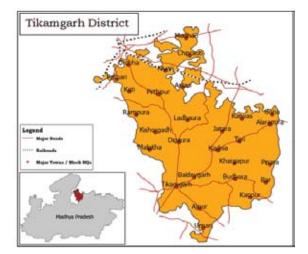
Tikamgarh, Madhya Pradesh

Background:

Tikamgarh district lies in the northern part of Madhya Pradesh. It has a population of 14.44 lakhs with a sex ratio of 901 females per thousands males, a female literacy rate of 50.7% and an overall literacy rate of 62.6% (2011 Census). The economy of Tikamgarh district mainly depends on agriculture. The major highways that pass through Tikamgarh are National Highways 12A, 34 and 176.

HIV Epidemic Profile:

- As per 2010 HSS-ANC and 2011 PPTCT data, the level of HIV
 positivity was 0% with a stable trend for PPTCT attendees, but a
 trend could not be determined for HSS-ANC due to lack of data
 points.
- HIV sero-positivity among ICTC attendees, as recorded in 2011, was low among direct walk-in (1.3%) and referred (0.36%) clients, and also among male (0.61%) and female (0.58%) clients. There was not enough data to determine a trend.
- The Syphilis positivity rate among STI clinic attendees in 2010 was 0.15%.



- As per the 2001 Census, 3% of the male population (around 19 thousand) were out-migrants; approximately one fourth (26.6%) of them out-migrated to other states and another 31% out-migrated to other districts within the state.
- The top two destinations for out-of-state migration were Jhansi (Uttar Pradesh) and South-West Delhi (Delhi).
- HIV and RTI/STI awareness rates among women were 22.2% and 30.9% respectively (DLHS-III).
- Homosexual transmission accounted for 14.29% of the total HIV transmission, indicating the contribution of MSMs to the epidemic.
- The HIV programmes in the district focused primarily on prevention with five ICTCs, one TI, one Blood Bank and one STI clinic operational in district in 2011.

- As the HIV epidemic is very low and stable, prevention programme should remain the main component of HIV programme in district.
- IEC programme may be strengthened in district, especially at halt points on National highways to improve the HIV awareness level.
- The district has presence of HRGs but no direct information on HIV level and trends among HRGs is available for district. In the absence of
 HSS sites, routine programme data from district need to be strengthened for completeness and accuracy, and should be examined regularly to
 understand HIV transmission dynamics in district.
- Homosexual transmissions are high, thus more needs to be done to better understand the profile of MSMs through mapping and in-depth analysis of ICTC and ART data.

2011

2010

2009

2008

2007

4227

Tikamgarh, Madhya Pradesh

District Population: 14,44, 920 (2% of MP Population); Female Literacy¹: 50.7%; ANC Utilization²: 21.6%

Intra-district 8010

Intra-state 5900

Inter-state

Overall

5050

No. out-migration

Male Migration, 2001 Census

42.25

31.12

26.64

100

migration

Top districts for inter-state out-migration

South Delhi

Mumbai, Maharashtra

South West Delhi

Jhansi, Uttar Pradesh

1.26

0.92

0.79

2.97

% of male pop. % of total

			HIV	ᄝ	Trends ³						HRG Size		Vulner
		2004	5002	7000	7007	7008	5006	2010	2011				
	P₽₫							0			FSW	MSM	201
JNA-KE	NT⁴							400		Size Est.			
	ЬР						0	0	0	(Mapping, Year:			•
	ħ						2175	2790	4041	NA)			
1	ЬР							*	*	% Total HRG			
Blood Bank	ħ							*	*				
	PP			,	,								
HSS-51D	ħ									% Total Pop.			•
-	ЬР				,			,		Drogramme Target		ļ	
HSS-FSW	ħ									Programme			
9 40	ЬР									Coverage		-	
HSS-IMSM	ħ										Home based-	_	Daily
-	ЬР										NA;	NA;	Injectors-
H35-IDU	Ħ				,					Typology	Brothel based-		NA:
1-1-	ЬР							0	0.61	6	NA; Stroot bacod.		Non daily
CIC Male	N							813	1319		NA NA	Р	NA
	ЬР							0	0.58	0/2 /75 vrs		WA	
CIC remaie	Ħ							624	345	% Married			
7	PP							0	0.36		STI/RTI	(III	
CIC Keterred	ħ							955	1113		2008 2	5009	2010 201
Direct	ЬР							0	1.26	No. episodes			2111 504
Walk-in	IN	-						482	272	treated			
			PLH	PLHIV Profile,	2009					% Syphilis pos.			0.15
	100		% III.,	%	% widowed or	d or					╢	-	ograi
	% On AKI	% I2-74	E =	Married	divorced	-C				No.	2004 2	2005	2006 200
ART (NA)										MSM TIS			
DLN (NA)										IDUTIs			
	Rout	Route of HIV Transmission, ICTC 2011	nsmission,	ICTC 2011						Comp. Tls	-		-
	Hotoro-	Homo-		Noodlo/	Darant to					ICTCs	-		-
	sexual	sexual	Blood	Syringe	Child	Unknown	_			Total tested ⁵			
Total Pos.										Blood Banks		- -	- -
(N=14)	85.71	14.29	0	0	0	0				SII Clinics	-	_	-
			Blo	Block-Level Do	Details					Link ABT contors		.	
No. HRG-FSW								ŀ		PLHA Networks			
No HRG-MSM		١.		,	١.	١.				Red ribbon clubs	1		
No. HRG-IDU										Comm. care			
% Positive ICTC										centers		1	
ווואפ, וכווכ										Drop-in-centers			
% Positive, PPTCT						-		-		Condom outlets			

* Inadequate sample size; - Data not available; 1 2011 Census; 2 Source: DLH5 III; 3 Data presented only for years where sample size is valid (HSS-ANC: 300 tested, HSS-HRG/STD: 187 tested, ICTC: 600 tested, PPTCT and BB: 900 tested); * PP = percent positive, NT = number tested; 5 General clients and pregnant women

1059

Ujjain, Madhya Pradesh

Background:

Ujjain district is located in the western region of Madhya Pradesh. It has a population of 19.86 lakhs with a sex ratio of 954 females per thousand males, a female literacy rate of 61.4% and an overall literacy rate of 73.6% (2011 Census). The economy of Ujjain district mainly depends on agriculture. Ujjain was previously a major industrial area and was a centre of the textile industry with a number of textile mills in the Ujjain city. Religious tourism is also a contributor to the economy. The major highway that passes through Ujjain is National Highway 3.

HIV Epidemic Profile:

- Based on 2011 PPTCT and Blood Bank data, the district had a low (≤ 0.30%) HIV positivity among the attendees. A stable trend was analysed among PPTCT attendees but due to lack of enough data points for Blood Bank, a trend could not be determined.
- HIV sero-positivity among ICTC clients in 2011 was moderate among direct walk-in (7.14%) but low among referred (3.01%) clients. Similarly, HIV positivity was moderate among male (5.54%) clients and low among female (2.36%) clients. A declining to stable trend was observed for the ICTC attendees.
- As per mapping estimates 2008, there were approximately 1500 HRGs in the district. FSWs (53%) were the largest HRG in the district, followed by MSMs (34% of total HRG) and IDUs (13%). Of the FSWs 44.54% were home-based and 40.71% were brothel-based.
- The Syphilis positivity rate among STI clinic attendees in 2010 was 0.68%.
- As per the 2001 Census, 6% of the male population were out migrants (around 54.6 thousand); 8.5% of them out-migrated to other states
 and another 46.7% out-migrated to other districts within the state.
- The top two destinations for out-of-state migrants were Kota and Jhalawar in Rajasthan.
- HIV and RTI/STI awareness rates among women were 39% and 17.3% respectively (DLHS-III).
- HIV programmes in the district focused on a comprehensive package of prevention as well as treatment services. Prevention services were
 offered through eight ICTCs, three TI's, one Blood Bank and one STI clinic in district in 2011.
- One ART Centre was operational in district from 2009 to provide ART drugs for HIV positives.
- Of the 648 PLHIV registered at the Anti-Retroviral Therapy (ART) center till 2009, 73% were on ART and 62% were illiterate or only had a primary school education and 66% were either widowed or divorced.

- The district may continue to focus on HIV prevention programme, especially among people with high risk behavior.
- IEC programme may be strengthened in district, especially among women and around major industrial areas, tourist spots and halt points on National highways to improve the HIV awareness level.
- As there are indications of moderate HIV epidemic among people with high risk behavior, pockets of interstate out-migration may be mapped and provided prevention services.
- Considering moderate HIV positivity among ICTC attendees and presence of HRGs the district may be considered for surveillance activities to
 understand the epidemic in a better way. In the absence of surveillance sites, routine programme data from district need to be strengthened
 for completeness and accuracy, and should be examined regularly to understand HIV transmission dynamics in district.

2010

2009

2008

2007

0.68 Pr 2006

2005

7295

2011

3128

2009

13614

11521

3048

1609

Surat, Gujarat

Mumbai (Suburban), Maharashtra

Chittaurgarh, Rajasthan

Kota, Jhalawar, Rajasthan Rajasthan

Daily Injectors-NA; Non daily injectors-NA

Kothi-NA; Panthi-NA; Double decker-

Ϋ́

Intradistrict 24016

Inter-state Intra-state

Overall 53623

1DU 202

MSM 526

Male Migration, 2001 Census

25046

4561

90.9

No. outmigration % of male pop. % of total migration

13.07

34.02

44.79

46.71

8.51

100

Top districts for inter-state

0

0

Ujjain, Madhya Pradesh

District Population: 19,86,597 (2.7% of MP Population); Female Literacy¹: 61.4%%; ANC Utilization²: 65.8%

	ze		T		T		T		Т			-	5			÷		П		STI/RTI	2				70													
	HRG Size	FSW		818		52.91		0.04			339	Home hace	45%:	Brothel	based-41%;	Street based-	15%	12	20	IIS	2008				2004					-	1	-						
			1	Size Est.	(Mappilly, Teal)	% Total HRG		% Total Pop.	Programme Target	Programme	Coverage			-	iybology			% <25 yrs.	% Married			No. episodes	treated	% syphilis pos.	No.	FSW TIs	MSMTIs	IDU TIS	Comp. IIS	Total tested5	Blood Banks	STI clinics	ART centers	Link ART centers	PLHIV Networks	Ked ribbon clubs	centers	Drop-in-centers
	2011			0.26	5394	0.30	12181									5.54	3682	2.36	4538	3.01	6644	7.14	1694															,
	2010			0.13	5495	0.13	13417	3.21	249	-		-	-	-		6.55	2075	2.33	3951	3.29	3948	4.72	2078										,					
	2009			0.20	5465	-										10.42	2062	5.20	2585	4.50	3886	5.82	761													- Nonella	Nagda, 6.39	Nagda, 0
	2008			0.35	2004			0	250			-		-		21	510	29.87	534	10.32	862	28.98	182		jo T	Τ.	Τ		a south	OIIKIIOWII	1.23			ŀ			Gnatiya, 7.41	Ghatiya, 0.3.1
d Trends ³	2007			-		-		0	250	-		-	-	-		33.26	423	8.11	1186	8.59	1071	14.09	538	e, 2009	% widowed or	99	3		Parent to	Child	5.25	Potoile	Details			- dought	Knachrod, 2.64	Khachrod,
Levels and	2006			-				0.40	250	-			-	-			-		-					LHIV Profile	% Married	18		ICTC 2011	Needle/	Syringe	0.93	love I doe				- Dadwood	badnagar, 1	Mahidpur, Badnagar, Khachrod,
AH.	2005							0	240	-		-		-		,								Ь	% III., Prim.	62		Route of HIV Transmission, ICTC 2011	poola	piood	0.93		۰			Makidans	Manidpur, 1.23	Mahidpur, 0.11
	2004			-				2	250	-			-	-			-	-	-			,			% 15-24	Ì,		Oute of HIV	Homo-	sexual	0.93		,				larana, 0.42	Tarana, 0
		bb⁴	NT⁴	ЬР	Z	ЬР	N	ЬР	NT	ЬР	IN	ЬР	NT	ЬР	LN	Ы	NT	ЬР	NT	Ы	N	ЪР	ΙN		% On ART	73		~		sexnal	90.74					, die il	Ujjain, 6.99	Ujjain, 0.16
HIV Levels and Trends ³		0144	HSS-AINC	TOTAL		Jaca boola	DIOUU DAIIK	OT S S S I	UIS-SED	W 55 55 11	WS1-SSH	LICC MICH	INISINI-SCII	IIU SSII	U31-551	LCTC Mala	ICIC INIQIE	LCTC Fomale	ICIC reliigie	LCTC Pofomod	ורור ויפופוופת	ICTC Direct	Walk-in			ART (648)	DIN (NA)	, (A)			% of Total Pos.	(HZC=NI)	No HRG-FGW	No HPG-MSM	No. HRG-INI	NO. HAG-IDO	% Positive, ICTC	% Positive,

* Inadequate sample size; - Data not available; ' 2011 Census; ' Source: DLHS III; 3 Data presented only for years where sample size is valid (HSS-ANC: 300 tested, HSS-HRG/STD: 187 tested, ICTC: 600 tested, PPTCT and BB: 900 tested); * PP = percent positive, NI = number tested; * General clients and pregnant women

1046

1475

24

Umaria, Madhya Pradesh

Background:

Umaria district is located in the eastern region of Madhya Pradesh. It has a population of 6.43 lakhs with a sex ratio of 953 females per thousand males, a female literacy rate of 56.1% and an overall literacy rate of 67.3% (2011 Census). The economy of Umaria district mainly depends on agriculture. Umaria is also enriched with vast resources of forests and minerals. The coal mines are a steady source of revenue for the district. The major highway that passes through Umaria is National Highways 78.

HIV Epidemic Profile:

- The district had a very low epidemic as indicated by zero seropositivity recorded at PPTCT (2010) in the district. There was not enough data with adequate sample size to determine the trend.
- HIV sero-positivity among ICTC attendees, as recorded in 2011, was very low among direct walk-in (0.20%) and referred (0.19%) clients, as well as among male (0.19%) and female (0.10%) clients. However, there was not enough previous data to complete a trend analysis.



- The Syphilis positivity rates among STI clinic attendees in 2010 was at 6.33%.
- As per the 2001 Census, 4.3% of the male population were out-migrants (around 11.6 thousand), 5.6% of them out-migrated to other states and 54.1% migrated to other districts within the state.
- HIV and RTI/STI awareness rates among women were 21.8% and 14% respectively (DLHS-III).
- Of the total HIV transmissions, Blood transfusion accounted for 33.33% of the transmission, indicating the role of Blood Banks in the epidemic.
- HIV programmes in the district focused primarily on prevention with four ICTCs, one Blood Bank and one STI clinic operational in district in 2011.

- As the HIV epidemic is very low and stable, prevention programme may remain the main component of HIV programme in district.
- IEC programme may be strengthened in district, especially at coal mines and halt points on National highways to improve the HIV awareness level.
- Routine programme data from district need to be strengthen for completeness and accuracy, and should be examined regularly to understand HIV transmission dynamics in district.

Umaria, Madhya Pradesh

District Population: 6,43,579 (0.8% of MP Population); Female Literacy!: 56.1%; ANC Utilization?: 30.5%

Intradistrict 4670 1.76

	lŀ	Intra- Int	╁	6289 46		2.37 1.	+	54.18 40		lop districts for intel-state out-migration															2011				4	2217	1	-				m		
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ties				No. out- migration		% of male	% of total	migration		do				Koriva	Chhatisgarh	n								esponse	2008	1			1		-	1	-					
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		MSM							·			Kothi-	NĄ:	Panthi-	Ϋ́ Y	Double decker-	NA N				7 6007				2005 2	+						_	_	1		+		
	HRG Size	FSW	Ì								,	Ì	Home based-	NA; Brothel	based-NA;	Street based-	₹			2	7008	<u> </u>			2004 20				+			-						
	-			Mapping, Year:		HRG		Pop.	ıme		ıme		-			Stre		yrs.	pei	-	\dagger	c c c	lis pos.				S			sted ⁵	anks		ters		PLHIV Networks	Red ribbon clubs	care	or in contact
			Size Est.	(Mappin	NA)	% Total HRG		% Total Pop.	Programme	Target	Programme	Coverage			Typology			% <25 yrs.	% Married		No onicodor	treated	% Syphilis pos.		No.	FSW TIS	MSM IIS	Comp Tk	ICTG.	Total tested ⁵	Blood Banks	STI clinics	ART centers	Link AR	PLHIV	Ked ribb	centers	.9
	2011			*	*	*	*									0.19	540	0.10	1029	0.19	21039	0.20	512															
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Levels and Tr	2006				-	,	,	-	-			-	-	-			-							Profile,	%	Б	-		TC 2011	Needle/		0		Block-Level Details				
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* Inadequate sample size; -. Data not available; 1 2011 Census; 2 Source: DLHS III; 3 Data presented only for years where sample size is valid (HSS-ANC: 300 tested, HSS-HRG/STD: 187 tested, ICTC: 600 tested, PPTCT and BB: 900 tested); 4 PP = percent positive, NT = number tested; 5 General clients and pregnant women

Vidisha, Madhya Pradesh

Background:

Vidisha district is situated in the central part of Madhya Pradesh. It has a population of 14.58 lakhs with a sex ratio of 897 females per thousand males, a female literacy rate of 61.7% and an overall literacy rate of 72.1% (2011 Census). The economy of Vidisha district mainly depends on agriculture, tourism also contributes to the district's economy. The major highway that passes through Vidisha is National Highway-86.

HIV Epidemic Profile:

- Based on 2010 HSS-ANC, 2011 PPTCT and Blood Bank data, the district had a very low (≤ 0.08%) HIV positivity, with a stable trend for PPTCT attendees. However, there was not enough data for HSS-ANC and Blood Bank to determine a trend.
- HIV sero-positivity among ICTC clients in 2011 was low among direct walk-in (0.39%) and referred (0.46%) clients, and also among male (0.60%) and female (0.28%) clients. Due to lack of data points, complete data analysis could not be done.



- The Syphilis positivity rate among STI clinic attendees in 2010 was 0.64%.
- As per the 2001 Census, 5% of the male population were out-migrants (around 32.5 thousand); 2.4% of them out-migrated to other states and another one third (35%) out-migrated to other districts within the state.
- HIV and RTI/STI awareness rates among women were 36% and 9.8% respectively (DLHS-III).
- Heterosexual transmission accounted for 73.91% of the total HIV transmission, but more importantly, homosexual transmission accounted for 13.04% of the total HIV transmission, indicating the contribution of MSMs to the epidemic.
- HIV programmes in the district focused on prevention services. Six ICTCs, one TI, one Blood Bank and one STI clinic were operational in district in 2011.
- One Link ART Centre (LAC) was operational in district since 2011 to provide ART drugs for HIV positive individuals.

- · As the HIV epidemic is low and stable, prevention programmes may remain the main component of HIV programme in district.
- IEC programme may be strengthened in district, especially at tourist places and halt points on National highways to improve the HIV awareness level
- The district has presence of HRGs but no direct information on HIV level and trends among HRGs is available for district. In the absence of
 HSS sites, routine programme data from district need to be strengthened for completeness and accuracy, and should be examined regularly to
 understand HIV transmission dynamics in district.
- Homosexual transmissions are high, thus more needs to be done to better understand the profile of MSMs through mapping and in-depth analysis of ICTC and ART data.

2010

2009

2008

2007

9017

1137

Vidisha, Madhya Pradesh

District Population: 14,58,212 (2% of MP Population); Female Literacy¹: 61.7%; ANC Utilization²: 33.6%

Intra-district

Intra-state 11489

Inter-state

Overall 32483

770

No. out-migration

Male Migration, 2001 Census

62.26

2.37

100

% of male pop. % of total migration

Top districts for inter-state out-migration

3.12

1.77

0.12

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Vulnera		nai										,		Daily Injectors-	Non daily		NA			-	2010	2762	0.64	gramn	2006				-		1	-							
		MSM											1 1 1	NA:		Y:	Double decker- NA		-	-	+	27	0		-			+					1	+	1				
	HRG Size									-			4			-	non	_		STI/RTI	2009	1			2005	1	1				-	-	1	1	1		•		
	H	FSW												Home based- NA:	Brothel based-	- :¥: :	Street based- NA				2008				2004						1	-				-			
			Size Est.	(Mapping, Year:	NA)	% Total HRG			% Total Pop.	Programme	Target	Programme	Coverage		Typology			% <25 yrs.	% Married		14	No. episodes treated	% Syphilis pos.		No.	FSW TIS	MSM IIIs	IDU IIIs	ICTG	Total tested ⁵	Blood Banks	STI clinics	ARI centers	LINK AK I Centers	PLHIV Networks	Red ribbon clubs	centers	Drop-in-centers	Condom outlets
	2011			0.02	5947	80.0	6129									09.0	2823	0.28	2505	0.46	3447	0.39	1776																
	2010	0	395	0	4818	0	3646			-					-	0.34	2320	0.27	1879	0.50	2002	0.14	2194																
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HIV Levels and T	2006		,	,							,				-		-							V Profile,	%	Married			CTC 2011	Needle/		4.35		Block-Level De					
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		pb₄	NT4	ЬР	IN	ЬР	N	Ы	IN	ЬР	IN	Ы	IN	PP	NT	ЬР	NT	ЬР	N	Ы	N	ЬР	N		TG 4 O	% OII ANI		-	Ron	Hetero-	sexnal	73.91							
		Clas	HSS-AINC	PDICI		0	Blood Bank	E S	HSS-51D	7913 3311	NS2-150V	00 PAGPA	IVISIVI-SCH	100	HSS-IDU	CTC Male	ICIC Male	OTO Formula	כוכ נפוומופ	Francisco SEC	CIC Referred	ICTC Direct	Valk-in				ART (NA)	DLN (NA)				% of Total Pos.	(N=23)		No. HRG-FSW	No. HRG-MSM	No. HRG-IDU	% Positive, ICTC	% Positive, PPTCT

* Inadequate sample size, - Data not available, 1 2011 Census, 2 Source: DLHS III; 3 Data presented only for years where sample size is valid (HSS-ANC: 300 tested, HSS-HRG/STD: 187 tested, ICTC: 600 tested, PPTCT and BB: 900 tested); 4 PP = percent positive, NT = number tested; 5 General clients and pregnant women

745

996

West Nimar, Madhya Pradesh

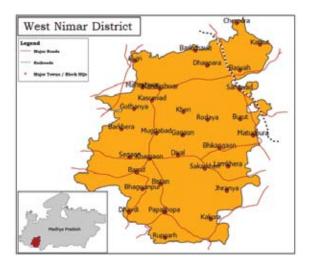
Background:

Khargone district, formerly known as West Nimar, is located in the southern-west part of Madhya Pradesh. It has a population of 18.72 lakhs with a sex ratio of 963 females per thousand males, a female literacy rate of 53.7% and an overall literacy rate of 64% (2011 Census). The economy of Khargone district is agrarian, mainly depending on cotton and chilly. It's also a tourist place, known for its lush green forests, majestic ghats and historical sites.

HIV Epidemic Profile:

- Based on 2010 HSS-ANC data, the district had a moderate (≤ 0.50%) HIV positivity, and for 2011 PPTCT and Blood Bank data, the level of HIV positivity was low (≤ 0.12%). A stable trend was observed for PPTCT attendees but there was not enough data for HSS-ANC and Blood Bank to determine a trend.
- HIV sero-positivity among ICTC clients in 2011 suggested low level HIV epidemic among direct walk-in (4.04%) and referred (2.41%) clients, comparitively higher positivity among direct walk-in clients indicating a high risk behaviour among attende

walk-in clients indicating a high risk behaviour among attendees. HIV positivity was low also among male (3.17%) and female (1.91%) clients. Due to lack of data points, a trend could not be determined.



- As per the 2001 Census, 9.3% of the male population were out-migrants (around 73 thousands); 9.3% of them out-migrated to other states and another 41% out-migrated to other districts within the state.
- Maharastra was the destination state for most of the males (>80%) who migrated out of state. The top two destinations for out-of-state migration were Jalgaon and Dhule in Maharastra.
- HIV and RTI/STI awareness rates among women were 36% and 15.6% respectively (DLHS-III)
- HIV programmes in the district focused primarily on prevention with six ICTCs, one Blood Bank and one STI clinic operational in district in 2011.
- One Link ART Centre was operational in district to facilitate provision of ART drugs for HIV positives.

- There are indications of near moderate HIV epidemic in the district, especially among people with high risk behavior (ICTC direct walk-in
 attendees). This is further corroborated by exposure of out-migrating males to high prevalence districts in Maharastra and Gujarat. Thus, these
 high risk groups need to be focussed.
- As there are indications of moderate HIV epidemic among people with high risk behavior, pockets of inter-state out-migration may be mapped and provided prevention services.
- Uptake of ICTC services, crucial to identify the HIV positive as well as to understand the epidemic, is low in district as less than 1500 people
 were tested in ICTCs during 2011. IEC in district may focus on increasing the uptake of services from high risk and bridge population group.
- The district has no recorded evidence of HRGs. However, as there are indications for moderate prevalence among people with high risk behavior, routine programme data from district need to be strengthened for completeness and accuracy, and should be examined regularly to understand HIV transmission dynamics in district.

2010

2009

2008

2007

2006 0

2005

3995

2011

2010 1651

2009

5888

3495

1087

Surat, Buldana, Nandurbar, Gujarat Maharashra

Jalgaon, Dhule, Maharashtra Maharastra

Daily Injectors-NA; Non daily injectors-NA

Kothi-NA; NA; Double decker-NA

Intra-district 36131

Intra-state

Inter-state

Overall

 \exists

MSM

Male Migration, 2001 Census

29951

6781 0.86 9.31

72863

No. out-migration

9.28

% of male pop. % of total migration

49.59 4.60

41.11

100

Top districts for inter-state out-migration

West Nimar, Madhya Pradesh

District Population: 18,72,413 (2.5% of MP Population); Female Literacy¹: 53.7%; ANC Utilization²: 38.2%

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NA: | Street based | ¥ | | TOULTO | SIIIK | 7000 | |
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| | | | Size Est.
(Mapping, Year: NA)

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treated | % Syphilis pos.
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 | ICTG | Total tested ⁵ | Blood Banks | STI clinics | ART centers | Link ART centers | PLHIV Networks
 | Red ribbon clubs | Comm. care centers | Drop-in-centers | Condom outlets |
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 | 4420

 | 0.12 | 9386

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| 2006 | | |

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| 2005 | | - |

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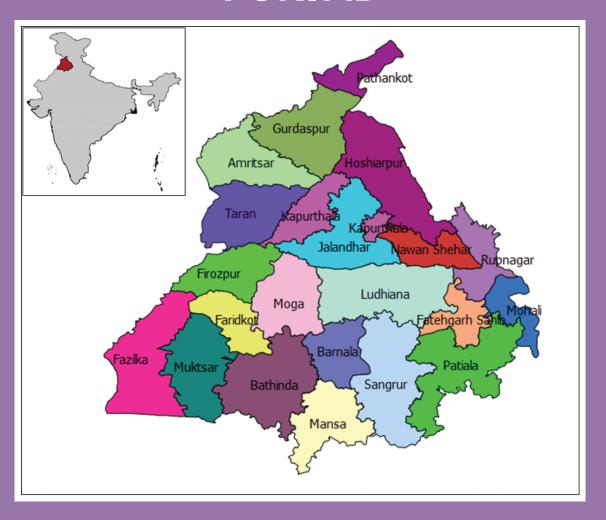
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 | | | - 4 T-4-10 | % of lotal Pos. | | No HRG-ESW | No. HAG-FSW
 | NO. HRG-IMSIM | No. HRG-IDU | % Positive, ICTC | % Positive, PPTCT |
| | 2005 2006 2007 2008 2009 2010 | PP ⁴ 2004 2005 2006 2007 2008 2009 2010 2011 | 2004 2005 2006 2007 2008 2009 2010 2011 - <td>VC PP⁴ .<td> PP⁴ 2004 2005 2006 2007 2008 2009 2010 2011 2011 2018 2009 2010 2011 </td><td>NC PPs¹ 2.004 2005 2007 2009 2010 2011 NC NT⁴ - <t< td=""><td>NC PP¹ 2.004 2005 2007 2009 2010 2011 NC NIT -</td><td> PP⁴ 2004 2005 2006 2007 2008 2009 2010 2011 </td><td>VC PP⁴ 2.004 2.005 2.007 2.009 2.010 2.011 VC NIT⁴ 2. <th< td=""><td> PP¹ 2004 2005 2006 2007 2008 2009 2010 2011 NIT⁴ 2 2 2 2 2 2 2 2 2 </td><td> PP⁴ 2004 2005 2006 2007 2008 2009 2010 2011 NI⁴ 395 395 NI 0.08 0.02 NI 1087 2444 4420 NI 2006 0.12 NI 2006 0.12 NI NI </td><td> PP¹ 2004 2005 2006 2007 2008 2009 2010 2011 NI¹ 395 Size Est. NI² 0 0.08 0.02 NI 0.06 0.01 NI 0.06 0.02 NI 0.06 0.02 NI </td><td> PP¹ 2004 2005 2006 2007 2008 2009 2010 2011 NIT⁴ 2 2 2 2 2 2 2 2 2 </td><td> PP⁴ 2004 2005 2006 2007 2008 2010 2011 NI⁴ -</td><td> PP¹ 2004 2005 2006 2007 2008 2009 2010 2011 NIT⁴ 2</td><td> NI</td><td> PP⁴ 2004 2005 2006 2007 2008 2010 2011 NI⁴ -</td><td> PP⁴ 2004 2005 2006 2007 2008 2010 2011 NI⁴ </td><td> PP 2004 2005 2006 2007 2008 2010 2010 2010 2010 </td><td> PP⁴ 2004 2005 2006 2007 2008 2010 2011 NI⁴ - - </td><td> PP 2004 2005 2006 2007 2008 2010 2010 2011 PRG Size PRG PRG Size PRG PRG Size P</td><td> PP 2004 2005 2006 2007 2008 2010 2010 2010 2010 </td><td> PP 2004 2005 2006 2007 2008 2010 2011 PRG Size Est. PRG PRG Size Est. PRG PRG Size Est. PRG PRG Size Est. PRG PRG Size Est. PRG Size Es</td><td> PP 2004 2005 2006 2007 2008 2010 2010
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2011 2 | PPI 2004 2005 2006 2007 2008 2000 2011 PRO Size Est. PRO S | PPI 2004 2005 2006 2007 2008 2000 2011 PROSpinory Pear NA 2005 2000 2005 2 | PPI 2004 2005 2006 2007 2008 2009 2009 2009 2008 2 | No. 2004 2005 2006 2000 2001 2 | Property Property |

* Inadequate sample size; - Data not available; - 2011 Census; - Source: DLHS III; - Data presented only for years where sample size is valid (HSS-ANC; 300 tested, HSS-HRG/STD: 187 tested, ICTC; 600 tested, PPTCT and BB: 900 tested); *PP = percent positive, NT = number tested; - General clients and pregnant women

1159

1548

PUNJAB



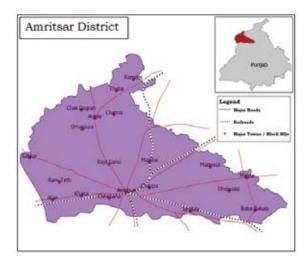
Amritsar, Punjab

Background:

Amritsar district derives its name from the Amrit Sarovar, the holy tank that surrounds the world famous Golden Temple in Punjab. It has a population of 24.90 lakhs with a sex ratio of 884 females per 1,000 males, and a female literacy rate of 72.8% with an overall literacy rate of 77.2% (2011 Census). The economy of Amritsar district mainly depends on agriculture and tourism (Golden Temple). Almost 100% of the cultivable land is under irrigation which attracts in-migration of laborers from the rural pockets of the neighboring districts. A major National Highway, NH-1, passes through Amritsar.

HIV Epidemic Profile:

- Based on 2010 HSS-ANC, and 2011 PPTCT and Blood Bank data, the level of HIV positivity was low (≤0.25%), with a stable to declining trend.
- Based on 2010 HSS data, the level of HIV positivity was very high among IDUs (46%), and low among FSWs (0%) with a declining trend.



- HIV positivity among ICTC attendees was high among direct walk-in (11.9%, 2011) clients and moderate among male (6.14%, 2011) clients with a gradually rising trend. It was comparatively lower among referred (2.70%, 2011) and female (3.54%, 2011) clients, although there was a sudden increase in 2010, from its earlier levels of <1.0%.
- There has been a rapid scale-up of ICTCs from 2008 onwards with a steady increase in the number of clients undergoing HIV testing at these sites.
- As per mapping conducted in 2009, IDU (5350, 59.2% of total HRG) was the largest HRG in the district, followed by FSW (3440, 38% of total HRG) and MSM (245, 2.7% of total HRG). Of the FSW, 89.44% were home-based and only 9.11% were street-based.
- Syphilis positivity rate among STI clinic attendees in 2011 was 0.34%.
- As per the 2001 Census, 3.5% of the male population were migrants; 41.09% of them migrated to other states, of which the most popular
 were Chandigarh and Delhi and 26.25% migrated to other districts within the state.
- HIV awareness and RTI/STI awareness rates among women were 90.4% and 76.2% respectively (DLHS-III).
- Of the 1142 PLHIV registered at the Anti-Retroviral Therapy (ART) center in 2009, 13% were 15-24 years of age, 43% were on ART, 46% were illiterate or only had a primary school education, and 61% were widowed or divorced.
- Heterosexual transmission accounted for 75% of the transmission, but more importantly, transmission through needle/syringe accounted for 15% of total transmissions, indicating the contribution of IDUs to the epidemic.
- Though there were huge number of IDUs, there were only two IDU TIs in the entire district.

- · Strengthen interventions for these HRG to control transmission, considering the large number of IDUs and high HIV prevalence among them.
- Carry out differential analysis of direct walk-in clients (representative of vulnerable populations) owing to high positivity among them by further analysis of ICTC/PPTCT and ART data.
- Focus on IDU-FSW sexual networks and address the dual risk that is posed due to high rates of infection among IDUs and the district being a major tourist spot with presence of large numbers of female sex workers.
- Focus on outreach efforts among hard-to-reach populations, such as FSWs who are home-based.
- Strengthen outreach programmes through awareness campaigns for STI and HIV around trucking halt points and highways in the district.

2010

2009

2008

2007 0.34

2006

2005

2004

12363

2011

2010 6014 0.16

2009 4614

2008 1063

STI/RTI

Amritsar, Punjab

District Population: 24,90,891 (8.9% of Punjab Population); Female Literacy¹: 72.8%; ANC Utilization²: 80.8%

Intra-district 19177

Intra-state

Overall 58714

3

MSM

FSW

HRG Size

Male Migration, 2001 Census Inter-state 15410

24127

migration

No. out-

5350 59.21

245

3440 38.07 0.14

% of male

2.71 0.01

32.66

26.25

8

4.

100

% of total

0.21

migration

inter-state out-migration

Top districts for

200

0

1200

Home based-89.64%;

1.17

3.58

South West Delhi

South Delhi

North West Delhi

West Delhi

Chandigarh

Daily Injectors -28.17%;Non daily injectors-67.83%

Kothi-NA; Panthi-NA; Double decker-NA

Brothel based-1.45%; Street based-9.11%

21.17 43.00

29.07

83.87

			HIV Le	HIV Levels and Trends ³	rends³					
		2004	2005	2006	2007	2008	5009	2010	2011	
JIN JOH	PP⁴	0.25	0.25	0.12	0	0		0.25		
HSS-AINC	NT₄	400	400	800	800	800		399		
DDICT	Ы		0.05	0.17	0.51	0.59	0.54	0.32	0.19	Size Est.
ורוכו	NT		3644	4109	3710	8740	8445	12560	19466	(Mapping, 2009)
Jaca boola	ЬР	,	0.15	0.21	0.20	0.21	0.18	0.15	0.17	% Total HRG
DIUUU DAIIK	NT		37293	41074	44111	44033	47453	52220	55785	
OLD SOF	Ы	2.01	2.42	0	3.63	2		6.40		% Total Pop.
U15-55H	N	250	250	250	248	250		250		
7401 001	8			1.60		08.0		0		Programme Target
H33-F3W	N			250		250		250		Programme
WSW SH	Ы		-		-	-		-		Coverage
INICINI-CCII	NT		,					-		
1141 3311	Ы		•		30.40	26.80		45.80		Typology
001-881	IN		,		250	250		250		
ole Mala	Ы		1.39	1.02	0.88	0.52	0.41	5.76	6.14	
IC IC INIQIE	NT		1216	5606	4614	9720	11613	12332	12810	% <25 yrs.
ICTC Fomula	Ы		0.93	1.30	0.95	0.50	0.39	3.69	3.54	% Married
IC I C Periodie	IN		1530	1665	3579	8081	6856	10957	11955	
Possespon JIJI	Ы		98.0	1.07	06:0	0.41	0.27	3.01	2.70	
ICIC Reletted	IN		2413	2913	4047	11110	14475	17648	18886	No. episodes treate
ICTC Direct	ЬР		2.33	1.02	0.93	0.68	0.67	10.34	11.91	% Svahilis pos.
Walk-in	N	,	333	1358	4146	8299	6727	5641	5879	
				PLHIV Profile, 2	8					SZ
	% On ART	R	%	% III., Prim. Edu.	% Married	% widowed or divorced	_			FSW TIs
ART (1142)	43		t	46	∞	61				MSM TIs
DLN (NA)										SIT UQI
		Route of	HIV Transn	Route of HIV Transmission, ICTC 2011	2 2011					Comp. TIs
	Hetero-sexual	sexual	Homo- sexual	Blood	Needle/ Syringe	Parent to Child	Unkn	Unknown		ICTCs Total tested ⁵
% of Total (N=1209)) 74.86	98	0.41	2.15	14.97	6.62	0.9	0.99		Blood Banks
			Blod	Block-Level De	Details					STI clinics
No. HRG-FSW	Taluka 1, 1345		•							ART centers
No. HRG-MSM		,	,	,	,			-		Link ART centers
No. HRG-IDU		,								PLHIV Networks
% Positive, ICTC	Ajnala, 1.14	Amritsar, 9.22	Rajya, 8.82	Verka, 1.98		-	,		,	Comm. care centers
% Positive, PPTCT	Ajnala, 0.16	Amritsar,		Verka, 0						Drop-in-centers
		9.0	_							Condom outlets

* Inadequate sample size, - Data not available, 1 2011 Census, 2 Source: DLHS III; 3 Data presented only for years where sample size is valid (HSS-ANC: 300 tested, HSS-HRG/STD: 187 tested, ICTC: 600 tested, PPTCT and BB: 900 tested); 4 PP = percent positive, NT = number tested; 5 General clients and pregnant women

175196

172820

223000

72600

213200

78100

و

2

44231

35849

29647

26541

11903

8380

6390

œ

10

9

4

16

4

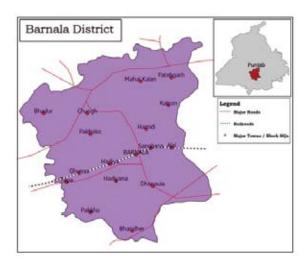
Barnala, Punjab

Background:

Barnala is a centrally located district of the state, bordered by Ludhiana in the North, Moga in North-West, Bathinda in the West, Mansa in the south and Sangrur in the east. It has a population of 5.96 lakhs with a sex ratio of 876 females per 1,000 males, and a female literacy rate of 64.1% with an overall literacy rate of 68.9% (2011 Census). The economy of Barnala district mainly depends on agriculture. There are approximately 159 villages rich in agro products. Barnala is well known for textiles. Due to rapid growth of small scale industries in the district; blocks of Sadar Bazar, Pharwahi Bazar, Handiaya Bazar have become home to laborers from neighboring district. The major highways that pass through Barnala are National highways 7 and 71; also Punjab State Highway 13 passes through the district.

HIV Epidemic Profile:

 Based on 2010 HSS-ANC, and 2011 PPTCT and Blood Bank data, the level of HIV positivity ranged from low to moderate (0.07 – 0.5%), but due to lack of data from previous years, trend analysis was not possible.



- HIV positivity among ICTC attendees increased from 2.8% in 2010 to 7.6% in 2011 among direct walk-in clients showing a high HIV prevalence. Referred clients were at 0.7% in 2011 showing a gradual decrease with low HIV prevalence. Amongst male (2.3%, 2011) and female (1.0%, 2011) ICTC clients HIV prevalence was low, more numbers of females were tested.
- As per mapping conducted in 2009, FSW (640, 47% of total HRG) was the largest HRG in the district, followed by IDU (580, 42.5% of total HRG) and MSM (142, 10.4% of total HRG).
- The syphilis positivity rate among STI clinic attendees in 2011 was 0.71%.
- Migration data was unavailable as the district was recently formed in 2006.
- HIV awareness and RTI/STI awareness rates among women were 85.9% and 60.1% respectively (DLHS-III).
- Of the 46 PLHIV registered at the Anti-Retroviral Therapy (ART) center in 2009, 80% were on ART as of 2011, 89% were illiterate or only had a primary school education, and 93% were widowed or divorced.
- There has been rapid scale-up of ICTCs from 2010 onwards in the district.

- Establish mechanisms for regular tracking of HSS-ANC, PPTCT and Blood Bank data.
- Focus on outreach efforts among FSW, since their presence indicates an opportunity for transmission.
- Since the largest HRG is FSW, better assessment of the size and profile of client populations, including migrants and truckers is desirable.
- Strengthen outreach programmes through awareness campaigns around trucking halt points and highways in the district.
- Introduce HRG sites for HIV sentinel surveillance and carry out further analysis of ICTC/PPTCT and ART data to better understand the dynamics
 of HIV transmission among FSW, MSM and IDU.

District Population: 5,96,294 (2.1% of Punjab Population); Female Literacy!: 64.1%; ANC Utilization²: 57.7%

Intra-district

out-migration

HSS-ANC PP PPTCT NT Blood Bank NT HSS-STD NI PP	2004	H	2005 2006 200	2007	2008	3 2009	2010	2011		HRG Size					Male N	Male Migration, 2001 Census	,
¥							_									,	OI Census
¥		'	╁	╁	┝	\vdash	╁			FSW	MSM	ndı			Overall	Inter-state	Overall Inter-state Intra-state In
¥	,	•	<u>'</u>	Ĺ	'		400		Size Est.	640	142	280		No. out-	,		
¥	-		•		•		0.11	0.07	(Mapping, 2009)					mgration % of			
¥		•			•	-	1857	2827	% Total HRG	46 99	10.43	47 58		i de m	,		
4	,	•	•	<u>'</u>	•	,	0.07	0.09						pop.			
		•	-	-	•		4421	4254						% of			
	- 0	-	-		•				% Total Pop.	0.11	0.02	0.10		total			
		-	-	-	-									migration			
		•	•	<u>'</u>	•				Programme larget					_	op districts	ror inter-stat	lop districts for inter-state out-migration
TN NYC1-CCH		•		'	•				Programme	0	0	0					
		•	-	_	-				Coverage	Home based		Vails					
TN MISIMI-SCH	-	'	'	'	•		,			-NA;	Kothi-NA;	_=					
dd IIdi 33									Typology	Brothel	Panthi-NA;						
TN UUI-SCH		'		'	•					based-NA;	Double		^				
PP PP		•	•	*		3.49	3.87	2.31		Street based- NA	decker-NA	njectors- NA					
IN N	-	'	_	*	758	545	262	995	% <25 vrs								
PP PP	-	-	-	*	2.66	5 2.43	0.85	1.09	% Married								
NT NT	-	•	-	*	413	742	1295	1927		STI/RTI	III						
Pp Pp	-	-	-	*	2.99	1.95	1.27	0.77		2008	2009	2010	2011				
		'	'	*	335		1262	2609	No. episodes	c	c	1166	2816				
ICTC Direct PP	'	'	•	*	1.91	3.31	2.87	7.67	treated	,	,	2	2				
alk-in NT		•	-	*	836	876	879	313	% Syphilis pos.			0.81	0.71				
-		- B	PLHIV Profile, 2009	le, 2009							-	Prog	Programme Response	sponse			-
	TO 4 O	%	% III.,	%	% widowed or	wed or			No.	2004	2005	2006	2007	2008	5009	2010	2011
,	% UNAKI	15-24	Prim. Edu.	lu. Married	-	peo			FSW TIS		-						
ART (46)	8	0	8	15	93	00			MSMTIs								
DLN (NA)				•					IDU TIS		-		-	-			
	Route of	e of HIV Tran	HIV Transmission, ICTC 2011	CTC 2011					Comp. IIS							_ -	
	Hotoro, coviial	Homo-	Blood	Needle/	ă		Introven		Total tectods				- 101	- 121	1307	777.0	5740
		sexnal		Syringe	Child				Dlood Banks	-	-	-	ţ -	-	107	÷ -	4,0
% of Total (N=44)	45.45	4.55	6.82	0	0		43.18		TI aliaisa	1	1	-	-		- (-	- -
		В	Block-Level Details	Details					APT contors		+			-	7	7	7
No. HRG-FSW	•				•				Link ADT contour		1			1			
No. HRG-MSM	•	-	-	_	•				PI HIV Networks							-	-
No. HRG-IDU	•	•			•	•	,		Red ribbon clubs				5				
% Positive, ICTC					_			,	Comm. care								
600	•	'	'	<u> </u>					centers								
% Positive, PPTCT	'					,	,	,	Drop-in-centers		•		-	-			
600				-					Condom outlets							1744	5376

* Inadequate sample size; - Data not available; ' 2011 Census; 2 Source: DLHS III; 3 Data presented only for years where sample size is valid (HSS-ANC: 300 tested, HSS-HRG/STD: 187 tested, ICTC: 600 tested, PPTCT and BB: 900 tested); 4PP = percent positive, NT = number tested; 5 General clients and pregnant women

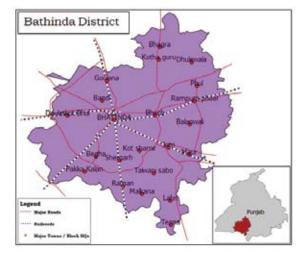
Bathinda, Punjab

Background:

Bathinda District is situated in the southern part of Punjab in the heart of Malwa region. It has a population of 13.89 lakhs with a sex ratio of 865 females per 1,000 males, and a female literacy rate of 69.57% with an overall literacy rate of 61.5% (2011 Census). Bathinda has one of the biggest food-grain and cotton markets in India and it also boasts of rapid development in industrialization with establishment of thermal power plants and a large oil refinery that are boosting the city's economic growth. The major highways that pass through Bathinda are National Highways 15 and 64.

HIV Epidemic Profile:

- Based on 2011 PPTCT and Blood Bank data, the level of HIV positivity was low (0.11 - 0.17%), but due to non-availability of data, trend analysis was not possible.
- Based on 2010 HSS-FSW and HSS-MSM data, the level of HIV
 positivity was low (FSW-0.80%, MSM-3.48%), but due to nonavailability of more robust data, trend analysis was not possible.



- However, HIV positivity among 2011 ICTC attendees provided a warning signal, with direct walk-in clients showing a high prevalence at 7%, gradually higher levels were observed each successive year since 2009, and HIV positivity was low among referred (2.42%) clients. HIV prevalence was low among male (4%) and female (2.44%) clients, positivity was at lower levels, but overall, the values have been higher each year.
- As per mapping conducted in 2009, FSW (810, 48.5% of total HRG) was the largest HRG in the district, followed by IDU (560, 33.5% of total HRG) and MSM (300, 17.9% of total HRG); of the FSW,100% of them were home-based.
- Syphilis positivity rate among STI clinic attendees in 2011 was 0.61%, down from 2.4% in 2010.
- As per the 2001Census, 4.9% of the male population were migrants; 36.3% of them migrated to other states and 30.12% migrated to other districts within the state.
- The top two destinations for out-of-state migration were Sirsa in Haryana and Ganganagar in Rajasthan.
- HIV awareness and RTI/STI awareness rates among women were 92.1% and 83.2% respectively (DLHS-III).
- Of the 120 PLHIV registered at the Anti-Retroviral Therapy (ART) centre in 2009, 11% were 15-24 years of age, 14% were on ART, 15% were illiterate or only had a primary school education, and 29% were married.
- There has been rapid scale-up of ICTCs from 2010 onwards with corresponding increase in number of clients undergoing HIV testing at these sites.
- Despite large number of home-based FSWs present in the district, there were no FSW Tls.

- Need to initiate HIV Sentinel Surveillance (HSS) for ANC and develop mechanisms for regular monitoring of PPTCT and Blood Bank data
- Focus on outreach efforts on hard-to-reach sub-groups, such as home-based FSW.
- Strengthen outreach programme through awareness campaigns around trucking halt points and highways in the district.
- Better understand the dynamics of HIV transmission among FSW, MSM and IDU, either through initiation and regularization of HRG sites for HSS or further analysis of ICTC/PPTCT and ART data.
- Since the largest HRG is FSW, better assessment of the size and profile of client populations, including migrants and truckers, will provide better insights into district vulnerabilities.
- Understand migration patterns from in-district industries and/or agricultural occupation and explore its possible contribution fueling the
 epidemic.

1934

4996

2011

2010

2009

Mumbai (Suburban), Maharashtra

Chandigarh

Hanumangarh, Rajasthan

> Ganganagar, Rajasthan

Top districts for inter-state out-migration

30.12

36.37

1.50

1.8

100

Inter-state Intra-state Intra-district

Overall 31576

Male Migration, 2001 Census

1.67

9512

11484

Bathinda, Punjab

/ulnerabilities			No. out-	migration	olcm to %	70 OI III die	% of total	migration							\sim	Haryana Ra									ne Response	2008			-	3178	2 2	2				6		Ī
Vulne									_		1											2011	5925	0.61	Ę	2007			-	7186	202	2						İ
		ndi	i	260		33.53		0.04				>	Daily	Injectors	-NA;	Non daily	injectors-	Y.			-	2010	2238	2.48	-	2006		-		- 637	77 ~	2		,				+
		MSM	0	300		17.96		0.02			000	7007	Kothi	-44.83%;	75.81%.	Double Double	decker-	9.36%	37.44	52.71	-	2009 2	4031 2	8.74		2005 2		١.		735	+	2		-				
	HRG Size	FSW		810		48.50		90.0			0	900	Home based	-100%;	Brothel	based-0%;	Street	0/n-paspg	7.59	96.70	돠	2008	3547 4	25.22	╢	2004					2	2						_
			Size Est.	(Mapping,	7003)	% Total HRG		% Total Pop.	Programme	Target	Programme	Coverage			Typology				% <25 yrs.	% Married			No. episodes	"Fateu % Synhilis nos.		No.	PSW IIS	DUTIS	Comp. Tls	ICTCs Total tectod5	Blood Banks	STI clinics	ART centers	Link ART centers	PLHIV Networks	red ribbon clubs	Comm. care centers	2.00
	2011			0.17	7619	0.11	22209									4.01	3841	2.44	4054	2.42	0959	7.04	1335															
	2010			0.20	6105	0.10	17579	0.40	250	0.80	250	3.48	201			2.52	3377	1.39	2452	1.42	4859	5.15	970						w	T			_					
	5009															3.10	2612	1.97	2384	2.36	3181	2.92	1815	-	_	_			Unknown	1.98			-	•	-			
	2008							0.80	250							3.89	1647	5.09	1531	2.90	1070	3.08	2108		% widowed or	18			Parent to	4.35		l	_		-			
ends ³	2007							08.0	250							3	1468	3.06	718	1.98	1008	3.90	1178		% % Warring	29 Z9		2011	Needle/	2.37	ails				,			
HIV Levels and Trends	2006							0	250							4.26	399	6.01	233	3.22	373	7.34	259	PLHIV Profile, 21	% III., Prim. Edu.			Route of HIV Transmission, ICTC 2011	Ž	\dagger	evel De		_				,	
HIV Lev																7				,		-		PLHIV	% III., Pr	15	Ľ	IV Transmis	Blood	0.79	Block		_			Talwandi Sabho,	2.35	
	2005	'		'	•	'	'	0	250		,	1		'	•	*	*	*	*	*	*	*	*		%1	11		Route of H	Homo-	0.79		L						- H
	2004			,				0.40	250						•				'				-		% On ART	14			Hetero-sexual	89.72				,	•	~	pula, 1.13	
		₽₽	NT⁴	Ы	Z	Ы	F	Ы	Z	Ы	F	В	N	Ы	N	ЬР	N	Ы	Þ	Ы	IN	Ы	IN		% O				Heter			Taluka 1,	817		,	Bathinda,	3.38	
		0144 0011	HSS-AINC	TOTAL	rrici	, land	Blood Bank	d d	UIS-SSH	74100 0011	HSS-FSW	PASPA SSH	MSS-IMSIMI	1141 3311	UZI-SCH	oleM JIJI	IC IC Male	ICTC Female	2012	ICTC Referred	ורור מפובוובת	ICTC Direct	Walk-in			ART (120)	DLN (NA)			% of Total (N=253)		Wor John elv	NO. HRG-F3VV	No. HRG-MSM	No. HRG-IDU	% Positive,	ICTC 2009	

*Inadequate sample size; - Data not available; 2011 Census; 2 Source: DLHS III; 3 Data presented only for years where sample size is valid (HSS-ANC: 300 tested, HSS-HRG/STD: 187 tested, ICTC: 600 tested, PPTCT and BB: 900 tested); *PP = percent positive, NT = number tested; 5 General clients and pregnant women

15950

47821

Faridkot, Punjab

Background:

Faridkot District lies in south west of the state and is surrounded by Firozpur in the North-West, Moga and Ludhiana in the North-East and by Bathinda and Sangrur in the South. It has a population of 6.18 lakhs with a sex ratio of 889 females per 1,000 males, a female literacy rate of 64.8% and an overall literacy rate of 70.6% (2011 Census). The economy of Faridkot district mainly depends on agriculture and approximately 89% of the land is being used for agriculture. Also Faridkot is one of the major cotton markets in Asia. Therefore the district attracts in-migration for labour work, from rural pockets of neighboring districts. The major highway that passes through Faridkot is National Highway 15.

HIV Epidemic Profile:

- Based on 2010 HSS-ANC (included for the first time in 2010), and 2011 PPTCT and Blood Bank data, the level of HIV positivity was low (0.19%-0.25%), but due to lack of longitudinal data, a trend could not be determined.
- Faridkot District

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 Distric
- HIV positivity among ICTC attendees has been increasing since 2008, among direct walk-in (12.2%, 2011), and was low among referred
 (1.1%, 2011) clients. Male positivity (2.7%, 2011) was at a low level while female positivity level (1.6%, 2011) had been consistently
 declining since 2007.
- As per mapping conducted in 2009, FSW (1010, 72.4% of total HRG) was the largest HRG in the district, followed by MSM (235, 16.8% of total HRG) and IDU (150, 10.7% of total HRG).
- Syphilis positivity rate among STI clinic attendees in 2011 was 0.64%.
- As per the 2001 Census, 4.5% of the male population were migrants; 32.5% of them migrated to other states and 46.6% migrated within
 the state to other districts.
- The top two destinations for out-of-state migration were Ganganagar, Rajasthan and Sirsa, Haryana.
- HIV awareness and RTI/STI awareness rates among women were 93.4% and 82.8% respectively (DLHS-III).
- Of the 184 PLHIV registered at the Anti-Retroviral Therapy (ART) centre in 2009, 7% were 15-24 years of age, 67% were on ART, 70% were illiterate or only had a primary school education, and 79% were widowed or divorced.
- There has been a gradual scale-up of ICTCs from 2008 onwards in the district.
- Though there were a large number of FSWs in the district, there was no FSW TI in operation.

- Need to establish mechanism for regular monitoring HSS-ANC, PPTCT and Blood Bank data.
- Considering large number of FSWs in the district, and high prevalence among direct walk-in clients, establish TI sites and increase Programme
 coverage.
- · Strengthen outreach programmes through awareness campaigns around trucking halt points and highways that run through the district.
- There is a need to better understand the dynamics of HIV transmission among the high risk groups. Further analysis of risk profile of those infected, through ICTC/PPTCT and ART data and or initiation of HRG sites in HSS would be helpful.
- Improve understanding of district vulnerabilities by assessing the size and profile of migrants and truckers, who are the client population for the FSWs that are present in large numbers in the district.

2010

2009

2008

2007

2005

2004

3360

2.85

1572

1278

2011

2010

2009

2008

9812

9609

3188

2228

2230

200

479

Faridkot, Punjab

	ion ² : 71.3%	
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	ΙŻ	
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	; Female Literacy¹: 64.8%; ANC Utilization	
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	2.2% of Punjab Population)	
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Intradistrict

Intrastate 6246

Inter-state

Overall 13390

2

MSM

1010 72.40 0.16

HRG Size

235

Male Migration, 2001 Census

2791

1.48

No. outmigration % of male 20.84

46.65

100

pop. % of total migration

0.02

0

0

0

2.13

4.56

150

16.85

Top districts for inter-state out-migration

North west Delhi

Chandigarh

Hunmanngarh, Rajasthan

Sirsa, Haryana

Ganganagar, Rajasthan

Injectors -NA; Non daily injectors-

> NA; Double decker-

Home based-NA; Brothel based-NA; Street based-NA

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HIV Levels and Trends ³			HIV	IIV Levels and Trends ³	Trends ³					
		2004	2005	2006	2007	2008	2009	2010	2011	
0144 0311	₽b₽							0.25		
HSS-ANC	NT⁴							400		
TOTAL	Ы		,	,	,		,	0:30	0.19	Size Est.
7	IN						-	1957	3683	(Mapping, 2009)
Diocal Bank	dd					-	-	80.0	0.22	% Total HRG
DIOUG BAIIK	IN	-	-			-	-	8810	11151	
OLD SOFT	ЬР									% Total Pop.
U15-56H	IN									
חכם בניייי	ЬР	-	-			-		-		Programme Target
N33-L3VV	IN					-				Programme
HCC.MCM.	Ы									Coverage
INCINI-CCI	N									
101	Ы									Tynology
U01-66H	IN									(Royal)
ICTC Male	dd	-	*	10.37	4.60	2.85	3.24	2.99	2.73	
ICIC Male	N		*	347	1303	1441	1978	2341	2891	
ICTC Fomolo	Ы		*	7.37	4.85	3.18	2.81	2.11	1.67	% <25 yrs.
ורור בפוומופ	N		*	353	927	787	1210	1798	3238	% Married
CTC Bafarrad	dd		*	5.25	2.84	2.05	2.24	1.47	1.15	
ורור עפופוופת	IN	-	*	400	1164	1219	2452	3340	2925	
ICTC Direct	ЬР	-	*	13.67	6.75	4.06	5.84	7.38	12.28	No. episodes
Walk-in	M		*	300	1066	1009	736	799	562	treated
			PLH	HIV Profile, 2009	, 2009					% Syphilis pos.
	% On ART	4RT	% 15-24	% III., Prim. Edu.	% Married	% widowed or divorced	lor			No.
ART (184)	29		7	70	13	79	Γ			FSW TIS
DLN (NA)										MSM TIs
		Route	of HIV Tran	Route of HIV Transmission, ICTC 2011	TC 2011					IDU TIs
	Hetero	Hetero-sexual	Homo- sexual	Blood	Needle/ Svringe	Parent to Child	Unkr	Unknown		Comp. TIS
% of Total (N=108)	.89	68.42	2.26	2.26	6.77	3.76	16	16.54		Total tested ⁵
			BI	Block-Level Details	Details					Blood Banks
No. HRG-FSW	-									STI clinics
No. HRG-MSM			,	,					,	ART centers
No. HRG-IDU			,			,				LINK ARI centers PLHIV Networks
% Positive, ICTC	Faridkot,	,	,				-			Red ribbon clubs
% Positive, PPTCT	Faridkot,									Drop-in-centers
2009	0.13									Condom outlets

* Inadequate sample size; - Data not available; 1 2011 Census; 2 Source: DLHS III; 3 Data presented only for years where sample size is valid (HSS-ANC: 300 tested, HSS-HRG/STD: 187 tested, ICTC: 600 tested, PPTCT and BB: 900 tested); 4 PP = percent positive, NT = number tested; 5 General clients and pregnant women

41900

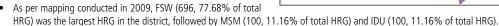
Fatehgarh Sahib, Punjab

Background:

Fatehgarh Sahib district is located in southeastern part of Punjab state. It has a population of 5.99 lakhs with a sex ratio of 871 females per 1,000 males, and a female literacy rate of 75.5% with an overall literacy rate of 80.3% (2011 Census). The economy of Fatehgarh district mainly depends on agriculture.

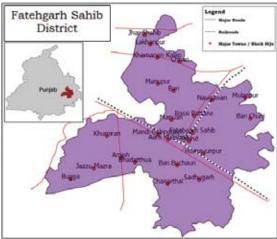
HIV Epidemic Profile:

- Based on 2011 PPTCT and Blood Bank data, the level of HIV
 positivity was low (≤ 0.3%), but due to lack of data from
 preceding years, a trend could not be determined.
- HIV positivity among ICTC attendees was at a moderate level among direct walk-in (7.2%, 2011) and low among referred (1.15%) clients. It was also low among male (2.69%, 2011) and female (1.98%, 2011) clients. Overall, there was a stable to rising trend among all clients.



