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By  
individual members/experts  
for  
discussion in the NAC and do not, in  
all cases, reflect settled conclusions  
of the NAC**

# Presentation to the National Advisory Council

29<sup>th</sup> August 2007



National AIDS Control Organization

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Addl. Secy. & Director General (NACO)

# National Common Minimum Programme of Govt of India, May 2004

“The UPA Government will step up public investment in programmes to control all communicable diseases and also provide leadership to the National AIDS Control Effort”

# Structure of the Presentation

- I. Action taken on recommendations of NAC dated 30<sup>th</sup> September 2005
- II. Progress and achievements in NACP II (1999-2007) and NACP-III Targets
- III. Financing of NACP III

# Action Taken on Recommendations of NAC dated 30<sup>th</sup> September 2005

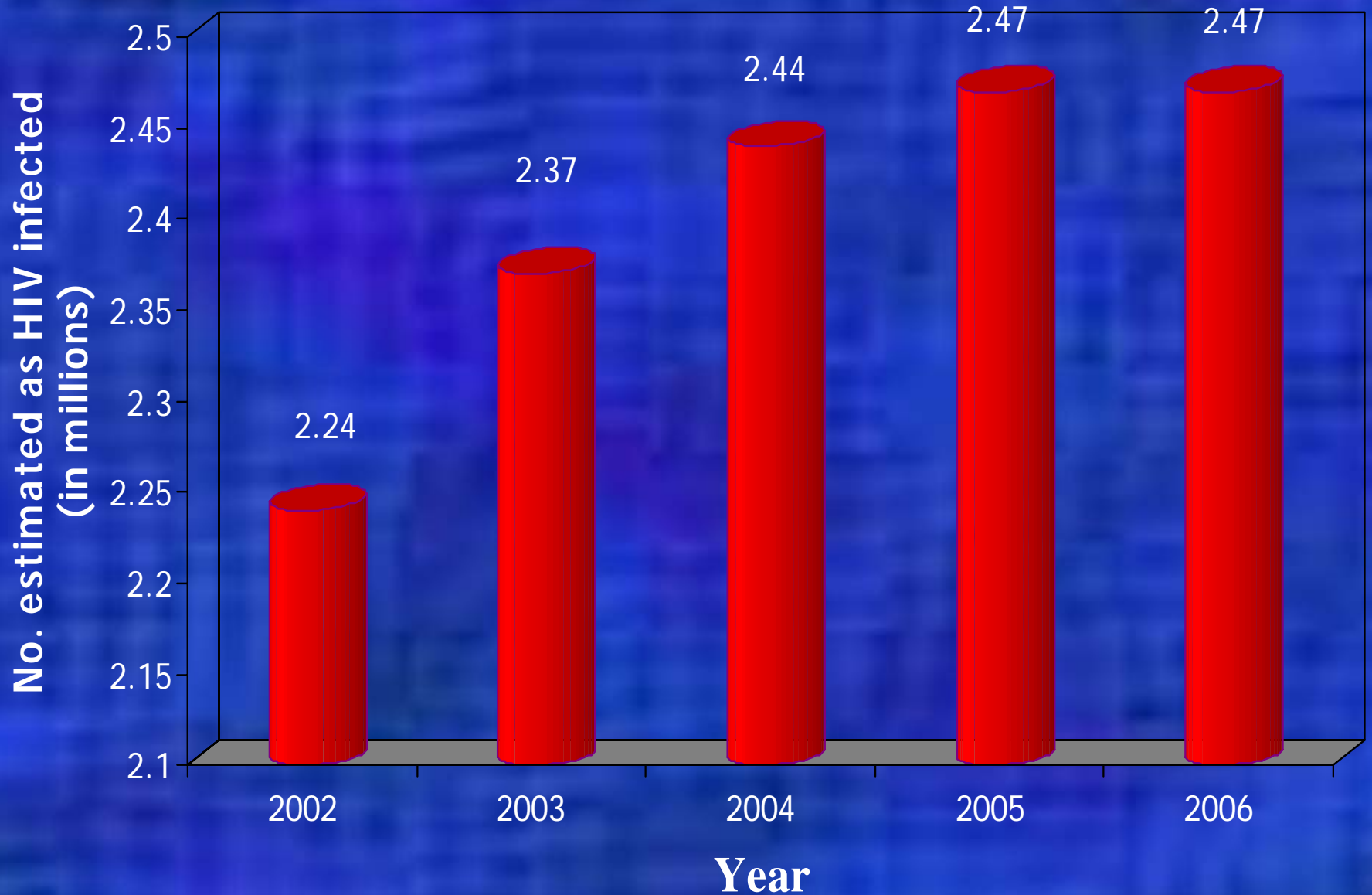
# I. Recommendations of NAC

1. Improve data Collection and compilation
2. Integrate with Public Health Delivery System and develop capacities of health providers and community workers
3. Reach out to vulnerable sections - legal issues
4. Expand use of condoms
5. Involve AYUSH practitioners
6. Restructure NACO - separate structure for North East.
7. Special efforts to address HIV among children

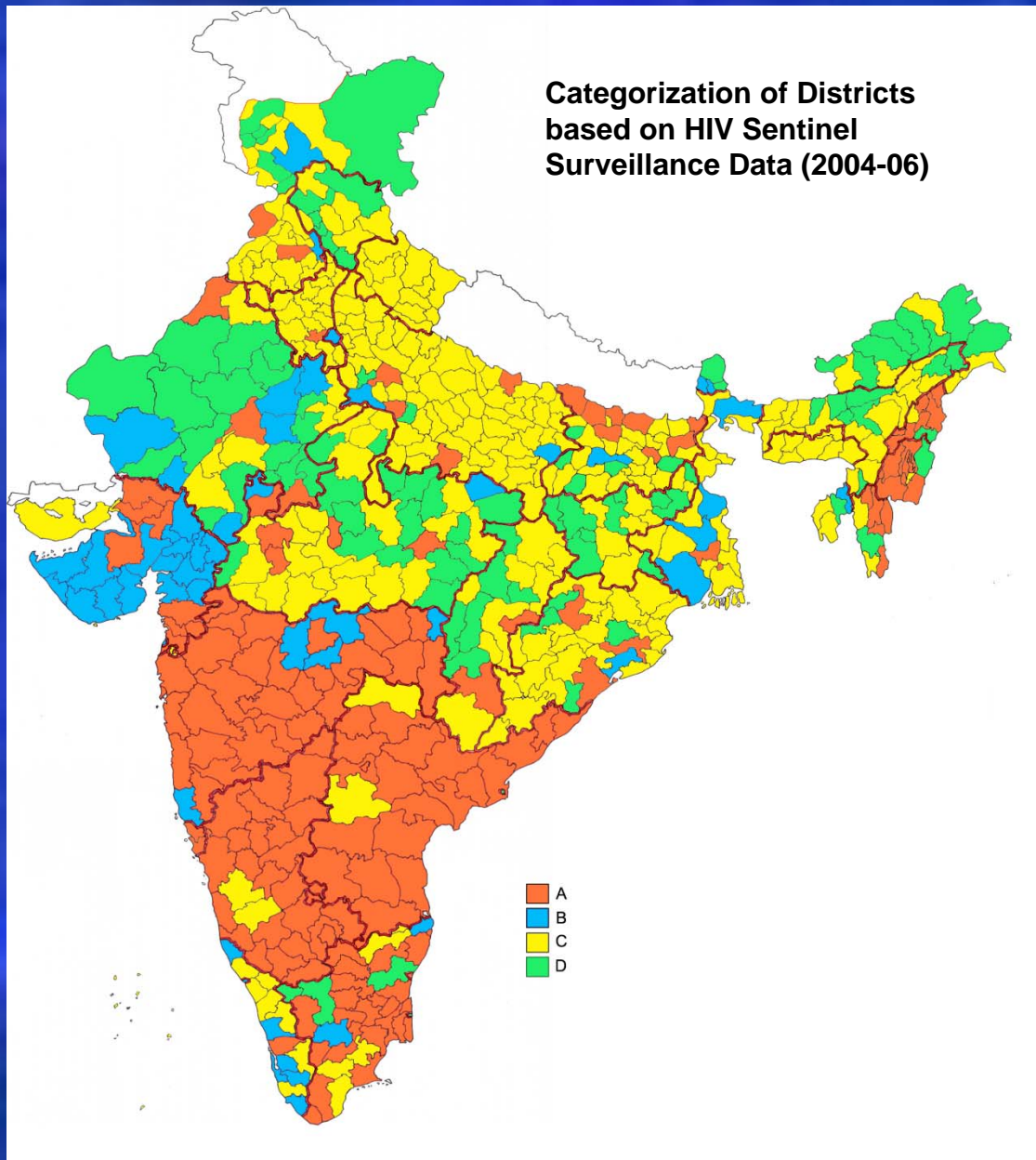
# 1. Improved Data Collection and Compilation

- In 2005, HIV estimation based on sentinel surveillance data. Adult HIV prevalence estimated to be 0.9% translated into 5.2 million HIV infected persons
- During 2006 two sources of data were used for estimation:
  - ❑ Expanded sentinel surveillance- data from 1122 sites as against 750 sites in 2005
  - ❑ Population-based National Family Health Survey- III
- Extensive consultations held with the national and international experts.
- WHO-UNAIDS work book model adopted for international comparability.

# Revised HIV Estimates: India 2002–06



# HIV/AIDS Scenario in India



**Estimated PLHIV - 2.47 million (2—3.1 million)**

**Adult HIV prevalence - 0.36% (0.29%-0.46%)**

- 156 A Category Districts

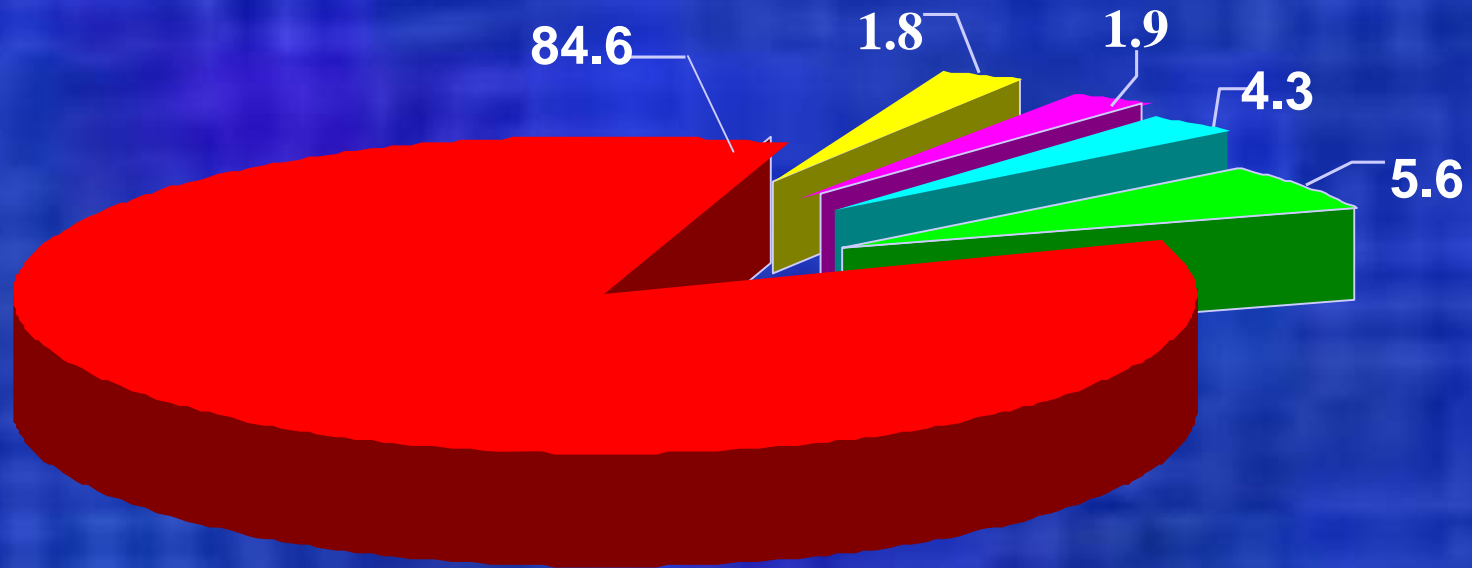
- 39 B Category Districts

- 14 Districts with HIV prevalence > 3% among ANC clinic attendees

- Evidence of HIV positivity among IDU in Punjab, WB, Kerala and Orissa besides North East

- Evidence of dual mode of transmission in Manipur & Nagaland.