- Syphilis positivity rate among STI clinic attendees in 2011 was 0.9%.
- As per the 2001 Census, 6.2% of the male population were migrants; 50% of these migrated to other states and 30.36% migrated to other districts within the state.
- The top two destinations for out-of-state migration were Bilaspur in Himachal Pradesh and Jammu in Jammu and Kashmir.
- HIV awareness and RTI/STI awareness rates among women were 80.1% and 36.3% respectively (DLHS-III).
- Of the 90 PLHIV registered at the Anti-retroviral treatment (ART) centre in 2009, 61% were on ART, 79% were illiterate or only had a primary school education, and 82% were married.
- There was a scale-up in the number of ICTCs from two to six in 2011.

- Focus on interventions such as outreach with FSW through targeted interventions.
- · Strengthen outreach programmes through awareness campaigns around trucking halt points and highways in the district.
- There is a need to better understand the trend of HIV transmission among FSW, MSM and IDU, since vulnerable populations are experiencing a steady increase in positivity rates. Further analysis of ICTC/PPTCT and ART data would be helpful and initiation of HRG sites for HIV Sentinel Surveillance (HSS) could provide a much needed trend.
- Since the largest HRG is FSW, better assessment of the size and profile of client populations, including migrants and truckers, will give better
 insights into district vulnerabilities.



2010

2009

2008

2007

3375

2010 1702 0.14 Pro 2006 5953

4973

2554

1618

1553

457

9

Solan, Himachal Pradesh

Shimla, Himachal Pradesh

Chandigarh

Bilaspur, Himachal Pradesh

Daily Injectors -NA; Non daily injectors-

¥

100

and Kashmir

Jammu, Jammu

19.45

30.36

50.19

100

% of total

0.02

pop.

11.16

migration

1.91

3.15

9184

18300

No. outmigration % of male Top districts for inter-state out-migration

Intradistrict 3560 1.22

Intrastate 5556

Inter-state

Overall

3

Male Migration, 2001 Census

Fatehgarh Sahib, Punjab

District Population: 5,99,814 (2.2% of Punjab Population); Female Literacyl: 75.5%; ANC Utilization²: 62.2%

(4)	8 2009 2010 2011 HRG Size		FSW	- 0.21 0.13 Size Est.	3033 (Mapping, 2009)	- 0.56 0.30 % Total HBC - 0.368			70 I Otal PUp. U. 12	- Programme	. Target	Programme 300	Coverage	Home based		2 1.50 2.34 2.69 Hypology Brounel based-	1731 1324 1559 Stree	0.97 1.07 1.98	9 823 1210 1361 % <25 vrs.	1.40 1.08 1.15	1567 1853 2342	5 1.22 3.52 7.27	987 681 578 No anicodes treated	% Surphilis pos	rod children	No. 2004	FSWTIs	- MSM TIs		d Unknown Comp. TIs	0 0 ICTCs		Total tested ⁵	rd ⁵		S.a.	lers rks		SIS SIS
nds³	2007 2008	-		-	-		-									2.66 1.22	865 1309	2.14 3.24	688 309	4.05 2.78	592 288	4.06 1.35	961 1330		% widowed or Married divorced	L		011	/6 B	a)	4.35 8.70		ils	sii -	si:	si:	<u>.</u>	si	si
HIV Levels and Trends ³	2006															*	*	*	*	*	*	*	*	V Profile, 2	% III., Prim. Edu.	+-		Route of HIV Transmission, ICTC 2011	N Ne	Sy	0	L. I. amel Date	BIOCK-LEVEI DETAILS	k-Level Deta			K-Level Deta	K-Level Deta	
HIVI	2005			-	-											*	*	*	*	*	*	*	*	PLHI	% 15-24	0		f HIV Transm	-	HOITIO-SEXUAL	0	Bloc							
	2004				-				,								-			-								Route c		\dashv	9						Mandi	Mandi- gobindgarh,	Mandi- 0.86
		bb⁴	NT⁴	ЬР	NT	Ь	IN	Ы	F	Ы	F	ď	F	ЬР	N	ЬР	NT	Ы	NT	ЬР	IN	Ы	TN		% On ART	61			Поточен	netero-sexual	96.98						- - - Eatehoarh	- - - Fatehgarh sahib, 1.71	
		0144	HSS-AINC			Jacob Poole	DIOOU DAILK	d H	U15-55H	74100	WS1-SSH	100 MCM	IVICIVI-CCL	1101 001	001-881	-I-W-I-	CI C IMAIR	al come I OIL		CTC Doforcod		ICTC Direct	Walk-in			ART (90)	DLN (NA)				% of Total (N=69)		No. HRG-FSW		No. HRG-MSM	No. HRG-MSM No. HRG-IDU			U

* inadequate sample size; - Data not available; ' 2011 Census; ' Source: DLHS III; ³ Data presented only for years where sample size is valid (HSS-ANC: 300 tested, HSS-HRG/STD: 187 tested, ICTC: 600 tested, PPTCT and BB: 900 tested); * PP = percent positive, NT = number tested; ³ General clients and pregnant women

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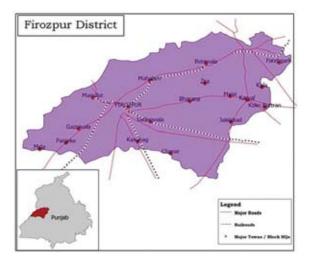
Firozpur, Punjab

Background:

Firozpur district forms a part of Sutlej sub basin of main Indus basin; it lies in the south western most region of the state. It has a population of 20.26 lakhs with a sex ratio of 893 females per 1,000 males, and a female literacy rate of 62.2% with an overall literacy rate of 69.8% (2011 Census). Firozpur is the biggest district of Punjab state and its economy mainly depends on agriculture. Being a border district with Pakistan, Firozpur is devoid of industrial growth. The major highway that passes through Firozpur is National Highway 95.

HIV Epidemic Profile:

- Based on 2010 HSS-ANC, and 2011 PPTCT and Blood Bank data, the level of HIV positivity was low (<0.13%), and due to non-availability of previous years' data, trend analysis was not possible.
- HIV positivity among ICTC attendees in 2011 was low among direct walk-in (3.6%) and referred (1.79%) clients, as well as male (4.1%) and female (1.1%) clients, with overall declining levels.



- As per mapping conducted in 2009, FSW (1970, 50.9% of total HRG) was the largest HRG in the district, followed by MSM (995, 25.7% of total HRG) and IDU (900, 23.2% of total HRG); of the FSW, 100% were home-based.
- Syphilis positivity rate among STI clinic attendees in 2011 was 1.85%.
- As per the 2001 Census, 4.4% of the male population were migrants; 39.8% of them migrated to other states and 24.20% migrated to other districts within the state.
- The top two destinations for out-of-state migration were Ganga Nagar in Rajasthan and Sirsa in Haryana.
- HIV awareness and RTI/STI awareness rates among women were 93.4% and 77.8%, respectively (DLHS-III).
- There has been a rapid scale-up of ICTCs from 2008 onwards with corresponding increase in number of clients undergoing HIV testing at these sites.
- Though there were a good number of MSMs mapped in the district, there were no TI exclusively for MSMs.

- Focus on outreach efforts on hard-to-reach sub-groups, such as home-based FSW.
- Strengthen outreach programmes through awareness campaigns around trucking halt points and highways in the district.
- There is a need to better understand the dynamics of HIV transmission among FSW, MSM and IDU, either through initiation of HRG sites for HIV Sentinel Surveillance (HSS) or further analysis of ICTC/PPTCT and ART data.
- Considering the large number of MSMs in the district, a MSM-TI may be initiated.
- Since the largest HRG is FSW, better assessment of the size and profile of client populations, including migrants and truckers, will improve
 understanding of district vulnerabilities.

Bikaner, Rajasthan

Chandigarh

Hanumangarh, Rajasthan

Sirsa, Hanyana

Ganga-nagar, Rajasthan

Daily Injectors -68.06%; Non daily injectors-13.09%

200

Intra-district 14650

Intra-state

Inter-state

Overall 40735

2 995

16229

No. out-migration % of male

Male Migration, 2001 Census

35.96

24.20

39.84

100 4.40

% of total migration

.dod

25.74 0.05

1.06

Top districts for inter-state out-migration

Firozpur, Punjab

District Population: 20,26,831 (7.3% of Punjab Population); Female Literacy': 62.2%; ANC Utilization²: 71.2%

			MSM		000		23.29		0.04	-			100	Vothi - 20%	Panthi-	8.57%;	Double	decker-	30.48	60.95		20	15	4	5.7	20				_			+				4		_
		Size	Σ		0	,	2,5	4	C	•				+					+)9	STI/RTI	2009	1256		2.34	2005		٠			-	320	4 (7 .				1	
		HRG Size	FSW		1970	200	50 97	70:00	0 10	5			800	Homo hasod	-100%;	Brothel	based-0%;	Street	42.38	46.43		2008	1444		2.77	2004	-	-			_		4 0	7					
					Size Est.	(Mapping, 2009)	% Total HRG	Digital 1970	% Total Pon		Programme	Target	Programme	Coverage		Typology			% <75 vrs.	% Married			No. episodes	treated	% Syphilis pos.	No.	FSW TIs	MSM TIs	IDU TIS	Comp. Tls	ICTG	Total tested ⁵	Blood Banks	ART centers	Link ART centers	PLHIV Networks	Red ribbon clubs	Comm. care centers	Dron-in-centers
		2011			0.13	2798	0.05	3881									4.05	1508	2201	1.79	2732	3.56	1067											T					
/J.7%		2010	0	314	0.02	5138	0.11	98036									2.20	3143	32.48	1.11	3957	2.83	2434						9	I AAAI	2								
Utilization:		5000															2.76	3513	1.91	1.16	3266	4.17	2398		or	_			aw.coa/all		1.15								
7.7%; ANC		2008												-			2.39	2766	1039	131	2065	4.02	1740		% widowed or divorced				Parent to	Child	8.05								
Literacy:: o	Trends ³	2007												-			6.75	489	53.4	2.27	309	4.89	614	2009	% Married			C 2011	Needle/	yringe	13.79	etails							
on); remaie	Levels and	2006												-			69.9	299	3.71	2.65	226	80.9	477	IV Profile,	% Ⅲ., Prim. Edu.			nission, ICT	A Poola	\dashv	9.20	Slock-Level Details			,			Zira, 2 53	1
Jab Populati		2005												-			*	*	*	*	*	*	*	PLH	% 15-24 P		-	Route of HIV Transmission, ICTC 201	Homo-	\dashv	0							Ferozepur,	3
.3% OT Pun		2004							,				,	-				-					-					Route c	lettore code	+	67.82		Taluka 1,			_	300	Fazilka, 0.91	2:5
0,20,831(/			PP4	<u> </u>	ЬР	N	Ы	IN	Ы	IN	Ы	N	Ы	NT	ЬР	Ę	<u>a</u>	Į.	AT IN	dd	Z	&	NT		% On ART	'	_		Lototo I	ובנבוס	29		Taluka 1,	nnc	laluka 1, 105	Taluka	1, 82	Abohar, 4 77	
District Population: ∠U, ∠b, 83 i (7.3% of Punjab Population); Female Literacy': b∠∠%; AINC Utilization÷: 71∠%			HSS-ANC		DDTCT		Jacob Contract	Blood Bank	OES SEE	U15-88H	100 001	HSS-FSW	NSW SSI	MSN-KSI	IIUI-SSH		ICTC Male		ICTC Female		ICTC Referred	ICTC Direct	Walk-in			ART (NA)	DLN (NA)				% of Total (N=87)		No. HRG-FSW		No. HRG-MSM		No. HKG-IDU	% Positive, ICTC	

* Inadequate sample size; - Data not available; 1 2011 Census; 2 Source: DLHS III; 3 Data presented only for years where sample size is valid (HSS-ANC: 300 tested, HSS-HRG/STD: 187 tested, ICTC: 600 tested, PPTCT and BB: 900 tested); 4 PP = percent positive, NT = number tested; 5 General clients and pregnant women

62550

09579

59315

2000

6597

11529

5664

3805

1023

703 4

2011

2010

2009

2008

2007

2006

2836 1.85

1583

2011

2010

61.78

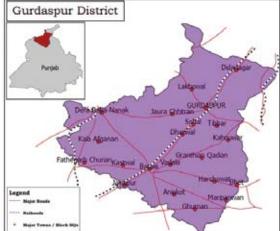
Gurdaspur, Punjab

Background:

Gurdaspur district lies between river Ravi and Beas; it is situated in the northern most part of the state and falls under Jalandhar division. It has a population of 22.99 lakhs with a sex ratio of 895 females per 1,000 males, and a female literacy rate of 75.7% with an overall literacy rate of 81.1% (2011 Census). Agriculture is vital to the district's economy and industry is mainly centered near Batala which is the commercial capital of the district and has attracted in migrants, from the rural pockets of neighboring districts. The major highways that pass through Gurdaspurare National Highways 11 and 15.

HIV Epidemic Profile:

- Based on 2011 PPTCT and Blood Bank data, the level of HIV positivity was low (0.08%-0.27%) but due to lack of previous years' data, it was not possible to determine the trend in the district.
- Based on 2010 HSS-FSW and HSS-MSM data, the prevalence was low (≤1.02%) among both HRGs, however one year's data was not sufficient for one to conclude that the infection will continue to remain at that level.



- HIV positivity among 2011 ICTC direct walk-in clients was moderate (5.8% in 2010 to 8.1% in 2011), although there were much fewer people tested in 2011. Positivity among referred clients (1.9%, 2011) was showing a declining trend at low levels. Male ICTC attendees had moderate levels though they had a higher positivity (5.7%, 2011) than females (1.5%, 2011) who were seeing a declining positivity.
- As per mapping conducted in 2009, FSW (3870, 51.6% of total HRG) was the largest HRG in the district, followed by IDU (2890, 38.5% of total HRG) and MSM (735, 9.8% of total HRG); Importantly, 100% of FSW are home-based, making them a hard-to-reach population.
- Syphilis positivity rate among STI clinic attendees in 2011 was 0.75%.
- As per the 2001 Census, 4.8% of the male population were migrants; 37.6% of them migrated to other states and 27.25% migrated to other districts within the state.
- The top two out-of-state migration destination districts were Kangra in Himachal Pradesh and Chandigarh.
- HIV awareness and RTI/STI awareness rates among women were 88.1% and 50.8% respectively (DLHS-III).
- Of the 707 PLHIV registered at the Anti-Retroviral Therapy (ART) centre in 2009, 12% were 15-24 years of age, 42% were on ART, 45% were illiterate or only had a primary school education, and 67% were widowed or divorced.

- Considering the large number of FSWs and IDUs that are present in the district, only 1 FSW, 2 composite, and 2 IDU TI sites are insufficient. Also, coverage rates of TIs are very low, pointing to the need for a renewed focus on HRGs. Need to focus on outreach efforts on hard-to-reach sub-groups, such as home-based FSW.
- Strengthen outreach programmes through awareness campaigns targeting trucking halt points and highways in the district.
- Considering large number of IDUs in the district, there is a need to better understand the dynamics of HIV transmission among IDU, either through initiation of HSS-IDU sites or further analysis of ICTC/PPTCT and ART data.
- Since the largest HRG is FSW, better assessment of the size and profile of client populations is necessary, and a close eye should be kept on the direct walk-in clients' positivity rates to gauge the severity of transmission.

2010

2009

19917

15618

6345

12

9

Chamb, Himachal Pradesh

> West Delhi

Jammu, Jammu and Kashmir

Chandigarh

district 18715

Intra-

Intrastate 14515

Inter-

Overall 53260

state

Male Migration, 2001 Census

35.14

27.25

37.61

op districts for inter-state out-migration

1.69

1.31

1.80

100

20030

Gurdaspur, Punjab

District Population: 22,99,026 (8.2% of Punjab Population); Female Literacy': 75.7%; ANC Utilization²: 63.9%

			2		501102										
		2004	2002	2006	2007	2008	2009	2010	2011		HRG Size	ze			
HSS-ANC	PP⁴										EC1A/	AACAA	2		
	NT⁴				,						1300	IVICIVI	001		
PPTCT	윤							0.27	0.27	Size Est.	07.00	73E	0000	_	No. out-
-	N							7370	11740	(Mapping, 2009)	20/00	(2)	7090	_	migration
Rlood Bank	윤							0.07	0.08	% Total UBC	51.63	000	20 55		% of male
DIOCU DAIIN	NT	-						17514	6479	70 IOLAI IING	01.00	o o	20.30	_	pop.
GE 231	ЬР	-		-						H		· ·			% of total
HSS-SID	Z									% lotal Pop.	0.1/	0.03	0.13		migration
78102 001	ď							0		Programme					
HSS-FSW	Z	,			,			250		Target					
9 40 9 4 00 1	윤							1.02		Programme	0001	011	017		
MSS-IVISIVI	N	,						196		Coverage	0001	nc.	420		
4	&										Home based	Vo+bi E1 630/-	-		
HSS-IDU	N	,									-100%;				Kang
- T- P 4 - 1-	&		*	*	7.83	5.39	5.23	6.79	5.70	Typology	Brothel	42.48%;	-62.77%;		Himachal
ICIC Male	N		*	*	613	2299	3152	3959	3370		based-0%;	Double decker-	Non dally		Pradesh
ICTC Fomala	ЬР	-	*	*	5.41	5.65	3.85	3.31	1.56		hased-0%	5.23%			
ICIC I ciliale	NT	-	*	*	813	1804	3193	4289	4807	% / 75 vrc	30.78	65 13	36 90	_	
ICTC Doforrod	Ы	-	*	*	5.85	5.99	3.14	4.49	1.93	0/- Marriod	00.00	27.72	20.55		
ICIC Nelelled	NT	-	*	*	650	2019	4107	5118	6419	/o Mailled		77.77	20.10		
ICTC Direct	ЬР		*	*	8.14	5.04	5.63	5.78	8.13		2000	000	ŀ		
Walk-in	N	-	*	*	1523	2084	2238	3130	1758		1	+	†	1107	
			PLHIV	/ Profile, 2	6002					No. episodes treated	4	1919	1	4621	
	% On ART	L	7 15-24	% III.,	%	% widowed or	or			% Syphilis pos.	7.69		90:0	0.75	
		4		Prim. Edu.	Married	divorced	_						Programme Response	ne Resp	ouse
ART (707)	42	0:	12	45	9	29	\neg			No.	2004	2005 2	5006	2007	2008
DLN (NA)			,							FSWTIs					
		Route of	Route of HIV Transmission, ICTC 2011	ssion, ICTC	2011					MSM TIs	-	-			
	Hetero	Hetero-sexual Hom	Homo-sexual E	Blood	Needle/	Parent to	_	Unknown		IDU TIS	-	-			
(C) C [W] C+CT	†	-	-	+	Syringe	Child		63		Comp. TIs	-	-	1	2	2
% OI IOIGI (IV=26)	+	1	•		24.34 Dotaile	7.17	Ċ	70		ICTG	1	1	1	2	3
			DIDCK		Idilis	L				Total tested ⁵		155	403	1426	4103
No. HRG-FSW	1 aluka 1,							,		Blood Banks	4	4	4	4	4
	17,									STI clinics	2	2	2	2	7
No. HRG-MSM	15.7									ART centers	-	-	-		
	Tolinka 1									Link ART centers	-	-	-	-	Ė
No. HRG-IDU	780 I,	Taluka 1, 158								PLHIV Networks			-		Ċ
	Clot-cl		Postponico+							Red ribbon clubs			4	m	∞
% Positive, ICTC	3.68	Guldaspui, 6.62	3.13		,					Comm. care centers					Ĺ
	Batala	Gurdaspur	Ъ							Drop-in-centers		-	-		
% Positive PPTCT	, parair,	'indepnie	_												

* Inadequate sample size; - Data not available; 1 2011 Census; 2 Source: DLHS III; 3 Data presented only for years where sample size is valid (HSS-ANC: 300 tested, HSS-HRG/STD: 187 tested, ICTC: 600 tested, PPTCT and BB: 900 tested); *PP = percent positive, NT = number tested; 5 General clients and pregnant women

43930 56703

53670

12

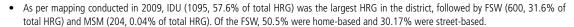
Hoshiarpur, Punjab

Background:

Hoshiarpur district falls in the eastern part of the State. It has a population of 15.82 lakhs with a sex ratio of 962 females per 1,000 males, and a female literacy rate of 80.8% with an overall rate of 85.4% (2011 Census). The economy of Hoshiarpur district mainly depends on agriculture. Cotton fabrics are also manufactured, and sugar, rice and other grains, tobacco and indigo are among the exports from the district. The major highway that passes through Hoshiarpur is National Highway 1A.

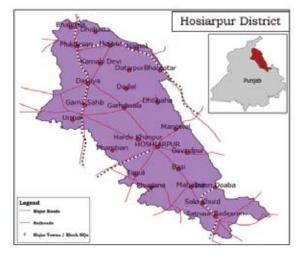
HIV Epidemic Profile:

- Based on 2010 HSS-ANC, and 2011 PPTCT and Blood Bank data, the level of HIV positivity ranged from low to moderate (0.09 – 0.47%), but due to lack of previous years' data, a trend could not be determined.
- Based on 2010 HSS data, HIV prevalence among FSW was low.
 Positivity among ICTC attendees was moderate among direct walk-in (5.6%, 2011) and low among referred (1.7%, 2011) displayed by the Albert Male (TCC attended to the big to a spiritivity).
 - clients. Although Male ICTC attendees had a higher positivity (3.0%) than females (1.9%), both gradually declining, overall a declining trend was witnessed.



- Syphilis positivity rate among STI clinic attendees in 2011 was 1.8%, with a steep rise between 2010 and 2011 in the number of episodes treated.
- As per the 2001 Census, 5.3% of the male population were migrants; 28.4% of them migrated to other states and 35.46% migrated to other districts within the state.
- The top two destinations for out-of-state migration were Chandigarh and Una, Himachal Pradesh.
- HIV awareness and RTI/STI awareness rates among women were 95.5% and 63.6% respectively (DLHS-III).
- Of the 1023 PLHIV registered at the Anti-Retroviral Therapy (ART) centre in 2009, 55% were on ART, 55% were illiterate or only had a primary school education, and 71% were widowed or divorced.
- Considering the large number of IDUs in the district, number of IDU TI sites were increased to two in the district in 2011.

- Need to establish mechanisms to regularly monitor ANC trends through HSS, PPTCT and Blood Bank data.
- Owing to the large presence of IDUs, very low coverage by the Programme TIs, and a moderate positivity among ICTC direct walk-in clients, it
 is important to better understand the dynamics of HIV transmission, and interactions between IDU and FSWs, (who are also present in large
 numbers) and between MSM and IDU, etc. Initiation of HRG sites for HIV Sentinel Surveillance (HSS) or further analysis of ICTC/PPTCT and
 ART data is also suggested.
- Strengthen outreach programmes through awareness campaigns around trucking halt points and highways in the district.



1467

6257

2011

2010

2009

South Delhi

West Delhi

Kangra, Himachal Pradesh

Una, Himachal

Pradesh

Hoshiarpur, Punjab

District Population: 15,82,793 (5.7% of Punjab Population); Female Literacy1: 80.8%; ANC Utilization²: 61.9%

Intra-district

Intra-state

Overall

Male Migration, 2001 Census

14622

14376

11547 Inter-state

40545

1.51

5.31

36.06 1.91

35.46

28.48

100

Top districts for inter-state out-migration

			Nal V Lev	III V LEVEIS AIIU II EIIUS	ellus								AUIII	vullerabilities	
		2004	2005	2006	2007	2008	5009	2010	2011		HRG Size	ize			
HSS-ANC	PP4							0.47			FSW	MSM	ndı		
	2							474	000	Cian Ect					tio old
PPTCT	dd Iv	.		.				5/180	0.09	Mapping, 2009)	009	204	1095		no. out- migration
	dd							0.13	0.12	% Tetal UBC	21.60	10.74	22.62	_	% of male
Blood Bank	N							15093	16846	2000	00:10	10:01	00.70		pop.
-	ЬР									% Total Pop.	0.04	0.01	0.07		% of total
HSS-SID	Z														migration
14100	ЬР							*		Programme		,			P doT
HSS-FSW	Z							*		larget				_	
	Ы							*		Programme	009	100	200		
HSS-IMSM	Þ							*		Coverage	Home hased				
	ЬР										- 50.5%:		Daily		
HSS-IDU	N									-	Brothel	Kothi-53%;	Injectors		
- T- V4 OEO	ЬР			*	10.53	5.97	3.57	3.26	3.02	Iypology	-paseq	Pantni-27%;			Chandigarh
ICIC Male	Z			*	731	1743	3365	3187	3747		19.33%;	ō	injectors-		
olomoj OLO	ЬР			*	4.20	4.56	2.46	2.57	1.98		Street based-		41.84%		
ICIC remale	NT		-	*	1309	1448	2892	2800	3186	20, 20	30.17%	90	1400		
CTC Boformad	ЬР	-		*	3.27	3.82	1.88	1.77	1.71	% <25 yrs.	27.03	07	14.00		
ICIC Nelelled	NT	-	-	*	1437	2002	4639	4580	5452	70 Mallieu		30	09.39		
ICTC Direct	ЬР	-	-	*	14.10	8.21	6.43	6.75	2.60		2000		0100	2011	
Walk-in	N			*	603	1096	1618	1407	1481	No enicodes	7000	+	+		
				PLHIV Profile, 2						treated	1929	4167 1	1683 (6241	
	% On ART	_	% 15-24 Pr	% III., Prim Edu	Marriad C	% widowed or	Jo			% Syphilis pos.	0	0	1.86	1.85	
(CCO1) TOV	100		t		10	71	I						Program	Programme Response	onse
ANI (1025)	CC			C C	0		Т			No.	2004	2005 2	2006 2	2007	2008
רוא (ואיל)		Position	CTO COLUMN Transmission CTC 2001	T) Lacion	1100		-			FSW TIs	-	-	-		•
		Route of	IIIV IIIdiisiiii	SSIOII, ICIC	Locallo /	Doronatho				MSM TIS		-	-		•
	Hetero	Hetero-sexual	- Polition	Blood	Svringe	Child	Unk	Unknown		IDU TIs		-		,	1
% of Total (N=176)	70.57	$^{+}$	+	2.27	12.50	5.68	.3	3.98		Comp. Tls			-	-	-
				P De	sile					ICTG	-		+	-	m
	Taliika 1									Total tested ⁵	0	-	342 2	2040	3191
No. HRG-FSW	, 200	,					,			Blood Banks	9	9	_	_	_
	F. L. L.									STI clinics	2	2	2	2	2
No. HRG-MSM	laluka I,	,	,				,	,		ART centers				,	•
	3									Link ART centers		-		,	1
No. HRG-IDU	Taluka 1,					,				PLHIV Networks	-	-	-	-	-
	136									Red ribbon clubs		-	3	2	-
% Positive, ICTC 2009	Dasuya, 1.71	Hoshiarpur, 3.1	Mukerian, 4.27							Comm. care centers					
% Positive, PPTCT	Dasima	Hoshiarpur	Milkerian							Drop-in-centers					
										200					

* Inadequate sample sizer - Data not available; 1 2011 Census; 2 Source: DLH5 III; 3 Data presented only for years where sample size is valid (HSS-ANC; 300 tested, HSS-HRG/STD: 187 tested, ICTC: 600 tested, PPTCT and BB: 900 tested); * PP = percent positive, NT = number tested; * General clients and pregnant women

38885

65038 47232

Jalandhar, Punjab

Background:

Jalandhar, the central most district of state, occupies the southern part of the Doab called Bist Jullundur, i.e. the country between the Beas River and the Sutlej; these great rivers form the district's southern and the western boundaries; the center (North) is an enclave of Kapurthala district. Jalandhar has a population of 21.81 lakhs with a sex ratio of 913 females per 1,000 males, a female literacy rate of 78.3% and an overall literacy rate of 82.4% (2011 Census). The economy of Jalandhar district mainly depends on agriculture. Apart from agriculture, there are two major industries in the district leather and sports goods. Due to presence of these industries many areas of Jalandhar West and Rurka Kalan blocks have become trucking halt points. The major highways that pass through Jalandhar are National Highways 1 and 10.

HIV Epidemic Profile:

- Based on 2010 HSS-ANC, and 2011 PPTCT and Blood Bank data, the level of HIV positivity was low (0.10%-0.25%), but due to lack of data, a trend could not be drawn.
- Jalandhar District

 Legend
 State State
 Sta
- HIV positivity among ICTC attendees was moderate among direct walk-in clients (5.6%, 2011), and low among referred clients (1.1%, 2011).
 Positivity among male ICTC attendees was low (3.7%, 2011) but higher than female clients (2.6%, 2011) overall decreasing trend has been witnessed among all clients type. It should be noted that due to scale up of testing since 2007, there has been an increase in the number of ICTCs spread geographically across the district, and the numbers tested.
- As per mapping conducted in 2009, FSW (3845, 57.1% of total HRG) was the largest HRG in the district, followed by IDU (2172, 32.3% of total HRG) and MSM (706, 10.5% of total HRG).
- The syphilis positivity rate among STI clinic attendees in 2011 was 4.1%, and number of episodes of STI treated almost quadrupled from the 2010 level.
- As per the 2001 Census, 4.4% of the male population were migrants; 35.6% of them migrated to other states and 31.24% migrated to other districts within the state.
- The top two destinations districts for out-of-state migration were Chandigarh and West Delhi.
- HIV awareness and RTI/STI awareness rates among women were 89.9% and 60.9% respectively (DLHS-III).
- Of the 918 PLHIV registered at the Anti-Retroviral Therapy (ART) centre in 2009, 53% were on ART, 56% were illiterate or only had a primary school education, and 64% were widowed or divorced.
- · Considering large number of FSWs and IDUs there has been an increase in the number of TIs for these HRGs in the district.

- Need to develop a mechanism for regular monitoring of ANC through surveillance; PPTCT and Blood Bank data must be continued to be tracked.
- Considering large number of FSWs and MSMs in the district, bio behavioural information about their profile and HIV positivity among them is
 desirable for better epidemiological profiling.
- There is a need to better understand the dynamics of HIV transmission among FSW, MSM and IDU, either through initiation of HRG sites for HIV Sentinel Surveillance (HSS) or further analysis of ICTC/PPTCT and ART data.
- Strengthen outreach programmes through awareness campaigns around trucking halt points and highways in the district. Since the largest HRG is FSW, better assessment of the size and profile of client populations, including migrants and truckers, will improve in understanding of district vulnerabilities.

15

North West Delhi

> Panchkula, Haryana

South West Delhi

33.07

31.24

35.69

1.59

inter-state out-migration

lintradistrict 15294 1.47

Interstate

tion, 2001 Census

Intrastate 14450

Jalandhar, Punjab

62.5	
on ² :	
lizati	
∄	
78.3 %; ANC U	
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NT											Brothel based-		, Injectors		Chandinarh	Chandigarh West Delhi
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Bundala, Jalandhar, Nakodhar,										Comm. care centers						
		_								Drop-in-centers					-	-
0.21 0.5/ 0.14										Condom outlets			48230	106860	213	16395

* Inadequate sample size; - Data not available, 1 2011 Census, 2 Source: DLHS III; 3 Data presented only for years where sample size is valid (HSS-ANC; 300 tested, HSS-HRG/STD: 187 tested, ICTC: 600 tested, PPTCT and BB: 900 tested); 4 PP = percent positive, NT = number tested; 5 General clients and pregnant women

Kapurthala, Punjab

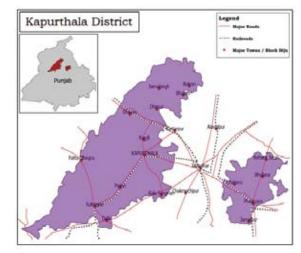
Background:

Kapurthala is one of the smallest districts situated in the Bist Doab area of Punjab. It has a population of 8.17 lakhs with a sex ratio of 912 females per 1,000 males, and a female literacy rate of 75.4% with an overall literacy rate of 80.2% (2011 Census). The economy of Kapurthala district mainly depends on agriculture and it is a prominent market in Punjab for buying rice. Kapurthala is home to several medium-to-large scale industries including manufacturing railway coaches, textiles, electrical wiring accessories, etc. which attract in-migration. The major highway that passes through Kapurthala is National Highway 1.

HIV Epidemic Profile:

- Based on 2011 PPTCT and Blood Bank data, the level of HIV positivity was low (≤0.1%), and due to non-availability of previous years' data, trend analysis was not possible.
- Among ICTC attendees HIV positivity was also low among direct walk-in clients (2.6%, 2011), but higher than the referred clients
 - (1.1%, 2011). Males had higher positivity (2.2%, 2011) than females (0.98%, 2011), both at low levels. Overall there was a declining trend among all types of ICTC attendees. There has been a gradual scale-up of ICTCs from 2008 onwards with a corresponding increase in number of clients undergoing HIV testing at these sites.
- HIV prevalence among FSW based on HSS data was low (0.40%), but since 2010 was its first year of inclusion in HSS, hence no trend can be
 established.
- As per mapping conducted in 2009, FSW (1495, 64.3% of total HRG) was the largest HRG in the district, followed by IDU (618, 26.5% of total HRG) and MSM (212, 9.1% of total HRG). Of the FSW, 79.5% were home-based and 8% were street-based.
- The syphilis positivity rate among STI clinic attendees in 2011 was 3.63%, with an increase in the number of episodes of STI treated.
- As per the 2001 Census, 3.3% of the male population were migrants; 23.7% of them migrated to other states and 33.4% migrated to other districts within the state.
- The top two destinations for out-of-state migration were Chandigarh and Nort West Delhi.
- HIV awareness and RTI/STI awareness rates among women were 93.7% and 63.2% respectively (DLHS-III).
- Of the 358 PLHIV registered at the Anti-Retroviral Therapy (ART) centre in 2009, 54% were on ART, 66% were illiterate or only had a primary school education, and 73% were widowed or divorced.
- Though there was a considerable number of FSWs in the district, the only existing FSW. TI was dropped in 2011; however, there was an
 additional composite TI in the same year.

- There is a need for regular monitoring of PPTCT and Blood Bank data to determine trends.
- Although prevalence among FSW is currently low, there is a need to focus on efforts to reach hard-to-reach sub-groups, such as home-based FSW.
- Simultaneously, outreach programmes and awareness campaigns need to be employed around trucking halt points and highways in the district to keep a tab on the possible drivers.
- There is a need to better understand the dynamics of HIV transmission among MSM and IDU, either through initiation of HRG sites for HIV Sentinel Surveillance (HSS) or further analysis of ICTC/PPTCT and ART data.
- Considering the route of transmission from homosexual contact is considerable, there is a need to understand the profile of the MSM networks in the district to understand the source and spread of HIV in these local risk groups.
- Since the largest HRG is FSW, better assessment of the size and profile of client populations, including migrants and truckers, will improve
 understanding of district vulnerabilities.



33.42

Intra-district 4465 1.12

Kapurthala, Punjab District Population: 8,17,668 (2.9% of Pur

3.3%	ı
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Literacy¹:	
Female	
Population);	
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: 8,17,668 (2.9% of P	
Population: 8	
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	Census	Intra-	state	5721		1.43		42.82		Top districts for inter-state out-migration					Panchkula,	nalyalla										2011			-	2	∞	10438	ĸ	4			-				24235
	Male Migration, 2001 Census	Inter-	state	3174		08.0		23.76		nter-state o					West Delhi											2010	1			1	2	8463	3	7		٠	_	6			41130
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ties				No. out-	III giatioii	% of male		% of total	mgration	P doT					Chandigarh	1									Response	2008				1	3	3153		2	-						1400
Vulnerabilities																_			1			2011	6459	3.63		2007		,		1	1	1985	3	2	-			13			83767
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nds³	2007						-	-								5.81	889	1.16	1297	1.79	952	3.68	1033		% Marripd %	\neg	,	011		Syringe	3.85	sli									
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	2004	•	'	'	•	'		'	•						'				-	'		•	•		% On ART	54			Hetero-sexual	2000	70.51		,		,		,	Dhami	a, inagwara, 2.72	a, Phagwi	0.23 0 0
		PP⁴	NT⁴	ЬР	Þ	ЬР	Z	ЬР	¥	ЬР	N	PP	Z	Ы	K	Ы	N	dd	NT	ЬР	N	ЬР	IN		io %	150			Hetel	+			Taluka 1,	009	Taluka 1,	7	laluka 1,	Kaninthal	3.2	Kapurthal	0.23
		ONV SSE	HSS-AINC	PPTCT	-	Blood Bank		HSS-STD	010-0011	W102 0311	NS3-FSW	PACA ACA	INICINI-CCLI		HSS-IDU	-1-84 OED	ICIC Male	CTC Family	ICIC remale	CTC Boforrod	רור שפופופת	ICTC Direct	Walk-in			ART (358)	DLN (NA)				% of Total (N=96)		No. HRG-FSW		No. HRG-MSM		No. HRG-IDU	% Docitive	ICTC 2009	% Positive.	PPTCT 2009

* Inadequate sample size; - Data not available; 1 2011 Census; 2 Source: DLHS III; 3 Data presented only for years where sample size is valid (HSS-ANC: 300 tested, HSS-HRG/STD: 187 tested, ICTC: 600 tested, PPTCT and BB: 900 tested); 4 PP = percent positive, NT = number tested; 3 General clients and pregnant women

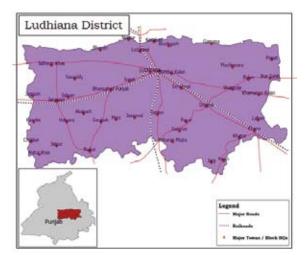
Ludhiana, Punjab

Background:

Ludhiana is the most centrally located district which falls in the Malwa region of Punjab. The Satluj River forms the border of the district in the north with Jalandhar and Hoshiarpur. Ropar and Fatehgarh sahib mark the eastern and south eastern boundaries. The western border is adjoining Moga and Ferozpur. According to 2011 Census it has a population of 34.87 lakhs and constitutes12.59% of Punjab's population. The sex ratio of the district is 869 females per 1,000 males, and female literacy rate is 78.2% out of an overall literacy rate of 82.5% (2011 Census). The economy of the state is primary dependent on its industries. The main industries of Ludhiana District are of bicycle parts and hosiery. The major highways that pass through Ludhiana are National Highways 1 and 95.

HIV Epidemic Profile:

 Based on 2010 HSS-ANC, and 2011 PPTCT and Blood Bank data, the level of HIV positivity ranged from low to moderate (0.20% – 0.75%), but due to lack of data, a trend analysis was not possible.



- Based on 2010 HSS data, HIV prevalence was high among IDUs (15%) and low among FSW (1.6%) and MSM (1.25), but since data from
 previous years was unavailable, trend analysis was not possible.
- HIV positivity among ICTC attendees was near moderate among direct walk-in clients (4.5%, 2011) whereas it was lower for referred clients (2.5, 2011). Both male (3.9%, 2011) and female (2.6%, 2011) ICTC clients saw a low positivity, overall there was a stable to rising trend.
- As per mapping conducted in 2009, IDU (2512, 49.8% of total HRG) was the largest HRG in the district, followed by FSW (2034, 40.3% of total HRG and MSM (491, 9.7% of total HRG). Of the FSW, 62.84% were home-based and 37.16% were brothel based.
- Syphilis positivity rate among STI clinic attendees in 2011was 0.80%.
- As per the 2001 Census, 4.4% of the male population were migrants; 27.6% of them migrated to other states and 50.7% migrated to other districts within the state.
- The top two destinations for out-of-district migration were Sangrur and Chandigarh in Punjab; Chandigarh and Panchkula, Haryana are the top two favourites for interstate migration.
- HIV awareness and RTI/STI awareness rates among women 84.9% and 39.9% respectively (DLHS-III).
- Of the 749 PLHIV registered at the Anti-Retroviral Therapy (ART) centre in 2009, 60% were on ART, 70% were illiterate or only had a primary school education, and 80% were widowed or divorced.
- There was a rapid scale-up of ICTCs from 2008 onwards with a corresponding increase in the number of clients undergoing HIV testing at these sites.
- Considering the large number of IDUs, FSWs and MSMs, there were two TIs exclusively for FSW and IDU and one each for MSM and composite
 groups.

- Need to establish mechanism for regular monitoring of HSS-ANC, PPTCT and Blood Bank data to determine trends.
- Focus on outreach efforts among hard-to-reach sub-groups, such as injecting drug users. They are in large numbers and most inject daily, so there is a need to increase coverage among this group. Also focus efforts on reaching home-based FSW, who are also hard to reach.
 Programme coverage needs to expand to cover more IDU and FSW.
- Mode of transmission through needles and syringe (14.4%) indicates the need to focus on IDUs for wider Programme coverage and outreach.
- Strengthen outreach programmes through awareness campaigns around trucking halt points and highways in the district, to address the higher prevalence rates among at-risk populations.
- There is a need to better understand the profiles, and the dynamics of HIV transmission among IDU, through further analysis of ICTC/PPTCT and ART data.

2010

2009

2008

2007

2006

2002

2011 9930 0.80

2010 7088 1.08

2009 8797 1.05

STI/RTI

Ambala, Haryana

West Delhi

North West Delhi

Panchkula, Haryana

Chandigarh

Daily Injectors-63.25%; Non daily injectors-36.75% 35.93

Kothi-NA; Panthi-NA; Double decker-NA

Intra-district 37365

Inter-state

Overall

 \Box

MSM

Male Migration, 2001 Census

15971 Intra-state

> 73671 4.43 100

No. out-migration % of male

> 2512 49.87 0.07

491

50.72 2.25

21.68

27.60

% of total migration

0.01

Top districts for inter-state out-migration

200

0

Ludhiana, Punjab

District Population: 34,87,882 (12.6% of Punjab Population); Female Literacy': 78.2%; ANC Utilization²: 59.0%

2006 2007 2008
21.20
1.18 3.01 3
6447 4652 8166
2.67
4370 2960 5908
0 1.27 2.07
3078 4161 7211
1.58 4.81 3.16
7739 3451 6863
PLHIV Profile, 2009
% III., % Marriad % widowed or
du. // Mailleu
70 17 80
Route of HIV Transmission, ICTC 2011
Blood Needle/ Parent to
+
14.40 3.41
Block-Level Details
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0 1.27
Payal,
0 0.25 0

'CT and BB	
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tested, ICTC: 6	
HRG/STD: 187	
) tested, HSS-h	
(HSS-ANC: 30(
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ars where samp	
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Data presented	
rce: DLHS III; 3	
Census; 2 Sou	men
vailable; 1 2011	d pregnant wo
- Data not av	eral clients an
s sample size;	er tested; ⁵ Gene
* Inadequate	NT = number

3B: 900 tested); 4 PP = percent positive,

146878

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88920

43680

39523

33432

15 17906

14074

7612

10817

391 6

7

7

7

3

7

Mansa, Punjab

Background:

District Mansa is roughly triangular in shape and lies in the southern part of Punjab State. It has a population of 7.68 lakhs with a sex ratio of 880 females per 1,000 males, and a female literacy rate of 56.4% withan overall literacy rate of 62.8% (2011 Census). The economy of Mansa district mainly depends on agriculture. Mansa is situated in the cotton belt of Punjab and is therefore fondly called the "Area of white gold." Industrially, the district is very deficient, yet some trade and industry is being carried out in urban areas. Also although none of national highways pass through the district, it is well connected to other districts of Punjab through local roadways.

HIV Epidemic Profile:

- Based on 2010 HSS-ANC, and 2011 PPTCT and Blood Bank data, the level of HIV ranged from low to moderate (0.1-0.5%), but due to lack of data from previous years, trends could not be determined.
- HIV prevalence among FSW based on 2010 HSS was low (1.2%).
 Among ICTC attendees, positivity among direct walk in clients was high at 14.4% (2011) but at the same time sharply lower numbers were tested under the direct walk-in category prior to 2011, referred clients continued to be low (0.99%, 2011). Male ICTC clients had a higher positivity rate (3.3%, 2011) than female clients (0.9%, 2011). Baring 2011 ICTC direct walk-in data, there was an overall stable pattern.
- As per mapping conducted in 2009, FSW (700, 66.04% of total HRG) was the largest HRG in the district, followed by IDU (250, 23.5% of total HRG) and MSM (110, 10.3% of total HRG).
- The syphilis positivity rate among STI clinic attendees in 2011 was 1.4% with a more than two-fold increase in the number of episodes of STI treated
- As per the 2001 Census, 4.2% of the male population were migrants; 25.3% of them migrated to other states and 35.6% migrated to other districts within the state.
- The top two destinations for out-of-state migration were Fatehabad and Sirsa in Haryana, with Chandigarh also very popular for migration.
- HIV awareness and RTI/STI awareness rates among women were 55.8% and 35% respectively (DLHS-III).
- Of the 180 PLHIV registered at the Anti-Retroviral Therapy (ART) centre in 2009, 4% were 15-24 years of age, 63% were on ART, 75% were
 illiterate or only had a primary school education, and 84% were widowed or divorced.
- There has been a gradual scale-up of ICTCs from 2008 onwards with a corresponding increase in number of clients undergoing HIV testing at
 these sites, however, testing proportion among direct walk-in clients had been gradually decreasing, with a corresponding increase in referred
 testing.

- Need to establish a mechanism for regular monitoring of HSS-ANC, PPTCT and Blood Bank data.
- Despite the presence of a considerable number of FSW in the district, there is no dedicated FSW TI. More analysis of TI and ICTC data needs to be carried out to understand trends.
- There is a need to better understand the dynamics of HIV transmission among FSW and clients, MSM and IDU, either through initiation of HRG sites for HIV Sentinel Surveillance (HSS) or further analysis of ICTC/PPTCT and ART data.
- Better assessment of the size and profile of client of FSW populations, including migrants and truckers, will improve understanding of the district's vulnerabilities



2010

2009

2008

2007

5209 1.48

2011

2010 2506 4.95 2006

2009 1478 0.21 2005 9153

5979

2782

9081

1280

295

Hisar, Haryana

Ganganagar, Rajasthan

Chandigarh

Sirsa, Haryana

Fatehabad, Hanyana

Daily Injectors -NA;

250

9

Non daily injectors-NA

decker-NA Kothi-NA; Panthi-NA; Double

Intra-district

Overall Inter-state Intra-state

2 250

MSM 110

Male Migration, 2001 Census

6809

5551 1.51

3948

15588

No. out-migration % of male 39.06

35.61

25.33

100

pop. % of total migration

0.03

0.01

23.58

10.38

Top districts for inter-state out-migration

Mansa, Punjab

District Population: 7,68,808 (2.7% of Punjab Population); Female Literacy!: 56.4%; ANC Utilization?: 36.2%

			HIVE	vels and	HIV Levels and Trends³						
		2004	2005	2006	2007	2008	2009	2010	2011		HRG Size
JIV JJI	₽bd			-				0.50			FCW
JNJ-KCL	NT⁴							400			۱ ۵۷۷
TOTAL	Ы							0.11	0.16	Size Est.	700
	N							2763	4982	(Mapping, 2009)	2
1 2 2	Ы							90.0	0.11	% Total HRG	66.04
SIOOU BAILK	F							5163	4421		
UCC CTD	ЬР					-				% Total Pop.	0.09
712-SCI	IN									-	
W 33 33	Ы							1.22		Programme Target	
NS2-F3VV	F							245		Programme	700
HEC MENA	Ы									Coverage	1
IVICIVI-CCT	F										-nospe pased-
1101 331	Ы									Typology	Brothel
001-881	F									(Sound)	based-NA:
	Ы			*	2.39	5.06	2.36	2.98	3.37		Street based-
CI C Male	F			*	419	1066	1358	1276	1394		ΑN
CTC Formalla	Ы			*	1.05	1.22	1.33	1.19	0.97	% <25 yrs.	
CIC remaie	N			*	861	740	1424	1940	2777	% Married	٠
CTC Bafarrad	ЬЬ			*	0.35	7.35	1.65	1.89	0.99		STI/RTI
CIC Relerred	F			*	292	89	1331	2059	3929		2008
ICTC Direct	ЬР			*	2.88	1.50	2	1.90	14.46	No. episodes	433
Valk-in	N			*	715	1738	1451	1157	242	treated	F
			PLHI	PLHIV Profile,	, 2009					% Syphilis pos.	0.45
	TOP ADT		15.27	% III.,		% widowed or	or				
	5 %			Prim. Edu.	Married	divorced				No.	2004
ART (180)	63		4	75	11	84				FSWTIs	,
DLN (NA)	-		-		-					MSM TIs	•
		Route o	Route of HIV Transmission, ICTC 2017	ission, IC	TC 2011					IDU TIS	•
	Hetero	Hetero-sexual Hom	Homo- sexual	Blood	Needle/ Syringe	Parent to Child	Unkr	Unknown		Comp. TIs ICTCs	
% of Total (N=74)	93	93.24	0	0	0	9.79		0		Total tested ⁵	
			Bloc	Block-Level Details)etails					Blood Banks	-
No. HRG-FSW										STI clinics	2
No. HRG-MSM										ART centers	
										LINK AKI centers	
NO. HRG-IDO										PLTIV Networks	
% Positive, ICTC	Mansa, 153	Sardoolgarh,	,	•	•			,		Comm. care centers	
% Positive, PPTCT	Mansa,	Sardoolgarh,		'						Drop-in-centers	
5003	0.07	0.07								Condom outlets	

* Inadequate sample size; - Data not available; 1 2011 Census; 2 Source: DLHS III; 3 Data presented only for years where sample size is valid (HSS-ANC; 300 tested, HSS-HRG/STD: 187 tested, ICTC; 600 tested, PPTCT and BB: 900 tested); 4 PP = percent positive, NT = number tested; 5 General clients and pregnant women

850

21000

15000

Moga, Punjab

Background:

Moga District falls under the jurisdiction of Firozpur division of the state. It is bounded by Jalandhar in North, Ludhiana in East, Sangrur in South and Faridkot and Firozpur in West. Moga has a population of 9.9 lakhs with a sex ratio of 893 females per 1,000 males, and a female literacy rate of 67.4% with an overall literacy rate of 71.6% (2011 Census). The economy of Moga district mainly depends on agriculture. Other main industries include cold stores and trucking. Truck 'body building' is an important small scale industry located in district and the district is one of the largest Bus and Truck Body Building Market/Industry in Punjab. The major highways that pass through Moga district are National Highways 95 and 71.

HIV Epidemic Profile:

- Based on 2010 HSS-ANC, and 2011 PPTCT and Blood Bank data, the level of HIV positivity was low (0.09% to 0.18%), but due to lack of data from previous years, a trend could not be determined.
- Moga District

 Managarh

 Charge Radgewol

 Charge Rain

 Chard Rain

 Charge Rain

 Charge Rain

 Charge Rain

 Charge Rain

 Cha
- HIV prevalence among IDUs based on 2010 HSS data was moderate (7.26%). Among ICTC attendees it was low among direct walk-in clients
 (3.5%, 2011) and referred clients (2.1%, 2011). Positivity among male (3.3%, 2011) and female (2.0%, 2011) clients was almost at par,
 with an overall gradual decrease observed over the past 4 years. There has been a scale-up of ICTCs from 2009 onwards with corresponding
 increase in the number of clients undergoing HIV testing at these sites.
- As per mapping conducted in 2009, IDU (400, 46.5% of total HRG) was the largest HRG in the district, followed by FSW (290, 33.7% of total HRG) and MSM (170, 19.7% of total HRG).
- The syphilis positivity rate among STI clinic attendees in 2011was 0.6%.
- As per the 2001 Census, 3.07% of the male population were migrants; 17.7% of them migrated to other states and 47.41% migrated to other districts within the state.
- The top two destinations for out-of-district migration were Ludhiana and Firozpur in Punjab and the two top choices for intrastate migration were Chandigarh and Sirsa, Haryana.
- HIV awareness and RTI/STI awareness rates among women were 96.8% and 84.4% respectively (DLHS-III).
- Of the 253 PLHIV registered at the Anti-Retroviral Therapy (ART) centre in 2009, 7% were 15-24 years of age, 53% were on ART, 60% were illiterate or only had a primary school education, and 66% were widowed or divorced.

- Need to establish mechanism for regular monitoring of HSS-ANC, PPTCT and Blood bank data.
- Need to characterize and profile the IDU to understand their networks and interactions with the other HRGs. Moderate presence of FSW in the
 district also makes them a potential contributor to furthering the epidemic.
- There is a need to better understand the dynamics of HIV transmission among IDU and MSM, either through initiation of HRG and STD sites for HIV Sentinel Surveillance (HSS) or further analysis of ICTC/PPTCT and ART data.
- There is a need for greater coverage of IDU, MSM and FSW under the current programme.

2010

2009

2008

2007

2005

2004

1820

831

673

0

3.89

2011

2010

2009

2008

42.58

Moga, Punjab

District Population: 9,92,289 (3.5% of Punjab Population); Female Literacy!: 67.4%; ANC Utilization?: 70.8%

Intradistrict

Intrastate 6846

Inter-state

Overall

Male Migration, 2001 Census

5029

2566

3.07

No. outmigration

400

 \Box

170 19.77 0.02

FSW 290

HRG Size

34.82

47.41

17.77

1.45

% of male pop.

33.72

600

0.03

% of total migration

0.04

Top districts for inter-state out-migration

North West

Delhi

Ganganagar, Rajasthan

Sirsa, Haryana

Chandigarh

Daily Injectors-47.1%; Non daily injectors-52.9% 32.90

Kothi-NA; Panthi-NA; Double decker-NA

Home based-NA; Brothel based-NA; Street based-NA

			HIV	HIV Levels and Trends ³	d Trends ³					
		2004	2005	2006	2007	2008	2009	2010	2011	
JINV JOIL	Pb⁴							0		
HSS-AINC	NT4							400		
TOTAG	8							0.14	0.18	Size Est.
	N							2764	4329	(Mapping, 20
11.00	ď							0.13	0.09	% Total HRG
Blood Bank	N							8502	9495	% Total Pop.
GE SSI	Ы									
HSS-SID	F									Programme
	Ы									Target
HSS-FSW	N									Programme
MACAN DOLL	Ы									Coverage
IVISIVI-CCT	F									
121	ď							7.26		Typology
U23-ID0	N							248		3
T T T C T C	윤				7.93	5.91	4.61	3.69	3.35	
ICIC Male	N				806	1319	1996	1842	2359	
1	e.				4.57	6.62	4.85	2.07	2.01	% <25 yrs.
ICIC remaie	IN				1007	589	804	1736	2086	% Married
ICTC Deferred	dd		-	-	2.78	6.94	3.61	1.62	2.19	
Icic veielled	IN		-	-	719	346	828	2163	5689	
ai AlloWetoria OEO	Ы				8.54	5.95	5.15	4.88	3.53	No. episodes
ICIC DIRCL WAIK-III	IN				1124	1562	1942	1415	1756	treated
			PLHI	HIV Profile,	٤, 2009					% syphilis po
	% On ART	ART	%	% III.,	⊢	% widowed or	or			Š
ADT (252)	E3		47-61	Prim. Edu.	Married	divorced				FSW TIS
DLN (NA)	3 '		,	3 '	2 ,	3 '	T			MSM TIS
		Route c	of HIV Trans	Route of HIV Transmission, ICTC 2011	TC 2011					IDU TIS
	Hetero	Hetero-sexual	Homo- sexual	Blood	Needle/ Syringe	Parent to Child	Unkr	Unknown		Comp. TIS ICTCs
% of Total (N=121)	80	80.99	0.83	0	8.26	8.26	7.	1.65		Total tested ⁵
			Blo	Block-Level Details	Details					Blood Banks
No. HRG-FSW			•	1						ART centers
No. HRG-MSM					-					Link ART cent
No. HRG-IDU	Taluka 1, 310	-	1	'		-	-			PLHIV Netwo Red ribbon cl
% Positive, ICTC 2009	Moga, 4.68	-	1	'		-	-			Comm. care centers
% Positive, PPTCT 2009	Moga, 0.39		,	,	,					Drop-in-cente Condom out

* Inadequate sample size, - Data not available, 1 2011 Census; 2 Source: DLHS III; 3 Data presented only for years where sample size is valid (HSS-ANC: 300 tested, HSS-HRG/STD: 187 tested, ICTC: 600 tested, PPTCT and BB: 900 tested); 4 PP = percent positive, NT = number tested; 5 General clients and pregnant women

13750

15710

11350

15

8774

6342

2800

1908

Mohali, Punjab

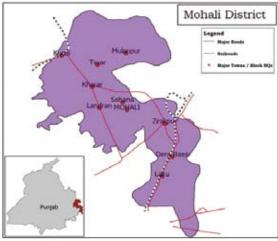
Background:

Mohali also known as S.A.S (Sahibzada Ajit Singh) Nagar, has been recently carved out of areas falling in Ropar and Patiala District of the state Punjab in April 2006. It has a population of 9.86 lakhs with a sex ratio of 878 females per 1,000 males, and a female literacy rate of 80% with an overall literacy rate of 84.9% (2011 Census). It is an emerging I.T Hub of North India with some reputed and large companies establishing their operations in the district. It is expected to generate 25,000 direct and 100,000 indirect jobs which will result in in-migration of people from all parts of the country. The major highways that pass through Mohali are National Highways 5, 7, 21, 95 and 205.

HIV Epidemic Profile:

- Based on 2011 PPTCT and Blood Bank data, the level of HIV positivity was low (0.09%- 0.14%), with a stable to declining trend.
- Based on 2010 HIV Sentinel Surveillance (HSS) data, HIV prevalence among FSW and IDU was low at 0% and 2.8% respectively.
- HIV positivity among ICTC attendees was low among both direct walk-in clients (1.9%, 2011) as well as referred clients (1.4%, 2011).
 Positivity among male clients (2.1%, 2011) was higher than female (0.8%, 2011) clients, with an overall decrease in the positivity over the years. There has been a gradual scale-up of ICTCs from 2008 onwards.
- As per mapping conducted in 2009, FSW (821, 43.8% of total HRG) was the largest HRG in the district, followed by IDU (639, 34.1% of total HRG) and MSM (412, 22% of total HRG); of the FSW, 100% of them were home-based.
- The syphilis positivity rate among STI clinic attendees in 2011 was 0.45%.
- Of the 153 PLHIV registered at the Anti-Retroviral Therapy (ART) centre in 2009, 62% were on ART, 73% were illiterate or only had a primary school education, and 84% were widowed or divorced.
- HIV awareness and RTI/STI awareness rates among women were 89.7% and 42.5% respectively (DLHS-III).
- As the district was recently formed in April 2006, migration data was not available.

- Need to ensure mechanisms for reaching in-migrants who the new industrial boom will attract.
- Focus efforts towards reaching hard-to-reach sub-groups, such as home-based FSW, which in this case are 100%.
- Focus on getting a clearer picture on size and profile of clients of FSW, e.g. migrants, and strengthen outreach programmes through awareness campaigns for them; also around trucking halt points and highways in the district.
- With a high percentage of all PLHIVs being widows, there is a clear need to detect PLHIV at earlier stages of the infection.
- There is a need to better understand the dynamics of HIV transmission among FSW, MSM and IDU, either further analysis of ICTC/PPTCT and ART data.



2011 0.45 2007

2010 2316 1.99 2006

Injectors-43.86%; Non daily injectors-49.12%

Kothi-NA; Panthi-NA; Double decker-NA

23.90

2011

2010

2009

2008

10470

9965

11059

5717

1781

9

Mohali, Punjab

District Donnlation: 9.86, 147 (3.5% of Duniah Donnlation): Esmala Literary): 80%: AMC Hillipation2.69.5%

Intra-district

Intra-state

Inter-state

Overall

2

Male Migration, 2001 Census

Top districts for inter-state out-migration

% of total migration

90.0

200 Daily

% of male No. out-migration

> 34.13 639

pop.