# Routes of HIV Transmission



■ Sexual

■ Blood and Blood Products

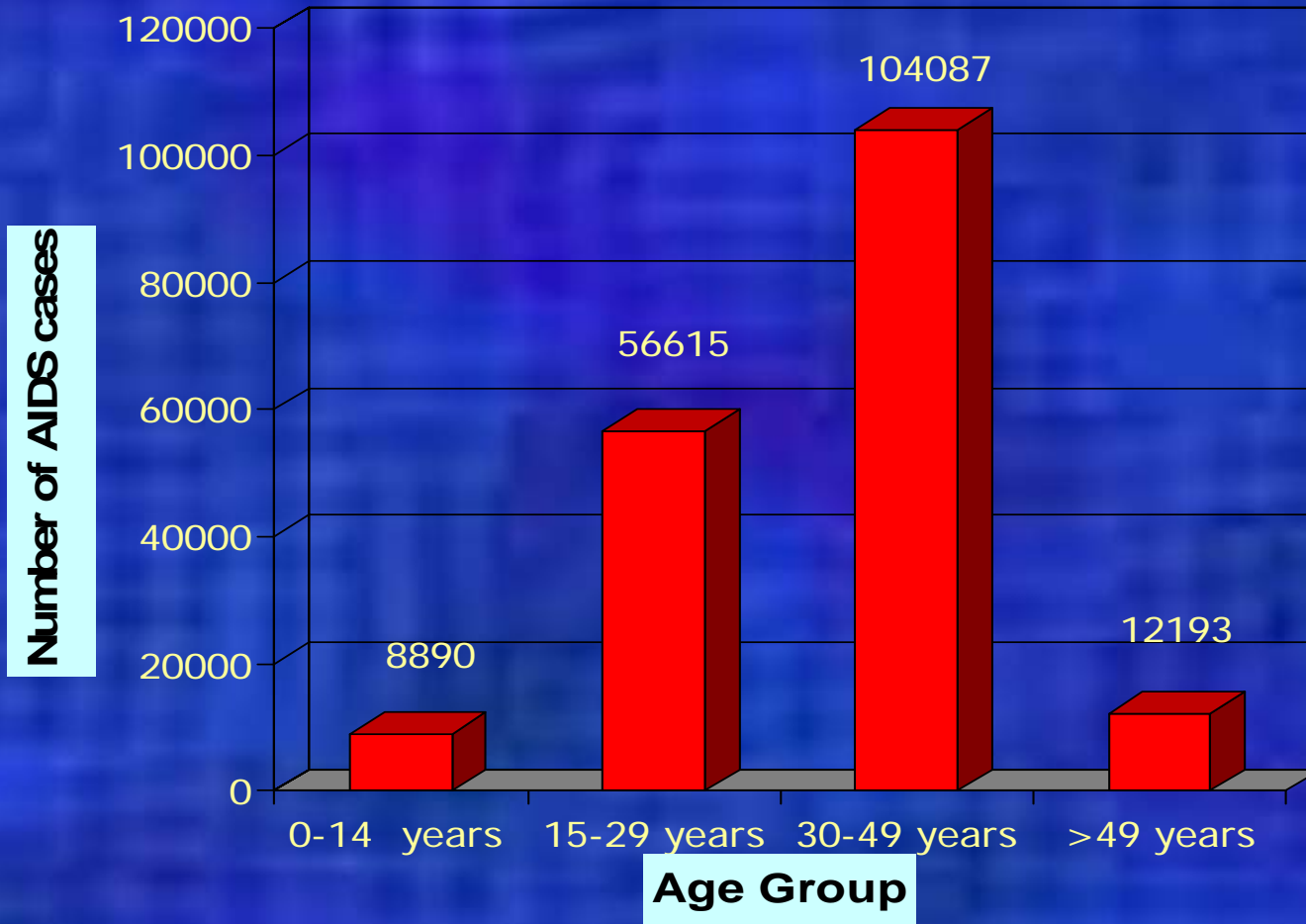
■ Unidentified

■ IDUs

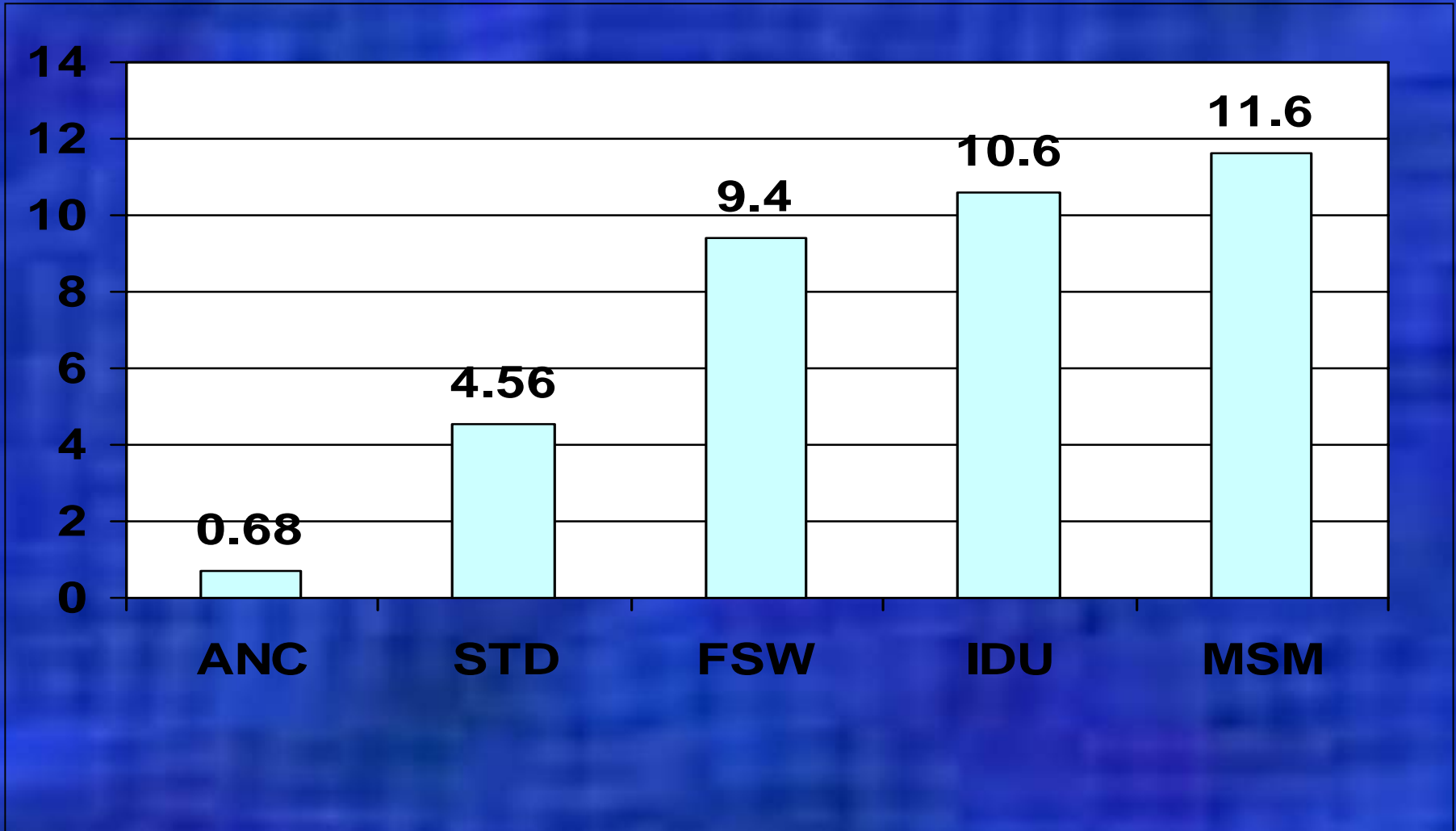
■ Perinatal

# Age distribution of reported AIDS cases in India

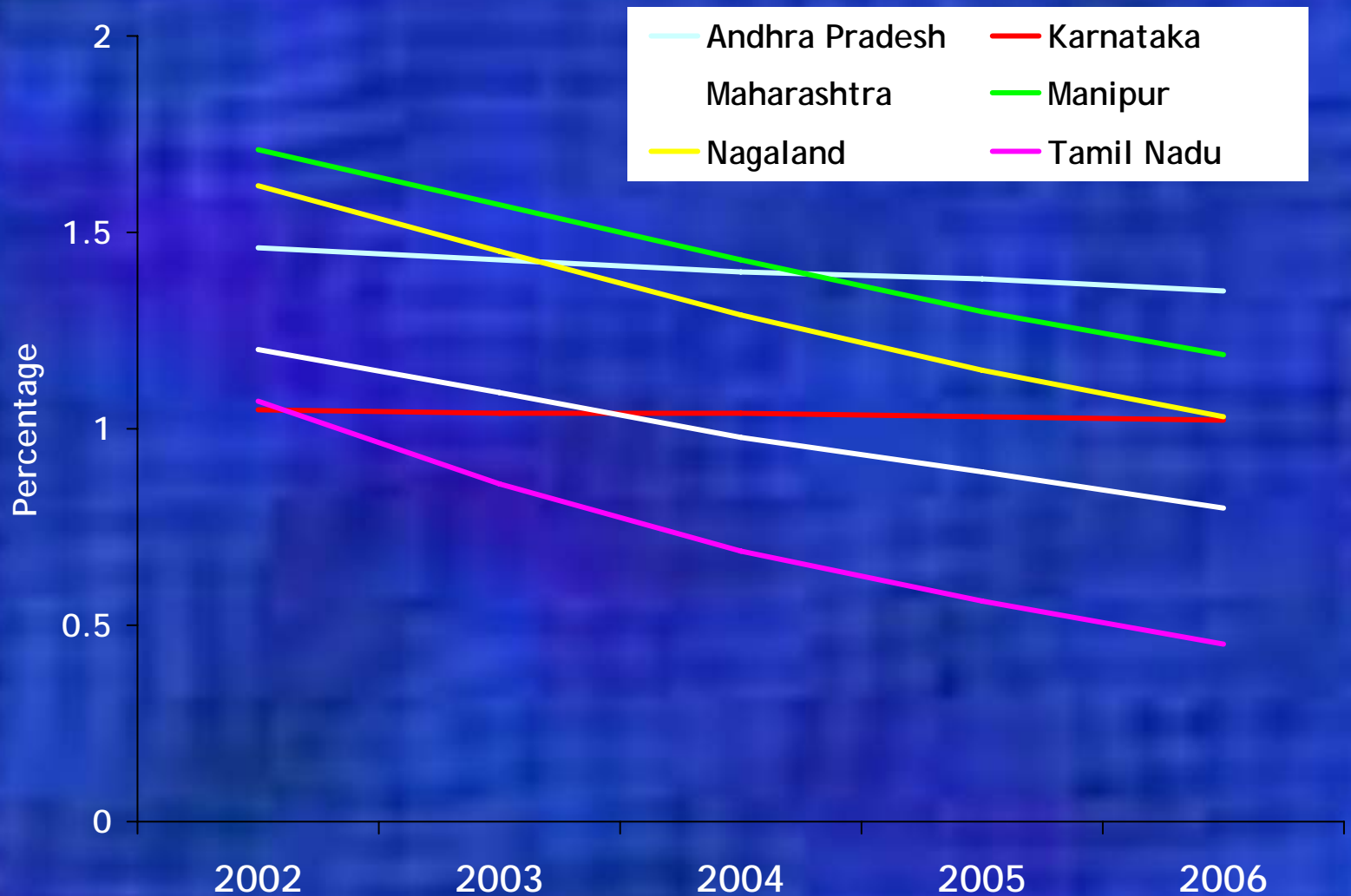
A total of 181785 AIDS cases reported till June 2007: 31.2% female



# HIV Infection among different population groups- 2006

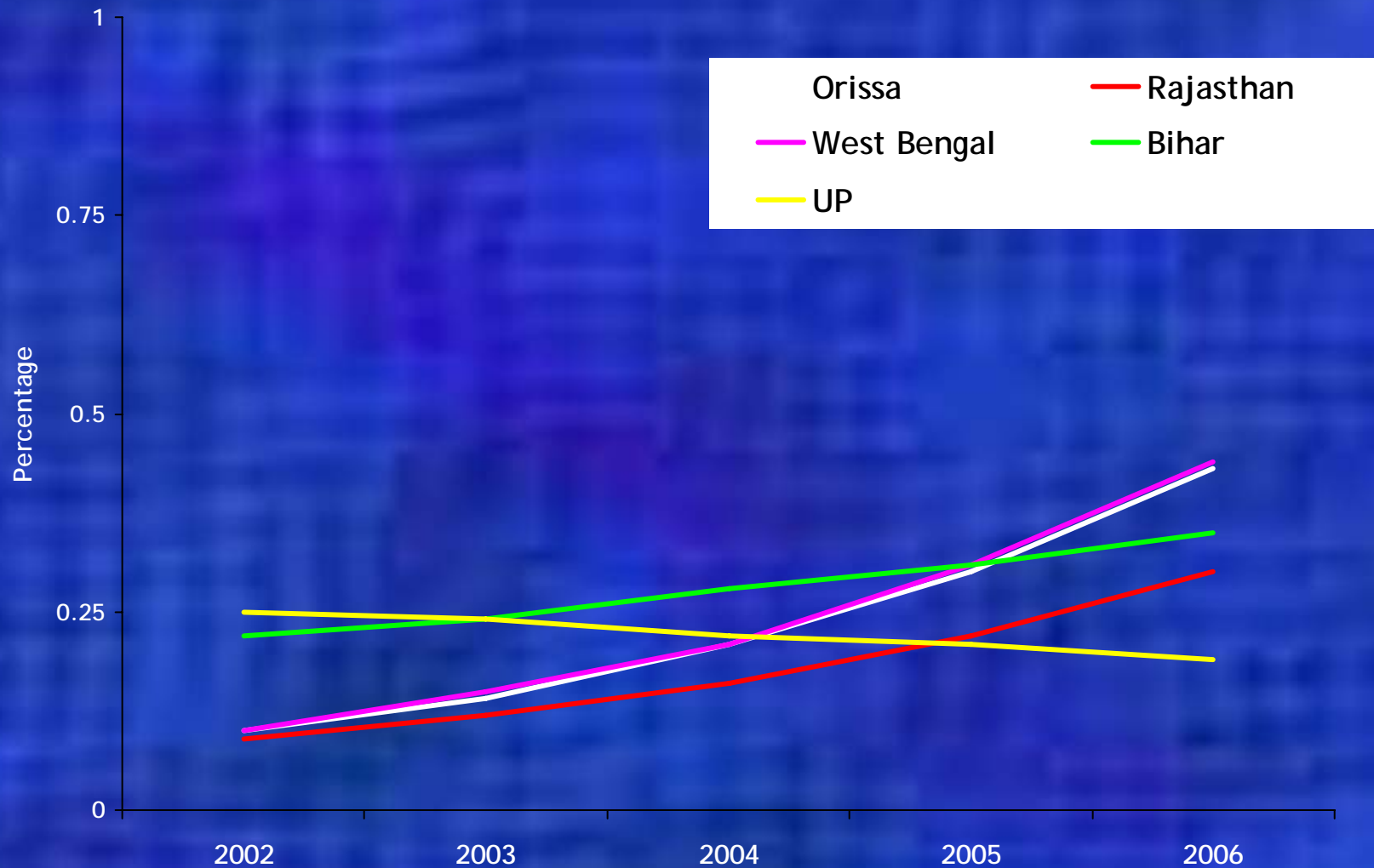


# Trends\* in HIV prevalence among ANC attendees, high burden states 2002-2006



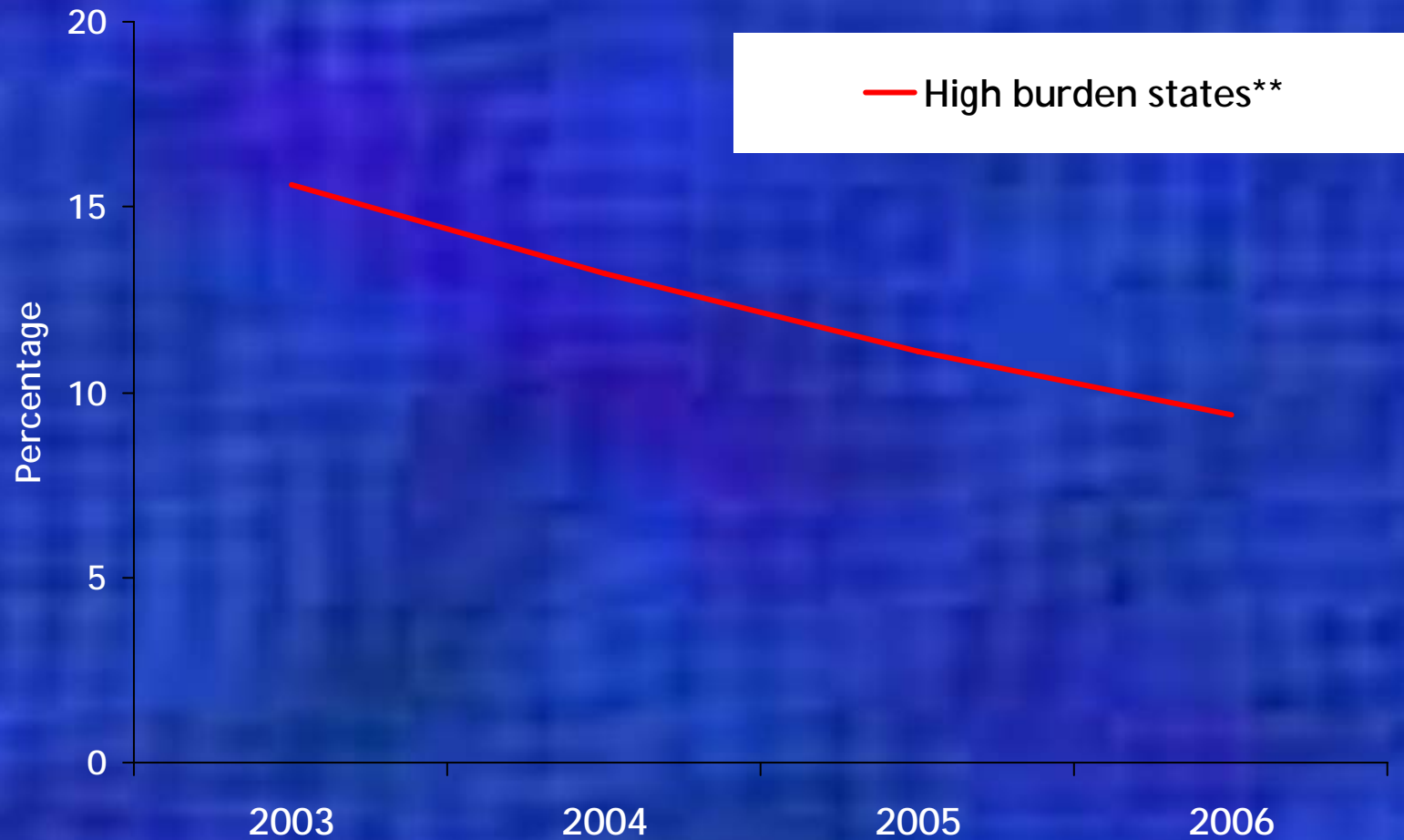
\*Generated by random effects model at consistent sites