2004	2005	05 2006 200	2007	2008	2009	2010	2011		HRG Size	
		╁								
									FSW	MSM
				0.11	90.0	0.10	0.14	Size Est.		:
				3567	0099	5865	6419	(Mapping, 2009)	821	412
	0.34	0.41	0.20	0.27	0.18	0.13	0.09	()		
	7564	9081	9911	12020	12319	15155	15853	% Iotal HKG	43.80	77.01
								T /0	0	ò
								% I otal Pop.	0.08	0.04
			-	-		0		Programme Target		
-				-		250		Programme	o o	
,		•						Coverage	900	0
									Home	
,			,			2.83			based-100%;	
						247		Typology	Brothel	Panthi-N/
			0.75	2.11	2.88	3.62	2.17		based-0%;	Double :
			803	1561	3022	2318	2207		Street based on	decker-N
			0.31	2.04	1.81	1.07	0.81	1	Dased-0%	
			978	589	1437	1779	1844	% <25 yrs.	76.38	٠
			0.32	1.33	m	2.44	1.41	% Married	91.25	
,			1558	904	2334	3068	3048		STIVE	E
			1.79	2.65	2.02	2.72	1.99		2008	5009
	,		223	1246	2125	1029	1003	No. episodes treated	375	2146
	4	HIV Profile	20					% Syphilis pos.	0	0
% On ART	% 1	% III.,	%	% widowed	Jo			:		1000
62	1	73 73	10 10	ulvoliceu 84	1			NO.	5004	5007
								NACAA TIL		
Route	of HIV Tran	smission, IC	TC 2011		-			INI INI		
lenkası	Homo-	_	Needle/	Parent to		מאוטר		Comp. TIS		١.
5	sexual	+	Syringe	Child		į		ICTCs		
2,73			33.33	4./0	9			Total tested ⁵		
	19 L	ock-Level L	Jetalis					Blood Banks	~	~
Taluka 1, 686								STI clinics	,	, ,
								ART centers		
								Link ART centers		
	•	•	,	,	,	,		PLHIV Networks		
4								Red ribbon clubs		
		•						Comm. care centers		
Derabassi, Mohali,		,	,					Drop-in-centers		
								Condom outlets		7
NT				ART % %	1.00 1.00	1.01 1.01	1	1.5 1.5	19 19 19 19 19 19 19 19	1

* Inadequate sample size; - Data not available, 1 2011 Census; 2 Source: DLHS III; 3 Data presented only for years where sample size is valid (HSS-ANC: 300 tested, HSS-HRG/STD: 187 tested, ICTC: 600 tested, PPTCT and BB: 900 tested); 4 PP = percent positive, NT = number tested; 5 General clients and pregnant women

28700

28940

175682

175017

26180

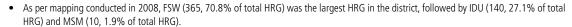
Muktsar, Punjab

Background:

Muktsar district lies in the south western part of the state. It has a population of 9.02 lakhs with a sex ratio of 895 females per 1,000 males, a female literacy rate of 60% and an overall literacy rate of 66.8% (2011 Census). Economy of the district is based on agriculture and 80% population of the district is engaged in it. Sri Muktsar Sahib is situated in the cotton belt of Punjab. The major industries of Muktsar are also agricultural based. The major highways that pass through Muktsar are National Highways 7, 10 and 15.

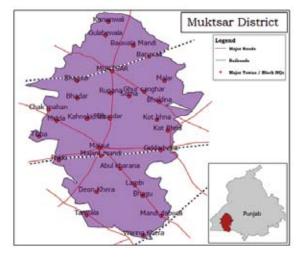
HIV Epidemic Profile:

- Based on 2010 HSS-ANC, and 2011 PPTCT and Blood Bank data, the level of HIV positivity was low (≤0.1%), with a stable to declining trend. ANC prevalence for three consecutive HSS rounds has been zero.
- HIV positivity among ICTC attendees was low among direct walk-in (0.9%, 2011) and referred (1.4%, 2011) clients, and also among male (1.3%, 2011) and female (1.2%) clients. The levels
 - have remained low for all the years, though overall there has been a stable to rising trend from 2009-11. There has been a gradual scale-up of ICTCs from 2008 onwards.



- The syphilis positivity rate among STI clinic attendees in 2010 and 2011 was found to be zero percent.
- As per the 2001 Census, 3.5% of the male population were migrants; 29.2% of them migrated to other states and 36.2% migrated to other districts within the state.
- The top two destinations for out-of-state migration were Sirsa in Haryana and Ganga Nagar in Rajasthan.
- HIV awareness and RTI/STI awareness rates among women were 88.3% and 78.1% respectively (DLHS-III).
- Of the 69 PLHIV registered at Anti-Retroviral Therapy (ART) centres in 2009, 9% were 15-24 years of age, 51% were on ART, 61% were illiterate or only had a primary school education, and 68% were widowed or divorced.
- · Routes of transmission in the district were primarily heterosexual and through needle/syringes, owing to the presence of IDU.

- Focus on expanding outreach to the high risk groups to mitigate transmission, keeping the epidemic at these low levels.
- Strengthen outreach through awareness campaigns around trucking halt points and highways in the district.
- There is a need to better understand the dynamics of HIV transmission among FSW, MSM and IDU, either through initiation of HRG sites for HIV Sentinel Surveillance (HSS) or further analysis of ICTC/PPTCT and ART data.
- Since the largest HRG is FSW, better assessment of the size and profile of client populations, including migrants and truckers, will improve the
 understanding of district vulnerabilities.



2010

2009

2008

147

6231

6797

3369

3

Bikaner, Rajasthan

Chandigarh

Hanumangarh, (

Ganganagar, Rajasthan

Sirsa, Haryana

district 5037

Intrastate 5263 1.28

Inter-state

Overall 14556 3.54

1.03

No. outmigration

% of male

Male Migration, 2001 Census

Intra-

34.60

36.16

29.24

100

% of total migration Top districts for inter-state out-migration

1.22

Muktsar, Punjab

District Population: 9,02,702 (3.2% of Punjab Population); Female Literacy': 60%; ANC Utilization?: 70.7%

>	\neg		т		Т		\neg		\neg		\neg		т			_		Т	Т	1	201	7	: ['	9	500		1		1	-	135	7 0	۱ ا۷	1 .	-	•	1	
		IDN		140		27.18		0.00	20:0				Daily	Injectors	.Ý	Non daily	NA				2010	1458	+	0	2006 200	-			-	H	m	7 (7				,	
		MSM		10		1.94		c	,					Kothi-NA;	Panthi-NA;	Double docker-NA	יבכעם				5008	1155	+	1.79	2005	┝			-	-			7					
	HRG Size	FSW		365		70.87		0.04	,				Home	٠,		based-NA;	-	<u> </u>		STI/RTI	2008	460	+	2.81	2004	┝		_	_					<u> </u>	-	,		
	Ξ.	 R			-	70		Č	5	_			운	based	Bro	based	base	Ŀ	Ĺ		20	46	-	2.9	20	ľ				H	1	1	1			Н		
			100	Size Est. (Manning 2009)	Sol in initial	% Total HRG		% Total Pon	-000	Programme	larget	Coverage			Typology			% <25 yrs.	% Married			No. episodes	treated	% Syphilis pos.		FSWTIs	MSM TIs	IDU TIS	Comp. TIs	CTCs	otal tested ⁵	Blood Banks	ART centers	Link ART centers	PLHIV Networks	Red ribbon dubs	Comm. care centers	Drop-in-centers
			:	ZK Z		%	l	%	2	~ ~	E E	£ 8	_		ř			%	%		Ш	ž	라	%	Š	FS	ž	₫	ပိ	<u>□</u>	P 7	<u> </u>	A A	<u> </u> :5		æ	S 9	ā
	2011			60.0	3516	0.10	9399									1.34	1716	1.26	1270	1.49	1947	96.0	1039										١.					
	2010	0	400	0.07	2881	0	5057		,							1.25	1838	0.93	1512	0.55	2550	2.88	800					-		uwc	0							
	2009			0.15	2637	0.18	4318									0.89	2369	0.56	1791	0.49	2238	1.04	1922		, ,	1	_			Unknown	7.69							
	2008	0	400	0	1239	0.15	3927		,							1.16	1380	1.87	750	1.56	704	1.33	1426		% widowed or	nanonin	80		:	Parent to Child	0							
ends³	2007	0	400	-	-	0.12	3221		,							1.81	885	0.85	473	1.09	735	1.93	623	600		Marined	4		1107	Needle/ Svringe	7.69	Details						,
HIV Levels and Trends ³	2006	0.25	400			0.23	3029		,							*	*	*	*	*	*	*	*	PLHIV Profile, 2009	% ≡.,		0	- L	Koute of HIV Iransmission, ICIC 2011	Blood	2.56	-	·					
HIV Le	2002		-						,								,							PLHIN	%!	╅	ח		HIV Iransm	-omo-	2.56	Block	ŀ					
	2004	-	-						,							-	,	,			-		-				\dagger	-	Koute of	Hetero-sexual	79.49		١,					
		pp⁴	NT⁴	PP	IN	ЬР	NT	PP	F	PP	ħ	PP	Ā	ЬР	IN	PP	M	РР	N	ЬР	NT	ЬР	NT		% On ART		0		-	Hetero	79				•			
		CINA 22L	USS-AINC	TOTAG		Jacob Colo	DIOUG DATIK	OT 331	U15-55H	78101 001	WS1-55H	MOD MODE	IVISIVI-SCI		001-881	CTC Mala	יכו כ ואומוב	olemal o	ICI C I GIII GIG	Defendance of CTO	ורור עפופוופת	i Alleh torio	ICIC DIJECT WAIK-III			(O.0) TO A	AKI (69)	חבות (ותא)			% of Total (N=39)		No. HRG-FSW	No upo mom	NO. HNG-INIDINI	No. HRG-IDU	% Positive, ICTC 2009	% Positive, PPTCT

* Inadequate sample size; - Data not available; 1 2011 Census, 2 Source: DLHS III; 3 Data presented only for years where sample size is valid (HSS-ANC: 300 tested, HSS-HRG/STD: 187 tested, ICTC: 600 tested, PPTCT and BB: 900 tested); 4 PP = percent positive, NT = number tested; 5 General clients and pregnant women

Patiala, Punjab

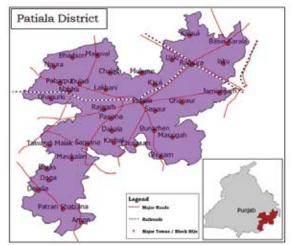
Background:

Patiala is a rural district situated in the Puadh region of the state of Punjab. It has a population of 18.92 lakhs with a sex ratio of 888 females per 1,000 males, and a female literacy rate of 70.5% with an overall literacy rate of 76.3% (2011 Census). The economy of Patiala mainly depends on agriculture and 38 percent of its population depends on agriculture. Besides agriculture, Patiala is fast emerging as an important industrial growth centre on the industrial map of the state. Industrial units are scattered all over the district mainly at Rajpura, Derabassi, Patiala, Samana and Nabha blocks which have become trucking halt points. The major highways that pass through Patiala are National Highways 22, 73 and 65.

HIV Epidemic Profile:

- Based on 2011 PPTCT and Blood Bank data, the level of HIV positivity was low (0.10 - 0.16%), stable at these levels over the last 4-5 years.
- Based on 2010 HIV Sentinel Surveillance (HSS) data, HIV
 prevalence among FSW was low (2.8%), and due to lack of data from previous years, a trend could not be determined.
- HIV positivity among ICTC attendees was high among direct walk-in (20.1%, 2011), seeing a consistent increase despite fewer people being
 tested under this category, positivity was low among referred (2.0%, 2011) clients. HIV prevalence was moderate among male (5.8%, 2011),
 who have had higher positivity in recent years than female (3.11%, 2011) clients, even with more people being tested for HIV. There has been
 a rapid scale-up of ICTCs from 2007 onwards with corresponding increase in the number of clients undergoing HIV testing at these sites.
- As per mapping conducted in 2009, FSW (888, 43% of total HRG) was the largest HRG in the district, followed by IDU (847, 41% of total HRG) and MSM (327, 15.8% of total HRG). Of the FSW, it was found that 100% of them were home based.
- Syphilis positivity rate among STI clinic attendees in 2011 was 0.37% despite an almost 50% increase in the number of episodes treated between 2010 and 2011.
- As per the 2001 Census, 4.9% of the male population were migrants; 40.2% of them migrated to other states and 26.2% migrated to other districts within the state.
- The top two destinations for out-of-state migration were Chandigarh and Ambala in Haryana.
- HIV awareness and RTI/STI awareness rates among women were 84.6% and 50.2% respectively (DLHS-III).
- Of the 1417 PLHIV registered at the Anti-Retroviral Therapy (ART) centre in 2009, 67% were on ART, 71% were illiterate or only had a primary school education, and 78% were widowed or divorced.

- There is an urgent need to analyze the data at ICTC/ART centers to profile the direct walk-in clients, who are representative of high-risk
 populations. Also, compilation and analysis of ICTC-PPTCT and STI data with a focus on characteristics like age, migration, occupation and
 geographic areas, and of ART data for profiling of positive people will provide knowledge on sexual dynamics and spread of HIV in this
 district.
- Since the largest HRG is FSW, better assessment of the size and profile of client populations, including migrants and truckers, will improve the understanding of district vulnerabilities.
- Need for focus on outreach efforts on hard-to-reach sub-groups, such as home-based FSW, since 100% of sex workers in the district are home-based and therefore hidden.
- Strengthen outreach programmes through awareness campaigns around trucking halt points and highways in the district.
- Bio-behavioural data on HRGs is required to get a better sense whether the infection is spreading. Introduction of some HSS-HRG sites would be helpful in this regard.



25973

24150

20678

15135

3919

866

2011

2010

2009

2007

2006

6842 0.37

4607

0.16

2011

2009 4439 0.50 2005

61.67

33 2010

99.09

Kurukshetra,

Ambala, Panchkula, Kaithal, Haryana Haryana Haryana

Chandigarh

Daily Injectors -100%; Non daily injectors-0%

Kothi -90.42%; Panthi-8.38%; Double decker-1.2%

300

200

Haryana

Intra-district

Intra-state 12848

Overall

Male Migration, 2001 Census

16469

19719 Inter-state

> 49036 4.97 100

No. out-migration % of male

847 \exists

327

MSM

41.08 0.04

15.86

33.59 1.67

26.20

40.21

% of total migration

0.02

1.30

Top districts for inter-state out-migration

District Population: 18,92,282 (6.8% of Punjab Population); Female Literacy¹: 70.5; ANC Utilization²: 64.3% Patiala, Punjab

		2004	2005	2005 2005	2007	2008	2009	2010	2011		HRG Size
	DD4		201	2024	3	2	2	2	-		
HSS-ANC	Ā N										FSW
FOTOG	Ы			*	0.19	0.16	0.17	0.17	0.16	Size Est.	888
	IN	,	,	*	8017	10004	12635	12701	15495	(Mapping, 2009)	8
Jaco boold	ЬР		0.12	0.22	0.19	0.27	0.17	0.09	0.10	% Total HRG	43.06
DIOUG BAIIK	IN		18520	18951	19841	22304	23020	26780	28615		
CE SSI	Ы	1.12	0.79	0.79	0.40	0.40		2.60		% Total Pop.	0.05
U15-51D	IN	274	250	250	250	247		250		-	
78701 0011	d.							2.80		Programme Trico	
WS1-SSH	IN							250		Programme	
PASPA 33H	ЬР									Coverage	009
MSS-IVISIVI	IN									5	
4	М										Home based
HSS-IDU	IN							,		T	-100%;
- I-W - I-	G.		9.47	7.74	7.43	4.51	06.9	6.72	5.80	lypology	based-0%.
ICIC Male	IN		1235	1511	3645	5765	5246	2658	7258		Street
ارست ال	PP		11.66	5.53	5.73	4.44	3.89	3.02	3.11		based-0%
ירור בפוומופ	IN		292	1592	3473	4909	6979	7614	7939	20, 70	27 15
Lower OTO	Ы		6.95	3.27	5.10	3.41	3	2.20	2.02	% <23 yrs.	07.00
ICIC Kelemed	IN		1555	2447	4922	6578	8079	11253	13198	70 INIGILIED	00.70
ICTC Direct	Ы		22.12	19.05	9.97	6.20	10.59	17.93	20.11		0000
Walk-in	IN		443	959	2196	4096	3436	2019	1999	o o o	2002
			굽	PLHIV Profile,	20					No. episones	1746
	% On ART	ART	% %	% III., Prim.	%	% widowed or	or			% Syphilis pos.	0.46
ADT (1417)	123		+2-6	7.1	Maillen	naninan	Т				
ANI (1417)	6				1	0/	Т			No.	2004
DEN (INA)		_	T/1111 5				_			FSW TIs	-
		Koute	or HIV Iran.	Koute of HIV Iransmission, IC IC 201	1 2011		-			MSM TIs	
	Hetero	Hetero-sexual	Homo-	Blood	Needle/ Svringe	Parent to	_	Unknown		IDU TIs	•
% of Total (N=668)	72	72.60	2.10	5.24	6.29	5.24	00	8.53		Comp. Tls	
			B	Block-Level Details	etails					ICICS 	-
No HBG-FSW	Taluka 1,									Blood Banks	
	614									STI clinics	2
No. HRG-MSM	Taluka 1,									ART centers	
	183									Link ART centers	,
No. HRG-IDU	Taluka 1,									PLHIV Networks	٠
	300									Red ribbon clubs	
% Positive, ICTC 2009	Nabha, 6.48	Patiala, 5.84	Rajpura, 3.03	Samana, 1.7						Comm. care centers	•
% Positive. PPTCT	Nabha.	Patiala.	Raipura.	S						Drop.in.contars	
	1511251	, acres a	5							DIOD-III-COINCID	

2009	0.14	0.2	0.16	0						Condom outlets			167420	495536	33075	48668	33807	39592
* Inadequate sample NT = number tested; ³	e size; - Data not aw ; ⁵ General clients an	not availab ents and pre	le; ¹ 2011 Cei egnant womer	ensus; ² Sourc	rce: DLHS III	II; ³ Data pr	esented only	for years w	here sample si	ze is valid (HSS-ANC: 3	100 tested, I	HSS-HRG/S1	D: 187 test	ed, ICTC: 600	tested, PPTCT	and BB: 900) tested); ⁴	PP = percent positive,

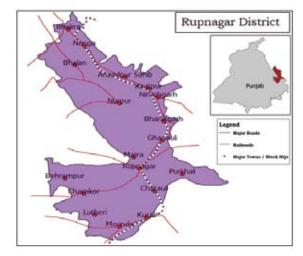
Rupnagar, Punjab

Background:

Rupanagar district is situated in Patiala division of the state of Punjab. It has a population of 6.83 lakhs with a sex ratio of 913 females per 1,000 males, and a female literacy rate of 77.2% and an overall literacy rate of 83.3% (2011 Census). The economy of Rupnagar district mainly depends on agriculture. Major industries of the district are also agriculture-based e.g. fertilizer manufacturing. Due to the presence of these industries, areas of Naya Nangal have become truck halting points. The major highway that passes through Rupnagar is National Highway 21.

HIV Epidemic Profile:

- Based on 2011 PPTCT and Blood Bank data, the level of HIV positivity was low (0.05%- 0.21%), and has been stable at these levels
- Based on 2010 HIV Sentinel Surveillance (HSS) data, HIV prevalence was high among IDU (34.8%) and low among FSW (0.8%) and MSM (2%), due to lack of continuous data points a trend could not be determined.



- HIV positivity among ICTC attendees was low among direct walk-in (0.97%, 2011) and referred (1.38%, 2011) clients. Although male (1.4%, 2011) have been more or less at par with female (0.82%, 2011) clients showing low HIV prevalence. Overall there has been a declining trend. A rapid scale-up of ICTCs from 2009 onwards has been observed.
- As per mapping conducted in 2009, FSW (643, 48.4% of total HRG) was the largest HRG in the district, followed by IDU (440, 33.1% of total HRG) and MSM (245, 18.4% of total HRG); of the FSW, 14.93% were home-based and 77.68% were street-based.
- The syphilis positivity rate among STI clinic attendees in 2011 was 0.28%, an increase from 2010 levels, despite an increase in the number of STI episodes treated.
- As per the 2001 Census, 6.4% of the male population were migrants; 34.5% of them migrated to other states and 19.9% migrated to other districts within the state.
- The top two destinations for out-of-state migration were Chandigarh and Panchkula in Haryana.
- HIV awareness and RTI/STI awareness rates among women were 91.9% and 41.3% respectively (DLHS-III).
- Of the 361 PLHIV registered at the Anti-Retroviral Therapy (ART) centre in 2009, 3% were 15-24 years of age, 70% were on ART, 73% were illiterate or only had a primary school education, and 82% were widowed or divorced.

- There is one IDU TI in the district and although Programme coverage is high as per numbers, the HSS positivity indicates that transmission is taking place. TIs should focus on repeat testing, safe injection practices and condom usage. Better assessment of the size and profile of client populations, including migrants and truckers, will improve understanding of the vulnerabilities.
- Although FSW prevalence is low, there needs to be a focus on the outreach efforts among mobile sub-groups, such as street-based FSW
 (77.6% of total FSW in the district) to keep it at the low levels.
- Strengthen outreach programmes through awareness campaigns around trucking halt points and highways in the district that are increasingly
 getting busier.
- There is a need to better understand the dynamics of HIV transmission among FSW, MSM and IDU, through further analysis of ICTC/PPTCT and ART data.
- There is some parental transmission observed which needs to be studied further to understand the source of these infections.

11906

9805

5681

2011

2010

2009

2008

Solan, Ambala, Himachal Haryana Pradesh

Una, Himachal Pradesh

Panchkula, Haryana

Chandigarh,

Intra-district 17539

Intra-state 7691

Inter-state

Overall 38532

13302

6.49 100

% of male No. out-migration

Male Migration, 2001 Census

45.52

19.96

34.52

% of total migration

Top districts for inter-state out-migration

Rupnagar, Punjab District Population: 6.83,349 (2.4% of Punjab Population); Female Literacy: 77.2%; ANC Utilization²: 69.7%

		2004	2005	2006	7005 2007	2008	2009	2010	2011		HRG Giza	a	
		5004	2002	2002	7007	2000	5003	20102	707		DVIII		ŀ
HSS-ANC	PP4										FSW	MSM	<u>D</u>
	2					, 6	5	, ,	10.0	Cizo Ect			-
PPTCT	7 7					0.30	2787	01.10	250.0	(Mapping, 2009)	643	245	440
	<u> </u>		0.34	0.32	0.10	0.14	0.11	0.76	0.21	Odulicator /0	CV 0V	10 15	55 55
Blood Bank	: 5		2332	2447	2906	3410	4451	5086	5781	70 IOIGI IING	40.47	10.40	33.13
dE 3 331	8									% Total Pop.	0.09	0.04	0.06
HSS-SID	Þ												
7402 5511	М			4.80	0.40			8:0		Programme			'
HSS-FSW	N			250	248			249		larget			1
4 000	A.			4.80	0.40			2		Programme	009	200	350
HSS-IMSM	N			250	247			200		coverage	Home based-		
	М					5.43		34.8			14.93%;	Kothi -	
HSS-IDU	N					497		250		Typology	Brothel	38.13%; Danthi 0%.	Injectors
CTC MACIE	Ы		*	60.9	2.50	3.06	1.97	1.79	1.47	iybology	paseq-	Double	
ICIC Male	Þ		*	591	2637	2710	4067	3127	3136		7.39%;	decker-	
CTC Fomala	ЬР	-	*	3.40	2.28	4.74	2.25	1.24	0.82		Street based-	2.16%	40.81%
רור ובוומוב	Ä		*	1205	2502	950	1956	2582	3406	2,7,30,70	37.76	3C V 3	20.10
LCTC Dofound	Ы		*	2.29	0.18	3.31	1.98	1.65	0.97	70 <2.3 yrs.	27.75	04.73	00.12
ורור שפופוופת	IN	-	*	1264	2719	2199	4089	3213	4007	70 Ividilleu		23.10 CTI/DTI	24.5
ICTC Direct	Ы		*	9.05	5.29	3.76	2.22	1.40	1.38		0000	2000	0100
Walk-in	F		*	532	2420	1461	1934	2496	2535	No opicolor	0007	5002	70107
			Ь	PLHIV Profil	e, 2009					Treated	06	1016	1567
	, no %	On ART	% %	% III., Prim.	%	% widowed or	or			% Syphilis pos.	0	1.53	0.19
V TO C 1)	25	t	+7-01	Luu.	Mall lea	naninan	T						Programme
AKI (361)	0/		n	73		78	T			No.	2004	2005	2006
DEIN (INA)		_ 2								FSWTIs	,		
	-	KOL	Ite of HIV Iran	ISMISSION, IC	11, 2011	:	_			MSM TIs			
	Hetero	Hetero-sexual	-omor	Blood	Needle/ Swrings	Parent to	- R	Unknown		IDUTIs		-	-
% of Total (NI_7/1)	+	75.69	2 70	-	2) IIII G	0 46	u	5.41		Comp. TIs			2
יו סומו (ואר)	$\frac{1}{2}$	90		Slock-Level Detail	Dotaile	2	5	-		ICTCs	-	-	-
			_	JOER ECVE	Crains					Total tested ⁵	•	566	1796
No. HRG-FSW	laluka 1,			•						Blood Banks	3	3	3
	089									STI clinics	2	2	2
No HRG-MSM	Taluka 1,	,		,	,					ART centers			,
)	139									Link ART centers			
No HRG-IDII	Taluka 1,									PLHIV Networks	-		
001-001	370	'	'	'	'	'	'	'	'	Red ribbon clubs	•		,
% Positive, ICTC	A.P.S.,	Nangal,	Ropar, 2.1							Comm. care			
% Positive.	A P.S.	Nangal	Ronar	L						Drop-in-centers	ŀ		
/O I OSIGIAC,	::												

* Inadequate sample size; - Data not available, 1 2011 Census, 2 Source: DLHS III; 3 Data presented only for years where sample size is valid (HSS-ANC; 300 tested, HSS-HRG/STD: 187 tested, ICTC; 600 tested, PPTCT and BB: 900 tested); 4 PP = percent positive, NT = number tested; 5 General clients and pregnant women

71833

124641

97563

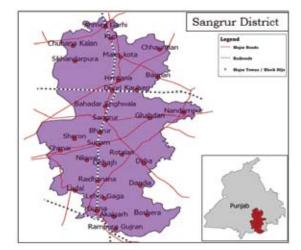
Sangrur, Punjab

Background:

Sangrur is bounded by Ludhiana in the North, Barnala in the West, Patiala in East and Fatehbad of Haryana in the South. It has a population of 16.54 lakhs with a sex ratio of 883 females per 1,000 males, and a female literacy rate of 62.9% with an overall literacy rate of 68.9% (2011 Census). The economy of Sangrur district mainly depends on agriculture and allied activities. There are two large agriculture processing industries in the district. The major highways that pass through Sangrur are National Highways 64 and 71.

HIV Epidemic Profile:

- Based on 2010 HSS-ANC, and 2011 PPTCT and Blood Bank data, the level of HIV positivity was low (0.06%-0.25%), with a stable to declining trend.
- HIV positivity among ICTC attendees was low to moderate among direct walk-in (3.5%, 2011) and lower among referred (1.3%, 2011) clients. However, male clients overall had a higher positivity (2.5%, 2011) than female (1.3%, 2011) clients but HIV prevalence was low. Overall there was a declining trend.



- As per mapping conducted in 2009, IDU (958, 56.2% of total HRG) was the largest HRG in the district, followed by FSW (582, 34% of total HRG) and MSM (170, 9.9% of total HRG).
- The syphilis positivity rate among STI clinic attendees in 2011 was 1.4%.
- As per the 2001 Census, 4.4% of the male population were migrants; 15.2% of them migrated to other states and 29.2% migrated to other districts in other states.
- The top two destinations for out-of-state migration were Fatehabad in Haryana and Chandigarh.
- HIV awareness and RTI/STI awareness rates among women were 72.5% and 55.3% respectively (DLHS-III).
- Of the 816 PLHIV registered at the Anti-Retroviral Therapy (ART) centres in 2009, 65% were on ART, 67% were illiterate or only had a primary school education, and 75% were widowed or divorced.
- There has been a gradual scale-up of ICTCs from 2008 onwards with corresponding increase in the number of clients undergoing HIV testing at these sites.
- Though there were good number of IDUs in the district, the earlier existing IDU TI was dropped in 2011.

- There is a need to increase coverage amongst FSW and IDU, currently with no TIs functioning in the district.
- Strengthen outreach programmes through awareness campaigns around trucking halt points and highways running through the district.
- There is a large presence of IDU and FSW in the district and there is a need to better understand the dynamics of HIV transmission among FSW, IDU and MSM, either through initiation of HRG sites for HIV Sentinel Surveillance (HSS) or further analysis of ICTC/PPTCT and ART data
- There is also a need for in-depth analysis on the profiles of IDU, MSM and FSW to enhance our understanding of district vulnerabilities.

2010

2009

2008

11519

10993

1465

8411

Ambala, Haryana

Sirsa, Haryana

Panchkula, Haryana

Fatehabad, Chandigarh Haryana

Top districts for inter-state out-migration

29.16

15.27

pop. % of total migration

lintradistrict 26401 2.47 55.57

Intrastate

Interstate 7257

Overall

Male Migration, 2001 Census

13853

47511

No. outmigration % of male

Sangrur, Punjab

			HIV	evels and	Trends ³								Vulnera
		2004	2005	2006	2007	2008	2009	2010	2011		HRG Size		
2144 2311	PP⁴			0	0.12	0.37		0.25			EC1/V	NACNA	2
HSS-AINC	NT⁴			400	800	800		400			AACJ	IVISIVI	20
FOTOG	ЬР					0.35	0.14	0.08	0.08	Size Est.	587	170	97.0
7	F					3164	5537	5228	5925	(Mapping, 2009)	705	2	3
Jacob Coold	ЬР		0.23	0.12	80.0	0.18	0.02	0.07	90.0	% Total HRG	34.04	9.94	56.02
Blood Bank	F		3444	3880	4624	2908	7580	7207	7871				
E	Ы									% Total Pop.	0.04	0.01	0.00
UIS-SCH	F									-			
74.00	Ы		,	,						Programme Target		٠	•
HSS-FSW	Ā									Programme	0	0	300
PACKA DOLL	ЬР									Coverage	I leave heard		2
MSN-CCH	Þ										Home based-	Vo+bi MA	Injector
4	М									Tynology	Rrothel	Panthi-NA:	
HSS-IDO	F									figuration	based-NA:	Double	
-1-14 01-01	М		*	10.42	60.9	3.32	2.85	2.31	2.51		Street based-		
ICIC Male	Þ		*	480	1527	2740	2911	3112	3107		NA		NA
- T	М		*	3.04	2.82	2.19	1.69	1.73	1.37	% <25 yrs.	-	-	-
ICIC remaie	F		*	979	2408	2507	3017	2653	2487	% Married			-
ICTC Bofornod	PP		*	5.41	3.14	1.77	1.36	1.72	1.32		STI/RTI	RTI	
ורור ויפופוופת	NT		*	795	2550	3906	4266	3718	3875		2008	5009	2010
ICTC Direct	ЬР		*	8.36	5.85	5.74	4.57	2.64	3.55	No. episodes	2195	3526	2668
Walk-in	Ā		*	311	1385	1341	1662	2047	1719	treated		220	
			F	PLHIV Profile, 2009	, 2009					% Syphilis pos.	0	0	19.24
	TAV AO 70			% III., Prim.	%	% widowed or	or					-	Programm
	5		15-24	Edu.	Married	divorced	7			No.	2004	2005	2006
ART (816)	9		-	67	13	75	_			FSWTIs	•	•	-
DLN (NA)										MSM TIs			
		Route	Route of HIV Transmission, ICTC 2011	mission, IC	TC 2011					IDU TIS			
	Hetero	Hataro-saxiial	Homo-	Rlood	Needle/	Parent to	Jall	Inknown		Comp. TIs			
	\dashv	4	\dashv	\dashv	Syringe	Child	5			ICTCS	-	-	-
% of Total (N=112)		87.50	3.57	0.89	3.57	3.57	0.	0.89		Total tested ⁵	-	377	1106
			Blo	ock-Level D	Details					Blood Banks	2	2	2
No. HRG-FSW			,		,		-			STI clinics	2	2	2
No HRG-MSM										ART centers			
										Link ART centers			
No. HRG-IDU										PLHIV Networks	•		
% Positive, ICTC	Dhuri,	Malerkotla,	Sangrur,	<i>U</i> 1	,	,	,	,	,	Red ribbon clubs			
5009	- 1	2.11		\dashv						Comm. care centers	•		
% Positive, PPTCT	Dhuri,	Malerkotla		Vinam						Dron-in-contore			
			Canariir	_						חוסט-ווו-כפוונפוס			

* Inadequate sample size - Data not available, 1 2011 Census; 2 Source: DLHS III; 3 Data presented only for years where sample size is valid (HSS-ANC: 300 tested, HSS-HRG/STD: 187 tested, ICTC: 600 tested, PPTCT and BB: 900 tested); * PP = percent positive, NT = number tested; * General clients and pregnant women

Shahid Bhagat Singh Nagar, Punjab

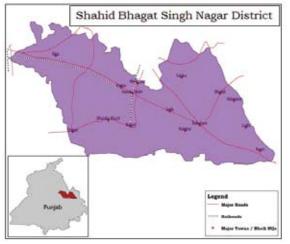
Background:

Shahid Bhagat Singh Nagar formerly known as Nawanshahr is also referred to as the Land of Patriots. The district is situated in the western part of the state of Punjab. It has a population of 6.14 lakhs with a sex ratio of 954 females per 1,000 males, and a female literacy rate of 74.3% with an overall literacy rate of 80.3% (2011 Census). The economy of the district mainly depends on agriculture. People of this district are economically sound. Large numbers of families from the district have settled abroad in foreign countries. All the towns and the villages are well connected by roads. Nawanshahr also has rail tracks connecting it with Jalandhar, Rahon and Jaijon. However, there is no major National Highway passing through the district.

HIV Epidemic Profile:

- Based on 2010 HSS-ANC, and 2011 PPTCT and Blood Bank data, the level of HIV positivity low (≤0.1%) with a stable trend for all
- HIV positivity among ICTC attendees was near-moderate among direct walk-in (4.8%, 2011), and low among referred (1.7%, 2011) clients, and also among male (3.5%, 2011) and female (1.4%, 2011) clients, with an overall stable to declining trend. There has been a gradual scale-up of ICTCs since 2008
- As per mapping conducted in 2009, IDU (1335, 74.9% of total HRG) was the largest HRG in the district, followed by FSW (247, 13.8% of total HRG) and MSM (200, 11.2% of total HRG).
- The syphilis positivity rate among STI clinic attendees in 2011was 0%.
- As per the 2001 Census, 3.8% of the male population were migrants; 16.8% of them migrated to other states and 44.6% migrated to other districts within the state.
- The top two destinations for out-of-district migration were Ludhiana and Hoshiarpur in Punjab and the top two out-of-state destinations were Chandigarh and North West Delhi.
- HIV awareness and RTI/STI awareness rates among women rates were 88.2% and 40.8% respectively (DLHS-III).
- Of the 478 PLHIV registered at the Anti-Retroviral Therapy (ART) centre in 2009, 28% were on ART, 30% were illiterate or only had a primary school education, and 31% were widowed or divorced.
- Transmission by infected needle-syringe was the most common route of transmission of HIV (42%) in the district.
- Considering large number of IDUs in the district there was an IDU TI in the district.

- Owing to large presence of IDUs, and one of the major routes of transmission in the district being needles and syringes, there is a need to
 better understand the risk behavior, and dynamics of HIV transmission among IDU, FSW and MSM either through initiation of HRG sites for
 HIV Sentinel Surveillance (HSS) or further analysis of ICTC/PPTCT and ART data.
- Focus on outreach efforts among based FSW and IDU- consider increasing Programme coverage to these populations.
- Strengthen outreach programmes through awareness campaigns in the district.
- Since the largest HRG is IDU, better assessment of their profile will help in improving the understanding of district vulnerabilities.



2010

2009

2008

2007

2006 5.04

2011

2010

0

6315

5798

5887

2198

1934

340

Shahid Bhagat Singh Nagar, Punjab

District Population: 6, 14,362 (2.2% of Punjab Population); Female Literacy¹: 74.3 %; ANC Utilization²: 64.5%

Intra-district

Intra-state

Inter-state 1972

Overall

2

Male Migration, 2001 Census

4533 1.48

11735 3.83 100

38.63

44.57

1.71

0.64

% of male pop.

migration

No. out-

1335 74.92 0.22

% of total

migration

0

Top districts for inter-state out-migration

Panchkula, Haryana

Faridaba, Haryana

North West Delhi

Chandigarh

NA; Non daily injectors-Daily Injectors -

Ϋ́

	ı		MSM	000	700	11.22		0.03			0		Kothi-NA;	anthi-NA;	Double	ברצבו-ואם				H	+	+	1.8/		2005 20		<u> </u>		-	- 34	3	2		 			
	HRG Size		PSW	777	747	13.86	5	0.04			-	Home based-			based-NA;				ITO/ITO	JOOG STINKII	+	+	0.28	ŀ	2004 2				-		2	2					
				Size Est.	(Mapping, 2009)	% Total HRG	O, Tohel Don	% lotal Pop.	Programme Target	Programme	Coverage			Typology	<u>ئ</u> م	100	% < 25 vrs	% Married				No. episodes treated	% syphilis pos.		No.	MSM TIS	DUTIS	Comp. TIs	ICTCs	Total tested ⁵	Blood Banks	STI clinics	ART centers	Link ART centers	PLHIV Networks	Comm care centers	
	2011			80:0	3890	60.0	9387									3.50	1600	1.45	825	1.75	1596	4.83	829													,	
	2010	0	323	0.10	3086	0.10	8410	-	-			-			-	1.93	1868	2.13	844	1.25	1757	3.35	955						nwo						-		
	2009			0.04	2688	0.03	8964									2.75	2108	1.19	1091	1.62	1477	2.73	1722		or .	_	_		Unknown						-		
	2008	0	400	0	1084	0.10	8324	-	-			-				5.69	615	3.21	499	8.7	23	4.49	1091		% widowed or	31			Parent to	Child	>	Ī			-		
nde3	2007	0	400		-	0.07	10050	-	-			-			-	7.24	663	2.99	1271	1.27	1038	8.15	968	5009	% %	6		2011	Needle/	Syringe 42 65	50.2	2 2			-		
UIV I ovole and Transfe	2006	0	400		-	0.07	8150	-	-			-			-	*	*	*	*	*	*	*	*	Profile, 20	% III.,	_		Route of HIV Transmission, ICTC 2011	Blood	+	- 2	רבאבו חבו			-		
UIV I ov	2005		-		-	0.08	7845	-	-			-			-			-				*	*	PLHIV			l	HV Transmis	Homo-sexual B	-		DIDCK			-	Tehsil,	
	2004							-				-													1 % 15-24	0		Route of I		+	-					Nawanshahar,	· ·
HIV cond Transfel		Pb⁴	NT4	ЬР	NT	ЬР	NT	ЬР	NT	PP	¥	ЬР	N	ЬР	NT	ЬР	¥	P.	F	ЬР	Þ	PP	M		% On ART	28			Hetero-sexual	78 53	40.33				-	Balachaur, Na	×
		0144	HSS-AINC	DETCT		Jaca boold	DIOUU BAIIN	ULC CITI	U15-56H	74133 3311	WS1-SSH	HSC-MSW.	INICINI-CCLI	1101 3311	001-660	ICTC Male	200	ICTC Female	,	ICTC Referred	ייי אפופוופק	ICTC Direct	Walk-in			ART (478)	DLN (NA)			% of Total (NI—69)	70 UI IUIAI (IN=00)	No upg. Ec.W.	NO. HING-II SW	NO. HKG-MSM	No. HRG-IDU	% Positive, ICTC	

* Inadequate sample size; - Data not available; 1 2011 Cersus; 2 Source; DLHS III; 3 Data presented only for years where sample size is valid (HSS-ANC; 300 tested, HSS-HRG/STD; 187 tested, ICTC; 600 tested, PPTCT and BB: 900 tested); * PP = percent positive, NT = number tested; * General clients and pregnant women

Tarn Taran, Punjab

Background:

Tarn Taran district is bounded by Amritsar in the North, Kapurthala in the East, Firozpurin the South and by Pakistan in the West. It has a population of 11.20 lakhs with a sex ratio of 898 females per 1,000 males, and a female literacy rate of 62.9% with an overall literacy rate of 69.4% (2011 Census). The economy of Tarn Taran mainly depends on agriculture. The major highways that pass through Tarn Taran are National Highways 1 and 15.

HIV Epidemic Profile:

- Based on 2010 HSS-ANC, and 2011 PPTCT and Blood Bank data, the level of HIV positivity was low (0%-0.38%), stable for the last 5 years.
- Based on 2010 HSS data, HIV prevalence among IDU was high (20.8%). There was no HSS site for other HRG in the district. HIV positivity at ICTCs was moderate among direct walk-in (8.1%, 2011) and low among referred (3.2%, 2011) clients, suggesting continuing transmission among males and female in Tarn Taran



through risky behavior. HIV positivity among ICTC attendees was moderate among male (4.9%, 2011) and low among females (3.4%, 2011). Overall there was a stable to declining trend.

- As per mapping conducted in 2009, IDU (930, 56.06% of total HRG) was the largest HRG in the district, followed by FSW (699, 42.1% of total HRG) and MSM (30, 1.8% of total HRG). There has been a rapid scale-up of ICTCs from 2010 onwards.
- The syphilis positivity rate among STI clinic attendees in 2011 was 0.2%.
- HIV awareness and RTI/STI awareness rates among women rates were 91.2% and 70.9% respectively (DLHS-III).
- Migration data was not available as the district was recently formed in 2006.
- Of the 793 PLHIV registered at the Anti-Retroviral Therapy (ART) centre in 2009, 14% were 15-24 years of age, 39% were on ART, 48% were illiterate or only had a primary school education, and 66% were widowed or divorced.

- Given the large presence of high positivity rate among IDUs, and moderate to high positivity among direct walk-in clients at ICTCT who
 represent populations with risky behavior, there is a need to establish mechanisms to understand the dynamics of HIV transmission among
 HRG populations.
- There is a need to better understand the dynamics of HIV transmission among FSW and IDU, either through initiation of FSW and IDU sites for HIV Sentinel Surveillance (HSS) or further analysis of ICTC/PPTCT and ART data.
- Focus on outreach efforts among HRG populations in the district and emphasise on quality of interventions.
- Strengthen outreach programmes through awareness creation around trucking halt points and highways in the district.
- Since the largest HRG is IDU, better assessment of the profile will help in the improving the understanding of district vulnerabilities.

2010

2009

2008

2007

3948 0.22

2011

2010 1864 0.15 2006 10228

6562 9

6117

4963

2293

9

Tarn Taran, Punjab

Intra-district

Intra-state

Inter-state

Overall

No. out-migration % of male

930

 \exists

90.99 0.08

pop. % of total migration

Male Migration, 2001 Census

Top districts for inter-state out-migration

Daily Injectors -21.71%; Non daily

300

injectors-55.89% 43.19

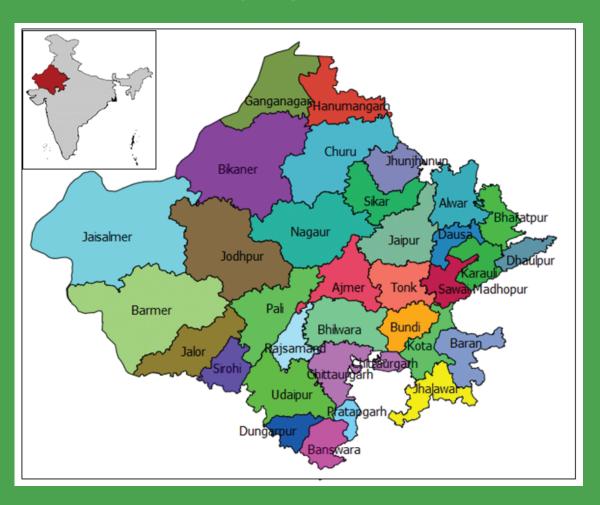
			HIV	IIV Levels and Trends	Trends ³							
		2004	2005	2006	2007	2008	2009	2010	2011		HRG Size	
JIV JAN	bb⁴			0.25		-		0			ECW/	MCM
2NIX-0011	NT ⁴			400				389			AAC I	E CE
DDTCT	ЬР					0.58	0.37	0.22	0.38	Size Est.	600	30
	N	,	,	,	,	1546	1880	2324	4744	(Mapping, 2009)	660	ŝ
1	G.		0.35	0.33	0.32	0.30	0.27	0.23	0.05	% Total HRG	42.13	181
Blood Bank	IN		1948	2959	3725	3984	4018	3952	3878		2	2
ar.	Ы									% Total Pon	0.06	c
UIS-SCH	IN	,										,
74102 0011	Ы	,								Programme Target		
HSS-FSW	N									Programme	C	c
84084	М									Coverage	,	,
HSS-IMSM	¥										Home based	
4	Ы							20.8		Tomor	- NA;	Kotni-INA;
HSS-IDU	¥							250		l ypology	hasad-NA:	Double
	Ы				8.93	5.58	6.10	5.54	4.98		Street based-	
ICIC Male	N				1008	2060	2706	2492	2952		Ā	
- I	Ы				2.60	6.41	5.55	4.18	3.44	% <25 yrs.		
	Ħ	,			1285	1357	1531	1746	2532	% Married		
J-0 010	G.				4.11	3.52	4.37	2.97	3.26		STIVRTI	RTI
ICIC Reterred	¥				1240	2616	3550	2829	4351		2008	2009
ICTC Direct	Ы		,	,	10.54	13.73	13.83	9.01	8.12	No. episodes		177
Walk-in	NT	-	-		1053	801	687	1409	1133	treated		6/51
			Ь	LHIV Profile	, 2009					% Syphilis pos.		0
	% On ART		% 15-24	% III., Prim. Edu.	% Married	% widowed or divorced	Jo			o _N	2004	2005
ART (793)	39		14	48	9	99				FSW TIS	,	507
DLN (NA)	,		,							MSM TIS	ŀ	
		Route	of HIV Tran	Route of HIV Transmission, ICTC 2011	TC 2011					IDU TIS		
	Hetero	Hetero-sexual	Homo-	Blood	Needle/	Parent to	Unkı	Juknown		Comp. TIs		
(A) (A) (A) (A)	-		sexnal	+	Syringe	Child	-			ICTCs	-	-
% of lotal (N=234)	10.51	- C	0		50.02	0.84	7.	7.14		Total tested ⁵		
			2	Block-Level I	Details					Blood Banks	2	2
No. HRG-FSW	-							-		STI dinics		
No. HRG-MSM		,	,		,		,	,		ART centers	-	-
	Taliika 1									Link ART centers	-	-
No. HRG-IDU	433 1,									PLHIV Networks		
% Positive, ICTC										Red ribbon clubs		
2009										Comm. care centers		,
% Positive, PPTCT										Drop-in-centers		
2009										Condom outlots		-

* Inadequate sample size; - Data not available; ' 2011 Census; ' Source: DLHS III, ' Data presented only for years where sample size is valid (HSS-ANC: 300 tested, HSS-HRG/STD: 187 tested, ICTC: 600 tested, PPTCT and BB: 900 tested), * PP = percent positive, NT = number tested; ' General clients and pregnant women

26092

50120

RAJASTHAN

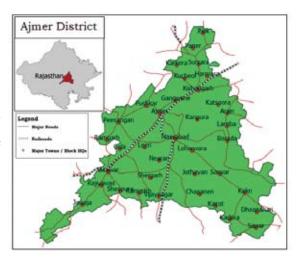




Ajmer, Rajasthan

Background:

Ajmer is an oasis wrapped in the green hills and is situated in the heart of the state surrounded by the Aravalli Mountains. It has a population of 25.84 lakhs with a sex ratio of 950 females per 1,000 males, a female literacy rate of 56.4% and an overall rate of 70.4% (2011 Census). Ajmer is a manufacturing trade centre; notable products like cotton, woolen textiles, leather, hosiery, shoes, soap, and pharmaceuticals are manufactured in the district. Poultry is a major source of income for farmers. Ajmer also has engineering workshops, re-rolling mills, electronic component plants etc; the nearby town of Kishangarh is one of the largest centers for marble products, employing about 7,000 people, which contributes to the in-migration of laborers. The district lies on Golden Quadrilateral National Highway (NH) 8, midway between Delhi and Mumbai and is located about 400 km from Delhi and 135 km from Jaipur. The Ajmer-Jaipur expressway is a 6 lane highway.



HIV Epidemic Profile:

- Based on HSS-ANC (2010), PPTCT and Blood Bank (2011) data, the level of HIV positivity was low (≤0.14%), with a stable to declining trend.
- Based on 2010 HSS, HIV prevalence among FSW was low at 0.8%, with a fluctuating trend.
- HIV positivity among ICTC attendees in 2011 was low among both male (3.0%) and female (2.1%) clients, and also among direct walk-in (4.2%) and referred (1.7%) clients. The trend was stable to declining among all except direct walk-in where it was fluctuating.
- As per mapping conducted in 2009, FSW (997, 50% of total HRG) was the largest HRG in the district, followed by IDU (589, 29.4% of total HRG) and MSM (416, 20.7% of total HRG); of the FSW, 77.9% were home-based and 20.7% were brothel-based.
- The syphilis positivity rate among STI clinic attendees in 2011 was 0.09%.
- As per the 2001 Census, 5.3% of the male population were migrants; 24.5% of them migrated to other states and 43.3% migrated to other districts within the state.
- The top two destinations for out-of-state migration were Mumbai, Maharashtra and Ahmedabad, Gujarat.
- HIV awareness and RTI/STI awareness rates were 90.6 and 45.8% among women, respectively (DLHS-III).
- Of the 314 PLHIV registered at the Anti Retroviral Therapy (ART) centre in 2009,4% were 15-24 years of age, 55% were on ART, 39% were illiterate or only had a primary school education, and 51% were widowed or divorced.
- There has been a rapid scale-up of ICTCs from 2008 onwards; this corresponded with the significant growth in the number of clients undergoing HIV testing at these sites.
- As per 2011 programme response data there was an ART centre in the district.

- Focus on outreach efforts on hard-to-reach sub-groups, such as home-based FSW.
- Strengthen outreach programmes through awareness campaigns around industries, trucking halt points and highways in the district as well
 as among migrant population.
- There is a need to better understand the dynamics of HIV transmission among MSM and IDU, either through initiation of HRG sites for HIV
 Sentinel Surveillance (HSS) or further analysis of ICTC/PPTCT and ART data.
- Since the largest HRG is FSW, better assessment of the size and profile of clients population, including migrants and truckers, will improve understanding of district vulnerabilities.

15 50844

16 44617

-16 23915

10

28

7

Ξ

2011

2010

2008

West Delhi

Surat, Thane, Gujarat Maharashtra

Ahmadabad, Gujarat

Mumbai (Suburban), Maharashtra

Ajmer, Rajasthan

48.4%	
tion ² :	
C Utiliza	
%; AN	
₹.	ı
y¹: 56.4%	
e Literacy	
η); Femal	
ılatioı	
Popu	
jasthan	
% of Rē	
3 (3.7%	
25,84,91	
Population: 2	
District	

Intra-district

Intra-state

Male Migration, 2001 Census

Overall Inter- Intra-

19255

25850

59727 5.29 100

32.24

43.28

24.48

pop. % of total migration

% of male No. out-migration

Top districts for inter-state out-migration

1.71

				III A FENEIS AIIM III EIIMS										
		2004	2005	2006	2007	2008	2009	2010	2011		HR	HRG Size		
CIAA COL	PP⁴			0	0	0.25		0			FSW	MSM	ngi	
HSS-AINC	NT4			400	399	399		400		Size Ect				_
TOTAG	ЬР	*	*	*	0.18	0.18	0.18	0.14	0.13	(Mapping,	997	416	589	
	TN	*	*	*	3836	15023	25400	29741	32541	(5005)				
1	Ы	0.30	0.30	0.20	0.20	0:30	0.20	0.23	0.14	% Total HRG	49.80	20.78	79.47	
Blood bank	IN	8254	14009	17297	20894	24079	24845	25772	29560					_
OLD SU	ЬР	*	*	7.19	1.99	8.80				% Total Pop.	0.004	0.02	0.02	
U18-88H	IN	*	*	250	250	250				Drogrammo				
/0.53 550	ЬР	-	4	1.60	2.80	7.20		08.0		Target		,		
N32-F3W	NT		225	250	250	250		250		Programme	2402	710	242	1
MON OUT	ЬР					-				Coverage	5400	<u>+</u>	74.7	
INISINI-SCH	LN										Home-based-			
IIUI SSII	PP		-		-	-					Brothel	Kothi-38.22%;	_	
001-881	NT	-	-	-	-	-		-		Typology	-pased	Panthi-9.62%;		
OTC MANIE	ЬР	-	14.93	11.79	8.21	5.15	3.95	4.41	3.02		20.77%;	52 16%	Non dally injectors-	
ICIC Male	TN	-	556	1332	2582	2596	10097	10924	17140		Street based-		NA	
	윤	,	16.81	16.01	2.96	5.70	2.73	2.84	2.05	20, 20 mg	1.28%			_
	NT		238	531	4801	3536	9120	10179	14328	% Married	_
Fried OEO	ЬР		14.06	13.73	5.53	4.48	2.94	2.56	1.72			STI/RTI		-
	TN		498	1100	3471	5379	12166	14686	20430		2008	2009	2010 20	2011
ICTC Direct	Ы		17.91	11.93	4.14	69.9	4.11	6.16	4.17	No. episodes	5137	6896	17 9 14	14916
Walk-in	TN	-	296	763	3912	3513	7051	6417	11038	treated	4	+	+	2
				PLHIV Profile, 2009	ile, 2009					% Syprills pos.	05:1	CC.I	Programme	0.09
	% On ART		% Ⅲ.,		%	ved or				No.	2004	2005	2006 20	2007
ART (314)	F.	15-24	\neg	du. Married	ed divorced	pec				FSWTIS				
(NA)	3		3 '	,	5					INITIN				
(10.1)		Route	Route of HIV Transmission ICTC 2011	nission ICT	7 2011					Comp. TIs			-	١.
	Hetero-	-Omo-	-	Needle	/ Parent t	L		Ī		ICTC	2		Н	7
	sexual	sexual	Blood	Syringe	Child		Unknown			Total tested ⁵	22		2305 11	11219
% of Total Pos.	85.63	0.13	0.38	1.38	7.38		5.13			Blood Banks STI clinics	2	2	7	4
				Block-Level Details	l Details					ART centers				
No. HRG-FSW						,		٠		Link AR I centers				
No. HRG-MSM					,				,	PLHIV Networks				
No. HRG-IDU	1	,						1		Red ribbon				
% Positive, β	Arai, 0.37	Bhinai, 0.45	Jawaja, 5.01	Kekri, 1.02	Kishangarh, 1.5	Masuda, 0.81%	Pisangan, 2.54	Srinagar, 4.33		Comm. care			,	
	Ajmer	Jawaia.		Bhinai	Masuda	Pisangan.		Srinagar	Kishangarh.	Drop-in-centers				١,
PPTCT	(urban), 0.19	0.27	Kekri, 0.1	0.3	0.1	0.29	Arai, 0	0.29	0.07	Condom				

* Inadequate sample size; - Data not available; 1 2011 Census; 2 Source: DLHS III; 3 Data presented only for years where sample size is valid (HSS-ANC: 300 tested, HSS-HRG/STD: 187 tested, ICTC. 600 tested, PPTCT and BB: 900 tested); 4 PP = percent positive, NT = number tested; 5 General clients and pregnant women

Alwar, Rajasthan

Background:

Alwar district is situated in the north-eastern part of Rajasthan. It is bound on the north by Rewari district of Haryana, on the east by Bharatpur and Mewat district of Haryana, on the south by Dausa, and on the west by Jaipur district. It has a population of 36.71 lakhswith a sex ratio of 894 females per 1,000males, a female literacy rate of 56.78% and an overall literacy rate of 71.68% (2011 Census). The economy of Alwardistrict mainly depends on the agriculture. The industrial scenario in Alwar is on a gradual riseand a large number of small and large scale industries are located in the various industrial areas of the district. A wide range of products are being exported by the industries established in Alwar which includes products like shaving blades, hand tools, surgical blades, chemicals, tyre—tube, etc. Thus, foreign export is also playing an important role in the economy of Alwar district. National Highway NH-8 passes through the district.



HIV Epidemic Profile:

- Based on 2010 HSS-ANC, the level of HIV positivity was low at zero
 percent with a declining trend.As per 2011 PPTCT and Blood Bank data, the level of HIV positivity was low (≤ 0.13%)with stable trends.
- According to 2010 HSS-FSW, the level of HIV positivity was low among female sex workers at 4.40%, with a stable trend.
- In 2011, HIV positivity among ICTC attendees was low among male (0.65%) and female (1.03%) clients, and also among referred (0.67%) and direct walk-in (2.75%) clients. ICTC clients represented an overall stable trend in last three years.
- As per mapping conducted in 2009, MSM (275, 49.46% of total HRG) was the largest HRG in the district, followed by FSW (241, 43.35% of total HRG) and IDU (40, 7.19% of the total HRG). Of the MSM,51.27% were double decker and 37.09% were Kothi and of the FSW, 93.48% were home-based.
- As per the 2001 Census, 4.71% of the male population was migrant population; 32.10% of them migrated to other statesand 22.19% migrated to other districts within the state.
- The top two destinations for out-of-state migration were Rewari in Haryana and South West Delhi.
- In 2011, 5596 STI episodes were treated and the syphilis positivity rate among STI clinic attendees was 0%.
- HIV awareness rate and RTI/STI awareness rate among women were 34.9% and 40.1% respectively (DLHS-III).
- In 2009, of the 241 PLHIV registered at the Anti-Retroviral Therapy (ART), 5% were 15-24 years of age, 61% were on ART, 46% were illiterate
 or only had a primary school education and 46% were widowed or divorced.
- Heterosexual transmission accounted for 89.33% of the transmission, but more prominently, transmission from parent to child accounted for 8.56% of total transmissions.
- There has been a rapid scale-up of ICTCs from 2008 onwards with corresponding increase in the number of clients undergoing HIV testing at thesesites.
- Red ribbon clubs (RRCs) were established in 2008 to generate awareness about HIV/AIDS in the youth. 31 RRCs were operational in the
 district in 2011.

- Focus on outreach efforts among hard-to-reach sub-groups, such as home-based FSW.
- Strengthen outreach programme through awareness campaigns around trucking halt points and highways in the districtas well as among migrant population.
- Parent to child transmissions are high, more needs to be done to understand the profile of these attendees through in-depth analysis of ICTC and ART data.
- Even though the largest HRG is MSM, there is no Targeted Interventions for MSMs, establishing a composite TI may be considered.
- There is a need to continue to focus on HIV prevention programmes, with an emphasis on HRGs.
- Focused IEC for general population with awareness and sexual risk reduction messages is recommended.

37397

28183

0 0 22 2882

1944

242

266

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0

00.00

0

0

0

0

0

56

9 0

2011

2010

2009

2008

2007

2006

2005

2011

1151

2010 1002 0.27

2009

0

0 0

0

0 0 2

0 0

0

000

West Delhi

North West Delhi

> Gurgaon, Haryana

South West Delhi

> Rewari, Haryana

Non daily Injectors-NA

Double decker-51.27%

-pes

Injectors-

Kothi-37.09%; Panthi-11.64%;

ased-%; el

NA:

Daily

Top districts for inter-state out-migration

₹

22.19

32.10

% total migration

0.0 A 0

1.04

1.51

100

pop.