# Trends\* in HIV prevalence among ANC attendees, selected low burden states 2002-2006



\*Generated by random effects model at consistent sites

# Trends\* in HIV prevalence among sex workers, 2003-2006



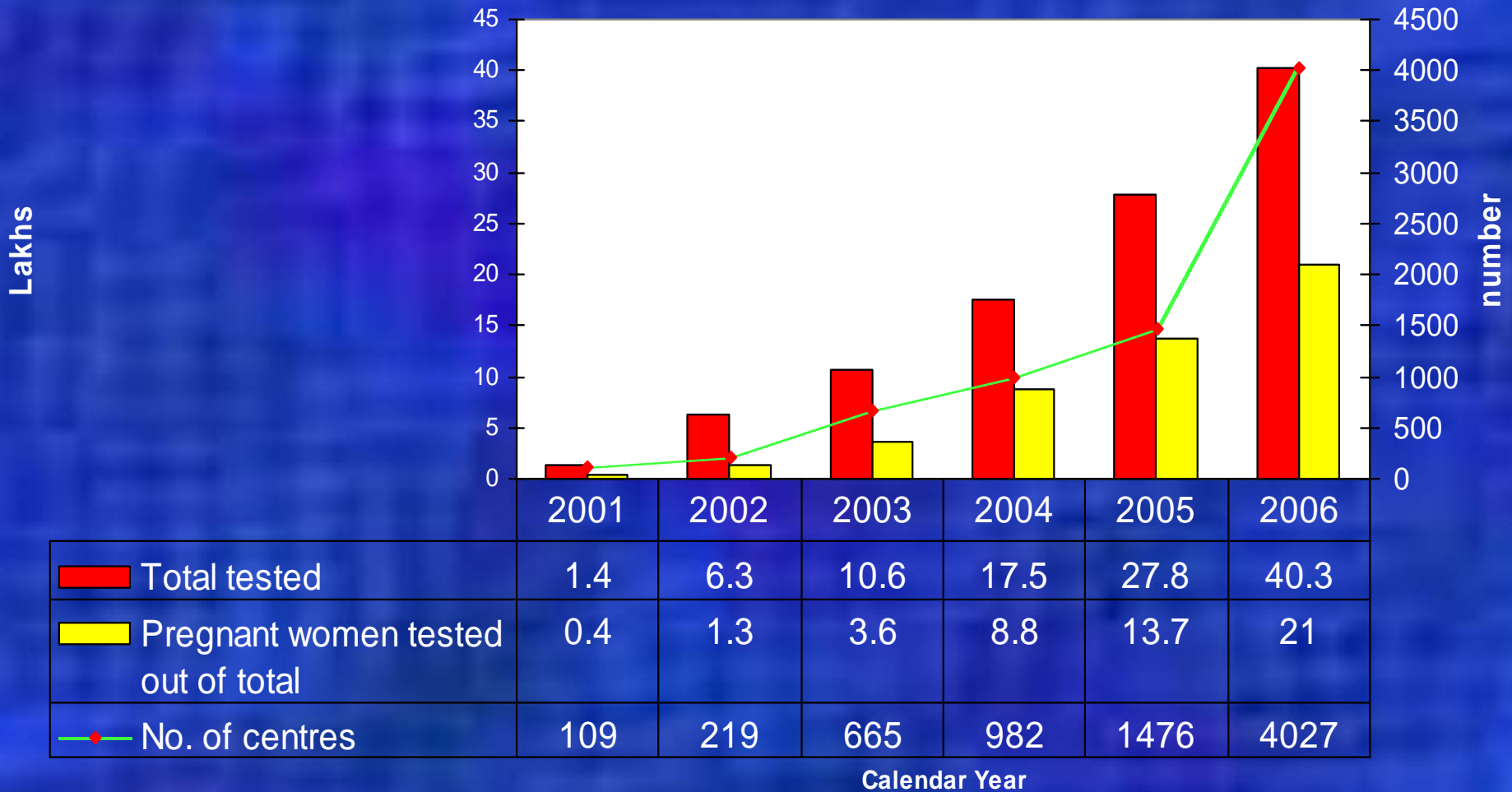
\*Generated by random effects model

\*\*High burden states=Tamil Nadu, Karnataka, Andhra, Maharashtra

## 2. Integration with Public Health System

Service	NACO	NRHM
ICTC	Established up to Medical Colleges, District Hospital and CHC	To be established in 24 Hrs PHC.
PPTCT	do	Integrated with JSY
STI	Joint technical and operational guidelines developed, NACO supporting district and above, NRHM at sub-district level. Joint training plan.	
HIV-TB	Cross referrals established between ICTC and TB units	DOTS
Blood Safety	Transportation of safe blood	Infrastructure, manpower and training for Blood Storage Centre at FRU
Condom Promotion for triple benefit	IEC and development of markets by NACO	Procurement and funding by NRHM

# Year wise progress in Integrated Counseling Testing Services



■ Total tested 
 ■ Pregnant women tested out of total 
 —◆— No. of centres

# NRHM budget related to convergence activities (2007-2012)

Item	Amount (Crores)
Condom	2031
Blood storage unit (3222)	24.16
STI/RTI treatment	387.5
Total	2442.6

## 2a) Capacity building at Grass Roots Level during NACP-II

- Meetings held in 60,000 Gram Sabhas in 18 states for disseminating messages on HIV/AIDS.
- Training/ Sensitisation of over 40,000 Panchayati Raj Institutions; regular satellite based training for RPIs in Karnataka.
- Training of over 1,20,000 SHGs in 18 States; 88,000 SHGs to be trained in Karnataka & Maharashtra.
- Regular interactive programmes by DFP and S & DD in rural areas.
- Dissemination of an information booklet on HIV/AIDS –'GRAM SANDESH' to about 2.5 lakh Gram Panchayats.
- 'Kalyani' health programme on DD and 'Jeevan hai Anmol' in 24 languages from 174 stations of AIR has special focus on rural & semi-urban areas.
- NACO put out 16,500 spots on DD and 2,750 spots on C&S channels on various themes in 2006-07.

## 2b) Capacity Building for Health Care Providers in Public Health System during NACP-II

Category	Available man power	Trained
Doctors	1,18,515	1,13,490
Nurses	1,39,395	95,196
Lab Tech.	37,952	24,516
Counselors	4,831	2,699
Field Workers	2,77,817	3,49,579

## 3a) Reaching out to vulnerable sections

- Sex Workers, Men Having Sex With Men (MSM), Intravenous Drug Users (IDU), Truckers and Migrants are identified as highly vulnerable to HIV/AIDS.
- These populations are being reached through 1220 Targeted Intervention Projects spread across the country mainly in the urban areas
- A link worker scheme is introduced in 'A' and 'B' districts to reach vulnerable populations in rural areas.

# Estimated size & coverage of Vulnerable Population- High Risk

High Risk Groups	Estimated Size	Estimated Coverage	Percent Coverage
Sex Workers	8,31,677 - 12,50,115	5,88,777	55 %
IDUs	96,463 – 1,89,729	1,02,344	53%
MSM	23,52,113	1,46,397	6.0%
Male sex workers	2,35,213		

# Link Worker Scheme

A dedicated cadre of village level link workers is being formed in A and B district in a phased manner (2 link workers in every large village/town with 5000 population)

These motivated community level paid youth workers (male and female) will help in:

- Mapping High Risk Groups for primary prevention and linking to services
- Reducing HIV stigma in community through youth clubs/Self Help Groups/Mahila Mandals etc
- Increase access to condoms and services as per needs
- Impart life skills education to adolescents and youth

## 3b) Legal Issues

- Draft HIV/AIDS Bill submitted to Law Ministry for vetting for introduction in the winter session of parliament.
- The main features of the Bill are:
  1. Prohibition of Discrimination
  2. Requirement of Informed Consent
  3. Guarantee of Confidentiality
  4. Right to access to treatment
  5. Right to safe working environment
  6. Protection of strategies for risk reduction
  6. Protection of rights of women, children and PLHA regarding property and employment
  7. Strengthen NACO to enforce law by appointing ombudsman.

## 4.Expanded Use of Condoms

- Condom use increased from 1.6 billion annually in 1999 to 2.2 billion in 2007; to be upscaled to 3.5 billion by 2012
- Social marketing to upscale from current 0.6 billion to 2 billion annually
- The number of condom outlets increased from 6 lakhs in 1999 to 1 million in 2007 with a target of 3 million outlets by 2012
- 11025 Condom Vending Machines installed and another 11000 are in the process of being installed.
- Successful pilot using 500,000 female condoms nearing completion

# 5. Involvement of AYUSH

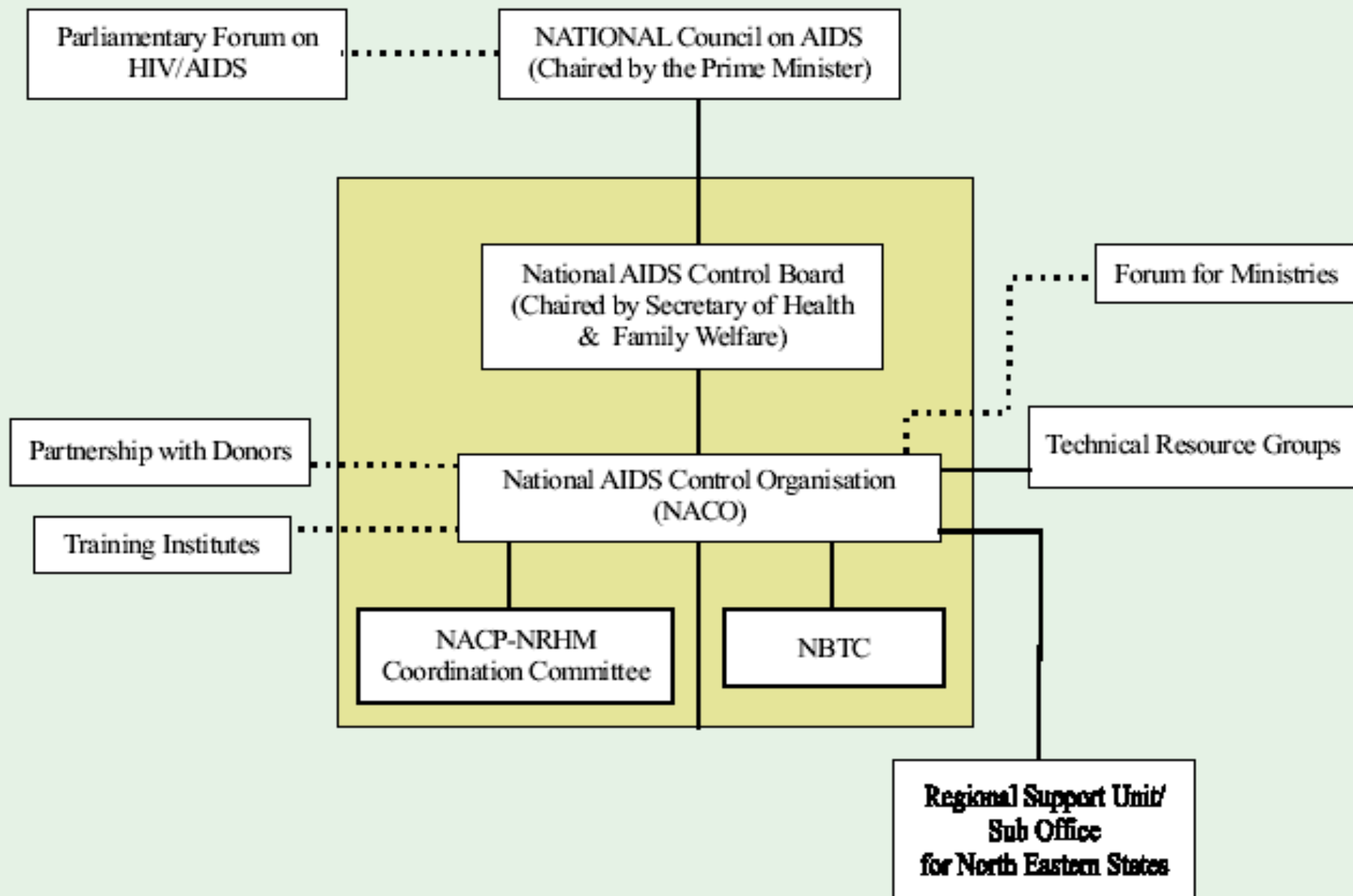
- Technical Resource Group (TRG) on AYUSH constituted consisting of members from AYUSH councils, ICMR, NGOs and academic institutions.
- Working Groups constituted to address issues related to awareness, counseling, referral, mapping etc, capacity building, clinical research etc.
- Training manual and operational guidelines for AYUSH practitioners on HIV/AIDS under preparation for training AYUSH practitioners appointed under NRHM.
- AYUSH drugs identified which have good immunomodulatory effects to be studied by ICMR before adoption in the programme.