7.19

49.46

34091 2.15 45.71

Intra-state

Inter-state

Overall 74579

2

MSM 275

4

16550

23938

No. outmigration % male

Male Migration, 2001 Census

Alwar, Rajasthan District Boulation:36 71 000 15 35% of Bajasthan Boulla

District Populat	ion:36,71,999	(5.35%	of Rajasthar	Population); HIV Level	opulation); Female Literacy HIV Levels and Trends ³	1: 56.78%;	District Population:36,71,999 (5.35% of Rajasthan Population); Famale Literacy': 56.78%; ANC Utilization?:15.8% HIV Levels and Trends³	.15.8%			
		2004	2005	2006	2007	2008	2009	2010	2011		HRG S
JIVV JJI	pb⁴	-		0.50	0.50	0		0			FSW
USS-AINC	NT⁴	-	-	400	400	400		393		Size Est.,	241
PDTCT	ЬР	-	-	*	0	0.02	0.04	0.05	90.0	(Mapping, 2009)	
	IN		-	*	1242	5674	15854	22601	28583	% Total HRG	43.35
7000	ЬР	0	01.0	0.10	0.20	0:30	0.20	0:30	0.13	2000	
BIOOU BANK	N	1259	5574	8095	7637	9505	11224	14827	16557	% Total Pop.	0.01
OTS SSIT	ЬР	1.24	8.63	2.79	1.20	0.50				Program Target	N A
U18-86H	IN	241	220	250	250	202		-		Program Coverage	179
W102 0011	ЬР	*	*	4.00	4.80	*	-	4.40			Home bas
HSS-FSW	M	*	*	250	250	*		250			93.48%
84084 0011	ЬР	*	*			*				Tvnology	based-
MSN-INISIM	M	*	*			*				(Second)	0%;
HSS-IDII	PP								,		Street bas
	F									, JC. 70	0.3270
ole M OLD	PP		*	*	5.72	5.35	1.02	1.02	0.65	% <25 yrs.	
ICIC Male	M		*	*	437	879	7816	9407	16279	% Currently Married	•
ICTC Fomolo	ЬР		*	*	11.32	10.03	1.40	1.30	1.03		S
IC I C rellidie	NT	-	*	*	265	329	4513	5389	8959		2008
postojea JIJ	ЬР		*	*	6.28	6.39	0.94	1.02	0.67	No. episodes	
IC I C Nelelled	NT	-	*	*	462	830	6924	8651	15279	treated	197
ICTC Direct	Ы		*	*	10.83	7.14	1.44	1.27	2.75	% syphilis	
Walk-in	F		*	*	240	378	5405	6145	9959	positivity	١
				PLHIV P	PLHIV Profile, 2009						
	% On ART	%	% III.,	% Marriad	%	o				No.	2004
	200	15-24	Prim. Edu.	\dashv	divorced					FSW IIS	О
ART (241)	61	5	46	6	46					MSM TIs	0
DLN (NA)		-	-							IDU TIs	0
	Æ	oute of H	IV Transmiss	Route of HIV Transmission, ICTC 201	1					Comp. IIs	0
	Hetero- sexual	Homo- sexual	Blood	Needle/Syringe	Parent to Child	ld Unknown	Ş			IC ICs Total tested ⁵	0
% of Total	TN 35	60	2	0.00	0 55	0,5	1 .			Blood Banks	-
(N=187)	/6.4/	09.	7.14	0.53	8.30	10.70				STI clinics	1
				Block-Le	Block-Level Details					ART centers	0
No. HRG-FSW			-							Link ART centers	0
No. HRG-MSM										PLHA Networks	,
No. HRG-IDU								,		Red ribbon clubs	0
% Positive, ICTC 2009	Bansur 0.68	Behror 1.56	Govindgarh 0.38	Katumbar 0.59	Kishangarhbas 0.97	Kotkasim 0.7	Mandawar 0.18	Nimrana 0	Rajgarh 0.45	Comm. care centers	0
% Positive,	Alwar(urban)	Be		Tijara	Govindoarh 0	Katumbar	Kishangarhbas	Kotkasim	Laxmangarh	Drop-in-centers	
	0.09	0	2	60.0		0	0	0	0	Condom outlets	

* Inadequate sample size; - Data not available; 12011 Census; 36ource: DLHS III; 3Data presented only for years where sample size is valid (HSS-ANC; 300 tested, HSS-HRG/STD: 187 tested, ICTC: 600 tested, PPTCT and BB: 900 tested); *PP = percent positive, NI = number tested; *General clients & pregnant women

132

Banswara, Rajasthan

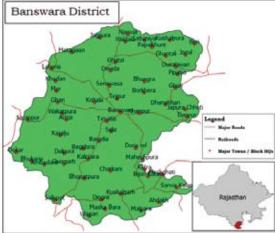
Background:

Banswara is a tribal district situated in the southern most part of Rajasthan. It has a population of 17.98 lakhs with a sex ratio of 979 females per 1,000 males, a female literacy rate of 43.4% and an overall literacy rate of 57.2% (2011 Census). Banswara is an agricultural market center. The industries of Banswara are agro-based (oil mills), industries for dress materials, blended yarn, shirting and suiting, synthetic yarn and textures grey cloth yarn, marble slabs and tiles and portland cement. The major highway that passes through Banswara is National Highway 113.

HIV Epidemic Profile:

- Based on 2010 HSS-ANC data, HIV prevalence was moderate (0.51%) with a rising trend; among PPTCT and Blood Bank attendees, HIV positivity was low (0.13%, 2011), with a stable trend.
- Based on HSS data, HIV prevalence was low among FSW (0.4%, 2010); among ICTC attendees also HIV positivity was low in 2011 among both male (1.6%) and female (1.3%) clients, and also among direct walk-in (2.9%) and referred (0.7%) clients, with an overall stable to declining trend.
- As per mapping conducted in 2009, FSW (1457, 79.4% of total HRG) was the largest HRG in the district, followed by MSM (377, 20.5% of total HRG); of the FSW, 54.74% were street-based.
- The Syphilis positivity rate among STI clinic attendees in 2011 was 0.18%.
- As per the 2001 Census, 3.4% of the male population were migrants; 32.2% of them migrated to other states and 17.2% migrated to other districts within the state.
- The top two destinations for out-of-state migration were Ahmedabad and Surat in Gujarat.
- HIV awareness rates were 68% among women and RTI/STI awareness rates were 69.6% among women (DLHS-III).
- Of the 204 PLHIV registered at the Anti-Retroviral Therapy (ART) centre in 2009, 4% were 15-24 years of age, 69% were on ART, 72% were illiterate or only had a primary school education, and 72% were widowed or divorced.
- Number of ICTCs has remained constant in the district since 2006. There was an increase in the number of RRC's from three to eight in 2011.

- Focus on outreach efforts among hard-to-reach sub-groups, such as home-based FSW.
- · Strengthen outreach programmes through awareness campaigns around trucking halt points and highways in the district.
- There is a need to better understand the dynamics of HIV transmission among MSM and FSW, either through initiation of HRG sites for HIV
 Sentinel Surveillance (HSS) or further analysis of ICTC/PPTCT and ART data.
- Since the largest HRG is FSW, better assessment of the size and profile of clients population, including migrants and truckers, will help in better
 understanding of district vulnerabilities.
- Though, there are over 1800 FSWs and MSMs in the district, there is only one FSW TI in operation in the district. There is a need to continue to focus on HIV prevention programmes, with a emphasis on HRGs.



10771

9016

9943

5056

236

2011

2010

2009

2008

2007

2006

0.18

69.0

3850

2010

Mandsaur, Madhya Pradesh

Neemuch, Madhya Pradesh

> Vadodara, Gujarat

> Surat, Gujarat

Ahmadabad, Gujarat

Daily Injectors - NA; Non daily injectors-NA

13077

0.59

No. outmigration % of male

Intradistrict

Inter-state Intra-state

Overall 25880

<u>a</u> 0

Male Migration, 2001 Census

50.53

17.22

32.25

3.41

pop. % of total migration

0

0

0

Top districts for inter-state out-migration

1.72

1.10

Banswara, Rajasthan

District Population: 17,98,194 (2.6% of Rajasthan Population); Female Literacy': 43.4%; ANC Utilization?: 20.0%

0.13	0.51		_	0.25				_ _
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┝	+	4919	5482	2896	*			
_	0.33	0.40	0.20	0.10	*		*	*
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	-		-	-	-		-	
	•						-	
	0.40		1.20	-	0.40		-	
	250		250		250			
	•							
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	•						,	
	-		-				-	
1.60	1.45	1.51	1.46	2.11	*		*	*
3116	2760	2379	2472	1329	*		*	*
1.29	1.11	1.63	1.11	1.81	*		*	*
2708	2162	1718	1989	831	*		*	*
	09:0	96.0	0.81	0.94	*		*	*
⊢	⊢	3036	3219	1591	*		*	*
-	3.27	3.30	2.58	4.92	*		*	*
Н	1283	1061	1242	569	*		*	*
				600	rofile, 2	¥	PLHIV P	PLHIV P
		jo	% widowed % divorced	% Married	im. Edu.	 P		% On ART % 15-24 % III., Pr
			72	6	72	, ,	4	
				2011	ission, ICTC	ES I	oute of HIV Transm	Route of HIV Transm
	known		arent to Chil		pool	8		Hetero-sexual Homo-sexual B
		1		Jyllige		1		
	0		5.62	0	0		0	94.38 0
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	3902	0.60 1.283 1.283 1.283 1.283 1.283 1.283 1.283 1.283	0.96 0.60 3036 3639 3.30 3.27 1061 1283 0 0	0.96 0.60 3036 3639 3.30 3.27 1061 1283 0 0	591 3.219 3.036 0.60 591 3.219 3.036 3639 592 2.58 3.30 3.27 569 1242 1061 1283 69 1242 1061 1283 9 72 eld widowed or divorced 3.22 5.62 0 5.62 0	591 3.219 3.036 0.60 591 3.219 3.036 3639 592 2.58 3.30 3.27 569 1242 1061 1283 69 72 Ied Windowed or divorced or close of close	* 0.94 0.81 0.96 0.60 * 1591 3219 3036 3639 * 4.92 2.58 3.30 3.27 * 569 1242 1061 1283 PLHIV Profile, 2009 % widowed or divorced or di	1591 3219 3036 3639

* Inadequate sample size; - Data not available; 1 2011 Census, 2 Source. DLHS III; 3 Data presented only for years where sample size is valid (HSS-ANC: 300 tested, HSS-HRG/STD: 187 tested, ICTC: 600 tested, PPTCT and BB: 900 tested); 4 PP = percent positive, NT = number tested; 3 General clients and pregnant women

Baran, Rajasthan

Background:

Baran District is located in the South-East Corner of Rajasthan. It has a population of 12.23 lakhs with a sex ratio of 926 females per 1,000 males, and a female literacy rate of 52.4% with an overall literacy rate of 67.3% (2011 Census). The economy of Baran district mainly depends on agro-based industries; there is also the National Thermal Power Corporation (NTPC), a Government of India enterprise. Rajasthan Financial Corporation (RFC) is a leading financial institution of the state which caters to the industrial and financial requirements of the medium, small scale and tiny industrial units. The major highways that pass through Baran are National Highways 76 and 90.

HIV Epidemic Profile:

- Based on 2010 HSS-ANC data, 2011 PPTCT and Blood Bank data, the level of HIV positivity was low (≤ 0.25%), showing a stable trend, with a surge in 2010 for HSS-ANC.
- HIV prevalence among ICTC attendees in 2011 was low among both male (0.79%) and female (0.66%) clients and among direct walk-in (0.83%) and referred (0.66%) clients, with an overall stable to increasing trend.



- As per mapping conducted in 2009, FSW (250, 100% of total HRG) was the only HRG in the district; of the FSW, 58% were home-based and 37.6% were street-based.
- The syphilis positivity rate among STI clinic attendees in 2011 was 1.98%.
- As per the 2001 Census, 5.04% of the male population were migrants; 6.3% of them migrated to other states and 30.6% migrated to other districts within the state.
- The top two destinations for out-of-district migration were Guna and Sheopur in Madhya Pradesh.
- HIV awareness rates and RTI/STI awareness rates among women were 42.9% and 60% respectively (DLHS-III).
- Of the 20 PLHIV registered at the Anti-Retroviral Therapy (ART) centre in 2009, 5% were 15-24 years of age, 35% were on ART, 60% were illiterate or only had a primary school education, and 60% were widowed or divorced.
- There has been a gradual increase in HIV testing at ICTCs from 2007 onwards.

- Focus on outreach efforts among hard-to-reach sub-groups, such as home-based FSW.
- Strengthen outreach programme through awareness campaigns among women and around trucking halt points and highways in the district.
- Since the largest HRG is FSW, better assessment of the size and profile of clients population, including migrants and truckers, will help in better understanding of district vulnerabilities.

2010

6639

3038

63.12

30.56

6.32

districts for inter-state out-migration

Shivpuri, Madhya Pradesh

Intra-district 17043 3.18

Intra-state

Inter-state

8251 1.54

1706

0.32

Male Migration, 2001 Census

Baran, Rajasthan

District Population: 12,23,921 (1.7% of Rajasthan Population); Female Literacy': 52.4%; ANC Utilization²: 39.1%

				Ĭ.	and Trends ³								Vulne	Vulnerabilities		
		2004	2005	2006	2007	2008	2009	2010	2011		HRG Size				Male Mig	ij
HSS-ANC	PP⁴			0	0	0		0.25			FCW	MSM	Ē		Overall	⊢
200-001	NT⁴		,	400	400	400		389			1300	IVICIVI	20		Overall	
PDTCT	ЬР	-	-			*	0	0.08	0.05	Size Est.	250	0	c	No. out-	07000	-
7	LN L					*	953	1309	4165	(Mapping, 2009)	2.30	>	>	migration	4	\dashv
-	Ы	0.10	0	0	0	0	0	0.07	0	% Total HRG	100	0	c	% of male	e 5.04	
Blood Barik	N	1738	2833	3588	4288	5743	5257	5777	8752		3	,	,	dod	4	\rightarrow
UKS STI	PP									% Total Pop.	0.02	0	0	% of total	100	
U15-56H	LN	-	-	-	-	-		-						migration		Н.
78133311	Ы							-		Programme Target					Top districts for	اف
H55-F5W	IN	-								Programme Coverage						
LICC MACM	Ы	-				-		٠			Home					
INC. N. CO.	N				,						-Dased-		Daily			
101 251	ЬР	-				-					Srothel	Kothi-NA;				
001-88H	IN							-		Typology	based-	Panthi-NA;		Guna,		\sim
CICRA CECI	Ы		*	*	0.39	0.42	0.72	09:0	0.79		4.40%;	Double	Non daily	Madhya		2 (
IC IC Male	N		*	*	769	1190	976	1176	1266		Street	decker-NA	Injectors-	Pradesh	Pradesh	۵.
U H	PP	,	*	*	0.77	1.07	0.81	06:0	99.0		based-		¥ 2			
IC I C remale	N		*	*	261	374	614	553	1506		37.60%					
Dofound	ЬЬ		*	*	0.49	0.85	0.26	69.0	99.0	% <25 yrs.						
ורור עבובוובם	LN	-	*	*	1030	354	772	1728	1807	% Married						
ICTC Direct	ЬР		*	*		0.50	1.22	2.02	0.83		STI/RTI					
Walk-in	N	,	*	*		1210	818	893	296		2008	\dashv	4	ĺ		
				PLHIV Profile 2009	file, 2009					No. episodes treated	0	504	956 2182			
	3	-	%	% III., Prim.		% widowed or	or			% Syphilis pos.	26.03	1_	\perp			
	% On AKI	-	15-24	Edu.	% Marned	divorced							Programn	Programme Response		
ART (20)	35		5	09	5	09				No.	2004	2005 2	2006 2007	2008	5000	-
DLN (NA)							[FSW TIs	-		- 1			Н
		_	oute of HIV	Route of HIV Transmission, ICTC 201	ICTC 2011					MSM TIs	,			•		-
	Потогодо	le la	Homo-	Poola	Needle/	Daront to Child		- Independent		IDU TIS						-
	ar Olege	cynai	sexnal	POOL	Syringe	alent to Cili		1000	_	Comp. TIs					,	-
% of Total Pos.	94.44	4	0	0	0	5.56		0		ICTCs		- 13	1 1 1 020	1 202	1 25/13	-
				Block-Level Details	el Details		_	_		Blood Banks	-	5 -	╁	╁	- 5	+
No HRG-FSW								Ŀ		STI clinics	-	-	-	-	-	-
										ART centers						+
No. HKG-MSM										Link ART centers						⊢
No. HRG-IDU		٠					,			PLHIV Networks						\vdash
% Positive,										Red ribbon clubs						\dashv
ICTC 2009				,						Comm. care centers						\rightarrow
% Positive,	Raran O			,						Drop-in-centers						-
PPTCT 2009	Dai aii, o									Condom outlets						\dashv

* Inadequate sample size - Data not available: 1 2011 cersus, 2 Source: DLHS III; 3 Data presented only for years where sample size is valid (HSS-ANC: 300 tested, HSS-HRG/STD: 187 tested, ICTC: 600 tested, PPTCT and BB: 900 tested); 4 PP = percent positive, NT = number tested; 5 General clients and pregnant women

Barmer, Rajasthan

Background:

Barmer district is situated in the Marwar region in the western part of Rajasthan, forming a part of the Thar Desert. It has a population of 26.04 lakhs with a sex ratio of 900 females per 1,000 males, a female literacy rate of 41.03% and an overall literacy rate of 57.4% (2011 Census). The economy of Barmer district mainly depends on agriculture and animal husbandry. Carved wooden furniture and hand block printing industry of Barmer is well renowned. The major highway that passes through Barmer is National Highway 15.

HIV Epidemic Profile:

- Based on 2010 HSS-ANC data, the level of HIV positivity was high (1.75%), with an increasing trend.
- Based on PPTCT and Blood Bank data in 2011, the level of HIV positivity was low (≤0.09%), with a stable to declining trend.
- HIV positivity among ICTC attendees in 2011 was low among both male (0.66%) and female (0.66%) clients and also among direct walk-in (1.5%) and referred (0.55%) clients, with an overall declining trend.



- As per mapping conducted in 2009, FSW (711, 94.05% of total HRG) was the largest HRG in the district, followed by IDU (45, 5.9% of total HRG); of the FSW, 39.24% brothel-based and 35.16% were home-based.
- The syphilis positivity rate among STI clinic attendees in 2011 was 1.39%.
- As per the 2001 Census, 4.04% of the male population were migrants; 27.07% of them migrated to other state and 27.2% migrated to other districts within the state.
- The top two destinations for out-of-state migration were Surat and Banas Kantha in Gujarat.
- HIV and RTI/STI awareness rates among women were 48.8% and 37.3% respectively (DLHS-III).
- Of the 287 PLHIV registered at the Anti-Retroviral Therapy (ART) centre in 2009, 93% were on ART, 76% were illiterate or only had a primary school education, and 74% were widowed or divorced.
- The ICTCs significantly increased from 2008 onwards in the district, with corresponding increase in the number of clients undergoing HIV testing at these sites.

- High HIV prevelance ANC along with an increasing trend necessitates in-depth analysis of the profile of the survey participants and their spouses.
- Focus on outreach efforts among hard-to-reach sub-groups, such as home-based FSW.
- Strengthen outreach programmes through awareness campaigns among women, around trucking halt points and highways in the district.
- There is a need to better understand the dynamics of HIV transmission among FSW and IDU, either through initiation of HRG sites for HIV Sentinel Surveillance (HSS) or further analysis of ICTC/PPTCT and ART data.
- Since the largest HRG is FSW, better assessment of the size and profile of clients population, including migrants and truckers, will help in better
 understanding of district vulnerabilities.

Thane, Maharashtra

Barmer, Rajasthan

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			INIH	Levels and Trends ³	spus ³									Vulnerabilities	lities				
		2004	2005	2006	2007	2008	3 2009	9 2010	1 2011		HRG Size					Male Mi	Male Migration, 2001 Census	l Census	
CINA 22LL	PP⁴			0	1	0.25		1.75			FSW	MSM	20	1		Overall	Inter-state	Intra-state	Intra-district
USS-AINC	NT⁴		•	400	400	400	H	Н	\dashv	Size Est.	FSW	MSM	nai		No. out-	41810	11318	11371	19121
DTG	PP			-	0.08	0.10	0.08	8 0.09	0.09	(Mapping, 2009)			1	T	migration				
	IN				1233	3086	\dashv	H	`	% Total HRG	711	0	45		% of male	4.04	1.09	1.10	1.85
Jaca boola	PP	*	*	*	0.40	0.20	0.20	0 0.17	0.00					T	DOD.				
DIOOU DAIIK	IN	*	*	*	2426	3337	7 3671	1 4836	4920	% Total Pop.	94.05	0	5.95		% or total	100	27.07	27.20	45.73
d H	Ы	9.76	2.60	2.39	3.60	3.52	01	7.29						_ _	migration				
U16-88H	N	245	250	250	250	250		247		Programme	0.03	0	0		_	Top districts for inter-state out-migration	or inter-state	out-migratic	_
787011 0011	PP									Programme				T	ŀ	-	-	,	
HSS-FSW	Ā									Coverage	135	m	0						
P 40 P 4 00 1	PP					'		-		afin in the second	Home			Τ					
MICINI-CCLI	N		,	,		'		'			-pased		Daily	_					
4	PP					-					35.16%;	Kothi-NA;	_	SIC					
DOI-SSH	F							-		Typology	Brothel	Panthi-NA;				Pallas k	Kachh, Al	~i	Thane,
- - M	PP		*	*	*	6.40	7.68	8 1.78	99.0		pased-	Double		aily	Gujarat		ujarat	Gujarat	Maharashtra
ICIC Male	N		*	*	*	959	4409	9 6120	12516		39.24%;	decker-NA	<u>:</u>	rs-		and an ar			
ICTC	PP		*	*	*	13.46	6 2.94	1.13	┢		Street based-	_	A N						
Female	F		*	*	*	208	3776	6 6747	10912		72.60%			1					
J.L.	ЬР	,	*	*	*	5.62	╁	1.16	+	% <25 yrs.			'	1					
Referred	Þ		*	*	*	178	+	F	Ļ	% Married			-	-					
1 1 2 2	2		*	*	*	5 2	+	+	+		S	STI/RTI							
ICIC Direct	£ !		,	,	,	0 0	+	+	+		2008	5009	2010	2011					
waik-in	z		,	- 15		989	7444	4 2393	4320	No. episodes	2007	3519	2090	4390					
			7 - 70 - 70	HIV Profile, 2009	- FO		-			treated	1007	2	2007	200					
	% On ART		% 15-24 %	% III., Prim. %	% Married	% widowed or divorced	50 Oc			% Syphilis pos.	12.05	3.92	4.17	1.39	0300000				
ART (287)	93		-	76	10	74				No	2004	2005	2006	2007	2008	2009	2010	2011	
DLN (NA)										FSWTIs		-		-	-	-	-	-	
		R	oute of HIV Tran	Route of HIV Transmission, ICTC 2011	2011					MSM TIS									
	Hotoro-coxiis		H	lbool bools	Moodlo/Sviringo	Daront to Child	L	Inbrown		IDU TIS									
	ופופו ח-ספ	i vanai	sexual	\dashv	-	alcill 10		INIONI		Comp. TIs									
% of Total Pos.	73.86	2	0	0.65	2.61	16.99		5.88		ICTCs		1	- 5	2	19	19	19	19	
(661-11)			Blo	ock-Level Details	siis					HIV-TB cross	-	6			0000	0400	01677	1000	
No. HRG-						L	L	ŀ		referrals									
FSW								-		M-B pair rec. NVP									
Odu olv						-	-	-		Blood Banks	2	2	2	2	2	2	2	2	
Mon and							_	_		STI clinics	1	1	2	2	2	3	4	4	
IVICIVI						1	+	+	-	ART centers	-	-	-	-	-	-			
No. HRG-	,		,	,			_	_		Link ART centers		-			1	1	2	2	
IDO										PLHIV Networks		-		-	-	-			
% Positive,	Ralotara 2 37	Barmer,	Bayatii 1.43	Choauhathan,	음	ıa, Shiv,	-	S	, a	Red ribbon clubs					-	-	2	2	
ICTC 2009	Dalotala, 2.37	0.53	Dayatu, 1.45	2.1	3.6	1.5	3 0.75	5 6.15	_	Comm. care	•								
% POSITIVE,	Barmer	Rate	Choau	Dhorimanna,	Chiv	Balotara,	Ba	er, Siwana,	Si	Oron-in-centers									
2006	(urban), 0.07		0	0.18			0		0	Condom outlets	ļ.								
2001						4	-	-		2010011001100									

* Inadequate sample size; - Data not available; 1 2011 Census; 2 Source: DLHS III; 3 Data presented only for years where sample size is valid (HSS-ANC: 300 tested, HSS-HRG/STD: 187 tested, ICTC: 600 tested, PPTCT and BB: 900 tested); 4 PP = percent positive, NT = number tested; 5 General clients and pregnant women

Bharatpur, Rajasthan

Background:

Bharatpur also known as "Lohagarh" is bounded by Haryana in North, Uttar Pradesh in East, Dholpur and Karauli in the South and by Jaipur and Alwar in Southern West. It has a population of 25.49 lakhs with a sex ratio of 877 females per 1,000 males, a female literacy rate of 54.6% and an overall literacy rate of 71.1% (Census 2011). The economy of Bharatpur district mainly depends on agriculture. The district is also known for oil industries, with more than 60 oil mills in Bharatpur as mustard is grown in large quantities. The major highways passing through Bharatpur are National Highways 2 and 11.

HIV Epidemic Profile:

- According to 2010 HSS-ANC, 2011 PPTCT and Blood Bank data, the level of HIV positivity was low (≤ 0.32%) with a stable to declining trend.
- HIV prevalence was low among direct walk-in clients (2.92%), ang referred (1.12%) clients also among male (1.82%) and female (1.55%) clients, with an overall stable to declining trend.



- As per mapping conducted in 2009, FSW (403, 45.2% of total HRG) was the largest HRG in the district, followed by MSM (340, 38.1% of total HRG) and IDU (148, 16.6% of total HRG); of the FSW, 21.6% were home-based and 67% were Brothel based.
- The syphilis positivity rate among STI clinic attendees in 2011 was 0.3%.
- As per the 2001 Census, 4.2% of the male population were migrants; 30% of them migrated to other states and 32.9% migrated to other districts within the state.
- The top two destinations for out-of-state migration were Faridabad and Gurgaon in Haryana.
- HIV awareness rates and RTI/STI awareness rates among women were 24% and 11.4% respectively (DLHS-III).
- Of the 147 PLHIV registered at the Anti-Retroviral Therapy (ART) centre in 2009, 5% were 15-24 years of age, 71% were on ART, 33% were
 illiterate or only had a primary school education, and 50% were widowed or divorced.

- Focus on improving outreach efforts on hard-to-reach sub-groups, such as home-based FSW.
- Strengthen outreach programmes through awareness campaigns around trucking halt points and highways in the district.
- There is a need to better understand the dynamics of HIV transmission among MSM and IDU, either through initiation of HRG sites for HIV Sentinel Surveillance (HSS) or further analysis of ICTC/PPTCT and ART data.
- Since the largest HRG is FSW, better assessment of the size and profile of clients population, including migrants and truckers, will help in understanding the district vulnerabilities.

West Delhi

Bharatpur, Rajasthan

District Population: 25,49,121 (3.7% of Rajasthan Population); Female Literacy!: 54.6%; ANC Utilization²: 8.5%

Intra-district 17673

37

2004 2005 2006 2007 20	2009 2010	2011	HRG Size	е	Vulnerabilities		Male Migration, 2001 Census	η, 2001 Censu
	400		FSW	MSM	nai		Overall	Inter- Intra-
0.23	90.0	0.06 Size Est.	400	0.00		No. out-	0.00	+-
1160 2535	3405	253 (Mapping, 2009)	40.5	340	140	migration	4//00	14347 13740
0.10 0.10 0 0.30	0.09	0.32 % Total HRG	45.23	38 16	16.61	% of male	4.73	1 27 1 39
1575 5597 6569 6531 8598 1	10105 11549 1	1238		;		dod.		\dashv
	-	7 Total Pop.	0.02	0.01	0.01	% of total	100	30.04 32.96
		-				migration		-
, , , , , , , , , , , , , , , , , , ,		Programme Target				Top di	Top districts for inter-state out-migration	-state out-mic
**		Programme	366	0	0			
		Coverage	lines based		:			
			71.59%:	Kothi- 61.18%:	Injectors			
		Typology	Brothel based-	Panthi- 38.82%	NA:	Faridabad,	Gurdaon, S	South Mathura,
. * 6.59 3.57 3.43	2.05 2.43	182	67%;	Double decker-	Non daily			Delhi Dradech
1289	2492 1522	3291	Street based-	%0	injectors-			200
- * 5.73 2.82 3.29	2.34 1.66	1.55	11.41%		NA A			
- * 227 1135 1154	1536 1384	3232 % <25 yrs.						
2.04	2.08	1.12 % Married						
1271	1345	4470	STIVRTI	}				
- * 5.10 4.52 3.58	2.73 2.05	2.92		_	1	1		
1151 1732	2346 1561 2	2053 No. episodes treated	0	_				
PLHIV Profile, 2009		% Syphilis pos.	•	0.57 0	0.31			
% ., % widowed				P	Programme Response	nse		
4 Prim. Married		No.	2004	2005 2006	7	2008	2009	2010 2011
5 33 10 50		FSW TIS	-	1	m	4	-	-
2 .		MSM TIs		-				
Pointe of HIV Transmission ICTC 2011		IDUTIS	•		1	,		-
Homo. Noodle/ Darent to		Comp. Tls						-
	Unknown	ICTCS		1	с	m	m	3 3
		Total tested ⁵		378 682	2 3584	5439	7788	6311 13776
/0./ 10.1 /0./ 0	6.06	Blood Banks	2	2 2	2	2	2	2 2
Block-Level Details		STI clinics	-	-	-	-	2	3
		- ART centers	,					
		Link ART centers	,	,	,		-	1
		PLHIV Networks						
		- Red ribbon clubs					15	15 15
		- Comm. care centers						╁
Kaman.		Drop-in-centers	-				,	
0.09								

* Inadequate sample size; - Data not available; 1 2011 Census; 2 Source: DLHS III; 3 Data presented only for years where sample size is valid (HSS-ANC: 300 tested, HSS-HRG/STD: 187 tested, ICTC: 600 tested, PPTCT and BB: 900 tested); * PP = percent positive, NT = number tested; 5 General clients and pregnant women

Bhilwara, Rajasthan

Background:

Bhilwara is a district situated in Ajmer division of Rajasthan. It has a population of 24.10 lakhs with a sex ratio of 969 females per 1,000 males, a female literacy rate of 47.93% and an overall literacy rate of 62.71% (2011 Census). The economy of Bhilwara district mainly depends on agriculture. District has also managed to make rapid advancements in the industry as well, especially in the field of textiles. Cotton based industries also feature in a big way in the economy of the district. Cotton is grown in Asind and Hurda Panchayat Samities of Bhilwara which has led to in-migration of rural population from neighboring districts. Due to textile industries many areas of Bhilwara, Mandal and Jahazpur blocks have become trucking halt points. The major highways that pass through Bhilwara are National Highways 76 and 79.

HIV Epidemic Profile:

- Based on the 2010 HSS-ANC data, HIV positivity level was high (2%), with a rising trend.
- Based on 2011 PPTCT and Blood Bank data, the level of HIV positivity was low (0.23-0.26%), with a stable to declining trend.
- HIV prevalence among ICTC attendees was moderate among direct walk-in (5.34%) and low among referred (2.2%) clients, as well as among
 male (2.7%) and female (2.7%) clients, with an overall stable to declining trend.
- As per mapping conducted in 2009, FSW (490, 56.65% of total HRG) was the largest HRG in the district, followed by MSM (347, 40.12% of total HRG) and IDU (28, 3.24% of total HRG); of the FSW,11% were home-based and 89% were street-based.
- As per the 2001 Census, 5.2% of the male population were migrants; 28.3% of them migrated to other states and 23.6% migrated to other districts within the state.
- The top two destinations for out-of-districts migration were Surat and Ahmadabad in Gujarat, which were high prevalent districts.
- HIV awareness and RTI/STI awareness rates among women were 68% and 65.7% respectively (DLHS-III).
- Of the 413 PLHIV registered at the Anti Retroviral Therapy (ART) centre in 2009, 3% were 15-24 years of age, 61% were on ART, 68% were
 illiterate or only had a primary school education, and 63% were widowed or divorced.
- There has been a gradual increase in HIV testing at ICTCs from 2007 onwards.

- Focus on outreach efforts among hard-to-reach sub-groups, such as home-based FSW.
- Strengthen outreach programmes through awareness campaign around trucking halt points and highways in the district.
- There is a need to better understand the dynamics of HIV transmission among MSM and FSW, either through initiation of HRG sites for HIV Sentinel Surveillance (HSS) or further analysis of ICTC/PPTCT and ART data.
- Since the largest HRG is FSW, better assessment of the size and profile of clients population, including migrants and truckers, will help in better
 understanding of district vulnerabilities.
- Parent to child transmissions are high, more needs to be done to understand the profile of these attendees through in-depth analysis of ICTC and ART data.
- HIV positivity was high among pregnant women along with an increasing trend, indicates the need for in-depth analysis of the profile of survey
 participants and their spouses.



2010

2009

2008

4745 2011

Thane, Maharashtra

Mumbai (Suburban), Maharashtra

Neemuch, Madhya Pradesh

Ahmadabad

Gujarat

Surat, Gujarat

Bhilwara, Rajasthan

District Population: 24,10,459 (3.5% of Rajasthan Population); Female Literacy': 47.9%; ANC Utilization²: 34.0%

Intra-state | Intra-district 25867

Male Migration, 2001 Census Verall Inter-state Intra-sta

Overall 53970

12782

15321 1.50

> migration % of male

No. out-

47.93

23.68

28.39

100

% of total migration

5.28

Top districts for inter-state out-migration

ONV SSE		2004	5007	2006	7007	2008	2009	2010	2011		ייים	HKG SIZE	2
	bb⁴	0	0.25	0.25	0.50	0		2		100	NS.	MSM	3
JNIX-50	řLΝ	402	400	400	393	400		400		(Mapping,	490	347	28
TOTAL	М				0.17	0.13	0.26	0.27	0.26	2003)			
	N				3459	5339	7796	7530	9591	% Total HRG	56.65	40.12	3.24
Jacq boold	ЬР	09.0	0.70	0.50	0.40	0:30	0:30	0.24	0.23		╄		
IOUU DAIIK	IN	2760	8696	11829	12165	14748	15774	15991	19552	% Total Pop.	0.02	0.01	0
UCC CTD	ЬР									Programme			
71c-cc	IN		-		-	-		-		Target			
W(3 33)	ЬР									Programme	211	0	0
77-1-200	IN					-		-			╄		
HCC MCM	М	,			,						based-	:	
SO-INICINI	N									Timelean	Brothel	Kothi- NA;	Daily Injectors
11/11/11/11	М									iybology	based-	Double	Z
001-88	N		,		,						0%; Street	decker- NA	
OTO MODE	М		8.81	7.48	2.98	3.19	3.36	3.72	2.76		-based-		
I C Ividie	IN	-	989	1149	3924	4730	4970	4645	5979	0% /75 vrc	08% VaV	247	38
TC Formula	ЬР		16.33	14.37	1.52	2.12	2.55	2.50	2.79	% Narried	56.65	40.12	3.24
CIC remaie	N	,	196	334	3491	4016	4464	4083	4437			STI/RTI	
TO Defend	М		11.32	6.82	1.47	1.66	1.8.1	2.26	2.23		2008	5009	2010 2011
I'C Kelelled	IN		539	1188	6237	7229	8187	7842	8599	No. episodes	142	632	1359 4745
ICTC Direct	ЬР		9.22	17.97	6.71	7.65	10.67	11.06	5.34	rreated % Synhilis nos	\perp	30	+
/alk-in	IN		293	295	1178	1517	1247	988	1817	2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2		3	Progr
			PLHIV P	PLHIV Profile, 2009	60					No.	2004	2005	2006 2007
		%	_	70	,w %	powop				FSWTIs			
	% On ART	15-24	Prim.	Š		or divorced				MSM TIS		,	,
(443)				+	ľ					SI DOI			
AKI (413)	٥	η	80	ח		63				COMP. IIS		. ,	,
(IAA)		- IIIV Inc	- inimia	ICTC 2011						Total tested ⁵		832	1483 10874
	NON	Noute of file Italianisation, ICIC 2011	IISIIIISSIUII,	101 2011	+	-		Т		Blood Banks	2	3	3
	Hetero-sexual	- Homo-	Blood	Needle/ Syringe		Parent to Child	Unknown			STI clinics	-	-	-
of Total Pos.	1000	,								Link ART			
(N=289)	89.7/		o 	0.35		9.34	0			centers			
			Block-L	Block-Level Details	ls					PLHIV			
No. HRG-FSW										Networks			
No. HRG-MSM										Red ribbon			
No. HRG-IDU										Comm. care			
% Positive, ICTC					,	,				Centers Dron-in-centers			
1	Dhillanara										0 0		

* Inadequate sample sizer - Data not available; 1 2011 Cersus; 2 Source; DLHS III; 3 Data presented only for years where sample size is valid (HSS-ANC; 300 tested, HSS-HRG/STD; 187 tested, ICTC; 600 tested, PPTCT and BB: 900 tested); * PP = percent positive, NT = number tested; 5 General clients and pregnant women

Bikaner, Rajasthan

Background:

Bikaner district is situated in the northwest part of Rajasthan. It has a population of 23.67 lakhs with a sex ratio of 903 females per 1,000 males, and female literacy rate of 53.77% with an overall literacy rate of 65.92% (2011 Census). The economy of Bikaner district mainly depends on agriculture. Tourism forms the nucleus of the Bikaner economy. Industries are also gradually booming in the desert city. The city has a flourishing woolen products and carpet weaving industry. The major highways that pass through Bikaner are National Highways 11, 15 and 89.

HIV Epidemic Profile:

- Based on 2011 PPTCT and Blood Bank data, the level of HIV positivity was low (0.03%) with a stable to declining trend.
- HIV prevalence among ICTC attendees was moderate among direct walk-in (6.37%) clients and low among referred (1.59%) clients, as well as among male (3.72%) and female (2.72%) clients, with an overall declining trend.



- As per mapping conducted in 2009, FSW (1327, 77.2% of total HRG) was the largest HRG in the district, followed by IDU (287, 16.7% of total HRG) and MSM (105, 6.11% of total HRG); of the FSW, 40.69% brothel-based and 33.84% street-based.
- As per the 2001 Census, 6.18% of the male population were migrants; 19.42% of them migrated to other states and 25.42% migrated to other districts within the state.
- The top two destinations for out-of-state migration were Surat in Gujarat and Thane in Maharashtra, which were high HIV prevalent.
- HIV awareness rate and RTI/STI awareness rate among women were 37.4% and 27.2% respectively (DLHS-III).
- Of the 302 PLHIV registered at the Anti Retroviral Therapy (ART) centre in 2009, 5% were 15-24 years of age, 73% were on ART, 70% were illiterate or only had a primary school education, and 74% were widowed or divorced.

- Focus on outreach efforts among hard-to-reach sub-groups, such as home-based FSW.
- Strengthen outreach programmes through awareness campaigns around trucking halt points and highways in the district.
- There is a need to better understand the dynamics of HIV transmission among FSW, MSM and IDU, either through initiation of HRG and STD sites for HIV Sentinel Surveillance (HSS) or further analysis of ICTC/PPTCT and ART data.
- Since the largest HRG is FSW, better assessment of the size and profile of clients population, including migrants and truckers, will help in better
 understanding of district vulnerabilities.

15882

13075

8709

6291

2011

2010

2009

2008

2007

0

2011 7587

Haora, West Bengal

Sirsa, Haryana

Mumbai (Suburban), Maharastra

Maharashtra

Surat, Gujarat

Daily Injectors - NA; Non daily injectors-NA

55.16

25.42

19.42

100

migration

0.01

0

Top districts for inter-state out-migration

Intra-district 30200 3.41

Intra-state 13918

Overall 54749

2

10631

No. out-migration

6.18

% of male pop. % of total

16.70 287

Male Migration, 2001 Census Inter-state

Bikaner, Rajasthan

District Population: 23,67,745 (3.4% of Rajasthan Population); Female Literacy': 53.7 %; ANC Utilization²: 23.5%

		PP4	- NT⁴	* PP	NT	DPP Amelian DPP 0.2	ΙΝ	dq m. 3311	NT	- HPP BPP	NT	- dd by 331	N	dd	Z	. PP	- IN IN IN IN IN IN IN IN IN IN IN IN IN	ЬР	. NT NT	- dd Pp	- IN Dallied	ct PP	Walk-in NT .		% On ART	ART (302) 73		-	Hetero-sexual	% of Total Pos.	N=311) 85.53		No. HRG-FSW -	No. HRG-MSM -	No. HRG-IDU	% Positive ICTC	Ositive, IC-C
	2004 20			*	*	0.20 0.	9623 18	1.27 0.	23.7 2.	-	-					- 9.	- 8	- 9.	- 3	- 6.	6 -	- 17	- 2		% 15-24			Route of HIV Transmission, ICTC 2011	-omoH	sexua	0.32		-				
evel	2005			*	*	0.50	18094 2	0.40	248					1		9.18	817	9.04	365	0.70	910	17.28	272	PLHIV P		,		ansmissic		+	3.22	Block-Le					
s and Tre	2006		-	0	1201	0.30	21689	0.40	250	-	-			,		9.19	914	5.97	653	5.63	1243	16.36	324	PLHIV Profile, 2009	% III., Prim.	- 1		in, ICTC 2	Blood	+		Block-Level Details				Ī	
	2007		-	0.07	4069	0.20	17233	1.20	250	-	-			,		8.47	1181	5.38	1041	4.19	1791	18.79	431		%	namen 10	2 .	011	Needle/	Syringe	0.64	sils					
_	2008			0.12	5679	0.10	22482	0	245	-	-			,		7.70	1909	8.12	1121	3.06	2421	26.93	609		% widowed or	alvorceu 74			Parent to	Child	5.14						
	5009			0.07	3005	0.20	23378									7.11	2489	69:9	1584	3.18	3116	19.23	957		o		T		L	'	ď						
	2010			0.05	10861	0.09	27537	0.82	243					,		6.18	2736	5.25	2285	4.02	4229	15.03	792						Inknown		5.14		-				
	2011			0.03	13238	0.10	27091									3.72	4977	2.72	4555	1.59	6235	6.37	3297														
				Size Est.	(Mapping, 2009)	% Total HRG		% Total Pop.	Drogrammo Targot	Programme	Coverage	6			Typology					% <25 yrs.	% Married			No. episodes treated	% Syphilis pos.		No.	MSM TIC	IDU TIS	Comp. TIs	Total tected ⁵	Blood Banks	STI clinics	ART centers	Link AKT centers PLHIV Networks	Red ribbon clubs	
	HRG Size	0	FSW	1327	170	77.20		90.0	1		111	Home	- pased	25.47%;	Brothe	- Dased 40 69%	Street	based-	33.84%			STI	2008	1519	6.87		2004				160	3 -	-				
	Size		MSM	105	2	6.11		0			0			Kothi- 38 1%:	Panthi-19.05%;	Double decker-	42.86%					STIVRTI	5000	2932	0.71		2005	. .		٠ ,	1885	2	-				
							T		T					.%.	5%;	ker-	. 0						2010	2820	0		2006	٠ ٠	1	، ا	2768	7	2		1		

* Inadequate sample size: - Data not available: 1 2011 cersus, 2 Source: DLHS III; 3 Data presented only for years where sample size is valid (HSS-ANC: 300 tested, HSS-HRG/STD: 187 tested, ICTC: 600 tested, PPTCT and BB: 900 tested); 4 PP = percent positive, NT = number tested; 5 General clients and pregnant women

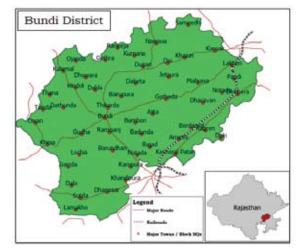
Bundi, Rajasthan

Background:

Bundi District is located in the southeastern part of Rajasthan. It has a population of 11.13 lakhs with a sex ratio of 922 females per 1,000 males, a female literacy rate of 47% and an overall rate of 62.31% (2011 Census). The economy of Bundi district mainly depends on agriculture. Bundi District is very famous for its intricate carvings and murals. It has a collection of monuments including impressive medieval forts, palaces, havelis, and temples with beautiful stone idols, and carved pillars, which attracts tourists to the area. The major highways that pass through Bundi are National Highways 12 and 76.

HIV Epidemic Profile:

- Based on 2010 HSS-ANC, 2011 PPTCT and Blood Bank data, the level of HIV positivity was low (≤ 0.11%), with a stable trend.
- HIV prevalence among ICTC attendees was low among direct walk-in (1.35%) and referred (0.58%) clients and male (0.87%) and female (0.60%) clients, with an overall stable trend.



- As per mapping conducted in 2009, FSW (257, 100% of total HRG) was the only HRG in the district and of the FSW, 60.23% were homebased and only 20.85% were street-based.
- As per the 2001 Census, 5.02% of the male population were migrants; 3.93% of them migrated to other states and 30.5% migrated to other districts within the state.
- The syphilis positivity rate among STI attendees in 2011 was 1.14%.
- HIV awareness rate and RTI/STI awareness rate among women were 51.7% and 48.4% respectively (DLHS-III).
- Of the 53 PLHIV registered at the Anti Retroviral Therapy (ART) centre in 2009, 6% were 15-24 years of age, 70% were on ART, 66% were illiterate or only had a primary school education, and 66% were widowed or divorced.
- There were two ICTCs in the district since 2006.

- Focus on outreach efforts among hard-to-reach sub-groups, such as home-based FSW.
- Strengthen outreach programmes through awareness campaigns among women and around trucking halt points and highways in the
 district
- There is a need to better understand the dynamics of HIV transmission among FSW, either through initiation of HRG sites for HIV Sentinel Surveillance (HSS) or further analysis of ICTC/PPTCT and ART data.
- Since the largest HRG is FSW, better assessment of the size and profile of clients population, including migrants and truckers, will help in better understanding of district vulnerabilities.

2010

2009

2008

2007

2006

Programme Response

2011

2010

8835

5563

6476

5979

2704

109

Bundi, Rajasthan

%	
33.1%	
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13,725 (1	
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Pop	
ţ	
Dist	

Intradistrict 16577

Intrastate 7743

Interstate 994

Overall 25314

2

Male Migration, 2001 Census

3.29

30.59

5.02

No. outmigration % of male pop. % of total migration

0 0 0

Top districts for inter-state out-migration

Daily Injectors
- NA;
Non daily
injectors- NA

0

HIV Levels and Trends 2004 2005 2006 2007	ANC Utilization:: 33.1%	2008 2009 2010 2011	0	400 400	0.05 0.07 0.11	3287 3459 2939 4467 (Mapping, 2009)	0.10 0.22	2839 3021 3185 4383	- - % Total Pop.	Programma	- Target	- Programme	- Coverage			- lypology	0.87 0.86 1.88 0.87	1609 1737 1223 1720	1.29 0.94 1.43 0.60 % <25 vrs.	1083 1280 1401 2648 % Married	0.41 0.79 1.49 0.58	2392 2216	1.28 2.45 1.35	1728 625 408 742 treated	% Syphilis pos.	% widowed or divorced		- MSM TIS	IDUTIS	Parent to Unknown Comp. Tls		3.13 0 Inda lested	STI clinics	ART centers	Link ART centers	PLHIV Networks	Red ribbon clubs	. Comm. care centers	
10 10 10 10 10 10 10 10	Literacy': 47%;7	200	-		Н		L		-			•	-		-					H		Н	+		600				2011		+		ails					-	
NT	pulation); Female	2005 2006	⊢		-				-					1				*			*	*	*	*	PLHIV Profile, 20				ansmission, ICTC ;	_	+		Block-Level Det						
25 (1.6% o PP* NIT* NIT* NIT* NIT* NIT* NIT* NIT* NIT	f Kajasthan Po		┢		-			-			-															15-2	9		oute of HIV Tr		NEX .	o 	_					-	
	113,725 (1.6% 0		₽₽₽₽	NT⁴	PP	M	ЬР	NT	ЬР	N	ЬР	N	ЬР	NT	PP	IN	ЬР	NT	ЬР	IN	ЬР	IN	ЬР	NT		% On ART	70		CC.	Hetero-sexu		96.88					'	-	Rundi (urhan)

* Inadequate sample sizer - Data not available; 1 2011 Census; 2 Source: DLHS III; 3 Data presented only for years where sample size is valid (HSS-ANC; 300 tested, HSS-HRG/STD: 187 tested, ICTC; 600 tested, PPTCT and BB: 900 tested); * PP = percent positive, NT = number tested; * General clients and pregnant women

Chittorgarh, Rajasthan

Background:

Chittorgarh district is located in the south eastern part of Rajasthan. It has a population of 15.44 lakhs with a sex ratio of 970 females per 1,000 males, a female literacy rate of 46.98% and an overall literacy rate of 62.51% (2011 Census). Chittorgarh district has leading cement industries. The district also has tourist attractions like Chittorgarh Fort. The Golden Quadrilateral highway system passes through Chittorgarh, connecting it to much of the rest of India. The major highways that pass through Chittorgarh are National Highways 79, 76 and 113.

HIV Epidemic Profile:

- Based on 2010 HSS-ANC, HIV positivity level was high (1.25%), with a surge in 2010.
- Based on 2011 PPTCT and Blood Bank data, the level of HIV positivity was low (>1%), with a stable trend.
- HIV prevalence among ICTC attendees was low among direct walk-in (2.01%) and referred (0.76%) clients as well as among male (1.14%) and female (0.75%) clients, with an overall stable to declining trend
- As per mapping conducted in 2009, FSW (309, 51.5% of total HRG) was the largest HRG in the district, followed by MSM (241, 40.1% of total HRG) and IDU (50,8.3% of the total HRG); of the FSW, 69.5% were home-based and 30.4% were street-based.
- The syphilis positivity rate among STI clinic attendees in 2011 was 0.27%.
- As per the 2001 Census, 4.9% of the male population were migrants; 21.36% of male migrated to other states, 19.6% of them migrated to other districts within the state and 59% of them migrated within the district.
- The top two destinations for out-of-state migration were Neemuch and Mandsaur in Madhya Pradesh.
- HIV awareness rate was 68.7% among women and RTI/STI awareness rate was 66.1% among women (DLHS-III).
- Of the 298 PLHIV registered at the Anti-Retroviral Therapy (ART) center in 2009, 60% were on ART 6% were 15-24 years of age, 72% were illiterate or only had a primary school education, and 75% were widowed or divorced.

- 19.66% of the sexual routes of transmission were unknown, probing needs to be strengthened at ICTC centres.
- Focus on outreach efforts among hard-to-reach sub-groups, such as home-based FSW.
- · Strengthen outreach programmes through awareness campaigns around trucking halt points and highways in the district.
- There is a need to better understand the dynamics of HIV transmission among FSW and MSMs, either through initiation of HRG sites for HIV Sentinel Surveillance (HSS) or further analysis of ICTC/PPTCT and ART data.
- Since the largest HRG is FSW, better assessment of the size and profile of clients population, including migrants and truckers, will help in better
 understanding of district vulnerabilities.



2010

2009

2008

2005

5925 0.27 2007

> 1.63 2006

2011

2010 2317

2009

STI/RTI

2669 0.49 22267

12817

6984

4125

2174

285

991

Mumbai (Suburban), Maharashtra

Ratlam, Madhya Pradesh

Surat, Gujarat

Neemuch, Madhya Pradesh

Daily Injectors - NA; Non daily injectors-

Kothi- 44.28%; Panthi- 7.46%; Double decker-48.26%

¥

0

0

Mandsaur, Madhya Pradesh

Chittorgarh, Rajasthan

District Population: 15,44,392 (2.2% of Rajasthan Population); Female Literacy!: 46.9%; ANC Utilization²: 34.7%

Intra-district

Intra-state 8829

Inter-state

Overall

2 22

MSM

HRG Size

Male Migration, 2001 Census

26564 2.90

9611 1.05

45004

No. out-migration

241

59.03

19.62

21.36

96.0

4.91 100

% of male % of total migration

pop.

8.33

40.17

0

0.02

Top districts for inter-state out-migration

			Ĭ } E	HIV Levels and Irends	Trends						
		2004	2005	2006	2007	2008	2009	2010	2011		
C14 C1	PP⁴			0.25	1	0.25		1.25			ECM/
HSS-AINC	NT⁴			400	399	399		400			LSW
TOTAG	PP			*	0.19	0.07	0.07	0.19	0.22	Size Est.	
LLICI	NT	-		*	1021	2768	3802	6787	9375	(Mapping,	309
Blood	PP	0.20	09.0	0.50	0:30	0.40	0.30	0.32	0.22	(6007	
Bank	NT	1751	2981	3668	3657	2066	4852	2675	5801	% Total	51.50
GE 331	PP			1.60	4.41	4.40		2.87		HKG	
UIS-SCH	NT	-		250	249	250		744		% lotal	0.02
74133311	PP					-		-		rop.	
W67-66H	IN									Programme Terget	
DICC PACEA	ЬР									Programmo	
INICINI-CCII	IN									Coverage	573
IIII 33H	PP	-		-	-	-		-			Home based
DOI-SSH	IN										69.58%;
CTC NA-1-	PP		*	*	2.68	2.40	1.27	1.65	1.14	Typology	Brothel based-
ICIC Male	NT		*	*	635	916	2121	3705	7010	:	0%;
ICTC	PP		*	*	2.32	2.27	2.45	1.38	0.75		Street based-
Female	IN		*	*	518	441	1061	2325	5882		30.42%
ICTC	PP		*	*	1.43	2.15	1.81	1.22	97.0	% <25 yrs.	
Referred	N		*	*	840	1068	1987	4585	10804	% Married	
ICTC Direct	PP		*	*	5.43	3.11	1.42	2.56	2.01		-
Walk-in	N		*	*	313	389	1195	1445	2088		2008
			PLH	PLHIV Profile,	2009					No. episodes	0
	% On ART		% %	% III., Prim.		% widowed or	or			treated % Suphilis nos	
(90C) TOV	8	+	5-24	Edu.	Married	divorced	1			ad cumid for a	-
DIN (NA)	3 ') ·	7,	,	2 .				No.	2004
		Route	Route of HIV Transmission. ICTC 2011	mission. IC	C 2011					FSWTIs	
		ı	Homo-	-	Needle/	Parent to	:			MSM TIS	•
	Hetero-sexual			poold	Syringe	Child	Unknown	u/		IDU TIS	
% of Total Pos.	73.50		2.56	0.85	0	3.42	19.66			Comp. TIs	•
(N=11/)				alicted love I visal	- diete					SIS	1
2011 -14			noia .	N-Level D	ctalls					lotal tested	1
NO. HKG-						,				Blood Banks	2 -
No. HRG-		,		,	,				,	ART centers	- -
MSM										Link ART centers	
No. HRG-										PLHIV Networks	rks -
% Positive.										Red ribbon clubs	- sqn
ICTC 2009	Bhopalsagar, 0	Gangrar, 0								Comm. care	
% Positive,	Chittorgarh	Bengii 0	Bhopalsagar, Gangrar,	Gangrar,	Kapasan,	Rasmi 0	Bhesroadgarh,			Drop-in-centers	ers -
2009	(urban), 0.09	2 2 2 2	0	0	0	, ,	0			Condom outlets	ets -

* Inadequate sample size; - Data not available; 1 2011 Census; 2 Source: DLHS III; 2 Data presented only for years where sample size is valid (HSS-ANC: 300 tested, HSS-HRG/STD: 187 tested, ICTC: 600 tested, PPTCT and BB: 900 tested); *PP = percent positive, NT = number tested; 5 General clients and pregnant women

Churu, Rajasthan

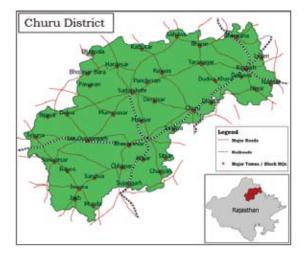
Background:

Churu is a district of enchanting topography in the Thar Desert and lies in the Jangladesh region of northern Rajasthan. It has a population of 20.41 lakhs with a sex ratio of 938 females per 1,000 males, a female literacy rate of 54.25% and an overall literacy rate of 67.46% (2011 Census). Cultivation, which is dependent on monsoon, is the chief occupation of the people of the district. Irrigation is scarce, thus people migrate to other states and gulf countries for their livelihood. In such adverse conditions, the District Industries Centre has been trying to put Churu among the industrially developed districts of the state. The major industries include wooden and iron handicraft, flour mill, P.V.C. wire, cable, condiments, stone door frames, mosaic tiles. The major highway that passes through Churu is National Highway 11

HIV Epidemic Profile:

- Based on 2010 HSS-ANC, 2011 PPTCT and Blood Bank data, the level of HIV positivity was low (≤ 0.03%), with a stable to declining trend.
- HIV prevalence among ICTC attendees was low among direct walk-in (0.7%) and referred (0.6%) clients, and also among male (0.9%) and female (0.5%) clients, with an overall stable to declining trend.
- As per mapping conducted in 2009, FSW (2286, 88.4% of total HRG) was the largest HRG in the district, followed by MSM (300, 11.6% of total HRG); of the FSW, 44.78% were home-based and 41.44% were street-based.
- The syphilis positivity rate among STI clinic attendees in 2011 was 1.11%.
- As per the 2001 Census, 6.2% of the male population were migrants; 26.3% of them migrated to other states and 30.8% migrated to other districts within the state.
- The top two destinations for out-of-state migration were Surat in Gujarat and Hisar in Haryana.
- HIV awareness and RTI/STI awareness rates among women were 40.9% and 29.5% respectively (DLHS-III).
- Of the 287 PLHIV registered at the Anti Retroviral Therapy (ART) centre in 2009, 5% were 15-24 years of age, 70% were on ART, 69% were illiterate or only had a primary school education, and 71% were widowed or divorced.

- Focus on outreach efforts among hard-to-reach sub-groups, such as home-based FSW.
- Strengthen outreach programmes through awareness campaigns among women and around trucking halt points and highways in the district.
- There is a need to better understand the dynamics of HIV transmission among FSWs and MSMs either through initiation of HRG sites for HIV Sentinel Surveillance (HSS) or further analysis of ICTC/PPTCT and ART data.
- Since the largest HRG is FSW, better assessment of the size and profile of clients population, including migrants and truckers, will help in better
 understanding of district vulnerabilities.
- Considering the large number of FSWs in the district, there is a need to increase the number of FSW TIs or composite TIs in operation.



2010

2009

2008

2007

2006

2004

2010 2225 2.17 Progra

2011 6050 1.11

3.70

2008

0

STI/RTI

12493

4635

3091

2336

2412

238

125

Sirsa, Haryana

Bhiwani, Haryana

Maharashtra

Hisar, Haryana

Surat, Gujarat

Daily Injectors - NA; Non daily injectors-NA

Home based -44.78%; Brothel based-

Kothi- 44.48%; Panthi- 3.34%; Double decker-52.17%

> 13.78%; Street based-41.44%

Thane,

Intradistrict 26248

Intrastate 18951 1.92

Overall 61392

MSM

FSW 2286

HRG Size

16193

migration % of male

No. out-

300

Male Migration, 2001 Census
Overall Inter-state

42.75

30.87

26.38

100

% of total migration

0.01

0.11

0

104

Dop.

11.60

88.40

Top districts for inter-state out-migration

huru, Rajasthan

District Population: 20,41,172 (2.9% of Rajasthan Population); Female Literacy': 54.2%; ANC Utilization²: 22.4%

			HIN	HIV Levels and Trends	Trends					
		2004	2002	2006	2007	2008	2009	2010	2011	
V144 UU11	PP⁴			0	0	0		0		
HSS-ANC	NT ⁴			400	400	400		399		
E) Edd	PP			*	90:0	0.08	0.10	0.04	0.01	Size Est.
	N			*	1475	1232	1855	2656	6992	(Mapping, 2009)
Jacob Doold	PP	0	0	0.10	0	0.10	0.10	0.07	0.03	% Total upc
DIUUU DAIIK	IN	1201	2915	3356	3996	4888	5071	8116	9916	70 IOLAI FING
UCC CTD	РР	-			-			-		% Total Don
U18-66H	IN	-		•	-			-		70 IOLAI FOD.
W131 3311	PP									Programme Target
NS3-F3W	IN			-				-		Programme
PW5PW 55H	ЬР			0						Coverage
INICINI-CCII	ħ			250						
100	PP									-
001-881	IN									lypology
OTC Mala	ЬР		*	*	0.63	2.97	3.04	1.98	0.94	
	IN		*	*	635	209	625	806	2123	
ICTC Famolo	ЬР		*	*	1.66	1.41	1.96	0.93	0.50	% ~ 75 vrc
ICIC reliidie	IN	-	*	*	302	497	611	1071	3378	% Married
D T C B of company	PP		*	*	0.48	0.44	0.48	0.57	0.63	No ividillico
ורור עפופוופת	IN	-	*	*	420	889	830	1409	3517	
ICTC Direct	РР	-	*	*	1.35	5.28	9.65	3.50	0.76	and and and and
Walk-in	IN		*	*	517	416	406	570	1984	No. episodes treated
			PLH	PLHIV Profile,	, 2009					% syphilis pos.
	% On ART	_			_	% widowed	p -			o Z
(moo) and	i	\dagger	4	rrim. Edu.	Š	or divorce(.T			TCM/TI-
AKI (287)	0/	+	2	69	∞	=				FSW IIS
DLN (NA)		-								MSM IIS
	-	Route	Route of HIV Transmission, ICTC 2011	nission, IC	C 2011					IDU TIs
	Hetero-sexual	exnal	Homo-	Blood	Needle/	Parent to	Unkr	Unknown		Comp. TIs
% of Total Pos.		١,	sexual		Symige		1			ICTCs Total testable
(N=35)	82.80		- -	- -	0	١/٠٠		1.43		Blood Banks
			Blod	Block-Level Details	etails					STI dinics
No. HRG-FSW			1	•	•	•			1	ART centers
No. HRG-MSM										Link ART centers
No. HRG-IDU										PLHIV Networks
% Positive, ICTC					Ŀ					Red ribbon clubs
2009										COIIIIII. Cale Celifeis
% Positive, PPTCT Churu (urban),	Churu (urban),	•	•		•		,			Condom outlets
2002	5									ביווייייו ייייייייייייייייייייייייייייי

* inadequate sample size; - Data not available; 1 2011 Census; 2 Source: DLHS III; 3 Data presented only for years where sample size is vaiid (HSS-ANC: 300 tested, HSS-HRG/STD: 187 tested, ICTC: 600 tested, PPTCT and BB: 900 tested); *PP = percent positive, NT = number tested; 5 General clients and pregnant women

150

Dausa, Rajasthan

Background:

Dausa district lies in the Jaipur division and is situated in the eastern part of Rajasthan. It has a population of 16.37 lakhs with a sex ratio of 904 females per 1,000 males, and a female literacy rate of 52.33% with an overall literacy rate of 69.1% (2011 Census). Dausa's economy is primarily agrarian based. Dairy and Animal Husbandry are also important sources of economic development of the district. Traditional handicrafts have essentially propped up Dausa's economy. Some of the important activities have been in the field of stone crafting, woolen carpet weaving, weaving durries (carpets), khadi, brassware making, and pottery. The major highway that passes through Dausa is National Highway 11.