## 6. Sub Office of NACO in North East

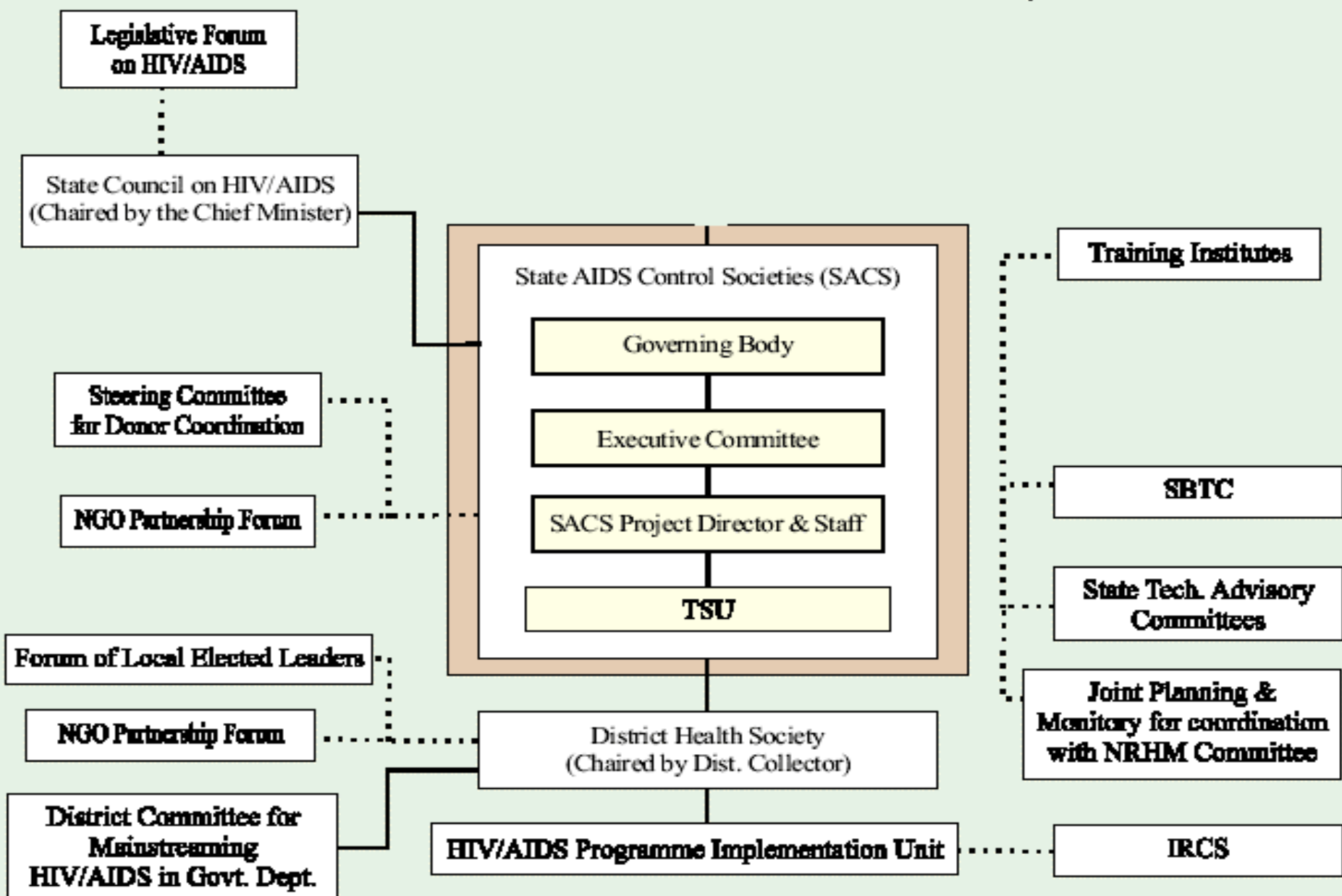
- Approval obtained for office of NACO in North East from the National AIDS Control Board.
- Sub Office to be located in Guwahati
- Open advertisement for recruitment of staff issued- evoked poor response
- Circular issued to identify regular staff.
- Appointment orders issued for Team Leader and Finance Officer.

# 7. Restructuring of NACO

# NACP-III Organogram



# STATE / DISTRICT LEVEL ORGANOGRAM



# STRENGTHENING OF NACO

	NACP II	NACP III	
DIVISION	Technical Manpower Available	Technical Manpower (Proposed)	Technical Manpower (Filled)
Basic Services	6	15	13
Blood Safety & Lab Services	2	9	7
Treatment, Care & Support	1	12	11
Surveillance, M&E, R&D	3	7	8
IEC & Mainstreaming	2	10	10
NGO & Targeted Interventions	1	16	14
Administration & Procurement	2	8	3
Finance & Audit	1	13	8
Total Doctors	11	29	26
Total Other Professionals	7	55	42

# STAFF REQUIREMENT

LEVEL	NACP II			NACP III		
	Regular	Contract	Total	Regular	Contract	Total
NACO	53	28	81	78	107	185
STATE	748	461	1209	984	537	1521
DISTRICT	-	-	-	611	1333	1944
ART CENTRE	-	500	500	500	-	500
TOTAL	801	989	1790	2173	1901	4150

# 7. Addressing HIV/AIDS in Children

- Estimated number of children with HIV= 70,000
- Guidelines for pediatric ART prepared
- Launch of Pediatric ART Initiative by Smt. Sonia Gandhi on 30<sup>th</sup> November 2007
- Campaign to identify and treat children with HIV; 21000 HIV+ children identified, more than 6200 children on ART against 1800 before initiative
- Pediatric ARV drugs available for 17000 children at 127 ART centres (supported by Clinton Foundation)
- Free CD4 count and ARV drugs for children
- Seven Regional Pediatric ART Centres sanctioned with facilities for DNA-PCR testing for early detection of HIV+ young children
- Care and support for education, nutrition and psycho-social rehabilitation etc. to 64 thousand infected and affected children under Global Fund Round VI
- National Policy Framework for HIV+ children jointly by Ministries of Health & FW, Women & Child Development, HRD & Social Justice & Empowerment released by Smt. Renuka Chowdhury on 30<sup>th</sup> July 07

# Achievements of NACP-II and Targets for NACP-III

Activity/Component	Baseline Sept 1999	Achievements June 2007	NACP III Targets
Establishment of Sentinel Sites for HIV trends	180	1122	1318
Consistent condom use among female sex workers (%)	50.4	73.4	>90%
Coverage of schools and colleges for AIDS awareness	0	1,12,000	1,53,000
Condom vending machines installed through NACO	0	11,025	22000
Condoms distributed	-	2.24 b	3.5b
Seroreactivity among blood donors (%)	-	0.28	< 0.5
Voluntary Blood donation (%)	20	59.9	90

# Achievements of NACP II and Targets for NACP-III

Activity/Component	Baseline Sept 1999	Achievements June 2007	Targets for NACP-III
Strengthening of STI clinics	504	845	25,000 private providers
TI projects	300	1220	2100
Establishment of ICTC (for high risk population & pregnant women)	0	4132	4955 (5000 in 24 hr PHCs, 5000 in pvt sec.)
No. of HIV tests conducted per year	0	4 million	22 million
ART Centres	0	127	250
Patients on ART	0	85,915	3 lac
Community Care Centres/Drop in centres/ PLHA network	0	101/84/90	350/-/-

# **New Initiatives- Blood Safety**

**Till now, narrow view with focus only on HIV Prevention**

- Establishment of National Blood Transfusion Authority under process**
- Draft law addressing all issues related to Blood Transfusion Services on the anvil**
- Establishment of Centres of Excellence in Transfusion Medicine in four metro cities with capacity to handle 1 lakh units of blood annually underway**
- Networking of blood banks with Blood Storage Centres to maintain supply of blood to far flung areas. Technical specifications of Blood Transportation Vans finalized - to procure 500 such vans for blood collection and transportation**
- Introduction of certificate / and Diploma courses in Transfusion Medicine to bridge the shortage of trained manpower being planned.**

# New Initiatives- Scaling up Treatment of HIV/AIDS

- Free ART services through 127 public health facilities; to be scaled up to 250 centres under NACP-III
- Scheme for establishing Link ART centres at sub-district level close to beneficiaries, approved
- Introduction of second lines drugs being considered
- Management of opportunistic infections at ART centres and community care centres (NGO sector) being monitored
- Setting up 10 Centres of Excellence for tertiary care, training and research
- Introduction of Smart Cards for accessing ART services- 65,000 patient records already computerized

# New Initiatives- Strengthening Monitoring, Evaluation & Research

- Uniform M&E framework under “Three Ones” principles
- Strengthening M&E at State level by posting Epidemiologists and qualified Statisticians
- On-line computerized MIS for reporting
- Data analysis and interpretation for evidence based planning and monitoring
- Independent evaluation and operational research for effective programme implementation

# New Initiatives – Red Ribbon Express

- Red Ribbon Express approved in collaboration with Rajiv Gandhi Foundation
- Proposed to be launched on World AIDS Day 2007
- The train starting from Delhi will traverse India in a Bharat Parikrama Pattern covering 180 stations in 21 states
- Bus Caravans to run along with the train to organise outreach programmes in the far flung areas
- The train will have provision of exhibition on HIV, counseling and testing facilities, along with cultural troops for IEC

# New Initiative - OST

- Oral Substitution Therapy for ID users is being introduced in the programme for the first time.
- Operational guidelines have been prepared for implementation.
- Estimated 40,000 ID users will be benefitted

# 3. Financing NACP-III

# Budget Estimates and Expenditure Incurred during Tenth Five Year Plan

(Rs. In Crores)

Year	Revised Estimate	Expenditure Incurred	Percent spending
2002-2003	242.00	240.00	99.2 %
2003-2004	233.40	231.88	99.4 %
2004-2005	426.00	422.25	99.1%
2005-2006	533.50	532.69	99.9%
2006-2007	705.67	682.63	96.7%

## Component-wise Budget in NACP-III

<b>Programme Component</b>	<b>Amount (Rs. crore)</b>	<b>Percentage to total</b>
<b>Prevention</b>	<b>5886</b>	<b>73.4</b>
<b>Care, Support &amp; Treatment</b>	<b>1584</b>	<b>19.7</b>
<b>Programme Management</b>	<b>450</b>	<b>5.6</b>
<b>Strategic Information Management</b>	<b>103</b>	<b>1.3</b>
<b>Total</b>	<b>8023</b>	<b>100.00</b>

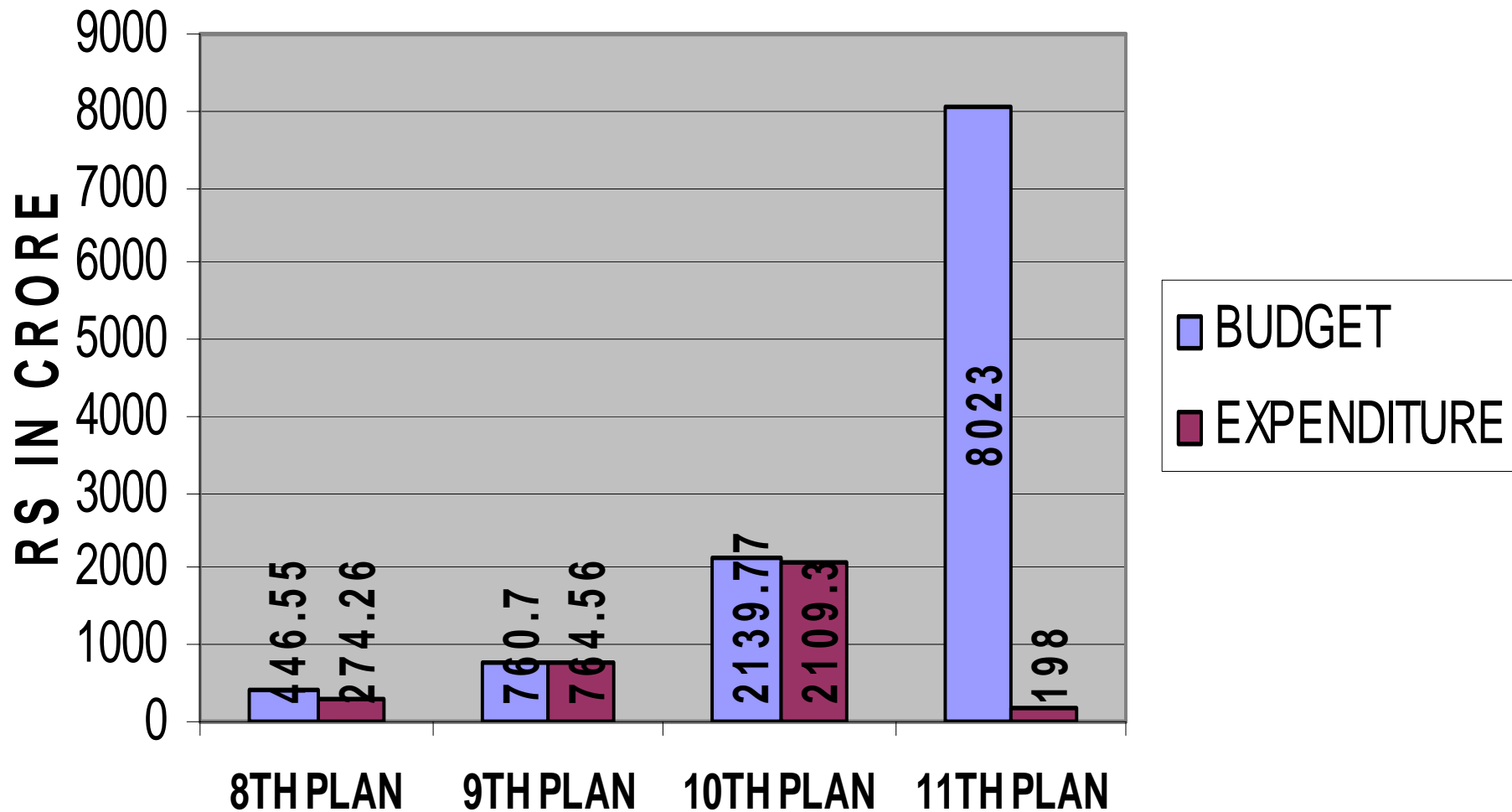
# INVESTMENT PLAN OF NACP III

<b>Sl.No</b>	<b>Source</b>	<b>Amount (Rs. in Crore)</b>
<b>I</b>	<b>Direct Budgetary Support as well as thro' NRHM for Condom Promotion, STD Drugs &amp; Blood Storage Centres</b>	<b>2861</b>
<b>II</b>	<b>EAC (External Aid Component)</b>	<b>4016</b>
(i)	World Bank	1125
(ii)	DFID	808
(iii)	GFATM (Round II, III & IV)	824
(iv)	GFATM (Round VI)	963
(vi)	USAID	225
(vii)	UNDP	71
<b>III</b>	<b>Funding Gap</b>	<b>1146</b>
	<b>Total Budgetary Resources</b>	<b>8023</b>