HIV Epidemic Profile:

- Based on 2010 HSS-ANC, 2011 PPTCT and Blood Bank data, the level of HIV positivity was found at zero percent with a stable trend among HSS-ANC and PPTCT attendees.
- HIV prevalence among ICTC attendees was low among referred (0.25%) and direct walk-in (0.64%) clients, as well among male (0.35%) and female (0.25%) clients, with an overall stable to declining trend.
- As per mapping conducted in 2009, FSW (189, 89.15% of total HRG) was the largest HRG in the district, followed by MSM (23, 10.85% of total HRG); of the FSW 69.31% were home-based and 28.57% were street-based.
- As per the 2001 Census, 3.4% of the male population were migrants; 21.3% of them migrated to other states and 44.2% migrated to other districts within the state.
- The top two destinations for out-of-state migration were South-West Delhi and North-West Delhi.
- HIV awareness and RTI/STI awareness rates among women were 38.2% and 54.1% respectively (DLHS-III).
- Of the 58 PLHIV registered at the Anti Retroviral Therapy (ART) centre in 2009, 3% were 15-24 years of age, 66% were on ART, 43% were illiterate or only had a primary school education, and 55% were widowed or divorced.
- ICTC attendees increased drastically from 2007 onwards.
- Heterosexual transmission accounted for 66.7% of the transmission but more importantly, homosexual transmission accounted for 16.67% of the total of HIV transmissions.

- Focus on outreach efforts among hard-to-reach sub-groups, such as home-based FSW.
- Strengthen outreach programme through awareness campaigns around trucking halt points and highways in the district.
- There is a need to better understand the dynamics of HIV transmission among MSMs and IDUs, either through the initiation of HRG sites for HIV Sentinel Surveillance (HSS) or further analysis of ICTC/PPTCT and ART data.
- Since the largest HRG is FSW, better assessment of the size and profile of clients population, including migrants and truckers, will help in better
 understanding of district vulnerabilities.
- The current systems at ICTCs need to be strengthened as 16.67% of the route of HIV transmissions were reported as unknown.
- Also there is a need to understand the profile of MSM networks, since their contribution to the epidemic is considerable (around 17%).

Gurgaon, Haryana

34.38

Intra-district 8108 1.17

Dausa, Rajasthan District Population: 16,37,256 (2.3% of Rajasthan Population); Female Literacy': 52.3%; ANC Utilization*: 22.5%

		sns	Intra-	State	10432		1.50		44.24	ioration	IIIJIatioii				West Delhi										2011					5717	-	-		1	-				
	0 7000	2001 Cen:	Inter-	State	5041		0.73	+	21.38	#1000	ובוום חחו				South										2010				, ,	2980	-	-		1	-	-			
		Male Migration, 2001 Census						t	100	for intor ct	S-191111101							-							5005					t	t							t	1
		Male I	Overall		23581		3.40		10	Top districts for inter state out missaring	op distincts				North West	Dellui									20					2774			'			-			-
	Vuinerabilities				No. out-	IIIIgiatioii	% of male	90. of total	% or total	,					South West	Delni								Programme Response	2008	2				2319	-	-					,		
1 1/2	vaine			1				Τ					Τ.	ly ors -	<u>:</u> 4 در:	ors-			-	1,00	707	3123	0	Programr	2007	- -	- -	-		1938	-	-		-	-				
	ı		ndi	_	0		0	-	0		<u> </u>			Inject	%; NA;	injectors-		_	<u>'</u>	0.00	7010	793	0.47		2006				. -	- 814	-	-			-	-			
	ļ	je.	MSM		23		10.85		0			,	-	Kothi - 91.3%;	Panthi- 0%;	decker-	8.7%			SIIVKII	5007	652	0.39		2002			-		393	-	-		-	-	-			
		HRG Size	FSW		189		89.15		0.01			,	-based-	69.31%;	based-	28.57%; reet hased-	2.12%				8007	280	0.55		2004						-						,	Ì	
		•		Ciza Ect	(Mapping,	(5002	% Total HRG		% Total Pop.	Programme	Target	Programme			Typology	5		% <25 yrs.	% Married		oly opinion	treated	% Syphilis pos.		No.	FSWTIs	MSM IIS	IDU IIIs	COMP. 118	Total tested ⁵	Blood Banks	STI clinics	ART centers	Link ART centers	PLHIV Networks	Red ribbon clubs	Comm. care	Oron in conford	Drop-in-centers
		2011			0	3378	0	1227									0.35	1150	0.25	1189	0.25	2027	0.64	312												-		-	
		2010	0	400	0	1908	*	*								-	0.70	572	0.40	200	0.20	1004	5.88	89							uw.					-		-	
		5009			0	1660	*	*									1.47	408	0.42	902	99.0	755	1.11	359	_	L					Hoknown		16.67		-	-		-	
		2008	0	400	*	*	*	*	,							-	0.57	524	09:0	1000	0	312	0.74	1212	-	% widowed or	divorced	55			Parent to	Child	0		-	-		-	
~	rends	2007	0	400			*	*								-	0.89	2/29	0.24	1261	0.40	1748	1.05	190	600	% Marriad %	Mallien	2		2011	Needle/	ringe	0		tails	-		-	
	HIV Levels and Irends	2006	0	400			*	*								-	0.44	451	0.28	363	0.26	778	2.78	36	PLHIV Profile, 2009	ΞĖ	Edu.	43		Route of HIV Transmission, ICTC 201	Rlood	4	0		Block-Level Details	-		-	
	HIN	2002					*	*	,	,	,	,	,	,	,	-	*	*	*	*	*	*	*	*	Ξ	_	+7			HIV Transr		7	- 22		Blo	-		-	
		2004						,	,		,	,			,	-	-	,	-	,			,			0/. 15	0/	3	•	Route of		sexnal	16.67		-	-		-	
			PP4	₹L	ЬР	N	ЬР	N	Ы	N	М	N	М	IN	М	NT	ЬР	IN	ЬР	IN	8	N	М	F	-	TON NOT	W 110 %	99			Hataro-cayua	ווניניו מכייו	29.99		-	-		-	4
			HSS-ANC		Defer		1	Blood Bank	di di	UIS-SCH	7400	WST-SSH	0 P 4 C P 4	MISIMI-SCH		UZII-SSH	T. Mala	CIC Male	OTC Formula	יור ופוופוב	-		TC Direct	Walk-in				ART (58)	DLN (NA)				% of Total Pos.	(a=0)		No. HRG-FSW	No. HRG-MSM	No. HRG-IDU	, initial /0

* Inadequate sample size; - Data not available; ' 2011 Census; 2 Source: DLHS III; 3 Data presented only for years where sample size is valid (HSS-ANC: 300 tested, HSS-HRG/STD: 187 tested, ICTC: 600 tested, PPTCT and BB: 900 tested); 4 PP = percent positive, NT = number tested; 5 General clients and pregnant women

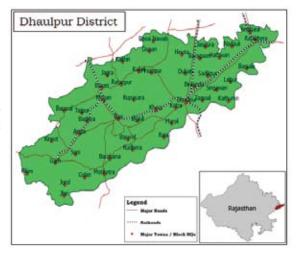
Dholpur, Rajasthan

Background:

Dholpur district is bordered by Bharatpur district and Uttar Pradesh in the north, Madhya Pradesh in the south, Karauli district to the west and Uttar Pradesh and Madhya Pradesh to the east. It has a population of 12.07 lakhs with a sex ratio of 845 females per 1,000 males, and a female literacy rate of 55.45% with an overall literacy rate of 70.14% (2011 Census). The economy of Dholpur mainly depends on agriculture. Dholpur sandstone is mined in the area, which is simply called "Dholpur". Quarrying of building stone is one of the important employment activity, blocks of Baroli, Bari, Baseri, Sarmathura are important places where building and millstone are quarried and as a result have become truck halting points. The major highways that pass through Dholpur are National Highways 6 and 11b.

HIV Epidemic Profile:

 Based on 2010 HSS-ANC data, the level of HIV positivity was moderate (0.75%) but there was not enough data to determine a trend.



- Based on 2011 PPTCT and Blood Bank data, the level of HIV positivity was low (0-0.15%) with a stable to increasing trend.
- In 2011 HIV prevalence among ICTC attendees was low among direct walk-in (3.59%) and referred (2.07%) clients, as well as among male (2.47%) and female (2.56%) clients, with a stable to declining trend.
- As per mapping conducted in 2009, FSW (178, 100% of total HRG) was the only HRG in the district and out of them, 88.2% were home-based and 8.43% were brothel-based.
- As per the 2001 Census, 2.9% of the male population were migrants; 30.7% of them migrated to other states and 14% migrated to other districts within the state.
- The top two destinations for out-of-state migration were Morena in Madhya Pradesh and Agra in Uttar Pradesh.
- HIV awareness and RTI/STI awareness rates among women were 33% and 30% respectively (DLHS-III).
- Of the 114 PLHIV registered at the Anti Retroviral Therapy (ART) centre in 2009, 60% were on ART, 51% were illiterate or only had a primary school education, and 56% were widowed or divorced.
- The syphilis positivity rate among STI clinic attendees in 2011 was 0.07% and the number of STI episodes treated increased to four times in 2011 when compared to the number of episodes treated in 2010.

- Considering moderate HIV prevalence among HSS-ANC, there is a need to understand the profile of ANC attendees and their spouses.
- Focus on outreach efforts among hard-to-reach sub-groups, such as home-based FSW.
- Strengthen outreach programme through awareness campaigns among women and around trucking halt points and highways in the district.
- There is a need to better understand the dynamics of HIV transmission among FSWs through initiation of HRG sites for High Sentinal Survey (HSS) or further analysis of ICTC/PPTCT and ART data.
- Since the largest HRG is FSW, better assessment of the size and profile of clients population, including migrants and truckers, will help in the better understanding of district vulnerabilities.
- There is a need to improve ANC utilization thereby, PPTCT up take; as the current ANC utilization is very low (7.7%).

2010

2009

2008

5006

Prograr 3268 2011

0.07 2007

2010

789

9585

7904

4540

1552

535

9

Gwalior, Madhya Pradesh

Surat, Gujarat

Morena, Madhya Pradesh

South

Agra, Uttar Pradesh

Daily Injectors - NA; Non daily injectors-NA

Dholpur, Rajasthan

District Population: 12,07,293 (1.75% of Rajasthan Population); Female Literacy¹: 55.4%; ANC Utilization²: 7.7%

Intra-district

Male Migration, 2001 Census rall | Inter-state | Intra-state

Overall 15569

2 0 0 0

8583 1.60

2207

4779

migration % of male pop. % of total migration

No. out-

55.13

14.18

30.70

100

0.41

2.90

Top districts for inter-state out-migration

0

			Í	LIV Levels alla liellus								
		2004	2005	2006	2007	2008	2009	2010	2011		HRG Size	
	PP4			ľ				0.75			FSW	MSM
HSS-ANC	NT⁴							399		Size Est.	178	c
PDTCT	В			•	0.71	0.07	0.11	0.12	0.15	(2009)	2	>
-	N			•	1119	3053	5464	4912	6017	% Total HBG	100	c
Jaca Poola	ЬР	-	0.10	0	0	0	0	0	0	N lotal IIIV	2	,
IOOU DAIIK	NT	-	1579	1661	1987	2550	2825	3137	3344	% Total Pop.	0.01	0
OLD SAN	ЬР	-	-	-	-	-		-		Č		
715-cd	N									Programme Target		
740000	ЬР	-	3.28	1.20	4.80	-		-		Programme		4
H33-F3VV	IN	-	244	250	250					Coverage	397	0
CC MACMA	ЬР	-	-	-	_			-			Home	
INSINI-SSH	Ā										- pased	Kothi- NA;
4	М										88.2%; Prothol	Panthi-
HSS-IDU	Ā									Typology	based-	Y Y
CTC MALL	М		*	*	*	5.34	2.50	3.94	2.47		8.43%;	Double
IC IC Male	Ā		*	*	*	1104	1720	1750	2433		Street	neckel- NA
-	PP		*	*	*	8.09	3.47	4.05	2.56		based-	
C I C remale	N		*	*	*	383	720	815	1135	% /75 vrc	0.7/2.0	
9	PP		*	*	*	6.37	2.91	3.48	2.07	% Married		
ICI C Referred	N		*	*	*	675	1753	2013	2565			STI/RTI
ICTC Direct	ЬР		*	*	*	5.79	2.47	5.79	3.59		2008	5009
Walk-in	IN	-	*	*	*	812	289	552	1003	No. episodes	741	1399
			PLH	PLHIV Profile, 2009	2009					treated		
	% On ART	%	% 15-24	% III., Prim Edi	% Married	% widowed or	or			% Syprills pos.	> -	>
ADT (11A)	03	+	~	51	ra La	alvoice.	Т			No.	2004	2002
ANI (114)	00 ,	+	n .	- -	٠ .	00				FSWTIS	-	
		Dougo of 1	JIV Trance	Pourto of HIV Transmission 1CTC 2011	7011					SII INSINI		
	=	100016	-omo-	ISSIDIL, IC	Needle/	Parent to	-			Comp. TIS		
	Hetero-sexual		sexnal	Blood	Syringe	Child	- C	Unknown		ICTG		-
% of Total Pos.	36 50		c	c	c	VL 9		_		Total tested ⁵	-	235
(N=89)	03.50		>	>	0	1				Blood Banks	-	-
			Bloc	Block-Level Details	etails					STI clinics	-	-
No. HRG-FSW										ART centers		
No. HRG-MSM										Link ART centers	+	
No. HRG-IDU								-		Red ribbon clubs		
% Positive, ICTC 2009				,						Comm. care		
% Positive,	Dholpur (urban),									Drop-in-centers		
OCC TOTA												

* Inadequate sample size; - Data not available; 1 2011 Census; 2 Source: DLHS III; 3 Data presented only for years where sample size is valid (HSS-ANC: 300 tested, HSS-HRG/STD: 187 tested, ICTC: 600 tested, PPTCT and BB: 900 tested); 4 PP = percent positive, NT = number tested; 5 General clients and pregnant women

Dungarpur, Rajasthan

Background:

Dungarpur is a tribal district situated in the southern most part of Rajasthan. It has a population of 13.88 lakhs with a sex ratio of 990 females per 1,000 males, a female literacy rate of 46.9 % and an overall literacy rate of 60.7% (2011 Census). The economy of the district mainly depends on agriculture. Population of Dungarpur district mainly depends on livelihood from forest and forest produce. The major highway that passes through Dungarpur is National Highway 8.

HIV Epidemic Profile:

- Based on 2007 HSS-ANC and 2011 PPTCT data, the level of HIV positivity was low (≤ 0.28%) with a stable trend.
- HIV prevalence among ICTC attendees was low among direct walk-in (4.1%) and referred (2.9%) clients, as well as among male (2.9%) and female (3.3%) clients, with a declining trend.
- As per mapping conducted in 2009, FSW (838, 55.5% of total HRG) was the only HRG in the district followed by MSM (671, 44.4%).



- The syphilis positivity rate among STI clinic attendees in 2011 was 3.7%.
- As per the 2001 Census, 4.8% of the male population were migrants; 32.4% of them migrated to other states, 11.7% migrated to other districts within the state and 55.7% migrated within the district.
- The top two destinations for out-of-state migration were Ahmadabad in Gujarat and Mumbai (Suburban) in Maharashtra.
- HIV awareness and RTI/STI awareness rates among women were 80% and 71% respectively (DLHS-III).
- Of the 348 PLHIV registered at the Anti Retroviral Therapy (ART) centre in 2009, 56% were on ART, 84% were illiterate or only had a primary school education, and 81% were widowed or divorced.
- There were total three ICTCs in the district in 2011 and the total number of clients getting tested at these sites increased significantly from 1786 in 2010 to 11723 in 2011.

- Focus on outreach efforts among hard-to-reach sub-groups, such as home-based FSW.
- Strengthen outreach programme through awareness campaigns among women, and around trucking halt points and highways in the district.
- There is a need to better understand the dynamics of HIV transmission among FSWs and MSMs, either through initiation of HRG sites for HIV
 Sentinel Surveillance (HSS) or further analysis of ICTC/PPTCT and ART data.
- Since the largest HRG is FSW, better assessment of the size and profile of clients population, including migrants and truckers, will help in better
 understanding of district vulnerabilities.

1786

2960

1613

285

2011

2010

2008

2007

5374

2010 1900 1.30 2006

, Mumbai, Maharashtra

Gandhinagar,

Gujarat

Thane, (

Mumbai (Suburban), Maharashtra

Ahmadabad, Gujarat

Daily Injectors -NA; Non daily injectors-NA

0

Dungarpur, Rajasthan

District Population: 13,88,906 (2.02% of Rajasthan Population); Female Literacy¹: 46.9%; ANC Utilization²: 29.3 %	HIV levels and Trends ³

Intra-district

Intra-state

Overall 26519

ngi 0 0 0

Male Migration, 2001 Census Inter-state 14794 2.71

3111

8614 1.58

No. out-migration % of male % of total migration

0.57

4.86 100

55.79

32.48

Top districts for inter-state out-migration

		2004	ATV Levels and Iren 2005 2006	2006	2007	2008	2009	2010	2011		HRG Size	ze	H
	PP⁴	99.0	0	┡	*	0.26		*			FSW	MSM	
	NT4	301	400	400	*	379		*		i			+
	PP			*	*	0.62	0.07	*	0.28	Size Est.	000	17.3	
	M			*	*	1628	1366	*	4972	(Mapping,	Ø 2 Ø	-/0	
	PP	*	*	*	*	*	*	*	*	(6007		L	+
	N	*	*	*	*	*	*	*	*	% Total HRG	55.53	44.47	
_	ЬР									i i			┢
_	IN		-		-	-				% lotal Pop.	0.06	0.05	
	ЬР									Programme			H
_	IN									Target			Ⅎ
	ЬР					-				Programme	1349	C	
_	Ä									Coverage		· :	+
	ЬР										Home based-		
	Ä										NĄ:	Panthi-	-
Г	PP		*	*	7.08	5.27	4.96	5.07	2.96	Typology	Brothel based-		
	N		*	*	579	910	928	710	3652		NA;		
	PP	-	*	*	7.64	7.69	5.86	6.43	3.32		-naseri naseri		
	M		*	*	432	572	999	513	3099		5	¥	\dashv
	ЬР		*	*	7.29	3.64	2.60	5.89	2.93	% <25 yrs.		-	\dashv
	IN		*	*	782	549	1518	1137	5661	% Married		_	┨
	ЬР		*	*	7.42	7.72	0	2.32	4.13		STI/RTI	RTI	6
_	Ä		*	*	229	933	9/	98	1090		7008	5003	2
			PLHIV	PLHIV Profile, 2009						No. episodes	913	1999	9
	% On ART		%	% III., Prim.		% widowed	þ			% Syphilis pos.	0	0.14	-
	:	+	Т	Edu.	Σ	or divorced	aT.						
	ನ	+	2	\$	2	×	1			No.	2004	2002	20
					•		_			FSW TIs	-	-	
	Ro	te of HIV	Transmis	Route of HIV Transmission, ICTC 2011	011					MSM TIS	•		
	Hetero-sexual		Homo-	Blood	Needle/	Parent to		Unknown		IDU TIs			
			sexual		syringe	Culla	-			Comp. TIS			
	90.72		0	0	0	8.25	1.03	<u> </u>		Total tested ⁵		162	1 8
			Block-	Block-Level Details	ils			-		Blood Banks	-	-	ľ
										STI clinics	-	-	
T			Ľ	Ľ						AKI centers			
T										PLHIV Networks			1
7										Red ribbon clubs	- SC		
% Positive, ICTC 2009			1	•	•					Comm. care centers			
-	% Positive, PPTCT Dungarpur (urban),		•	•		,				Drop-in-centers			
1	t>									Condom outlets	S		

* Inadequate sample sizer - Data not available; 1 2011 Census; 2 Source: DLHS III; 3 Data presented only for years where sample size is valid (HSS-ANC: 300 tested, HSS-HRG/STD: 187 tested, ICTC: 600 tested, PPTCT and BB: 900 tested); *PP = percent positive, NT = number tested; § General clients and pregnant women

Ganganagar, Rajasthan

Background:

Sri Ganganagar district, also known as "breadbasket of Rajasthan", is situated at the point where the Satluj River water enters the state Rajasthan. It has a population of 19.69 lakhs with a sex ratio of 887 females per 1,000 males, and a female literacy rate of 60.07% with an overall literacy rate of 70.25% (2011 Census). The economy of the district mainly depends on agriculture. Industries in Sri Ganganagar district are based on agriculture. Major industries are cotton ginning and pressing factories, mustard oil mills, wheat flour mills, sugar mills, and cotton spinning and textile factories. Most of the factories are located in and around Sri Ganganagar city which have become trucking halt points. The major highway that passes through the district is National Highways 15.



- Based on 2010 HSS-ANC data, HIV positivity level was moderate (0.50%) with a rising trend from 2007 onwards.
- Based on 2011 PPTCT and Blood bank data, the level of HIV positivity was low (≤0.06%), with a stable trend.
- Based on 2010 HSS-FSW data, the level of HIV positivity was low (0.4%), but due to a lack of data from previous years, a trend could not be
 determined.
- HIV prevalence among ICTC attendees in 2011 was low among male (0.72%) and female (0.47%) clients and also among direct walk-in (0.85%) and referred (0.46%) clients; with an overall stable trend.
- As per mapping conducted in 2009, FSW (2557, 88.1% of total HRG) was the largest HRG in the district, followed by IDU (217, 7.4% of total HRG) and MSM (127, 4.3% of total HRG); of the FSW, 35.7% were home-based and 26.4% were street-based.
- The syphilis positivity rate among STI clinic attendees in 2011 was 0.94%.
- As per the 2001 Census, 10.8% of the male population were migrants; 9.8% of them migrated to other states and 24.2% migrated to other districts within the state.
- The top two destinations for out-of-state migration were Firozpur and Sirsa in Punjab.
- HIV awareness and RTI/STI awareness rates among women were 46% and 30% respectively (DLHS-III).
- Of the 132 PLHIV registered at the Anti Retroviral Therapy (ART) centre in 2009, 57% are on ART, 68% were illiterate or only had a primary school education, and 80 % were widowed or divorced.

- Focus on outreach efforts on hard-to-reach sub-groups, such as home-based FSW.
- Strengthen outreach programme through awareness campaigns around trucking halt points and highways in the district.
- Better understand the dynamics of HIV transmission among FSW, MSM and IDU, through further analysis of ICTC/PPTCT and ART data.
- Since the largest HRG is FSW, better assessment of the size and profile of clients population, including migrants and truckers, will provide better insights into district vulnerabilities.
- HIV transmission through unknown routes are high, thus more probing needs to be done to understand the transmission dynamics among PLHIV at the ICTCs.



2010

2009

2008

Programme Response

7277 0.94 2007

2011

2010 3270 0.65 2006 30623

25937

18466

5812

2883

27

19

9

4

7

3

3

Ludhiana, Punjab

Muktsar, Punjab

Bathinda, Punjab

Sirsa, Punjab

Firozpur, Punjab

Injectors - NA; Non daily injectors-

¥

Daily

69

Intra-district

Intra-state

Inter-state 10196

Overall 103906 10.88

25161

2.63

1.07 9.81

% of male % of total migration

> 7.48 0.01

pop.

No. out-migration

Male Migration, 2001 Census

65.97 7.18

24.22

100

Top districts for inter-state out-migration

Ganganagar, Rajasthan

District Population: 19,69,520 (2.8% of Rajasthan Population); Female Literacy¹: 60.07%; ANC Utilization²: 39.2%

HRG Siz FSW FSW 88.14 88.14 0.13 et					HIV Levels and Trends ³	l Trends ³								Vulr
NIT A 10 A			2004	2002	2006	2007	2008	5000	2010	2011		HRG Siz	ie.	
No. No.	CINA 2211	bP⁴	0	2.25	ĸ	0	0.25		0.50			74.00	4054	H
NIT NIT	HSS-AINC	NT⁴	403	400	400	400	400		400			FSW	MSM	
NI	TOTAL	ЬР		•	*	*	0	0	0.03	0.05	Size Est.	7557	177	_
NI	בורו	NT		-	*	*	1565	9211	13452	13271	(Mapping, 2009)	7557	/7	\dashv
NIT S216 11740 14222 13380 15570 12470 13983 15770 13983 13770 13983 13770 13983 13770 13983 13770	Jaca boold	dd	0.10	0.10	0.10	0.10	0	0.10	0.11	90.0	% Total HRG	88 17	7 38	
M	Blood Bank	IN	5216	11740	14232	13380	15878	16580	23470	29983	70 TOTAL TITLE	† 00	t.	1
NIT 1.0	25	Ы	-		1.20	0	0				% Total Pon	0 13	100	
M	UIS-SSH	N			250	248	250				/0 lotal lop.	2	5	1
NIT NIT	74133 3311	dd		•	-	-	0		0.42		Programme Target			\dashv
NI	HSS-FSW	IN			-		250		240		Programme	781	54	
NIT	P V C P V C P V	Ы			1	-					Coverage	-	5	\dagger
NIT 19	MSM-SSH	F			1							Home based-	1	
NIT NIT	2	d.									T C C C C C C C C C C C C C C C C C C C	35.75%; Prothal hasad	Kothi- 42.74%;	ے '%' '%'
PP NT NT NT NT NT NT NT	HSS-IDU	Þ									iypology	Srotriel based- 37.82%:	Pantril- 36.73%; Double decker-	, v.
NT NT NT NT NT NT NT NT	CTC Mala	Ы		*	*	1.18	89.0	0.84	69.0	0.72		Street based-	20.51%	
NT NT NT NT NT NT NT NT	ICIC Male	IN		*	*	1191	2638	4881	6491	8992		26.44%		
NT NT NT NT NT NT NT NT	ICTC	ЬР		*	*	1.13	0.31	0.53	0.65	0.47	% <25 yrs.			
No. operation No. operatio	Female	IN		*	*	977	1609	4374	5994	8360	% Married			T
NI	ICTC	ЬР		*	*	0.58	0.63	0.68	0.44	0.46		STIVE	E	
NT NT NT NT NT NT NT NT	Referred			*	*	969	2861	5324	7573	11117			5009	2010
NT NT NT NT NT NT NT NT	ICTC Direct			*	*	1.43	0.36	0.71	1.04	0.85	No enisodes			
20 27 27 28 11 80 80 10 10 10 10 1	Walk-in			*	*	1473	1386	3931	4912	6235	treated	336	2137	3270
W. On ART W. 15-24 W. III., Prim. W. Married Monored or divorced Monored Monored or divorced Monored Monored or divorced Monored or di											% Syphilis pos.	0	1.08	0.65
No. State	% On AR	%				widowed or						1	Prograr	
All All	(CC1) TOV	- 23			Euu.		nanoura	_			No.	2004	2005	2006
Name of HIV Transmission, ICTC 2011 Name of HIV Transmission, ICTC	AKI (152))C	0		00	=	00	_			FSWTIs	-		
Hetero-sexual Homo-sexual Blood Needle/Syringe Parent to Child Unknown Comp. Tis	רוו (ווע)			Douto of III	VTransmission	CTC 2011					MSM TIs			
Sandaria Sandaria		Hetero-se	_	Sexual Bl	nod Needle	H	rent to Child	Unkno	uw.		IDU TIs			
10 83.02 0 0.54 1.89 4.72 9.43 1.07 1.00	% of Total		_	\perp	\top	╀					Comp. Tls			
Single Partial Parti	Pos. (N=106					.89	4.72	9.4:	2		ICTCs		-	7
Sinch Banks Strain					Block-Level	Details					Total tested ⁵		24	112
ive, Anupgarh, Ganganagar, Padampur, Raisinghnagar, Sadulshahar, Srikaranpur, Suratgarh, 0.97 0.69 0.69 0.69 0.97 0.61 0.78 0.97 0.61 0.97 0.61 0.00 0.00 0.00 0.00 0.00 0.00 0.00	No. HRG-										Blood Banks	2	2	7
15- 16- 17- 18- 18- 18- 18- 18- 18- 18- 18- 18- 18	FSW										STI clinics	-	2	2
ive, Anupgarh, Ganganagar, Padampur, Raisinghnagar, Sadulshahar, Srikaranpur, Suratgarh, 0.032 0.31 0.78 0.97 0.69 0.69 0.69 0.097 0.01 0.01 0.01 0.01 0.00 0.00 0.00 0.0	No. HRG-				,					,	ART centers	,		
Vive, Anupgarh, Ganganagar, Padampur, Raisinghnagar, Sadulshahar, Srikaranpur, Suratgarh, 0.69 0.31 0.31 0.78 0.978 0.97 0.61 0.61 0.61 0.60 0.00 0.00 0.00 0.00	MISIMI Call - IA										Link ART centers			•
ive, Anupgarh, Ganganagar, Padampur, Raisinghnagar, Sadulshahar, Srikaranpur, Suratgarh,	NO. HRG-	,	,				,	,	,		PLHIV Networks			
009 0.69 0 0.32 0.31 0.78 0.97 0.61 ive. Ganganagar Anupgarh, Ganganagar, Padampur, Raisinghnagar, Saduishahar, Srikaranpur, Suratgarh, O 0 0 0 0	% Positive,	Anupgarh,		Padampur,	Raisinghnagar,	_		Suratgarh,			Ked ribbon clubs			•
ive. Ganganagar Anupgarh, Ganganagar, Padampur, Raisinghnagar, Sadulshahar, Srikaranpur, Suratgarh, (urban), 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	ICTC 2009	0.69		0.32	0,31	\rightarrow		0.61			Comm. care			
(urban), 0 0 0 0 0 0 0	% Positive, PPTCT	Ganganagar	Anupgarh,	Ganganagar,		Raisinghnagar,	Sadulshahar,	Srikaranpur,	Suratgarh,		Drop-in-centers			
	2009	(urban), 0	0	0		0	0	0	0		Condom outlets			

* Inadequate sample size; - Data not available, 1 2011 Census; 2 Source: DLHS III; 3 Data presented only for years where sample size is valid (HSS-ANC: 300 tested, HSS-HRG/STD: 187 tested, ICTC: 600 tested, PPTCT and BB: 900 tested); 4 PP = percent positive, NT = number tested; 5 General clients and pregnant women

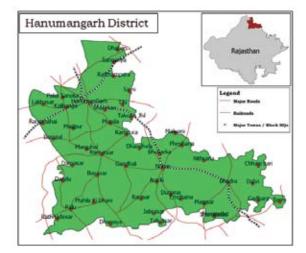
Hanumangarh, Rajasthan

Background:

Hanumangarh district is located in the extreme north of Rajasthan. It has a population of 17.79 lakhs with a sex ratio of 906 females per 1,000 males, and a female literacy rate of 56.91% with an overall literacy rate of 68.37% (2011 Census). The economy of Hanumangarh district mainly depends on agriculture. In Hanumangarh district main crops that the people produce are rice, bajra, cotton, sonamukhi, wheat, and vegetables. The Hanumangarh district is quite enriched in historical heritage. The major highway that passes through Hanumangarh is National Highway 15.

HIV Epidemic Profile:

- Based on 2011 PPTCT and Blood Bank data, the level of HIV positivity was low (0.10-0.21%), with a declining trend.
- HIV prevalence among 2011 ICTC attendees was low among direct walk-in (1.63%) and referred (1.24%) clients and also among male (1.7%) and female (0.88%) clients, with a stable to declining trend.



- As per mapping conducted in 2009, FSW (1423, 89.2% of total HRG) was the largest HRG in the district, followed by MSM (128, 8.03% of total HRG), and IDUs (44, 2.76% of total HRGs).
- The syphilis positivity rate among STI clinic attendees in 2011 was 0.12%.
- As per the 2001 Census, 5.9% of the male population were migrants; 18.3% of them migrated to other states, 33.3% migrated to other districts within the same state.
- The top two destinations for out-of-state migration were Sirsa and Hisar in Haryana.
- HIV awareness and RTI/STI awareness rates among women were 41% and 21.3% respectively (DLHS-III).
- Of the 107 PLHIV registered at the Anti Retroviral Therapy (ART) centre in 2009, 7% were 15-24 years of age, 67% were on ART, 72% were illiterate or only had a primary school education, and 74 % were widowed or divorced.
- Though there were large numbers of FSW in the district there was only one FSW TI in the district.

- Focus on outreach efforts on hard-to-reach sub-groups, such as home-based FSW.
- Strengthen outreach programmes through awareness campaigns around trucking halt points and highways in the district.
- Better understand the dynamics of HIV transmission among FSW, MSM and IDU, either through initiation and regularization of HRG sites for HSS or further analysis of ICTC/PPTCT and ART data.
- Since the largest HRG is FSW, better assessment of the size and profile of clients population, including migrants and truckers, will provide better insights into district vulnerabilities.

Hanumangarh, Rajasthan

District Population: 17,79,650 (2.5% of Rajasthan Population); Female Literacy': 56.9%; ANC Utilization²: 35.6%

Intra-district

Inter-state Intra-state 15872

Overall 47635

ᆲ 4

MSM 128 8.03 0.01

Male Migration, 2001 Census

23030 2.88 48.35

8733

1.98 33.32

5.95 100

2.76

0

migration % of male pop. % of total migration

No. out-

Bathinda, Punjab

Firozpur, Punjab

Fatehabad, Haryana

Hisar, Haryana

Sirsa, Haryana

Daily Injectors-NA; Non daily injectors-NA

Kothi- NA; Panthi- NA; Double decker- NA

152

0

Top districts for inter-state out-migration

18.33

			HIV Lev	HIV Levels and Trends ³	ends³						
		2004	2005	2006	2007	2008	2009	2010	2011		HRG Size
ONA 221	PP⁴	,		,	,			,			FSW
USS-AINC	NT⁴	,	,		,			1		Size Est.	1473
PDTCT	PP		٠	*	0.30	0.17	0.14	0.13	0.10	(Mapping, 2009)	
7	NT	,		*	971	2302	2697	3133	4164	% Total HRG	89.22
0	ЬР	0.10	0:30	0.20	09:0	0.40	0.70	0.27	0.21		
DIOOU DAIIK	IN	1662	3794	4852	1613	5120	6547	2068	9179	% Total Pop.	0.08
OT 3 331	PP	,		0.40	0	0		2.40			
U15-55H	M			250	242	250		250		Programme	
791000000	PP	,		,						larget	
MSS-FSW	NT									Programme	316
DOC MONA	ЬР		•	-						and and a	Ноше
INICINI-CCII	NT		-					-			based- NA;
1101 0011	ЬР	,								Typology	Brothel
001-881	IN	•				-		-			based- NA;
OTC Male	ЬР		*	*	1.28	1.61	1.70	2.54	1.71		Street
ICIC Male	IN	-	*	*	1018	1430	1291	1300	1993		based- NA
ارتدر ومسماه	ЬР	-	*	*	1.04	1.17	1.65	1.53	0.88	% <25 yrs.	
ICIC reliigie	NT		*	*	674	937	1028	1241	1597	% Marned	CTIVE
ICTC Befores	ЬР	-	*	*	1.10	1.22	1.38	1.86	1.24		SII/RI
ורור עפופוופת	IN		*	*	1453	2134	2109	2607	2668	N - Indian	9007
ICTC Direct Walk-in	ЬР		*	*	1.67	3.43	4.76	2:92	1.63	No. episodes	969
TO DIECE WAIN III	F	,	*	*	239	233	210	444	922	% Symbilis nos	
			PLHIV	PLHIV Profile, 2009						o syprims pos.	
	% On ART	_	% 15-24	, . %		% widowed	n -			No.	2004
/501/ TOV	13	+	+	Prim. Edu.	Married	or divorced	_			FSW TIs	
DLN (NA)	ò '		,	7/	,	ţ,				MSM TIS	1
		Route of F	Route of HIV Transmission, ICTC 2011	ssion, ICTC	2011					DO IIIs	
	Hetero-sexual	exnal	Homo-	Blood	Needle/	Parent to	Unknown	nwo		ICTCs	. –
% of Total Pos.			acvada.	!	20111190		ľ			Total tested ⁵	
(N=45)	88.88	<u> </u>	0	/9.9	77.7	77.7				Blood Banks	
			Block	Block-Level Details	tails					SILCINIC	1
No. HRG-FSW		,		,	,			,		AKI centers	1
No. HRG-MSM			,							PI HIV Notworks	
No. HRG-IDU									,	Red ribbon clubs	ŀ
% Positive, ICTC 2009	-	-	-		-			-		Comm. care centers	,
% Positive, PPTCT	Hanumangarh									Drop-in-centers	
5002	(ulbdii), v. i+									Condom outlets	-

	_	_	ļ
,			
1			
ı			
Comm. care centers	Drop-in-centers	Condom outlets	
		\neg	
•			
	Hanumangarh	(urban), 0.14	
% Positive, IC IC 2009	% Positive, PPTCT	5009	

7754

5674

5016

4669

2 2663

189

148

10

2011

2010

2009

2008

2006

2005

4633 0.12 ogram 2007

1585 0.52

836

2011

2010

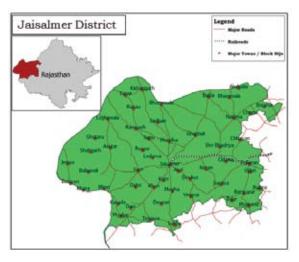
2009

* Inadequate sample sizg. - Data not available, 1 2011 Census; 2 Source: DLHS III, 3 Data presented only for years where sample size is vaild (HSS-ANC: 300 tested, HSS-HRG/STD: 187 tested, ICTC: 600 tested, PPTCT and BB: 900 tested); *PP = percent positive, NT = number tested; 5 General clients and pregnant women

Jaisalmer, Rajasthan

Background:

Jaisalmer district is the largest district of the state and the third largest in the country area wise, it lies in the Thar Desert, spreading across the border of India and Pakistan. District is bounded by Bikaner in North, Barmer in South, and Jodhpur in East; West and South West area is bounded by Indian border. According to the 2011 census Jaisalmer is the least populous district of Rajasthan and has a population of 6.72 lakhs with a sex ratio of 849 females for every 1000 males, with a female literacy rate at 40.2% and an overall literacy rate of 58.04% (2011, Census). The economy of Jaisalmer district mainly depends on industries; at present, the major industries in the district are the tourism, stone-cutting and carving, khadi industry and mineral based industry. The khadi industry has also developed as the most important cottage industry contributing in-migration of laborers from rural pockets of neighboring districts. Jaisalmer is connected to other cities in the state as well as neighbouring states like Gujarat, Delhi with National Highway 15.



HIV Epidemic Profile:

- Based on 2010 HSS-ANC, 2011 PPTCT and Blood Bank data, the level of HIV positivity was low (≤ 0.25%), with a stable to declining trend
 for ANC and PPTCT, however, there was not enough data for Blood Bank to determine a trend.
- HIV prevalence among ICTC attendees was low among direct walk in (0.39%) and referred (0.36%) clients, also among male (0.14%) and female (2.69%) clients, with a stable to rising trend except for referred clients who had a declining trend in recent years.
- As per mapping conducted in 2009, MSM (2514, 72.1% of total HRG) was the largest HRG in the district, followed by FSW (972, 27.8% of total HRG); of the FSW, 78.7% were home-based and 20.2% were Brothel based.
- As per the 2001 Census, 4.5% of the male population were migrants; 18.4% of them migrated to other states, 26.6% of them migrated to other districts within the state.
- The top two districts for out-of-state migration were Pune in Maharashtra and North West Delhi.
- HIV awareness and RTI/STI awareness rates among women were 33.8% and 39.4% respectively (DLHS-III).
- Of the 45 PLHIV registered at a Anti Retroviral Therapy (ART) centre in 2009, 96% were on ART, 47% were illiterate or only had a primary school education, 11% were married and 80% were widowed or divorced.
- Heterosexual transmission accounted for 50% of the total HIV transmission, but more importantly transmission from parent to child accounted for 12 50% of the total HIV transmissions
- There was only one composite TI as of 2011.

- Focus on outreach efforts on hard-to-reach sub-groups, such as home-based FSW.
- Strengthen outreach programme through awareness campaigns around trucking halt points and highways in the district.
- Better understand the dynamics of HIV transmission among FSW and MSM either through initiation and regularization of HRG sites for HSS
 or further analysis of ICTC/PPTCT and ART data.
- Since the largest HRG is MSM, better assessment of the size and profile of clients population, including migrants and truckers, will provide better insights into district vulnerabilities.
- Considering the large number of FSWs and MSMs (around 3500) in the district and only one composite TI in operation there is a need to establish more TIs to cover HRGs with prevention programmes.
- Considering the high transmission rate from parent to child there is a need to strengthen the PPTCT programme.

2010 2076

2009

1269

2011

2010

2009

2008

2007

2006

2005

6524

4808

5162

1186

135

32

Jaisalmer, Rajasthan District Population: 6,72,008 (0.09% of Rajasthan Population); Female Literacy: 40,2%, ANC Utilization: 18.8%

Intra-district

Intra-state

Inter-state

Overall 12540

 \Box 0

Male Migration, 2001 Census

6885 2.47

3337

2318

No. out-migration

2514 MSM

72.12 0.37

54.90

18.48

% of total migration

0

0

1.20 26.61

0.83

4.50 100

% of male pop.

Top districts for inter-state out-migration

Mumbai (Suburban), Maharashtra

Surat, Gujarat

North West Delhi

Maharashtra

NA; Panthi-NA; Double decker-NA

injectors- NA NA; Non daily Daily Injectors-

Pune,

			HIV Leve	HIV Levels and Trends ³	nds³							
		2004	2002	2006	2007	2008	2009	2010	2011		HRG Size	Size
JIVV JJII	PP⁴			0.25	0	0		0.25			/V/02	
HSS-AINC	NT⁴	-		400	400	399		400			LSW	
PPTCT	PP				*	0	0.11	0	90.0	Size Est.	677	
-	N				*	2736	2550	2761	3387	(Mapping, 2009)	5	
Jacob poolo	PP	*	*	*	*	*	*	0.10	0.09	% Total HRG	27.88	
DIOUU DAIIK	NT	*	*	*	*	*	*	1000	1164	% Total Pon	0.14	
OE STE	ЬР	-		-						/8 lotal lop:	5	
U15-55H	NT			-						Programme		
חכב בכוויי	ЬР	-		-						Target		
N23-F3VV	NT			-						Programme	82	
LICE MACAA	ЬР	-								Coverage	:	
INC. INC. INC. INC. INC. INC. INC. INC.	IN										Home based-	-ba
101 331	ЬР	-									78.79%;	
001-881	IN									Typology	Brothel based-	-pag
OTC Mala	ЬР	,	*	*	0.81	0.50	9.02	08.0	0.14		20.27%;	
ICIC Male	NT	-	*	*	615	2222	2153	2748	2840		Street based-	-b
ICTC Fomolo	dd	-	*	*	0.27	1.96	5.71	6.29	2.69		0.94%	
ורור ובווומום	N		*	*	376	204	105	143	297	% <25 yrs.		
ICTC Deferred	dd	-	*	*	0.88	1.23	5.56	4.32	0.36	% Married		
ורור עפופוופת	NT	-	*	*	113	18	54	185	280		STI	STI/RTI
ICTC Direct	dd	-	*	*	0.57	09'0	0.77	98'0	0.39		2008	2005
Walk-in	NT		*	*	878	2345	2204	2706	2857	No. episodes	692	1260
			PLHIV	PLHIV Profile, 2009	60					treated	760	.021
			III %		%					% Syphilis pos.	,	1
	% On ART	% 15-24	Prim	%	widowed						-	
		2	Edu.	Married	jo :					No.	2004	200
					divorced					FSW TIS		1
ART (45)	96	0	47	11	08					MSM TIs		1
DLN (NA)	-									IDU TIS	r	1
	Route of H	Route of HIV Transmission, ICTC 2011	ssion, ICTC	2011						Comp. TIs		1
	Hetero-sexual	Homo-	Blood	Needle/	Parent to	Unknown				ICTG		-
E) 70		sexnal		syringe	BIII					lotal tested		35
% of lotal Pos. (N=16)	20	0	0	0	12.50	37.50				Blood Banks	-	- -
			Block-	Block-Level Details	:i					ART centers		
No. HRG-FSW										Link ART centers		١.
No. HRG-MSM	-									PLHIV Networks		
No. HRG-IDU	1				,		,	,		Red ribbon clubs		1
% Positive, ICTC										Comm. care centers	,	
% Positive, PPTCT	Jaisa		,	,			,			Drop-in-centers		•
	0.11%									Condom outlets		

* Inadequate sample size - Data not available; 1 2011 census, 2 Source: DLHS III; 3 Data presented only for years where sample size is valid (HSS-ANC; 300 tested, HSS-HRG/STD: 187 tested, ICTC: 600 tested, PPTCT and BB: 900 tested); 4 PP = percent positive, NT = number tested; 5 General clients and pregnant wome

162

Jalore, Rajasthan

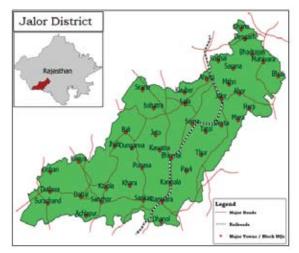
Background:

Jalore district is situated in the south west direction of Rajasthan. It has a population of 18.30 lakhs with a sex ratio of 951 females per 1,000 males, and a female literacy rate of 38.7% with an overall literacy rate of 55.5% (2011 Census). The economy of Jalore district mainly depends on agriculture and animal husbandry. Some industries have been set up based on minerals available from local mines. The main minerals produced are gypsum, limestone, bajari, murram, granite, and graded fluorite. Jalore is also known as Granite Capital of Rajasthan, it is famous for its high quality lakhaa granite. The major highway that passes through Jalore is National Highway 15.

HIV Epidemic Profile:

- Based on 2010 HSS-ANC data, the level of HIV positivity was moderate (0.75%), with a stable to increasing trend.
- Based on 2011 PPTCT data, the level of HIV positivity was low (0.24%), with a declining trend.
- Based on 2011 data, HIV prevalence among ICTC attendees was low among female (2.44%) clients but moderate among male (5.36%) clients. Also, HIV prevalence was low among referred (2.25%) clients, whereas it was high among direct walk-ins (12.43%). The positivity level showed an overall declining trend among the attendees.
- As per mapping conducted in 2009, FSW (140, 100% of total HRG) was the only HRG in the district and of the FSW, 100% were home-based.
- The syphilis positivity rate among STI clinic attendees in 2011 was 0.33%.
- As per the 2001 Census, 6.3% of the male population were migrants; 41.80% of them migrated to other states and 13.4% of them migrated to other districts within the state.
- The top two districts for out-of-state migration were Surat, Gujarat and Mumbai in Maharashtra.
- HIV awareness and RTI/STI awareness rates among women were 54.2% and 38.7% respectively (DLHS-III).
- Of the 335 PLHIV registered at the Anti Retroviral Therapy (ART) centre in 2009, 3% were 15-24 years of age, 91% were on ART, 84% were
 illiterate or only had a primary school education, and 75% were widowed or divorced.
- HIV transmission from parent to child was high, with 19.54% of the total HIV transmission in the district was from parent to child.

- · Conduct differential analysis of ICTC data especially among male and direct walk-in clients to better understand the district vulnerabilities.
- Focus on outreach efforts on hard-to-reach sub-groups, such as home-based FSW.
- Strengthen outreach programme through awareness campaigns around trucking halt points and highways in the district.
- Better understand the dynamics of HIV transmission among FSW either through initiation and regularization of HRG sites for HSS or further analysis of ICTC/PPTCT and ART data.
- Since the largest HRG is FSW, better assessment of the size and profile of clients population, including migrants and truckers, will provide better insights into district vulnerabilities.
- Strengthen PPTCT programmes in the district.



2883

1692

2 925

152

334

2010

2009

2006

2005

3958 0.33 2007

0.44 237

2010

2009 195 0.72

Banas Kantha, Gujarat

Ahmadabad, Gujarat

Mumbai, Thane, Maharashtra Maharashtra

Surat, Gujarat

Daily Injectors-NA; Non daily injectors-NA

Kothi- NA; Panthi- NA; Double decker- NA

44.79

13.41

% of total migration

Top districts for inter-state out-migration

Intra-district 20774 2.82

Inter-state Intra-state

Overall 46378

2 0 0

MSM 0 0

Male Migration, 2001 Census

6218

19386

0.84

2.63

6.30 100

DOD.

No. out-migration % of male

Jalore, Rajasthan

District Population:18,30,151 (2.6% of Rajasthan Population); Female Literacy¹: 38.7%; ANC Utilization²: 28.9%

	HRG		FSW	0,1	140	100	2						Home	Home hased-	100%:	Brothel	based-	:%0	Street	pased-0%		·	2008	2000	243	0	2004						-	1	,				
				Size Est.	(Mapping, 2009)	% Total HRG		% Total Pop.		Programme	Target	Programme	Coverage			Typology	3			T	% <25 yrs.	% Married		No opicodos	treated	% Syphilis pos.	No.	FSWTIs	MSM TIs	IDU TIS	Comp. IIs	Total tested ⁵	Blood Banks	STI clinics	ART centers	Link ART centers	PLHIV Networks	Comm. care	Drop-in-centers
	100	1107		, ,	0.24	5767		*									5.36	1137	2.44	1556	2.25	2315	12.43	378															
. 28.9%	0040	0107	0.75	400	0.19	6717		*									18.05	410	19.67	361	14.03	663	48.15	108						uw.c	Τ	2		ŀ					
Utilization	0000	5007		000	0.38	6671		*									21.41	467	16.69	617	13.78	784	31.67	300		or		T		Hoknown		1.15		ŀ					
8.1 %; ANC	0000	9007	- 6	1 400	1337	0771		*									*	*	*	*	*	*	*	*		% widowed or divorced	75			Parent to	Child	19.54							
LITERACY: 5	rends³	7007	0.25	9 +	* *	,		*						-			*	*	*	*	*	*	*	*	600	% %	14		2011	/elpeeN	Syringe	0	tails			-			
ion); remale	HIV Levels and Trends	2000	0.25) 1	* *	,		*						,			*	*	*	*	*	*	*	*	PLHIV Profile, 2009	% III., Prim. Edu.	84		ssion, ICTC	Rlood	+	0	Block-Level Details				-		
ian Populat	HIVLe	5007				. ,		*						,			*	*	*	*	*	*	*	*	PLHI	% 15-24 %	3		Route of HIV Transmission, ICTC 2011	_	sexnal	0	Bloc						
% OI Kajasti	1000	5004				. ,		*									,	-									-		Route of	_	+								
5,30,131 (2.07		1	PP4	- 2	료	2 6	£ !	E 8	dd	N	ď	N	Ы	N	G.	TN	PP	NT	PP	NT	Ы	IN	ЬР	N		% On ART	91			Hetero-sexual		79.31							Jalore
District Population: 18,30,151 (2.6% of Rajastrian Population), Ferrale Literacy: 38.7%; ANC Otilizations: 28.3%			HSS-ANC		PPTCT		Blood Bank		HSS-STD		HSS-FSW	****	HCC-MCM	INC.IVI.20VI	HCC-IDII	001-001	ICTC Male	ICIC IVIDIE	ICTC Female	ICIC reliigie	Dofound OT	ורור עבובוובם	ICTC Direct	Walk-in			ART (335)	DLN (NA)				% of lotal Pos.	(N-07)	No HRG-FSW	200	No. HRG-MSM	No. HRG-IDU	% Positive, ICTC 2009	% Positive, PPTCT

CT and DB: 000 total); 4 DB = norront notified	ci alla bb. 300 testeu), iri = percent positive,	
of house upon CTD: 107 total DTC: 600 total DD	U testeu, Hoo-HING/OTD. 107 testeu, ICTC. 000 testeu, FF	
00. ONA 200 bilan si asis alamas anadas mana ng shaa	Unit for years writing sample size is valid (1133-ANV., 30)	
1 2011 Connect 2 Source 10 III 3 III 3 Out of the	. 2011 Celibus, Jounce, Dens III, Pata presenteu c	nant women
* Insufactions comparison Data and available	madequate sample size, - Data Hot available,	NT = number tested; ⁵ General clients and pregn

Jhalawar, Rajasthan

Background:

Jhalawar district is situated in the south-eastern region of Rajasthan at the edge of the Malwa plateau; Jhalawar has rocky but water-laden verdant landscape. It has a population of 14.11 lakhs with a sex ratio of 945 females per 1,000 males, and a female literacy rate of 47.06%, with an overall literacy rate of 62.1% (2011 Census). The economy of Jhalawar district mainly depends on agriculture. Jhalawar district is surrounded by and well-connected to developed industrial and commercial cities like Indore, Ujjain, Ratlam, Bhopal, and Kota. The district has its name in exporting various productions like synthetic yarns, oranges, fibre yarns, Kota stone etc. The major highway that passes through Jhalawar is National Highway 12.

HIV Epidemic Profile:

- As per 2010 HSS-ANC data, the level of positivity was low (0%), with a stable trend.
- Based on 2011 PPTCT and Blood Bank data, the level of HIV positivity in 2011 was low (0.01-0.06%), with a stable to declining trend.
- HIV positivity among ICTC attendees was low among direct walk-in (1.74%) and referred (0.79%) clients and also among male (0.85%) and female (0.94%) clients, with a declining trend.
- As per mapping conducted in 2009, FSW (106, 61.9% of total HRG) was the largest HRG in the district followed by IDU (65, 38.01% of the total HRG).
- The syphilis positivity rate among STI clinic attendees in 2011 was zero percent.
- As per the 2001 Census, 4.6% of the male population were migrants; 25.1% of them migrated to other states and 29% of them migrated to other districts within the state.
- The top two destinations for out-of-state migration were Mandsaur and Shajapur in Madhya Pradesh.
- HIV awareness and RTI/STI awareness among women were 31.3% and 31.6% respectively (DLHS-III).
- Of the 52 PLHIV registered at the Anti Retroviral Therapy (ART) in 2009, 4% were in 15-24 years of age, 67% were on ART, 52% were illiterate
 or only had a primary school education, and 65% were widowed or divorced.

- Focus on outreach efforts on hard-to-reach sub-groups, such as home-based FSW.
- Strengthen outreach programme through awareness campaigns around industries and trucking halt points and highways in the district.
- Better understand the dynamics of HIV transmission among FSWs and IDUs either through initiation and regularization of HRG sites for HSS
 or further analysis of ICTC/PPTCT and ART data.
- Since the largest HRG is FSW, better assessment of the size and profile of clients population, including migrants and truckers, will provide better insights into district vulnerabilities.



Ujjain, Madhya Pradesh

Intra-district 12974

45.79 2.12

Jhalawar, Rajasthan

		ZH.	HIV Levels and Trend	nd Trends	7.									vuinerabilities	ties				
		2004	2002	2006	2007	2008	5000	2010	2011		HRG Size	ize				Male Mi	Male Migration, 2001 Census	1 Census	
HSS-ANC	PP⁴	*	0.50	0	0	0		0			FSW	MSM	NOI	2		Overall	lator ctato		드
	NT⁴	*	400	400	399	400		400									ווובו-פומו	state	ë
PPTCT	ЬР	-			*	0.03	0.19	0.15	90.0	Size Est.	106	_	79	L	No. out-	78337	7178	8230	17
	IN				*	3629	4122	4592	860/	(Mapping, 2009)	001	>	o	,	migration	70227	071/	0530	_
Blood Bank	ЬР	0	0	0	0	0	0	0.04	0.01	% Total HRG	61 00	_	38	38 01	% of male	7.63	1 16	1 3/	۲
	IN	2836	4461	0999	7878	8231	9108	9279	11563		66.10	>	90	5	pop.	4	2	<u>.</u>	
HSS-STD	Ы									% Total Pop.	0	-	_	_	% of total	100	25 16	20.05	1
	IN										0.0	>	,		migration		23.10	20.67	1
HSS-FSW	ЬР							,		Programme Target	0	0	0		2	Top districts for inter-state out-migration	or inter-state	out-migrati	۾
	IN	-			-					Programme									L
HSS-MSM	Ы									Coverage	m	o 	o 						
	N	,								Typology	Home based								
HSS-IDU	PP B		·								NA;	Kothi- NA;	Dai	njectors	Manager	rice icedo	diccia	D2+ -0	
	N										Brothel	Panthi- NA;		Α;	Madeur		Kajgam,	Madhin	5 5
ICTC Male	Ы		*	*	*	1.13	2.64	1.38	0.85		based- NA;			daily	Dradoch	Pradech	Pradech	Pradoch	Na Pro
	ħ		*	*	*	883	1477	2171	3892		Street based-	- decker- NA	IA injectors- NA	IS- NA	I BOOD I		Idadesii	- Idad	
ICTC Female	Ы		*	*	*	1.06	2.19	1.76	0.94		NA								
	TN		*	*	*	1040	1140	1193	2026	% <25 yrs.			'						
ICTC Referred	Ы		*	*	*	1.09	2.21	1.44	0.79	% Married		,	1						Ш
	TN		*	*	*	1011	2485	3197	5343			STI/RTI							
ICTC Direct	dd	-	-	-	*	1.10	6.81	2.99	1.74		~	5009	2010	2011					
Walk-in	N				*	912	132	167	575	No. episodes treated	0	1431	1640	3335					
			PLHIV Profile, 2009	ile, 2009						% Syphilis pos.		0.69	0	0					
	% On ART	% 15-74	%	% III Prim	%	% widowed							Prog	Programme Response	esponse				
		2			pa	or divorced				No.	2004	2005	2006	2007	2008	2009	2010	2011	_
ART (52)	29	4		52	9	65				FSW TIs	-			1	1		-	1	
DLN (NA)										MSM TIs	-			,	,	,	,		_
		Route of HIV Tra	Transmission, ICTC 201	ICTC 201						IDU TIS			-		1				_
	Hetero-sexual	Homo- se	al Bic	Blood	Needle/	Parent to	Unknown	wn		Comp. TIs			-		-				_
				31	Syringe	Pily				ICTCs		-	-	ĸ	3	æ	m	n	
% of Total Pos.	CC 70	90 1		_	-	0 51				Total tested ⁵	•	194	394	1021	5552	6239	7956	13016	
(N=47)	07.73				0	0.0	0			Blood Banks			'		,				
		В	Block-Level	el Details						STI clinics	-	-	_	-	-	-	-	-	
No. HRG-FSW	-	-	-			-	-	-		ART centers			,				,		
No. HRG-MSM	1									Link ART centers	,		,	,	,	-	-	-	
No. HRG-IDU										PLHIV Networks									
% Positive, ICTC	Jhalarapathan,									Red ribbon clubs			,			4	4	2	
2009	2.38									Comm. care centers			'		,				
% Positive, PPTCT	Jhalawar	ha								Drop-in-centers									
600	(urban), 0.22	-								Condom outlets									

* inadequate sample size; - Data not available; 1 2011 census; 2 Source: DLHS III; 3 Data presented only for years where sample size is valid (HSS-ANC: 300 tested, HSS-HRG/STD: 187 tested, ICTC: 600 tested, PPTCT and BB: 900 tested); 4 PP = percent positive, NT = number tested; 5 General clients and pregnant women

Jhunjhunu, Rajasthan

Background:

Jhunjhunu district is a part of Shekhwati region and lies in the northern part of Rajasthan. It has a population of 21.39 lakhs with a sex ratio of 950 females per 1,000 males, a female literacy rate of 61.1% and an overall literacy rate of 74.7% (2011 Census). Jhunjhunu is endowed with various minerals whose industrial use has immensely contributed to the economy of the district. Of these, the most important is the copper belt of Khetri. The area is commonly known as Khetri Copper Belt and the main ore producing centres in this belt are Madankudan, Kolihan and Chandmari which attracts in-migration. Due to mining activities, these blocks have become trucking halt points. The major highways that pass through Jhunjhunu are Rajasthan State Highways 41 and 37.

HIV Epidemic Profile:

 Based on 2010 HSS-ANC, 2011 PPTCT and Blood Bank data, the level of HIV positivity was low (≤ 0.25%), with a stable trend among PPTCT and ANC and stable to rising trend among Blood Bank attendees.