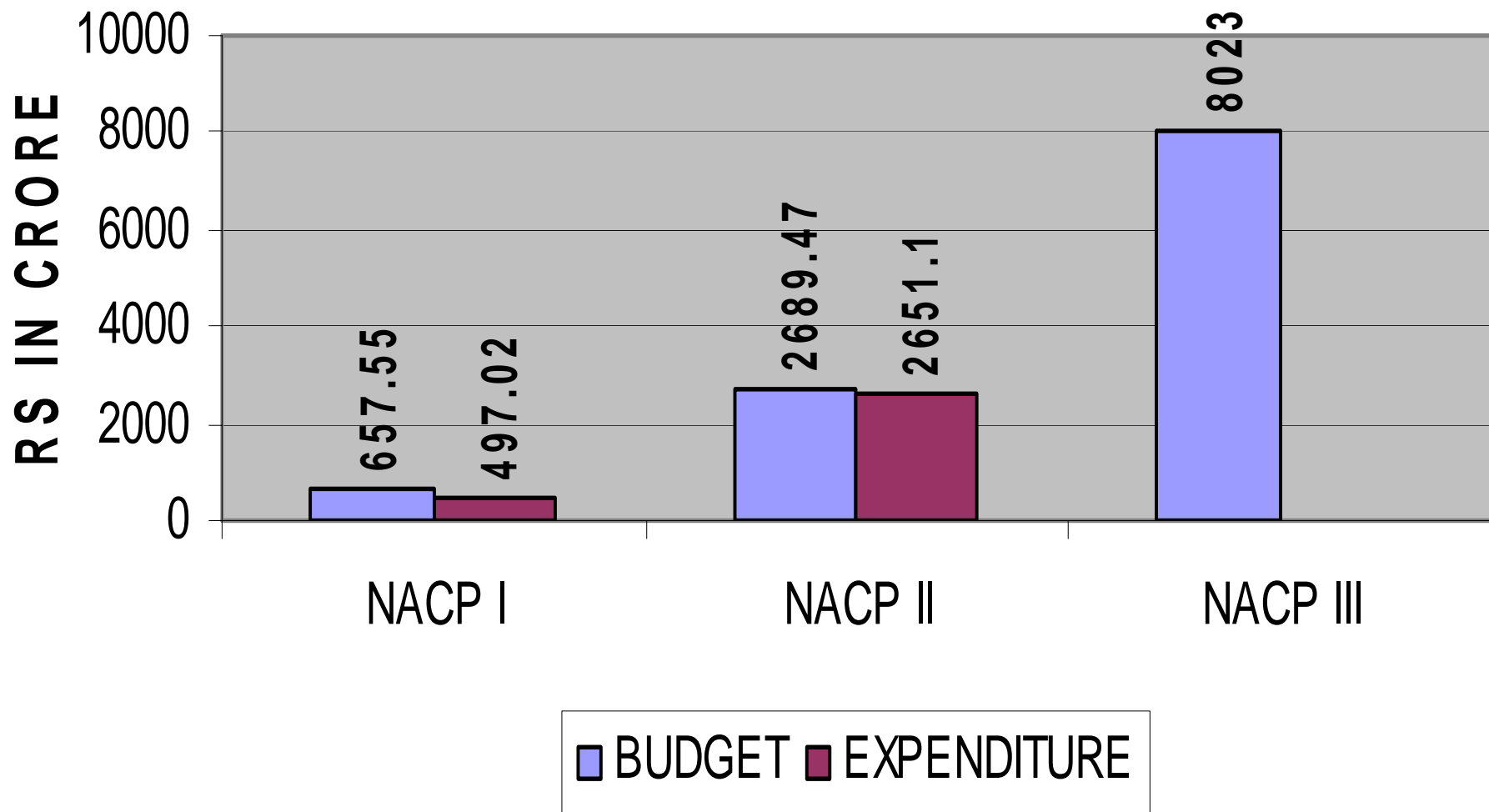
# INVESTMENT PLAN OF NACP III

<b>IV</b>	<b>Total Extra Budgetary</b>	<b>3562</b>
	DFID	<b>56</b>
	United States Govt.	<b>450</b>
	UN System	<b>252</b>
	Gates Foundation	<b>1425</b>
	Clinton Foundation	<b>113</b>
	Other Bilaterals	<b>63</b>
	European Union	<b>77</b>
	Other Foundations	<b>155</b>
	Other Sources	<b>971</b>
<b>V</b>	<b>Grand Total for NACP III</b>	<b>11585</b>

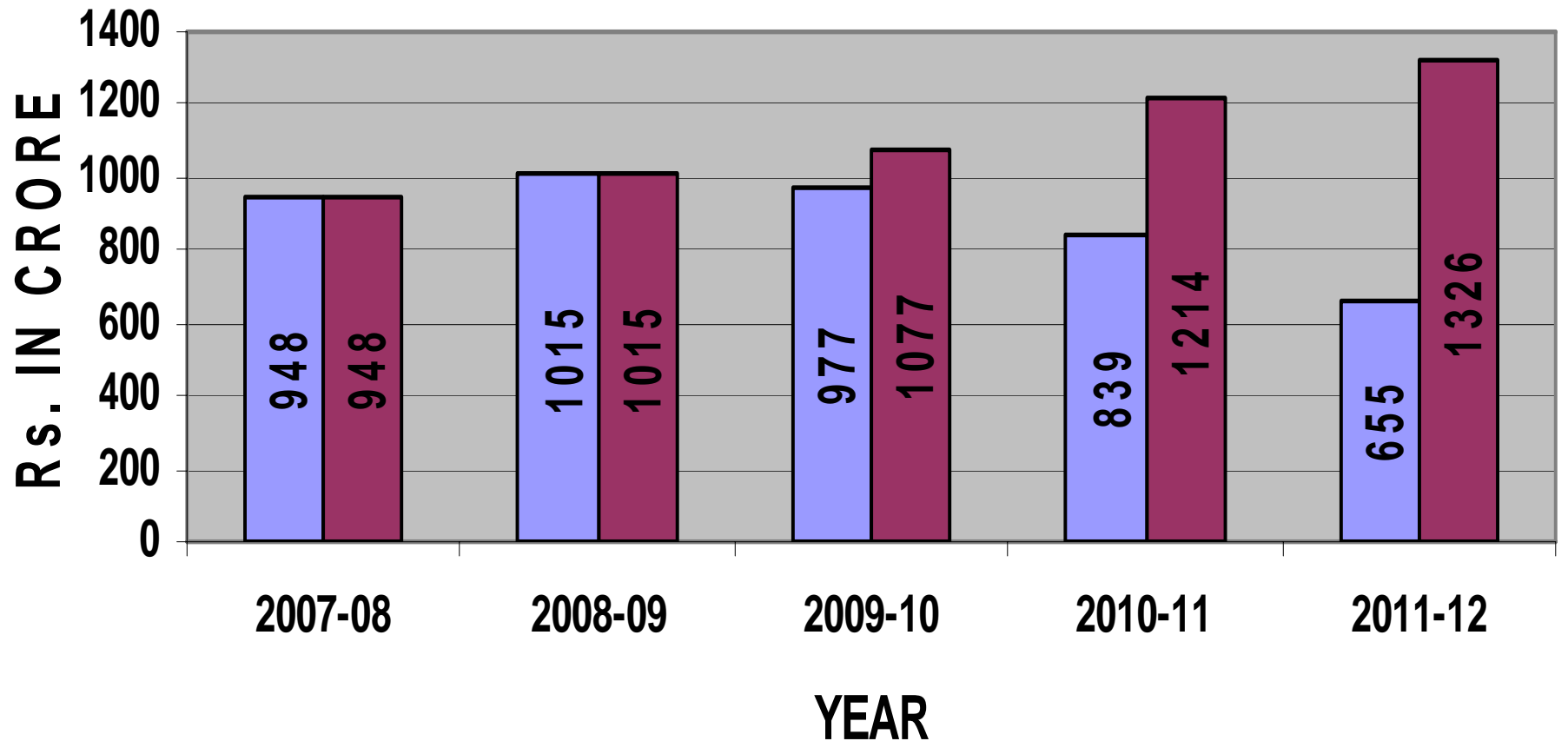
# EXPENDITURE MADE AGAINST BUDGET FOR EACH PLAN UNDER NATIONAL AIDS CONTROL PROGRAMME



# BUDGET & EXPENDITURE FOR EACH PHASE OF NACP



# REQUIREMENT OF FUNDS UNDER NACP III



■ CURRENT LEVEL PROPOSED ■ REQUIREMENT TO FILL RESOURCE GAP

THANK YOU