- HIV prevalence among ICTC attendees was low among direct walk-in (3.8%) and referred (1.6%) clients, also among male (3.6%) and female (1.4%) clients, with a stable to declining trend.
- As per mapping conducted in 2009, FSW (2584, 82.3% of total HRG) was the largest HRG in the district, followed by MSM (554, 17.6% of total HRG); of the FSW, 68.1% were home-based and 29.4% were street-based.
- As per the 2001 Census, 6.6% of the male population were migrants; 28.9% of them migrated to other states, 26.3% migrated to other districts within the state.
- The top two destinations for out-of-state migration were Thane in Maharashtra and Mahendragarh in Haryana.
- HIV awareness and RTI/STI awareness rates among women were 51.9% and 38.2% respectively (DLHS-III).
- Of the 291 PLHIV registered at the Anti Retroviral Therapy (ART) centre in 2009, 2% were 15-24 years of age, 64% were on ART, 50% were
 illiterate or only had a primary school education, and 59% were widowed or divorced.
- There has been a sudden rise in the number of ICTCs and Blood Banks in 2008.

- Focus on outreach efforts on hard-to-reach sub-groups, such as home-based FSW.
- Strengthen outreach programmes through awareness campaigns around trucking halt points and highways in the district.
- Better understand the dynamics of HIV transmission among FSWs and MSMs either through initiation and regularization of HRG sites for HSS or further analysis of ICTC/PPTCT and ART data.
- Since the largest HRG is FSW, better assessment of the size and profile of clients population, including migrants and truckers, will provide better insights into district vulnerabilities.
- There needs to be a continuing in focus on HIV prevention programmes among HRGs. Despite having over 2500 FSWs, there is only one FSW
 TI in operation in the district. There needs to be an evaluation of mechanisms to cover HRGs with prevention programmes.

2009

2006

2005

2011

2010

2009

Bhiwani, Haryana

Mumbai (Suburban),

Surat, Gujarat

Mahendragarh, Haryana

Thane, Maharashtra

Daily Injectors-NA; Non daily injectors-NA

Kothi- 38.63%; Panthi- 1.99%; Double decker-59.39%

Maharashtra

Intradistrict 29220

17173

18873

65266

No. outmigration

0

554

Intra-state

Interstate

Overall

MSM

Male Migration, 2001 Census

44.77

26.31

28.92

100

% of male pop. % of total migration

0

0.03

Top districts for inter-state out-migration

0

0

Jhunjhunu, Rajasthan

District Population: 21,39,658 (3.1% of Rajasthan Population); Female Literacy¹: 61.1%; ANC Utilization²: 30%

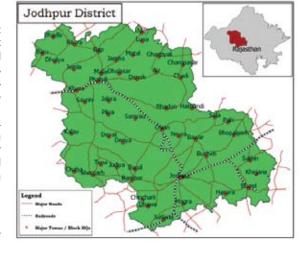
		2004	2002	2006	2007	2008	2009	2010	2011		TE
JIVV 33FI	₽₽⁴		-	0	0	0		0.25			FSW
HSS-AINC	NT⁴			400	400	398		400		Size Est.	
PDICI	ЬР	-	-		0.10	90:0	0.05	0.07	0.04	(Mapping,	2584
	NT		-	-	666	3386	5558	5683	2837	2009) % Total HRG	87.35
Jaco Pool a	dd	*	0.10	0.10	0.10	0.10	01.0	0.14	0.15	- H	5
Blood Barik	IN	*	3304	4600	5388	5218	2068	5633	5910	% lotal Pop.	0.12
ULC CIT	ЬР		,	1.62	0.40	0		0.40		Programme	
U18-88H	IN		-	250	250	248		248		Target	
/W.O. DON	ЬР		-			-		-		Coverage	142
N33-F3VV	IN	-	-	-	-			-			Home based-
DOC MON	ЬР										68.17%;
INCINI-CCLI	IN									Typology	Brothel has od-
1101 3311	ЬР				-			-		ypology	2.36%;
001-661	NT	-	-	-		-		-			Street
OTC Male	dd	-	*	*	6.84	3.57	4.93	3.50	1.33		based-
ורור ואמוב	IN	,	*	*	541	1206	912	801	1165	0/7E ver	79.47%
O.E.	ЬР		*	*	14.39	5.58	6.22	2.52	1.40	% \Z3 yls.	. .
רור בוומוב	IN		*	*	764	171	629	1070	1785		
LCTC Bafarrad	dd	-	-	-	10.60	5.21	4.50	0.77	1.65		2008
ICIC Kelerred	IN				368	940	823	1298	2065	No. episodes	466
ICTC Direct	PP	,	*	*	8.24	3.57	6.55	7.85	3.84	% Syphilis pos.	ŀ
Walk-in	IN	,	*	*	437	1037	748	573	885		, 000
			PLH	PLHIV Profile, 2009	2009					No.	2004
	% On ART		% 15-24	% III., Prim. Fdu	% Married	% widowed or divorced	or			MSM TIS	
ART (291)	64		2	50	4	59	Τ			Comp. TIs	
DLN (NA)										ICTG	2
		Route o	f HIV Transr	Route of HIV Transmission, ICTC 2011	C 2011					Total tested	
	Hetero-sexual	exnal	Homo-	Blood	Needle/ Swringe	Parent to	Unkr	Unknown		STI clinics	-
% of Total Pos.	70 00	5		1 53	26(2	000	-	1 5.3		Link ART	
(N=66)	2.00	Į		20:1	>	000		75		centers	
			Blo	Block-Level Details	etails					Networks	
No. HRG-FSW							-			Red ribbon	
No. HRG-MSM					,					clubs	
No. HRG-IDU										centers	
% Positive, ICTC 2009	,	,								Drop-in- centers	
% Positive, PPTCT	Ihunihunun									Condom	

*nadequate sample size; - Data not available; 1 2011 Census; 2 Source: DLHS III; 3 Data presented only for years where sample size is valid (HSS-ANC: 300 tested, HSS-HRG/STD: 187 tested, ICTC: 600 tested, PPTCT and BB: 900 tested); *PP = percent positive, NT = number tested; 5 General clients and pregnant women

Jodhpur, Rajasthan

Background:

Jodhpur is one of the largest and the second most populous district of Rajasthan after Jaipur, situated in western region of the state. It is bound by Nagaur in East, Jaisalmer in West, Bikaner in North and Barmer in South. District lies in the Arid zone of the state and covers 11.60% of total area of the state. According to the 2011 census Jodhpur has a population of 36.85 lakhs with sex ratio of 915 females for every 1000 males. The overall literacy rate is 67.09% whereas female literacy rate in the district is 52.5% (census, 2011). Main economy of the district is dependent on tourism due to its rich history. District is centrally located and well connected with major Indian cities through NH-65. Good availability of infrastructural facilities has led to establishment of many engineering industries in the district.



HIV Epidemic Profile:

- Based on 2010 HSS-ANC data, HIV prevalence was moderate (0.50%), with a fluctuating trend.
- Based on 2011 PPTCT and Blood Bank data, the level of HIV positivity was low (≤ 0.30%), with a declining trend.
- In 2011, HIV prevalence among ICTC attendees was high among direct walk-in (14.5%) and referred clients (10.08%), also among male (11.9%) and female (11.7%) clients, with an overall stable to declining trend.
- HIV prevalence among FSWs in 2010 HSS was low (0.40%).
- As per mapping conducted in 2009, FSW (3424, 72.2% of total HRG) was the largest HRG in the district, followed by MSM (1,178, 24.8 of total HRG). Of the FSW, 23.5% were home-based, 36.07% were street-based and 40.42% were brothel based.
- As per the 2001 Census, 5.7% of the male population were migrants; 30.8% of them migrated to other states, 29.5% of them migrated to other districts within the state.
- The syphilis positivity rate among STI clinic attendees was 5.25% in 2011.
- The top two destinations for out-of-state migration were Mumbai and Thane in Maharashtra, which were high prevalent districts.
- HIV awareness and RTI/STI awareness rates among women were 47.8% and 45.7% respectively (DLHS-III).
- Of the 451 PLHIV registered at the Anti Retroviral Therapy (ART) centre in 2009, 2% were 15-24 years of age, 92% were on ART, 73% were illiterate or only had a primary school education, 14% were married and 76% were widowed or divorced.

- Conduct outreach programmes to raise awareness on HIV issues for behavior change in society.
- Strengthen outreach programmes to control increasing prevalence of HIV among ICTC clients (vulnerable population).
- Strengthen outreach programmes through awareness campaigns around tourist spots and industries.
- There is a need to better understand the dynamics of HIV transmission among FSW, MSM and IDU, either through initiation of HRG sites for HIV Sentinel Surveillance (HSS) or further analysis of ICTC/PPTCT and ART data.
- Since the largest HRG is FSW, better assessment of the size and profile of clients population, including migrants, will help in understanding district vulnerabilities.
- The high HIV prevalence among all ICTC attendees is a clear indication that much more needs to be done to understand the profiles of the
 attendees through further analysis of ART and ICTC data.

18151 5.25 gramme 2007

2010

5725 15.42 2005

2011

2010

2009

2008

9.01

6

4

7

Surat, Mumbai, Gujarat Maharashtra

Thane, Pune, Maharashtra Maharashtra

Mumbai (Suburban), Maharashtra

Injectors-NA; Non daily injectors-NA

Kothi- 26.91%; Panthi-15.11%; Double decker-57.98%

ased-%; vased-:%; ased-

Daily

0

126

Jodhpur, Rajasthan

District Population: 36,85,681 (5.37% of Rajasthan Population); Female Literacy': 58%; ANC Utilization?: 32.6%

Intra-district 34608

25826

26895

87329

No. outmigration % of male

Male Migration, 2001 Census
Overall Inter-state state

J37

MSM 1178 2.29

29.57

30.80

100

pop. % of total migration

0

0.03

2.89

24.86

1.71

Top districts for inter-state out-migration

					2						
		2004	2002	2006	2007	2008	5000	2010	2011		
ON V SSH	PP⁴	0	0	0	0.75	0.25		0.50			FSW
HSS-AINC	NT ⁴	400	400	400	400	400		399		Size Est.	
DDTCT	ЬР		*	0.37	0.46	0.71	0.54	0.42	0:30	(Mapping,	3424
	NT	-	*	4588	5139	7522	8635	10345	19428	w Total	
Jaca boola	ЬР	0:30	0:30	0.20	0:30	0:30	0.20	0.25	0.17	HRG	72.25
DIOUU DAIIK	NT	14754	31241	38740	30748	31710	38706	43714	42984	% Total	000
UCC CITO	РР	-		-	-			-		Рор.	5
UIS-SCH	NT									Programme	
701.00 0.01	ЬР	-	-	-	-	-		0.40		Programme	
NS3-LSW	NT	-		-	-	-		250		Coverage	1256
DOC MON	ЬР	-	-	-	-	-		-			Home ba
IVISIVI - CCII	NT					,				Typology	23.517 Brothel ba
ווכו סח	РР	-		-	-			-		(Bondf)	40.429
001-ccn	NT	-		-	-			-			Street ba
ICTC Mala	РР		14.69	17.85	29.55	28.10	37.21	39.25	11.92	, vo	36.07
IC IC INIQUE	NT	-	2110	2140	2673	3331	2209	2084	7489	% <25 yrs.	
ICTC Fomolo	РР		13.98	17.74	37.55	33.72	30.45	24.85	11.74	70 Ividilled	
io io io io io io io io io io io io io i	NT		930	1274	1385	1889	1790	1944	4635		2008
ICTC Referred	PP		12.81	16.58	29.76	29.83	40.93	43.20	10.08	No. episodes	0
no lici c lici ed	IN		2647	2949	2816	3791	2546	2220	7331	treated % Synhilis	
ICTC Direct	PP		25.75	25.59	38	30.93	22.37	18.92	14.56	pos.	
Walk-in	IN		393	465	1242	1429	1453	1808	4793		
			PLHIV F	PLHIV Profile, 2009	60					No.	2007
	% On ART	% 15-24	% III., Prim. Edu.	% Married	% widowed or divorced	pa pa				MSM TIS	
ART (451)	92	2	73	14	9/					Comp. TIs	
DLN (NA)	-	-		-	-					ICTG	
	Route	Route of HIV Transmission, ICTC 2011	mission, IC	TC 2011						Rlood Banks	- 4
	Hetero-sexual	Homo- sexual	Blood	Needle/ Syringe	Parent to Child	Unknown	wn			STII clinics ART centers	
% of Total Pos. (N=1420)	60.07	0.42	1.62	0.14	99.8	29.08	- CO			Link ART centers	
			Block-L	Block-Level Details	ils					PLHIV	
No. HRG-FSW	•	-	-	-	-		-	-		Red ribbon	
No. HRG-MSM	1									clubs	
No. HRG-IDU	1	-						-		Comm. care	
% Positive, ICTC	r	,							,	Drop-in-	
% Positive,	Jodhpur (urban),			,				,	,	Condom	

* Inadequate sample size; - Data not available; ' 2011 Census; ' Source: DLKS III; ' Data presented only for years where sample size is valid (HSS-ANC: 300 tested, HSS-HRG/STD: 187 tested, ICTC: 600 tested, PPTCT and BB: 900 tested); " PP = percent positive, NT = number tested; ' General clients and pregnant women

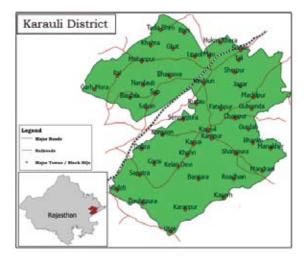
Karauli, Rajasthan

Background:

Karauli district is bordered by Dholpur in the east Bharatpur in the North-East Dausa in the North and by Sawai Madhopur in the west. The Chambal River forms the south-eastern boundary of the district. It has a population of 14.58 lakhs with a sex ratio of 858 females per 1,000 males, and a female literacy rate of 49.1%, with an overall literacy rate of 67.3% (2011 Census). Karauli district is economically backward district of the state. However, good grade stone and some iron ore are some of the mineral resources found in the district. The major highway that passes through Karauli is National Highway 3.

HIV Epidemic Profile:

- Based on the 2010 HSS-ANC, 2011 PPTCT and Blood Bank data, the level of HIV positivity was low (≤ 0.25%), with a stable trend.
- In 2011, HIV prevalence among ICTC attendees was low among direct walk-in (0.2%) and referred (0.3%) clients, also among male (0.3%) and female (0.3%) clients, with an overall stable trend.



- As per mapping conducted in 2009, FSW (340, 100% of total HRG) was the only HRG in the district. Of the FSW, 84.1% were home-based and only 9.4% were street-based.
- The syphilis positivity rate among STI clinic attendees in 2011 was 2%.
- As per the 2001 Census, 3.5% of the male population were migrants; 17.4% of them migrated to other states, 45.6% of them migrated to other districts within the state.
- The top two destinations for out-of-state migration were South Delhi and Faridabad in Haryana.
- HIV awareness and RTI/STI awareness rates among women were 31.1% and 46.3% respectively (DLHS-III).
- Of the 52 PLHIV registered at the Anti Retroviral Therapy (ART) centre in 2009, 4% were 15-24 years of age, 67% were on ART, 52% were illiterate or only had a primary school education, and 65% were widowed or divorced.
- RRCs were established in 2008 and their number increased from eight to 30 in one year. They were established for the awarness about HIV/ AIDS among youth.
- High rates of HIV transmission from parent to child (26.67%) in 2011 were observed in the district.

- Focus on outreach efforts among hard-to-reach sub-groups, such as home-based FSW.
- Strengthen outreach programme through awareness campaigns among women and around trucking halt points and highways in the district.
- There is a need to better understand the dynamics of HIV transmission among FSW either through initiation of HRG sites for HIV Sentinel Surveillance (HSS) or further analysis of ICTC/PPTCT and ART data.
- Since the largest HRG is FSW, better assessment of the size and profile of clients population, including migrants and truckers, will help in better
 understanding of district vulnerabilities.
- There is a need to better understand the profile, and the dynamics of HIV transmission among parent to child, through further analysis of ART and ICTC/PPTCT data.

2010

2009

2007

2006 2.50 Pro

1324 2011

903

983

11.40 2005

2010

2009

10845

6093

5119

2837

336

256

9

Pune, Maharashtra

South West Delhi

Surat, Gujarat

Faridabad, Haryana

South Delhi

Daily Injectors-NA; Non daily injectors- NA

Kothi- NA; Panthi- NA; decker- NA Double

Intra-district 8498

10504

4028 0.62

23030 3.55

No. out-migration % of male

0 0

1.62 45.61

Male Migration, 2001 Census
Overall Inter- Intra- state

<u>D</u> 0 0 0

MSM

36.90 1.31

17.49

100

% of total migration

Top districts for inter-state out-migration

0

Karauli, Rajasthan

			HIV Le	HIV Levels and Trends	ends							
		2004	2005	2006	2007	2008	5009	2010	2011		HRG Size	ze
ONV JOH	PP⁴			0	0.25	0		0.25			ECM	
USS-AINC	NT⁴			400	400	400		368			1300	_
TOTOL	Ы			*	0	90.0	0	90.0	0	Size Est.	070	_
	IN			*	1362	3304	3754	3311	6465	(Mapping, 2009)	040	\dashv
Jacob Pool C	PP	0.20	0	0	0	0	0	0	0	% Total HBG	100	_
DIOUG BATIK	IN	1793	953	1108	1426	2307	1721	2233	2539	2011	3	\dashv
UEC CTD	ЬР	-		2	3.20	0		0		% Total Don	0.00	
U15-56H	NT	-	-	250	250	249		250		70 IOUAI FUD.	70.0	-
HSC-ECW/	PP		,							Programme Target		_
VVC 1-CC11	ĽΝ		,		,			,		Programme	011	┢
HCC_MCM	ЬР	,	1	,	,			,		Coverage	28	\dashv
IVICIVIT-CCI I	TN										Home based-	_
HCC.IDI.	ЬР	,	,		,	,					84.12%;	_
001-661	NT							-		Typology	Brothel based-	-
ICTC Male	PP		*	*	1.36	1.71	0.35	0.75	0.31		6.47%;	_
ICIC Male	IN		*	*	099	760	1136	1476	2240		Street based-	
ICTC Female	ЬР	,	*	*	0.74	0.85	0.50	0.67	0.37		9.41%	+
CIC Iciliale	LN		*	*	815	1055	1203	1340	2140	% <25 yrs.		\dashv
CTC Dofortod	ЬР		*	*	0.89	0	0.45	68'0	0.38	% Married		-1
CIC Neielleu	NT	-	*	*	1129	136	1338	2125	3161		STIVRII	~
ICTC Direct	PP		*	*	1.45	1.31	0.40	0.14	0.25		2008	
Walk-in	NT		*	*	346	1679	1001	691	1219	No. episodes	575	
			PLHIN	PLHIV Profile, 2009						treated	,	-
	% On ART		% 15-24	% III., Prim.	% Waying	% widowed or	Jo			% Syprills pos.	13.10	
ART (52)	67		4	52	nallipid	nanonina 92	T			No.	2004	7
DLN (NA)	5 '				,	3 .				FSWTIs		
		Route of H	IIV Transm	Route of HIV Transmission, ICTC 2011	2011					MSM TIs		
	Hetero-sexual		Homo-	Blood	Needle/	Parent to	Unkn	Unknown		IDU TIS		
% of Total Pos.	72 22	+	sexual	c	oyilli ge	26 67				ICTCs		
(N=15)	7.3.3.		>	>	>	70.07				Total tested ⁵		
			Block	Block-Level Details	tails					Blood Banks	_	
No. HRG-FSW										ART centers	- ,	
No. HRG-MSM			•		,					Link ART centers		
No. HRG-IDU			-	-	-	,				PLHIV Networks		
% Positive, ICTC 2009	,	-								Red ribbon clubs Comm. care centers		
% Positive, PPTCT	Karauli						,			Drop-in-centers		
5009	(urban), 0									Condom outlets		

* Inadequate sample sizer - Data not available; 2011 Census; 2 Source: DLHS III; 3 Data presented only for years where sample size is valid (HSS-ANC: 300 tested, HSS-HRG/STD: 187 tested, ICTC: 600 tested, PPTCT and BB: 900 tested); *P = percent positive, NT = number tested; 5 General clients and pregnant women

Kota, Rajasthan

Background:

Kota district lies on the banks of Chambal River and is situated at a center of the southeastern region of Rajasthan. It has a population of 19.50 lakhs with a sex ratio of 906 females per 1,000 males, a female literacy rate of 66.3% with an overall literacy rate of 77.4% (2011 Census). Kota is one of the Asia's biggest manufacturer of fertilizer and is the trade centre for several agricultural products, which includes millet, wheat, rice, pulses, coriander and oil seeds. Various industries such as cotton and oil seed milling, textile weaving, distilling, dairying, manufacture of metal handcrafts, fertilizers, chemicals and engineering equipment are located in the district. Education has become a major part of the district's economy. It has become a hub for coaching of Engineering and Medical Entrance examinations, attracting hundreds of thousand students every year. Students from all over India come to study in Kota and prepare particularly for the IIT-JEE. The major highway that passes through Kota is National Highway 76.



HIV Epidemic Profile:

- Based on 2011 PPTCT and Blood Bank data, the level of HIV positivity was low (≤ 0.11%), with a stable to declining trend.
- Based on 2010 HSS-ANC data, the level of HIV positivity was moderate (0.75%), with a rising trend.
- In 2011, HIV prevalence among ICTC attendees was low among direct walk-in clients (1.3%) and referred (2.3%) and also among male (1.9%) and female (1.9%) clients, with a stable to declining trend.
- As per mapping conducted in 2009, FSW (612, 40.4% of total HRG) was the largest HRG in the district, followed by MSM (537, 35.4% of total HRG) and IDU (366, 24.1% of total HRG). Of the FSW, 94.2% were street-based and 5.7% were home-based.
- The syphilis positivity rate among STI clinic attendees in 2011 was 3.3%.
- As per the 2001 Census, 5.2% of the male population were migrants; 24% of them migrated to other states and 31.5% migrated to other districts within the state.
- The top two destinations for out-of-state migration were Thane in Maharashtra and Jhabua in Madhya Pradesh.
- HIV awareness and RTI/STI awareness rates among women were 73.2% and 60.6% respectively (DLHS-III).
- Of the 147 PLHIV registered at the Anti Retroviral Therapy (ART) in 2009, 7% were 15-24 years of age, 65% were on ART, 59% were illiterate
 or only had a primary school education, and 65% were widowed or divorced.

- Focus on outreach efforts among hard-to-reach sub-groups, such as home-based FSW.
- Strengthen outreach programmes through awareness campaigns around educational institutions, industries, and highways.
- There is a need to better understand the dynamics of HIV transmission among FSW, MSM and IDU, either through initiation of HRG sites for HIV Sentinel Surveillance (HSS) or further analysis of ICTC/PPTCT and ART data.
- Since the largest HRG is FSW, better assessment of the size and profile of clients population, including migrants and truckers, will help in better
 understanding of district vulnerabilities.

2010

2009

2008

2007

2006

15.97

2112

2011

2010

2009

9813

Mumbai (Suburban), Maharashtra

> South Delhi

Jhabua, Madhya Pradesh

Maharashtra

Thane,

Daily Injectors-NA; Non daily injectors- NA

Kothi- 41.39%; Panthi- 3.48%; Double decker-55.13%

154

2

Mandsaur, Madhya Pradesh

Intradistrict 19337

state 10481 1.27

Overall 43556 5.26

MSM

Male Migration, 2001 Census

13738

2.34

31.54

24.06

100

% of total

migration

1.66

No. outmigration % of male

24.16

35.45

0.03

JG 386

537

Top districts for inter-state out-migration

Kota, Rajasthan

			HIV Lev		Irends						
		2004	2005	5006	2007	2008	2009	2010	2011		茔
JIV JJII	⊳dd		-	0	0.25	0		0.75			ECM/
HSS-AINC	NT⁴			400	400	400		400			1300
DDTCT	М			*	0.19	0.15	90.0	0.05	0.11	Size Est.	
rrici	NT	-	*	*	4132	6091	10047	11817	13178	(Mapping,	612
Jacob Coole	ЬР	0	0.20	0.10	0.10	0.10	0.10	0.11	0.10	2009)	
DIOOU DAIIK	IN	7663	22606	36505	31755	46202	45759	48803	55588	% Total HRG	40.40
GE CO	Ы	0	1.20	0	*	0.50		0			
U152-51D	NT	239	250	250	*	200		250		% Total Pop.	0.03
/100 5511	ЬР										5
HSS-FSW	NT	-						-		Programme	
LICC MICHA	М									Target	
IVISIVI-CCT	N									Programme	715
וועו סח	ЬР									Coverage	Homo hacor
D01-881	IN		-					-			5 7 20% ·
ICTC Male	ЬР		2.38	5.06	1.90	2.33	2.42	2.01	1.96	Typology	Brothel
ICIC Male	NT	-	1176	1313	1733	2362	2234	3535	5974	lypology	haced- 0%
ICTC Fomolo	ЬР	,	6.62	3.76	3.79	2.43	2.44	1.75	1.95		Street hased
ורור ובווומוב	IN		302	425	713	1360	1435	2168	2360		94.28%
ICTC Referred	Ъ		2.55	1.39	1.43	1.62	2.03	2.31	2.34	% <25 vrs.	
	F		1372	1588	2165	3326	2709	3592	5135	% Married	
ICTC Direct	Ы	,	12.26	14	10.32	8.58	3.54	1.23	1.34		
Walk-in	NT		106	150	281	396	960	2111	3199		2008
			PLHIV	Profile, 2009	600					No. episodes	147
		%	"Ⅲ"	%	% wic	widowed %				treated	4-
	% On ART	15-24		Ž		or divorced				% Syphilis pos.	14.47
ART (147)	9	7	59	6	9	65				No.	2004
DLN (NA)		•	•	•						FSWTIs	٠
	~	Route of HIV Transmission,	Transmissio	n, ICTC 2011	_					MSM TIs	
	Hetero-sexual	-omoH	Blood	Needle/ Svringe	/ Parent to	t to	Unknown			IDU TIs Comp. TIs	
% of Total Pos.	Th 13		70.07	╁		, ,	10.00	1		ICTG	-
(N=166)	07.47	>	10.04	0.		7	13.00			lotal tested	, ,
			Block	Block-Level Details	ails					CTI clinica	7 -
No. HRG-FSW		-	-					-		ART centers	- -
No. HRG-MSM	,	,	,		,					Link ART centers	
No. HRG-IDU					,					Red ribbon clubs	
% Positive, ICTC										Comm. care	
% Positive. PPTCT	Kota (urban),					-	,			Drop-in-centers	
	90.0									Condom outlets	

* Inadequate sample size; - Data not available; ' 2011 Census; ' Source: DLKS III; ' Data presented only for years where sample size is valid (HSS-ANC: 300 tested, HSS-HRG/STD: 187 tested, ICTC: 600 tested, PPTCT and BB: 900 tested); " PP = percent positive, NT = number tested; ' General clients and pregnant women

Nagaur, Rajasthan

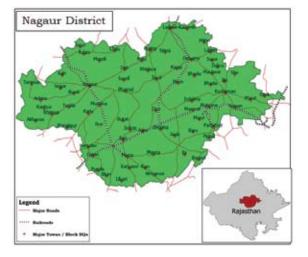
Background:

Nagaur is situated in the middle of the state and is bounded by Bikaner and Churru in North, Sikar and Jaipur in east, Ajmer and Pali in South and Jodhpur in West. District is the fifth largest district of the state it has population of 33.09 lakhs with a sex ratio of 948 females for every 1000 males, a female literacy rate of 48.6% and overall literacy rate of 64% (Census, 2011). Agriculture is the main occupation of the district with approximately 92.6% of population engaged in agricultural activity. There are many tourist destinations situated around the district and Nagaur city is the district headquarters which is well connected to surrounding districts through state highways. Being at the central location of the state, the district is connected with major cities like Jaipur, Delhi, Ajmer, Bikaner, and Jodhpur through local Roadways.

HIV Epidemic Profile:

- Based on 2010 HSS-ANC data, the level HIV positivity was moderate (0.51%), with a stable trend.
- Based on 2011 PPTCT and Blood Bank data, the level of HIV positivity was low (≤ 0.18%), with a stable trend.
- In 2011, HIV prevalence among ICTC attendees was low among direct walk-in (0.46%) and referred (1.7%) clients, also among male (1.04%) and female (1.68%) clients with an overall declining trend.
- As per mapping conducted in 2009, FSW (730, 100% of total HRG) was the only HRG in the district and of the FSW, 21.53% were home based, 47.39% were brothel-based and 37.08% were street-based.
- The syphilis positivity rate among STI clinic attendees in 2011 was 0.23%.
- As per the 2001 Census, 5.9% of the male population were migrants 25.9% of them migrated to other states and 33.3% migrated to other districts within the state.
- The top two districts for out-of-state migration were Mumbai (Sub Urban) in Maharashtra and Surat in Gujarat, which were high prevalent districts
- HIV awareness and RTI/STI awareness rates among women were 55.5% and 47% respectively (DLHS-III).
- Of the 554 PLHIV registered at the Anti Retroviral therapy (ART) centre in 2009, 80% were on ART, 72% were illiterate or only had a primary school education. 18% were married and 65% were widowed or divorced.

- Strengthen outreach programme through awareness campaigns, especially among hard-to-reach sub-groups, such as home-based FSW, inmigrant population and truck halting points.
- There is a need to better understand the dynamics of HIV transmission among FSW either through initiation of HRG site for HIV Sentinel Surveillance (HSS) or further analysis of ICTC/PPTCT and ART data.
- Since the only HRG is FSW, better assessment of the size and profile of clients population, including migrants, will improve in understanding
 of district vulnerabilities.



Ahmadabad,

Top districts for inter-state out-migration

33.36 1.99

25.83

1.54

5.96 100

% of male pop. % of total migration

No. out-migration

Gujarat,

Surat, Thane, Pune, Gujarat, Maharashtra,

Mumbai (Suburban), Maharastra

Daily Injectors-NA; Non daily injectors-

0

370

¥

Intra-distric

Intra-state

Inter-state 21867

Overall 84664

MSM

Male Migration, 2001 Census

34549 2.43 40.81

28248

Nagaur, Rajasthan

District Population:33,09,234 (4.8% of Rajasthan Population); Female Literacy¹: 48.6%; ANC Utilization²: 26.5%

			HIV Lev	HIV Levels and Trends	ends ³							
		2004	2005	2006	2007	2008	2009	2010	2011		HRG Size	e.
HSS-ANC	₽dd			0.75	0	05.0		0.51		,	FSW	_
	NT4	-		400	400	400		395		Size Est.	730	
PPTCT	ЬР	-	-	-	0.07	0.16	0.18	0.20	0.10	Year)	2	
	IN	-	-	-	1340	3193	3327	3990	5992	% Total HRG	100	
Blood Bank	ЬР	*	*	0	0.20	0.10	0.20	0	0.18		2	
	NT	*	*	965	686	1541	2029	1947	1666	% Total Pop.	0.02	
HSS-STD	ЬР	-		-		-						
	IN	-			,	-		,		Programme		
HSS-FSW	Ы			0.80	*					Programme		
	Ħ			250	*					Coverage	2395	
HSS-MSM	ЬР	-	-	-	-	-				Typology	Home based-	:
	IN	-	-			-					21.53%; Kot	to to
HSS-IDU	ЬР	-	-	-		-					41.39%:	م الم
	IN	-	-			-					Street based ded	qe
ICTC Male	Ы		*	*	*	3.95	2.94	3.58	1.68		37.08%	
	Þ		*	*	*	1443	1800	1565	2980	% <25 yrs.		
ICTC Female	М		*	*	*	6.33	2.17	3.99	1.04	% Married	- ITG/IT2	
	N		*	*	*	774	1245	1355	3073		0000	2
ICTC Referred	G.		*	*		6.53	2.57	3.82	1.71	No enisodes	5000	۷
	IN	-	*	*	,	153	1910	2095	4319	treated	739	
ICTC Direct	ЬР	-	*	*	*	4.65	2.73	3.64	0.46	% Syphilis pos.	2.45	
Walk-in	Þ		*	*	*	2064	1135	825	1734			
			PLHIV	Profile, 2009	600					No.	2004	×
	% On ART	% 15-24	% III.,	%	% widowed or	d or				FSW TIS		
			Prim. Edu.	Married	divorced					ALITIN		
ARI (554)	08	-	7/	20	65	T				Comp. TIs		
DLN (NA)						-				ICTCs		
	Rout	te of HIV Ira	Route of HIV Transmission, ICTC 2011	TC 2011						Total tested ⁵		
	Hetero-sexual	Homo-	Blood	Needle/	Parent to	Unknown	٧n			Blood Banks	1	Ш
		sexnal		Syringe	Child		T			STI clinics	1	
% of Total Pos. (N=79)	88.61	0	3.80	0	6.33	1.27				ART centers		
(6)			Block	Block-Level Details	ails					Centers		
No. HRG-FSW										PLHIV Networks	-	
No. HRG-MSM										Red ribbon		
No. HRG-IDU										Comm Care		
% Positive, ICTC										centers		
% Positive DDTCT	Nagaur									Drop-in-centers		
/0 1 USIUNE, 11 1 CI	(urban), 0.18%				,					Condom outlets	-	

	=	Z	.=				18	≈	9	0		8	`	Ė	Ė			52	,_			·						
	Kothi- NA;	Double	decker- NA			-	RTI	6007	1750	1.69		2005					_	188	,	_		,						
Home based-	21.53%; Kothi- NA;	41.39%:	Street based- decker- NA	37.08%			STI/RTI	8007	739	2.45		2004					,		1	-		,	-					
lypology					% <25 yrs.	% Married		No anicodec	treated	% Syphilis pos.		No.	FSW TIs	MSM TIs	IDU TIs	Comp. TIs	ICTCs	Total tested ⁵	Blood Banks	STI clinics	ART centers	Link ARI centers	PLHIV Networks	Red ribbon	Ciudos Commicare	centers	Drop-in-centers	Condom outlets
				'	۰					ت			=.	_,		_	_	ــــــــــــــــــــــــــــــــــــــ		-			۰	_	-1-	_		
				1.68	2980	1.04	3073	1.71	4319	0.46	1734																	
		-		3.58	1565	3.99	1355	3.82	2095	3.64	825																	
				2.94	1800	2.17	1245	2.57	1910	2.73	1135																	
		-	-	3.95	1443	6.33	774	6.53	153	4.65	2064		d or		1	T	-		Unknown		1.27							
		-	-	*	*	*	*			*	*	600	% widowed or	divorced	65				Parent to	Child	6.33	tails						
		-	-	*	*	*	*	*	*	*	*	PLHIV Profile, 2009	%	Married	18			TC 2011	Needle/	syringe	0	Block-Level Details						
		-	-	*	*	*	*	*	*	*	*	PLHIN		Prim. Edu.	72	!) l (uoission) I(Blood		3.80	Block						
		-	-										% 15-24		-			Route of HIV Transmission, ICTC 2011	Homo-	sexnal	0							
<u>d</u>	Þ	dd	IN	dd	Þ	dd	Þ	М	Þ	Ы	F		% On ART		80			Rout	Hetero-sexual		88.61						Nagaur	(urban), 0.18%
-MSM		P-IDU		C Male		C Female		C Referred		C Direct	k-in				(554)	(NA)	(Va)				of Total Pos.	(6)	HRG-FSW	HRG-MSM	HRG-IDU	ositive, ICTC	Positive. PPTCT	

12045

6910

6372

5410

1757

290

2011

2010

2009

Programme Response 2008

2006

0.21 1675

2566 0.23 2007

2011

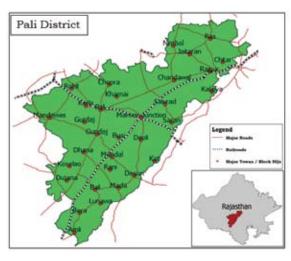
2010

* Inadequate sample size; - Data not available, 1 2011 Census; 2 Source: DLHS III; 3 Data presented only for years where sample size is valid (HSS-ANC: 300 tested, HSS-HRG/STD: 187 tested, ICTC: 600 tested, PPTCT and BB: 900 tested); 4 PP = percent positive, NT = number tested; 5 General clients and pregnant women

Pali, Rajasthan

Background:

Pali district is linked to Ajmer, Rajasmand, Udaipur and Sirohi districts through the Great Aravalli hills. Western Rajasthan's famous river Luni and its tributaries flow through Pali. The largest dams of this area Jawai Dam and Sardar Samand Dam are also located in the district. It has a population of 20.38 lakhs with a sex ratio of 987 females per 1,000 males, a female literacy rate of 48.35% and an overall literacy rate of 63.23% (2011 Census). Agricultural activities of Pali district are mostly dependent on the monsoon. Although the district has a lot of irrigation dams, and ponds, more than 50 percent of the farmers are dependent on monsoon. Therefore there is out-migration for labour work, from rural pockets of Pali to neighboring districts. The main existing industries of the district are mehendi manufacturing units, textile dyeing and printing, umbrellas and wire netting, cotton ginning, agricultural equipment, medicines and pesticides. The major highways that pass through Pali are National Highways 14 and 65.



HIV Epidemic Profile:

- Based on 2010 HSS-ANC, 2011 PPTCT and Blood Bank data, the level of HIV positivity was low (≤ 0.31%), with a stable to declining trend.
- HIV positivity among ICTC attendees was near moderate among direct walk-in (4.9%, 2011) clients and low among referred (0.3%, 2011) clients, also among male (2.4%, 2011) and female (3.3%, 2011) clients, with an overall declining trend, except for referred for which there was not enough data for trend analysis. The number of ICTCs remained consistent while the number of clients undergoing HIV testing at these sites continued to increase from 2008 onwards.
- As per mapping conducted in 2009, FSW (608, 100% of total HRG) was the only HRG in the district and of the FSW, 37.01% were home-based and 52.48% were street-based.
- The Syphilis positivity rate among STI clinic attendees in 2011 was found to be 0%.
- As per the 2001 Census, 9.2% of the male population were migrants; 42.6% of them migrated to other states and 20.0% migrated to other districts within the state.
- The top two destinations for out-of-state migration were Thane and Suburban Mumbai in Maharashtra, which were high prevalent districts.
- HIV awareness rates and RTI/STI awareness rates among women were 64.4% and 48.3% respectively (DLHS-III).
- Of the 557 PLHIV registered at the Anti Retroviral Therapy (ART) centre in 2009, 3% were 15-24 years of age, 90% were on ART, 80% were illiterate or only had a primary school education, and 74% were widowed or divorced.

- Moderate rates of positivity among direct walk-in clients are indicative of transmission in the district. There is a need to better understand the
 dynamics of HIV transmission among FSW clients, and assess the size and profile of clients population, including migrants and truckers. This
 can be done either through initiation of HRG sites for HIV Sentinel Surveillance (HSS) or further analysis of ICTC/PPTCT and ART data.
- Due to the presence of so many industries, there could be focused outreach efforts at these spots and also for hard-to-reach sub-groups, such as home-based FSW.
- Strengthen outreach programmes through awareness campaigns around trucking halt points and highways in the district.
- Parental transmission points to the need for analysis of ART/ICTC data to profile those infected, by age, socio demographic variables, occupation, geographical spread, to understand spread of HIV in the district.

Pali, Rajasthan

1				Ě	HIV LEVEIS AN	els alla llellas									Vulnerabilities					
National Color Nati			2004	2005	2006	2007	2008	2009	2010	2011		HRG 5	ize				Male Migratio	in, 2001 Cer	snsı	
No. 1.00 1	CINA 22H	pb⁴			0.5	0	0.25		0.25			FSW	MSM				Overall	Inter-state		Intra-
No.	JN9-400	NT⁴		-	400	400	399		400			-		2					_	district
NI	PTCT	ЬР			,	*	0.40	0.03	0.49	0.31	Size Est.	809	0	0	No. o	out-	84348	35966	16896	31486
Physic 1782 1884	,	IN				*	1569	2728	2636	4156	(Mapping, 2003)				all light	malo				
NI 1762 5131 6204 6551 7861 9961 9965 9895 9899 MTGAI PROP. G039 G0	Jacoboo	ЬР	0.40	0.30	0.30	0.10	0:30	0:30	0.24	0.17	% Total HRG	100	0	0	0 %	e E	9.20	3.92	1.84	3.43
No.	DOU DAIIK	IN	1762	5131	6204	6851	7861	9361	9845	6586					POD:	10404				
MI MI MI MI MI MI MI MI	CC_CTD	В			,	,	,		,		% Total Pop.	0.03	0	0	miar	ation	100	45.64	20.03	37.33
Military Military	J15-55	IN							-		Programme Target		-				districts for inte	r-ctate out-	mioration	
MT MT MT MT MT MT MT MT	74.01.00	М									Programme	L				_		Jinic ont	- Indiana	
Physical Part Physical Par	22-F5W	N							,		Coverage	807	0	0						
NIT 1.0	L NACHA	В			,							Home								
PR 1 1 1 1 1 1 1 1 1	INICINI-CO	F		,	,	,						based-								
Munical State Munical Stat		Ы			,				,			37.01%								
Photo-several Photo-sever	N-IDO	F									Typology	Brothe					Mumbai	Pune,		Bangalore
NIT 1.8	TC 84-1-	М			18	*	7.71	6.10	4.12	2.45		pased-					uburban), Ma	harashtra	Rajasthan	Rajasthar
Photo-like Pho	IC Male	N			350	*	1090	1278	1699	2859		Street				Ž.	diididsiilid			
NIT	1	М			15.83	*	14.63	9.57	3.86	3.30		based-		A N						
Ph 1 1 1 1 1 1 1 1 1	C remale	N			259	*	959	606	1270	2121		54.28%	. 0							
NI 153	Donnaga J.	В			7.84	*			0.42	0.39	% <25 yrs.	٠								
Pro . 2018 . 1031 7:54 7.27 4.94 	C Kererred	F		,	153	*			1414	2330	% Married									
NIT 1456 1456 1486 1486 1487 1555 2550 1508 2010 2011 2	⁻ C Direct	Ы			20.18	*	10.31	7.54	7.27	4.94			50.							
Wo. phisodes treated 48 1220 1526 2487 1520 1526 2487 1520 1526 2487 1520 1526 2487 1520 1526 2487 1520 1526 2487 1520 1526 263	ak-in	N			456	*	1746	2187	1555	2650		-	_	2010	2011					
% On ART % % % % % % % % % % % % % % %				Ы	HIV Profi	e, 2009					No. episodes treate	\rightarrow		1526	2487					
1		/ u0 %			. III., Prim.	%	% widowed	or			% Syphilis pos.	20.69	_		0 Programme Re	chonce				
Feeto-sexual Feet	T (557)	00		~	Solution.	mairieu 12	nivorceu 7.4	T			No.	2004	_	⊩	2007	8008	2009	2010	2011	
Hetero-sexual Homo- Sexual Homo- (A(N) N	3 '		י ר	3 '	7 .		T			FSW TIs		_		L	,		-	-		
Hetero-sexual Homo- Sexual Almon- Sexual Sexu	6.0.1		Route	of HIV Tran	smission IC	TC 2011					MSM TIs									
Hetero-sexual Sexual Sex				Homo-	_	Needle/	Parent to	L			IDU TIS									
S841 0 0 0 11.59 0 Total tested* 1. 1 2 2 2 2 2 2 2 2 2		Hetero				Syringe	Piid		nwor		Comp. Tls				-		-			
S841 0 0 0 11.39 0 10.04 letested 2 3 3 3 3 3 560 5	of Total Pos.		T	,	H	,					ICTCs	-		1	2	2	2	2	2	
Block-Level Details Strict Decoration Strict Decoration Strict Decoration Strict Str	=138)	80	141	0	0	0	11.59				Total tested ⁵	-	•	609		3315	4915	2095	9136	
STI clinics 1 1 1 1 1 2 2 2				8	ock-Level	Details					Blood Banks	2	3	3	3	3	3	33	3	
ART centers	HRG-FSW										STI clinics	-	-	-	-	-	2	2	2	
Link ART centers	HRG-MSM			,							ART centers	-	•	-	-		-		1	
Pelity Networks Puttiv Networks Pelity Networks Pelity HRG-IDU			,							Link ART centers	-		-	-	1	1	1			
Red ribbon clubs	Positive ICTC										PLHIV Networks									
Pair (urban), Comm. care centers . <th< td=""><td>1 OSILIVE, ICI C</td><td></td><td></td><td>,</td><td></td><td></td><td></td><td></td><td></td><td></td><td>Red ribbon clubs</td><td>ŀ</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></th<>	1 OSILIVE, ICI C			,							Red ribbon clubs	ŀ								
(urban), .<		Pali									Comm. care center.	- S.								
0.03 Condom outlets	FOSILIVE,	(urban),		,		,			,		Drop-in-centers	•								
	101 2007	0.03									Condom outlets		•							

* Inadequate sample size; - Data not available; 1 2011 census; 2 Source: DLHS III; 3 Data presented only for years where sample size is valid (HSS-ANC: 300 tested, HSS-HRG/STD: 187 tested, ICTC: 600 tested, PPTCT and BB: 900 tested); 4 PP = percent positive, NT = number tested; 5 General clients and pregnant women

Rajsamand, Rajasthan

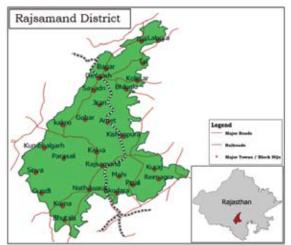
Background:

Rajsamand district lies in the Mewar region and located in the southern part of Rajasthan State. It has a population of 11.58 lakhs with a sex ratio of 988 females per 1,000 males, a female literacy rate of 48.44% and an overall rate of 63.93% (2011 Census). The economy of Rajsamand district mainly depends on agriculture. However, the Rajsamand district is rich in mineral resources and is one of the prime Indian suppliers of marble, granite and other valuable varieties of stone. The Dariba and Jawar mines are the principal Indian sources of ores for zinc, silver and manganese. The majority of the populace is engaged in mining-related work, both organized and unorganized. The major highway that passes through Rajsamand is National Highway 8.

HIV Epidemic Profile:

- Based on 2010 HSS-ANC, the level of HIV positivity was high (1.25%), with a stable to increasing trend.
- Based on 2011 PPTCT and Blood Bank data, the level of HIV
 positivity was low (≤ 0.20%), with positivity more or less stable over the last four years for PPTCT. Whereas, there was not enough Blood
 Bank data from previous years to determine a trend.
- HIV positivity among ICTC attendees was low among direct walk-in (2%, 2011) and referred clients (1.2%, 2011), also among male ICTC (1.6%, 2011) and female (1.3%, 2011) clients, with an overall stable trend. The number of ICTCs increased from 1 in 2007 to 3 in 2012. There has been a corresponding increase in the number of clients undergoing HIV testing at these sites since 2008.
- As per mapping conducted in 2009, FSW (469, 100% of total HRG) was the only HRG in the district and of the FSW, 50.9% were home-based and only 49.04% were street-based.
- The Syphilis positivity rate among STI clinic attendees in 2011 was zero percent.
- As per the 2001 Census, 4.3% of the male population were migrants; 28.5% of them migrated to other states and 29.2% migrated to other districts within the state.
- The top two destinations for out-of-state migration were Subarban Mumbai in Maharashtra and Surat in Gujarat.
- HIV awareness and RTI/STI awareness rates among women were 75.5% and 67.1% respectively (DLHS-III).
- Of the 262 PLHIV registered at the Anti Retroviral Therapy (ART) centre in 2009, 4% were 15-24 years of age, 60% were on ART, 84% were illiterate or only had a primary school education and 81% were widowed or divorced.

- Since the only HRG is FSW, better assessment of the size and profile of clients population, including migrants and truckers, will help in better
 understanding of district vulnerabilities.
- The route of transmission is "unkown" for 41.6% of the cases which points to a need for better counseling and data capture at ICTC Improved
 availability of quality data will give better insight into district HIV vulnerabilities.
- Indirect evidence of 81% of all ART registrants being widows indicates the need for early testing and linking of patients from ICTC to ART centers.
- Focus on outreach efforts among hard-to-reach sub-groups, such as home-based FSW.
- Strengthen outreach programme through awareness campaigns among women and around trucking halt points and highways in the district.
- ANC coverage is low, so there should be an effort to improve it through campaigns, through mass or mid media.



4163

4108

4549

3343

376

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2011

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ogram 2007

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2011

2010

Indore, Madhya Pradesh

Maharashtra

Ahmadabad, Gujarat

Surat, Gujarat

Mumbai (Suburban), Maharashtra

Daily Injectors-NA; Non daily injectors-NA

Kothi- NA; Panthi-NA; Double decker-NA

Thane,

Intra-district

Inter-state Intra-state

Overall 21397 4.34 100

 \Box 0 0 0

Male Migration, 2001 Census

9027 1.83

6255

6115

1.24

% of male No. out-migration

% of total migration

pop.

42.19

29.23 1.27

28.58

Top districts for inter-state out-migration

0

Rajsamand, Rajasthan Dietrie Ponulation 111 58 283 (1 6% of Bajachan Ponulation): Emale Literacy: 48 4%; ANCI Hilipation²: 33 2%

		MSM	c	>	c	>	c			c	>		Kothi- N/	Panthi-	NA;	Double	decker	¥		•		/RTI	2009	941			2005				,	-	36	-	-				,		
HRG Size	1	FSW	460	409	100	20	0.04	5		2//8	047	Home	based-	20.36%; Prothol	hased-	0%:	Street	based-	49.04%			STIL	2008	0			2004	,		,		·		-	-			,	,		
			Size Est.	(Mapping, 2009)	% Total HRG	70 TOTAL TILLO	% Total Pon	ob local ob.	Programme Target	Programme	Coverage				Typology					% <25 yrs.	% Married			No. episodes treated	% Syphilis pos.		No.	FSWTIs	MSM TIs	IDU TIS	Comp. TIs	ICTCs	Total tested ⁵	Blood Banks	STI dinics	ART centers	Link ART centers	PLHIV Networks	Red ribbon clubs	Comm. care centers	Drop-in-centers Condom outlets
2011			0.12	6455	0.20	1022									1.64	1763	1.30	2611	1.22	3196	2.04	1178																			
2010	1.25	399	0.04	2406	*	*	2.45	245	-	-			-		2.09	1006	2.93	751	1.65	1090	3.75	667					Ì		own						,						
2009			0.17	2236	*	*									1.68	1070	2.87	802	1.76	1077	2.77	795			Т				Unkn		41.										
2008	0.50	400	0.07	2540			1.61	249		-			-		1.46	1298	1.55	711	1.63	1715	0.68	294		% widowed	divorced	81			Parent to		3.33										
2007	0.85	350	0.54	1462	*	*	1.60	250	-	-	-		-		2.63	066	3.37	891	3.18	1759	0	122	٤, 2009		Married	∞		TC 2011	Veedle/	oyrırıge	0	Details									,
2006 2006	0.50	400			*	*	1.60	250		-			-		*	*				-	*	*	HIV Profile	II., Prim.	Edu.	8		smission, IC			0	ock-Level	,								
2005					*	*	-	-	-	-	-		-	,	*	*	*	*	*	*	*	*	PL		1	4		of HIV Tran		exnal	0	8									
2004					*	*	-	-	-	-			-	,	-					-	-	-			1			Route		^		-									
	PP⁴	NT4	ЬР	N	ЬР	IN	ЬР	IN	ЬР	IN	Ы	Þ	ЬР	F	ЬР	N	М	Ł	Ы	IN	ЬР	IN		% On AF	4	09			Hetero-s		25						,			Rajsamand	(urban), 0.17
	0	HSS-ANC	DETCT		7	BIOOU BATIK	UCC CTD	UIS-SCII	700.001	HSS-FSW	DOC MONA	INICINI-CCI	1101 001	001-651	LICTUM NISIO	ICIC IVIDIE	ICTC Female	, ciliale	ICTC Referred	nalelen o	ICTC Direct	Walk-in			1000	ART (262)	DLN (NA)			0/. of Total Bos	/8 Ut 10tal 105.		No HRG.ESW	200	No. HRG-MSM		No. HRG-IDU	% Positive,	ICTC 2009	% Positive	PPTCT 2009
	HIV Levels and fights 2005 2009 2010 2011	2004 2005 2006 2007 2008 2009 2010 2011 HRG Size PP ⁴ -	2004 2005 2006 2007 2008 2009 2010 2011 0.50 0.85 0.50 1.25 400 350 400 399	VC PP* -	HRG Size PP ⁴	NIT No. VC PP* -	PP ⁺	PP ⁺ 2004 2005 2006 2008 2009 2010 2011 HRG Size 2004 2004 2005 2006 20	NIT NIT	PP ⁴	NIT 2504 2004 2005 2008 2009 2010 2011 HRG Size	PP ⁺	NIT 1.00 1.00 1.00 1.00 1.00 1.00 1.00 1.00 1.25 1.00 1.25 1.00 1.25 1.00 1.25 1.00 1.25 1.00 1.25 1.00 1.25 1.00 1.25 1.00 1.25 1.00 1	NI	NIT 2004 2005 2006 2009 2010 2011 2011 HRG Size 1.25 2006	NIT 2004 2005 2006 2009 2010 2011 2011 HRG Size	PP	NT 2004 2005 2006 2009 2010 2011 ESW	NI	PP' 2004 2005 2006 2009 2010 2011 PR	PP	NI	PP' 2004 2005 2006 2007 2008 2009 2010 2011 ESW	PP' 2004 2005 2006 2007 2008 2009 2010 2011 ESW	PP' 2004 2005 2006 2007 2008 2009 2010 2011 ESW	NI	NI	PP ¹ 2.004 2.005 2.009 2.010 2.011 PF ² 1.25	NI	NI	NT NT NT NT NT NT NT NT	NT NT NT NT NT NT NT NT	NT NT NT NT NT NT NT NT	NIT 1.00 2	NIT NIT	PPP 2004 2005 2006 2007 2008 2010 2011 PRS EST. ES	NT NT NT NT NT NT NT NT	PP 2004 2005 2006 2010 2011 PP 5704 2020	PP 2004 2005 2050 2010 2011 PP 2004 2012 2010 2011 PP 2004 2012 2010 2011 PP 2010 2	PP	

* Inadequate sample size; - Data not available; 1 2011 Census; 2 Source: DLHS III; 3 Data presented only for years where sample size is valid (HSS-ANC: 300 tested, HSS-HRG/STD: 187 tested, ICTC: 600 tested, PPTCT and BB: 900 tested); *PP = percent positive, NT = number tested: *General clients and pregnant women

Sawai Madhopur, Rajasthan

Background:

Sawai Madhopur district, which is home to the Ranthambore National Park is bounded by Dausa in North and Karauli in the North-West. It has a population of 13.38 lakhs with a sex ratio of 894 females per 1,000 males, and a female literacy rate of 47.8% out of an overall literacy rate of 66.19% (2011 Census). The economy of Sawai Madhopur district is largely dependent on tourism. Sawai Madhopur is known for its cultural fairs and people from all over the world visit them. It is also famous for winter guavas, red chilies and mustard. Besides tourism, transportation industries also majorly contribute to the local economy. The major highways that pass through Sawai Madhopur are national highways 12 and 116.

HIV Epidemic Profile:

- Based on 2011 PPTCT and Blood Bank data, the level of HIV
 positivity was low (0.05%-0.12%). PPTCT had a rising trend up
 until 2010, at which point there was a sharp decline. Blood Bank
 attendees had a stable trend.
- Swai Madhopur
 District

 Legend

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- HIV prevalence among ICTC attendees was moderate among direct walk-in (6.10%, 2011) clients, with a stable trend, but numbers tested
 were small. Positivity levels were low among male (1.29%, 2011) and female (0.66%, 2011) clients, as well as among referred (0.63%, 2011)
 clients, with a stable trend among ICTC attendees except direct walk-ins which had a fluctuating trend.
- As per mapping conducted in 2009, FSW (505, 75.7% of total HRG) was the largest HRG in the district, followed by MSM (162, 24.2% of total HRG); of the FSW 99.01% were home-based.
- The syphilis positivity rate among STI clinic attendees in 2011 was 0.3%.
- As per the 2001 Census, 4.4% of the male population were migrants; 17.7% of them migrated to other states and 49.8% migrated to other districts within the state.
- The top two destinations for out-of-state migration were Faridabad, Haryana and South Delhi.
- HIV awareness and RTI/STI awareness rates among women are 27.7% and 27.6% respectively (DLHS-III).
- Of the 44 PLHIV registered at the Anti Retroviral Therapy (ART) centre in 2009, 9% were 15-24 years of age, 59% were on ART, 50% were illiterate or only had a primary school education and 48% were widowed or divorced.
- The number of ICTCs remained constant despite an increase in testing which was observed.

- Focus on outreach efforts among women (owing to very low awareness levels on HIV and STIs) and hard-to-reach sub-groups, such as home-based FSW (99% of who are hidden, home based and therefore harder to reach with services). TIs need to increase coverage.
- · Strengthen outreach programmes through awareness campaigns around trucking halt points and highways in the district.
- There is a need to better understand the dynamics of HIV transmission among FSW and MSM either through initiation of HRG sites for HIV
 Sentinel Surveillance (HSS), IBBS, or through further analysis of ICTC/PPTCT and ART data.
- Since the largest HRG is FSW, better assessment of the size and profile of clients population, including migrants and truckers, will help in better understanding of district vulnerabilities.
- ANC coverage is dismally low, and through campaigns using mass or mid media, there should be an effort to improve it.

2010

2009

2008

2007

2504

2010 0.45 2006

2009 STI/RTI

69.0 2005 7305

9269

4803

3917 7

3038

1652 7

730

7

Indore, Madhya Pradesh

North West Delhi

South West Delhi

South Delhi

Faridabad, Haryana

NA; Non daily injectors-NA

Kothi-36.81%; Panthi-8.59%; Double decker-54.6%

Daily Injectors-

0

0

Intra-district

Inter-state 4619

Overall 26064

 \mathbb{D} 0 0 0

MSM

Male Migration, 2001 Census

8452 1.43

12993 Intra-state

> No. out-migration % of male

> > 162

32.43

49.85

17.72

% of total migration

0.01

4.41 100

pop.

24.29

Top districts for inter-state out-migration

Sawai Madhopur, Rajasthan

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		7004	5002	+	9007	7007	8007	5007	7010	7011		HK	HRG Size
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200	NT⁴		٠									1300	
DDTCT	ЬР	-	1		*	90.0	0.17	0.15	0.22	0.05	Size Est.	101	
	IN	-	-		*	1451	1823	2514	2781	3796	(Mapping, 2009)	505	
Jacob Dool	ЬР	*	0	0	0.10	0.10	0.10	0.10	0.04	0.12	% Total HBG	75 71	
Sidou Balik	N	*	1260	H	1346	1579	2201	2042	2325	2589	Dallotal III.o	1.0.1	
OE SE	ЬР		-	0	0.40	0.80	0.80		0		% Total Pon	0	
018-88	Þ			2	250	250	250		246		/o lotal rop.	50.0	
771331	ЬР	-	•		-						Programme Target	•	
VV5-1-55L	IN	-	-		-	-			-		Programme	364	
P 400 P 400 P 4	ЬР	1	1		_		,				Coverage	ton	
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1101 3311	dd	-	-		-	-			-			99.01%;	.,
001-881	N		,		,						Typology	Brothel	-
CTC Marla	ЬР		5.65		6.75	0.70	2.38	1.10	2.96	1.29		based- 0%;	%.
CIC Male	IN	-	248	7	237	712	797	545	402	1244		Street based-	ġ.
	ЬР		1.66	H	06.0	08.0	0.77	0.29	09:0	99.0		0.99%	.0
	IN	-	482	1	1115	875	1297	1744	2486	2265	% <25 yrs.		
Defe CT	Ы		3.07	-	1.87	0.81	0.84	0.37	0.45	0.63	% Married		
ICIC Kererred	Ä		716		1337	1480	1915	2148	2876	3345			STI
ICTC Direct	ЬР		0	9	29.9	0	7.26	2.12	7.21	6.10		2008	┡
Walk-in	IN		14		15	107	179	141	319	164	No. episodes treated	+	24
				PLHIV	PLHIV Profile, 2009	6007					% Symbilis nos	+	\perp
	% On ART		% 15-24	% III.,	% Marrind	% widowed or	wed or				o syphilis pos.	-	_
ART (44)	59		6	50	σ	╄	2				No.	2004	
DLN (NA)	3 .			3	,	2 '					FSW TIs		
		Route o	Route of HIV Transmission, ICTC 2017	smission	ICTC 26	111					MSM TIs		
	Hetero-	-omoH	-	-	Needle/	Parent to	to	17			IDU TIS		
	sexual	sexual	-	Blood	Syringe	Child		UNKITOWII			Comp. Tls		
% of Total Pos.	92.31	0		0	0	7.69		0			ICTCs		Ш
(N=Zb)				1		-			-		Total tested ⁵		
				B OCK-	evel De	talls					Blood Banks	-	
No. HRG-FSW			•		-	-					STI clinics	-	
No. HRG-MSM											ART centers		
No. HRG-IDU			'								Link ART centers	-	
OTO STATE											PLHIV Networks	-	
% POSITIVE, ICIC			'	-							Red ribbon clubs	-	
/ Docitivo	Sawai										Comm. care centers		
% POSITIVE,	(urban).				,	,	,				Drop-in-centers		
	0.15%										Condom outlets	•	

* Inadequate sample size; - Data not available; ' 2011 Census; ' Source: DLHS III; 3 Data presented only for years where sample size is valid (HSS-ANC: 300 tested, HSS-HRG/STD: 187 tested, ICTC: 600 tested, PPTCT and BB: 900 tested); * PP = percent positive, NI = number tested; * General clients and pregnant women

Sikar, Rajasthan

Background:

Sikar is situated in Shekhawati region in the north-eastern part of Rajasthan. It has a population of 26.77 lakhs with a sex ratio of 944 females per 1,000 males, a female literacy rate of 58.7% and an overall literacy rate of 72.9% (2011 Census). Sikar is famous for the pilgrimage place of Lord Shri Khatu Shyamji, an Avatar of Lord Shri Krishna. Devotees from all over the country and abroad such as Nepal and Bhutan come to Sikar before the full moon to take part in the fair organized on Ekadhasi-Dwadasi Tithis as a part of the pilgrimage. The economy of Sikar district mainly depends on agriculture; crops like barley, gram, moong, cowpea, sesame, methi, garlic, tobacco, onion, guar seed are majorly grown in the district. The major highways that pass through Sikar are National Highways 11 and 65.

HIV Epidemic Profile:

- Based on 2010 HSS-ANC, 2011 PPTCT and Blood Bank data, the level of HIV positivity was low (≤ 0.08%), with a stable to declining trend.
- In 2011, HIV prevalence among ICTC attendees was low among direct walk-in (3.2%) and referred (2.7%) clients, also among male (2.8%) and female (3.2%) clients, with an overall declining trend.
- As per mapping conducted in 2009, FSW (322, 64.02% of total HRG) was the largest HRG in the district, followed by MSM (181, 35.98% of total HRG); of the FSW, 48.7% were home-based and 35.47% were street-based.
- The Syphilis positivity rate among STI clinic attendees in 2011 was 0.48%.
- As per the 2001 Census, 5.7% of the male population were migrants; 35.5% of them migrated to other states and 32.9% migrated to other districts within the state.
- The top two destinations for out-of-state migration were Surat in Gujarat and Thane in Maharashtra, which were high prevalent districts.
- HIV awareness and RTI/STI awareness rates among women were 61.3% and 51.4% respectively (DLHS-III).
- Of the 380 PLHIV registered at the Anti Retroviral Therapy (ART) centre in 2009, 2% were 15-24 years of age, 61% were on ART, 54% were illiterate or only had a primary school education and 52% were widowed or divorced.

- Focus on outreach efforts on hard-to-reach sub-groups, such as home-based FSW.
- Strengthen outreach programmes through awareness campaigns around trucking halt points and highways in the district.
- There is a need to better understand the dynamics of HIV transmission among MSM and FSW, either through initiation of HRG sites for HIV Sentinel Surveillance (HSS) or further analysis of ICTC/PPTCT and ART data.
- Since the largest HRG is FSW, better assessment of the size and profile of clients population, including migrants and truckers, will help in better
 understanding of district vulnerabilities.
- The HIV transmission from parent to child is high, so there is a need to improve PPTCT services.



7034

5975

2011

2010

2009

Mumbai (Suburban), Maharashtra Maharashtra

Surat, Thane, Jhajjar, Gujarat Maharashtra Haryana

Sikar, Rajasthan

District Population: 26,77,737 (3.9% of Rajasthan Population); Female Literacy': 58.7%; ANC Utilization²: 33.6%

Intra-state Intra-district

Overall 67622

Male Migration, 2001 Census

21316

22290

24016 Inter-state

31.52 1.82

32.96

35.52

2.05

5.77 100 Top districts inter-state for out-migration

History	Sill ties			No. out-	migration	% of male	pop.	% of total	mgration	8					Surat	Guiarat Mah										rogramme Kesponse	-				2	3527	2		_	_				
William Militian	Aumera —	1			_				_			_				_				1			2011	3397	0.48	ogramme 2007	-				2	1852	2	-					. .	
		2	ngi	0		0		0			0		ć	Injectors	NA:	Non daily	injectors-	¥					2010	371	- ·	2006	2 '	<u> </u>			2	556	2	-					. .	
		NACA.	MSM	181		35.98		0.01			29		Kothi-	88.4%;	Panthi-	.;.	Double	11.6%	2			STI/RTI	5009	535	,	2005	╀	-			-	335	2	_			,			
	HRG Size	74.07	LSVV	322		64.02		0.01			132	Home	based-	45.64%;	Brothel	based-	18.90%;	hased-	35.47%			STIV	2008	216		2004	_	,			-	•	2	-						
				Size Est.	(Mapping, 2009)	% Total HRG		% Total Pop.	F	Programme larget	Programme	200		7	Tvnolonv					% <25 yrs.	% Married			No. episodes treated	% Syphilis pos.	ON.	FSWTIk	MSM TIs	IDUTIs	Comp. TIs	ICTCs	Total tested ⁵	Blood Banks	STI clinics	ART centers	Link ART centers	PLHIV Networks	Red ribbon clubs	Dron-in-centers	Drop-III-cerifers
	2011			0.05	3934	0.08	17121									3	3302	2.82	3258	2.72	4300	3.27	2260														,			
22.0 /0	2010	0	400	0.19	2670	0.12	15273	3.20	250							4.81	2122	3.26	2242	2.33	3562	11.47	802						uwc		4					-				
UIIIZAUOIL.	2009			0.15	2679	0.10	12948									4.65	1786	3.97	1510	2.97	2860	13.30	436	-	_		1		Unknown		0.54					-				
30.7%, AINC	2008	0	400	0.10	2012	0.10	11290	4.80	250							13.03	714	8.74	801	7.46	777	14.23	738		% widowed or	52			Parent to	Child	10.27					-				
Translaty	2007	0	400	*	*	0.10	8380	2.40	250							12.63	295	11.31	610	8.83	555	14.75	617	6	% Warring	5		C 2011	Needle/	/ringe	0	etails				-				
UN Loyole and Transfe	2006	0.25	400	*	*	0	7379	1.20	250							*	*	*	*	*	*	*	*			+		mission, ICT	Blood	+	0	Block-Level Details				-				
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.970 UI Naja	2004				-	0:30	1970													-	-		-					Route	_	+						-				
c) / c / / / oz		PP⁴	ĭLN	ЬР	NT	ЬР	IN	Ы	N	윤	LN.	ЬР	IN	ЬР	IN	Ы	۲	윤	N	ЬР	NT	ЬР	NT		% On ART	61			Hetero-sexua		88.65					-		,	Sikar (urhan)	- IUEULII
DISKIECE Population. 20,77,737 (3.37% of najasulan Population), remaie Eueracy. 30.7%, ANC Ounization. 33.0% His		0144	HSS-ANC	DIGI		Jacob Pool	Blood Bank	OE SE	UIS-SSH	1400	HSS-FSW	DOC MACM	INICINI-CCH	100	001-881	CTC MA-1-				Domojo O DI	I Pelelled	CTC Direct	Walk-in			ART (380)	DLN (NA)			4	% of lotal Pos.	(601)	Mo Doc Edw	JO. HRG-PSW	No. HRG-MSM	No. HRG-IDU	% Positive, ICTC	5009	% Positive,	

* Inadequate sample size, - Data not available, 1 2011 Census; 2 Source: DLHS III; 3 Data presented only for years where sample size is valid (HSS-ANC; 300 tested, HSS-HRG/STD: 187 tested, ICTC; 600 tested, PPTCT and BB: 900 tested); 4 PP = percent positive, NT = number tested; 3 General clients and pregnant women

Sirohi, Rajasthan

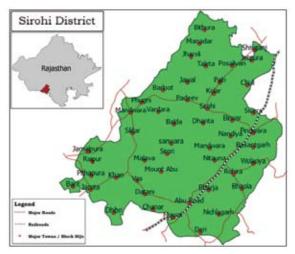
Background:

Sirohi district is situated at the south-west part of Rajasthan. It has a population of 10.37 lakhs with a sex ratio of 938 females per 1,000 males, a female literacy rate of 40.12% and an overall literacy rate of 56.02% (2011 Census). The economy of Sirohi district mainly depends on agriculture. Large numbers of chemical, plastic as well as cotton spinning industries are also present in the district. The main industrial centers are located at Abu Growth Centre and the main markets are at Sheoganj and Abu Road, which have become major truck halting points in the district. The major highways that pass through Sirohi are National Highways 14 and 76.

HIV Epidemic Profile:

- Based on 2010 HSS-ANC data, HIV prevalence was moderate (0.50%), with a stable trend.
- Based on 2011 PPTCT and Blood Bank data, the level of HIV positivity was low (0.06-0.08%) with a stable to declining trend.
- In 2011, HIV prevalence among ICTC attendees was low among referred (1.38%), as well as among male (2.1%) and female (1.8%) clients, whereas HIV level positivity was moderate among direct walk-ins (5.77%). There was an overall stable to declining trend.
- As per mapping conducted in 2009, FSW (752, 89.1% of total HRG) was the largest HRG in the district followed by MSM (92, 10.9%); of the FSW, 3.32% were home-based and 94.68% were brothel-based.
- The syphilis positivity rate among STI clinic attendees in 2011 was 0.09%.
- As per the 2001 Census, 7.5% of the male population was migrantpopulation; 34.8% of them migrated to other states and 12.9% migrated
 to other districts within the state.
- The top two destinations for out-of-state migration were Surat and Ahmedabad, Gujraat.
- HIV awareness rate and RTI/STI awareness rate among women were 67.6% and 47.7% respectively (Source DLHS-III).
- Of the 177 PLHIV registered at the Anti Retroviral Therapy (ART) centre in 2009, 2% were 15-24 years of age, 89% were on ART, 71% were illiterate or only had a primary school education and 82% were widowed or divorced.

- Focus on outreach efforts among hard-to-reach sub-groups, such as home-based FSW.
- Strengthen outreach programmes through awareness campaigns among women and around trucking halt points and highways in the district.
- There is a need to better understand the dynamics of HIV transmission among MSM and FSW, either through initiation of HRG sites for HIV
 Sentinel Surveillance (HSS) or further analysis of ICTC/PPTCT and ART data.
- Since the largest HRG is FSW, better assessment of the size and profile of clients population, including migrants and truckers, will help in better
 understanding of district vulnerabilities.
- Parent to child transmissions are high (15.53%) thus, more should be done to understand the profile a PPTCT attendees and their spouses, through in depth analysis of PPTCT and ART data.



3847

3395

2588

575

4

2011

2010

2009

2008

902

2011 3587 0.09 2007

2010 336 1.08 2006

Banas Kantha, Gujarat

Thane, Mumbai, Maharashtra

Ahmedabad, Gujarat

Surat, Gujarat

Daily Injectors-NA; Non daily injectors-NA

Kothi-27.17%; Panthi-0%; Double decker-72.83%

52.18

12.98

34.83

100

Top districts for inter-state out-migration

3.92

0.98

2.62

7.52

% of male % of total migration

10.90

0.01

4271

11460

No. out-migration

92

Intra-district

Inter-state Intra-state

Overall 32899

2 0 0 0

MSM

Male Migration, 2001 Census

Sirohi, Rajasthan

District Population:10.37,185 (1.5% of Raiasthan Population); Female Literacy: 40.1%: ANC Utilization?: 35.3%

HIVI Percel and Trends	HIV Lev	2004 2005 2					* 0.20	* 1239 2									*	*	*	*	*	*	*	*	PLHIV	% On ART	89 2 71		Route of HIV Transmission, ICTC 201	Hetero-sexual Homo- Rlood	sexnal	82.52 0.97 0	Block						1010
2011 0.08 3 3921 2.16 2.911 1.86 4.839 4.4699 7.77 7.97	HIV Levels and Trends ³	2006 2007	0.50 0.50	400 398		*	0.40 0.30	2165 2938				-		-			*		*	*	*	*	*	*	PLHIV Profile, 2009		t		sion, ICTC 2011	/ Needle/	+	0	Block-Level Details		-				
2011 0.08 3.321 2.16 2.16 2.16 2.16 1.38 1.38 4.699 7.77 7.77		2008	0.25	400	0.27	1875	0.30	3331									14.65	430	17.67	283			15.85	713		% widowed o	82			Parent to	Child	15.53		-					
2011 0.08 3.321 2.16 2.16 2.16 2.16 1.38 1.38 4.699 7.77 7.77								H											Н		Н						1	1		Linknowir		0.97							
			0.50	400				_				-		-					\dashv											Γ	. T				-				
				13					% Total Pop	Programme	Target	Programme	Coverage			Tvnology			36	_	_	_			treated	% Syphilis p	No	FSW TIS	MSM TIs	IDU TIS		Total tested	Blood Bank	SII clinics	Link ART cer	PLHIV Netw		centers	
		HRG Size	FSW	:	752		89.10		0.07			١.		Home hased-	3.32%;	Brothel	based-	ee ,	based-	8	۱.	- 6	2008 200	3 :	1025 14	0	2004 200	Н	\dashv	$^{+}$	$^{+}$	1.1	7	†		t	H		T

2002							Collin. Cale		
	Sirohi						centers	1	
% Positive,	(urban),	,	,		,		Drop-in-centers	-	
PFIC1 2009	0.33						Condom outlets		

* Inadequate sample size; - Data not available; 1 2011 Census; 2 Source: DLHS III; 3 Data presented only for years where sample size is valid (HSS-ANC: 300 tested, HSS-HRG/STD: 187 tested, ICTC: 600 tested, PPTCT and BB: 900 tested); * PP = percent positive, NT = number tested; * General clients and pregnant women

Tonk, Rajasthan

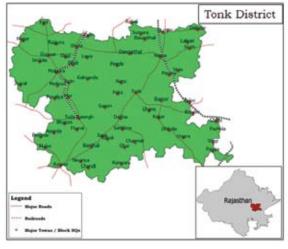
Background:

Tonk district is located in the North-Eastern part of Rajasthan. It has a population of 14.21 lakhs, a sex ratio of 949 females per 1,000 males, a female literacy rate of 46.01% and an overall literacy rate of 62.4% (2011 Census). The economy of Tonk district mainly depends on agriculture and animal husbandry. District is rich in mineral deposits like garnet, quartz, morrum, feldspar, granite and bajari. Tonk is particularly known for its sandstone. Deoli is the chief producer of sandstone in Tonk which has become trucking halt point. The major highways that pass through Tonk are National Highways 12 and 116.

HIV Epidemic Profile:

- Based on 2011 PPTCT and Blood Bank data, the level of HIV positivity was low (0.06 0.24%), with a stable to rising trend.
- HIV prevalence among FSW was low (4.40%) in 2008 HSS round with a declining trend from a moderate level.
- In 2011, HIV positivity among ICTC attendees was low among direct walk-in (0.81%) and referred (0.81%) clients, also among male (0.88%) and female (0.70%) clients, with a stable to declining trend.
 Positivity among these group was observed as more or less equal.
- As per mapping conducted in 2009, FSW (244, 44% of total HRG) was the largest HRG in the district, followed by MSM (306, 66% of total HRG); of the FSW, 65.16% were brothel-based.
- STI episodes treated over a period increased every year and the syphilis positivity rate among STI clinic attendees in 2011 was 0.07%.
- As per the 2001 Census, 4.5% of the male population were migrants; 6.12% of them migrated to other states and 49.9% migrated to other districts within the state.
- The top two destinations for out-of-state male migration were South West, and North West parts of Delhi, where MSMs and IDUs were more
 prevalent.
- HIV awareness rate was 31.1% and RTI/STI awareness rate was 46.7% among women (DLHS-III).
- Of the 81 PLHIV registered at the Anti Retroviral Therapy (ART) centre in 2009, 4% were 15-24 years of age, 59% were on ART, 44% were illiterate or only had a primary school education and 48% were widowed or divorced.
- There has been a rapid scale-up of ICTCs from 2008 onwards in the district which corresponded with the increase in the number of clients undergoing HIV testing at these sites.

- Saturation and quality of TI should be strengthened with focus on hard-to-reach sub-groups, such as street-based FSW and MSM.
- Strengthen outreach programme through special awareness campaigns among women, in migrant pockets and around trucking halt points and highways in the district.
- There is a need to better understand the dynamics of HIV transmission among MSM and Migrants, either through initiation of sites for HIV Sentinel Surveillance (HSS) or further analysis of ICTC/PPTCT and ART data.
- Improved data availability of in migrants, truckers and ART patients on demographic and geographic parameters will give better insight to district HIV vulnerabilities.



19734

19477

9

10

9

2011

2010

2009

Tonk, Rajasthan
District Population: 14 21 711 (2% of Raisethan Population): Female Ut

Intradistrict

Inter-state Intra-state

Overall

Male Migration, 2001 Census

14312

1754

28660

43.94

49.94

6.12

100

Top districts for inter-state out-migration

North West Delhi

South Delhi

2.01

		LIV Levels	HIV Levels and Irends								NΛ	vuinerabilities	es
2004	2002	2006	2007	2008	2009	2010	2011		HRG Size				
				-					FSW	MSM	ndi		
				-		-						_	
		*	0.03	0.03	0.07	0.08	90:0	Size Est.	244	306	c		No. out-
		*	2626	6328	14731	11599	15365	(Mapping, 2009)		8	>		migratic
	*	0.10	*	0.10	0.10	0.13	0.24	% Total HRG		L	(, of %
	*	166	*	1087	1337	1599	1667		44.36	55.64	>		male
1 .		,	,					0/. Total Box				T	0, of
1	,							70 IOIdi rop.	0.00	0 0	c		10 to 1
		7.60	4.80	4.40					5	5	>		migratic
•		250	250	250				Programme Target			·	Ι	,
1								Programme	0000			Π	
1	-			-		-		Coverage	736.00	>	>		
1	•		-	-		-		Typology	Home based-	Kothi-	, iie		
	-			-					:%0	47.06%;	2	.,	
1	*	*	2.50	0.99	1.36	0.93	0.88		Brothel	Panthi-			South
1	*	*	1000	2824	2868	5146	9167		based-	6.21%;	ž		West
'	*	*	1.10	0.73	1.60	1.14	0.70		65. Ib %;	dockar		۵. ا	Dell
ļ '	*	*	1630	3134	1878	2989	6407		34.84%	46.73%	₹		
'	*	*	1.58	99.0	0.99	06:0	0.81	% <75 vrs.			ŀ		
1	*	*	1268	2877	3030	5445	9226	% Married			ľ	Т	
١.	*	*	1.69	1.04	2.27	1.23	0.81		STIV	STIVRTI			
,	*	*	1362	3081	1716	2690	5818		2008	2009	2010	2011	
		PLHIV Profi	ofile, 2009					No. episodes treated	1047	2252	1303	3922	
% On ART	% 15-24	% III., Prim.		% widowed or	_			% Syphilis pos.				0.07	
		Edu.	Married	divorced	1						Progra	Programme Response	osuoc
	4	4	2	48	1			No.	2004	2002	2006	2007	2008
					_			FSWTIs				1	2
	Route of HIV Transmission, ICTC 2017	Transmission	n, ICTC 2011					MSM TIs					•
Hetero-sexual	-Homo-	Blood	Needle/	Parent to Child		Unknown		IDUTIs				-	•
	sexual		syringe					Comp. TIs		-		-	•
93.10	3.45	0	0	3.45	_	0		ICTCs	0	-	2	2	10
		Block-1 e	Slock-Level Details		_			Total tested ⁵		100	574	5256	12286
								Blood Banks	-	-	-	-	-
'								STI clinics	-	_	_	-	-
•	•	,	•	,	,	,	,	ART centers					
'		'						Link ART centers					
Jalon		-						PLHIV Networks					•
2.07	7 Niwai, 0.55	- 25						Red ribbon clubs				-	4
		-	╁	1				Comm. care centers				-	•
Devli, 0.05	0.05 Malpura,	a, Niwai,	onk,	lodaraisingh,	Uniyara,			Drop-in-centers				-	
		_	_		0			Condom outlets					1

* Inadequate sample size, - Data not available, 1 2011 Census; 2 Source: DLHS III; 3 Data presented only for years where sample size is valid (HSS-ANC: 300 tested, HSS-HRG/STD: 187 tested, ICTC: 600 tested, PPTCT and BB: 900 tested); 4 PP = percent positive, NT = number tested; 5 General clients and pregnant women

Udaipur, Rajasthan

Background:

Udaipur is situated in the southern tip of the state which comes under the Mewar region of Rajasthan adjoining Gujarat. It is bounded by Rajasmand and Pali in the North, Dungarpur in the south, Bhilwara and Chittorgarh in the east and by Sabarkantha district of Gujarat in the west. It has a population of 30.67 lakhs with a sex ratio of 958 females per 1,000 males, a female literacy rate of 49.1% and an overall literacy rate of 62.7% (2011 Census). Agriculture is the mainstay of the economy. The district is endowed with metallic as well as non-metallic mineral wealth; most important are lead-zinc, copper, rock sulphate, limestone, and marbles which lies in the belt of Prasad, Bara, Paduna, Zawar and Hameta Magra. Presence of mineral wealth in the district attracts in-migration and results in trucking halting points. Udaipur is a famous tourist destination and is known for lakes and beautiful palaces. Udaipur lies on the National Highway 8, midway between Delhi and Mumbai.



HIV Epidemic Profile:

- Based on 2011 PPTCT and Blood Bank data, the level of HIV positivity was low (0.18-0.20%). The PPTCT and Blood bank data showed a stable to declining trend with increasing number tested and scale up of centers.
- Based on 2010 HSS-FSW, the level of HIV positivity was low (1.2%). Due to the non-availability of FSW data trend analysis was not done.
- In 2011, HIV positivity among ICTC attendees was low among direct walk-in (3.82%) and referred (4.15%) clients, also among male (4.28%) and female (3.73%) clients with an overall declining trend with increasing number tested at ICTCs.
- As per mapping conducted in 2009, MSM (1128, 52.2% of total HRG) was the largest HRG in the district, followed by FSW (1030, 47.7% of total HRG); of the MSM 83.3% were Kothi, 5.08% were Panthi and 11.5% were Double Deckers.
- The syphilis positivity rate among STI clinic attendees in 2011 was 1.73%.
- As per the 2001 Census, 5% of the male population were migrants; 36.3% of them migrated to other states and 22.79% migrated to other districts within the state.
- The top two destinations for out-of-state migration were Surat and Ahmedabad in Gujarat, which were high prevalent districts.
- HIV awareness rate was 69.5% and RTI/STI awareness rate was 62% among women (DLHS-III).
- Of the 673 PLHIV registered at the Anti-Retroviral Therapy (ART) center in 2009, 6% were 15-24 years of age, 58% were on ART, 81% were illiterate or only had a primary school education and 79% were widowed or divorced.
- There has been a rapid scale-up of ICTCs from 2008 onwards with a corresponding increase in the number of clients undergoing HIV testing at these sites. Though there were large number of MSMs, there isn't any MSM-TI in the district, which was a concern.

- TI for MSM (being largest group) should be considered on priority, with focus on quality outreach and a scale up of services to all HRGs in the district, since heterosexual transmission is predominant (state average 81%) in the district
- Data gaps in terms of bio-behavioral aspects of FSW, MSM, migrants and truckers may be explored through TIs or initiation of HRG sentinel surveillance or operational research to improve district vulnerability.
- Data at ICTC, PPTCT, Blood bank and ART of positives should be analyzed and assessed to understand the source and spread of HIV epidemic
 in the district.

2010

2009

2008

2006 3.31

8.31 2005

10764 1.73 2007

3242

2011

2010 2290

2009

68091 22

41140

27760

7785 25

3288

2061

1445

25

25

8

∞

6

Thane, Mumbai, Maharashtra Maharashtra

Mumbai (Suburban), Maharashtra

Ahmadabad,

Gujarat

Surat, Gujarat

Non daily injectors-NA

Kothi-83.33%; Panthi-5.08%; Double decker-11.58%

Daily Injectors-

-pasi

0

0

Udaipur, Rajasthan

District Population: 30.67.549 (4.4% of Raiasthan Population): Female Literacy': 49.1%: ANC Utilization:: 28.2%

Inter-state Intra-state Intra-district

Overall 62699

2

MSM

No. out-migration

0 0

1128

Male Migration, 2001 Census

27354

15264

40.84 2.05

22.79

1.82 36.37

5.02 100

52.27

% of male pop. % of total migration

0

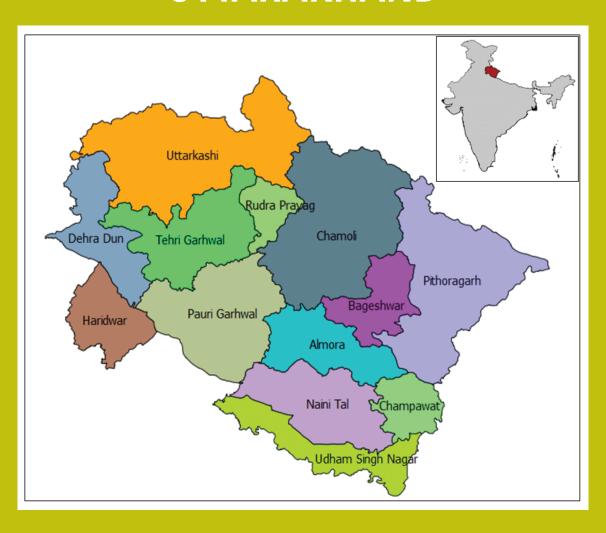
0.04

Top 5 districts for inter-state out-migration

HRG	W100	NS.	000	1030		47.73		0.03			8512		Home bas	Brothe	-based-	27.63%	Street bas	40.58%	•		0000	2002	254	3.15	-	2004		+		2	682	-	-	, ,	S			- calles
		1	Size Est.	(Mapping,	"Total HPG	70 IOIGI IIVG	% Total Pop.		Programme	Target	Programme	Coverage	Typology						% <25 yrs.	% Married		No posicio	treated	% Syphilis pos.		No.	PSW IIS	MISIM IIS	Comp. TIs	ICTCs	Total tested ⁵	Blood Banks	STI clinics	Link ART contare	PLHIV Networks	Red ribbon clubs	Comm. care	רבוונבוס
2011	707			0.18	33258	0.20	26060									4.28	20063	3.73	14770	4.15	23688	3.82	11145										,	Ţ.		Sarada,	F	
2010	20102			0.34	24029	0.20	23045	4.06	197	1.20	250		-	-		8.93	9622	08.9	7489	7.53	12491	9.26	4620												١.	Salumbar,		
2000	5002			0.24	15246	0:30	21859	-			-					9.85	7554	10.18	4960	8.74	8790	12.85	3744													Mawli,	5	Khairwara,
2008	2000			0.53	4148	0.40	21092	2.40	250		-		-	-		28.64	2186	28.46	1451	25.54	2345	33.75	1292						Unknown		0.81		,			Khairwara,	2	
rends ³	7007			0.70	1281	0.30	17413	5.09	239				-			16.81	1166	14.74	841	13.13	1538	25.16	469	2009	% widowed or	nanoiren 70	2 .		Parent to	Child	6.11		talls			Jhadol,		Journa.
HIV Levels and Trends	2000			*	*	0.40	13752	9	250		-		-			14.10	1291	16.99	559	13.75	1629	23.98	211	PLHIV Profile,	% % %	Mailleu 13	2 ,	TC 2011	Needle/	Syringe	0.22	- 4	Block-Level Details			Gogunda,		Dharivaviad
HIV I	5007			*	*	0.40	10813	2.47	202		-		-			11.37	985	12.83	374	10.86	1169	17.37	190	급	% III., Prim.	Euu.	5 '	Route of HIV Transmission ICTC 2011	Blood		0.59		- Bio			Dhariyawad,		Rhindhar
2004	±007			*	*	0.40	6233	*	*		-		-												%	+7-C1	,	Te of HIV Tra	Homo-	sexual	0.81		,			Bhindhar, [Raddaon
	i	д. Д.	NT⁴	РР	NT	ЬР	N	ЬР	N	Ы	NT	М	NT	PP	IN	ЬР	N	Ы	N	Ы	M	Ы	N		% On ART	200	ς .	Roll	Hetero-sexual		91.46					Barganw,	3	Lidainir
HIV Levels and Trends 7	0.14	HSS-ANC		PPTCT		Blood Bank		HSS-STD		HSS-FSW		HSS-MSM		HSS-IDU		ICTC Male		ICTC Female		ICTC Referred		ICTC Direct	Walk-in			ART (673)	DIN (NA)				% of Total Pos.	(N=1359)	No HRG-FSW	No HBG-MSM	No HBG-IDII	% Positive,	2 2	% Positive.

* Inadequate sample size; - Data not available; 1 2011 Census; 2 Source: DLHS III; 3 Data presented only for years where sample size is valid (HSS-ANC: 300 tested, HSS-HRG/STD: 187 tested, ICTC: 600 tested, PPTCT and BB: 900 tested); * PP = percent positive, NI = number tested; * General clients and pregnant women

UTTARAKHAND



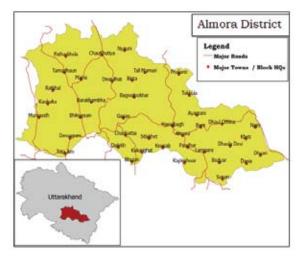
Almora, Uttarakhand

Background:

Almora, a picturesque district in Kumaon region situated towards east of Uttarakhand, is known for its cultural heritage, handicrafts, cuisine and wildlife. It has a population of 6.21 lakhs, a sex ratio of 1142 females per 1,000 males; the female literacy rate is 70.44% with an overall literacy rate of 81.06% (2011 Census). Almora is surrounded by Bageshwar and Chamoli districts in the north, Nainital district in the south, Pauri Garhwal district in the east, and Pithoragarh and Champawat districts in the west. Due to lack of employment opportunities available in the district, most of the male population has migrated outside the state of Uttarakhand to big cities like Delhi, Lucknow Mumbai.

HIV Epidemic Profile:

 Based on 2011 PPTCT and Blood Bank data, the level of HIV positivity was low (0.04-0.15%). PPTCT had a stable to declining trend, whereas Blood Bank attendees had a rising trend.



- The 2011 HIV positivity among ICTC attendees was constantly low among referred (0.46%) and direct walk-in (1.51%) clients, as well as among male (0.55%) and female (0.50%) clients. There was a stable to declining trend among male and female clients.
- As per mapping conducted in 2007, FSW (460, 77.97% of total HRG) was the largest HRG in the district, followed by MSM (100, 17% of total HRG) and IDU (30, 5% of total HRG).
- Syphilis positivity rate among STI clinic attendees in 2010 was 0.2% and 0.1% in 2011 and STI episodes treated in 2011 were 3396 compared to 1941 in 2010.
- As per the 2001 Census, 17.3% of the male population were migrants; 51.6% of them migrated to other states and 27.9% migrated to
 other districts within the state.
- The top to destinations for out-of-state male migration (50%) were South Delhi and South West Delhi.
- HIV awareness rates were 67.3% among women while 96% of them had correct knowledge on HIV AIDS (DLHS-III), while RTI/STI
 awareness rates were 30% among women (DLHS-III).
- Of the 28 PLHIV registered at the ART centre in 2009, 7% were 15-24 years of age, 71% were on ART, 43% were illiterate or only had a primary school education, and 57% were widowed or divorced.
- Number of ICTCs and blood bank increased gradually. Red ribbon clubs were established from 2009 onwards for the awareness about HIV/ AIDS in the youth.

- Data triangulation of Almora district suggested that out of state male migration, high risk behavior of people including females, size of FSW and MSM were probable vulnerable factors in the district that needs to be taken care of by regular monitoring.
- Data gaps like biological and behavioral parameters of HRGs, profile and risk behavior of out migrants will further improve understanding on HIV vulnerability in district.
- There is a need to understand better the dynamics of HIV transmission by further analysis of ICTC/PPTCT and ART data on HIV positives mainly demographic and geographic aspects.
- Since the largest HRG is FSW, better assessment of the size and profile of client populations, including migrants, will improve the understanding of district vulnerabilities.
- Special IEC awareness campaigns among out migration pockets, among females in the district to reduce risk behavior recommended.

2010

2009

2008

2005

3396 0.10 2007

1941

0

2011

2010 0.29 2006

2009 1747 5684

3963

4204

4588

1360

183

183

19

19

19

Almora, Uttarakhand

District Population: 6,21, 927 (6.1% of UK Population); Female Literacy': 70.4 %; ANC Utilization²: 27.4%

Intra-district

Intra-state

Inter-state

Overall 50868

 \Box 30

MSM

Male Migration, 2001 Census

10400

14212

26256

20.45

27.94

51.62

100

% of total migration % of male migration No. out-

0

0.02

pop.

5.08

16.95

100

4.84

Top districts for inter-state out-migration

North West Delhi

East Delhi

Uttar Pradesh

South West Delhi

South Delhi

Injector-NA; Non daily injector-NA

Kothi-NA; Panthi-NA; Double decker-NA

> sed--pas

-bas

Ghaziabad,

			AIL	Levels and	Irenas						
		2004	2005	2006	2007	2008	2009	2010	2011		HRG
ONV SSE	PP⁴										
HSS-AINC	≱LN										FSW
DDICT	dd	-			-	0.07	0.18	0.18	0.04	Size Est.	0.7
rrici	IN	-	-	-	-	1484	1629	1891	2653	(Mapping, 2007)	460
Jacob Coole	ЬР	*	*	*	0.22	0	0.10		0.15	H	1
DIOOU DAIIK	IN	*	*	*	901	917	878		1355	% lotal HKG	16.11
£5 551	Ы	0	0	0	0			1.20		H	
H35-51D	N	246	235	250	250			250		% lotal Pop.	0.0
/V\33 33FI	ЬР	-	-	-	-	-		-		Programme Target	
133-F3VV	NT	-	-	-	-					Programme	
PN3PN 33H	ЬР							-		Coverage	300
INCINI-CCL	N										Home base
	ď										NA;
U21-66H	N									Typology	Brothel base
CTC Made	Ы		*	*	0.59	0.42	0.77	0.48	0.55		.;
ICIC Male	N		*	*	844	2128	1821	1469	1828		Street base
1	8		*	*	0.58	1.02	1.46	98.0	0.50		NA NA
ICIC remaie	N		*	*	516	976	754	813	1203	% <25 yrs.	1
1 - J-0 JE	G.		*	*	1.75	0.62	0.67	0.74	0.46	% Married	
LIC Kererred	N		*	*	398	2895	4482	1886	2832		-
CTC Direct	Ы		*	*	0.10	0.48	0.84	0	1.51		200
Walk-in	N		*	*	362	509	238	396	199	No. episodes treated	626
			PLI	HIV Profile	, 2009					% Syphilis pos.	
	™ On ART	% 15-24	% III., Prim.	%	% widowed	pa				-14	_
		2	Edu.		divorced	_				NO.	7007
ART (28)	71	7	43	0	57					MSMATIC	+
DLN (NA)										SI MICINI	ł
		Soute of HIV	Route of HIV Transmission, ICTC 2011	, ICTC 2011						SII DOII	+
	Hetero-	Homo-	Blood	Needle/ Svringe	Parent to	Unknown	u,			Comp. IIS ICTCs	+
% of Total Pos.	77				1250	12 50				Total tested ⁵	
(N=16)	2	>	>	>	05.21	12.31				Blood Banks	
			Blo	ock-Level I	Details					STI dinics	
No. HRG- FSW		,	,	,	,		,			ART centers	
No. HRG- MSM										Link ART centers	
100										PLHIV Networks	
NO. HKG- IDU						.				Red ribbon clubs	
% Positive, ICTC	,			,	,					Comm. care centers	
% Positive,										Drop-in-centers	
PPTCT										Condom outlets	

* Inadequate sample size; - Data not available; 1 2011 Census; 2 Source: DLHS III; 3 Data presented only for years where sample size is valid (HSS-ANC; 300 tested, HSS-HRG/STD: 187 tested, ICTC; 600 tested, PPTCT and BB: 900 tested); 4 PP = percent positive, NT = number tested; 5 General clients and pregnant women

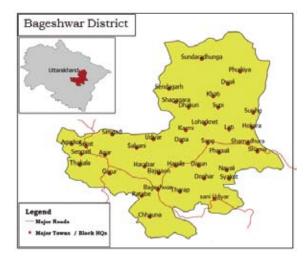
Bageshwar, Uttarakhand

Background:

Bageshwar district is situated in the eastern Kumaon region of the state and is bound by Chamoli district in the northwest, Pithoragarh in the northeast and by Almora district in the south. Bageshwar town is the district headquarters which is situated at the confluence of rivers Saryu, Gomti and latent Bhagirathi. According to the 2011 census, the district has a population of 2.59 lakhs and it is the third least populous district of the state. The sex ratio of the district is 1093 females for every 1000 males and the overall literacy rate is at 80.6% with female literacy rate of 69.5%. Bageshwar is an important pilgrim and tourist centre for adventure sports. The district is located about 400 kms from New Delhi and is well connected by road to major towns and cities.

HIV Epidemic Profile:

 Based on 2009 Blood Bank data, the level of HIV positivity was low at 0.1% with a stable trend among pregnant women. PPTCT 2011 showed zero positivity. However, there was not enough data from previous years to determine a trend for PPTCT.



- HIV positivity among ICTC attendees was low among referred (0.64%, 2011) and direct walk-in (0.21%, 2011) clients, as well as among male (0.33%, 2011) and female (0.65%, 2011) clients. There has been an overall stable to declining trend among ICTC attendees.
- As per mapping conducted in 2007, FSW (260, 73.86% of total HRG) was the largest HRG in the district, followed by MSM (52, 14.77% of total HRG) and IDU (40, 11.36% of total HRG).
- The syphilis positivity rate among STI clinic attendees in 2011 was 0.64% with an increase in the number of episodes treated.
- As per the 2001 Census, 8.81% of the male population were migrants; 26.8% of them migrated to other states and 42.1% migrated to other districts within the state.
- · Most interstate migrations from the district were to South Delhi, South-West Delhi and North-East Delhi, and to Lucknow, Uttar Pradesh.
- HIV awareness and RTI/STI awareness rates among women were 53.8% and 29.4% respectively (DLHS-III).
- Of the 27 PLHIV registered at the Anti-Retroviral therapy (ART) center in 2009, 70% were on ART, 13% were illiterate or only had a primary school education, and 48% were married.
- Although the numbers were small, the fact that routes of transmission were to the tune of 11% through needles/syringes and 15% through
 parental route, points to IDU and spousal transmission.
- In 2009 one FSW TI and STI clinic were established.

- Need to establish mechanism for regular monitoring of PPTCT and Blood Bank data.
- Awareness rates about HIV being so low, some efforts need to be invested in mass and mid media approaches to awareness building on HIV AIDS.
- Increase in STI episodes treated and higher positivity from previous years indicates to a need for stepping up efforts with HRGs and vulnerable
 groups to contain the infection and keep it at its current levels.
- For better understanding of the dynamics of HIV transmission among FSW, MSM and IDU, establishment of mechanisms for analysis of ICTC/ PPTCT and ART data or initiation of HRG sites for HIV Sentinel Surveillance (HSS) could be considered.
- ANC coverage is dismally low, and through some campaigns and mass or mid media, there should be an effort to improve it.

2010

2009

2008

6887

1613

1271

1089

200

9

Lucknow, Uttar Pradesh

North East Delhi

North West Delhi

South Delhi

South West Delhi

Intra-district 3227

Intra-state

Inter-state

Overall 10417

4391 3.71

2799

migration % of male pop. % of total migration

No. out-

2.37

8.81 100

Male Migration, 2001 Census

30.98 2.73

42.15

26.87

Top districts for inter-state out-migration

Bageshwar, Uttarakhand

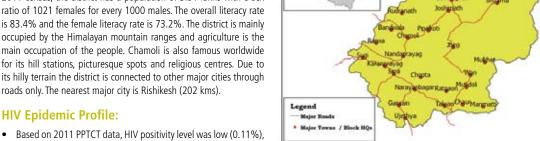
				Levels all	Cours								Amile
		2004	2005	2006	2007	2008	2009	2010	2011		HRG Size		
CINA COLL	ЪРФ										W.O.J.	VVCVV	2
HSS-ANC	NT⁴	-	-	-		-					LSVV	MSM	<u> </u>
DDTCT	Ы					*	*	*	0	Size Est.	090	C	90
	₽					*	*	*	1056	(Mapping, 2007)	700	70	<u> </u>
0	Ы	*	*	*	0.22	0	0.10			% Total HRG	73.86	77.71	11 36
DIOUG DATIK	IN	*	*	*	901	917	978			2000	73.00	/ / 	-
OED 23H	ЬР	-	-	-		-				% Total Pon	0.10	0.00	0 0
UIS-SCH	N									/0 local op:	5	20:0	ś
741.00	Ы									Programme Target	-		
WC1-CCH	Ā									Programme	250		
1 ICC	Ы					,				Coverage	230		
INCINI-CCL	Þ										-	Kothi-NA:	Daily
	Ы									Typology	Home based-NA;		Injectors-
193-ID0	Þ									:	Stroot base-IVA;		Ž
-1-84 OEDI	Ы		*	*	1.79	*	*	1.80	0.33		Alleet Dased-IVA	decker-NA	=
ICIC Male	M		*	*	503	*	*	557	3357	% < 75 vrs			
- I	Ы		*	*	1.15	*	*	1.13	0.65	% Marriod			ļ
ICIC remaie	Þ		*	*	269	*	*	531	2474	/o ividilied	ITQ/IT3	<u> </u>	
J. G. C.	М		*	*	1.42	*	1.83	1.47	0.64		NVIIC	0000	0100
ICIC Keterred	Þ		*	*	1128	*	710	1088	3451			6007	2010
ICTC Direct	Ы		*	*	1.38	*	0		0.21	No. episodes treated			501
Walk-in	Þ		*	*	72	*	11		2380	% syphilis pos.	-		0
			Ы	HIV Profile	e, 2009								Programme Re
	0	_	% III	%	% Widowed or	lor				No.	2004	2002	2006
	% On AKI	% 15-24	Prim. Edu.	Ž	divorced					FSWTIs	-		
ART(23)	70	0	13	48	0					MSM TIs	-		
DLN(NA)	-	-		-						IDUTIs			
	ž	Route of HIV Transmission, ICTC 201	ransmission	, ICTC 2011						Comp. TIs			
	Hetero-	Homo-	Blood	Needle/	Parent to	Unknown	, un			ICTCs	-	1	1
O/ of Total Day	sexnal	sexnal		syringe			T			Total tested ⁵	-		
% of fotal ros.	74.07	0	0	11.11	14.81	0				Blood Banks	-	-	
			BIG	ock-Level	Details		-			STI clinics	-		
No HRG- FSW									١.	ART centers	-	-	
N- IIDC BACKA										Link ART centers	-		
NO. HKG- MSM										PLHIV Networks		-	
No. HRG- IDU										Red ribbon clubs			
% Positive, ICTC			,					•		Comm. care centers	-	-	
										Drop-in-centers	-		
DECLER OF THE PROPERTY OF THE													

* Inadequate sample size; - Data not available; 1 2011 Census; 2 Source: DLHS III; 3 Data presented only for years where sample size is valid (HSS-ANC: 300 tested, HSS-HRG/STD: 187 tested, ICTC: 600 tested, PPTCT and 8B: 900 tested); 4 PP = percent positive, NT = number tested; 5 General clients and pregnant women

Chamoli, Uttarakhand

Background:

Chamoli district is the second largest district of the state which is situated in the North-Eastern region of Uttarkhand. The district shares its northern boundary with Tibet whereas it is bound by Uttarkashi in the North-West, Rudra Prayag in the West, Almora in the South and Tehri Garhwal in the South-West. According to the 2011 census, the district has a population of 3.91 lakhs with a sex ratio of 1021 females for every 1000 males. The overall literacy rate is 83.4% and the female literacy rate is 73.2%. The district is mainly occupied by the Himalayan mountain ranges and agriculture is the main occupation of the people. Chamoli is also famous worldwide for its hill stations, picturesque spots and religious centres. Due to its hilly terrain the district is connected to other major cities through roads only. The nearest major city is Rishikesh (202 kms).



Chamoli District

- although a trend analysis was not done due to lack of adequate sample for previous years.
- HIV positivity among ICTC attendees was low among direct walk-in (1.02%) and referred (0.6%) clients, and also among males (0.51%) and female (0.85%) clients in 2011. Positivity levels showed an overall stable trend among attendees.
- As per mapping conducted in 2007, FSW (370, 75.8% of total HRG) was the largest HRG in the district, followed by MSM (78, 16% of total HRG) and IDU (40, 8.2% of total HRG).
- Syphilis positivity in 2011 was zero, similar to 2008-2010.
- As per the 2001 Census, 12.9% of the male population were migrants; 24.2% of them migrated to other states and 29.5% migrated to other districts within the state.
- The top two districts for interstate out migration were South Delhi and South West Delhi.
- HIV awareness and RTI/STI awareness rates among women were 67.8% and 32.6% respectively (DLHS-III).
- Of the 45 PLHIV registered at the Anti-retroviral Therapy (ART) center in 2009, 2% were 15-24 years of age, 73% were on ART, 44% were illiterate or only had a primary school education, 49% were widowed or divorced and 4% were married.
- Parent to child transmission rate of HIV was high at 17.7% in 2011.
- The number of ICTCs and red ribbon clubs have been gradually increasing.

- Focus on setting mechanisms for regular monitoring of Programme data for PPTCT and Blood Banks.
- Strengthen outreach programmes among migrant population especially at Indo-Tibetan border.
- There is a need to understand better, the dynamics of HIV transmission among MSM and IDU, either through initiation of HRG sites for HIV Sentinel Surveillance (HSS) or further analysis of ICTC/PPTCT and ART data.
- Parent to child transmission rates were high- more needs to be done to understand the profile of these attendees, through in depth analysis of ICTC and ART data.
- Since the largest HRG is FSW, better assessment of the size and profile of client populations, including migrants, will improve the understanding of district vulnerabilities.

2010

2009

2008

2007

0 2006

2005

2011 5391

2010

2009

3562

3318

3153

3308

584

173

6

9

Ghaziabad, Uttar Pradesh

Pashchim Champaran, Chandigarh

South West Delhi

> South Delhi

Daily Injectors-NA; Non daily injectors-NA

Kothi-NA; Panthi-NA; Double decker-NA Bihar

Chamoli, Uttarakhand

District Population: 3,91,114 (3.8% of UK Population); Female Literacy': 73.2%; ANC Utilization?·42.5%

Intradistrict 10956

Intrastate

Inter-state

Overall

UDI 40

MSM

7015

12.96

No. outmigration % of male

8.20

15.98

78

0.02

Male Migration, 2001 Census

5.99

29.58

24.22

% of total migration

3.14

Top districts for inter-state out-migration

		2004	2005	2006	2007	2008	2009	2010	2011		HRG
JIVV JJII	⊳dd		-								FCW
HSS-AINC	NT⁴										4461
DDTCT	Ы					*	*	*	0.11	Size Est.	370
	N					*	*	*	924	(Mapping, 2007)	
Jacob Coold	Ы								*	% Total HRG	75.82
DIOCU DAIIN	N				,				*		
MS-23H	ЬР			0	0	0.47		0.40		% Total Pop.	0.09
U152-5511	M			250	202	249		250		Programmo Target	
חכם במייי	ЬР		-							Programme larger	
N53-F3W	NT	-	-	-	-					Coverage	300
HCC MACAA	ద				,					200	Home
INCINI-CCII	N										based-
141 551	Ы										27.38%;
UZI-SCH	N									Typology	Brothe
CTC Mala	ЬР		*	*	0.19	90.0	0.33	0.29	0.51		based-0%;
ICIC Male	IN		*	*	1561	1564	1207	1746	1576		Street
ICTC Famala	ЬР		*	*	0.17	0.34	1.58	0.65	0.85		-Daspor
ICIC remale	N		*	*	1747	1174	443	191	1062	% ~75 vrc	12.02.70
F	Ы		*	*	0.19	0.01	0.01	0.17	09:0	% Married	9137
ICIC Kererred	IN		*	*	3223	2619	3609	2291	2344	2010	0:10
ICTC Direct	Ы		*	*	0	2.52	1.47	2.70	1.02		2008
Walk-in	IN		*	*	98	119	272	222	294	No anicodes treated	L
			PLHI	IV Profile,	2009					% Syphilis pos.	
	% On ART	% 15-24	% III.,		% Widowed or	d or					
			Prim. Edu.	Š	divorced					No.	2004
ART(45)	73	2	44	4	49					FSW TIs	-
DLN(NA)										MSM TIS	•
	Ro	ute of HIV Ir	Route of HIV Transmission, ICTC 201	ICTC 2011			T			IDUTIS	•
	Hetero- sexual	Homo- sexual	Blood	Needle/ Syringe	Parent to Child	Unknown	Ę			Comp. TIs	, -
% of Total Pos. (N=17)	76.47	0	0	0	17.65	5.88				Total tectod ⁵	
			Bloc	k-Level De	etails					Blood Banks	-
No. HRG- FSW	Jasoli, 197	Ghat, 69	Joshimath,							STI dinics	'
			0/							ART centers	
No. HRG- MSM										Link ART centers	•
No HRG- IDII										PLHIV Networks	'
20.00										Red ribbon clubs	•
% Positive, ICTC										Comm. care centers	'
% Postitive DDTCT										Dron-in-centers	
% POSITIVE PE											

* Inadequate sample size; - Data not available; 1 2011 Census; 2 Source: DLHS III; 3 Data presented only for years where sample size is valid (HSS-ANC: 300 tested, HSS-HRG/STD: 187 tested, ICTC: 600 tested, PPTCT and BB: 900 tested); 4 PP = percent positive, NT = number tested; 5 General clients and pregnant women

Champawat, Uttarakhand

Background:

Champawat district is the part of eastern Kumaon division and is bound by Pithoragarh in the North, Udham Singh Nagar in South, and Nainital in West. District also shares its eastern border with Nepal which gives it importance from the defense point of view. According to Census 2011, the district has a population of 2.59 lakhs with a sex ratio of 981 females per 1000 males and an overall literacy rate of 80.7% out of which female literacy rate is 68.8%. The economy of the district is based on agriculture and to some extent on minor forest products. Champawat is known for its beautiful architecture and carved temples. It is a beautiful town with breathtaking landscapes and terraced fields making it a perfect tourist spot. The nearest railway station is 75kms away from Champawat and is well connected to urban and semi urban towns through roadways.

HIV Epidemic Profile:

- The ANC prevalence as per HSS 2010 was 0% with a fluctuating trend. The 2011 PPTCT data showed a positivity of 0.08% with a stable to rising trend. No data from blood banks was available for studying other sources of HIV levels in the district.
- HIV positivity among ICTC attendees was low among referred (1.13%, 2011) and zero amongst direct walk-in clients in 2011. Male clients had a low positivity of 1.24% and females, 0.27% in 2011. There was an overall stable trend among the ICTC attendees.
- Syphilis positivity in 2011 was 1.77% with 1409 episodes of syphilis treated, as opposed to 69 episodes treated in 2010.
- As per mapping conducted in 2007, FSW (250, 54.7% of total HRG) was the largest HRG in the district, followed by IDU (150, 32.8% of total HRG) and MSM (57, 12.4% of total HRG).
- As per the 2001 Census, 7.6% of the male population were migrants; 20.8% of them migrated to other states and 30.7% migrated to other districts within the state.
- The top two out-of-state migration destinations were South and North West Delhi.
- HIV awareness rates among women were 38.1% and RTI/STI awareness rates were 28.9% (DLHS-III).
- Of the 19 PLHIV registered at the Anti-Retroviral therapy (ART) center in 2009, 5% were 15-24 years of age, 79% were on ART, 37% were illiterate or only have a primary school education, 26% were married and 47% were widowed or divorced.
- Number of ICTCs and FSW TI increased gradually and Red ribbon clubs were established from 2009 onwards for the awareness about HIV/ AIDS in the youth.

- Focus outreach efforts on high risk groups, to increase uptake of testing services. The current update for direct walk-in clients has been consistently low, so community needs to be mobilized for testing.
- Strengthen outreach programmes around migrant populations; given low awareness rates among women, strategies such as mid to mass media could be employed.
- For better understanding the dynamics of HIV transmission among MSM and IDU, there is a need to set up HRG sites for HIV Sentinel Surveillance (HSS).
- Better assessment of the size and profile of FSW client populations, including migrants, will help in further understanding of district vulnerabilities.
- ANC coverage is dismally low, and through some campaigns through mass or mid media, there should be an effort to improve it.



2010

2009

2008

2007

2006

2005

1409

69 0

0 0

2010

2009

3083

2629

7272

2211

1986

96/

273

Champawat, Uttarakhand

District Population: 2,59,315 (2.5% of UK Population); Female Literacy¹: 68.8%; ANC Utilization²: 23.4%

Intra-district

Intra-state 2619

Overall

2 150

MSM

27

1781 1.61

8527 7.69 100

No. out-migration % of male % of total migration

00 00

32.82 90.0

12.47

0.02

Male Migration, 2001 Census Inter-state

48.40 3.72

30.71

20.89

Top districts for inter-state out-migration

South West

Delhi

North West Delhi

South Delhi

Non daily injectors-NA Injectors-NA;

Kothi-NA; Panthi-NA; Double decker-NA

Daily

8

	HRG Si	200	NSA		, 2007)		27.70		.do.	ne Target -	ne JEO		Home based-		Brott	Street hased-	NA NA		6 7			7	No. episodes treated 0	s pos. 0	-	2004				-	ed ⁵ -			ers -	centers -	tworks	- 20100
				Size Est.	(Mapping, 2007)	- t- E	% lotal HKG	- t- F	% lotal Pop.	Programme Target	Programme	Coverage		-	lypology			3/ 2C / %	0/ Marris	% intarried			No. episo	% Syphilis pos.	į	No.	MSM TIC	SI MICH	Comp Tk	ICTG	Total tested ⁵	Blood Banks	STI clinics	ART centers	Link ART centers	PLHIV Networks	
	2011			0.08	1297											1.24	1051	0.27	735	1.13	1324	0	462														
	2010	0	400	0	1093				-							0.38	1055	1.25	481	99.0	1205	09:0	331														
tion*: 23.4%	2009			0.10	1052	*	*									0.22	1343	09.0	332	0.45	5866									u,						,	
ANC Utiliza	2008	0.25	397	*	*	*	*	-	-							0.65	924	99.0	909	99.0	1523	0	7		- pa	_	П			Unknown	000	3					
Icy': 68.8%;	2007	0	400	,		*	*		-	-						0.32	945	0.10	1041	0.20	1986			, 2009	% Widowed	divoiced	47			Parent to Child	c	,	Details				
emale Litera	2006	0.25	400	,		*	*		-	-						0.97	506	0.17	290	0.38	962			HIV Profile		Married	26	,	1, ICTC 2011	Needle/ Svringe		,	Block-Level I				
opulation); F	2005					*	*	-	-							*	*	*	*	*	*	*	*	l4	% III., Prim.	Edu.	37	٠	Route of HIV Transmission, ICTC 201	Blood	0		<u>8</u>				
.5% of UK P	2004			,		*	*		-	-															NC 31 70		5		oute of HIV	Homo- sexual	6.67	999					
7) 518,867		PP⁴	NT4	PP	M	ЬР	IN	ЬP	NT	PP	M	РР	N	ЬР	N	Ы	¥	ЬР	N	ЬР	NT	ЬР	NT		TON NO.	% Off ARI	79			Hetero- sexual	73 33	55.57					
District Population: 2,59,315 (2.5% of UK Population); Female Literacy': 68.8%; ANC Utilization:: 23.4% HIVI evols and Trendes		JIVY-SSH	TISS-AIMC	DDTCT		Jaca boold	DIOUU DAIIK	LICE CITY	U15-55H	/// 2010	133-L3VV	MSW-SSH	INCINI CCI	HSS-IDII		ICTC Male	,	ICTC Female	, cligie	CTC Dafamad	CIC Nelelled	ICTC Direct	Walk-in				ART(19)	DLN(NA)			% of Total Pos.	(N=15)		No. HRG- FSW	No. HRG- MSM	No. HRG- IDU	

* inadequate sample size; - Data not available; 1 2011 Census; 2 Source: DLHS III; 3 Data presented only for years where sample size is valid (HSS-ANC; 300 tested, HSS-HRG/STD: 187 tested, ICTC; 600 tested, PPTCT and BB: 900 tested); * PP = percent positive, NI = number tested; * General clients and pregnant women

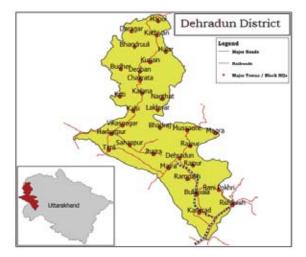
Dehradun, Uttarakhand

Background:

Dehradun, located in western part of the state, is the capital city of state of Uttarakhand. It has a population of around 17 lakhs with sex ratio of 906 females per thousand males (2011 Census). The literacy rate in the district is the highest in the state at 85.2% with a female literacy rate of 79.61%. Apart from being tourist destination for its rich natural landscape, the district is also known for many famous educational institutions. It is well connected by roads to major cities of the country. The major highways that pass through district are National Highway 72, 72A and 58.

HIV Epidemic Profile:

- HSS at ANC site recorded 0.49% HIV sero-positivity for 2010 indicating near moderate prevalence in the district with a stable to rising trend.
- As per 2011 PPTCT and Blood bank data, HIV positivity levels were low (0.10-0.11%). PPTCT had a stable to declining trend, whereas blood bank did not have enough data from previous years to do a trend analysis.



- HIV sero-positivity among ICTC clients in 2011 was low among male (2.2%), female (1.59%) clients and also among referred (1.85%) clients, with a stable to declining trend. However, HIV sero-positivity was near moderate among direct walk in clients (4.5%), with a stable to rising trend
- As per mapping estimates of 2007, there were around 1.9 thousands HRGs in district. FSWs (59%) were the largest HRGs in the district, followed by MSMs (22%) and IDUs (18%); Dehradun and Chakrata blocks were main locations of HRGs.
- Syphilis positivity rate among STI clinic attendees was 0.8% in 2011.
- As per the 2001 Census, 5.7% of the male population were out-migrants (around 39 thousands); almost half of them (51%) out-migrated to other states and another 16% out-migrated to other districts within the state.
- The top two out of state migration destinations were North West Delhi and South Delhi.
- HIV awareness rate was 72.3% among women and 95% of them had correct knowledge on HIV prevention steps (DLHS-III, 2007-08).
- RTI/STI awareness rate was 45.5% among women (DLHS-III, 2007-08).
- HIV Programme in districts had focused on a comprehensive package of prevention as well as treatment services. Prevention services were
 offered through 14 ICTCs, 4 TIs and 6 Blood Banks in district in 2011.
- One ART Centre, one link ART centre and one Community Care Centre were operational in the district to provide care, support and treatment services for HIV positives.
- Of the 390 PLHIV registered at the ART centre till 2009, 69% were on ART, 33% were illiterate or only had primary school education and 10% were married.

- The district has overall low epidemic. However, there are indications of moderate prevalence among people with high risk behaviors who need
 to be covered with HIV prevention programme.
- As direct walk in clients at ICTCs recorded moderate HIV sero-positivity during 2010-11, the district may have surveillance sites among HRGs.
 Besides, routine Programme data should be strengthened for completeness and accuracy and be examined further to understand the HIV transmission dynamics in district.
- Locations of male out migration should be mapped and covered with HIV prevention Programmes.
- IEC Programme may be strengthened in district, especially around tourist spots, locations of HRGs and major halt points on National and state highways to improve the HIV awareness level.

27637

23180

10649

6011

6

6

9

09

2011

2010

2009

2008

2007

2011 8687 0.79

2010 2715 1.70 2006

42.31

Sirmaur, Himachal Pradesh

Chandigarh

South West Delhi

South Delhi

North West Delhi

Daily Injectors-23.17%; Non daily injectors-28.19%

300

12719 Intra-district

6141

19864

38724

migration

No. out-

350

0.91

% of male pop. % of total migration

> 18.13 0.02

Inter-state Intra-state

Overall

 \Box

Male Migration, 2001 Census

32.85 1.88

15.86

51.30

100 5.73

Top districts for inter-state out-migration

Dehradun, Uttarakhand

District Population:16,98,560 (16.8% of UK Population); Female Literacy¹: 79.61 %; ANC Utilization²: 52.4%

	l	MACMA	MSM	440	2	22.80		0.03					300	2		Vothi EE 020/.	Panthi-23.75%:	Double decker-	20.42%			52.87	24.18		2009	0 17		2005	-				3315	9					
	HRG Size						+								a					_	4			STI/RTI	2008	3	,	2004	-				7 '	2					
		747.51	VVCI	1140		59.07		0.07			•		009	3	Home .	based-	Brothel	base-0%;	Street	based-	6.55%	16.27	89.88		Pod.	non													
				Size Est.	(Mapping, 2007)	% Total HRG		% Total Pop.		Programme	Target		Programme	Coverage			Tvpology	6				% <25 yrs.	% Married		Postoria of Oliver	% Synhilis nos	in different	No.	FSWTIs	MSM TIS	IDU TIs	Comp. TIs	Total tested ⁵	Blood Banks	STI clinics	ART centers	PI HIV Networks	Red ribbon clubs	
	2011			0.11	17374	0.10	41402									2.26	9289	1.59	6401	1.85	14839	4.47	851												,				
0/	2010	0.49	402	0.16	14305		-	0	249	-						2.51	8077	2.23	5255	2.20	12293	4.81	1039												,				
- 77	5000			0.13	11608											5.66	6763	1.99	4809	2.92	13065	2.91	1611						- N					1	,				
ם, אוער טנוווג	2008	0	400	0.13	8328			08.0	250	-						3.19	5014	2.62	3696	3.08	7473	2.18	1237		wed or				Unknown		1.92					١.			
rende3	2007	0	400	*	*		-	0.40	250	-	-			-	-	3.24	4752	2	5407	2.35	9749	8.05	410	6003	% Widowed or	2010			Parent to	Child	6.41	tails			,				
ellidie Liteld	2006	0	400					0.80	250							4.13	2711	1.97	3300	2.61	2777	11.11	234	V Profile, 2	%	10		, ICTC 2011	Needle/	Syringe	1.60	k-Level De			1				
HIV I	2005						-	2	250	-						4.67	1584	2.77	1731	2.77	2999	12.34	316	PLHIV	% III.,	33	3 .	Route of HIV Transmission, ICTC 2011	Blood		1.92	Bloc			,				
0 0 0 0 0	2004						-	1.20	250	-	-			-	-	-					-				% 15-24	v	,	oute of HIV	Homo-	sexnal	0.32		Dehradun,	244	NA,	Vikas	Nagar, 3		
20,700,00	Γ	PP⁴	NT4	Ы	IN	ЬР	LN	ЬР	IN	PP	IN	ЬР	¥	ЬР	IN	PP	M	Ы	M	Ы	MT	ЬР	N		% On ART	69		Ä	Hetero-	sexnal	87.82		Chakrata, Dehradun,	260	Dehradun, 244	Dehradun,	/57		
Distillet Population: 19,		0.14	HSS-ANC	TOTAG		Jacob Coole	DIOUU BAIIK	HCC.CTD	010-001	UCC ECIM	U33-F3W	11CE 14Ch4	INICINI-CCLI	100	UZI-SCH	ICTC Mala	ICIC Male	ICTC Female	רור בוומוב	ICTC Bofornod	ורור שבובוובת	ICTC Direct	Walk-in			ART (390.)	DLN (NA)				% of Total Pos.	(7) (-))	No HPG. ESW	NO. 1110-1200	No. HRG- MSM	No. HRG- IDU		No. PLHIV	

* Inadequate sample size: - Data not available: 1 2011 census; 2 Source: DLHS III; 3 Data presented only for years where sample size is valid (HSS-ANC; 300 tested, HSS-HRG/STD: 187 tested, ICTC; 600 tested, PPTCT and BB: 900 tested); 4 PP = percent positive, NT = number tested; 5 General clients and pregnant women

Haridwar, Uttrakhand

Background:

Haridwar district is situated in the south-western part of Uttarakhand. It has a population of 19.3 lakhs with a sex ratio 879 females for every thousand males with a female literacy rate of 65.96%, with an overall literacy rate of 74.62% (2011 Census). Haridwar has religious importance and is famous for tourism with numerous temples and tourist places. It is also known for educational institutes which attract numerous students and academicians from the country. Agriculture is the mainstay of this well irrigated district. Industrialization is encouraged in the district through State Industrial Development Corporation of Uttarakhand (SIDCUL) and many industrial giants have established their plants in district. Due to its religious importance Hindu pilgrims visit the holy places and attend the religious fairs in large numbers, therefore it is well connected through land transportation. The major highways that pass through the district are National Highway 58 and 74. The Haridwar Railway junction located in the district directly links major cities of the country with the district.



HIV Epidemic Profile:

- HSS at ANC site in the district indicated a low prevalence in 2010 (0.25%) with a rising trend.
- As per the 2011 PPTCT and Blood Bank data, HIV prevalence was low (0.11-0.21%). Positivity levels showed an inconsistent trend among the Blood Bank and a stable trend among PPTCT attendees.
- HSS at FSW site in district indicated a low epidemic among FSWs and near moderate epidemic among IDUs in 2010 (0.5% and 4.3% respectively).
- Based on the 2011 data, HIV positivity level among ICTC attendees was low among male (1.68%) and female (0.73%) clients, as well as among referred (0.72%) and direct walk-in (2.86%) clients. The positivity levels indicated an overall stable trend among attendees.
- As per mapping estimates of 2007, there were around 2200 HRGs in district. FSWs (42%) were the largest HRGs in the district, followed by MSMs (35%) and IDUs (23%).
- The syphilis positivity rate among STIs attendees in 2011 was 0%.
- As per the 2001 census, 3.47% of the male population were out migrants, 49.62% migrated to other states and 15.65% migrated to other districts within the state. The top two out of state migration destinations were Saharanpur, Uttar Pradesh and Yamuna nagar, Haryana.
- HIV awareness rate was 60.6% and RTI/STI awareness rate was 35.1% among women (DLHS-III, 2007-08).
- There were seven ICTCs, four TI's and five Blood Banks operational in the district in 2011.
- One Link ART Centre was operational since 2009 in district to facilitate provision of ART drugs for HIV positives.
- Of the 140 PLHIV registered at the Anti-Retroviral Therapy (ART) centre during 2009, 62% were on ART, 10% were between the ages of 15-24 and 26% were either illiterate or had only a primary school education.

- The district may continue to focus on HIV prevention programme, especially among people with high risk behavior.
- IEC programme may be strengthened in district, especially around industrial areas, tourist spots, railway stations and major halt points on National and state highways to improve the HIV awareness level.
- In the absence of surveillance sites, routine programme data from district need to be strengthen for completeness and accuracy, and should be examined regularly to understand HIV transmission dynamics in district.
- Considering high rate of HIV transmission through homo-sexual route ICTC and ART data need in depth analysis.

8864

11497

7832

52

52

19

2011

2010

2009

2008

Muzaffarnagar, Uttar Pradesh

Ghaziabad, Uttar Pradesh

Chandigarh

Yamunanagar,

Saharanpur,

Haryana

Uttar

Haridwar, Uttrakhand

Intra-district

Intra-state

Inter-state

Overall

Male Migration, 2001 Census

9327

13326

26855

No. out-migration % of male

3.47 9

34.73

15.68

49.62

pop. % of total migration

Top districts for inter-state out-migration

																								2011	15142	0	Proc	2007	П		Ţ		2	6534	, ,	١.		П			١.	Ī.
			nd		200		23.04		0.03			000	300		Daily	Injectors-	Non daily	injectors-	4.45%		31.88	14.86	H	+		\vdash		Н				+	+	+	+	ľ		H				
		ŀ	_	+	_	t		+		F										+	(")	7	F	2010	5972	0		2006	Ľ	1	_	-	_	1386			Ľ	'	_		Ľ	Ľ
		ze	MSM		760		35.02		0.04		•	000	400		Kothi-NA;	Pant	Double	decker-			'	_	STI/RTI	5009	7736	0.40		2005	٠			-	- !	10/4			٠	٠	٠			
		HKG Size	FSW		910		41.94		0.05			000	000	Home	based-	100%;	pased-	0%;	Street	pased-0%	6.70	97.40	ST	2008	2772	0		2004		٠		-	-	. ~	, ,				-			
					Size Est.	(iviapping, 2007)	% Total HRG		% Total Pop.	Programme	Target	Programme	Coverage			Timelone	ypology				% <25 yrs.	% Married			No. episodes treated	% Syphilis pos.		No.	FSWTIs	MSM TIS	IDU TIs	Comp. TIs	ICTCs	lotal tested ⁵	STI clinics	ART centers	Link ART centers	PLHIV Networks	Red ribbon clubs	Comm. care centers	Drop-in-centers	Condom outlets
_			_						_					1																							_	_				
		2011			0.11	7200	0.21	9640									1.68	3564	0.73	2050	0.72	4007	2.86	1607																,		
0/0		2010	0.25	799	0.10	4874				-	0.48	506			4.32	208	1.66	2414	0.46	1516	0.79	2895	2.32	1035																		
IZauoii". 5 i		5002			0.11	6425	0.11	31976									1.54	3267	97.0	1805	1	5179	1.84	1197																,		
470, AINC UI		2008	0.13	799	0.16	3655	0.12	27084		-		-					1.28	2492	0.36	1685	0.74	2849	1.28	1328								Inknown		0	-							
el dcy . 03.9	Trends ³	2007	0	800			0.51	24140		-		-					09.0	3654	0.24	2880	0.36	6431	5.8	103	, 2009	% Widowad	or Or	divorced	38			Parent to	Child	5.33	ptails	,			,			
, remain Life	Levels and	5006	0.25	800			0.27	19078		-		-					1.91	786	0.83	009	0.76	1319	14.3	29	HIV Profile	%	Married		1		TC 2011	Needle/	Syringe	10.67	rck-I evel D	,						
Populations	All	2005	0	397			0.13	13756		-		-					1.16	947	5.51	127	1.21	827	3.2	247	PL	% III Prim	Fdii	i	56		Route of HIV Transmission, ICTC 2011	Rlood	200	1.33	Ble	ſ.						
19 70 UI UNE		2004	0	400			0.09	13032				-						-					-				% 15-24		10		e of HIV Trar	Homo/	Bisexual	22.67	-					-		
1: 13,21,0231			PP ⁴	NT⁴	ЬР	IN	ЬР	N	ЬР	IN	ЬР	IN	ЬР	F	ЬР	N	ЬР	NT	ЬР	M	ЬР	M	ЬР	IN			% On ART		62		Rout	Hotorocoviial	DO COLOR	09		Haridwar 642	1					
District Population: 19,27,029 (19% of UKD Population); remale Literacy: 65.94%; AIVC Utilization: 31.0%			JIN O JOH	7812-551	TOTAL		71100	Diood bdrik	GE CO	UIS-SCH	7813 3311	N95-150V	ICC MACNA	MSM-SSH		001-881	ICTC Mala	ורור ואומוב	ICTC Fomala	ורור נפווומופ	LOTO Poforcod	ורור אבובוובת	ICTC Direct	Walk-in					ART (140)	DLN (NA)			\rightarrow	% of lotal Pos.	,	No HRG- FSW	_	No. HKG- MSM	No. HRG- IDU	% Positive,	% Positive,	PPTCT

* Inadequate sample size; - Data not available; 1 2011 Census; 2 Source: DLHS III; 3 Data presented only for years where sample size is valid (HSS-ANC: 300 tested, HSS-HRG/STD: 187 tested, ICTC: 600 tested, PTCT and BB: 900 tested); 4 PP = percent positive, NT = number tested; 5 General clients and pregnant women

Nainital, Uttarakhand

Background:

Nainital is a district situated in the southern part of Uttarakhand. It has a population of 9.56 lakhs with a sex ratio of 933 females per thousand males with a female literacy rate of 78.21%. Overall literacy rate of 84.85% (2011 Census). The economy of Nainital district mainly depends on agriculture. Nainital is also known as Lake District of India and is a major tourist destination. The district is well connected through a network of road and railways. The major highway that passes through district is national highway 78.

HIV Epidemic Profile:

- HIV positivity level was near high (0.99%) at HSS-ANC site according to 2010 data with a stable trend, up to 2008 and a steep surge in 2010.
- Based on 2011 PPTCT and Blood Bank data, HIV positivity levels were low (0.05-0.11%), with stable to declining trend.
- As per the 2011 data, HIV positivity level among ICTC clients
 was low among male (1.54%) and female (1.13%) clients and
 also among referred (1.02%) clients with stable to declining trend. Positivity level was moderate among direct walk-in (6.56%) with a stable
 trend.
- HSS at FSWs site recorded a very low HIV sero-positivity in the group in 2010 (0.40%).
- As per mapping estimates of 2007, there were approximately 1800 HRGs in the district. FSWs (54%) were the largest HRGs in the district, followed by IDUs (24%) and MSMs (21%).
- Syphilis positivity rate among STI clinic attendees in 2011 was 0%.
- As per the 2001 Census, 8.3% of the male population were out-migrants (around 33.5 thousands); almost half of them (47%) out-migrated to other states and another 19% out-migrated to other districts within the state. The top two out of migration destinations were South and South West Delhi.
- HIV awareness rate was 66% among women and 97% of them had correct knowledge on HIV AIDS (DLHS-III, 2007-08).
- RTI/STI awareness rate was 29% among women (DLHS-III, 2007-08).
- HIV programme in districts had focused on a comprehensive package of prevention as well as treatment services. Prevention services were
 offered through ten ICTCs, four TI's and three Blood Banks in district in 2011.
- One ART Centre and one Community Care Centre was operational in the district from 2011 to provide ART drugs for HIV positives.

- As HSS among FSWs showed very low prevalence while direct walk in clients were showing moderate HIV sero-positivity, data from ICTCs shall
 be further examined to understand the HIV transmission dynamics in district.
- The district may continue to focus on HIV prevention programme, especially among people with high risk behavior.
- Locations of male out migration shall be mapped and covered with HIV prevention programmes.
- IEC programme may be strengthened in district, especially around tourist spots, locations of HRGs and major halt points on National and state highways to improve the HIV awareness level.



2010

2009

2008

2007

2006

5386

1330 2009 0.97 2005

2011 0

2010 2280

37.75

15681 10

12191

9739

9478

8695

3319

1532

22

2

North West Delhi

West Delhi

Ghaziabad, Uttar Pradesh

South West Delhi

South Delhi

Daily Injectors-6.95%; Non daily injectors-23.18%

decker-NA Kothi-NA; Panthi-NA; Double

34.21 2.84

18.71

47.08

100 8.31

% of total migration

0.05

0.04

300

3.91

% of male

24.73

Top districts for inter-state out-migration

District Population: 9.55, 128 (9.4 % of UK Population): Female Literacy': 78, 2%: ANC Utilization²: 31.6%

Intra-district 11379

Intra-state

Inter-state

Overall 33261

MSM

6223 1.55

15659

No. out-migration

450 2

380

Male Migration, 2001 Census

		2004	2005	2006	2007	2008	2009	2010	2011		HRG Size
DIVO. ANIC	PP⁴	0	0	0	0	0		0.99			-
JAIN-CCI I	NT ⁴	413	400	800	800	800		803			PSW
DDICT	В					0.16	0.32	0.21	0.11	Size Est.	0
	N					3081	2776	3757	5374	(Mapping, 2007)	066
o poola	Ы	0	0.27	0.38	0.21	0.14	0.16		0.05		
DIOUU DAIIK	IN	1394	4377	5471	6048	6931	7311		14964	% Total HRG	54.40
GE 331	Ы			0	0	0.40		0			
UIS-SID	N			250	250	250		250		7 T-4-1	ç
7700 0011	Ы							0.40		% Iotal Pop.	o
H33-F3W	N	٠						250		Programme Target	
11CC 14Ch4	Ы									Programme Coverage	009
INSO-IVISIVI	N										Home
1141 3311	Ы										based-100%;
HSS-IDU	N		,							Typology	Brothel
- I- P4 - I-	8		3.92	3.28	1.28	1.57	2.23	2.87	1.54		based-0%;
ICIC Male	N		536	762	3518	2417	2957	3874	5528		Street
CTC Family	ЬР		06:0	0.51	0.56	0.53	0.73	1.34	1.13	:	%n-naspg
ICIC remale	N	٠	966	2557	5177	3980	4006	4560	4779	% <25 yrs.	21.92
Dofound	Ы		2.01	1.01	0.38	0.71	1.14	1.66	1.02	% Married	91.72
ICIC Releifed	N		1443	3263	8390	6033	8783	8119	2696		STI/RTI
ICTC Direct	ЬР		1.12	8.93	13.77	4.40	7.42	11.75	9:29		2008
Walk-in	LN		68	56	305	364	256	315	610	No. episodes treated	597
			PLH	IV Profile,	5008					% Syphilis pos.	0
	% On ART	% 15-24	% III., Prim Edu	% Married	% Widowed or	l or				:	
ABT (73)	67	_	7.7		45					No.	7007
DIN (NA)	à '	,		,	£ .	T				FSW TIs	-
(::::::::::::::::::::::::::::::::::::::	Ro	ute of HIV T	Route of HIV Transmission, ICTC 201	ICTC 2011		-				MSM TIs	•
	Hetero-	Homo-	-	Needle/	Parent to					IDU TIs	•
	sexnal	sexnal	Blood	Syringe	Child	Unknown	uv L			Comp. TIs	•
% of Total Pos.	8633	1 44	0	2 16	9.35	0.72				ICTCs	-
(N=139)	2000			_	200					Total tested ⁵	'
			Bloc	k-Level Details	etails					Blood Banks	2
No. HRG- FSW	Haldwani, 400	Lalkuan, 216		,	,		,			STI clinics	-
No HRG- MSM										ART centers	
		Kahul ki		e leiil						Link ART centers	-
No. HRG- IDU	Indra		Raipura, 47	Nagar,	Dharohar,					PLHIV Networks	-
	Nagar, 84	9			302					Red ribbon clubs	
% Positive, ICTC			,		-	,	,			Comm. care centers	-
										Drop-in-centers	
% Positive, PPTCT		,	,								

* Inadequate sample sizg. - Data not available, 1 2011 Census; 2 Source: DLHS III, 3 Data presented only for years where sample size is vaild (HSS-ANC: 300 tested, HSS-HRG/STD: 187 tested, ICTC: 600 tested, PPTCT and BB: 900 tested); *PP = percent positive, NT = number tested; 5 General clients and pregnant women

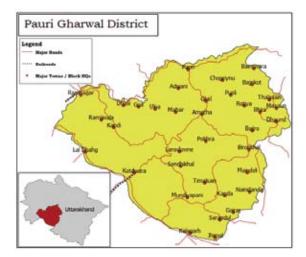
Pauri Garhwal, Uttarakhand

Background:

Pauri Garhwal, is a district in western part of Uttarakhand. It has a population of 6.86 lakhs with a sex ratio of 1103 females per thousands males with a female literacy of 73.26%. Overall literacy rate is 82.6% (2011 Census). Economy of the district is agriculture driven, however some large and small industries have recently been established. Still, employment opportunities are scarce which has contributed in migration of male population from the district to big cities like Delhi, Lucknow and Mumbai. The major highway that passes through the district is National Highway 58. It is connected through roadways to major towns and Cities.

HIV Epidemic Profile:

- HSS at ANC site had recorded zero HIV sero-positivity for all rounds since 2006 indicating low HIV epidemic in the district.
- Based on 2011 PPTCT and Blood Bank data, HIV positivity levels were low (0.10-0.18%) with a stable to declining trend for PPTCT and a stable to rising trend among Blood Bank attendees.



- HIV sero-positivity among ICTC clients in 2011 suggested low level among male (0.86%) and female (0.36%) clients, as well as among referred (0.57%) and direct walk-in (1.48%) clients with stable to declining trends.
- As per mapping estimates of 2007, there were around 550 HRGs in the district. FSWs (54%) were the largest HRG followed by MSMs (24%) and IDUs (22%).
- Syphilis positivity rate among STI clinic attendees in 2011 was 0.08%.
- HIV awareness rate was 67% among women and 96% of them had correct knowledge on HIV AIDS (DLHS-III, 2007-08).
- RTI/STI awareness rates was 30% among women (DLHS-III, 2007-08).
- There were nine ICTCs, one TIs and two Blood Banks operational in district in the 2011.
- Two Link ART Centers were operational in district in 2011 to facilitate provision of ART drugs for HIV positives..
- Of the 94 PLHIV registered at the Anti-Retroviral therapy (ART) center till 2009, 6% were 15-24 years of age, 77% were on ART and 32% were illiterate or only had primary school education.

- The district may continue to focus on HIV prevention programme, especially among people with high risk behavior.
- IEC programme may be strengthened in district, especially around tourist spots, locations of HRGs and major halt points on National and state highways to improve the HIV awareness level.
- In the absence of surveillance sites, routine programme data need to be strengthened for completeness and accuracy, and should be examined
 regularly to understand HIV transmission dynamics in the district.

2010

2009

2008

2007

2011 3212 0.08 10311

9284

7227

5602

Chandigarh East Delhi

Ghaziabad, Uttar Pradesh

South West Delhi

South Delhi

Pauri Garhwal, Uttarakhand

District Population: 6,86,527 (6.8% of UK Population); Female Literacy': 73.2 %; ANC Utilization²: 34.3%

Intra-district 18881

Intra-state 13348

Inter-state

Overall

38212

No. out-migration

Male Migration, 2001 Census

26.80

18.95

54.25 11.54

100

% of total migration

4.03

21.27 70441

> % of male pop.

Top districts for inter-state out-migration

District Oppdation, 0,00,227 (0,0 % of ON Oppdation), Telliais Literacy 3.5.2. %, ANY Othizador 3.4.3 % HIV Layers and Trends	0,00,027	NO 10 0/ 07	Lopuld worn,	Hinge Liver	ILY . 13.2 m	Alve Othing	J.F.C. 110llb	0/					W
		2004	2002	2006	2007	2008	5009	2010	2011		HRG Size	a	
0144	₽dd			0	0	0		0			70.00	MACAA	-
HSS-ANC	NT4	,		400	400	382		398			FSW	MSM	nnı
PDICI	Ы					0.34	0.10	0.08	0.10	Size Est.	293	129	120
rrici	IN	-	-	-		2615	3134	3674	4886	(Mapping, 2007)	222	3	-
Jacob Coold	ЬР	0	0.14	0.03	60:0	0.15	0.13		0.18			0	
DIOUU DAIIK	NT	2669	7293	10235	11663	11479	11606		2764	% lotal HKG	54.06	73.80	77.14
ULC CTD	ЬР	-	-	0	0	08'0		0					
U15-55H	IN			250	250	249		246		% Total Pop.	0.04	0.02	0.02
HSC-ESW/	ЬР									Programme Target			ľ
H33-F3VV	IN			-				-		Programme langer	'		1
LCC BACKA	ЬР									Coverage	300	09	80
INICINI-CCL	Ä											Kothi	
4	ЬР										Home based-	41.82%;	Daily
HSS-IDU	F									T. C.	60.66%;	Panthi-	Injector
-I-BA CE	ЬР	,	2.62	1.63	0.78	1.57	0.97	0.91	98.0	iypology	based-0%:	52.73%;	Non da
CIC Male	IN		797	962	2551	5676	3083	2956	3623	01	Street based-	Double	injector
CTC Lamala	ЬР		1.02	0.75	99.0	0.98	0.65	0.57	0.36		39.34%	Gecker-	¥.
CIC remaie	IN		683	1458	3051	1936	3067	3681	3627	% /75 yrc	19.3/	73.64	ľ
CTC Deferred	dd	-	0.45	0.90	0.70	1.19	1.12	0.65	0.57	% Marriad	50.74	40.02	_
CIC Releifed	IN		699	2011	5549	4301	7040	6344	0869) Mali lea	03.10 CTI/DTI		
CTC Direct	ЬР		3.91	2.47	1.89	3.22	0.30	2.39	1.48		7000	0000	0100
Walk-in	Ä		281	243	53	311	299	293	270	1	+	5007	1101
			Ы	HIV Profile	e, 2009					No. episodes treated	4	7/7	161
			% III Prim.	%	% Widowed or	d or			Ī	% Syphilis pos.	0	0	0.28
	% On AKI	% I2-7 4	Edu.	Σ	divorced								Prog
ART (94)	77	9	32	4	62					No.	2004	2005	2006
DLN (NA)										FSW TIs			
		Soute of HIV	Route of HIV Transmission, ICTC 201	, ICTC 2011						MSMTIs			
	Hetero-	Homo-	Blood	/elpeeN	۵.	Hnknown	Ş			IDU TIs			
	sexnal	sexna		Syringe	Child					Comp. TIs	,	,	
% of Total Pos. (N=44)	95.45	0	0	0	4.55	0				ICTCs	-	2	2
			BI	pck-Level	Details					Plood Banks	٠ ,	200	4C77
Wig Dati	Kotdwara,		00 20000113							STI clinics	7	7	7 '
VO. HNG- LOVV	101		oilliagai, oo							ART centers			
No. HRG- MSM		,				,	,	,	1	Link ART centers			
No HRG. IDII										PLHIV Networks			
NO. 1110-1100				'			'	'		Red ribbon clubs		,	,
% Positive, ICTC										Comm. care centers		-	
% Positive,										Drop-in-centers	-	-	
PPTCT										Condom outlets	,		

* Inadequate sample sizer - Data not available; 1 2011 Census; 2 Source: DLHS III; 3 Data presented only for years where sample size is valid (HSS-ANC: 300 tested, HSS-HRG/STD: 187 tested, ICTC: 600 tested, PPTCT and BB: 900 tested); * PP = percent positive, NT = number tested; * General clients and pregnant women

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Pithoragarh, Uttarakhand

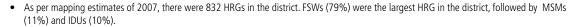
Background:

Pithoragarh is located in the easternmost part of Uttarakhand. It has a population of 4.85 lakhs with a sex ratio of 1021 females per thousand males with a female literacy rate of 72.97%. Overall literacy rate is 82.93% (2011 Census). Pithoragarh is a tourist place for its temples and ruined forts. It borders with China and therefore the illegal migration rate is quiet high in this district from the neighbouring country.

HIV Epidemic Profile:

- Based on 2010 HSS-ANC data, HIV positivity levels were low (0%) with a stable trend, except for a surge in 2008.
- According to the 2011 PPTCT and Blood Bank data HIV prevalence was low (0.04-0.12%) with a stable to declining trend.
- HIV sero-positivity among ICTC clients in 2011 suggested low level HIV epidemic among male (0.51%) and female (0.95%)

clients, and also among referred (0.55%) and direct walk-in (1.46%) clients. There was an overall declining trend.



- Syphilis positivity rate among STI clinic attendees in 2011 was 0%.
- As per the 2001 Census, 13% of the male population were out-migrants (around 29.5 thousands); 29% of them out-migrated to other states
 and another one third out-migrated to other districts within the state. Almost half of out of state migration was to Delhi followed by Uttar
 Pradesh and Maharastra.
- HIV awareness rate was 59% among women and 95% of them had correct knowledge on HIV AIDS (DLHS-III, 2007-08).
- RTI/STI awareness rate was 34% among women (DLHS-III, 2007-08).
- There were seven ICTCs and one Blood Bank operational in the district in 2011.
- One Link ART Centre was operational in district to facilitate provision of ART drugs for HIV positives.
- Of the 58 PLHIV registered at the District-level Network (DLN) till 2009, 5% were 15-24 years of age, 72% were on ART and 33% were illiterate or only had primary school education.

- The district may continue to focus on HIV prevention programme, especially among people with high risk behavior. Despite having around 800 HRGs, no TI was operational in the district during 2011. Mechanism need to be evolved to cover HRGs with prevention programme.
- IEC programme may be strengthened in district, especially around tourist spots, locations of HRGs and major halt points on National and state highways to improve the HIV awareness level.
- In the absence of HRG surveillance sites, routine programme data from district need to be strengthen for completeness and accuracy, and should be examined regularly to understand HIV transmission dynamics in district.
- Since HIV transmission from parent to child and through needle/syringes were high in-depth analysis of ICTC and ART data and necessary
 action is recommended.



Pithoragarh, Uttarakhand

District Population: 4,85,993 (4.8 % of UK Population); Female Literacy':72.9 %; ANC Utilization-: 29,4%	4,85,995 (4.0	% of UK Po	pulation); F	emale Litera	acy ¹ :72.9 %;	ANC Utiliza	tion*: 29.47	.0					William	Second Section 2					
		2004	2005	2006	2002	2008	2009	2010	2011		HRG Size	٩	III A	lei abili de		Male Min	Male Migration 2001 Census	Census	
	₽₽₽	0	0	0	0	0.75		0			74101		-			=		Intra-	1
HSS-ANC	NT⁴	369	400	400	400	399		399			LSVV	MSM	20			Overall	inter-state	state	Intra-district
TOTOG	ЬР					0	0.25	0.23	0.12	Size Est.	099	65	80		No. out-	29394	8635	0620	11139
- - -	IN		-			1121	1603	1717	1739	(Mapping, 2007)		1			migration				
Blood Bank	ЬР	*	*	*	0.10	0.15	0.22		0.04	% Total HRG	79.33	11.06	9.62		% of male	12.92	3.79	4.23	4.89
BIOOU BAILY	¥	*	*	*	696	1319	1838		2725					 	Dob.				
OTO SOIL	ЬР	-			-			-		% Total Pop.	0.14	0.02	0.02		% of total	100	29.38	32.73	37.90
U152-5511	M									1				T	T-T	The state of			
1100 0011	ЬР									Programme larget				Ţ	00	districts for	lop districts for inter-state out-migration	out-migra	ILION
MS3-F3W	IN	-		-						Programme	009		•						
400 A 001 L	ЬР									Coverage	Пото			T					
MSMI-SSH	Ħ										hasad-								
4	Ы										74.46%:	Kothi-NA:							
HSS-IDO	Ħ									Typology	Brothel	Panthi-NA;	=	-Ş-			Lucknow,		Mumbai
-1-44 OEO	Ы		*	*	2.05	*	3.02	0.88	0.51	3	based-0%;	Double	Non daily		Delhi	West	Uttar	West	(Suburban),
ICIC Male	¥		*	*	732	*	463	1248	1565		Street	decker-NA		NA A			lignesii		Malididalitid
o DECI	Ы		*	*	8.92	*	1.63	1.05	0.95		based-								
ור ור בפווומופ	N		*	*	157	*	1102	1140	1261	20, 70	25.54%			T		-			
ICTC Deferred	ЬР	-	*	*	2.94	*	3.35	0.89	0.55	% <25 yrs.	75.27			T					
ורור אפופוופת	Ħ		*	*	817	*	202	2258	2347	70 Mallieu	70.7	- LEGITIO	-	-					
ICTC Direct	ЬР		*	*	6.94	*	3.11	2.30	1.46		3000	2000	0100	1,000					
Walk-in	IN		*	*	72	*	481	130	479	bottom sologian old	2000	2005	0107	0200					
			PLH	IIV Profile,						No. episones il eaten	300	502	200	0/70					
			ll %	3	1	_				% syprills pos.	17.14	6.89	0.30	9					
	% On ART	% 15-24	Prim.	%	% Widowed or	o p							Progran	nme Respo	onse				_
	:		Edu.	Married	divorced					No.	2004	2005	2006	2007	2008	2009	2010	2011	
ART (58)	72	2	33	2	25					FSW IIS									
DLN (NA)										MSM IIs								•	_
	Ro	Route of HIV Transmission, ICTC 201	ansmission,	ICTC 2011						IDU TIS									
	Hetero-	Homo-	-	Needle/	Parent to					Comp. TIs								•	
	sexnal	sexnal	00019	Syringe	Child	UIIKIIOWII				ICTCs	-	-	-	-	3	n	m	7	
% of Total Pos.	ŝ	,	L		Ľ					Total tested ⁵		99	115	688	1500	3168	4105	4565	
(N=20)	?	>	n	2	<u>C</u>	>				Blood Banks	-	-	-	-	-	_	-	-	
			Blo	ck-Level D	etails					STI clinics								٠	
	Pithoragarh.									ART centers			-			-			
NO. HKG- FSW	514									Link ART centers	٠					-	-	-	
No. HRG- MSM				,			,			PLHIV Networks								•	
Jan Jan										Red ribbon clubs						9	7	7	
INO. FING- IDO										Comm. care centers									
% Positive, ICTC	,		,		,		,	,		Drop-in-centers		,						٠	
% Positive, PPTCT			,			,				Condom outlets									

* Inadequate sample size; - Data not available; 1 2011 Census; 2 Source: DLHS III; 3 Data presented only for years where sample size is valid (HSS-ANC: 300 tested, HSS-HRG/STD: 187 tested, ICTC: 600 tested, PPTCT and BB: 900 tested); 4 PP = percent positive, NT = number tested; 5 General clients and pregnant women

Rudraprayag, Uttarakhand

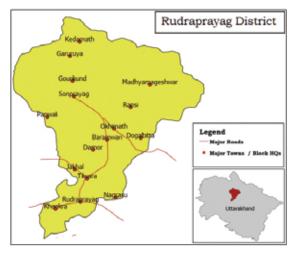
Background:

Rudraprayag is located in the northern part of Uttarakhand. It has a population of 2.36 lakhs with the sex ratio of 1120 females for every thousand males, female literacy rate at 71% and an overall literacy rate of 83% (Census, 2011). District, known for its several temples and other popular sites, is one of the main pilgrimage centres attracting a huge number of devotees from several parts of the country. Rudraprayag is well connected with other major cities of the state through roadways. The major highway that passes through the district is national highway 58.

HIV Epidemic Profile:

- The 2011 PPTCT data showed low (0.15%) HIV positivity levels.
 However, there was not enough data from previous years to conduct a trend analysis.
- Based on 2009 Blood Bank data, HIV prevalence was low (0.04%) with a stable trend.
- HIV sero-positivity among ICTC clients in 2011 suggested low level HIV epidemic among male (2.88%) and female (1.47%) clients, and among referred (1.60%) clients. However, slightly higher sero-positivity (3.4%) was recorded among direct walk in clients. Positivity level showed an increasing trend among male, female and referred clients.
- As per mapping estimates of 2007, there were approximately 250 HRGs in district. Almost two third of them were FSWs (66%) followed by MSMs (28%) and IDUs (6%).
- HIV awareness rate was 62% among women and 96% of them had correct knowledge on HIV AIDS (DLHS-III, 2007-08).
- Syphilis positivity rate among STI clinic attendees in 2011 was 0%.
- RTI/STI awareness rate was 30% among women (DLHS-III, 2007-08).
- HIV programme in districts had focused primarily on prevention with two ICTCs operational in district in 2011.
- One Link ART Centre was operational in district to facilitate provision of ART drugs for HIV positives.
- Of the 49 PLHIV registered at the Anti-Retroviral Therapy (ART) till 2009, 82% were on ART and 39% were illiterate or only had a primary school education.

- The district has low HIV epidemic so, the district may continue to focus on HIV prevention programme, especially among people with high risk helavior
- IEC programme may be strengthened in district, especially around tourist spots and major halt points on National and state highways to improve the HIV awareness level.
- In the absence of surveillance sites, routine programme data from district need to be strengthen for completeness and accuracy, and should be examined regularly to understand HIV transmission dynamics in district.
- As the route of transmission due to unknown causes was 20% in 2011. Probing should be done at ICTCs to access to exact route of transmission.



West Delhi

Intra-district 3869

39.50 3.60

Rudraprayag, Uttarakhand
Dsiric Pooulation: 236 657 (2.3% of UK Population): 57.3%

District Population: 2,36,857 (2.3% of UK Population); Female Literacy: 71%; ANC Utilization::37.3%	n: 2,36,857 (,	2.3% of UK	Population); F	on); Female Litera	acy ⁱ : 71%;	ANC Utilizat	ion*: 37.3%							oritificand W	lition				
		2007	2005	2006	3	2008	2000	2010	2011		HRG Size	ize			Call	Male M	Male Migration 2001 Census	01 Census	
	PP4	- 1		-	,002	- 2000	5002	0107	1107		WUL		2	Τ			and the second	2000	<u> </u>
HSS-ANC	NT⁴										WST	MSIM	ng l			Overall	inter-state	Intra-state	ij
T) Edd	ЬР					*	*	0.29	0.15	Size Est.	160	29	15		No. out-	9795	2205	3721	
5	Þ					*	*	1019	1329	(Mapping, 2007)				T	% of male	┸			+
Blood Bank	Ы	*	0.22	0	0.05	0	0.04		,	% Total HRG	66.12	27.69	6.20		pop.	9.12	2.05	3.46	
DIOOU DAILY	₽	*	912	1439	1975	1932	2289		,	i i		0			% of total	9		000	┡
015 CTD	Ы									% lotal Pop.	0.0	0.03	0.0		migration	001	75.57	37.99	~i
U15-55H	Þ									Programme					-	the state of the state of	***************************************		1
74.00	Ы									Target	-				_	op districts	ior inter-stat	lop districts for inter-state out-migration	5
MS2-F3W	Þ	,						,		Programme									
	Ы									Coverage									
HSS-MSM	Þ										Home		Daily	_					
4	Ы									Tymology	based-NA;	Kothi-NA;	드	-S-	South	4		Mumbai	
HSS-IDU	Þ										hasad-NA.	Double			West	Dalhi C	Chandigarh	(Suburban),	Wes
	В					1.15	*	1.61	2.88		Street	decker-NA			Delhi			Maharashtra	
ICIC Male	Þ					260	*	622	451		based-NA		Injectors-INA	¥.					
	8					1.32	*	1.76	1.47	% <25 yrs.									_
ICTC Female	Þ					456	*	569	815	% Married			•						_
	М			١.		1.26	1.18	1.75	1.60			STI/RTI							
ICTC Referred	E			١.		716	849	798	1002		2008	2009	2010	2011					
ICTC Direct	e-							1.53	3.41	No. episodes				490					
Walk-in	Þ							393	264	lreated % Symbilis nos				c					
			4	HIV Profil	e, 2009					o appinis pos.			Prod		osuouso				
	% On ART	% 15-24	% III., Prim.		% Widowed or	od or				No.	2004	2005	2006	2007	2008	5009	2010	2011	
		_	Edu.	Married	divorced	J				FSWTIs									
ART(49)	82	0	33	0	27					MSM TIs									
DLN(NA)	,	,			•					IDUTIS				١.					
		Route of HIV Transm	' Transmission	ission, ICTC 2011	1					Comp. TIs									
	Hetero-	Homo-	poola	Needle/	Parent to	a woodall	9			ICTG		1	-	-	2	2	2	2	
	sexnal	sexnal	noora	Syringe	Child					Total tested ⁵					920	688	2210	2595	
% of Total Pos.	89	_	_	c	o	00				Blood Banks				١.					
(N=25)	8	>	r	>	5	20				STI clinics									
			BI	Block-Level	Details					ART centers				١.					
No. HRG- FSW			,		,			,	,	Link ART centers		-					1	1	
No. HRG- MSM										PLHIV Networks	,						٠	•	
No HBG. IDII										Red ribbon clubs						4	7	7	
% Positive, ICTC									,	Comm. care centers									
% Positive,										Drop-in-centers									
PPTCT										Condom outlets				١.					

* Inadequate sample size; - Data not available; 1 2011 Census; 2 Source: DLHS III; 3 Data presented only for years where sample size is valid (HSS-ANC: 300 tested, HSS-HRG/STD: 187 tested, ICTC. 600 tested, PPTCT and BB: 900 tested); 4 PP = percent positive, NT = number tested; 5 General clients and pregnant women

Tehri Garhwal, Uttarakhand

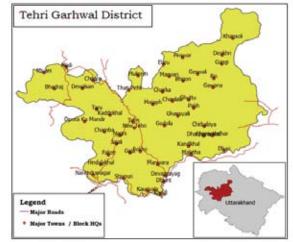
Background:

Tehri Garhwal, situated in the northern part of state of Uttarakhand, is one of the largest districts of state. According to census 2011, it has a population of 6.17 lakhs with sex ratio of 1078 females for every thousand males with a female literacy rate of 61.77%. Overall literacy rate of 75%. Tehri Garhwal has a sacred importance and is a famous tourist destination. However, it is one of the country's most backward districts and receives funds from the Backward Regions Grant Fund Programme (BRGF). The major highway that passes through the district is National Highway 58. It is connected through roadways to major towns and cities.

HIV Epidemic Profile:

- Based on data from PPTCT, the district appeared to had a low epidemic as HIV sero-positivity recorded at PPTCT during 2011 was low (0.09%). There was not enough data from previous years to determine a trend.
- Same was corroborated from HIV sero-positivity among ICTC
 clients in 2011 which recorded low HIV sero-positivity among male (0.44%) and female (0.44%) and also among referred (0.27%) clients.
 However, slightly higher sero-positivity (3.16%) was recorded among direct walk-in clients. There was a stable to declining trend among all attendees except direct walk-in which showed a surge in 2011.
- As per mapping estimates of 2007, there were around 340 HRGs in district. FSWs (60%) were the largest HRGs in the district, followed by MSMs (27%) and IDUs (13%).
- Syphilis positivity rate among the STI clinic attendees in 2011 was 0.48%.
- As per the 2001 Census, 12% of the male population (around 35 thousands) were out-migrants; more than one fourth (27%) of them out-migrated to other states like Delhi, Chandigarh and Bihar and another 35% out-migrated to other districts within the state.
- HIV awareness rate was 60.6% among women and 94% of them had correct knowledge on HIV AIDS (DLHS-III, 2007-08).
- RTI/STI awareness rate was 26% among women (DLHS-III, 2007-08).
- There were eight ICTCs, one TI's and one Blood Banks operational in district in 2011.
- One Link ART Centre was operational in district to facilitate provision of ART drugs for HIV positives.
- Of the 128 PLHIV registered at the ART center till 2009, 5% were 15-24 years of age, 68% were on ART and 44% were illiterate or had primary education.

- The district may continue to focus on HIV prevention programme, especially among people with high risk behavior and migrants.
- IEC programme may be strengthened in district, especially around tourist spots and major halt points on national and state highways to improve the HIV awareness level.
- In the absence of surveillance sites, routine programme data from district need to be strengthen for completeness and accuracy, and should be examined regularly to understand HIV transmission dynamics in district.



2010

2009

2008

2006

2011 0.48 2007

0.17 2010

2787

1217

1861

1351

1040

240

3

6

Mumbai (Suburban), Maharashtra

South West Delhi

Purnia, Bihar

Chandigarh

South Delhi

Daily Injectors-NA; Non daily injectors-NA

Intra-district 13178

Intra-state 12243

Inter-state

Overall

2 45

9574

34995

No. out-migration

11.87 9

12.86 0.01

% of male pop. % of total migration

Male Migration, 2001 Census

37.66 4.47

34.98

27.36

Top districts for inter-state out-migration

Tehri Garhwal, Uttarakhand

: 33.6.%	
ization²: 3	
, ANC Util	
1: 61.7%; /	
Literacy	
; Female	
Population)	
1% of UK	
16,409 (6.1%	
ulation: 6,	
istrict Pop	

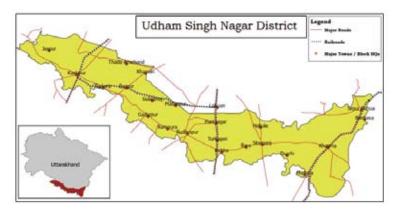
					1						10 0 011	
		2004	2005	2006	2007	2008	5009	2010	2011		HRG Size	
JIV JOH	PP⁴	-		-	-						FSW	MSM
1133-AIAC	NT⁴											
DDTCT	ЬР	-	-	-	-	*	*	*	0.09	Size Est.	210	95
-	IN	-			-	*	*	*	1201	(Mapping, 2007)		
Jacob Doold	ЬР	-	-	-	-	-	-	-		% IOTAI HKG	60	27 14
DIOUU DAIIK	IN										3	1.73
9	ЬР		0	0.40	0	0		0		% Total Pop.		
U15-55H	N		225	250	250	250		250			0.03	0.02
74101101	ЬР									Programme Target		
NS2-15W	Ā									Programme	010	
100 Mgb M	ЬР									Coverage	720	
MSS-IVISIVI	IN									Typology	Home	
141	ЬР										pased-	Kothi-NA:
001-881	N										100%;	Panthi-NA;
- F 1 - F 1 - F - F - F - F - F - F - F	ЬР		*	*	0.41	0.42	0.92	1.68	0.44		Brotnel	Double
ICIC Male	F		*	*	485	711	761	417	905		Street	decker-N
	ЬР		*	*	0	3.72	98.0	0.78	0.44		based-0%	
ICIC remaie	F		*	*	555	323	465	258	684	% <25 yrs.	14.23	
CTC Bafamad	ЬР		*	*	0.12	1.24	1.24	1.47	0.27	% Married	6.32	
LIC Releifed	IN		*	*	804	724	1291	614	1491		STI	STI/RTI
ICTC Direct	ЬР		*	*	0.42	1.94	0.36	0	3.16		2008	2009
Walk-in	IN		*	*	236	310	278	61	95	No. episodes treated		593
			PL	HIV Profile	, 2009					% Syphilis pos.	0.29	0
	% On ART	% 15-24	% III., Prim. Edu.	% Married	% Widowed divorced	lor				No.	2004	2005
ART(128)	89	5	44	2	53					FSWTIs	-	
DLN(NA)										MSM TIs	-	
	2	oute of HIV	Route of HIV Transmission, ICTC 2011	, ICTC 2011						IDU TIs		
	Hetero-	Homo-	Blood	Needle/	Parent to	Unknown	Ę			Comp. TIs		
!	sexnal	sexnal		Syringe	Child					ICICS T-t-1+-1-15	-	- 6
% of lotal Pos.	71.43	0	0	0	0	28.57				Diad Parks		322
(N=V)										DIOUU DAIIKS	-	-
			ğ	ock-Level I	Details					SII clinics		
No. HRG- FSW										ARI centers		
No. HRG- MSM	-									Link ARI centers		
No. HRG- IDU										Red ribbon clubs		. .
% Positive, ICTC										Comm. care centers		١.
% Positive,										Drop-in-centers		

* Inadequate sample size; - Data not available; 12011 Census; 20ource: DLHS III; 3 Data presented only for years where sample size is valid (HSS-ANC: 300 tested, HSS-HRG/STD: 187 tested, ICTC: 600 tested, PPTCT and BB: 900 tested); 4 PP = percent positive, NT = number tested; 5 General clients and pregnant women

Udham Singh Nagar, Uttarakhand

Background:

Udham Singh Nagar is located in the southern region of Uttarakhand. According to 2011 census, district has a population of 16.48 lakhs with sex ratio of 919 females for every thousand males, female literacy rate of 65.73% and an overall literacy rate of 74%. The district is endowed with very fertile land and hence the district economy is primarily agrarian. It is also an industrial district and attracts labourers from neighbouring district. The major highways that pass through district are National Highway 74 and 87. Rudrapur is the district headquarters, which is well connected to major cities like Delhi,



Lucknow and Mumbai through road and railway transports.

HIV Epidemic Profile:

- HIV prevalence among general population has remained stable at moderate levels as HIV sero-positivity at ANC HSS sites ranged from 0.500.75% during 2006-10. However, 2011 data from PPTCT and Blood Banks indicated low HIV sero-positivity (0.10-0.13%) with a rising trend
 among PPTCT. However there was not enough previous data from Blood Bank to determine a trend.
- HIV sero-positivity among ICTC clients in 2011 suggested low level HIV positivity among male (1.81%) and female (0.93%) clients, as well as among referred (1.34%) and direct walk-in (2.08%) clients, with stable to rising trend.
- As per mapping estimates of 2007, there were around 2.5 thousand HRGs in the district. FSWs (50.20%) were the largest HRGs in the district, followed by IDUs (28.34%) and MSMs (21.46%). Most of HRGs were mapped in Rudrapur, Kichha and Bajpur blocks of the district.
- As per the 2001 Census, 3.2% of the male population (around 21 thousands) were out- migrants; more than one fourth (28%) of them out-migrated to other states and another 17% out-migrated to other districts within the state. Almost three fourth of out of state migration was to Uttar Pradesh followed by Delhi. Bareily, Moradabad and Rampur districts in Uttar Pradesh were top three destination districts for out of state migration from Udham Singh Nagar.
- HIV awareness rate was 62.2% and RTI/STI awareness rate was 27.9% among women (DLHS-III, 2007-08).
- There were eight ICTCs, seven TIs (one FSW, three IDUs and three core-composite) and two Blood Banks operational in district in 2011.
- One Link ART Centre was operational in district to facilitate provision of ART drugs for HIV positives in 2011.
- Of the 84 PLHIV registered at the Anti-Retroviral Therapy (ART) center till 2009, 10% were 15-24 years of age, 51% were on ART and 31% were illiterate or had primary education.

- The district has low to moderate and stable HIV epidemic with background vulnerabilities like significant number of HRGs, male out migration
 as well as in-migration so, the district may continue to focus on HIV prevention programme, especially among people with high risk behavior
 and migrants.
- IEC programme may be strengthened in district, especially around industrial areas, major railway stations and halt points on National highways to improve the HIV awareness level.
- Considering large number of FSWs, the district may be considered for surveillance activities among FSWs to understand the epidemic in a better way.
- In the absence of surveillance sites, routine programme data from district need to be strengthen for completeness and accuracy, and should be examined regularly to understand HIV transmission dynamics in district.
- As the size of HRGs is significant, profile and behavior of HRGs as well as male clients of FSWs need to be studied further to tailor prevention
 responses further in district.

Udham Singh Nagar Uttarakhand

District Population: 16,48,367 (16.3 % of UK Population); Female Literacy!: 65.7%; ANC Utilization²: 37.1%

Intra-district

Intra-state 3555

Overall 20915

MSM 530

FSW

HRG Size

Male Migration, 2001 Census Inter-state 11534 1.78

5826 0.90

No. out-migration

200

1240 50.20

0.55

3.22

% of male pop.

28.34

21.46

55.15

27.86

100

% of total migration

0.04

0.03

0.08

009

240

1200

Top districts inter-state for out-migration

HIV Levels and Trends ³	2010	10.00	HIV	Levels and Trends	Trends ³	100 ONIC 101		2			
		2004	2002	2006	2007	2008	2009	2010	2011		
ONA 2211	Pb⁴			0.50	0.50	0.75		0.50			
H33-AIVC	νLτ			400	400	399		399			
PDTCT	ЬР					0	0	0.08	0.10	Size Est.	
2	N					1073	1939	3624	6112	(Mapping, 2007)	(/
1	Ы	*	*	*	*	*	*		0.13		
Blood Bank	IN	*	*	*	*	*	*	-	7070	% Total HRG	
GE SSI	Ы										
U16-66H	IN	-		-	-	-		-		% Total Pon	
/VIO 550	Ы	-	-	-	-	-		-			
NS2-LSW	N									Programme Target	jet
11CC 84C84	Ы									Programme Coverage	verage
MISINI-SCH	N										
2	8							1.70			
001-ssH	N							176			
- -W DID	Ы		3.58	1.38	0.81	1.24	1.01	1.88	1.81	Typology	
ICIC Male	N		335	435	1985	1687	2174	1702	2659	:	
CHU	8		3.25	1.09	0.51	76.0	1.43	1.39	0.93		
ICIC remale	N		277	367	2539	1137	1538	1227	1931		
J. G. C. F. C.	Ы		2.62	1.13	09.0	1.11	1.10	1.68	1.34		
ICIC Kererred	Þ		458	705	4350	2714	4359	2497	3965	% <25 yrs.	
ICTC Direct	Ы		5.84	2.06	1.72	1.82	0.49	1.62	2.08	% Married	
Walk-in	Z		154	97	174	110	435	432	625		
			ď	LHIV Profile	, 2009						
			0/. III Drim		% Widowed	pa				No. episodes treated	ated
	% On ART	% 15-24	% III., r IIIII. Edu.	% Married	Or	_				% Syphilis pos.	
ART(84)	7.	10	3.1	ıc	35	_					
DLN(NA)	5 .	2 ,	-	,	3 .	Ι				No.	
		Route of HI	Route of HIV Transmission, ICTC 201	n, ICTC 2011						FSW TIs	
	Hetero-	Homo-	7	Needle/	Parent to	1	Ι.			MSMTIs	
	sexual	sexnal	BIOOD	Syringe	Child	UNKNOWN				IDU TIs	
% of Total Pos.	83.33	90:9	0	60.6	1.52	0				Comp. Tls	
(N=00)							1			5	
		1100		ock-Level I	etails	:				Total tested ⁵	
No. HRG- FSW	Gadarpur, 180	Kichha, 234	Rudrapur, 330	Dineshpur, 44	Jaspur, 49	Kashipur, 64				Blood Banks	
	Dineshuir			Rudrapur						SIII CIIIIIS	
No. HRG- MSM	17	78 July 200	Kichha, 6	39 39						ARI centers	
		Rudrapur,								Link AKI centers	S
No. HRG- IDU	Kichha, 82	215	Bajpur, 171							PLHIV Networks	د ا
% Positive,										Ked ribbon clubs	SO.
ICTC		'	'							Comm. care centers	ıters
% Positive,										Drop-in-centers	
PPTCT										Condom outlets	10

Pilibhit, Uttar Pradesh

South

Rampur, Uttar Pradesh

Bareilly, Moradabad, Uttar Uttar Pradesh Pradesh

Daily Injector-13.35%; Non daily injectors-33.77%

Kothi-34.17%; Panthi-38.33%; Double decker-NA

Home based-87.43%; Brothel based-0.23%; Street based-12.34% 23.09

2011

2010

2009

2008

2007

5006

2005

2004

2011 0 0

2010

2009

0

2008

41.45

55.83

∞

6553

5651

3897 4

4524

802

612

7

PPTCT		'								Condom outlets									
* Inadequate sample s NT = number tested; ⁵	Size	ta not av clients ar	ile; † 201 egnant w	1 Census; ² Source: l	SHTC	III; ³ Data pre	esented only f	for years wh	nere sample siz	ze is valid (HSS-ANC: 300 tes	tested, HSS-HF	RG/STD: 187	tested, ICT	C: 600 tested,	ід, РРТСТ а	nd BB: 900 te	tested); 4 PP =	percent	positive,

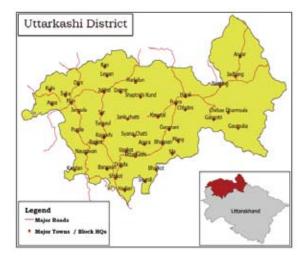
Uttarkashi, Uttarakhand

Background:

Uttarkashi is situated in the northern part of Uttrakhand. The district has a population of 3.29 lakhs with a sex ratio of 959 females for every thousand males. Overall literacy rate in district is 75.9% with female literacy rate at 62.2% (Census 2011). A major portion of the district is covered with forests; forestry and its products play important role in the district economy. Agriculture and several cottage industries like wood craft and tourism are other important contributor to the districts economy. District has a hilly terrain and is connected through roads to major cities of the state.

HIV Epidemic Profile:

- The district had a very low HIV epidemic as indicated by HIV seropositivity recorded at PPTCT (0%) in 2011 and blood banks (0%) in 2009. There was an overall stable to declining trend.
- HIV sero-positivity among ICTC attendees, as recorded in 2011, was low among male (0.65%) and female (0.34%) clients, as well as among referred (0.46%) and direct walk-in (0.72%) clients with a stable to rising trend.



- As per mapping estimates of 2007, there were around 160 HRGs in the district. FSWs (66.1%) were the largest HRG, followed by MSMs (27.6%) and IDUs (6.2%).
- As per the 2001 Census, 7.2% of the male populations were out-migrants (around 11 thousands); 15.8% of them out-migrated to other states while 25.27% out-migrated to other districts within the state.
- HIV awareness rate was 48.3% and 93% of them had correct knowledge on HIV AIDS (DLHS-III, 2007-08).
- RTI/STI awareness rates was16.3% among women (DLHS-III, 2007-08).
- Syphilis positivity among the STI clinic attendees was consistently 0% (2008-2011).
- HIV programme in districts has focused primarily on prevention with three ICTCs and one Blood Bank operational in district in 2011.
- One Link ART Centre (LAC) was operational in district since 2011 to provide ART drugs for HIV positives.
- Of the 26 PLHIVs registered at the Anti-Retroviral Therapy (ART) center till 2009, 4% were 15-24 years of age, 69% were on ART and 50% were illiterate or had a primary education and 46% were widowed or divorced.

- As the HIV epidemic is very low and stable, prevention programme may remain the main component of HIV programme in district.
- The district has a very low but documented evidence of HRGs. The groups should be covered by comprehensive HIV prevention programme through appropriate mechanism.
- IEC programme may be strengthened in district, especially at tourist spots and at halt points on National highways to improve the HIV
 awareness level.
- Routine programme data from the district need to be strengthened for completeness and accuracy, and should be examined regularly to
 understand HIV transmission dynamics in the district.

2010

2009

2008

2007

2006

6293 2011 0

529

0

2010

3912

3321

2946

1393

1789

407

m

9

Uttarkashi, Uttarakhand

Intra-district

Intra-state

Overall 10996

 \Box 15

Male Migration, 2001 Census Inter-state 2779 1.83

1737

No. out-migration % of male

6.20

58.93 4.27

25.27

15.80

100

% of total migration

Top districts for inter-state out-migration

Chandigarh

Daily Injectors-NA; Non daily injectors-NA

						-	458	-					2002		0	348	5009					decker-NA	Double	Panthi-NA;	Kothi-NA;					70.0		69.77	1	0	7.3	IVICIVI	MSM			
						-		-		,			2004		0	0	2008	STI/RTI				NA	Street hased-	hacad-NA:	NA: Brothol	-				0.05	L	71.99	.,	2	031	1300	ECW/	HRG Size		
Comm. care centers Drop-in-centers Condom outlets	Red ribbon clubs	PLHIV Networks	Link ART centers	ART centers	STI clinics	Blood Banks	Total tested ⁵	ICTG	Comp. Tls	IDUTIs	MSM TIs	FSW TIs	No.	-	% Syphilis pos.	No. episodes treated			% Married	% <25 yrs.		5		Typology		=	Coverage	Programme	Programme Target	% lotal Pop.		% lotal HKG		2007	Size Mapping,					
																277	0.72	1529	0.46	876	0.34	930	0.65									*	*	2106	0			2011		
Bhar	(Dehradun),	Chakrata	-			ľ										308	0.65	1479	0.07	1013	0:30	774	0			-				250	0.40			1534	0			2010	-	
Chakrata (Dehradun), 0	barkot, 0	_							u.v							195	0.51	1628	0.18	717	0	841	0.36									2944	0	1388	0.07			5005		ion²: 22.2%
Mori, 0	Mori, 0		-			Ī		11.11	UNKNO	1-1-1				wed		219	0.91	905	0.11	550	0.55	544	0			-				220	0	2937	0.24	*	*			2008	-	ANC Utilizat
	0.36					retalls		0	Child	ٽة تە			46	% Widowed	, 2009	4	0	1785	0.22	778	0.39	1011	0.10							250	0	1892	0.26					2007	Trends³	cy¹: 62.2%;
Naugaun, 0	0	Naugain	-			ock-Level L	-	0	Syringe	Needle/	n, ICTC 201		0	% Married	HIV Profile	*	*	*	*	*	*	*	*			-				250	0	1426	0	-				2006	Levels and	emale Litera
Chilyanisaud, Naugaun, 0 0	0.39	Chilvanisand				ğ	7	0	BIOOG	7	Route of HIV Transmission, ICTC 201		205	% III., Prim. Fdu.	PL	*	*	*	*	*	*	*	*			-				195	0	1286	0.23					2005	HIV	opulation); F
Dunda, 0	0.38	Dunda	-			ľ		0	sexnal	-omoH	Route of HI		4	% 15-24												-				*	*	1056	0					2004	-	3.2% of UK F
Bhatwari, 0	0.39	Bhatwari		,				88.89	sexual	Hetero-			69	% On ART		NT	ЬР	Z	Ы	N	&	NT	Ы	NT	ЬР	NT	Ы	N	ЬР	NT	Ы	N	Ы	NT	Ы	NT⁴	PP			3,29,686 (
% Positive, PPTCT, 2009	5000	% Positive ICTC	No. HRG- IDU	No. HRG- MSM	No. HRG- FSW	000	(N=9)	% of Total Pos.				DLN(NA)	ART(26)			Walk-in	ICTC Direct	ICIC Keferred	J d OHO	IC I C remaie	1	ICTC Male	- T- D 4 - 1 -	001-881	IIGI SSII	INCO INCOM	HCC_MCM	VVC 1-CC11	HCC_ECIM	U15-56H	OE CED	Blood Bank	0		PPTCT	2007	HSS-ANC			District Population
0.39		Bhatwari	No. HRG- IDU		No. HKG- FSW -		4	% of Total Pos. 88.89	sexual	H	-		ART(26) 69				Ш								dd IIGI 33H															District Population: 3,29,686 (3.2% of UK Population); Female Literacy!: 62.2%; ANC Utilization?: 22.2%

* Inadequate sample size; - Data not available; 12011 Census; 2 Source: DLHS III; 3 Data presented only for years where sample size is valid (HSS-ANC: 300 tested, HSS-HRG/STD: 187 tested, ICTC: 600 tested, PPTCT and BB: 900 tested); 4 PP = percent positive, NT = number tested; 5 General clients and pregnant women